

Nine critical policy and programme implications for ongoing and future relief initiatives in Myanmar

1. Strong community cohesiveness and tradition of respect for older people were vital in the immediate aftermath of cyclone Nargis.

Future relief and development programmes should recognize and build on this capacity in order to strengthen community ownership of relief efforts and involvement in planning longer-term recovery and development processes.

2. The collaborative approach developed between the Government of Myanmar, ASEAN and the international humanitarian aid organizations has proven to be an effective framework for delivering aid to affected populations.

Similar collaborative approaches should be employed in future emergency responses and development initiatives in Myanmar and elsewhere.

3. The situation for older people and their households still needs attention: relief is slowing down, but needs are still widespread.

Relief and development initiatives should continue to provide direct support in the longer-term post-emergency recovery phase.

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4. There were clear positive implications for older people who were part of targeted programmes in the project villages. In areas where HelpAge programmes were implemented, for example, older people were significantly better off than elsewhere.

An intentional focus on the needs of older people, such as shelter repair and mobile medical services, should persist in the post-emergency activities of all internationally-supported programmes and agencies.

5. An important unmet need for older people is support for income-generating activities.

In the context of reduced productive assets and wage earning opportunities, ongoing rehabilitation initiatives should include activities aimed at recovering older people's livelihood security.

6. Material support was the most significant factor contributing to older people's psychological wellbeing.

Spiritual health, other psychosocial support activities and home care programmes, although necessary, are not sufficient to ensure wellbeing in post-emergency phases.

7. There are particular concerns about the phasing out of free mobile health facilities provided by the government and non-government organisations.

Ongoing and future development programmes should include provision of free mobile health facilities as an effective way of providing healthcare for older people.

8. Disaster preparedness remains precariously weak. Fears of another cyclone may be justified in light of fragile basic infrastructures.

Disaster risk-reduction programmes, including a strong component of preparedness, should be developed in the affected and non-affected areas of Myanmar. Strengthening village water storage tanks, food stores and broad-based community-building activities should be considered as general preparedness priorities.

9. The unique knowledge, experiences and views of older people were essential to understanding the post-cyclone situation in Myanmar, and to informing these policy and programme recommendations.

Older people should be more extensively and meaningfully engaged in planning, implementing and monitoring of the post-emergency recovery phase, as well as future disaster preparedness initiatives.

Policy and Programming Briefing Sheet

The situation of older people in cyclone-affected Myanmar

Nine months after Nargis: Policy and programme lessons learnt from research in three affected townships



Nine months after cyclone Nargis devastated Myanmar's delta region, this document presents some of the lessons, results and recommendations generated by research conducted in three townships in early 2009. The assessment clarifies how older people were included in emergency responses and related outcomes.

As well as highlighting some of the lessons from relief and rehabilitation work that took place in supporting older people, this summary also aims to increase awareness about their vulnerabilities during and since the cyclone.

Introduction

When cyclone Nargis struck Myanmar on 2 May 2008, it quickly became the country's most devastating disaster in living memory. Cyclonic winds, heavy rainfall and in some coastal areas, a 4 metre tidal surge, left a death toll of over 80,000, a further 50,000 people missing and countless more injured. Overall, cyclone Nargis severely affected about one-third of the estimated 7 million people living in affected townships. An estimated 200,000 affected people were 55 years of age or older at the time.

In addition to the human toll, the cyclone ruined most of the fertile fields in its path, contaminated most of the water supply, and destroyed hundreds of thousands of houses and other vital infrastructure, including health facilities.

HelpAge International, a network of organisations concerned with improving the lives of older persons, specifically focused their post-Nargis relief efforts on the needs of older people. The HelpAge programme targeted two townships, Kyaik Lat and Dedaye, with four programme elements: i) food distribution, ii) provision of non-food items, iii) mobile medical units and iv) shelter repair and reconstruction.



Principal observations

Community cohesion, underpinned by a traditional support system, was evident in the immediate aftermath of the cyclone. Local communities and individuals led the initial response and made efforts to prioritise and protect vulnerable groups, including older people.

The livelihoods and economic security of older people have not yet been sufficiently restored. About half of the respondents whose cultivated land was destroyed have regained it, and only one-third of lost poultry have been replaced. Severely diminished opportunities for wage labour pose a further threat to livelihood security. While 61 per cent of older people in the assessment study reported doing occasional work for cash before Nargis, only 42 per cent report that they still do today.

Despite the loss of productive assets, income-earning opportunities and the contributions of older people to household livelihoods, none of the study participants reported being a beneficiary of any livelihood-support programme. This was a critical gap in the relief assistance identified by older people in all research sites, who viewed this as important for their future security.

For many of the older respondents, weakened livelihoods and reduced earning opportunities also threaten their food security. Half of their monthly household income is spent on food; many people express concerns about their ability to manage since food relief stopped.

Older people report that they eat smaller amounts, and less often, since the cyclone. An average of only one-third of respondents state they have enough to eat most of the time, while around one-in-ten are often hungry.

A large proportion of respondents reported that their house had been totally destroyed; this was especially the case in Bogale where cyclone damage was most severe. However, 71 per cent of the respondents in Kyaik Lat and 59 per cent in Dedaye report that their home has been totally repaired. In Bogale where HelpAge did not direct any relief operation, the situation is less positive, with only 25 per cent of respondents reporting a fully repaired home.

The targeting of shelter repairs has a clear and significant impact on older people. Those who received repairs speak of regaining a sense of security and independence, as well as an easing of the burden they felt they placed on others because of their dependency.

Mobile health services were also highly valued by older people because they were accessible, regular and free of charge. Many people express concern about the loss of these services, fearing they could no longer afford the same level of healthcare in the future.



Older people strongly relate their psychological wellbeing to the material support they received during the emergency. A greater sense of wellbeing was found among those who lived in areas where programmes had specifically focused on older people.

Older respondents report two persistent anxieties: their future wellbeing and another cyclone. Comparing their life nine months after the disaster to what it had been before the cyclone struck, only one-in-five feel it is 'back to normal'.

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Key policy and programme lessons

Strong community cohesion was critical during the initial stages of the emergency, and traditional support systems are key to supporting older people in such emergencies.

Better coordination among humanitarian agencies is needed in order to develop programmes that are inclusive and meet the essential needs of vulnerable people, including older people.

Older people's vulnerabilities in an emergency are not always recognized or prioritized. Their state of health, their limited mobility, their reduced self-sufficiency and increasing dependency on others make them particularly vulnerable.

In emergency situations, older people's health and psychological wellbeing, their sense of security and independence, are inextricably linked to food insecurity, livelihood and economic instability and the wide-ranging loss of productive assets.

Relief programmes should ensure the participation of older people in planning and implementation stages, in order to ensure their needs are addressed. Older people need many services, such as healthcare and livelihood support. In many settings, these needs have either not been addressed or are under threat as the relief phase ends.

Health services that are accessible, regular, reliable and free of charge are essential for older people. Efforts to support the development of permanent health services, with specialist knowledge of common health conditions of older people, should benefit older people and those who care for them.

Measures to ensure the long-term recovery of older people and their households should also include inputs or loans to support livelihoods of older people.

Appropriate integration of older people in all recovery programmes, including livelihood support, enables older people to maintain their contributions and independence.

Older people are among the most vulnerable in times of food shortage. Although food aid reached all households, it may be important to recognize the longer-term food security needs of vulnerable groups, including older people.

The collaborative approach between stakeholders

has been effective overall



The immediate action of individuals, village leaders, community organisations and monasteries was followed by relief from the government and a number of national and international non-government organisations.

The scale of destruction and the difficulty of accessing some areas left some people still unreached by the end of May, a full month later.

Nine months after the cyclone, many relief programmes are being phased out or have already ended. By the end of 2008, distribution of food and non-food items ceased in most areas; in a few of the worst affected areas, government and non-government mobile health services remain in operation.