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Editorial

Not even the most febrile minds could have imagined what the world has gone through in the last six months. The pandemic has affected all spheres of life, from our daily routines to the ways we envision the world. From appreciating our families and communities to expanding the commitment to preserve nature. This period will be remembered for decades to come as a watershed in history.

Despite pleas that “we are all in this together”, COVID-19 has often highlighted the inequalities within and among countries. The pandemic has also stimulated discussion about how a post-pandemic future might begin to reduce inequalities. We could argue that inequality in old age is a measure of success or failure of any society.

The UN Secretary General said recently that “inequality defines our time” and called for a new social contract to address it. And older people must be part of a new social contract in an intergenerational perspective.

The pandemic brought mutual support, empathy, community solidarity and global collaboration. It also projected the shadows of self-interested, individualistic thinking, propagating fear as a way to gain political power. In short, the pandemic has brought to the surface the best and the worst of humanity.

We bet for the best. We bet for a better world, where the voice, dignity and wellbeing of older people are preserved. Why shouldn’t we? Older people were the most affected by the Covid-19 virus, but at the same time they have shown themselves to be a pillar of resilience within their families and communities. Can we imagine a world that negates discrimination, aims at equity in the distribution of wealth and promotes intergenerational solidarity? Of course we can, and we do!

Eduardo Klien
Regional Director
Asia-Pacific Region

COVID-19 pandemic in review

Regional

First discovered in Wuhan, Hubei Province of China in December 2019, the new coronavirus has spread throughout the world. In February 2020, the World Health Organization (WHO) announced “COVID-19” as the official name for the disease caused by the new coronavirus and declared it a ‘pandemic’ one month later. Since then, this new disease has ranked as the most worrying threat facing the world’s population. In its early stage, COVID-19 represented a specific danger for older people according to initial research in China, showing a higher mortality rate in people aged 70 and over.

As of 15 September 2020, coronavirus infections had passed 29 million worldwide, as the COVID-19 pandemic shows its first signs of slowing in some countries, while others remain at risk.

Most Asia Pacific countries are faring better than the global average in the fight against COVID-19, though the virus remains a serious threat. The vast majority of confirmed cases are concentrated in a small number of countries. In the Asia Pacific region, India accounts for over 80 per cent of confirmed new cases, and a handful of countries account for almost all of the rest. It is clear that older people in this region are experiencing a wide range of serious impacts from the pandemic. Yet not all older people are equally vulnerable to COVID-19 and its effects. The healthy and active ones even take part in community surveillance and caring for others as they can.

Emerging responses in Asia Pacific are led by various actors: governments, UN agencies, multilateral and bilateral bodies, the private sector and civil society, including community-based organisations and individuals.

Turn to the next pages to learn how the HelpAge global network has supported older people during this hard time.
COVID-19 rapid needs assessments in Asia

HelpAge International and partner organisations have conducted a series of rapid needs assessments (RNAs) to analyse both the primary and secondary impacts of the COVID-19 pandemic on older people around the world.

In Asia, the RNAs were conducted by community members in seven countries: Bangladesh, Cambodia, India, Myanmar, Pakistan, the Philippines and Sri Lanka.* A total of 1,135 older people were interviewed between May and June 2020. Sixty seven per cent of respondents had at least one health condition and seventy seven per cent of them had some form of disability. According to the RNAs, the top three priorities that 77 per cent of older people were concerned about and needed support for were: 1) Food, 2) Income and 3) Health and wellbeing. The result reflects the situation of older people in the areas where HelpAge and our global network members are working to ensure that we respond to their specific needs.

Half of the older people surveyed had food for less than a week in their house. Similarly, about 60 per cent of older people mentioned either a reduction in quantity or a change in the quality of food they had consumed since the beginning of the outbreak of COVID-19.

Among respondents, only 13 per cent received a regular pension and the rest depended on remittances, agriculture, livestock, and petty trading. Given the lockdown and restrictions of movement for older people, they confirmed that it has had a huge impact on their sources of income. They have faced loss of jobs, reduced remittances, loss in businesses and less income.

Accessing health services and medicines is a major challenge for older people. The fear of contracting the virus is one of the biggest reasons for them not visiting health facilities. Older people also face difficulties in access to drinking water, WASH facilities and humanitarian assistance. Apart from that, both older men and women feel that the risk of abuse, including verbal, financial, emotional, physical, psychological and sexual abuse, has increased as a result of COVID-19.

The reality that older people face in times of crisis demonstrates both a denial of their rights and the particular needs that they experience. There is a need for planning and implementation of rights-based and inclusive responses. Governments and international relief agencies must recognise that older people have equal rights to health and humanitarian assistance.

Find more details on HelpAge's RNAs at https://bit.ly/3kFw76u

*It is not conclusive information of the needs of all older people within each country or the entire region.

Older people and the pandemic: What’s the story?

Regional

In addition to rapid needs assessments, HelpAge in Asia Pacific is monitoring the impact of COVID-19 on older persons and how governments in the region are responding to their situation in the pandemic. The bimonthly report series is supported by the United Nations Population Fund (UNFPA). Accompanying our latest regional report are eight country briefs: (1) Bangladesh, produced by the Department of Population Sciences, University of Dhaka; (2) India, by Nathan Economic Consulting India; (3) I.R. Iran, by Professor Majid Koosheshi; (4) Japan, by the Japan Agency for Gerontological Evaluation Study; (5) Republic of Korea, by Hanyang University Institute of Ageing Society; and (6) Myanmar, (7) Pakistan and (8) Vietnam by HelpAge.

Here are two commonly reported stories about how older people are faring with the pandemic:

Story 1: If you’re an older person, your biggest health concern now is COVID-19.

Well, yes and no. It’s statistically clear that mortality from COVID-19 rises with age, though not always as dramatically as reported earlier from Europe and elsewhere. For example, fewer than half of confirmed COVID-19 deaths in Indonesia are among older people. Where you live is often even more important than your age. Risk of exposure varies substantially by country and tends to be clustered in certain localities. The main health risks during the pandemic may not come from the virus itself but from the neglect of other health conditions such as hypertension or diabetes.

Story 2: Older people are particularly lonely and socially isolated in the pandemic.

Well, yes and no. Some older people have been severely harmed by being cut off from friends and family, including many of those living in care homes in a COVID-19 hotspot. But other older people are not necessarily any more at risk than other age groups. Some research suggests that many older people have stayed resilient during the pandemic. Studies from the UK and US have found that younger people, on average, report being lonelier and more depressed than older people. The term “older person” only tells us about the minimum number of years since a person was born (e.g. 60 or 65). Their circumstances are highly diverse, so we need to go beyond blanket statements, which may simply feed a “narrative of decline” in old age.

The regional report identified these priorities for the pandemic period:

- Gather evidence about older people’s situation in the pandemic.
- Rebalance health systems towards non-communicable diseases.
- Protect those with care needs, living in institutions or at home.
- Prioritise universal social pensions.
- Make emergency cash transfers accessible to all, including older people.
- Consider adding nuance to warnings of the pandemic’s “risks to older persons” based purely on age.

HelpAge global network members’ response to COVID-19

From the early days of the outbreak of COVID-19, HelpAge network members in Asia supported older people to minimise their risk of getting infected by the coronavirus.

Across the region, there were continuous efforts and activities despite minimal financial support and restricted movement. Our network members in Bangladesh, Cambodia, China, India, Indonesia, Republic of Korea, Malaysia, Nepal, the Philippines, Singapore, Sri Lanka, Thailand and Vietnam were active and made a difference to older people’s lives through providing information as well as distributing food, protective equipment, hygiene kits, medicine and other non-food items. They advocated with relevant stakeholders for an age-inclusive response, including access to services and emergency cash transfers.

This page highlights their responses during the COVID-19 pandemic.

We would like to take this opportunity to thank our network members and partners who have worked really hard in their areas and don’t leave any older man and woman behind in this pandemic.

Find more on global network’s response at https://www.helpage.org/where-we-work/helpage-global-network-members-response-to-covid19/

### India

**Gramin Vikas Vigyan Samiti (GRAVIS)**

GRAVIS was very active during the pandemic and distribution of necessities was one of their many activities. Ten thousand families received ration kits that include wheat flour, chickpeas, lentils, salt, oil, coriander, turmeric and chilli powder, all of which are essential items to keep families fed while they could not leave their homes. During the lockdown, water collecting was not possible for many. GRAVIS has supported rural communities with water tanks, each one supplying water to at least 1,000 families.

### HelpAge India

HelpAge India was proactive in its response to the needs of older people across the country during the pandemic (read the interview with Rohit Prasad, CEO of HelpAge India on page 7). One of the highlights of HelpAge India’s work is the Helpline which was on high alert and played a special role in providing information to older people who may need information and could not leave their houses. They also provided counselling, which was very much needed during the lockdown. Helpline staff were well trained on health advisories and guidelines, so they were able to provide necessary information about testing centres and hospitals as well as information from both central and state governments.

### Bangladesh

**Resource Integration Centre**

RIC staff made door-to-door visits to older people at their homes. They provided messages on how older people can protect themselves from COVID-19. The team also worked in collaboration with BBC Media Action on how to provide support and care for older people who are living alone. There are audio messages on how to protect older people from COVID-19 being broadcast in all the camps in COX’s Bazar.

### Sri Lanka

**HelpAge Sri Lanka**

HelpAge Sri Lanka took an active role in advocating with the government to provide aid to older people, including an allowance for older people.
China
Ageing China Development Centre (ACDC)
ACDC was prepared for COVID-19 as early as January 2020 when the world had just begun to talk about the spread of the new virus. They have been working closely with the older people’s association which played a critical role within the community. Older people demonstrated their strength as valuable members of their communities. One example was that older people were involved in village committees to set up checkpoints to monitor the health condition of travellers who were passing through the village to ensure that health regulations were met and to keep members of the village safe.

Nepal
Ageing Nepal
Earlier in the year, the number of cases in Nepal was very small yet the government imposed a very strict lockdown. Ageing Nepal developed and shared materials through social media to build mass awareness of protecting older people. Ageing Nepal gave radio interviews on the impact of COVID-19 on older people, as well as sharing their views through national print and online media.

Nepal Participatory Action Network (NEPAN)
NEPAN focused their efforts on training for the Mobilizer of Sambodhan Project on psychosocial counselling to equip their members with knowledge and tools to provide support to older people.

Republic of Korea
HelpAge Korea
The Republic of Korea was one of very few countries without a lockdown policy. While citizens were allowed to move around, HelpAge Korea supported older people with low incomes to ensure their homes was clean and disinfected, as well as by delivering food and protective gear to their homes.

Vietnam
Vietnam Association of Elderly (VAE)
Livelihood is the main concern of older people during COVID-19, so the VAE worked with the government and older people to monitor the implementation of policy, in particular in relation to cash transfers, so that older people could maintain their standard of living during the lockdown.
Indonesia
Yayasan Emong Lansia (YEL)
YEL works in one of Asia’s busiest capitals, Jakarta. During the lockdown, restriction of movement did not allow many activities. YEL contributed to the communities they are working with by providing staple foods along with protective gear such as face masks as well as soap and hand sanitisers to underprivileged older people.

Philippines
Coalition of Services of the Elderly (COSE)
With limited funding to support their response to the pandemic, COSE ran a successful online fundraising activity, with support from a well-known celebrity. COSE was able to provide ‘immunopacks’ consisting of face masks, vitamins, biscuits, powdered milk, rice and other essentials to older people. Around 11,000 packs were distributed.

Singapore
Tsao Foundation
Tsao Foundation staff engaged with older people in the communities through phone conversations every two weeks since February. Staff asked questions on how they were coping with the pandemic. The Tsao Foundation also organised and hosted a gathering of caregivers and older people to check their health and mental status.

Thailand
Faculty of Nursing, Chiang Mai University
As an educational institution, the Faculty of Nursing extended their support firstly to university students affected with COVID-19 to ensure that they could continue their education with minimal disruption. The faculty staff also provided essential training on caring for older people for health and non-health graduates.

forOldy
As a small NGO with a few members of staff, forOldy worked in collaboration with other NGOs in Thailand to advocate the Thai government to ensure that they can access cash grants.

Foundation for Older Persons’ Development (FOPDEV)
During the early stage of the pandemic, Thailand experienced a shortage and high cost of protective gear; masks and hand sanitisers were not available in the market. FOPDEV worked with community groups to run mask-making and hand-gel training sessions so older people could protect themselves and their families.

Cambodia
HelpAge Cambodia
With a small number of COVID-19 cases in the country, HelpAge Cambodia’s main activity was information dissemination. They provided awareness-raising messages on how to keep older people safe. They worked through the Cambodia Ageing Network (CAN) to communicate with older people in the communities.

Indonesia
Yayasan Emong Lansia (YEL)
YEL works in one of Asia’s busiest capitals, Jakarta. During the lockdown, restriction of movement did not allow many activities. YEL contributed to the communities they are working with by providing staple foods along with protective gear such as face masks as well as soap and hand sanitisers to underprivileged older people.
Tell us briefly about you and HelpAge India.

HelpAge India is a nationwide organisation with four missions or thematic focus areas, which are healthcare, age care, livelihoods and emergencies, and advocacy. For the last two and a half to three years, I have worked across India with our leadership team and the board on programme strategy, setting goals and targets, and implementing them. That has been the main focus of my work, along with overseeing and strengthening human resources and communications.

What strikes you most when you travel to HelpAge project sites?

I am struck by the fact that older people are completely invisible. The media doesn’t see them. The government doesn’t see them. The local administration doesn’t give enough importance to them or realise what can be done about them.

What is your view on older people as a resource or as a vulnerable group?

I think there has been a huge shift from what we call the welfare approach, based on the reality that there is a huge vulnerable population to serve, to the development and rights approach, which suggests that we need to see older people as a valuable and productive resource. If they are made capable, if they are empowered, then they can take care of themselves and also be better prepared for the challenges that they face.

One of the ways in which HelpAge India started seeing the elderly long ago was not just in their age but also their ability. As a core ethos, we see older persons in three categories; active, assisted and dependent. A 70-year-old can be in the active category, while a 60-year-old can be in the dependent category, so it's not just age but their ability and what they can do.

What is the situation of COVID-19 for older people in India? How has HelpAge India responded?

We conducted a survey in June among 5000 older people and found that almost 65 per cent faced loss of livelihood or income, while 78 per cent faced lack of access to basic commodities and services due to lockdown restrictions.

Our first response was to give relief in terms of food, rations and family survival kits. We distributed cooked meals to more than 200,000 disadvantaged people, including the destitute elderly, homeless and migrants. We also handed out 60,000 family survival kits, which include rice, flour, oil and basic essentials. Considering an average family has five members, we supported about 300,000 needy people in poor communities.

The second response was healthcare through the 150 mobile healthcare units across the country. We use these units as a way to provide primary care in areas that are difficult to reach.

The third response was livelihood support. We made direct benefit cash transfers to about 30,000 elderly in over 5,000 elder self-help groups.

The fourth part of our response was our Elder Helpline. We have a national, toll-free helpline operating across 24 locations in the country. This helped us to check the pulse of the elderly and we also actively reached out to elders in need.

Besides this, we partnered with voluntary and local organisations so that they could deliver relevant supplies to the doorsteps of older people. We are now putting our demands at state level to the government, to the policymakers and to the district administrations on what specifically can and needs to be done. In addition, we have implemented a programme with the UNFPA, who have supported us with community-based health services.

How do you envision the future of HelpAge India under your leadership?

HelpAge India is an organisation with 42 years of experience and I think it's well recognised in India and we feel very proud of it. It has been a torch-bearer for the care of older people. Even when nobody was talking about elderly issues in India, HelpAge India was raising the flag consistently.

India is at an inflection point – young now but rapidly ageing. By 2030, its elderly population will be second largest in the world and a significant 20 per cent of its population. Their welfare and active participation in society will be critical for India’s wellbeing. We need to ensure accelerated change going forward, raise the level of urgency for planning action and mainstream ageing into the development agenda.

Programmatically, we will continue our focus on the disadvantaged elderly, but also bring greater emphasis to two areas. One is capacity building and innovation, working with the systems approach – health and care system, family system, community system, and stress the training and development agenda as an important part of what we do. The second aspect is policy and advocacy. We realise that we are very strong in implementation – doing great work on the ground, connected to communities and knowing their problems – but how do we improve as a knowledge- and evidence-driven organisation so that we can leverage our implementation experience and drive policy and advocacy in a much more effective manner?

As an approach, partnerships, technology and intergenerational interaction are our priorities. We intend to significantly enhance partnerships with the government, private sector and civil society. Our view is that technology and digital adoption will be the biggest multiplier and amplifier for our message. While we are currently focused on older people who constitute 10-20 per cent of population, we feel that engaging the other 90 per cent will be key to driving change. This will mean a much stronger connection and engagement with the younger generations, particularly millennials and Gen Z, including schoolchildren, youth and working adults. All these factors will be important for building a caring society that values elders and for preparing India to be an ageing society.

To read the full interview, visit https://ageingasia.org/features/
Older people and social protection in response to COVID-19

Regional

The COVID-19 pandemic has affected all segments of the population. However, as the pandemic continues it has become apparent that older people and those with underlying health conditions are at higher risk of infection and are more likely to have severe complications, and mortality is disproportionately higher among older people.

Older people have also experienced a significant loss of income as a result of lockdowns and other responses introduced by governments to control the pandemic. Most older people in low- and middle-income countries are already living in poverty or in vulnerable conditions and the crisis has worsened their situation. Older women tend to face a greater risk due to a lifetime of accumulated impacts of inequality. The situation is particularly worrying for the Asia and Pacific region, which is home to around 60 per cent of older people globally.

Income in old age in these countries is usually drawn from family support and work, and to a lesser extent from pensions. However, the pandemic has reduced families’ ability to support older people as they struggle to cope with the impacts. For example, analysis by UNICEF in May 2020 indicates that 40 per cent of households in Sri Lanka have lost their incomes entirely and another 32 per cent have experienced a fall in income.

Most older people work in the informal sector with limited or no protection. They are more likely to lose their jobs during the crisis and take longer to get new jobs. Access to pensions is limited; where they exist, the benefit is often inadequate. The World Bank estimated that there will be an additional 71 to 100 million poor people as a result of COVID-19, and older people will certainly constitute a significant part of that number.

Analysis of the Life Cycle Deficit (LCD – the gap between income and expenditure throughout life) in older age cohorts in Bangladesh indicated that the elderly LCD may increase by around 15 per cent from pre to post COVID-19, implying a growing gap between older people's incomes and expenditure needs.

Various measures have been introduced by governments in response to the pandemic, and social protection benefits are one of the major components. However, most of this investment has been in high-income countries. Spending in low- and middle-income countries in this region has ranged from only 0.02 to 0.8 per cent of GDP, which is too small to be effective in responding to such a large crisis.

While older people are disproportionately affected by the crisis, few government responses specifically target older people. As of May 2020, around 35 per cent of global social protection responses to COVID-19 targeted older people, and 15 per cent were from countries in this region. The most common form is some type of adjustment through pension systems.

Pensions face many challenges, particularly in low- and middle-income counties, including low coverage and the inadequacy of benefits. Nearly half of older people in the Asia and Pacific region do not have a pension and it varies across the region with only 23 per cent coverage in South Asia. The average benefit level is around 12 per cent of GDP per capita, which means the protection is limited – even in normal times.

During the past few months of the pandemic, it has been observed that countries with existing social protection schemes including pensions are in a better position to respond, particularly those with more comprehensive, universal coverage. Poverty-target programmes, which are usually characterised by high exclusion rates and low coverage, are less effective in responding to a larger crisis like this pandemic.

The pandemic therefore highlights the need to invest more in social protection to expand coverage and increase benefits. Analysis by the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) shows that progress in poverty reduction that is undermined by disasters can be regained by investing in key sectors such as infrastructure, health and education, but the greatest benefits result from social protection. The COVID-19 pandemic is a good reminder to invest more in social protection, including pensions, to ensure that both women and men are sufficiently protected in both normal times and during crises. To achieve this, social protection has to be shock responsive: able to respond to sudden shocks that affect a large number of people, as well as being gender and age sensitive.
International Days of Older Persons

Ageism in the time of COVID-19: Challenging discrimination

Global

The biggest day in our calendar is almost upon us. This International Day of Older Persons (1 October) gives us the chance to challenge the ageism that many older people face in their lives. We need to show how COVID-19 has exposed ageism, and call on decisionmakers to do something about it.

Although people of an older age are among those most at risk of complications from COVID-19, the descriptions of COVID-19 as a disease of older people is exacerbating stereotypes and prejudice, and leading to age discrimination. We have seen decisionmakers and media stereotype older people as frail and vulnerable. And we have seen many governments implement age-based restrictions on movement, which means these stereotypes are perpetuated.

Ageism can cause serious harm when we start internalising these negative stereotypes and applying them to ourselves. Evidence shows that having negative beliefs about ageing can adversely affect an older person’s health. A person with negative attitudes to ageing could actually live 7.5 years less than those with positive attitudes (Levy et al., Longevity Increased by Positive Self-Perceptions of Aging, 2002).

In the run-up to the International Day of Older Persons, HelpAge network members are taking bold steps to challenge ageism and make sure all of us are treated with respect and on equal terms with others as we age.

Take our colleagues at the Coalition of Services for the Elderly (COSE) in the Philippines, for example. In some parts of the country, local authorities said older people must not leave their homes during the COVID-19 pandemic. Some stores even displayed signs saying that older people were not allowed to enter. One older woman told COSE she was kicked out of a store by a security guard, and protested that she was being discriminated against.

COSE are campaigning to ensure that all local authorities respect older people’s right to freedom of movement and their right to live with dignity. Thanks to their campaigning, the Department of the Interior and Local Government have issued new guidance mandating local authorities to ensure older people can leave their homes to access goods and services, even under strict lockdowns.

Will you challenge ageism with us?

Will you campaign with us to challenge ageism on this International Day of Older Persons? We have put together a toolkit to help you plan a campaign for IDOP. It gives step-by-step guidance on how to challenge ageism and suggests physically distanced tactics to convince decisionmakers to take action.

You can download the toolkit at https://www.helpage.org/get-involved/campaign-with-us.

Let us know what you are doing this IDOP by getting in touch with the campaign team at campaigns@helpage.org.

So, what is ageism?

The WHO says it is “stereotyping, prejudice, and discrimination against people on the basis of their age”.

Stereotypes are generalisations about a group of people (for instance, older people are frail).

Prejudice is the feelings we have towards a group, based on a personal characteristic like age (for example, older people should not work).

Discrimination is treating a person unfairly based on a characteristic like age, such as forcing older people to retire at a certain age.
Treating Non-Communicable Diseases (NCDs) in the age of COVID-19

Regional

Although the death toll from COVID-19 is high and still growing, it is dwarfed by the ongoing Non-Communicable Disease (NCD) crisis, which kills 41 million people each year. This constitutes 71 per cent of all deaths globally—a true health emergency. The COVID-19 crisis has also highlighted the importance of health system reform to better address the needs of the many people with one or more NCD. Those with underlying NCDs are at higher risk from COVID-19, yet NCD health services were interrupted in most countries in attempts to curb the spread of COVID-19. A WHO rapid assessment of NCD services found that 122 countries reported disruptions to NCD services and these disruptions were more extreme in places with active COVID-19 outbreaks. Population-level NCD screening programmes, inpatient and outpatient NCD services and access to essential medicines were all affected. While some countries explored the use of telemedicine and other innovations to continue providing NCD services, most countries do not have such systems established.

In this context, the Scaling-up NCD Interventions in South-East Asia (SUNI-SEA) research consortium project has begun a project to help governments and communities in Indonesia, Myanmar and Vietnam to work together to increase the quality, reach and number of NCD services that people can access. The pilot project, delayed due to COVID-19, will test a strengthened and integrated approach to healthy ageing by linking the NCD activities of both community-based groups and primary health care (PHC) and by adding a connection between them with referrals and counter-referrals. This approach will ensure that people are aware of NCD risk factors as well as their own NCD risk or status. It will also ensure that support is in place to include health information, guidance on healthy lifestyles, and basic screening, referrals and counter referrals with PHC and it will guarantee that basic health staff have the knowledge and skills that they need to support those with NCDs. Findings from SUNI-SEA should help to shape government strategies and investment in meeting their commitments to address NCDs across their populations.

For more information about SUNI-SEA, access the project website at www.SUNI-SEA.org

The Pro-Older Women Project

Regional

The Tsao Foundation and HelpAge International are piloting the first gender and ageing mainstreaming project in Southeast Asia, focusing on older women’s financial security.

Across the Southeast Asia region, older women receive less income than older men, have fewer savings, are less likely to receive pensions or have lower levels of pension benefits than men, and are more likely to rely on family members. This situation needs to change.

Guided by the vision of Tsao Foundation founder, Mrs Tsao Ng Yu Shun, that all older women should be empowered and be included in all programmes and services to age well in the community, and by leveraging on its experience in Singapore, the Tsao Foundation has partnered with HelpAge International to pilot a project titled “Promoting the Financial Security of Older Women in Southeast Asia”, or the Pro-Older Women Project. This is the first joint project that combines both an ageing and a gender mainstreaming approach aiming to address the financial insecurity of older women in the region.

Understanding that older women’s lower levels of financial security are the result of the cumulative disadvantages that women face throughout their lives in education, employment, access to assets, income, and other opportunities, the project aims to organise and work with women and ageing networks that will address these issues from a life-course perspective. Since gender mainstreaming is fairly new to ageing-focused organisations, the project also aims to fill this gap.

The Pro-Older Women Project started in February 2020 and will run for two years in two countries, Thailand and the Philippines, with the main project partners being the Foundation for Older Persons’ Development (FOFDEV) and the Coalition of Services of the Elderly (COSE), respectively.

Despite the challenges in conducting activities such as consultation meetings and public forums due to the pandemic, the project partners were quick to adapt and started to work virtually to ensure the specific needs and vulnerabilities of older women are recognised and addressed in the COVID-19 response and recovery, both at the national and regional levels. The two partners have recently completed an online training in gender mainstreaming using the HelpAge Gender Equality Manual. They are currently working closely with women’s organisations in forming alliances, gathering evidence on the impact of COVID-19 on older women, and advocating for gender-responsive and age-sensitive policies during COVID-19 and beyond.

For more information about the Pro-Older Women Project, check the website http://www.asiawomen.org.sg/programmes or email Aura Sevilla (Advocacy Development Manager of the International Longevity Centre Singapore) ataurasevilla@tsaofoundation.org.
Winners of the Healthy Aging Prize for Asian Innovation

Regional

The ‘Healthy Aging Prize for Asian Innovation’ (HAPI) is an initiative of the Economic Research Institute for ASEAN and East Asia (ERIA) and the Japan Center for International Exchange (JCIE), under the auspices of the Japanese government’s Asia Health and Wellbeing Initiative (AHWIN).

This prize seeks to recognise and amplify innovative policies, programmes, services, and products that address the challenges facing ageing societies. The objective is to highlight cutting-edge ideas that people throughout the region can emulate or access. There are three award categories, namely: Technology and innovation, Community-based initiatives, and Supporting self-reliance. The selection of awardees was carried out by an international committee of experts.

From more than 130 applicants from 12 countries, three HelpAge network members and a HelpAge office were selected for the great work they have done for older people. Their innovation and dedication to improving older people’s wellbeing over years has been recognised. Here are the names of our colleagues and their awards.

• Grand prize winner (Technology & Innovation category) – Foundation for Older Persons’ Development (FOPDEV), Thailand for the Buddy HomeCare social enterprise business.
• Grand prize winner (Community-Based Initiative category) – HelpAge Country Office in Vietnam for the intergenerational self-help club (ISHC) development model.
• Second prize winner (Technology & Innovation category) – forOldy, Thailand for ‘Grandpa – Grandma’ charity shop renting and selling age-assistive devices
• Second prize winner (Supporting Self-Reliance category) – Vietnam Association of the Elderly (VAE) for ‘Bright Eyes’ programme for older people in Vietnam

The announcement ceremony was held online on 31 August 2020. The complete list of prize-winners is available at https://www.ahwin.org/winners-of-1st-healthy-aging-prize-for-asian-innovation/ along with their profiles and short documentaries.

UNESCO recognition of literacy class for older people in Nepal

Congratulations to Ageing Nepal for winning the UNESCO King Sejong Literacy Prize for its ‘Basic Literacy Class for Older Persons’ programme.

The programme has been running since 2016. It has equipped around 200 older people with the basic skills of reading, writing, and solving numerical problems in Nepali and English. Such basic literacy empowers them to live an active social and economic old age enjoying a higher degree of independence and better access to services in the society of today that operates as if everyone is literate.

The UNESCO King Sejong Literacy Prize was established in 1989 with the support of the Government of the Republic of Korea. It gives special consideration to the development and use of mother-tongue literacy education and training. The 2020 thematic focus is “Teaching and learning literacy: The role of educators and changing pedagogies”.

The award ceremony was held virtually on 8 September 2020. See the list of the 2020 Laureates of UNESCO Literacy prizes at https://en.unesco.org/themes/literacy/prizes/2020
Connect aims to highlight issues of ageing and the rights of older people in Asia Pacific as well as share experiences of the network working with and for older people.

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Cover photo
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Registered charity number: 288180
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Animations
HelpAge International, Asia Pacific Regional Office with support from the Prudence Foundation and the International Federation of the Red Cross (IFRC) through SAFE STEPS produced two animations titled ‘Caring for older people: Management of community-based care’ and ‘Caring for older people: Management of residential care’ to provide simple guidelines for care home managers, care providers, staff, volunteers, as well as community leaders to ensure that both carers and older people are protected from COVID-19.

Videos are subtitled in Bahasa Indonesia, Burmese, Khmer, Thai and Vietnamese.
Watch on HelpAge Asia Pacific’s YouTube channel or visit https://ageingasia.org/caring-for-older-people-during-covid-19-pandemic/

Caring for older people:
Management of community-based care
https://youtu.be/yMw60VTp8Zg

Caring for older people:
Management of residential care
https://youtu.be/Rd-5-KH3F2Q

HelpAge International is a global network of organisations promoting the right of all older people to lead dignified, healthy and secure lives.

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Share your ideas with us: We welcome your opinions, ideas and suggestions. Let us know what you think about Connect and how we can improve.

In addition, we welcome articles for consideration. Please send articles at any time to:

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Connect is published three times per year by HelpAge International, Asia Pacific Regional Office. Copies of Connect are available free of charge to people working with older people. You can also download our newsletter as a PDF from our website: AgeingAsia.org