

# ETHIO Ageways

**HelpAge**

global network

## Drought-stricken Ethiopia Calls for Inclusive Emergency Response

Beginning last year, Ethiopia has been facing alarming food insecurity instigated by the impact of El Niño. Across the country, drought has impacted the lives of countless communities, leaving them in dire need of immediate emergency relief.

An estimated 10.5 million Ethiopians of all ages are struggling to bring in an income. They face health problems, have difficulty accessing water supplies and are not getting enough food to eat.

Ethiopia's Government is striving to mobilise support for its distressed population. In light of the severity of the situation, HelpAge International is joining the push and working hard towards addressing the needs of the most overlooked segment of the population - the older women and men of Ethiopia and their families.

Recent assessments undertaken by HelpAge revealed that older people need more attention than ever before. With entire communities affected, the traditional safety nets of mutual support have become unreliable.

*Sadire Amino, 78, from the drought affected district of Ziway Dugda and her granddaughter during an inter-*



Eric Marenco/HelpAge International/2016

**Continued on page 3**

## Message from the Country Director at HelpAge International - Ethiopia

Dear Readers

**Eid Mubarek to our Muslim colleagues!**

*I joined HelpAge on February 1<sup>st</sup> and I cannot imagine how fast the time has slipped away. The last five months has not been an easy learning period. I am still learning, but 'fixing the plane while flying it'. It is my pleasure to be part of such an organisation which is unique with its focus on the agenda of older people.*

Dear Colleagues,

*Please always think that this job is beyond your livelihood or means of living. Every day you come to office, think about the cause you are standing for. You are working for the most vulnerable and needy older women and men. The demographic trends, the vulnerabilities and myriad of challenges faced by older people all call for the need for a concerted action on ageing. Hence I cannot overemphasize that the issue we dealing with is so complex and calls for a thoughtful action. We all have great responsibilities as HelpAge staff and Ambassadors of Older people. We should keep on challenging our self and keep on asking – What did I contribute? Am I a voice for the voiceless? What are the things we should differently? Who else in the team can assist me? Who can buy-in our agenda? Etc etc It is only then we can transform HelpAge to the next level.*

*I thank you all for the support and welcoming you showed me over the last months and I wish you all the success in our joint effort.*

**Sisay Seyoum**  
Country Director

### Staff Need to Find How to Materialize Our Vision

In the coming couple years I would like to see HelpAge along with its partners and affiliates further the agenda of older people, improve coordination and networking for concerted action. In operational terms-

*We should map out and establish a strong alliance among organizations working for Older people and those focusing on other vulnerable groups such as women, youth, and children .*

*With the increasing urbanization, we shall build evidence basis on the problems of older people and also identify role to play in the roll out of the social protection policy.*

*We should increase our visibility and market out HelpAge's experience and capabilities as an organization - our work on integrated community based care and support for destitute elders; the income generating activities in urban slums; the experience on establishment of eye-care units at health facilities; the capacity building endeavors for health professionals on NCD; HIV/AIDS and Older care givers; the inter-generational platforms for experience exchange etc .....*

In addition, HelpAge in Ethiopia has to enhance its emergency response capacity through direct implementation and as well as mainstreaming of age and disability issues in humanitarian actions. Lastly Our programming decisions shall be informed by data, including the prioritization on geographic location- both for development and humanitarian response.

# Events

## **01 February 2016**

HelpAge's new Country Director, Mr Sisay Seyoum, took on his role.

## **08 March 2016**

International Women's Day was observed.

## **31 March 2016**

HelpAge closed accounts for the fiscal year 2015/16.

## **01 April 2016**

HelpAge obtained a micro grant to start rapid response to the drought emergency in Grar Jarso and Ziway Dugda districts from its donor Age International.

## **04 April 2016**

HelpAge successfully completed the renewal of its license and registration for the upcoming three years

## **07 April 2016**

International Health Day was observed.

## **28 April 2016**

HelpAge staged its all staff meeting at the Yaya Village in Sululta to conduct annual review and planning as well as team building exercises.

The Ministry of Labour and Social Affairs staged a workshop on the topic of social corporate responsibility for representatives of the private sector.

## **03 – 07 May 2016**

HelpAge's Global Conference on Social Protection and Health was held in Johannesburg, South Africa.

## **10 – 12 May 2016**

HelpAge conducted the ALERT Phase I (Emergency Preparedness) Training for country office and partners staff at the Friendship International Hotel in Addis Ababa.

## **9 – 14 May 2016**

HelpAge held its Regional Review and Planning Workshop Health Conference in Maputo, Mozambique.

## **16 – 20 May 2016**

HelpAge hosted the visit of senior executives from Age International, HelpAge USA and HelpAge's head office which aimed at familiarisation of country office's operations, on-going drought situation and the fund-raising environment.

## **01 May 2016**

HelpAge commenced its operation on the 'Integrated response to protect and restore livelihoods of drought affected people (older women and men and other vulnerable community groups) in four districts of Oromia region' through a grant from UNOCHA

## **01 June 2016**

HelpAge officially commenced the operations for the IRC/ECHO funded project 'Emergency WaSH Response in Zeway Dudga and Girar Jarso drought affected districts of Oromia Regional State' and similarly, for the NAK/HAD funded project 'Reducing older people and their families' vulnerability to disasters through livelihoods support and resilience building in three districts of Borena Zone, Oromia region'.

## **14 – 20 June 2016**

HelpAge was invited to participate in Irish Aid's AFFORD Phase II Proposal Development Workshop in Pretoria, South Africa.

## **15 June 2016**

International World Elder Abuse Day 2016 was observed.

## **20 – 24 June 2016**

HelpAge held the Regional Annual Review and Planning Workshop on the 'Better Health Project' in Maputo, Mozambique.

## **21 – 23 June 2016**

HelpAge presented on social protection pilot scheme in Ethiopia at the International Federation on Ageing's 13<sup>th</sup> Global Conference, in Brisbane, Australia.

Note: \*Exchange Rate: USD 1 = ETB 21.50

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# Drought-stricken Ethiopia calls for inclusive emergency response

Moreover, the high emotional impact of the drought on older women and men stretches far beyond the adverse effects of food insecurity, leaving them with tormenting feelings of loneliness, nervousness and worthlessness.

## Addressing Older Ethiopians' Needs in the Drought

To address the needs of older people, HelpAge has secured funding from the United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA), Age International and Humanitarian and Civil Protection (ECHO) through International Rescue Committee for integrated livelihood protection and restoration and WASH response interventions. With this, HelpAge will reach over 33,000 vulnerable households across over 20 communities in four districts of the Oromia region.

Partnering with the Rift Valley Women and Children Development Organization and Sewasewe Genet Charity and Development Organization, over 150,000 people of all ages will receive support through tailored and context specific interventions:

- **Livelihoods:** HelpAge will provide goats, sheep, farming tools and seeds, coupled with relevant training to help older people secure a reliable income.
- **Health:** HelpAge will link supply vulnerable and malnourished older people and children with specially packed food rations to boost nutrition and overall health.
- **Water:** To regain their access to safe and clean water, HelpAge will get dysfunctional water sources working again, and promote purification and hygiene practices.

An older man who was a recipient of goats to reestablish his livelihood with the Age International grant said: "Before, the days were long, and I had nothing to do. I felt like a burden to my family as we endured the tormenting drought. With my goats, I feel needed and like a contributor to my household in my old age. This makes me happy and confident," he said.

## Efforts to Scale Up Age-friendly Interventions Across Ethiopia

Building on the work to reach the disregarded 60+ generation, HelpAge's Ethiopia office hosted Kate Bunting, Chief Executive at HelpAge USA, Tony Hopkins, Interim Director of Fundraising at HelpAge International, and Chris Roles, Managing Director at Age International in May 2016. They travelled to the Rift Valley to learn firsthand of the dire situation drought-affected communities face, speaking with older men and women about the impact it is having.

"Droughts aren't uncommon here. When they did happen, they never lasted longer than a year, and we always managed to recover," said Galgalo Aweti, 90,

from Cheffe Jilla village in the Ziway Dugda district. "This drought has been going on continuously. Recovery seems impossible."

More funds need to be mobilised to help benefit thousands more people like Galgalo in other severely hit parts of the country.

## All Humanitarian Agencies Must Take Account of the Needs of Older People

HelpAge is striving to respond to this drought emergency in Ethiopia, taking action to help save the lives of many older people. However, the recent occurrence of El Nina induced flood emergency is aggravating the humanitarian needs across the country and escalating the number of Ethiopians affected.

We call on the concerted efforts of all humanitarian agencies to make sure their interventions amid the drought and flood are inclusive of older people's needs - a vulnerable group that must not be neglected.

**Humanitarian agencies can also sign our Inclusion Charter to commit to impartial emergency responses that reach the most vulnerable.**



**"In my culture, it was a norm to support people hit by hard times like these. If a family loses all their livestock or has a harvest fail, the members would provide livestock and food to support them. With the drought affecting everyone, how can we support each other? Everyone is affected and struggling to survive."**

*Ararso Gebeyew, 68,  
an older farmer from Garar Jarso,  
stands in front of an empty food store as describes  
the negative impacts of the drought .*

***For highlights on recent assessment on the I impacts of the drought emergency on older people's lives on to page 7***

# Saving Lives: Older People Care & Support Centres

## Older People and their Challenges

- Older people comprise an estimated 5% of the more than 90 million population of the country.
- Continuous breakdown of informal safety nets and coping mechanism due to factors such as poverty, urbanisation, chronic food insecurity, rising prices, conflict, natural disasters and the HIV epidemic.
- Lack of secure incomes due to formal pension schemes covering only former civil servants and limited employment opportunities.
- 75% of older people are faced with living their last days in extreme poverty conditions, particularly in urban settings.
- More than 88% of homeless older people and 66% of those living at home do not have enough to eat and more than 79% of older people only eat once a day.
- 93% of all older people have no bath or shower. 88% of homeless older people get water by begging and 71% use rivers or drains for washing.
- 29% do not wash. 82% of homeless people live around churches and mosques, the rest live on the street. 78% of all older people have chronic health problems.
- 40—50% of older people are the sole guardians of orphans and vulnerable children.

## “Dignity for Destitute & Homeless Older People in Ethiopia” Project

HelpAge works with 7 older people care and support focused local organisations in Addis Ababa and Dire Dawa City Administrations. Over 800 needy older people receive live saving and age friendly services in day care centres, shelters and home care services.

- To reduction of the risk of malnutrition, depression and hygiene related diseases, HelpAge provides food rations to those who cook at home and share it with their grandchildren, hot meals at feeding centres, clothing, and social activities at events, sanitation materials and medical services at the day care centres.
- Increased the purchasing ability for necessities, cash transfers are provided to older people. This enables them and their dependents to cover their basic needs for such things as food, medicines, rent, water/electric bills, and schooling expenses for their grandchildren.

Tsehay, 65, Older Carer



*This is Tsehay Kebede, 65, from Dire Dawa with her grandchildren Hermella (R), 11, and Eleni, 7. Tsehay and her husband, Zewdu, 75, are two of 100 older people supported by the Assegedech Asfaw Aid for the Aged and Rehabilitation Centre.*

Tsehay has been raising them since they were infants. Her daughter left them behind when she moved away. She never visits and rarely contacts them.

Tsehay, 65, and Zewdu live in a one room rented kebele house. Zewdu receives a pension of ETB 500\* (USD 23.26). Which they use to cover their monthly expenses like food, rent, water, utility bills, health care, soap and school fees and materials. It is barely enough to get them, especially as they are raising two young children, but they make it work. They try give Hermella and Eleni the best upbringing they can with special focus on their education.

Tsehay and her husband were registered to receive a cash and in-kind support from Assesgedech Asfaw's centre. This very helpful to Tsehay. It means she receives an additional monthly ETB 240\* (USD 11.16), school materials like notebooks, uniforms and pens for her girls, free health care, food rations in the form of wheat and noodles and sanitation products like soap and detergent.

“I thank God for the support from the centre. It is the only support, Zewdu and I have. Without it, life would be very difficult, not that it is easy with prices for food going up every day. In addition to allowing us cover our basic needs, we can also afford a tutor for Hermella. It is important that the girls educated well so they can get good jobs when they grow up and don't have to endure lives in poverty. I fear for what would happen to the girls if something should happen to Zewdu and I. We both are not the young anymore and our health is not the best. But we will hang on for as long as we possibly can.”

# Saving Lives: Older People Care & Support Centres

## Food on Foot Project

### The Story of Gete Woldetsadik, 80 years old

*Gete is one of the 180 older people benefitting from the services of Community Based Integrated and Sustainable Development Organization (CBISDO) in Addis Ababa*

"I am originally from the country side as a young woman. I left my first husband and decided to move to the big city – Addis Ababa. We young people from the country believed the city was the golden place; the place where we believed all our dreams and wishes would come true."



"I remarried in Addis Ababa, but we never had any children. My husband used to do daily labour to provide for us. He died over ten years ago. I have many brothers, nephews and nieces living here in Addis Ababa. They live in different parts of the city. They cannot support me because they don't have the money to spare."

"When I used to be younger and more able bodied I used to run a small petty trade stand in Merkato (the largest market in the whole of Africa). In my stall, I used to sell vegetables such tomatoes, onions and potatoes. But the income I got from that and my general situation wasn't enough for me to make ends meet. It was like a calling when I heard of CBISDO in my neighborhood. I didn't hesitate to register as soon as possible."

"I was one of the first beneficiaries of CBISDO, for over 17 years. Many of my peers who were getting support from CBISDO have passed on; I am one of the very few left. I used to be very happy when I was able to go to centre. Back when I used to go, the older women would sit together and socialize cleaning the impurities from different foods which were to be used in the daily lunch preparations. This included lentils, sliced peas, peppers, etc. Once we were done, the hired cooks of the centre would prepare hot meals freshly every day from Monday to Friday for over 100 older people. Then at 1pm, the older members of the centre would gather in the hall, and be served the hot meal on the menu that day which would be steamed vegetables, a soup with bread or injera (traditional flat bread) with stew. We would also get a tea and twice a week, coffee ceremony was held and we would get a

snack on boiled black eyed peas. Every time before, the older people would start eating we would say a prayer led by one of the older men. Those were the good old days, all women sitting together, working and chatting – passing time with enjoyment. Now it has been 2 years since have become unable to care for myself."

"I also had surgery on my eyes thanks to CBISDO. It was my 'food on foot, social worker who took me a little more than three years ago. She brought me hence and forth to the Menelik Hospital. I was so excited to regain my sight, but unlucky for me it wasn't long before my legs failed me."

"I have been bound to the walls of my home for the past two years. I remember all of the sudden one day I was unable to walk. I can move my leg that is no problem. But I am unable to actually walk and stand up properly. There is no pain in my legs. I just can't use them properly. That really breaks my heart. Regardless, I still try to do things myself. I try to wash my own clothes but it has been very difficult for the past two years."

"I get up and go outside to get the morning sun. Then I come back in to my house, make my bed and clean. If I have food, usually something given to me by my neighbors, I eat a little breakfast to keep me going until my lunch is delivered. My neighbors are good people. They always think about me, remembering me when they have meals and giving me a small share to keep me going throughout the day."

"My worst experience is hard to define; there are many problems people face in this world. As days go by after a bad experience, one can forgive and forget and eventually move on. Then before you know it you will experience another bad experience that will outshine the last, but again you move on. Life goes on regardless of the experiences we make."

"I am overly grateful to HelpAge and its donors for the tremendous support they have given me in my old age. I am more confident, independent and able to dream of fulfilling not only my basic needs and giving my grandchildren a proper upbringing, but also building a safe space to live in. Thank you for giving me back my pride and hope."



# Envisioning an Ethiopia with Social Protection

When one thinks of social security of citizens, one's mind will normally drift off to the developed world. Developed countries like the USA or the ones comprising the European Union have had formal social security or social protection schemes such as old age pensions, unemployment welfare, child support or health insurance, in place for a long time. These type of schemes are decreed by their government's in policies and programmes to ensure the social and economic protection, security and social justice of its citizens. With economic growth, many developing countries, especially those where HelpAge has a presence, are exerting efforts to follow this good practice to avert chronic poverty. So, where does Ethiopia stand in relation to Social Protection?

## The Journey Towards Social Protection in Ethiopia

Since 2008, the National Social Protection Platform led by the Ministry of Labour and Social Affairs (MoLSA) has been meeting to regularly deliberate on the need for a social protection policy. Comprised of government sector offices, HelpAge, the World Bank, UNICEF and other major development actors the platform commenced to draft a policy. Concurrently, the platform gathered evidence to support its claim for the need of the policy by piloting a cash transfer programme in Tigray region.

After years of lobbying, numerous workshops and gathering and sharing evidence of the cash transfer pilot programme, the platform reaped the fruit of their hard work. The Council of Ministers finally gave their approval of the first Ethiopian Social Protection Policy in November 2014. Moreover, the cash transfer pilot programme was expanded to two further regions.

But there remained a lot more to be done. How would this be implemented? Where would the sizeable funding come from? With these questions in mind, the platform occupied itself with developing an implementation strategy for the newly approved policy. At present, as the draft strategy is reaching completion with launching coming up within the next couple of months. Concurrently, the NSPP is beginning works on developing a costed action plan .

## The Role of HelpAge

As a leading expert on issues of social protection worldwide, HelpAge is amongst the few international non-governmental organisations on the NSPP.

HelpAge has invested highly on sharing the benefits of social protection by sponsoring top government officials and parliamentarians to attend the foremost workshops and training on the topic abroad and co-organised different in-country sensitisation workshops with MoLSA for top government officials and civil society organizations from different sectors.

In coordination with the regional government of Tigray, HelpAge and UNICEF funded the implementa-

tion of the cash transfer pilot programme in three districts of the Tigray region whereby over 3,000 vulnerable households of the community received a regular income to support them cover their basic necessities. The unconditional monthly cash transfer amounted to ETB 155\* (USD 69.77).

The evaluation of the pilot indicated that nearly 70% of the most vulnerable members of the communities were people 60 years and above. And most importantly, the support enabled them to cover their basic needs like food and healthcare, set aside savings and increased continued school enrollment of the children under their care.

Using in-country and global evidence, HelpAge vigorously preached on the need for inclusion of older people throughout the development process.

These tireless efforts have ensured that older people are explicitly identified throughout this and other policies and programmes. For instance, MoLSA has stated that poor older people will be targeted through the second phase of the safety net programmes. This time around in addition to the need of the rural older people that of urban older people will be addressed. Older people over 65 years of age will be covered under the unconditional safety net, whilst the ones younger and able to work will be given livelihood and employment support. In Addis Ababa, older people's needs are to be covered through a special 'older people package'.

Older peoples' issues are getting more attention than ever before. The efforts of HelpAge in coordination with the platform members and its partners seem promising, however, the journey is not over yet.

With the current stage of policy promotion and strategy development, HelpAge vows to eagerly continue lobbying for and following up on the inclusion of older people in all aspects of the country's development arena.



Erma Mentenot Hinz/HelpAge International/2015

***“I had been living the worst life specially since the death of my husband, I am now receiving my payment every month which I can buy wheat and other basic necessities such as soap, salt and oil.”***

*Halife Gebrehiwot, 75 years,  
Hinatlo Wajirat district,  
Tigray Region*

# Report on Drought Emergency & Older People

Ethiopia is experiencing the worst drought and food insecurity crisis in decades. The fact that 10.2 million (December 2015) people are affected drought situation is well known amongst humanitarian actors. This figure excludes the 7.9 million people under the Protective Safety Net Programme (PSNP).

A less known fact is how many older people and people with limited mobility are affected. Most government led multi-sector and agency assessments have inadequately addressed the impact of drought on older people and people with limited mobility and therefore a more comprehensive analysis was required to ensure the response caters to their needs.

It is estimated that **1,020,000 million or 8 - 10%** of those affected constitute of **older people and people with limited access**. And the greater proportion of these are older women.

**HelpAge International conducted market and trader assessment to determine the extent and magnitude of food and nutritional insecurity among drought affected older people and persons with limited access in the districts of Adami Tullu Jidda Kombolcha and Ziway Dugda, Oromia Region.**

The assessment calls for urgent humanitarian action to save lives of millions of older people and people with limited mobility who have lost food, income and livelihoods as a result of massive drought.

## The Findings

- Older people led households struggle with an increased food gap and limited access as a result of declined local production and productivity, declining income (e.g. loss of labour) and economic shocks (increase in prices of essential commodities).
  - The average overall household dietary diversity has sharply declined from nine (9) to five (5) points (56% decline).
- The most significant declines are observed in farm, livestock and fishing productions.
  - Livelihood assets that could be used to restart normal activities have been depleted and most of them are worn out.
- Older women and persons with reduced mobility suffer massive burden, despite of their body conditions, having to walk for longer distances to find firewood, water and food for their families and livestock.
  - Older women are more likely to be absent during distributions, which is particularly problematic for older women-headed households.
  - Older people families have inadequate cooking fuel to prepare their daily meals/ food provided through Government led PSNP.
- There is a notable increase in the prices of staples foods (cereals, pulses and tubers) and refined products with an average increase of 19% and 20%, respectively.
  - Reduced local market functionality compounds the already inherent challenges of older people and people with disabilities for food access and increases their dependency on others for access to food and livelihood asset supply.

## The Recommendations

- Urgent need for procurement of certified drought **resistant seeds** to protect depletion of livelihood assets and minimize increased food aid needs that are already stretched among older people and people with reduced mobility.
- **Restocking** intervention on small ruminants through revolving fund approach could be explored in already existing community structures so long as these structures include the older people, PLWDs and their families.
- **Cash intervention (unconditional)** targeting highly vulnerable, older people and PLWD headed households. ETB 200\* (USD 9.30) per month per individual for food and other essential services. This amount will be sufficient enough for households with limited access to markets to meet the minimum dietary requirements and associated costs (transport, milling and fuel).
- Provision of **energy saving cooking stoves** to drought affected population to minimise effects on the already fragile environment.
- Appropriate **support to traders** for additional supply if a cash (or voucher) programme is implemented. Most traders are willing to engage in cash transfer programming with a fee which is slightly higher than the savings and credit company charge which is negotiable.
- **Supplementary feeding programme** or enhance provision of nutrition rich foods to severely malnourished older people to prevent death and food deficiency related diseases.

# Reducing Poverty by Improving Health for Older Women and Men in Ethiopia

## The Better Health

Imagine you are an older person. Imagine you live in poverty, although you labored hard your whole life to raise your children. Your health is poor. Day by day your vision diminishes more and more, until it is no more. You only have limited resources, allowing to just cover basic things like food. There are no health facilities close by that can provide the services you need. The ones that can are private and too expensive for you to afford. You need help for anything and everything, even using the toilet. You feel helpless and like a burden.

This is how a destitute older person blinded by cataract due their age would feel.

### The Gap in Existent Health Systems

In Ethiopia, there are gaps in HIV, health and care service provision for older women and men as a result of skill gaps and attitudes amongst service providers. Very often treatable conditions worsen and are more damaging for individuals and their families than needs to be the case.

- *Limited emphasis to Non-communicable Diseases (NCDs) account for 34% of deaths and are expected to highly increase by 2030.*
- *Where existent, appropriate policy lacks proper implementation to ensure access to the health services.*
- *No reference to geriatric health issues and care in training curricula ; which cascades down the health system.*
- *Limited or no home-based care at community level, specifically for older women and men.*
- *Gap in accountability of local health service providers, with little voice for vulnerable older people.*

With an inclusive health system in place, older women and men maintain their independence, dignity and health and minimise the financial burden of ill-health to them and their families. In order to facilitate such a system for the ageing population in the country, the Government, CSOs and communities need help in coming together in productive dialogue that can lead to change at policy and implementation levels, including the development of community level feedback mechanisms.

### HelpAge's Response

It was in October 2014 that HelpAge International in partnership with 2 civil society partners and 28 government health facilities set out on 3-year intervention best known as 'the better health project'. The DFID and Age International project funded project aims to improve the availability of health services for older people in Oromia Region, Southern Nations and Nationalities Peoples' Region and Addis Ababa City Administration.

**Table 1: Number of Health Staff, Community and Home-Based Care Workers Trained on Age-Appropriate Health & HIV Services**

	Type of training (Location)	Qty.
<b>1.</b>	<b>Health staff training (Oromia &amp; SNNPR)</b>	
A.	Ophthalmic nurses	50
B	Integrated eye care workers (Specialisation in TT surgery)	53
C	Geriatric and NCD nurses	210
<b>Total</b>		<b>313</b>
<b>2.</b>	<b>Community and home-based care workers (Addis Ababa)</b>	
A	Government health extension workers on NCD & HIV	150
B	Community volunteers on home-based care & peer education	150
<b>Total</b>		<b>300</b>

### ACHIEVEMENT 1



Erna Mentenot Hintz/HelpAge International/2016

**Meet Hibist Teshome, 26, from Mechara Hospital, West Hareghe, Oromia**

*Graduated top of her class from the one year training in ophthalmic nursing at Yirgalem Hospital Nursing School (SNNP)*

"I had the opportunity to learn at a highly acclaimed college in ophthalmology from leading experts in eye care with direct and intensive practice in the field."

"One of my favorite memories that I take away from the training is working with the community. I remember this older woman who came for surgery, completely blind. The day after her operation when the eye patch was removed, she started laughing in disbelief upon the first perception of light . She was so overjoyed and her verbal gratitude did not end. It is a blessed feeling, giving something back to a person that they thought was lost forever. I am honored to be one of the few people in this country who can do this. I look forward to the work that awaits me."

"I would like to thank HelpAge on behalf of my colleague, hospital and myself for this wonderful opportunity to grow professionally. And on behalf of my community I forward appreciation for bringing the access of basic eye care into their grasp. My colleague and I will be the only ones with these skills where I am from. Therefore, I recommend to scale up and continue this invaluable training programme to strengthen the manpower available to address the widely spread need for eye care."





# Reducing Poverty by Improving Health for Older Women and Men in Ethiopia

## Health's Major Achievements in 2014 to 2016

### ACHIEVEMENT 2

#### Technical and Policy Support for Greater Access to Social Protection and Health Entitlements

Built evidence base for strengthened advocacy interventions on social protection through impact documentation of:

- The cash transfer pilot project in Tigray Regional State
- Older people focused income generation activities in Addis Ababa and Hawassa, SNNPR

### ACHIEVEMENT 3

#### Older People Trained to Locally Monitor and Advocate for Access to Health, HIV and Care Services and Entitlements

Trained 196 older people on older citizen monitoring (OCM) from 28 district level older people associations (OPAs).

### ACHIEVEMENT 4

**Table 2: Number of Older People who Received Home-Based Care Services**

Types of services provided	No. of Older Recipients		
	M	F	T
Weekly home to home care	730	2,270	3,000
Awareness raising education	893	2,401	3,294
Psychosocial support	677	1,379	2,056
Referral for VCT	204	362	566
HIV testing	128	217	345
Referrals	682	1,709	2,391
Priority in service provision	493	774	1,267
Free medical service	129	312	441
<b>Total</b>	<b>3936</b>	<b>9,424</b>	<b>13,360</b>

### ACHIEVEMENT 5

**Table 3: Number of People who Benefitted from the Provision of Health Outreach Services**

Services provided	Outreach Service Sites			Total
	Oromia	SNNPR	A.A.	
Sensitisation on NCDs, eye care and HIV & AIDS	12,000	5,500	7,600	25,100
Cataract surgery	368	243	123	734
TT/minor surgery	290	203	79	572
Provision eye treatment & medicines	2,400	1,206	251	3,857
Screening for refractive error	650	325	960	1,935
Provision of spectacles	272	200	579	1,051
Referral for further eye care treatment	378	189	386	953
Medical treatment	5,500	2,750	1,400	9,650
<b>Grand Total</b>	<b>21,858</b>	<b>10,616</b>	<b>11,378</b>	<b>43, 852</b>

### The Joy of Vision: Testimonies from after Surgery

*Shallew Gelete, 63, is a farmer like his mother, Gudetu Ideho, 80, was. As an only child he adores his mother and her zest and help around the farm and the household was invaluable. But when she became blind, it was not only Gudetu's life that became unbearable and helpless. Shallew was heartbroken not being to give her what she needed.*

"There would have been no way for me to afford the operation. I am ever grateful that HelpAge has brought the eye care doctors to us to revive the sight of poor older people. This free service is invaluable to the community, the families and older people within it. Usually older people are overlooked because of their age. I feel blessed and I thank HelpAge for enabling me to give my mother her lost sight back."



Erna Mentsebot Himz/HelpAge International/2016

### ACHIEVEMENT 6

#### Age Demands Action (ADA) Campaigns on HIV and Social Protection Policies

Over 28,000 were reached with ageing messages.



Erna Mentsebot Himz/HelpAge International/2016

*Birhanu Hailu, 65 years, is a former soldier who lives alone. He suffered many severe injuries due to blindness coupled with torture of reliving gruesome war experiences in the dark*

"I feel liberated and independent again. I am happy and ever grateful."



Erna Mentsebot Himz/HelpAge International/2016

*The 1st batch graduating ophthalmic nurses on the day of their graduation at Yirgalem Hospital.*

# Introducing the Age Demands Action (ADA): A Older People-Led Campaign

Age Demands Action (ADA) was launched in 2007 in 27 countries. The HelpAge initiated campaign challenges age discrimination and seeks an improvement in living standards for older people. Older people are at the heart of ADA since they are best suited to become activists on ageing issues and are passionate advocates for change in their countries.

Since it started, Age Demands Action has created a sustainable environment where older people lead in bringing about tangible changes in their country and globally.

Initially, the focal day of the campaign was the International Day of Older Persons on 01 October where older people take part in various awareness-raising activities and meet governments.

As of 2012, ADA has become a year round campaign. Several campaign action days ('spikes') have been selected, giving older people an opportunity to remind their governments about their promises.

## Important Campaign Action Days

### 01 October

International Day of Older Persons (IDOP)

### 13 October

International Disaster Risk Reduction Day

### 03 December

World AIDS Day

### 08 March

World Women's Day

### 07 April

World Health Day

### 15 June

World Elder Abuse Awareness Day (WEAAD)

Since 2007, the campaign has rapidly grown in 70 countries worldwide, with many countries seeing policy changes.

The campaign also mobilises a significant number of older people to campaign for their inclusion in decision making. In that regard, the ADA campaign offers a great opportunity for gathering petition signatures which contribute to the global push for a UN Convention on Older Persons' Rights. Worldwide, over 300,000 signatures have been collected and presented to the UN Open Ended Working Group which, for the past five years, meets in annually July .

Older people also use the media worldwide to reach millions of people raising their awareness on their issues. Older people have the potential to benefit from new or improved policies fought by ADA campaigners.

## ADA in Ethiopia

The ADA delegation is comprised of 10 members (4 women and 6 men). And over the years, they have met with 20 ministries and institutions to discuss older people's issues and how they can be addressed appropriately, making paramount achievements.

Major UN occasions such as the IDOP, and WEAAD as well as Action 2015 campaigns have been vibrantly celebrated at various levels.

And most importantly, broader attention has been put on the inclusion of the 60+ generations in countrywide development efforts such as inclusion in action plans, budgets, involvement in events and assignment of dedicated focal points.

The campaign in Ethiopia has also been able to gather and contribute over 18,000 petition signatures asking for a convention for older people. The delegates coordinated this effort through the Addis Ababa level network of older people associations, which is one of the regional level OPA members of the Ethiopian Elders and Pensioners National Association (EPPNA). Working with EPPNA, the ADA delegates envision to scale up the gathering of petitions to the other regions of the country.



Ena Menemmi/HelpAge International/2012



# UNITED NATIONS PRINCIPLES FOR OLDER PERSONS

- 1 Older persons should have access to adequate food, water, shelter, clothing and health care through the provision of income, family and community support and self-help.
- 2 Older persons should have the opportunity to work or to have access to other income-generating opportunities.
- 3 Older persons should be able to participate in determining when and at the pace withdrawal from the labor force takes place.
- 4 Older persons should have access to appropriate educational and training programmes.
- 5 Older people should be able to live in environments that are safe and

## INDEPENDENCE

## PARTICIPATION

- 7 Older persons should remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their well-being and share their knowledge and skills with the younger generations.
- 8 Older persons should be able to seek and develop opportunities for service to the community and to serve as volunteers in positions appropriate to their interest and capabilities.
- 9 Older persons should be able to form movements or associations of older persons.

- 10 Older persons should benefit from family and community care and protection in accordance with each society's system of cultural values.
- 11 Older persons should have access to health care to help them to maintain or regain the optimum level of physical, mental and emotional well-being and to prevent or delay the onset of illness.
- 12 Older persons should have access to social and legal services to enhance their autonomy, protection and care.
- 13 Older persons should be able to utilise appropriate levels of institutional care providing protection, rehabilitation, and social and mental stimulation in a humane and secure environment.
- 14 Older persons should be able to enjoy human rights and fundamental freedoms when residing in any shelter, care or treatment facility, including full respect for their dignity, beliefs, needs and privacy and for the right to make decisions about their care and quality of their lives.

## CARE

## SELF-FULFILMENT

- 15 Older persons should be able to pursue opportunities for the full development of their potential.
- 16 Older persons should have access to educational, cultural, spiritual and recreational resources of society.

- 17 Older persons should be able to live in dignity and security and to be able to be free of exploitation and physical or mental abuse.
- 18 Older persons should be treated fairly regardless of age, gender, racial or ethnic background, disability or other status, and be valued independently of their economic contribution.

## DIGNITY

# Staff updates

## Some Organisational Facts

- HelpAge International has been working in Ethiopia since 1992 and will have its 25<sup>th</sup> year jubilee in 2017.
- It operates under 4 thematic areas: Secure Incomes, Health and Wellbeing, Emergency and DRM and Global/Local Movement
- HelpAge works in close partnership with 2 affiliates, 20 local non-governmental organizations and several government ministries and line departments.
- HelpAge runs its projects in two regions regional states and 2 city administrations.
- HelpAge comprises of a country office and 3 field coordination offices which are located in Borena, Fiche and Ziway
- HelpAge has 24 staff (6 women) in total with 14 (2 women) programme and 10 (4 women) support staff. At country office level, there are 19 staff (6 women). At field level, there are 5.
- There are seven on-going project funded by 8 donors..



Markos Bekechew/HelpAge International/2016

A group photo of HelpAge Ethiopia's country office staff taken during the all staff meeting at the Yaya Village in Sululta on 28 April 2016.

## Farewell

**Ikunda Mtenga,**  
*AU Policy Advisor*

## Welcome

**Tsegaye Tadesse,**  
*Senior Project Officer – Yabello*

**Nigussu Gebru,**  
*Finance & Admin Officer – Yabello*

**Mulualem Gurmessa,**  
*Emergency Project Officer – Fiche*

**Abay Gena,**  
*WASH Senior Project Officer – Fiche*

**Abey Mezgebu,**  
*Public Health Officer – Fiche*

**Semeneh Mekonnen,**  
*Finance & Admin Officer – Fiche*

**Daniel Tsegaye,**  
*Logistic Support Officer – Fiche*

**Tesfaye Mekonnen,**  
*WASH Project Coordinator – Ziway*

**Adaba Mekonnen,**  
*Public Health Officer – Ziway*

**Teferi Begna,**  
*Finance & Admin Officer – Ziway*

**Tariku Tadiwos,**  
*Logistic Support Officer – Ziway*

# HelpAge

global network

HelpAge International helps older people to overcome poverty, so that they can lead dignified, secure, active and healthy lives. Our work in over 70 countries is strengthened through our global network of like-minded organisations – the only one of its kind in the world.

For further information on our work, go to

[www.helpage.org](http://www.helpage.org)

Feedback from readers are welcome.  
Please forward your comments to:

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Kindly include your name, organisation (if any) & contact details.

### Recent Rapid Emergency Assessment Reports

- ◆ **Rapid Water Sanitation and Hygiene Assessment in Gar Jarso district, North Shewa and Ziway Dugda district, East Shewa, Oromia Region; (April 2016)**
- ◆ **Rapid Nutrition and Needs Assessment for Older People in Adami Tullu Jido Kombolcha, East Shewa, Oromia Region; (February 2016)**
- ◆ **Food Security, Livelihood, Market and Trader Assessment in Gar Jarso district, North Shewa and Adami Tullu Jidda Kombolcha district, East Shewa, Oromia Region; (January 2016)**

E-copies can be requested via email provided on the right .