

FOR PARTICIPANTS ONLY

27 March 2007
ESCAP/EGM/MIPAA/11

ENGLISH ONLY

ECONOMIC AND SOCIAL COMMISSION FOR ASIA AND THE PACIFIC

Expert Group Meeting on the Regional preparations for the Global Review of
Madrid International Plan of Action on Ageing

27-29 March 2007
Bangkok

**Ensuring and Enabling and supportive Environments for Older
Persons: Healthcare and care support for caregivers***

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Ensuring and Enabling and supportive Environments for Older Persons: Healthcare and care support for caregivers

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It is estimated that the proportion of persons aged 60 years and over in the world will double between 2000 and 2050, from 10 to 21 per cent. Among the world's elderly population, 52 per cent lived in Asia and the Pacific in 2002 and this is projected to increase to 59 per cent in 2025. Older persons in Asia and the Pacific are becoming large gaining visibility. The Second World Assembly on Ageing, convened by the United Nations at Madrid in April 2002, adopted the Madrid International Plan of Action on Ageing, setting policy direction in three major areas: (a) ageing and development; (b) health and well-being into old age; and (c) enabling and supportive environments for ageing. Progress in the implementation of the International Plan of Action on Ageing has been uneven and insufficient.

This paper focuses on enabling environments with particular reference to healthcare and care support for caregivers

Older persons and the family

There is widespread recognition of the importance of family and community support for older persons across the region. Although the ability of families to care for their older members is under pressure as a result of urban and labour migration, unemployment and economic restructuring with resulting internal family pressures, families remain the primary caregivers for the vast majority of older persons. However, the numbers of older persons at high risk of dependency and disability are increasing at the same time as the ability of families to provide care is decreasing.

While strengthening traditional support systems and multigenerational solidarity and assisting older persons without family support are accorded high importance, the results of the 2002 survey on ageing conducted by ESCAP showed that providing caregiver support services such as in-home care for home-bound older persons and family elder care training are given lower priority in some countries. Therefore,

- ❖ Undertake measures to strengthen family cohesiveness and multigenerational solidarity.
- ❖ Develop and/or strengthen a range of community-based services that support older persons with or without families and family caregivers in which caring

responsibilities can be shared among individuals, families, communities, NGOs and government.

India remains a family centered country despite migration and changes in family structure and size. Ageing in Place can be ensured through homecare services and some organisations have started providing such services in several parts of the country. However, such formal caregivers are not adequately trained.

Social service and community support

Care for older persons in terms of both home-care services and community support is one of the important emerging concerns of population ageing in the region. Meeting those demands requires more effective coordination and cooperation among agencies and government departments providing such services. Other equally important tasks include the correct assessment of needs and matching of appropriate services for older persons. Additional important factors are the monitoring of standards and the quality of services specially targeted at older persons. Therefore,

- ❖ Develop schemes for comprehensive needs-based assessment that enables older persons to receive a comprehensive assessment of their needs from an interdisciplinary team.
- ❖ Establish standards to ensure quality care in formal care settings. However, instead of emphasising on establishing regulations and enforcement, Governments should advocate a shared responsibility.

Housing and enabling environments

One of the many challenges facing the countries in the region is to provide appropriate living environments for older persons which enable them to participate fully in the community. To that end, improved housing with barrier-free and age-friendly designs needs to be constructed, thereby enabling families to take care of older persons effectively. In India, all along “destitute” old age concept is slowly giving place to “high quality” housing for those in the middle income group while such a facility remains a dream for those living in villages. Therefore,

- ❖ Improve housing and living environments to emphasize barrier-free, age-friendly and integrated designs and communities, thereby ensuring older persons a dignified and independent life;
- ❖ Promote equitable allocation of public or affordable housing which supports “ageing in place” based on individual preferences;

In the Indian context, access and safety needs have not caught the attention of policy makers. For instance, an older adult wanting to travel in a train often is required to climb 2-4 steep narrow steps to board the train thereby posing a great challenge. Train is the cheapest and safe mode of travel.

Care and support for caregivers

Within the region, relatively low priority is attached to supporting caregivers through training, information, psychological, economic, social and legislative mechanisms. This may lead to a lack of services for caregivers, in many cases, elderly women and female spouses. Governments must pay greater attention to providing direct care and support to caregivers. Therefore,

- ❖ Promote and provide direct support to family caregivers in the form of material aid, tax reduction, subsidized housing or training on home care.
- ❖ Promote and encourage community-based programmes to assist family members and caregivers.

Challenges of Family Caregiving

- With the dwindling family size, caregiving for the elderly is becoming a concern. The concern gets deeper with migration of younger families.
- Nuclear families: The size of the family is diminishing and coupled with this is non availability of children for the married elderly.
- Migration - Geographical distribution of children, the Government must encourage the NGOs in offering programmes and services through tax deductions, allotment of land and subsidy in bank interest rate.
- Longer life span means increased caregiving duration and with the longevity increase the children too get older and in many cases they may not be physically capable of offering the needed care.
- Family conflicts – traditional conflicts in families
- Urban versus rural caregiving situations vary. With limited access to health care in remote areas and village, the quality of life of elderly may suffer as they are not accessible to healthcare facilities easily.
- Dependence on community care – reliance on formal caregivers will become the need of the future and this is well experienced by the developed countries with increased longevity.

Protection of the rights of older persons

It is recognized that neglect, abuse and violence against older persons take many forms - physical, sexual, psychological, emotional and financial. The right of older persons as an important consumer group with common needs, interests and preferences to receive proper goods and services must be recognized. Therefore,

- ❖ Take active measures to ensure that older persons have access to information regarding their rights.
- ❖ Take active measures to combat discrimination, abuse and violence against older persons.

Implementation and Follow up

National mechanisms on ageing

It must be emphasized that Governments and other national actors should play a key role in the implementation of commitments on ageing. Many countries in the region have developed national policies, plans of action or legislation on ageing. For those which have adopted a national plan of action on ageing in response to the recommendations of the Macao Plan of Action on Ageing for Asia and the Pacific and the Madrid International Plan of Action on Ageing, the challenge is to implement their plans and find ways to overcome difficulties in resources, knowledge, expertise and other areas. For those countries that have not yet developed a national plan on ageing, immediate action should be taken. Therefore,

- ❖ Place comprehensive and systematic frameworks at the national level to identify the circumstances and needs of older persons, as well as options and priorities for policy action on ageing.
- ❖ Enhance the participation of NGOs, older persons' associations and other sectors of civil society in the implementation of the regional and international plans of action on ageing, through their participation in the review of national policies and programmes and national implementation.
- ❖ Encourage Private sector participation in major projects and programmes.
- ❖ Measure regularly, the impact of strategies to assist Governments and other national actors in the implementation process.

Regional Networking

Countries in the region vary greatly in their economic, social and political situations. Despite the cultural diversity, population ageing is a common challenge that every country faces. Networking amongst the countries will facilitate the exchange of information and sharing experience. Role of ESCAP in this aspect is very significant.

- ❖ Promote regional networking to help national implementation processes.
- ❖ Entertain inter-country exchanges of information through participation in regional activities.
- ❖ Conduct training activities and support advocacy aimed at the mainstreaming of ageing issues in development policies and programmes.
- ❖ Participate in the regular reviews organised by ESCAP in respect of the implementation of international and regional commitments.
- ❖ Support ESCAP in its role of facilitating the development of a regional network on ageing.

Reflections: The past, indeed determines the future

- Progress after the First World Assembly on Ageing was reported to be uneven and varied from country to country reflecting differences in available resources, priorities and other factors.

- The creation of graduate studies in gerontology in some universities, as well as research on ageing, including publication of reports on the situation of older persons, were additional progress reported by UN Member States.
- Specialized training in geriatrics and gerontology is increasingly offered in certain countries.
- Countries reported improved quality of *health care* provision to older persons. Developing countries reported on improving health care provision and developing non-institutional care and home care programmes.
- Family and informal care arrangements were reported to have played a significant role in enabling older persons to remain in the community and avoid premature admission to residential care facilities.
- Through *advocacy* measures, countries succeeded in changing attitudes towards ageing, promoting positive images of older persons and recognising specific issues and problems of older persons. Besides, countries offered continuing education and social activities that will stimulate learning by older persons.

A Look at the Indian Scenario

With a comparatively young population, India is still poised to become home to the second largest number of older persons in the world. Projection studies indicate that the number of 60+ in India will increase to 100 million in 2013 and to 198 million in 2030. The special features of the elderly population in India are:

- Majority (80%) live in the rural areas, thus making service delivery a challenge
- Feminization: 51% of the elderly population would be women by the year 2016
- Increase in the number of the older-old (persons above 80 years) and
- Large proportion (30%) of the elderly live below poverty line

Financial assistance up to 90% of the project cost is provided to NGOs for establishing and maintaining old age homes, day care centres, mobile medicare units and to provide non-institutional services to older persons. The scheme has been made flexible so as to meet the diverse needs of older persons including reinforcement and strengthening of the family, awareness generation on issues pertaining to older persons, popularisation of the concept of life long preparation for old age, facilitating productive ageing, etc.

There are at present 82 million aged persons in the country. Of this 63 per cent are in the age group of 60-69 years and are called young old. 26 Per cent of the aged population is constituted by people 70-79 years old described as old and the remaining 11 per cent are above 80 years. 55 per cent of the elderly people are women. 20 million elderly women are widows. 80 Per cent of the older population lives in rural India.

The traditional norms and values of Indian society laid stress on showing respect and providing care for the elderly and the families took care of them in the family itself. Advent of modernization, industrialization, urbanization, education and growth of individual philosophy has eroded the traditional values that vested authority with elderly. Although family support and care of the elderly are unlikely to disappear in the near future, family care of the elderly seems likely to decrease as the nation develop

economically -and modernize in other respects. In spite of several economic and social problems, the younger generation generally looks after their elderly relatives.

Mass poverty is the Indian reality and the vast majority of the families have income far below the level. The National Policy for Older Persons document has measured 33 percent of the general population as living below poverty line and hence the number of poor older persons comes is about 23 millions. India continues to remain an Agriculture economy, one of the major contributors to poverty. As people live longer and move into “oldest old” category, they need more intensive and long term care. At this stage, the families may face increased financial burden to meet the increasing healthcare costs.

There is however, little empirical evidence of elder abuse in India, despite economic strains on families caring for their elderly.

Currently the Government runs various health programmes targeted towards mother and children. The primary health system is not geared up to meet the challenges arising from an increase in chronic diseases. Diabetes and hypertension which have higher incidence amongst the elderly will pose an increasing burden to the elderly themselves and the families. Mobilizing additional resources for geriatric care will emerge as a major responsibility of healthcare providers in the country. And this needs to be achieved without affecting maternal and pediatric care.

National Old Age Pension scheme is offered to destitute over 65 years of age. It was recently increased to Rs.200/- per month while it remained Rs.75/- per month for long time.

Under the Annapurna Scheme, all those in receipt of Old Age Pension are given 10 kilograms of rice or wheat free of cost through the public distribution system. The scheme was estimated to benefit about 8 million older persons in 2000.

The Government of India constituted Project OASIS (Old Age Social and Income Security) under the Ministry of Social Justice and Empowerment to make “concrete recommendations for actions which the Government of India can take, so that every young person can genuinely build up a stock of wealth through his or her working life, which would serve as a shield against poverty in old age’. The recommendations are pending acceptance by the Government.

Minister for Social Justice and Empowerment, Government of India in 2004, called for greater and better income security of the older persons and said that she would take up the issue of increasing the number of recipients of pension. She suggested reducing the age ceiling from 65 years to 60 years in line with the National Policy for Older Persons and increasing the amount to a realistic proportion. Social pensions are effective way of reducing poverty which is not possible without inclusion of older people, 30% of whom live below poverty line.

National Policy of Older Persons: Implementation mechanism must be well grouted and the inter-ministerial committee must become more powerful. At the same time, the National Council of Older Persons must meet more often, take decisions, fix responsibility for implementation and review its working.

The Government of India introduced in the Parliament, The Maintenance and Welfare of Patents & Senior Citizens Bill 2007 in March 2007. The Act will provide effective care and protection to the senior citizens of the country and will also provide them speedy and inexpensive legal framework to grant maintenance to them and make the act of neglecting old parents a serious crime and could even inflict capital punishment for it.

Recommended Strategies

The major challenges to the implementation of the International Plan of Action on Ageing include lack of funding and the lack of expertise of government staff. Besides, some Governments have not provided adequate staff and therefore they experience shortage of staff. In spite of such obstacles, implementation of the following recommendations can help elderly live better quality of life.

1. Transportation of older persons and related issues of accessibility and mobility in society remain an important concern for some countries. Action must be taken to overcome this obstacle.
2. Volunteer work, self-help initiatives and participation of older persons in social organizations could offer opportunities to strengthen solidarity between generations.
3. The impact on older persons of migration, particularly of younger generation, is a serious concern in most developing countries.
4. Ensure protection of the rights of older persons, especially from abuse and violence.
5. In order for families and communities to continue to care for older persons, strong support from Governments and Community Based Organisations are required.
6. Governments must be motivated to promote and build Public Private Partnerships (PPPs) to create enabling environments that can ensure housing and healthcare programmes for the older persons to live in peace.
7. Gain assistance of NGOs and the private sector in developed countries to share their knowledge and insights. International Federation on Ageing established "Building Capacity in Healthcare" projects linking NGOs in India with Australia while UK with South Africa.
8. Improve rural health care through effective utilisation of Public Health Centres
9. Promote programmes to help Life Long Learning in the areas of language literacy, E Learning, Self health care, second career and so on.
10. Bring the self-employed and daily workers under the social security bracket - under the pension and provident fund schemes. Contribution from the government is likely to encourage the self-employed class to have retirement schemes.
11. Maintain uniformity in the age of eligibility of benefits granted to the elderly.

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