Older people’s health and lives have been at particular risk from COVID-19. Their rights have also been denied. In October 2020, a consultation was carried out to better understand older people’s experience of their rights during the pandemic.

This summary explores themes emerging from the responses. It presents the individual voices of the older people interviewed – voices that, despite the disproportionate impact of COVID-19 on older people, have rarely been heard in discussions on the pandemic. It does not represent the views or experiences of all older people.

Jordan is one of ten countries in which the consultation was carried out. A full report from all ten countries is available at [www.helpage.org/Unequal_Treatment_report](http://www.helpage.org/Unequal_Treatment_report)

### 1. Responses discriminating on the basis of age

Government responses to the pandemic have not treated all older people fairly or equally with others. Besides a national lockdown, the government introduced a specific restriction for older people, not allowing people over 60 to leave their homes.¹

Some of the older people interviewed said they had remained socially connected through digital and online platforms. Others had become more socially isolated and felt the loss of contact with their family and friends.

“The corona pandemic has drawn people apart from each other. People used to be well connected. Friends and family used to gather and visit each other, but these traditions are no longer part of our daily life.”

70-year-old man living with his children in an urban area
For one participant, little had changed, as she had rarely left the house before the pandemic. For another, the pandemic had provided an opportunity to meet more people.

“For me, [the lockdown] has had a positive impact. I’m involved in some charities that help older people, in particular. I’ve met many people who have needed support, and I’ve been the first to offer assistance. It’s kept me busy.”

60-year-old woman living alone in an urban area

Some said that staying at home for long periods of time and the fear of infection had affected their mental health. Others said their lives had been turned upside down.

“Our whole lives have changed for the worse, from sleeping and waking-up times, and the types of food we eat, to late nights. Expenditure has increased and work has decreased. Leisure time has increased and so have our problems. We can no longer tell the difference between day and night.”

69-year-old-man living with his spouse in an urban area

2. Services failing to reach everyone

The pandemic has exposed the inadequacy of many services, as well as the inequality of access to services among older people and the discrimination they can be subjected to.

For some participants, shifting to home deliveries of groceries and medication had caused no problems. However, others felt that the quality of services and their access to them had declined. Interruptions to the supply of medication was a particular problem for some. Another was suspension of services and delays in appointments for non-COVID-19 related medical conditions.

“As for my medication, I struggled a lot to get it, due to the drug shortage in the hospitals. We also had difficulty booking appointments. It took too long to get one. How could they give someone who has suffered a stroke a check-up appointment after three months?”

66-year-old woman living with her spouse in an urban area

The ban on driving and inaccessible public transport had had a particular impact on older people’s access to services.

“I found some difficulty in transportation due to the driving ban and the fact that I cannot walk long distances because of my age. They didn’t think about us when they made this decision.”

60-year-old woman living alone in an urban area

Fear of infection had also prevented some from accessing the services they have needed.

“Services are still available, but we are trying to minimise visits to [health facilities] to avoid being exposed to the virus, because if that happens, I don’t know if my family would take care of me or not.”

70-year-old man living with his children in an urban area

The lack of equality in access to services came though strongly. Those who knew people with connections, or who had particular roles, said they had better access than those who did not. Reliance on family members and others was essential for some to access the services they needed.

“My son, who works in the Civil Defence, came home once. I told him that I needed some medicine, so he went back to the hospital in Zarqa and got it for me. He told me that if he hadn’t been working in the Civil Defence, he would not have been able to get it for me. What about other people who don’t have someone working there?”

62-year-old women living with her spouse in a rural area

Similar findings in earlier study

The findings of a rapid needs assessment carried out with 405 older refugees and host community members in Amman, Irbid, Mafraq and Zarqa governorates in May 2020 support what the older people in this consultation said about the impact of the pandemic on their access to services:

• 80 per cent said they had at least one health condition, yet 33 per cent had been unable to obtain their regular medication since the COVID-19 outbreak had begun (rising 38 per cent of those with disabilities).

• 29 per cent said they had difficulty obtaining food. The problem was greater for women (35 per cent) than men (17 per cent).

• 23 per cent said they had difficulty getting humanitarian assistance, and 15 per cent said they had faced barriers accessing drinking water.

To read the full report, go to www.helpage.org/what-we-do/coronavirus-covid19/covid19-rapid-needs-assessment-rnas

3. Gaps in understanding rights

Older people understand their rights in different ways. They have varying levels of knowledge of their rights, with some having significant gaps.
Some of the older people interviewed said they were aware of their rights, such as their rights to health, a pension, food, care and support services, participation in cultural activities, transport and an adequate standard of living.

“It’s my right as an older woman without a source of income to be allocated a pension, to be provided with medication and treatment whenever I need them, and with all the necessary services, including food and drink, clothing, money, health, etc. When these services are made fully available to older people, we will then stop worrying about tomorrow and we will live with dignity and without fear.”
60-year-old woman living alone

Some felt the problem was that their rights were not being implemented or enforced. Views differed on the government’s awareness of their rights. A number felt that the government was aware but not listening. One thought that the government was unaware of their rights.

“It’s as if we were dead. We have no rights, we’re not recognised, our opinions are not respected, and we’re not being heard. We’re not entitled to any pension, either for medical care, food, or other expenses, even though the government is well aware of our rights and needs.”
69-year-old man living with his spouse in an urban area

Some participants felt that older people themselves were not aware of their rights. Having their rights scattered across different instruments made it hard to know what they were and claim them.

“The rights of older persons are guaranteed in all parts of the world, in statutes and constitutions. They are also stipulated in our national legislation. But, unfortunately, they are not enforced. A lot of research and reading has to be done to find them. When an older person is not aware of his or her rights, or does not demand them, how can the authorities grant us our rights? Awareness should start with the people themselves so that the authorities respect and grant people their rights.”
65-year-old woman living with her children in an urban area

One person had successfully complained about problems with delivery of her medication. However, others felt there was no point making a complaint as nothing would be done. Now was not the time to complain when everybody was under pressure. Some said they did not know how to complain.

“My daughter has a neurological disease and so her treatment is essential. I don’t know how I would file a complaint if I wanted to.”
50-year-old woman living with her children in a rural area

4. Changes older people would like to see

Older people identified a number of changes they would like to see to the response to the pandemic that would better protect their rights and improve their lives.

A number of participants felt that the public health measures relating to older people had been disproportionate because of the harm they had caused.

“The measures the government has taken with regard to older persons have done more harm than good. It doesn’t make sense for me, as an older person, to be quarantined alone in my house without being allowed to see my children and grandchildren. The psychological harm has been much greater than that caused by coronavirus.”
66-year-old woman living with her spouse in an urban area

There was particular concern about the mental wellbeing of older people and the need to ensure they had social contact with others.

“They only stressed the home isolation measures and preventing older people from going out of the house. They treated us like children who needed to be taken care of. But what serious action did they take for older persons? Deaths from heart attacks increased due to loneliness and being distanced from people. They should have considered the psychological wellbeing of older persons as a priority.”
69-year-old man living with his spouse in an urban area

Other suggestions for a better response to the pandemic included ensuring better use of face masks, designated areas or queues for older people, and the inclusion of older people in crisis management decision-making.

“The decisions taken by the government were fairly good for people in general, but they failed to take older persons into account. If this crisis continues, I suggest that the government places older persons at the forefront of its crisis management strategies.”
77-year-old woman living in an urban area with her children

One person had successfully complained about problems with delivery of her medication. However, others felt there was no point making a complaint as nothing would be done. Now was not the time to complain when everybody was under pressure. Some said they did not know how to complain.

“My daughter has a neurological disease and so her treatment is essential. I don’t know how I would file a complaint if I wanted to.”
50-year-old woman living with her children in a rural area

A number felt that the law did not currently guarantee all their rights.

“The law does not guarantee even 40 per cent of our rights. If the government guaranteed our rights, our conditions would improve, and so would all services by 100 per cent. Not out of pity, but because it would be the duty of our country.”
71-year-old woman living alone in an urban area
There was a strong sense that guaranteeing their rights in law was important to ensure compliance and to hold those responsible to account.

“If there was a law that held those who failed to serve older persons accountable, or held any employee who neglected their duties or mistreated an older person accountable, things would be much better.”

66-year-old woman living with her spouse in an urban area

However, others recognised that laws alone were not enough. Sometimes they were not enforced. Sometimes they were not respected. Some participants felt that people should have a genuine respect for older people and not only act out of fear of the law.

“No only should the rights of older persons be guaranteed by the law, but also through people’s attitudes towards us. What’s the use of having a law that punishes people for the mistreatment and marginalisation of older persons if people don’t have that inner voice that tells them, ‘No, this is an older person, one of my family and the heart of society, who must be treated with kindness and respect’? It should come from within them and not out of fear of legal repercussions.”

65-year-old woman living with her children in an urban area

A number of participants said that protection of their rights in the law could end disputes, lead to better service provision and improve the quality of their lives.

“I’m not well versed in the law, and I don’t know if there actually is a law for older persons, but from my point of view, there should be laws that regulate matters related to the support of older persons. For example, if an older person is unable to support himself or herself financially, the government must secure a monthly income to help him or her. There’s no doubt that when there’s a law for older persons, their living conditions will improve in all respects.”

75-year-old man living with his spouse in an urban area

Others felt that attitudes towards older people would change.

“People’s attitudes will change when they realise that there’s a law that protects the rights of older people, and services will improve.”

62-year-old woman living with her spouse in a rural area

What a convention would do

A UN convention on the rights of older people would:

1. Be a solid base for a fairer society. It would help ensure that all older people everywhere are treated in a fairer and more just way.

2. Result in better services for all. It would help ensure that governments, the private sector and others design and deliver services that respect older people’s rights.

3. Be a clear guide. It would be the go-to place to get guidance on what older people’s rights are and how to respect them.

4. Be a driver for change. It would set in motion a chain of events that would improve older people’s lives.

How the consultation was conducted

The consultation was carried out in October 2020 with seven women and three men over the age of 50. Due to COVID-19 public health restrictions, individual interviews were done by phone and in person using non-probability sampling based on convenience and who was accessible to those carrying out the consultation.

The consultation questions were broad to allow respondents to talk about what was important to them. Questions focused on changes in their lives due to the pandemic, their experience of service delivery, knowledge of their rights, rights guaranteed in law and things they would like the government to do differently.

The findings are intended to capture the views of the ten older people interviewed and are not intended to be representative of the population of older people as a whole.

Acknowledgements

HelpAge International would like to thank all the older people who were interviewed for this consultation. We would like to thank HelpAge International Jordan who conducted the surveys.

Endnotes