Voluntary National Survey on the Implementation of the Madrid International Plan of Action on Ageing (MIPAA) in Asia and the Pacific
(to inform the Asia-Pacific Fourth Review and Appraisal of the Madrid International Plan of Action on Ageing)

Background
This voluntary national survey will inform the Asia-Pacific Fourth Review and Appraisal of the Madrid International Plan of Action on Ageing (MIPAA) to be organized by ESCAP in 2022.

MIPAA is the global guiding document on population ageing adopted at the Second World Assembly on Ageing, in 2002. It calls for regular and systematic reviews of MIPAA implementation by Member States. After three successful reviews at national, regional and global levels, the General Assembly, through resolution 75/152, took note of ECOSOC resolution 2020/8 and decided to hold the fourth review and appraisal of MIPAA at the global level at the sixty-first session of the Commission for Social Development, in 2023.

Pursuant to ECOSOC resolution 2020/8, regional commissions were asked to facilitate the fourth review and appraisal at the regional levels by: (a) providing assistance to Member States in organizing national review and appraisal exercises; (b) organizing regional review meetings using an inclusive and coordinated approach in relation to the participation of civil society in the process; (c) assisting Member States in following up on analysis resulting from the regional reviews; (d) promoting networking and the sharing of information; (e) providing an analysis of the main findings and identifying priority areas and policy responses by 2022; and (f) assisting and providing advice to Governments in the gathering, synthesis and analysis of information, as well as in the presentation of the findings of national reviews.

The 2022 regional reviews and appraisals will feed into the 2023 global review and appraisal, including the 2023 reporting for the United Nations Decade of Healthy Ageing (2021-2030). The Asia-Pacific voluntary national survey on the implementation of MIPAA is an integral part of the preparations for the Asia-Pacific Regional Review and Appraisal in 2022. The process consists of: (a) voluntary national surveys; (b) stakeholder consultations; (c) documentation; and (d) the intergovernmental meeting. For more information on the Asia-Pacific Regional Review and Appraisal, see: https://www.population-trends-asiapacific.org/mipaa (to be updated regularly).

Suggestions for completing the Asia-Pacific voluntary national survey on MIPAA implementation
The survey should be completed by ESCAP member States, through their national ageing focal points. It is structured according to the MIPAA priority directions, issues and objectives. Some objectives have been merged to facilitate reporting. As MIPAA is a multi-dimensional framework, it is recommended that the national focal points complete the survey in consultation with ministries and departments involved with implementing the various MIPAA priority directions and objectives. The following guidelines are intended to assist member States in reporting on the national follow-up to MIPAA:

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2 In December 2020, ESCAP requested member States to nominate ageing focal points.
3 For a list of priority directions, issues and objectives of MIPAA, see the Annex.
1. A **bottom-up participatory approach** should be followed by inviting, inter alia, civil society, including organizations of older persons, to contribute to survey responses (ECOSOC 2020/8, OP5).

2. **Gender perspectives** should be mainstreamed when answering the questions.

3. Member States are encouraged to reflect on any national data collection initiatives for implementing the 2030 Agenda and related SDGs and report on the respective SDG indicator (relevant SDG indicators are listed along with the questions, when applicable).

4. Answers should focus and report on **progress made during the period 2018–2022**. (ECOSOC resolution 2020/8, OP3).

5. Answers may combine **quantitative and participatory qualitative data and analysis**, disaggregated by age, and by other relevant factors, including sex and disability, and, where appropriate, include sharing of good practices in such data collection (ECOSOC 2020/8, OP6).

6. Answers should include information on **lessons learned and good practices** to ensure this review and appraisal exercise contributes to South-South, North-South and triangular regional and international cooperation (GA resolution 75/152, OP59).

7. Ideally, countries should respond to all questions, but it is fully understood that, given the national context, they might not be able to do so.

8. **Supporting documentation** should be included, if possible.

The companion document attached to this survey provides explanations of some key terms.

The survey should be completed (and submitted/returned), together with relevant attachments by 31 October 2021, by email, to: escap-sdd@un.org or online at: https://tcts-surveys.unog.ch/index.php/974559?newtest=Y&lang=en

Please indicate whether the completed survey may be posted on the public website of the Asia-Pacific Regional Review and Appraisal of MIPAA

Yes: ☒ No: ☐

Please do not hesitate to contact escap-sdd@un.org should you have any questions.

### A. Contact Information

Please identify the office responsible for coordinating the responses to this survey and completing it and include its contact information.

<table>
<thead>
<tr>
<th>Country:</th>
<th>PHILIPPINES</th>
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<tr>
<td>Ministry/Office/Agency:</td>
<td>COMMISSION ON POPULATION AND DEVELOPMENT</td>
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<th>Name contact persons (First and Last)</th>
<th>Title/Position</th>
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<th>Name of ageing focal point (First and Last)</th>
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| Mailing address: | |
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B. Methodology

What methodology was used to complete this survey? Was a bottom-up approach used involving a variety of stakeholders? Was a whole-of-government approach used? (see also companion document) please elaborate:

I. National policy and MIPAA implementation

Coordinating body

1. Does your country have a national coordinating body/committee/agency or national multi-stakeholder forum on population ageing and/or older persons? [Yes ☑] [No □]

1.1 Name of the coordinating body/committee/agency/national multi-stakeholder forum:

In 2019, Congress enacted Republic Act 11350, an Act Creating the National Commission of Senior Citizens (NCSC), providing for its functions, abolishing the National Coordinating Council and Monitoring Board, amending RA 7432. The law mandates the Commission to ensure full implementation of the programs, projects, and policies of the government on senior citizens, including the review and conduct of related studies on the elderly.

1.2 Year of establishment:

Republic Act No. 11350 of 2019 or “An Act Creating the National Commission of Senior Citizens, providing for its functions, Abolishing the National Coordinating Council and Monitoring Board, amending for the Purpose Republic Act No. 7432, as Amended, and Appropriating Funds Therefor was enacted on 25 July 2019.

1.3 Level (ministerial or other):

The National Commission of Senior Citizens is a bureau level organizational unit under the Office of the President. The NCSC was created to ensure the effective implementation of various programs and services, particularly on the socio-economic development of senior citizens and advancing their health and well-being, and ensuring a supportive and enabling environment for the elderly.

1.4 Functions:

The NCSC has the following functions:

a. Ensure the full implementation of laws, policies, and programs of the government pertaining to senior citizens;

b. Review and conduct studies on the same, and recommend appropriate actions to Congress and the President;

c. Formulate policies for the promotion and protection of the rights and well-being of senior citizens;

d. Conduct information, education, and communication campaigns to raise awareness on the rights of senior citizens;

e. Establish and maintain cooperation and consultations with local government units and national government agencies on all matters pertaining to the general welfare of senior citizens;

f. Represent the Philippines in international functions, fora, or conferences on senior citizens and establish and maintain linkages with the international senior citizen or
senior citizen-serving institutions or organizations and counterpart government agencies of other states;

g. Constitute and convene, when necessary, an advisory body to be composed of representatives from the government, non-government organizations, civil society, and the private sector, as the Commission may deem appropriate, to assist in the performance of its functions;

h. Develop appropriate mechanisms and procedures for the selection and nomination of the members of the Commission for appointment by the President; and

i. Perform such other actions and functions for the promotion of the welfare of senior citizens, as may be directed by the President.

1.5 Contact information, including mailing address, telephone/fax, email, and website link:

Contact Person: **Atty. Franklin Quijano**- Chairperson and Chief Executive Officer
Mailing address: Mabini Hall, Malacanang Palace Grounds, San Miguel, Manila
Telephone: 8249-8310
Email: ph.ncsc@gmail.com

### Definition of older persons

2 Please define “older persons” as used in official Government documents (e.g., legislation, census forms, etc.).

Republic Act No. 9994, also known as the "EXPANDED SENIOR CITIZENS ACT OF 2010", defines SENIOR CITIZEN OR ELDERLY as any Filipino citizen who is a resident of the Philippines, and who is **sixty (60) years old or above**. It may apply to senior citizens with "dual citizenship" status provided they prove their Filipino citizenship and have at least six (6) months residency in the Philippines.

Additionally, Republic Act No. 7432, Sec. 2 defines a senior citizen to be at least sixty (60) years old.

For purposes of computation of age dependency ratio and other demographic (age structure) and other statistical analysis, some agencies also classify older persons as those population belonging to 65 years old and above, to conform with international definitions. These are used by agencies including the Philippine Statistics Authority, University of the Philippines Population Institute, Commission on Population and Development and Department of Labor and Employment.

### National legislation, policies and action plans on older persons

3 Does your country have a dedicated legislation, policy and/or action plan to promote and improve the well-being of older persons and protect their rights, such as a “decree or law on older persons”?

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<th>Yes ☑</th>
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3.1 If “yes”, for each of the following questions, please provide information on: (a) name of legislation, policy and/or action plan and year of enactment; (b) description of legislation, policy and/or action plan; (c) main achievements; and (d) financial and human resources allocated to implement.

**POLICIES.** The Philippines has several legislation to promote and protect the rights of older persons. These are the following:
a. The 1987 Philippine Constitution guarantees a strong foundation for national legislations and policies that promote and protect the rights of older persons. In its Declaration of Principles and State Policies, it mandates the State to promote a just and dynamic social order that will ensure the prosperity and independence of the nation and free the people from poverty through policies that provide adequate social services, promote full development, raising standard of living and an improved quality of life. It further states that the family has the duty to take care of its older person members while the State may design a program of social security for them.

b. Republic Act No. 11350 of 2019 or “National Commission of Senior Citizens Act”. This law aims to promote the advocacy of and collaboration between different stakeholders to ensure the effective implementation of various programs and services, particularly on the development of senior citizens and advancing their health and well-being, and ensuring a supportive and enabling environment for the elderly.

c. Republic Act No. 10868 or known as the Centenarian Act of 2016 (An Act Honoring and Granting Additional Benefits and Privileges to Filipino Centenarians, and for Other Purposes). The law provides a “Letter of Felicitation” from the Philippine President and a “Centenarian Gift” in the amount of P100,000.00 to Filipino citizens in the country or abroad who reach the age of 100 years old.

d. Republic Act No. 10911 or known as the Anti-Age Discrimination in Employment Act of 2016 (An Act Prohibiting Discrimination Against Any Individual in Employment on Account of Age and Providing Penalties Therefor). The law promotes equality in employment opportunities and in treatment in the workplace by promoting the employment of individuals based on their competencies, regardless of their age.

e. Republic Act No. 10645 of 2014 (An Act Providing for the Mandatory PhilHealth Coverage for All Senior Citizens, Amending for the Purpose Republic Act No. 7432, as Amended by Republic Act No. 9994, Otherwise Known as the “Expanded Senior Citizens Act of 2010”). The law mandates PhilHealth, the national health insurance program, to cover all senior citizens (not only the indigent).

f. Republic Act No. 9994 or known as the Expanded Senior Citizens Act of 2010 (An Act Granting Additional Benefits and Privileges to Senior Citizens, Further Amending Republic Act No. 7432, as Amended, Otherwise Known as “An Act to Maximize the Contribution of Senior Citizens to Nation Building, Grant Benefits and Special Privileges and for Other Purposes). The law is an amendment of RA 7432 which recognizes the rights of the elderly as well as the role of the family, community and the government in ensuring that they can achieve a more meaningful and productive ageing; broadens coverage of government assistance to senior citizens in the areas of employment, education, health, social services, access to public transport, and incentives. Pursuant to the law, added entitlements are the following (a) social pension for indigent senior citizens amounting to Php 500.00 monthly; (b) mandatory coverage by PhilHealth; and (c) social safety nets in the form of food, medicine, and financial assistance to help cushion the adverse effects of economic crisis, disasters and calamities.

g. Republic Act No. 9710 or The Magna Carta of Women of 2009. The law provides (Sec. 33) for State protection of women senior citizens from neglect, abandonment, domestic violence, abuse, exploitation and discrimination, including ensuring that the special protective mechanisms and support services are instituted.
h. **Republic Act No. 8425 or known as the Social Reform and Poverty Alleviation Act of 1997** (An Act Institutionalizing the Social Reform and Poverty Alleviation Program, Creating for the Purpose the National Anti-Poverty Commission, Defining Its Powers and Functions, and for Other Purposes). The law (Sec. 6) identified senior citizens among the basic sectors that should be represented in NAPC organizational structure, serving as coordinating and advisory body member for the implementation of the Social Reform Agenda (SRA).

i. **Republic Act No. 7876 of 1995 or known as the Senior Citizens Center Act of the Philippines** (An Act Establishing a Senior Citizens Center in All Cities and Municipalities of the Philippines, and Appropriating Funds Therefor). The law mandates the establishment of a senior citizen’s center in all cities and municipalities to carry out important functions for which the centers are established. Specifically these functions (Sec. 5) are the following: (a) identify the needs, trainings, and opportunities of senior citizens in the cities and municipalities; (b) initiate, develop and implement productive activities and work schemes for senior citizens in order to provide income or otherwise supplement their earnings in the local community; (c) promote and maintain linkages with provincial government units and other instrumentalities of government and the city and municipal councils for the elderly and the Federation of Senior Citizens Association of the Philippines and other non-government organizations for the delivery of health care services, facilities, professional advice services, volunteer training and community self-help projects.

j. **Republic Act no. 7432 or An Act to Maximize the Contribution of Senior Citizens to Nation Building, Grant Benefits and Special Privileges and for Other Purposes**, provides for the State’s encouragement of senior citizens in nation-building. This law establishes the identification card system for senior citizens for the availment of special privileges and discounts.

k. **Policies on social pension for older persons**. Republic Act Nos., 8291, 660, 1616, 7699 and 8282 provides for the contributory social pensions for retiring older persons.

l. **Presidential Decree No. 79 (Revised National Population Policy)** mandates the formulation of strategies that facilitates demographic processes including ageing towards the creation of enabling environment for socioeconomic development.

**ACTION PLANS**

a. **The Philippine Plan of Action for Senior Citizens** (PPASC), which was first formulated in 1999 by the Department of Social Welfare and Development (DSWD) through a consultative and participatory process outlines key strategies and activities for the promotion of healthy and active ageing through social protection and support for the rights and welfare and empowerment of senior citizens. It is based on the framework of the Madrid International Plan of Action on Ageing (MIPAA).

b. **Gender Equality and Women’s Empowerment Plan (2019-2025)**. The GEWE Plan 2019-2025 is the gender equality plan of the administration and the third slice-framework plan of the Philippine Plan for Gender-Responsive Development (PPGD) 1995-2025. It adheres to the goals of the Philippine Development Plan (PDP) 2017-2022, the Ambisyon Natin 2040, and the 2030 Agenda for Sustainable Development. It is a reference for agencies for GAD mainstreaming.

   It has seven goals anchored in the PPGD 1995-2025. The seven goals are:
i. Expanded Economic Opportunities for Women
ii. Accelerated Human Capital Development through Investing in GEWE
iii. Significant Reduction in Gender-Based Violence and Enhanced Gender Perspective in Justice, Security, and Peace
iv. Expanded Opportunities for Women Participation Leadership benefits in Disaster Resilience and Humanitarian Action
v. Expanded Opportunities for Women Participation, Leadership and Benefits in Science, Technology, and Innovation, ICT (Information Communication Technology) Infrastructure and Energy
vi. Enhanced Women’s Participation, Leadership Benefits in Politics and Governance Service
vii. Transformed Social Norms and Culture Promote GEWE

C. The Philippine Population Management Program (PPMP) Directional Plan for 2017-2022 which included the pursuance of inclusive development through the provision of interventions for the wellbeing of special population groups including older persons. Initiatives for demographic dividend are also aligned to ensure the potential for its second phase where older persons have greater savings and capacity to invest.

3.1.1 Have gender and disability concerns of older persons been explicitly addressed in the legislation, policy and/or action plan?

The following policies and plans address gender and disability concerns of older persons in the country:

a. Republic Act No. 9710 (Magna Carta of Women of 2009) provides (Sec. 33) for the protection of women senior citizens from neglect, abandonment, domestic violence, abuse, exploitation and discriminations, including ensuring that the special protective mechanisms and support services are instituted.

b. The Gender Equality and Women’s Empowerment Plan (2019-2025) has result matrices being monitored by the Philippine Commission on Women (PCW) following its strategic framework.

c. Republic Act No. 344 (Accessibility Law of 1982) provides for the minimum requirements and standards to make buildings, facilities, and utilities for public use accessible to persons with disability, including older persons who are confined to wheelchairs and those who have difficulty in walking or climbing stairs, among others.

d. Batas Pambansa Bilang 344 (An Act to Enhance the Mobility of Disabled Persons by Requiring Certain Buildings, Institutions, Establishments and Public Utilities to Install Facilities and Other Devices) provides for the minimum requirements and standards to make buildings, facilities, and utilities for public use accessible to disabled persons, including older persons who are confined to wheelchairs and those who have difficulty in walking or climbing stairs, among others. The built environment and transportation shall be designed so that it
shall be accessible and shall ensure safety to disabled people including older persons.

e. Republic Act No. 9442 (Magna Carta for Disabled Persons) aims to provide persons with disability the opportunity to participate fully into the mainstream of society and recognizes that persons with disabilities have the same rights as other people to take their proper place in society, should be able to live freely and as independently as possible, and that their rights “must never be perceived as welfare services”. Significant features of the law include:

a) Discounts from prime commodities and basic necessities and other goods and services - The law mandates the provision of at least 20% discount from all establishments (including hotels and similar lodging establishments, restaurants, and sports and recreational centers) for services and goods utilized and purchased by a person with disability; from purchases of medicine; from admission fees charged by places of leisure and amusement (including theaters, cinema houses and concert halls, circuses, and carnivals); from medical and dental services in government and private facilities; and from air, sea, and land transportation fees.

ii) Educational privileges - The law also mandates the provision of educational assistance to persons with disability for them to pursue primary, secondary, tertiary, post tertiary, as well as vocational or technical education in both public and private schools.

iii) Express lanes privileges - The law mandates further that person with disabilities shall be accorded priority treatment in all private, commercial and government establishment transactions.

iv) Prohibitions of verbal, non-verbal ridicule and vilification against persons with disabilities - The law prohibits any individual, group or community from ridiculing and vilifying persons with disabilities. Such acts are penalized under the law.

3.1.2 Is there a monitoring framework for the implementation of the legislation, policy and/or action plan?

The Philippine Plan of Action for Senior Citizens (PPASC) 2019-2022 includes the development at the national and international scenes and ensures that the programs, services, and activities for the promotion and protection of the welfare and benefits of the Filipino Senior Citizens are continuously implemented and sustained in attaining a healthy, active, and productive population of older persons.

The PPASC has an accompanying Results Monitoring Matrix, which translates the commitments of the various government agencies to the PPASC 2019-2022. The success of the implementation of the plan
relies on the extent of coordination, cooperation, and participation of key government agencies including civil society organizations and non-government organizations.

3.1.3 Are older persons and their organizations included in any monitoring activities of legislation, policy and/or action plan on older persons?  

The various measures that foster inclusion and participation of older persons and their organizations in monitoring activities in relation to policies and action for older persons include:

a) The PPASC is now to be monitored, evaluated, and updated by the NCSC (since its creation). Furthermore, a Regional PPASC shall be submitted every 30th of the November of the preceding year to the DSWD - Policy Development and Planning Bureau for the preparation of the DSWD-RIAC Plan of Action for Senior Citizens.

b) The DSWD is in partnership with the following non-government organizations (NGOs) and people’s organizations (POs) in line with the implementation and monitoring of the programs and services for senior citizens:
   - Coalition of Services for the Elderly
   - Federation of Senior Citizens’ Associations of the Philippines
   - NAPC-Senior Citizens Sectoral Council
   - Coalition of Older Persons’ Associations of the Philippines
   - Alliance of Retired Postal Employees and Senior Citizens

c) Section 7 of Republic Act 11350 or the Creation of National Commission of Senior Citizens stated that the Commission shall “constitute and convene, when necessary, an advisory body to be composed of such representatives from the government, non-government organizations, civil society, and the private sector, as the Commission may deem appropriate, to assist in the performance of its functions.”

3.1.4 Does the Government foster effective consultation with, and involvement of, older persons and/or their representatives at the national, regional and local levels in designing policies? (SDG 16.7.2)

The DSWD conducts public consultations with concerned stakeholders to solicit inputs/comments to the policies formulated at the regional and local levels for effective decision-making which in turn would enhance its implementation.

Republic Act No. 7876 or the Creation of Senior Citizens Center of The Philippines (1995) mandates the establishment of a center for senior citizens in the local government units (LGUs) to serve as a venue for the recreational, educational, health and social programs designed for the full enjoyment and benefit of the senior citizens. The center is the extension of the DSWD Field Offices and shall carry out the following functions: (a) Identify the needs, trainings, and opportunities for senior citizens; (b) Initiate, develop and implement
productive activities and work schemes for senior citizens; (c) Promote and maintain linkages with other government and non-government organizations and (d) exercise other functions which are necessary to carry out the purpose for which the centers were established.

| 3.1.5 | Does the Government foster work and volunteering of younger and older persons in intergenerational settings? | Yes ☒ | No ☐ |

The DSWD issued Administrative Order No. 10 series of 2010 “Omnibus Guidelines on the DSWD National Volunteer Service Program” to establish an organized approach of providing opportunities for individuals and groups to extend voluntary service in the implementation of social welfare and development programs.

DSWD also implemented the Long Term Care Program for Senior Citizens (LTCSC) that encourages interaction between younger and older generations under the following activities:

**Volunteer Resource Services (VRS).** This initiative encourages and mobilizes individuals, interested parties, and intermediaries, as well as able-bodied senior citizens to contribute their time, skills, and capabilities to participate in the delivery of programs/services for the benefit of impoverished senior citizens. It has the following components:

a. **Friendly Visitor Service.** This provides opportunities for interested individuals, organizations, active members of senior citizen’s organizations and other sectors/members of nearby communities to volunteer, visit, befriend, advise, and assist senior citizens who are either living on their own or in the residential care or alternative care.

b. **Volunteer Companion Service.** This encourages volunteers to escort / accompany senior citizens who would need to go to the hospital, church, malls, and other public places. This service taps the National Student Training Program (NSTP) students as volunteers. DSWD provides the orientation and basic training for the volunteer students on understanding the dynamics, behavior of senior citizens, the aging process and the benefits of volunteering.
3.1.6 Does the Government offer opportunities for intergenerational contact and exchange?

The DSWD has the following pilot programs:

a. **Home Care Support Services for Senior Citizens** - a community-based project that involves members of the families, older persons and the community/neighbourhood to take effective steps to enhance their caregiving capability to the sick, abandoned and neglected senior citizens.

b. **Intergenerational (Under LTCSC)** - This provides opportunities for the young and old to interact and mutually learn from each other. The senior citizens may act as resource persons for the younger generation, sharing their vast experiences, learnings and insights through storytelling and testimonials. This can be conducted during day care activities, parent’s meetings, youth assemblies, etc. The LGUs and OSCA may have a memorandum of agreement with the local school board to allow the volunteer senior citizens to act as resource persons on one subject or topic in elementary/high school or to mentor pupils who are slow learners. Likewise, the City/Municipal Social Welfare and Development Officer will identify Day Care Center/s where older persons can volunteer.

c. **Reporting System and Prevention Program for Elderly Abuse Cases (ReSPPEC)** - is a community-based project which strengthens partnership and networks between and among the elder sectors, stakeholders and partners to ensure holistic and efficient delivery of services to respond to elder abuse cases.

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3.1.7 Does the Government encourage the private sector and non-profit organizations to involve older persons in planning and design of goods and services?

DSWD encourages non-profit organizations to involve older persons in planning and design of goods and services through the previous NCMB. This is reinforced by RA 11350 which mandated the NCSC to encourage the private sector and non-profit organizations to involve older persons in planning and design of goods and services.

Under the Technical Vocational Education and Training (TVET) Programs of the Technical Education and Skills Development Authority (TESDA), vocational and technical skills training are provided to older persons within their communities. These are community-based programs that are primarily addressed to the poor and marginal groups, those who cannot access, or are not accessible by formal training provisions. The program goes further than just mere skills training provision.

It is purposively designed to catalyze the creation of livelihood enterprises that shall be implemented by the trainees, immediately after the training. Likewise, it is designed to assist partner agencies...
such as LGUs, NGOs, people organizations and other agencies/organizations with mission to help the poor get into productive undertakings to help themselves and their communities.

3.2 If “no”, are there any efforts towards the development and adoption of such a legislation, policy and/or action plan? Please elaborate:  
Yes ☐ No ☐

**Challenges to legislation/policies**

4 In the development and implementation of legislation with a focus on older persons, has the Government encountered any of the following challenges?  
[1 = never, 2 = sometimes, 3 = always]

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<th>Challenge</th>
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<th>3</th>
<th><strong>If answer 2 or 3, have you addressed the challenge? Please elaborate:</strong></th>
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<tr>
<td>4.1 Lack of human resources dedicated to population ageing issues</td>
<td>☐</td>
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<td>With the gradual organization of the NCSC, adequate number of staff and other human resource needed including social and health workers will be addressed through appropriate strategies.</td>
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<td>4.2 Lack of financial resources dedicated to population ageing issues</td>
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<td>4.3 Lack of data on older persons and/or population ageing at the national and/or subnational levels</td>
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<td>☒</td>
<td>☐</td>
<td>The Philippine Statistics Authority (PSA) ensures that censuses, national surveys and other statistical systems are age-disaggregated to provide data on ageing. The ongoing National ID system or Philsys Law (RA 11055) aims to establish a standard identification system that shall serve as basis for accessing public benefits. The NHTS-PR or Listahanan is an information management system that identifies who and where the poor are nationwide. This makes available to NGAs and other social protection stakeholders a database of poor households as basis in identifying potential beneficiaries. The beneficiaries of the Social Pension for Indigent Senior Citizens emanated from the system. The data is updated every four (4) years per EO 867. The system barely tracks movement of one person to another area. The PPASC for 2019-2022 emphasizes the availability of complete, updated and disaggregated data on older persons to help the program planners understand, appreciate, and develop programs and services that are tailor fit to the sector’s changing needs.</td>
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Various surveys such as the Longitudinal Study of Ageing and Health in the Philippines being done by UP Population Institute in partnership with Economic and Research Institute for ASEAN and East Asia (ERIA) and other similar studies are being undertaken to provide needed information for planning and policy development.

The POPCOM has also instituted the development of Demographic Vulnerability Tool (Tool) which include information on demographic data among older persons living alone as priority group in addressing the COVID-19 pandemic.

| 4.4 Lack of overall political support | ☒ | ☐ | ☐ |
| 4.5 Lack of cross-ministerial coordination on population ageing issues | ☒ | ☐ | ☐ |
| 4.6 Lack of international support and cooperation on population ageing issues | ☒ | ☐ | ☐ |
| 4.7 Lack of public awareness and understanding of population ageing issues | ☒ | ☐ | ☐ |
| 4.8 A bottom-up approach to population ageing not followed (e.g., involvement of older persons) | ☒ | ☐ | ☐ |
| 4.9 Misconceptions and stereotypes about population ageing and older persons | ☐ | ☒ | ☐ |

While the country has an overall enabling and respectful environment for older persons, there remain some stereotypes and discriminatory practices among older persons particularly in the workplace, recruitment and hiring.

**Priorities of MIPAA “issues”**

5. Which of the “issues” listed under the three priority directions of MIPAA has your Government prioritized (for a list of “issues”, see the Annex)?

*please elaborate:*

The Philippine Plan of Action for Senior Citizens (PPASC) 2019-2022 includes strategies and programs pertaining to the following major areas: i) older persons and development, ii) advancing health and wellbeing into old age, iii) ensuring enabling and supportive environments for older persons, and iv) implementation of follow-up of various strategies.
II. Older persons and development

**Instruction:** For the following questions, please provide: (a) the name of the legislation, policy and/or action plan; (b) date of implementation and time frame; (c) its main elements; and (d) its main achievements. Please elaborate and please attach copies of relevant documents or provide their link.

### Active participation

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<td>6</td>
<td>Has the Government undertaken any measures to promote the active participation of older persons in society and in decision-making processes at all levels? <em>(SDG 5.b.1; SDG 11.3.2; SDG 17.8.1)</em></td>
<td>Yes ☒ No ☐</td>
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**Republic Act No. 7432** takes into account the role of senior citizens in nation building and that of their families and communities in supporting them. The law creates the Office of Senior Citizens’ Affairs (OSCA) to reinvigorate their participation in social, political, economic and cultural life.

The OSCA has the following functions:

a. To plan, implement, and monitor yearly work program relative to RA 9994 *(An Act Granting Additional Benefits and Privileges to Senior Citizens)*;

b. To draw up a list of available and required services which can be provided by senior citizens;

c. To maintain and regularly update on a quarterly basis the list of senior citizens and to issue national individual identification cards, free of charge, which shall be valid anywhere in the country;

d. To serve as a general information and liaison center for senior citizens;

e. To monitor compliance of the provisions of RA 9994 particularly the grant of special discounts and privileges to senior citizens;

f. To report to the mayor, any individual, establishments, business entity, institutions, or agency found violating any provision of RA 9994;

g. To assist the senior citizens in filing complaints or charges against any individual, establishment, business entity, institution, or agency refusing to comply with the privileges under RA 9994 before the Department of Justice, the Provincial Prosecutor’s Office, the regional or the municipal trial court, the municipal trial court in cities, or the municipal trial court.

Other organizations that contribute to the political participation of senior citizens include:

c. National Anti-Poverty Commission - Senior Citizen Basic Sector
d. Senior Citizen Party List in Congress
e. Congressional committees - Philippine House Special Committee on Senior Citizens
f. Office of Senior Citizen Affairs per LGU
g. Federation of Senior Citizen’s Association of the Philippines
### h. Coalition of Services of the Elderly

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<th>7</th>
<th>Has the Government taken measures to facilitate older persons’ participation in physical activity? (see also companion document)</th>
</tr>
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<tbody>
<tr>
<td><strong>Yes ☒</strong></td>
<td><strong>No ☐</strong></td>
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</table>

**Proclamation No. 1159 or the Barangay HATAW Fitness and Sports Day.** This special event aims to promote a healthy lifestyle among older persons by participating in regular exercise, physical fitness, sports and recreation activities. This is effectively realized by integrating the “EDIF Exercise” activity of the Hataw Bayan Hataw program of the Department of Health (DOH) with the community-based physical fitness and sports programs of the Department of the Interior and Local Government (DILG)/Local Government Units (LGUs). Other relevant programs include:

- **a. DOH Walk for Life –** held during Elderly Filipino Week Celebration (first week of October each year)
- **b. Presidential Proclamation No. 470, Series of 1994 declares the First Week of October of every year as Elderly Filipino Week (Linggo ng Katandaang Filipino) Celebration in which physical exercises and other similar activities are implemented.**
- **c. The various organizations of senior citizens at the local and community levels are likewise implementing different physical exercises among older persons to promote their wellbeing.**

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<th>8</th>
<th>Do older persons’ organizations exist in your country? How many are active and what types of organizations are these?</th>
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<tbody>
<tr>
<td><strong>Yes ☒</strong></td>
<td><strong>No ☐</strong></td>
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Some of the organizations for older persons include:

- Federation of Senior Citizens Association of the Philippines (FSCAP) – CSO
- Coalition of Services of the Elderly (COSE)
- Confederation of Older Persons Association of the Philippines (COPAP) – CSO
- Other civic organizations which are predominantly constituted by older persons

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<th>9</th>
<th>Does the Government provide any financial, technical or policy support to these organizations?</th>
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<tr>
<td><strong>Yes ☒</strong></td>
<td><strong>No ☐</strong></td>
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The heads of Office of Senior Citizens Affairs (OSCA) at the local level are entitled to receive an honorarium of an amount equivalent to at least Salary Grade 10 to be approved by the local government unit concerned. For 3rd to 6th class local government units, their respective Sanggunians may provide for a reasonable and practicable remuneration for the OSCA head.

Based on RA 9257, the Office of the Mayor shall exercise supervision over the OSCA relative to their plans, activities and programs for senior citizens. The OSCA shall work together and establish linkages with accredited NGOs, POs, and the barangays in their respective areas.
RA 9336 or “The General Appropriations Act for Fiscal Year 2006” mandates all government agencies, and state universities and colleges to set aside at least one percent (1%) of their Fiscal Year budget appropriations to finance the implementation of the Philippine Plan of Action for Older Persons, 2005-2009.

**Work**

| 10 | Has the Government engaged in actions to support older persons’ participation in income-generating work, as long as older persons want and are able to do so? *(SDG 8.5.1; SDG 8.5.2)* | Yes ☒  | No ☐ |

As provided for in RA No. 9994:

**Section 5. Government Assistance**

**a. Employment**

Senior citizens who have the capacity and desire to work, or be re-employed, shall be provided information and matching services to enable them to be productive members of society. Terms of employment shall conform with the provisions of the Labor Code, as amended, and other laws, rules, and regulations.

Private entities that will employ senior citizens as employees shall be entitled to an additional deduction from their gross income, equivalent to fifteen percent (15%) of the total amount paid as salaries and wages to senior citizens, subject to the provision of Section 34 of the NIRC, as amended: Provided, however, that such employment shall continue for a period of at least six (6) months: Provided, further, that the annual income of the senior citizen does not exceed the latest poverty threshold as determined by the National Statistical Coordination Board (NCSB).

The Department of Labor and Employment (DOLE), in coordination with other government agencies such as, but not limited to, the Technology and Livelihood Resource Center (TLRC) and the Department of Trade and Industry (DTI), shall assess, design, and implement training programs that will provide skills and welfare or livelihood support to senior citizens.

**Under the Anti-Age Discrimination in Employment Law, Sec 4, Republic Act 10911:**

It shall be unlawful for an employer to:

- *(3) Decline any employment application because of the individual’s age;*
- *(4) Discriminate against an individual in terms of compensation, terms and conditions or privileges of employment on account of such individual’s age;*
(5) Deny any employee’s or worker’s promotion or opportunity for training because of age;  
(6) Forcibly lay off an employee or worker because of old age; or  
(7) Impose early retirement on the basis of such employee’s or worker’s age.

DOLE Department Order No. 173, Series of 2017 or the Revised Guidelines in the DOLE Integrated Livelihood Program and Emergency Employment Program (DILEEP) seeks to contribute to poverty reduction and reduce the vulnerability to risks of the working poor, vulnerable and marginalized workers either through emergency employment, and promotion of entrepreneurship and community enterprises.

Under the DOLE Integrated Livelihood Program (DILP) the eligible beneficiaries include:

- Senior Citizens
- Persons with Disability
- Marginalized and landless farmers
- Indigenous peoples
- Marginalized fisher-folk

Republic Act 7432 (Section 3) provides that any qualified senior citizen as determined by the Office for Senior Citizen Affairs (OSCA) may render his/her services to the community which shall consist of, but not limited to, any of the following:

- a) Tutorial and/or consultancy services;  
- b) Actual teaching and demonstration of hobbies and income  
- c) generating skills;  
- d) Lectures on specialized fields like agriculture, health,  
- e) environmental protection and the like;  
- f) The transfer of new skills acquired by virtue of their training  
- g) mentioned in Section 4, paragraph d;  
- h) Undertaking other appropriate services as determined by the  
- i) Office of Senior Citizens Affairs (OSCA) such as school traffic guide, tourist aid, pre-school assistant, etc.

In consideration of the services rendered by the qualified elderly, the Office for Senior Citizens Affairs (OSCA) may award or grant benefits or privileges to the elderly, in addition to the other privileges provided for under Section 4.

10.1 Has the Government instituted a statutory retirement age? If “yes”, what is it (women/men)?

| Yes ☒ | No ☐ |

Republic Act 7641: An Act Amending Article 287 of Presidential Decree No. 442, as amended, otherwise known as the Labor Code of the Philippines, by Providing for Retirement Pay to Qualified Private Sector Employees in the Absence of Any Retirement Plan in the Establishment
Article 287. In the absence of a retirement plan or agreement providing for retirement benefits of employees in the establishment, an employee upon reaching the age of sixty (60) years or more, but not beyond sixty-five (65) years which is hereby declared the compulsory retirement age, who has served at least five (5) years in the said establishment, may retire and shall be entitled to retirement pay equivalent to at least one-half (1/2) month salary for every year of service, a fraction of at least six (6) months being considered as one whole year.

Republic Act 8291: An Act Amending Presidential Decree No. 1146, as Amended, Expanding and Increasing the Coverage and Benefits of the Government Service Insurance System, Instituting Reforms therein and for Other Purposes

Section 14 (b) “Unless the service is extended by appropriate authorities, retirement shall be compulsory for an employee of sixty-five (65) years of age with at least fifteen (15) years of service: Provided, that if he has less than fifteen (15) years of service, he may be allowed to continue in the service in accordance with existing civil service rules and regulations.

Members of the Philippine Armed Forces, the Philippine Coast Guard, the Philippine National Police, the Bureau of Fire Protection, and the Bureau of Jail Management and Penology are required to retire once they reach age 55.

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<th>10.2</th>
<th>Does the Government provide incentives for longer working life opportunities and more flexible retirement choices? please elaborate with data, as appropriate:</th>
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<tr>
<td>Yes ☒ No ☐</td>
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</table>

Under RA 9257, the Department of Labor and Employment (DOLE), in coordination with other government agencies such as, but not limited to, the Technology and Livelihood Resource Center (TLRC) and the Department and Trade and Industry (DTI), shall assess, design and implement training programs that will provide skills and welfare or livelihood support for senior citizens.

DSWD Long Term Care Program for Senior Citizens (LTCSC). Under 1.2 Community-Based Services for Senior Citizens and their Families:

(b) Senior Citizens Center. This refers to a day center facility with recreational, educational, health and socio-cultural programs designed for the full enjoyment and benefit of the senior citizens in the city or municipality. It shall also serve as a facility for the provision of community-based educational services such as the following:

- Learning Network of Senior Citizen
- Sheltered Workshop for Senior Citizens
RA No. 7876 of 1994 or an Act Establishing a Senior Citizens Center in All Cities and Municipalities of the Philippines, and Appropriating Funds Therefor. The law was enacted in response to the declared policy of the State to provide adequate social services for senior citizens and an improved quality of life to all. This mandated the establishment of a Senior Citizens Center in all cities and municipalities to respond to the older persons' socialization and interaction needs as well as to serve as a venue for the conduct of other meaningful activities. The DSWD in coordination with the LGUs, DOH and other government agencies, FSCAP and other NGOs shall provide the necessary services to include-social and recreational activities, health and personal care services, spiritual services, livelihood services and volunteer resource services.

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<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<td>10.3 Does the Government provide work-related training and learning opportunities for older workers?</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td><em>please elaborate with data, as appropriate:</em></td>
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<tr>
<td>Section 4 of the Implementing Rules and Regulations (IRR) of Republic Act No. 10911 or the Anti-Age Discrimination in Employment Act states that employers are prohibited to discriminate the employment of an applicant and a worker in terms of age through any forms of publication or advertisement relating to employment, or decline employment application, promotion, or training opportunities due to the individual's age. The law further mandates the conduct studies and researches on minimizing impediments to the employment of older persons, and furnish such information to employers, labor groups, and the general public; and to promote programs, in coordination with public and private agencies, that will further enhance the knowledge and skills of every individual regardless of age.</td>
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<tr>
<td>10.4 Does the Government recognize the benefits of increased work experience with age in the labour market?</td>
<td>Yes</td>
<td>No</td>
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<td><em>please elaborate with data, as appropriate:</em></td>
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<tr>
<td>Various policies and plans for older persons, as indicated above, promoted continuing employment of older persons to maximize their contribution to the development of their community and the institutions they belong to. This is in recognition of their wisdom gained through increased work experience.</td>
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<td>10.5 Has the Government implemented any measures to better utilize older persons' work experience?</td>
<td>Yes</td>
<td>No</td>
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<td><em>please elaborate with data, as appropriate:</em></td>
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<tr>
<td>Republic Act No. 10911 or the Anti-Age Discrimination in Employment Act promotes as a States policy the promotion of employment of individuals on the basis of their abilities, knowledge, skills and qualifications rather than age. Many public and private institutions in the country also employ older persons as consultants and advisers in recognition of their work experience.</td>
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The Circular No. 11, s.2005 (TVET Guidelines on Republic Act 9257) issued on March 30, 2005 by the Technical Education and Skills Development Authority (TESDA) provides for the mechanism for senior citizens to render services to the community and contribute to nation building which shall consist of, but not limited to, any of the following:

i. Transfer of new skills acquired
ii. Tutorial and/or consultancy services
iii. Actual teaching and demonstration of hobbies and income generating skills
iv. Lectures on specialized fields
v. Acting as resource persons

10.5.1 Has the Government implemented any measures to support employers to retain or rehire older persons?

*please elaborate with data, as appropriate:*

Republic Act No. 10911(Anti-age Discrimination In Employment Act) prohibits the following unlawful act among employers:

a) Decline any employment application because of the individual’s age;

b) Discriminate against an individual in terms of compensation, terms and conditions or privileges of employment on account of such individual's age;

c) Deny any employee’s or worker’s promotion or opportunity for training because of age;

d) Forcibly lay off an employee or workers because of old age; or

e) Impose early retirement on the basis of such employee’s or worker’s age.

RA 9257 also supports private entities that will employ senior citizens as employees through additional deduction from their gross income, equivalent to fifteen percent (15%) of the total amount paid as salaries and wages to senior citizens subject to the provision of Section 34 of the National Internal Revenue Code, as amended: provided, however, that such employment shall continue for a period of at least six (6) months: Provided, further, That the annual income of the senior citizen does not exceed the poverty level as determined by the National Economic and Development Authority (NEDA) for that year.

10.5.2 Has the Government promoted age-friendly workplaces through policies and training on age inclusion or unconscious bias?

*please elaborate with data, as appropriate:*

Republic Act No. 10911 or the Anti-Age Discrimination in Employment Act promotes as a State’s policy the promotion of employment of individuals on the basis of their abilities, knowledge, skills and qualifications rather than age. The law specifically prohibits and penalizes the following acts:
a) Printing or publishing, or causing to be printed or published, in any form of media, including the internet, any notice of advertisement relating to employment suggesting preferences, limitations, specifications, and discrimination based on age;
b) Requiring the declaration of age or birth date during the application process;
c) Declining any employment application because of the individual's age;
d) Discriminating against an individual in terms of compensation, terms and conditions or privileges of employment on account of such individual's age;
e) Denying any employee's or worker's promotion or opportunity for training because of age;
f) Forcibly laying off an employee or worker because of old age;
g) Imposing early retirement on the basis of such employee's or worker's age;
h) Denying membership of any individual in labor unions because of individual's age;

10.6 Has the Government undertaken measures to close gender pay or pension gaps?

*please elaborate with data, as appropriate:*

The Philippines ratified the ILO Convention No. 100 or the "Equal Remuneration Convention, 1951" particularly supporting commitments to close gender pay or pension gaps. Locally, the country has instituted the following policies for this purpose:

a) **Article 133 of the Philippine Labor Code** prohibits and penalizes any employer to discriminate against any woman employee with respect to terms and conditions of employment solely on account of her sex. It considers as act of discrimination the payment of a lesser compensation, including wage, salary, or other form of remuneration and fringe benefits, to a female employee as against a male employee, for work of equal value.

b) **Republic Act No. 6725** strengthens the prohibition on discrimination against women with respect to terms and conditions of employment.

c) **Republic Act No. 6727 or the Wage Rationalization Act** and its Implementing Rules and Regulations provides as a State's policy to rationalize the fixing of minimum wages and to promote productivity-improvement and gain-sharing measures to ensure a decent standard of living for the workers and their families; to guarantee the rights of labor to its just share in the fruits of production; to enhance employment generation in the countryside through industry dispersal; and to allow business and industry reasonable returns on investment, expansion and growth.
10.7 In addition to closing the gender pay or pension gap, has the Government accounted for the special situation of older women in work-related policies?

The GEWE Plan 2019-2025 is the gender equality plan of the administration and the third slice-framework plan of the Philippine Plan for Gender-Responsive Development (PPGD) 1995-2025. It adheres to the goals of the Philippine Development Plan (PDP) 2017-2022, the Ambisyon Natin 2040, and the 2030 Agenda for Sustainable Development. It is a reference for agencies for GAD mainstreaming.

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11. Has the Government implemented any measures to address challenges, such as isolation and marginalization, of older persons in (a) rural or remote areas, and (b) urban areas, including slums? (SDG 9.1.1; SDG 11.1.1) Please elaborate with data, as appropriate.

The policies and interventions mentioned above are universally implemented at all levels, regions and geographic areas. In addition, some of the prominent programs being implemented to promote the wellbeing of older persons especially in geographically isolated areas or rural areas and even in urban poor communities include the following:

a. The Special Area for Agricultural Development (SAAD) is a locally-funded program of the Department of Agriculture (DA), intended to help alleviate poverty among the marginalized sectors – agriculture and fishery. It provides for the conduct of social preparation activities that empowers marginalized farmers and fisher folk most of whom are older persons. It also aims to intensify production and livelihood interventions responsive to assessed needs and to foster partnerships with the local government units, private sector, and other government agencies and stakeholders to support agricultural development in the rural areas.

b. The DOLE Integrated Livelihood Program and Emergency Employment Program (DILEEP) seeks to contribute to poverty reduction and reduce the vulnerability to risks of the working poor, vulnerable and marginalized workers either through emergency employment, and promotion of entrepreneurship and community enterprises. The program specifically identified seniors’ citizens among the eligible beneficiaries.

c. Republic Act 8425 or the Social Reform and Poverty Alleviation Act institutionalizes the Social Reform Agenda (SRA) by creating the National Anti-Poverty Commission (NAPC) and including the elderly among the basic and disadvantaged groups that should be prioritized by the Comprehensive Integrated Delivery of Social Services (CIDSS) -
one of the government’s flagship social protection programs. The SRA shall focus on the following sector-specific flagship programs:

i. For farmers and landless rural workers — agricultural development;
ii. For the fisher folk — fisheries and aquatic resources conservation, management and development;
iii. For the indigenous peoples and indigenous communities — respect, protection and management of the ancestral domains;
iv. For workers in the informal sector — workers’ welfare and protection;
v. For the urban poor — socialized housing; and
vi. For members of other disadvantaged groups such as the women, children, youth, persons with disabilities, the elderly, and victims of natural and man-made calamities — the Comprehensive Integrated Delivery of Social Services (CIDSS).

d. The DSWD and local government units also provide various social protection services for older persons to include:

i. Residential care services (e.g., Golden Acres, Home for the Elderly, Home for the Aged);
ii. Facility-based and community-based health and social services in all local government units;
iii. Home care support services;
iv. Social pension for indigent senior citizens;
v. Social protection services and assistance for older persons during crisis and emergency situations;
vi. Other innovative local government programs for senior citizens (e.g., provision of allowances, discounted fees for recreational activities, etc.)

**Education, training**

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<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>12</td>
<td>Has the Government supported older persons’ access to knowledge, education and training? (SDG 4.3.1; SDG 4.4.1; SDG 4.6.1)</td>
<td>Yes ☒ No ☐</td>
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The 1987 Constitution of the Philippines (Article XIV, Section 2, paragraph 1) declares that the State shall establish, maintain and support a complete, adequate and integrated system of education relevant to the needs of the people and society. It further encourages "non-formal, informal and indigenous learning systems as well as self-learning, independent and out-of-school study programs particularly those that respond to community needs.” Other statutory actions and initiatives to promote access to knowledge, education and training among older persons include:

a) RA 9994 Article 11 (Section 2) exempts senior citizens from training fees for socio-economic programs conducted by private and government agencies subject to the guidelines to be issued
within thirty days from effectivity by the Department of Trade and Industry (DTI), DOLE, DA, TESDA, Department of Science and Technology (DOST). The law also provides for educational assistance to senior citizens to pursue post-secondary, post tertiary, as well as vocational or technical education in both public and private schools through provision of scholarships, grants, financial aid, subsidies, and other incentives to qualified senior citizens, including support for books, learning materials, and uniform allowance, to the extent feasible: Provided, that senior citizens shall meet minimum admission requirements.

b) The **Alternative Learning System (ALS) of the Department of Education (DepEd)** established by Republic Act 9155 (Governance of Basic Education Act) provides a parallel learning system as practical option to the existing pattern of the education system. The ALS provides opportunities for out-of-school youth and adult (OSYA) learners regardless of age to develop basic and functional literacy skills, and to access equivalent pathways to complete basic education.

c) More specifically, **Republic Act 11510 (Alternative Learning System Act)** defines "Adults" as Filipinos aged 18 years old and above who were not able to begin or continue basic elementary or secondary education in formal school. Hence, senior citizens are encouraged to pursue their continuing education through the ALS.

d) The **Commission on Higher Education (CHED) Scholarship Programs (CSPs)** included as beneficiaries those who are qualified and deserving Filipino students, preferably those belonging to the special group of persons such as underprivileged and homeless citizens, persons with disability (PWDs), solo parents and/or their dependents, senior citizens, and indigenous people.

e) **Republic Act No. 9257** mandated the DepEd, Technical Education and Skills Development Authority (TESDA) and CHED, in consultation with non-governmental organizations (NGOs) and people’s organizations (POs) for senior citizens, shall institute a program that will ensure access to formal and non-formal education.

f) **The DSWD Long Term Care Program for Senior Citizens (LTCSC)**, also includes the institution and operation of community-based services for senior citizens and their families such as the Senior Citizens Center, a day center facility with recreational, educational, health and socio-cultural programs designed for the full enjoyment and benefit of the senior citizens in the city or municipality. The center also serves as a facility for the provision of community - based educational services such as the following:

i. **Sheltered Workshop for Senior Citizen.** This is a facility designed to provide work training and productive employment for senior citizens by producing and selling goods or services.
The funds for its operationalization are sourced out from the LGUs and relevant government agencies. This is to enable them to realize their aspirations and for them to become assets to their families and community due to their contributions to society. The workshop activities include the following:

i) ** Provision of skills training.** This provides senior citizens with opportunities, productive activity, as well psychological and vocational guidance. This will be spearheaded by the C/MSWDQ and implemented by the OSCA, in coordination with other concerned government agencies (e.g., TESDA and DOLE) and NGOs.

ii) **Livelihood program.** The senior citizens will be provided with start-up capital for livelihood activities and allowance on the course of the livelihood training program.

g) The TESDA TVET Guidelines on Republic Act No. 9257 provides Senior Citizens with the following privileges and strategies:

i. Exemption from training fees for socio-economic programs conducted by private and government agencies. Socio-economic programs shall refer to livelihood programs, short-term programs and community-based programs;

ii. Educational assistance to be granted to senior citizens to pursue vocational or technical education in both public and private schools, through provision of scholarships, grants financial aid, subsidies and other incentives to qualified senior citizens, including support for books, learning materials, and uniform allowance, to the extent feasible. Provided, that senior citizens shall meet the minimum admission requirements corresponding the programs;

iii. Rendition of services to the community and contribute to nation building which shall consist of, but not limited to, any of the following:

   i) Transfer of new skills acquired
   ii) Tutorial and/or consultancy services
   iii) Actual teaching and demonstration of hobbies and income generating skills
   iv) Lectures on specialized fields
   v) Acting as resource persons

12.1 Does the Government pursue a life-course approach to knowledge, education, training and work, such as lifelong learning opportunities?  

The government pursues life-course approach to knowledge, education, training and work through the following:

Yes ☒ No ☐
a. In pursuant of RA No. 9257, the CHED Study Grant Program for Senior Citizens (CSGPSC) provides study grant for senior citizens for education program at a selected State University or College.

b. Republic Act No. 10911 or the Anti-Age Discrimination in Employment Act mandated the DOLE to:

   i. Conduct studies and researches on minimizing impediments to the employment of older persons, and furnish such information to employers, labor groups, and the general public; and

   ii. Promote programs in coordination with public and private agencies that will further enhance the knowledge and skills of every individual regardless of age.

c. TESDA has intensified the implementation of various programs for the vulnerable groups, which include senior citizens, PWDs, people deprived of liberty, rebel returnees, displaced workers and farmers and other marginalized sectors. Focus is specifically given for adult learners to promote lifelong learning (LLL) as expressed in TESDA's National Technical Education and Skills Development Plan (NTESDP) 2018-2022. The NTESDP integrated the LLL principles through its strategic responses of Agility, Scalability and Flexibility and Sustainability through flexible systems of qualification standards and training regulations, recognition of prior learning and portfolio assessment.

   During the pandemic, the TESDA Online Program serves as a powerful tool to various clienteles for productivity and livelihood. Since the 'one-size-fits-all' approach is not possible due to geographical differences, TESDA is also currently pursuing an area-based and demand driven policy direction for the TVET sector to offer relevant and responsive programs according to the needs of the area and the industry. Likewise, micro-credentialing is being considered and studied in view of LLL, which (if seen as viable) will be applied to Senior Citizen learners.

12.2 Has the Government undertaken measures to promote digital literacy among older persons? Are there any programmes which encourage and support intergenerational exchange on digital literacy? please elaborate with data, as appropriate:

   To promote digital literacy among older persons, the following initiatives were pursued:

   a. Tech4ED of the Department of Information, Communication and Communication (DICT). The Technology Empowerment for Education, Employment, Entrepreneurship, and Economic Development (Tech4ED) provides ICT-enabled services to communities that have minimal access or no access to ICT and

   Yes ☒ No ☐
government services. As a national digital inclusion initiative, the Tech4ED Program caters to disadvantaged communities such as rural and urban poor, PWD’s, and indigenous communities. It aims to:

i. establish sustainable Tech4ED centers;

ii. provide and develop innovative ICT-enabled services and content for the socio-economic development of communities, especially the unserved and underserved communities;

iii. ensure availability of competent Tech4ED knowledge workers; and

iv. increase awareness, appreciation of and support for the Tech4ED Project.

b. The TESDA Online Program (TOP) allows all of its learners, including Senior Citizens, to take up TVET courses at home. The TOP was endorsed further by the issuance of TESDA Circular 062, s. 2020, also known as the “Guidelines in Implementing Flexible Learning in TVET”, as part of the agency’s efforts to help Filipinos amidst the ongoing COVID-19 Pandemic. The program is seen as crucial for helping the agency realize its direction to “adopt innovative and flexible learning in continuing the delivery of TVET, making TVET resilient against educational disruptions and responding to the challenges of the digital economy.”, which includes fulfilling the needs of senior citizens in these times.

Income security, social protection (intergenerational)

| 13 | Has the Government implemented any of the following measures concerning income security, social protection and social security? (SDG 1.3.1; SDG 1.a.2; SDG .3.2; SDG 8.3.1; SDG 8.10.2; SDG 10 | Yes ☒ No ☐ |

The following measures are being implemented by the country to ensure income security, social protection and social security of older persons:

a. The Social Pension for Indigent Senior Citizens. The Social Pension for Indigent Senior Citizens (SPIC) Sub-Program being implemented by DSWD in partnership with the LGUs is the additional government assistance amounting to Five Hundred Pesos (P500.00) as monthly stipend, being provided in a semestral basis through the most cost effective and efficient delivery schemes to augment the daily subsistence and other medical needs of indigent senior citizens who are frail, sickly, or with a disability, without regular income or support from family and relatives; and no pension from SSS, GSIS, etc.

In CY 2020, out of the 3,789,874 target indigent senior citizens, 3,266,029 or 86.18% have received their social pension stipend. The unserved beneficiaries can be attributed to the stringent protocols enforced with the implementation of community
quarantine that affected the operations of the program, both at the FOs and LGUs level. Direct payout to the beneficiaries through the FOs Special Disbursing Officers (SDOs) continued while the Transfer of Funds to LGUs has been adopted to fast track the distribution of stipend.

As of 31 December 2020, 97.51% or Php22,575,467,905.12 out of the Php23,152,818,946.00 fund allocation has been utilized by the program.

b. **The Centenarian Act of 2016.** Through Republic Act 10868 or the “Centenarian Act of 2016”, all Filipinos who have reached one hundred years old and above, whether residing in the Philippines or abroad will be given with Centenarian gift amounting to P100,000.00 and Letter of Felicitation by the National Government.

As of December 2020 data, for the Centenarian Program, there are 952 targeted beneficiaries for 2020 with additional 33 centenarians to be provided with Centenarian Gift funded through the 2019 continuing Fund. As of the December 2020, 985 beneficiaries were provided with P100,000.00 centenarian gift or 100% of the targeted number of beneficiaries.

The distribution of the centenarian incentive to the target was affected due to the implementation of the community quarantine. Most Field Offices were able to process the vouchers for the incentive only in March, hence, FOs can only distribute the incentive to those LGUs with no / low cases of the COVID-19 during the period of the quarantine.

On financial accomplishment of the program based on the submitted reports from the FOs, out of the P98,400,000.00 fund allocation, 97.15% of P95,600,000.00 was already disbursed by the field offices, with only P2,800,000 remaining funds for disbursement.

c. **Social Safety Nets.** Social safety assistance intended to cushion the effects of economic shocks, disasters and calamities shall be available for senior citizens. The social safety assistance which shall include, but not limited to, food, medicines, and financial assistance for domicile repair, shall be sourced from the disaster/calamity funds of LGUs where the senior citizens reside, subject to the guidelines to be issued by the DSWD (RA 9994 Section 5 (h3)).

<table>
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<tr>
<th>13.1</th>
<th>Social protection floor for the total population, including older persons (see also companion document)</th>
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<tbody>
<tr>
<td></td>
<td>The country has an existing <strong>Philippine Social Protection Operational Framework and Strategy (PSPoFS)</strong> officially issued as Social Development Committee (SDC) Resolution No. 001-2019 which serves as the overall framework for the design and implementation of social protection interventions for vulnerable</td>
</tr>
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</table>
population. The PSPOFS provides for the key strategies under the various components of a social protection program to include: i) social insurance, ii) social assistance, iii) labour market interventions and iv) social safety nets. It specifically identifies older persons as one of the priority population that should be covered by social protection programs.

**Working towards Universal Coverage through the Social Protection Floor**. A universal and integrated system of social protection programs is the goal to be established such that all Filipinos will be able to access a menu of programs responding to and covers the various risks that will confront them over their lifetimes. Universal coverage is the goal but given limited resources, the social protection floor will be adopted. Poor and marginalized sectors will be prioritized and targeted through effective and empirically-based mechanisms.

Purely targeted social protection programs are those that focus on the transient and chronic poor and are mostly social safety net interventions such as cash transfers, food for work and emergency employment programs to develop their basic capacities and resilience to meet future needs and improvements of their families. Social protection in the country also aims to identify and focus its target groups and target areas considering that its potential beneficiaries range from the non-poor to the chronic poor.

In terms of targeting the marginalized poor, the government has mandated all agencies to utilize the DSWD’s Listahanan or the National Household Targeting System for Poverty Reduction. A national ID system was also approved by Congress as a potential common registry for poverty and social protection programmes. Hence, the government aims to integrate existing registries to allow the efficient targeting of beneficiaries and/or referral of beneficiaries to information and services, across a menu of social protection programs.

To progressively realize social protection coverage of all citizens in their entire lifecycle, efforts will be made to achieve the social protection floor as proposed in the Sustainable Development Goals (SDGs). Four social security guarantees, to be defined at the national level consist of the floor:

a) access to essential health care, including maternity care;
b) basic income security for children, providing access to nutrition, education, care and any other necessary goods and services;
c) basic income security for persons in active age who are unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and especially those with disability;
d) basic income security for older persons.

| 13.2 | Old age contributory pensions schemes (universal coverage, or for specific professional groups) | Yes ☒ | No ☐ |
The following are the existing contributory pension schemes for older persons in the Philippines:

a. **Social Security System.** The Social Security System (SSS) administers social security protection to workers in the private sector. Social security provides replacement income for workers in times of death, disability, sickness, maternity and old age. On September 1, 1957, the Social Security Act of 1954 was implemented. Thereafter, the coverage and benefits given by SSS have been expanded and enhanced through the enactment of various laws. Republic Act (RA) No. 11199, otherwise known as the “Social Security Act of 2018” or the SSS Law, became effective on 05 March 2019.

b. **Government Service Insurance System.** The Government Service Insurance System is the state insurance company of the Republic of the Philippines. One of the Funds that it administers is the General Insurance Fund (GIF) established on September 1, 1951 under Republic Act No. 656, as amended by Presidential Decree No. 245. Government agencies, offices, and government-owned and controlled corporations (GOCCs) are required by law to insure all properties, assets and interests of their respective offices with GSIS.

Old-age pensioners are former GSIS members who retired and are receiving pension under Republic Act (RA) 660, Presidential Decree (PD) 1146, RA 8291, and RA 7699 (Portability Law).

Old-age, survivorship and disability pensions are credited to the accounts of pensioners on the 8th day of every month through the Unified Multi-Purpose ID (UMID) or temporary eCard. On the other hand, employee compensation pension is processed manually, and disbursed through checks for those who have not secured their UMID or eCard.

As of June 2, 2020, GSIS has 372,992 old-age pensioners, 12,457 ED disability/EC survivorship pensioners. Survivorship pensioners total 139,784.

c. **Philippine Veterans Affairs Office (PVAO).** The PVAO provides for the following pensions to qualified beneficiaries:

i. **Old Age Pension** - monthly stipend of P5,000 granted to a veteran who is at least 65 years old or to the surviving spouse of a deceased veteran regardless of age until he/she remarries or dies. Pursuant to RA 1164, senior veterans shall be entitled to a monthly pension of P20,000.

ii. **Disability Pension** - monthly disability assistance granted to a World War II veteran or post-war veteran (AFP soldier) who incurred service-connected disability, sickness or injury and has a disability discharge rating. Veterans with disability rating from 10% up to 30% receive P1,000 per month while those whose disability is 100% receive P1,700.
iii. **Death (Indemnity)/Survivorship Pension** - monthly assistance granted to the surviving spouse and each unmarried minor children of a veteran who was killed-in-action or died in line of duty or of a veteran receiving a disability pension who died due to a service-connected disability or sickness. If the deceased veteran is single, this pension is granted to his/her parents. Said beneficiaries will each receive P1,000.00/month.

iv. **Burial Assistance** - payment of P20,000 to whoever defrayed the funeral expense of a deceased veteran which should be claimed within two years from the veteran’s death. A memorial flag is also given to the family of the late veteran.

v. **Educational Benefit** - subsidy of not more than P36,000 per year to a four / five-year baccalaureate course. This is granted to World War II, PEFTOK, PHILCAG veterans or for the surviving spouse or one direct descendant of a veteran in whose favor he waives such right.

vi. **Total Administrative Disability (TAD) Pension** - Pursuant to RA 7696, a veteran with or without a service-connected disability upon reaching the age of seventy (70) is deemed totally disabled and shall be entitled to a monthly pension of P1,700.00 per month.

d. **The Social Pension for Indigent Senior Citizens (SPIC).** The SPIC Sub-Program being implemented by DSWD in partnership with the LGUs is the additional government assistance amounting to Five Hundred Pesos (P500.00) as monthly stipend, being provided in a semestral basis through the most cost effective and efficient delivery schemes to augment the daily subsistence and other medical needs of indigent senior citizens who are frail, sickly, or with a disability, without regular income or support from family and relatives; and no pension from SSS, GSIS, etc.

Starting March 2018, an additional stipend of P200 was provided for by the RA 10964 (Tax Reform for Acceleration and Inclusion [TRAIN] Law) under the Unconditional Cash Transfer (UCT) program of the government. This monthly additional cash grant from UCT increased to P300 in 2019 and 2020. Meanwhile, there is a pending legislation in the Senate (i.e., Senate Bill 1865 by Senator Angara) to increase the monthly stipend to P1,000 to be provided to all senior citizens without social pension.

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<tr>
<th>13.3</th>
<th>Old-age non-contributory (or social) pension (universal coverage or targeted at some segment of older persons)</th>
<th>Yes ☒</th>
<th>No ☐</th>
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<tr>
<td></td>
<td>Under the social protection program for older persons, the DSWD is implementing the Social Pension for Indigent Senior Citizens</td>
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(SPIC). Under this program, the indigent senior citizens are entitled to a monthly stipend amounting to Five hundred pesos (Php500.00) to augment the daily subsistence and other medical needs as provided under RA No. 9994, specifically among those who are frail, sickly or with disability; without pension; and without permanent source of income or support from the family.

For CY 2021, the target of the SPIC program is 3,835,066 with a total allocation of P23,187,115,000.00.

**Republic Act 10645 or the Act Providing for the Mandatory PhilHealth Coverage for All Senior Citizens**, amending for the Purpose Republic Act No. 7473, As Amended by Republic Act No. 9994, Otherwise Known as the “Expanded Senior Citizens Act of 2010”, mandates PhilHealth, the national health insurance program, to cover all senior citizens, removing the provision that a senior citizen must be indigent to qualify coverage.

### 13.4 Specific pension schemes for the informal sector

Please elaborate with data, as appropriate:

**Republic Act 8425 or the Social Reform and Poverty Alleviation Act** recognizes the informal sector, through its inclusion as one of the basic sectors. It defines workers in the informal sector as “poor individuals who operate businesses that are very small in scale and are not registered with any national government agency, and to the workers in such enterprises who sell their services in exchange for subsistence level wages or other forms of compensation.” In terms of pension schemes for this marginalized group, the following are being undertaken:

a. **The Social Pension for Indigent Senior Citizens (SPIC)** includes those working in the informal economy such as the farmers, fisherfolks, street vendors and other engaged in informal economic activities.

b. **The Social Security System (SSS)** allows for voluntary contribution which may include those working in informal economy. A voluntary member, meanwhile, could either be a non-working spouse (NWS) of an SSS member or a separated member. NWS members are those who are legally married to a currently employed and actively paying SSS member, devoting full time in the management of household and family affairs, and has never been a member of the SSS. Those separated from employment or have ceased to be self-employed, an Overseas Filipino Worker (OFW), or an NWS but intends to continue paying SSS contributions on his/her own account, falls under this category.

The SSS has likewise set-up the AlkansSYa program in 2012 as a both a micro-saving program and a membership coverage program that ensures “equality of access to benefits among people of different socio-economic classes.” The name AlkansSYa combines the Filipino word “Alkansa” — meaning
‘piggy bank’ and connoting the daily act of saving (coins) as practiced in many Philippine households - with the name of the program’s implementing agency, the SSS standing for Social Security System. Beneficiaries are registered as self-employed members and deposits a minimal amount on a daily basis in a box or alkansya. These contributions are accounted and collected monthly by SSS account officers (AO). While this does not directly cover the senior citizens, the program provides an opportunity for more secure social pensions for those in the informal economy when they reach old age.

c. Mandatory SSS contribution also covers the household helpers (kasambahay) regardless of age through the Batas Kasambahay (RA 10361).

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<th>13.5</th>
<th>Other income-support schemes that specifically benefit older persons <em>please elaborate with data, as appropriate:</em></th>
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<tr>
<td></td>
<td>In addition to the policies promoting education, skills development and employment among older persons mentioned above, income-support schemes that specifically benefit older persons are being implemented by various LGUs such cash-for-work schemes, livelihood support, and conditional cash-transfer programs.</td>
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<td></td>
<td>Generally, the conditional cash transfer or Pamilyang Pilipino Pantawid Program (4Ps or Pantawid Program) provides some subsidies to improve the income of households including the senior citizens. The social pension for indigents senior citizens also aims to augment their income needed for their basic needs.</td>
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<th>13.6</th>
<th>Income-support schemes focused on older women <em>please elaborate with data, as appropriate:</em></th>
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<tr>
<td></td>
<td>The income-support schemes mentioned above generally provides both for male and female senior citizens. However, since there are more female senior citizens, a higher proportion of female senior citizens are benefiting from these programs.</td>
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<tr>
<th>13.7</th>
<th>Financial inclusion or financial literacy of older persons <em>please elaborate with data, as appropriate:</em></th>
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<tbody>
<tr>
<td></td>
<td>Financial literacy of older persons are usually integrated in various social protection interventions.</td>
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<th>13.8</th>
<th>Any other measures (please name them)? <em>please elaborate with data, as appropriate:</em></th>
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<td></td>
<td>Local government units implements various innovative approaches to ensure income security of older persons within their jurisdiction.</td>
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<td></td>
<td>Has the Government undertaken measures to eradicate poverty of older persons? (SDG 1.1.1; SDG 1.2.1; SDG 1.2.2; SDG 1.4.1; SDG 1.4.2; SDG 2.1.2)</td>
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<td>The policies and initiatives mentioned above are integral component of the overall strategy to eradicate poverty among older persons. To highlight some of them, the following are the specific measures being implemented:</td>
</tr>
<tr>
<td>a.</td>
<td>The <strong>Social Pension for Indigent Senior Citizen</strong> is among the programs provided to eradicate poverty. It also aims to improve the quality of life of Filipino senior citizens. (Please refer to Item 13.</td>
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<tr>
<td>b.</td>
<td><strong>Pantawid Pamilyang Pilipino Program (4Ps) (RA 11310).</strong> The Pantawid Pamilyang Pilipino Program (4Ps) is the national poverty reduction strategy and a human capital investment program that provides conditional cash transfer to poor households for a maximum period of seven (7) years, to improve the health, nutrition and education aspect of their live. The Pantawid Program provides conditional cash grants to the poorest of the poor, to improve the health, nutrition, and the education of children aged 0-18.</td>
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<td>c.</td>
<td><strong>RA No. 8425 or An Act Institutionalizing the Social Reform and Poverty Alleviation Program</strong> institutionalizes the Social Reform Agenda by including the elderly among the basic and disadvantaged groups that should be prioritized by the Comprehensive Integrated Delivery of Social Services (CIDSS), one of the government’s flagship social protection programs. It also identifies senior citizens as one of the basic sectors that should be represented in the NAPC organizational structure. The law mandates the adoption of an area-based, sectoral and focused intervention to poverty alleviation wherein every poor Filipino family shall be empowered to meet its minimum basic needs of health, food and nutrition, water and environmental sanitation, income security, shelter and decent housing, peace and order, education and functional literacy, participation in governance, and family care and psycho-social integrity;</td>
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<tr>
<td>d.</td>
<td><strong>DSWD Kapit-Bisig Laban sa Kahirapan - Comprehensive and Integrated Delivery of Social Services.</strong> One of the poverty-alleviation programs in the country that uses a community-driven development (CDD) approach, a globally recognized strategy for achieving service delivery, poverty reduction, and good governance outcomes. It helps communities in poor municipalities identify challenges around reducing poverty and make informed decisions on a range of locally identified options for development, including how this is made and in what form. It also gives control of resources to address local poverty to communities. Finally, the program builds the capacity of both state (including local governments) and civil society stakeholders</td>
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to provide assistance and respond to calls for support from poor communities as they implement development initiatives.

e. **Local Anti-Poverty Initiatives.** Within the devolution scheme, LGUs are likewise implementing their respective anti-poverty and social protection initiatives the include the senior citizens and their households as beneficiaries.

### Resilience

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<tr>
<th>15</th>
<th>Has the Government implemented policies to help older persons cope with emergency situations? <em>(SDG 11.5.1; 13.2.1)</em></th>
<th>Yes ☒ No ☐</th>
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<tbody>
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<td></td>
<td>The country recognizes older persons as one of the most vulnerable groups during crisis and emergency situations. As such, they are included in the overall operational framework for disaster risk reduction and mitigation in the country.</td>
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<tr>
<td></td>
<td>a. The <strong>Rehabilitation and Recovery Planning Guide states in its Post Disaster Rehabilitation and Recovery Framework</strong> developed and being promoted by the National Disaster Risk Reduction and Mitigation Council (NDRRMC) serves as the main guidelines for rehabilitation and recovery of communities from disasters. Consistent with the NDRRM Framework, the long-term goal for disaster rehabilitation and recovery is to have a safer, adaptive and disaster resilient Filipino communities that are protected from risks and can cope with and recover quickly from disaster events.</td>
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<td>The framework expressly provides for the support and protection to vulnerable groups/individuals including the senior citizens. It recognizes that recovery from disaster is extremely challenging for: displaced families; orphaned, unaccompanied and separated children and youth; senior citizens; persons with disability; and single parent/solo households. Aside from addressing the specific needs of elderly people and other vulnerable population groups, the rehabilitation and recovery programs should address the concerns of the vulnerable population in an integrated manner by providing special attention to improving quality infrastructure and promoting inclusion and participation in community-based programs. Recovery and livelihood support (particularly for farmers, fisher folks, farm laborers and small entrepreneurs) are also needed to enable them to restore their income and food generating activities.</td>
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<td>b. <strong>DSWD Assistance to Individuals in Crisis Situation (AICS).</strong> The AICS is part of DSWD's protective services for the poor, marginalized and vulnerable/disadvantaged individuals. The AICS is being implemented by the Crisis Intervention Units (CIUs) to which they provide a range of services such as immediate rescue, and provision of direct financial assistance, psychosocial support, and material</td>
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<td>15.1</td>
<td>Have concrete measures been taken to protect and assist older persons affected by natural disasters, political conflict or other humanitarian emergencies?</td>
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<td>Under its existing disaster risk reduction and mitigation interventions, senior citizens receive emergency services during or immediately after the occurrence of a disaster in order to save lives, reduce hunger and ensure safety of the people. It involves the provision of basic subsistence needs of the affected individuals and families, as well as the repair or reconstruction of houses damaged by disaster in order to help them restore their normal level of functioning. The DSWD implements several programs &amp; services under this program such as – provision of food and non-food assistance; provision of temporary shelters; camp coordination and management services; emergency shelter assistance; cash-for-work/food for-work, and other assistance.</td>
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<td></td>
<td><strong>Yes ☒</strong></td>
<td><strong>No ☐</strong></td>
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<th>15.2</th>
<th>Are challenges faced by older persons in disaster situations addressed in national disaster response policies and strategies?</th>
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<td></td>
<td>As mentioned above, the needs and conditions of older persons are considered and addressed in national disaster response policies and strategies in the country.</td>
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<td><strong>Yes ☒</strong></td>
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<th>15.3</th>
<th>Does the Government recognize the agency of older persons in supporting response, recovery and reconstruction following natural disasters, political conflict or other humanitarian emergencies?</th>
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<td><em>please elaborate with data, as appropriate:</em></td>
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<td></td>
<td>As a standard procedure for rehabilitation and recovery mechanisms during disasters, people are consulted and provided with opportunities to participate in decision-making processes particularly in strategies that concern them through their expressed needs, suggestions in implementing relevant measures, and other institutional arrangements.</td>
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<td><strong>Yes ☒</strong></td>
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<th>15.4</th>
<th>Are older persons recognized as having a role in mitigating climate change?</th>
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<td><em>please elaborate with data, as appropriate:</em></td>
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<td></td>
<td>The Rehabilitation and Recovery Planning Guide of the NDRRMC provides for a participatory approach to ensure that the needs and perspectives of the affected population are heard and considered in the planning. Either as an organized group or through their individual capacity, senior citizens are being consulted in the community planning activities.</td>
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<td><strong>Yes ☒</strong></td>
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### III. Advancing health and well-being into old age

**Instruction:** For the following questions, please provide: (a) the name of the legislation, policy and/or action plan; (b) its time frame; (c) its main elements; and (d) its main achievements. Please supply details of and links to relevant documents or attach copies of them.

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<tr>
<th>Question</th>
<th>Answer</th>
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<tr>
<td>16 Has the Government developed policies or programmes to promote health and well-being throughout life, including active and healthy ageing?</td>
<td>Yes ☒ No □</td>
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**The 1987 Philippine Constitution Article XIII, Section II** provides that the State shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all people at affordable cost. There shall be priority for the needs of the underprivileged sick, elderly, disabled, women and children.

**Republic Act No. 11223 or the Universal Health Care Law of the Philippines** mandates the universal coverage of all Filipinos including senior citizens of the national health insurance program or PhilHealth. Under Republic Act (RA) 10645, all senior citizens are covered by the PhilHealth’s National Health Insurance Program (NHIP). Funds necessary to ensure the enrolment of all senior citizens not covered by any existing category will be sourced from the National Health Insurance Fund of PhilHealth from the proceeds of RA 10351 or the “Sin Tax Reform Act.”

All PhilHealth members and their dependents, including senior citizens, are entitled to inpatient and outpatient care (e.g. room and board, services of health care professionals, diagnostic and other medical examinations, use of surgical or medical equipment and facilities, prescription drugs, personal preventive services), emergency and transfer services, health education packages, and other appropriate and cost-effective health care services determined by PhilHealth and DOH in all accredited public and private health facilities.

As of 2018, there are 8.8 million senior citizens who are registered members of PhilHealth, of which 1.3 million are categorized as Lifetime Members (i.e. those who have paid 120 monthly premium contributions). Under the 2020 P4.1-trillion national budget, the PhilHealth has an authorized appropriation of P71.353 billion to implement the NHIP, of which P31.177 billion was allocated for senior citizens.

**DSWD Long Term Care Program for Senior Citizens (LTCSC).**

As a key program for the implementation of the Plan of Action for Senior Citizens, this program aims to promote active aging and improve the quality of life of Filipino senior citizens, specifically:
c. To strengthen collaboration and partnership among government (GAs and LGUs); non-government organizations (NGOs), particularly NGOs supporting senior citizens; business sectors; and allied professional in the development, implementation, monitoring and replication of effective and efficient programs;

d. To promote protection of rights and independence among senior citizens;

e. To establish an enabling environment and provide supportive care for senior citizens;

f. To encourage participation and contribution of senior citizens in community development and nation-building; and

g. To raise public awareness on the emerging issues/concerns on the needs and aspirations of senior citizens.

| 16.1 | Has the Government strengthened the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol among older persons? (SDG 3.5.1; SDG 3.5.2)  
*please elaborate with data, as appropriate*:
| Yes ☒ | No ☐ |

The Dangerous Drugs Abuse Prevention and Treatment Program of the Department of Health (DOH) targets the older persons, working age-group and adolescents and school children. The program aims to:

a. develop a more effective leadership and governance for drug abuse prevention, treatment and rehabilitation;

b. implement strategies for advocacy, health promotion and drug abuse prevention;

c. ensure provision of comprehensive & integrated health care services in treatment and rehabilitation centers, (TRCs) and community-based settings; and

d. strengthen information systems, monitoring and evaluation, research, networking and linking.

| 16.2 | Has the Government implemented any measures to improve access to food and adequate nutrition for all older persons, if needed? (SDG 2.1.2; SDG 6.1.1)
| Yes ☒ | No ☐ |

The Healthy and Productive Ageing Program of the DOH focuses on promoting the health and wellness of senior citizens and alleviating the conditions of those who are encountering degenerative diseases. It includes nutrition and wellness program for older population through the promotion of healthy lifestyle.

| 17 | Are issues related to older persons integrated into health policies and programmes, and, if so, how?
| Yes ☒ | No ☐ |

Yes. The Universal Health Care Law recognizes the health needs for older persons, hence, the promotion of universal
Health-care and long-term care services

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<th>18</th>
<th>Has the Government undertaken any of the following measures related to universal and equal access to health-care services for older persons? (SDG 3.8.1; SDG 3.8.2; SDG 3.b.3)</th>
</tr>
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</table>
| | The DSWD Administrative Order No. 5 series of 2010 providing for the implementation of the "Long Term Care Program for Senior Citizens" generally aims to promote active and healthy ageing. The services under this program includes:

| | a. **Residential Care Services (RCS).** This includes a 24-hour facility that provides long term or temporary multidisciplinary care to senior citizens who are abandoned by their families or with no significant others to provide the needed supervision and supportive care. The services that will be provided includes social services, health and medical services, psychological services, skills training, group work activities, dietary services, home life/group living services, spiritual services (i.e. religious services, masses, confession, bible studies and etc.) and provision of assistive devices.

| | b. **Community-based Services for Senior Citizens and their Families** includes programs and services rendered when the helping process takes place in the community as the primary client system, or when social welfare and development activities are provided to individuals, groups and families while they remain in their own homes. It involves:

| | i. **Strengthening the Organization of Senior Citizens Organization.** This refers to the organization / strengthening of existing organization of people aged sixty (60) years old and above who shall be provided with opportunities for participation, conscientious, and action of senior citizens on socio-political and economic endeavors. Further, this component will also provide for building or enhancing the capacity of the senior citizens in conflict management, stewardship, and other programs.

| | ii. **Senior Citizens Center.** This refers to a day center facility with recreational, educational, health and socio-cultural programs designed for the full enjoyment and benefit of the senior citizens in the city or municipality. It shall also serve as a facility for the provision of community-based educational services.

| | c. **Home Care Support Service.** This pertains to services provided to senior citizens while in their homes such as assisting senior citizens in their daily living activities (e.g., bathing, eating, dressing, etc.); training volunteers and family members on caregiving for senior citizens; provision of assistive devices for... | Yes ☒ No ☐ |
senior citizens: and community-based rehabilitative activities. Other types of health and wellbeing services includes:

i. **Hospice Care Service.** This service offers shelter and care to weary sick senior citizens. Volunteers will be mobilize/utilize to provide the direct services and/or assistance to the dying senior citizens and psychosocial support to their families.

ii. **Foster Home.** This is the provision of a planned temporary alternative family care for older persons who are abandoned, neglected, unattached from the community or those In residential care facilities but found eligible to benefit from the program. It will provide subsidies and care giver training for foster families licensed by the DSWD.

iii. **Family/Kinship Care.** This is a form of foster care which involves the placement of a senior citizen under the care of his/her relatives and/or family members. This includes provision of caregiving training to the main family carer; establishing community-based support system to prevent burn-out of the carer; and prevent institutionalization of the senior citizens.

iv. **Support Services for Caregivers.** This refers to capability building and continuing education for caregivers on care and management of older persons and on burn-out prevention. It also seeks to relieve caregivers/ family carers of stress arising from the responsibility of providing daily care. It will also provide subsidies and allowances to volunteers in the amount approved by the LGUs.

d. **Volunteer Resource Service (VRS).** This will encourage and mobilize individuals, interested groups and intermediaries, as well as able-bodied senior citizens to voluntarily contribute their time, skills and capabilities for the delivery of programs/services for the benefit of the impoverished senior citizens. The components are the following:

i. **Friendly Visitor Service.** This provides opportunities for interested individuals, organizations, active members of senior citizen’s organizations and other sectors/members of nearby communities to volunteer, visit, befriend, advise, and assist senior citizens who are either living on their own or in the residential care or alternative care.

ii. **Volunteer Companion Service.** This encourages volunteers to escort / accompany senior citizens who would need to go to the hospital, church, malls, and other public places. This service will tap the National Student Training Program (NSTP) students as volunteers. DSWD will provide an orientation and basic training for the volunteer students on understanding the dynamics, behavior of senior citizens, the aging process and the benefits of volunteering.
| 18.1 | Equal and affordable access to primary and secondary health-care services, including affordable access to essential medication, therapeutic measures and medical devices for older persons | Yes ☒ | No ☐ |

**Republic Act No. 11223 or the Universal Health Care Law** of the Philippines mandates the universal coverage of all Filipinos including senior citizens of the national health insurance program or PhilHealth. Under Republic Act (RA) 10645, all senior citizens are covered by the PhilHealth’s National Health Insurance Program (NHIP). Universal health coverage include access to primary and secondary health care services.

The following are the current services for older persons under the existing health care program of the Department of Health:

- a. **DOH Administrative Order No. 2011-0018/Philhealth Circular No. 007-2014-“Bakuna sa Pulmonya”**
- b. Free vaccines against influenza ad pneumococcal
- c. **DOH AO No. 2010-0032 and DOH A) No. 2012-0007- 20% discount on drugs and medicines, hospitalization, medical services;**
- d. One Geriatric Curriculum institutionalized (development of Gerontology Course in school)
- e. Implement Balance Billing for Indigent Senior Citizens in all government hospitals/health facilities;
- f. One Module formulated on capacity-building training in basic geriatrics

**RA 9994 or the Expanded Senior Citizens Act of 2010** also provides 20 percent discount to all senior citizens for:

- a. Medicine and drug purchases (e.g., generic or branded medicines and drugs, influenza and pneumococcal vaccines, and vitamins and mineral supplements);
- b. Essential medical supplies, accessories and equipment (e.g. eyeglasses, hearing aids, dentures, prosthetics, artificial bone replacements, walkers, crutches, wheelchairs, canes, geriatric diapers);
- c. Medical and dental services in private facilities (e.g., medical and dental services, diagnostic and laboratory tests);
<p>| | |</p>
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<th></th>
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<tbody>
<tr>
<td>d.</td>
<td>Professional fees of attending physician/s in all private hospitals, medical facilities, outpatient clinics and home health care facilities</td>
</tr>
<tr>
<td>e.</td>
<td>Professional fees of licensed health workers providing home health care services as endorsed by private hospitals or employed through home health care employment agencies</td>
</tr>
<tr>
<td>18.2</td>
<td>Health coverage (universal coverage or targeted at some segment of older persons): (a) population coverage; (b) benefit coverage; and (c) financial coverage</td>
</tr>
<tr>
<td></td>
<td>In addition to the Universal Health Care Law (RA 11223), the following policies provide for the health coverage for all senior citizens:</td>
</tr>
<tr>
<td>a.</td>
<td>RA 10645-Mandatory Philhealth coverage to all senior citizens;</td>
</tr>
<tr>
<td>b.</td>
<td>Philhealth Circular No. 033-2014 and Philhealth Circular No. 008-2015 Implementing Guidelines on the mandatory coverage for all Senior Citizens;</td>
</tr>
<tr>
<td>c.</td>
<td>100% government hospitals/health facilities for indigent senior citizens accredited by Philhealth;</td>
</tr>
<tr>
<td>d.</td>
<td>Implement Balance Billing for indigent Senior Citizens in all government hospitals/health facilities;</td>
</tr>
<tr>
<td>e.</td>
<td>One Monitoring Tool formulated for the implementation of the program (health insurance and medical assistance)</td>
</tr>
<tr>
<td>Source:</td>
<td>PPASC 2019-2022</td>
</tr>
<tr>
<td>18.3</td>
<td>Involvement of older persons in the development and strengthening of health-care services?</td>
</tr>
<tr>
<td>please elaborate with data, as appropriate:</td>
<td></td>
</tr>
<tr>
<td>The National Commission on Senior Citizens (NCSC) is mandated to ensure the full implementation of laws, policies and programs of the government pertaining to the wellbeing of senior citizens. The commission is also mandated to formulate policies, including those related to the strengthening of health care services and wellbeing for senior citizens. The Commission is also mandated to establish and maintain cooperation and consultations with local government units and national government agencies on all matters pertaining to the general welfare of senior citizens.</td>
<td></td>
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<tr>
<td>18.4</td>
<td>Digital technology to promote inclusive health-care services</td>
</tr>
<tr>
<td>please elaborate with data, as appropriate:</td>
<td></td>
</tr>
<tr>
<td>The Department of Health and the National Privacy Commission (NPC) developed a framework for telemedicine services in a bid to improve access to health services during the Enhanced Community Quarantine.</td>
<td></td>
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<tr>
<td>Under the DOH-NPC Joint Memorandum Circular medical consultations over the phone, chat, short messaging service (SMS), and other audio and visual-conferencing platforms are considered telemedicine services in the country. Healthcare providers</td>
<td></td>
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</table>
conducting these consultations are allowed to issue electronic case reports and prescriptions.

**Department of Health Kontra Covid Platform.** The DOH KontraCOVID system is a cloud-based platform that integrates passive surveillance tools and channels such as TanodCOVID (SMS-based) and KIRA (chat and digital triage web application) where citizens may report or update their symptoms and exposure information to conduct self-assessments and check the possible risk of COVID-19 infection, subject to verification of local health authorities. The KontraCOVID web application collects personal information that links to the LGU portal of KontraCOVID for information verification.

The LGU portal of KontraCOVID enables LGUs to view and verify citizen-reported information sourced from different channels (SMS, Chat, Web application). The verification is conducted by local health units or assigned personnel to provide appropriate response and forwarding verified data to the COVID Kaya system for proactive contact tracing.

19 Has the Government put in place any of the following long-term care measures for older persons?

*If yes, please answer 19.1 – 19.7*

*If no, please proceed to 20
please elaborate with data as appropriate and proceed:*

---

19.1 Long-term care services for older persons

*please elaborate with data, as appropriate:*

Kindly refer to Item 18.

19.2 Coordination of social and long-term care and health services, including in-home, residential and community services.

Kindly refer to Item 18.

19.3 Health insurance schemes that cover long-term care costs

*please elaborate with data, as appropriate:*

---

19.4 Long-term care costs covered by a separate insurance scheme

*please elaborate with data, as appropriate:*

---

19.5 Geriatric and gerontological planning and training for health and social care providers

To meet the health care demands of an aging population, there is a need for properly trained health care providers proficient in geriatrics and gerontology. Different care needs include among others dementia (Alzheimer’s) care, transitional care (for stroke cases and other rehabilitation care), supervision, among others.

The total cost of dementia care in the Philippines has been estimated at 849.2 million, with 321.3 million spent in informal care, assuming that a family member or informal carer spends 1.6 hours a day providing ADL care. Carers for the elderly with dementia often lack specialized trainings.
In the Philippines, there are only 140 geriatric doctors servicing 7.5 million senior citizens and there is no geriatric curriculum or extensive training for long-term care of older persons. 92% of geriatricians are located in Metro Manila. There are only about 7 geriatric wards and most of them are also located in Metro Manila large facilities like the Philippine General Hospital, St Luke’s Medical Center, Veterans Memorial Medical Center, Jose Reyes Hospital, Medical City, Chinese General Hospital, etc. There are only about 10 elderly care facilities with a total number of 25 assisted-living facilities operate in Metro Manila, CALABARZON, Cebu, Tagaytay and Iloilo.

There is still lack of a geriatric curriculum and geriatric training in the Philippine health care education system. However, it is good to note that the UP Manila College of Medicine, Nursing, Pharmacy, and other allied courses/professions are including geriatric care modules in the curricula of medical courses, and the Geriatric Nurses Association of the Philippines (GNAP) are also developing their capacities in this area of specialization. The inclusion of geriatrics in the B.S. Nursing curriculum gives nurses the choice to specialize in geriatric nursing. Healthcare education could also develop vocational geriatric training courses.

The Philippine government has established the Philippine Retirement Authority (PRA), which is mandated to provide retirement homes in the Philippines for foreign senior citizens. It is hoped that retirement homes and better geriatric care facilities can also be made available to the Filipino elderly for equal opportunity to receive better care facilities.

**TESDA Caregiving Course NC II.** The CAREGIVING NC II qualification consists of competencies that a person must achieve to provide care and support to infants/toddlers, provide care and support to children, foster social, intellectual, creative and emotional development of children, foster the physical development of children, provide care and support to elderly, provide care and support to people with special needs, maintain healthy and safe environment, respond to emergency, clean living room, dining room, bedrooms, toilet and bathroom, wash and iron clothes, linen, fabric, prepare hot and cold meals.

19.6 Involvement of older persons in the development and strengthening of long-term care services
*Please elaborate with data, as appropriate:*

Kindly refer to Item 18.

19.7 Any other measures (please name them)?
*Please elaborate with data, as appropriate:*

Yes □ No □
### Integration of health and social care services

20. Has the Government undertaken measures to develop mechanisms for coordinating health and social care services for older persons?  
*please elaborate with data, as appropriate:*

The DSWD Long Term Care Program for Senior Citizens (LTCSC) and the DOH Health and Wellness Program for Senior Citizens are integrated programs with common objective of promoting active and healthy ageing. They are being implemented towards the improvement of the quality of life of older Filipinos through the delivery of appropriate health and social service packages at various levels of the health care delivery system and partnerships with other stakeholders and sectors.

| Yes ☒ | No □ |

### Monitoring of health care services

21. Has the Government undertaken measures to establish standards and monitoring mechanisms to ensure the quality of older persons’ care services?  
*please elaborate with data, as appropriate:*

The Department of Health National Policy on Palliative and Hospice Care in the Philippines aims to set the overall policy directions in the provision of palliative care and hospice care in hospitals, health facilities, communities, and home-based levels. Palliative care is defined as an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial, and spiritual.

| Yes ☒ | No □ |

### Discrimination in access to health-care services

22. Has the Government undertaken actions to record and prevent discrimination on the basis of age in access to health services including access to providers, medicines and preventive measures?

The Universal Health Care Law (RA 11223) removes the discrimination on the basis of age, sex, economic condition and other characteristics through inclusive or universal coverage.

| Yes ☒ | No □ |

### Mental health services

23. Has the Government implemented measures to enhance mental health services for older persons related to dementia or other psychosocial disabilities? *(SDG 3.4.2)*

| Yes ☒ | No □ |
The **DOH National Mental Health Program** is being implemented as part of the primary health care services for all Filipinos especially among senior citizens. The program aims to:

a. promote participatory governance and leadership in mental health  
b. strengthen coverage of mental health services through multi-sectoral partnership to provide high quality service aiming at best patient experience in a responsive service delivery network  
c. harness capacities of LGUs and organized groups to implement promotive and preventive interventions on mental health  
d. leverage quality data and research evidence for mental health; and  
e. set standards for compliance in different aspects of services

The program is composed interventions addressing the following:

a. **Wellness of Daily Living** - all health/social/poverty reduction/safety and security programs and the like are protective factors in general for the entire population. It also includes the promotion of Healthy Lifestyle, Prevention and Control of Diseases, Family wellness programs, and school and workplace health and wellness programs.

b. **Extreme Life Experience** includes provision of mental health and psychosocial support (MHPSS) during personal and community wide disasters.

c. **Mental and Neurologic Disorders**; and

d. **Substance Abuse and other Forms of Addiction** which include provision of services for mental, neurologic and substance use disorders at the primary level from assessment, treatment and management to referral; and provision of psychotropic drugs which are provided for free. It also includes the enhancement of mental health facilities.

**Republic Act 11036 or the Mental Health Act** also mandates the provision of various programs and services that promote mental health among all Filipinos. The policy mandates the following:

a. Strengthening of effective leadership and governance for mental health by, among others, formulating, developing, and implementing national policies, strategies, programs, and regulations relating to mental health;  

b. Development and establishment of a comprehensive, integrated effective and efficient national mental health care system responsive to the psychiatric, neurologic, and psychosocial needs of the Filipino people;  

c. Protection of the rights and freedoms of persons with psychiatric, neurologic, and psychosocial needs;
d. Strengthening of information systems, evidence and research for mental health;

e. Integration of mental health care in the basic health services; and

f. Integration of strategies promoting mental health in educational institutions, the workplace, and in communities.

The Universal Health Care Law further provides immediate eligibility and access to preventive, promotive, curative, rehabilitive and palliative care for medical, dental, mental and emergency health services, delivered either as population-based or individual-based health services for every Filipino.

**Support to older persons with disabilities**

| 24 | Has the Government undertaken measures to support older persons with disabilities, such as the provision of rehabilitation services, appropriate care and the provision of assistive technologies and social transfers, like disability allowances? 
*please elaborate with data, as appropriate:* | Yes ☒ No ☐ |

The following are the measures (policy, program and services) that support older persons with disabilities:

a. **Republic Act No. 10754 or an Act Expanding the Benefits and Privileges of Persons with Disability** states that a person with disability is entitled to 20 percent discounts on medicine, use of services and facilities from all establishments providing food, accommodation, transport services, and recreational facilities.

b. **PhilHealth Z Morph (Mobility, Orthosis, Rehabilitation, Prosthesis Help) Benefits Package.** This package aims to increase financial risk protection for PhilHealth members, especially the under privileged, through the delivery of quality care using cost-efficient interventions that are based on approved clinical protocols and guidelines. It also aims to increase awareness among people at-risk and enabling healthcare providers to capture them at the earliest stage of the illness to ensure better survival.

c. **PhilHealth TSeKaP.** PhilHealth re-introduced the Primary Care Benefit Package 1 and 2 under a new brand called TSeKaP (Tamang Serbisyo para sa Kalusugan ng Familia). Included in the Tsekap are drugs and medicines for ten (10) common conditions that can be managed at a primary care set up such as asthma, acute gastroenteritis, upper respiratory tract infection, pneumonia, urinary tract infection, diabetes mellitus, hypertension, dyslipidemia, deworming and ischemic heart disease.
Also available are comprehensive health profiling upon enlistment, consultations, regular blood pressure and body measurement, periodic clinical breast examination, cervical cancer screening, digital rectal examination, risk profiling for hypertension and diabetes, counselling for smoking cessation and lifestyle modification and oral check-up and prophylaxis for children 12 years old and below.

d. PhilHealth No-Balance Billing (NBB) Policy. The No Balance Billing (NBB) Policy, provides that no other fees or expenses shall be charged or be paid for by the indigent patients above and beyond the packaged rates during their confinement period. NBB Patients cover the following categories:

i. **Indigent** - a person who has no visible means of income, or whose income is insufficient for family subsistence, as identified by the Department of Social Welfare and Development (DSWD) based on specific criteria set for this purpose in accordance with the guiding principles set forth in Article I of the National Health Insurance Act of 2013.

ii. **Sponsored** - a member whose contribution is being paid by another individual, government agency, or private entity according to the rules as may be prescribed by the Corporation including hospital sponsored members, Point of Care (POC) and those enrolled DSWD as defined in PhilHealth Circular No. 2016-0019 (orphans, abandoned and abused minors, out of school youths and street children).

iii. **Domestic Worker or Kasambahay** - refers to a person engaged in domestic work within an employment relationship such as, but not limited to, the following: general house help, nursemaid or ‘yaya'; cook, gardener, or laundry person, but shall exclude a person who performs domestic work only occasionally or periodically and not on an occupational basis.

iv. **Senior Citizen** - refers to a Filipino citizen who is a resident of the Philippines, and aged sixty (60) years or above. The term may apply to dual citizens aged 60 years or above provided there is proof of Filipino citizenship and have at least six (6) months of residency in the Philippines as provided in the Implementing Rules and regulations of Republic Act No. 9994.

v. **Lifetime** - a member who has reached the age of retirement under the law and has paid at least one hundred and twenty (120) monthly premium contributions. (RA 10606)

Under the universal health care law, PhilHealth simplified the members of the health insurance into direct and indirect contributors.

e. DSWD Assistance to Individuals in Crisis Situation (AICS). The AICS is part of DSWD’s protective services for the poor, marginalized and vulnerable/disadvantaged individuals. The AICS is being implemented by the Crisis Intervention Units (CIUs) to
which they provide a range of services such as immediate rescue, and provision of direct financial assistance, psychosocial support, and material assistance including medical, transportation, financial, burial, and other services. Assistance may be in the form of allowances or assistance for transportation, medical, burial, food and non-food and education.

f. DSWD AO No. 21 Series of 2005 or the Enhanced Guidelines for the Implementation of Social Mobilization of Persons with Disabilities, Senior Citizens and Families. This project aims to mobilize and build up the productive potentials and resources of a clientele group traditionally regarded as beneficiaries so that they may be able to respond to their own needs and also assume responsibility in contributing to the well-being of the community. It is a community-based program that recognizes an individual’s potential for self-help and self-reliance despite their disability or age.

g. Executive Order No. 437 (Encouraging of the Implementation of Community-Based Rehabilitation (CBR) for Persons with Disabilities in the Philippines) encourages LGUs to:

i. Adopt the Community-Based Rehabilitation (CBR) Program in delivering services to their constituents with disabilities and to allocate funds to support the program;

ii. Designate a unit under the office of the local executive to be responsible for the implementation of the Community-Based Rehabilitation program in accordance with the police and implementing guidelines set by the National Council for the Welfare of Disabled Persons to include the promotion and capability building of the LGUs on CBR.

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**Decade of Healthy Ageing**

| 25 | Is the Government implementing any follow-up actions related to the United Nations Decade of Healthy Ageing (2021–2030),\(^4\) such as a national action plan? (see also companion document)
please elaborate with data, as appropriate: |
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<tr>
<td>Yes ☒</td>
<td>The agenda under the UN Decade of Health Ageing is integrated in the Philippine Plan of Action for Senior Citizen. Moreover, the Department of Health (DOH) in collaboration with relevant national government agencies is also promoting the UNDHA through various communication and promotional strategies.</td>
</tr>
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\(^4\) General Assembly resolution 75/131 of 14 December 2020.
IV. Ensuring enabling and supportive environments

**Instruction:** For the following questions, please provide: (a) the name of the legislation, policy and/or action plan; (b) its time frame; (c) its main elements; and (d) its main achievements. Please elaborate and either link to or attach copies of relevant documents.

**Housing and living environment**

<table>
<thead>
<tr>
<th>26</th>
<th>Has the Government undertaken any of the following measures with regard to the housing and living environment of older persons and their families? (SDG 11.2.1; SDG 11.7.1)</th>
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<tbody>
<tr>
<td></td>
<td>If yes, please answer 26.1 — 26.4</td>
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<td></td>
<td>If no, please proceed to 27</td>
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<td>please elaborate with data as appropriate.</td>
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| Yes ☒ | No ☐ |

| 26.1 | Promotion, safeguarding and ensuring the right to housing and shelter for older persons                                                                                                                 |

**RA 9994 Article 17.** The law provides for the inclusion in the national shelter program the special housing needs of senior citizens, such as establishment of housing units for the elderly. It mandates the Housing and Land Use Regulatory Board (HLURB) to formulate housing rules on how to develop subdivision suitable to the requirements of male and female senior citizens; and the Home Development Mutual Fund (HDMF) to promote the establishment of elderly residence and shall review its existing circulars particularly the limitation of the age requirements of sixty-five (65) years old at the date of the loan application and seventy (70) years old at loan maturity. The law also mandated the consideration of the concept of pension in lieu of compensation.

RA 9994 further provides that a housing program for the poor senior citizens which include the establishment/donation of group/foster homes for the neglected, abused, and unattached or homeless senior citizens and those incapable of self-care including its management, maintenance, and operations should be established in accordance with EO 105, approving and directing the implementation of the program, *Provision of Group/Foster Home for Neglected, Abandoned, Abused, Unattached and Poor Older Persons and Persons with Disabilities*, promulgated on May 16, 2002.

**Philippine Retirement Authority** is mandated to develop and promote the Philippines as a retirement haven to accelerate the social and economic development of the country, strengthen its foreign exchange position and at the same time, provide an attractive package that offers the best quality of life to targeted retirees.

**Executive Order No. 105 or the Provision of Group Home/Foster Home for Neglected, Abandoned, Abused, Detached, and Poor Older Persons and Persons with Disabilities** provides that housing program for the poor older persons and persons with disabilities should include the establishment/donation of group/foster homes for the neglected, abused, and unattached or homeless older
and disabled persons and those incapable of self-care including its management, maintenance and operations.

**The DSWD AO No. 11 Revised Standards on Residential Care Service** provides guidelines or standards for the construction and operations of all types of residential care facilities operated and managed by DSWD, LGUs and private social work agencies or NGOs. Residential care shall refer to a service delivery mode that provides 24 hr. group care living as an alternative family care arrangement to residents whose needs cannot be adequately met by their families.

The National Home Mortgage Finance Corporation (NHMFC) Mabuhay Program for Filipino Senior Citizens (HLRPP-3) to help provide additional funds for Filipino senior citizens’ snowballing cost of living.

The Balai Berde Program of the Department of Human Settlement and Urban Development (DHSUD) bridged the direct housing production, housing loans, mortgage programs, land registrations and other various housing assistance as “BALAI,” which stands for Building Adequate, Livable, Affordable and Inclusive (BALAI) Filipino Communities. The program promotes the quality of life in a society that contributes to the economy while preserving the environment. It also promotes the reduction of community risks and vulnerabilities to disasters as well as encourages energy efficiency, building of resilient housing units, water conservation and the use of low carbon materials.

| 26.2 | Promotion of “ageing in place”, such as the promotion of affordable public housing with age-friendly and accessible housing design or multigenerational housing options (see also companion document) please elaborate with data, as appropriate: | Yes ☐ No ☒ |
| 26.3 | Improved availability of accessible and affordable transportation to improve older persons’ mobility. | Yes ☒ No ☐ |

**RA 9994** provides for the provision of 20 percent discounts and value added tax (VAT) exemptions to all senior citizens in air and sea transportation privileges - fare for domestic air, and sea travel, including advanced booking; in public land transportation such as fare in the public railways including LRT, MRT, and PNR, fares in buses (PUB), jeepneys (PUJ), taxi and shuttle services (AUV).

The law also mandates the DOTC and its attached agencies and sectoral offices to improve implementation of transportation programs to assist senior citizens to fully gain access in the use of public transport facilities. The minimum requirements and standards to make transportation facilities and utilities for public use accessible to senior citizens shall be developed to enhance the mobility of senior citizens. There shall also be strict implementation of courtesy space and seats for the exclusive use of senior citizens in all transport system. As far as practicable, PUVs shall also strive to install safe lower stepping boards.
The Republic Act No. 7277 or the Magna Carta for Disabled Persons also ensure the attainment of a barrier-free environment that will enable disabled persons to have access in public and private buildings and establishments and such other places mentioned in Batas Pambansa Bilang 344, otherwise known as the "Accessibility Law". The national and local governments shall allocate funds for the provision of architectural facilities or structural features for disabled persons in government buildings and facilities.

Under this law, the State shall promote the mobility of disabled persons. Disabled persons shall be allowed to drive motor vehicles, subject to the rules and regulations issued by the Land Transportation Office pertinent to the nature of their disability and the appropriate adaptations or modifications made on such vehicles.

Finally, the DSWD shall develop a program to assist marginalized disabled persons gain access in the use of public transport facilities. Such assistance may be in the form of subsidized transportation fare.

As provided in RA 9257 or the Act Granting Additional Benefits and Privileges to Senior Citizens, the Department of Transportation and Communications (DOTC) shall develop a program to assist senior citizens to fully gain access in the use of public transport facilities.

### 26.4 Universal design in public buildings, areas and transportation

The Implementing Rules and Regulation of BP 344 (An Act to Enhance the Mobility of Disabled Persons by Requiring Certain Buildings, Institutions, Establishments and Public Utilities to Install Facilities and Other Devices) provides for the minimum requirements and standards to make buildings, facilities and utilities for public use, accessible to disabled persons with disability, including older persons who are confined to wheelchair and those who have difficulty in walking or climbing stairs.

### Caregiving

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<td>27</td>
<td>Has the Government undertaken measures to support formal and informal caregivers of older persons, including training programmes, accreditation and pay? (SDG 5.4.1) &lt;br&gt; <em>please elaborate with data, as appropriate:</em></td>
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<td></td>
<td>Yes ✗</td>
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The DSWD Neighborhood Support Services for Older Persons (NSSOP), a community-based program, involves the community/neighborhood to take effective steps to enhance members of the families in their care giving capability to a sick, frail, bedridden or with disability older person. This also involves capability building activities for volunteers, motivators, caregivers, and carers. The NSSOP mobilizes volunteers who are willing to share their skills and service as a resource of the community.
The qualification for the TESDA Caregiving Course NC II consists of competencies that a person must achieve to provide care and support to infants/toddlers, provide care and support to children, foster social, intellectual, creative and emotional development of children, foster the physical development of children, provide care and support to elderly, provide care and support to people with special needs, maintain healthy and safe environment, respond to emergency, clean living room, dining room, bedrooms, toilet and bathroom, wash and iron clothes, linen, fabric, prepare hot and cold meals.

### Family support

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<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>28. Has the Government undertaken measures to support women and families who often take care of older persons? <strong>please elaborate with data, as appropriate:</strong></td>
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The **1987 Philippine Constitution** states that the family has the duty to take care of its older person members while the State may design a program of social security for them.

**Republic Act No. 7432** (Act to Maximize the Contribution of Senior Citizens to Nation Building, Grant Benefits and Special Privileges and Other Purposes) relevant government agencies are mandated to provide the following assistance to those caring for and living with the senior citizen:

- The senior shall be treated as dependents provided for in the National Internal Revenue Code and as such, individual taxpayers caring for them, be they relatives or not shall be accorded the privileges granted by the Code insofar as having dependents are concerned.

- Individuals or non-governmental institutions establishing homes, residential communities or retirement villages solely for the senior citizens shall be accorded the following:
  - Realty tax holiday for the first five (5) years starting from the first year of operation;
  - Priority in the building and/or maintenance of provincial or municipal roads leading to the aforesaid home, residential community or retirement village.

### Integration of older migrants

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<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>29. Has the Government implemented measures facilitating the integration of older migrants within their new communities, including: <strong>(SDG 10.7.2; SDG 10.7.4) (see also companion document)</strong> If yes, please answer 29.1 – 29.3 If no, please proceed to 30</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
### 29.1 Older migrant workers returning to countries of origin after lifetimes of overseas employment

Please elaborate with data, as appropriate:

**Department of Labor and Employment Reintegration Services.**

A package of interventions and mechanisms developed and implemented social partners to facilitate the productive return of the OFWs to their families and communities upon their completion of overseas employment. Services include programs such as:

- **Psycho-social component** which consists of capacity-building through assistance in community organizing and maintaining OFW Family Circles (OFCs), and services like psycho-social counseling, stress debriefing, values formation and financial literacy;

- **Livelihood component** through:
  
  - **i. Balik-Pinas, Balik-Hanapbuhay Program**, a non-cash livelihood support/assistance intended to provide immediate relief to returning member OFWs, active or non-active, who are displaced from their jobs due to war/political conflicts in host countries or policy reforms controls and changes by the host government or are victims of illegal recruitment and/or human trafficking or other distressful situations.

  - **ii. Provision of livelihood skills training and distribution of starter kits to enable women OFW returnees to start and to operate livelihood undertaking for self-employment. Priority is given to women OFWs who are displaced by the hostilities and conflicts in their host country, or victims of illegal recruitment and trafficking and other distressed and displaced women household service workers.**

  - **c. Financial Awareness Seminar (FAS) and Small Business Management Training (SBMT), training intended to assist OFWs and their families with financial literacy relative to their overseas employment and to encourage them in putting up a small business enterprise for self-employment;**

  - **d. Livelihood Development Assistance Program (LDAP), provide grants for livelihood assistance to undocumented returning OFWs thru livelihood starter kits; and**

  - **e. Education and Livelihood Assistance Program (ELAP), scholarship for the dependents of OFWs who were active OWWA members at the time of death.**

The Philippine government has established the Philippine Retirement Authority (PRA), which is mandated to provide retirement homes in the Philippines for foreign senior citizens. It is hoped that retirement homes and better geriatric care facilities can also be made available.
to the Filipino elderly for equal opportunity to receive better care facilities.

29.2 Older persons returning home to rural areas after having spent their working life in urban areas
*please elaborate with data, as appropriate:*
Executive Order No. 114 (Institutionalizing the Balik Probinsya, Bagong Pag-aso Program), basically a COVID-19 pandemic response, aims to, among others, reverse migration to the Metro Manila and other congested metropolises, as well as to attain rural prosperity through equitable distribution of wealth, resources and opportunities, a balanced regional development program to foster socially cohesive, resilient and sustainable rural communities needs to be institutionalized. It provides financial support to those who are willing to return to the provinces.

29.3 Refugees, internally displaced people or stateless persons
*please elaborate with data, as appropriate:*

### Neglect, abuse and violence

<table>
<thead>
<tr>
<th>30</th>
<th>Has the Government:</th>
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<tr>
<td>30.1</td>
<td>Addressed neglect, abuse and violence against older persons? <em>(SDG 5.2.1; SDG 5.2.2; SDG 11.7.2; SDG 16.1.3; SDG 16.1.4)</em></td>
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The Philippines has the following measures to address neglect, abuse and violence against older persons:

a. **Anti-Elder Abuse Bill.** Currently on its final reading, the Anti-Elder Abuse Bill, once passed, will aim to "protect senior citizens from violence and address all forms of violence, abuse, neglect, exploitation, and coercion, especially acts deleterious to their personal safety, security, dignity, or any discriminatory act committed against senior citizens."

b. **The DSWD Reporting System and Prevention programs for Elder Abuse Cases (RESPPEC).** The Reporting System and Prevention Program for Elder Abuse Cases (ReSPPEC) is a community-based project which strengthens partnership and networks between and among the elders' sector, stakeholders and partners to ensure holistic and efficient delivery of services to respond to elder abuse cases. This project shall develop a holistic system that will put into place mechanisms, necessary procedures and protocols to formally report, investigate, intervene, document, monitor and provide follow-up services to victims of elder abuse in the community.

The major categories of abuse among older persons include:

i. **Physical Abuse** – The infliction of pain or injury, physical coercion, or physical or drug-induced restraint.

ii. **Psychological/ Emotional Abuse** – The infliction of mental anguish and distress through verbal or nonverbal acts;
iii. Psychological/ Emotional Abuse
iv. Financial Abuse — The illegal or improper exploitation or use of funds or resources of the older person.
v. Sexual Abuse — non-consensual sexual contact of any kind with the older person.
vi. Neglect — The refusal or failure to fulfill a care-giving obligation. This may or may not involve a conscious and intentional attempt to inflict physical or emotional distress on the older person.

c. Republic Act 9710 or the Magna Carta of Women contains sections that protect women including those in older ages:

i. Sec. 27 (b) - The State shall institute policies and programs that seek to reduce the poverty and vulnerability to risks and enhance the social status and rights of the marginalized women by promoting and protecting livelihood and employment, protecting against hazards and sudden loss of income, and improving people’s capacity to manage risks.

ii. Sec. 33 - The State shall protect women senior citizens from neglect, abandonment, domestic violence, abuse, exploitation, and discrimination. Towards this end, the State shall ensure special protective mechanisms and support services against violence, sexual abuse, exploitation, and discrimination of older women.

30.2 Put in place any services for victims of elder abuse, neglect and violence, including training of care and social service professionals, family members and older persons?

The senior citizens who are victims of elder abuse, neglect and violence are assessed for possible inclusion in programs being provided, such as social pension. They are also being constantly monitored by the LGUs.

Executive Order No. 105 or the Provision of Group Home/Foster Home for Neglected, Abandoned, Abused, Detached and Poor Older persons and Persons with Disabilities states under Section 1:

*The housing program for the poor older persons and persons with disabilities includes the establishment/donation of group/foster homes for the neglected, abused and unattached or homeless older and disabled persons and those incapable of self-care including its management, maintenance and operations.*

Yes ☒ No ☐

Public recognition and ageing with dignity

31 Has the Government undertaken measures to enhance public recognition of older persons with regard to their authority, autonomy, self-determination, wisdom, productivity and contributions to society? (SDG 10.3.1; SDG 16.7.1; SDG 17.18.1) please elaborate with data, as appropriate:

Yes ☒ No ☐
Republic Act 10868 or **Centenarians Act of 2016** provides recognition and honors all Filipinos who reach the age of one hundred (100) years old, whether residing in the Philippines or abroad. As an incentive, the government issues a Letter of Felicitation from the President and a gift amounting to one hundred thousand pesos (P100,000.00).

The **Order of National Awards (ONA)** established under Proclamation No. 1001 is the highest national recognition given to Filipino individuals who have made significant contributions to the development of Philippine arts. The Order of National Artist aims to recognize:

a. Filipino artists who have made significant contributions to the cultural heritage of the country;
b. Filipino artistic accomplishment at its highest level and to promote creative expression as significant to the development of a national cultural identity; and
c. Filipino artists who have dedicated their lives to their works to forge new paths and directions for future generations of Filipino artists.

Other civil society organizations such as the Coalition of Services for the Elderly (COSE), a non-government organization in the Philippines working with older persons since 1989, recognizes the significant contributions of older persons in society through its annual **Sampung Ulirang Nakatatanda (SUN)** Ten Outstanding Older Persons Awards.

32 Has the Government undertaken measures to protect older persons’ dignity and enjoyment of all human rights, including to address and eliminate ‘ageism’ and age-based discrimination? *(see also companion document)*

The government has enacted into law **Republic Act No. 10911**, an Act Prohibiting Discrimination Against Any Individual in Employment on Account of Age and Providing Penalties Therefor, otherwise known as the “Anti-Age Discrimination in Employment Act” in 2016. This law provides that it is prohibited to discriminate against an individual in employment because of age.

Opportunities for decent work for older persons still prevail during the pandemic including:

- Hiring of older persons for full time or part time work in private companies and establishments such as SM Supermalls;
- Hiring of older persons in government offices;
- Formation of cooperatives for older persons;
- Provision of funding for business enterprises;
- Providing livelihood opportunities or enterprises to Senior Citizens to gain income by government agencies;
- The DSWD implements the Cash for Work Program for community projects in times of calamities or disasters that...
<table>
<thead>
<tr>
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<th>provides temporary source of income and include older persons as beneficiaries.</th>
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<td>33</td>
<td>Has the Government undertaken measures to recognize and support exercise of legal capacity of older persons, such as supported decision-making? <em>please elaborate with data, as appropriate:</em> Republic Act No. 11055 (Philippine Identification System Act) established a single identification system that aims to provide a valid proof of identity for Filipino citizens and resident aliens of the Philippines. Various benefits and services provided by law for the welfare of senior citizens including legally related transactions recognizes their thumb mark especially those who are illiterate or physically disabled.</td>
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<td>Yes ☒ No ☐</td>
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</table>

**Information, innovation and technology**

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<tr>
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<th>Has the Government put in place mechanisms to improve the availability and accessibility of information specifically for older persons? <em>(SDG 9.c.1)</em> <em>please elaborate with data, as appropriate:</em> DICT Tech4ED Program (see answer on 12.2)</th>
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<tr>
<td>34</td>
<td>Yes ☒ No ☐</td>
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<th>Has the Government fostered development of any innovative methods and services in support of older persons, such as user- and age-friendly technology and products? <em>please elaborate with data, as appropriate:</em> DICT Tech4ED Program (see answer on 12.2)</th>
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<td>35</td>
<td>Yes ☒ No ☐</td>
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V. Data

**Instruction:** For the following questions, please provide: (a) the name of the legislation, policy and/or action plan; (b) its time frame; (c) its main elements; and (d) its main achievements. Please elaborate and either link or attach copies of relevant documents.

**Lack of ageing-related data and research**

<table>
<thead>
<tr>
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<th>Is the lack of ageing-related data and research a matter of concern for your Government? If so: (a) what data and research are needed; and (b) how are you addressing these concerns? <em>(SDG 17.18.1; SDG 17.18.2; SDG 17.18.3; SDG 17.19.1; SDG 17.19.2)</em> Kindly refer to Item 4.3.</th>
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<td>36</td>
<td>Yes ☒ No ☐</td>
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<tr>
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<th>Has the Government undertaken any efforts in data collection activities, including at the national and subnational levels, to disaggregate data by age and sex, with age groups disaggregated</th>
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<tr>
<td>37</td>
<td>Yes ☒ No ☐</td>
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</table>
Voluntary National Survey on the Implementation of the
Madrid International Plan of Action on Ageing (MIPAA) in Asia and the Pacific - 2021

| beyond 50+ or 60+ (e.g., Household Social and Economic Survey, National Transfer Accounts)? (see also companion document) |
| Kindly refer to Item 4.3. |

### National surveys

| 38 | Has there been: (a) a stand-alone national survey focusing on population ageing or older persons; or (b) inclusion of specific modules on older persons or population ageing into national surveys, such as a National Survey on Older Persons, or DHS, since 2017? If so, please provide: (a) the name of the survey; (b) its focus; (c) the name(s) of the responsible ministries, agencies and institutions; and (d) relevant links. |
| Kindly refer to Item 4.3. |
| • 2019 Ageing and Health in the Philippines Report |
| • 2018 Longitudinal Study of Ageing and Health in the Philippines |
| Yes ☒ | No ☐ |

| 39 | Is there any longitudinal data on older persons collected with a focus on their health, and social and economic situation? please elaborate with data, as appropriate: |
| • 2018 Longitudinal Study of Ageing and Health in the Philippines |
| • Evaluation Study of the implementation of RA 9994 commissioned by the Active and Health Ageing and Development Committee of POPCOM Board of Commissioners |
| Yes ☒ | No ☐ |

### Titchfield Group

| 40 | Is the Government active in the Titchfield Group on Ageing-related Statistics and Age-disaggregated Data? If so, how does the Government contribute to the group? (see also companion document) please elaborate with data, as appropriate: |
| Yes ☐ | No ☒ |

### VI. COVID-19 and older persons

**Instruction:** For the following questions, please provide: (a) the name of the legislation, policy and/or action plan; (b) its time frame; (c) its main elements; and (d) its main achievements. Please elaborate and either link to or attach copies of relevant documents.

---

5 The creation of the Titchfield City Group on Ageing and Age-disaggregated statistics was mandated by United Nations Statistical Commission resolution 49/118 in 2018 to contribute to identifying gaps and establishing international standards and methods for the compilation of statistics and data on the major of dimensions related to ageing and age-disaggregated data across the life course. For further information, see [https://unstats.un.org/nmsd/statcom/49th-session/documents/Report-on-the-49th-session-E.pdf](https://unstats.un.org/nmsd/statcom/49th-session/documents/Report-on-the-49th-session-E.pdf)
Effects of COVID-19 on older persons

41 Were hospitalizations and death rates among older persons in 2020 and 2021 higher than for the general population, or as compared with previous long-term observations? (please provide age and sex disaggregated statistics and their sources) please elaborate with data, as appropriate:

According to the research brief of the University of the Philippines Population Institute (UPPI), the majority of COVID-19 cases cluster in the 50 and above age group. Positive COVID-19 cases are found more within older ages and has a higher proportion among males.

42 Have older persons been affected socially and economically? How? (please provide any statistical evidence disaggregated by age and sex)

The older persons have become especially vulnerable especially in terms of health risks due to physiological changes that come with ageing and potential underlying health conditions and comorbidities.

Below are the key findings based on a study conducted in 2020 by the Coalition of Services of the Elderly (COSE) in cooperation with Help Age International:

- On Food and Income, 23% of older people reduced either the quantity of food consumed or made changes to what they usually eat
- On Health, 61% of older people have not be able to access services since the start of the COVID-19 outbreak, with 52% of older people reporting that they have difficulty in accessing medicine.
- On Protection, 68% of older persons have difficulty accessing health services while more than 50% reported that they were also having a hard time securing food and medicines.
- On Wellbeing, 79% of the older people respondents reported that they felt worried or anxious either all of the time or most of the time. This correlates with their apprehension over being denied access to resources, opportunities, or services such as health care, isolation and neglect.

On access to health services:

- 61% of older people consider that their access to health services has changed since COVID-19. This is higher for older men (65% compared with older women 57%) and older people with disabilities (76%)
- Further troubling is that 9% of older people; 11% of older women and 14% of people aged 80+, did not previously have access to healthcare services.

On nearest health facilities:
Most older people (81%) interviewed knew where their nearest COVID-19 testing and treating facility was located. Of those older people who know where their nearest facility is, 34% said it was less than 30 minutes away. While 29% of older people said it was between 30 minutes and one hour away, and 23% between one and three hours away.

However, it is worrying that 14% of older people do not know where their nearest health facility is which treats older people for COVID-19. This is higher (20%) for those older people in their 60s.

**On access to medicines:**

- 48% of older people interviewed reported that they are still able to access medications for their health conditions. Furthermore, 59% of older people with disabilities reported still having access to medicine.

- However, 17% of older people have been unable to access their medicine since the start of COVID-19. This is higher for older men (23%) and those in their 50s (26%).

**On access to PPEs:**

- 68% of older people were able to purchase their own preventive materials, with 91% of respondents saying they were available at local markets.

- 47% of older people received their necessary preventive supplies from different sources. This was higher for older people with disabilities (63%) and older people aged 80 and above (68%).

According to the same study conducted by COSE,

- Livelihoods and income are the second highest priority for older people. The top sources of income for older people are cash transfers or receiving a pension (43%), especially for those aged 60 and above. This is followed by government or humanitarian assistance (28%); remittances from relatives (24%) and by receiving a regular salary (24%) (which is higher for those in their 50s).

- Many older people also raise serious concerns about having depleted all their savings.

- Data from the Philippine Statistics Authority shows that, as of April 2020, there were 7.5 million Filipinos who lost their employment due to COVID-19. This indicates that many working Filipinos are affected by the pandemic, especially older persons who have no pension at all and who depend on support from children.
The informal sectors also greatly suffered due to mobility restrictions and quarantine measures. Due to the "No Work-No Pay" arrangement, and the fact that they can no longer report to work due to movement restrictions—they were suddenly unable to secure their basic needs, mainly water and food.

Still on the same study, the findings also say that 97% of older people are observing the government's quarantine measures. The quarantine specially restricts the movement of older persons. Though this is meant to stop the virus from spreading and also to protect the older persons, it caused unintended impact to the overall wellbeing of the older persons.

The mental health ramifications of COVID-19 and insecurity in the country are also causing significant impacts on the wellbeing of older people.

These restrictions have affected most Senior Citizens who are living alone or if both are of old age, particularly in purchasing goods for their consumption and medicines for their maintenance. It has also alienated them from their families, children, grandchildren and even friends who are not allowed to visit or interact with them for fear of transmitting the virus. In addition to the restrictions, the Philippine government has imposed the wearing of face masks, constant washing of hands, and wearing face shields in public places.

While many were able to cope up with this "new normal," some were more affected negatively and experienced loneliness, feelings of isolation, fear, uncertainty and even mental depression.

Lockdown measures have put older persons at increased risk of violence, abuse and neglect. Since the quarantine measures force families to stay together, there are some instances that the needs of the older persons were taken for granted.

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**Government response to COVID-19**

43. Did the Government put policies or measures in place that addressed the impact of COVID-19 on older persons with regard to the following issues: *(SDG 3.b.1)*  
If yes, please answer 43.1 – 43.3  
If no, please proceed to 44  
Please elaborate with data as appropriate:

The Commission on Population and Development (POPCOM) developed and disseminated to local government units and the Department of Health (DOH) the Demographic Vulnerability Tool (DVT) which contains information on the number of senior citizens in households and those living alone in each barangay who shall be prioritized for assistance during the pandemic to include vaccination.
relief and other relevant interventions. These tools are available from POPCOM website and disseminated to concerned LGUs.

<table>
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<tr>
<th>43.1</th>
<th>Access to health-care services (both usual services and COVID-19 tests)</th>
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<td>The Department of Social Welfare and Development, as the lead agency in social protection, is mandated to contribute to better quality of life of the Filipino people. Priority attention is given to the poor, vulnerable, and marginalized sectors of the society, especially during the declaration of State of Public Health Emergency all throughout the Philippines pursuant to Presidential Proclamation No. 922, series of 2020.</td>
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<td>Immediately responding to the threat of COVID-19, the Philippine Government enforced measures that helped limit the surge of infections and mitigate the impacts of the pandemic. To mitigate the socio-economic impacts of the pandemic, the Government implemented the Social Amelioration Program, providing emergency subsidies to the indigent families as well as safety nets and social protection interventions to protect the welfare of the vulnerable groups and safeguard their rights.</td>
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<td>Complementing the Social Amelioration Program the Department of Social Welfare and Development has strengthened the implementation of its flagship programs which includes (i) Assistance to Individuals in Crisis Situations; (ii) Augmentation of Food and Non-Food Items; (iii) Livelihood Assistance Grants; (iv) Social Pension for Older Persons; (v) Supplementary Feeding Program; (vi) Balik Probinsya Pag-asa Program which is providing support to families returning to their respective provinces, among others. These social protection interventions aim to subsidize basic necessities of those mostly affected which also included the older person.</td>
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<td>The Senior Citizens (60 years old and above) are given priority in the vaccination program as an A2 Priority, next to A1 Priority for the frontliners and health workers. The A3 Priority are those individuals with comorbidities. As of 25 June 2021, the Daily Vaccination Report of the National Vaccination Operations Center (NVOC) of the Department of Health has reported that a total of 8,194,911 Senior Citizens have been master listed for vaccination against COVID-19. The LGUs as well as the Senior Citizens Organizations are enjoined to further raise awareness and encourage Senior Citizens, and their families, to avail of the vaccines whenever there are schedules.</td>
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<th>43.2</th>
<th>Protection of older persons’ higher vulnerabilities to COVID-19 (e.g., isolating nursing homes, home delivery of medicine or food, etc.)</th>
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<td><strong>NEDA We Recover as One.</strong> This report details a comprehensive set of measures to mitigate the impact of the COVID-19 pandemic and enable the economy to recover and transition to a new normal. The report also estimates the social costs and economic losses during the ECQ and provides a set of mitigating measures and policies and programs to rebuild consumer and business confidence.</td>
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| Yes ☒ | No ☐ |
It recommends actions that aim to limit transmission and provide health care to those who need it; mitigate some of the adverse social and economic impacts of the pandemic; as well as define and adapt to the new normal.

**NEDA Recharge PH Program.** Recharge PH seeks to refocus, sharpen the design and accelerate the implementation of programs under the 2020 General Appropriations to mitigate the impact of the COVID-19 pandemic and help get the Philippine economy recover from the sharp decline in the second quarter of the year.

**DSWD SULONG Recovery Plan 2021-2022.** Envisioned to contribute to the protection of vulnerable sectors through responsive and appropriate social protection programs and services. The Plan serves as an interim plan and a building block for the strategy that was originally designed. It serves as the preparation of the Department to operate in the context of the Mandanas Ruling and be the way of capacitating the organization to transition to the new normal. The Plan will also operate amidst both pandemic and within the Mandanas Ruling in place. In best case scenario, the Department can slowly adopt either Fold-in or Parallel means of implementation by 2022.

43.3 **Economic conditions (e.g., employment, income maintenance, immediate assistance)**

The senior citizens who have been assessed as eligible for the Social Amelioration Program (SAP) and Assistance to Individual in Crisis Situation (AICS) are provided cash grants to augment their economic condition.

As shown on Item 32:

The government has enacted into law Republic Act No. 10911, an Act Prohibiting Discrimination Against Any Individual in Employment on Account of Age and Providing Penalties Therefor, otherwise known as the "Anti-Age Discrimination in Employment Act" in 2016. This law provides that it is prohibited to discriminate against an individual in employment because of age.

Opportunities for decent work for older persons still prevail during the pandemic including:

a. Hiring of older persons for full time or part time work in private companies and establishments such as SM Supermalls;

b. Hiring of older persons in government offices;

c. Formation of cooperatives for older persons;

d. Provision of funding for business enterprises.

e. Providing livelihood opportunities or enterprises to Senior Citizens to gain income by government agencies

f. The DSWD implements the Cash for Work Program for community projects in times of calamities or disasters that provides temporary source of income and include older persons as beneficiaries.
One with government's agenda of poverty reduction and inclusive development, the Department of Labor and Employment, through the Bureau of Workers with Special Concerns (BWSC) implements the DOLE Integrated Livelihood and Emergency Employment Programs (DILEEP). The Program seeks to contribute to poverty reduction and reduce the vulnerability to risks of the working poor, vulnerable and marginalized workers, including the older persons, either through emergency employment, and promotion of entrepreneurship and community enterprises.

It has two (2) components: (a) Kabuhayan or DOLE Integrated Livelihood Program (DILP); and (b) Tulong Panghanapbuhay sa Ating Disadvantaged/Displaced Workers (TUPAD) or Emergency Employment Program.

Services in the DILP include (1) provision of training on business planning, basic entrepreneurship development training, productivity and worker’s safety and health, and production skills; (2) provision of working capital in the form of raw materials, equipment, tools and jigs and other support services. Support services such as common service facility and training-cum-production can also be funded; (3) enrollment to group micro insurance schemes; and (4) provision of continuing technical and business advisory services.

TUPAD is a community-based (municipality/barangay) package of assistance that provides emergency employment for displaced workers, the underemployed and the unemployed poor for a minimum of 10 days but not to exceed 30 days, depending on the nature of work. Services include (1) provision of basic orientation on occupational safety and health; (2) provision of Personal Protective Equipment, such as hat and TUPAD T-shirt; (3) enrollment in group micro-insurance scheme; (4) payment of one hundred percent (100%) of the prevailing minimum wage in the locality, subject to the submission of validated daily time records and supported by a payroll; and (5) tapped TESDA or its accredited training institutions for the conduct of skills training under the Training for Work Scholarship Program (TWSP).

**DSWD Technical Assistance and Resource Augmentation (TARA).** The TARA Program covers LSWDOs (including the offices of LGUs for senior citizens, persons with disability and other vulnerable and marginalized sectors, directly or indirectly under the supervision of LSWDOs) to operationalize the mandates of DSWD, particularly by assisting LGUs in the implementation of local SWD programs and services.

**Specific objectives:**

a. To identify areas for improvement of LSWDOs using needs and capacity assessment strategies and tools;

b. To enhance capacity of LSWDOs in policy development, program/project development and management, social technology model adoption or replication, service delivery, administration and organization, case management, residential
c. To help develop competencies of the personnel of LSWDOs through the assistance of sectoral and functional specialists or experts, conduct of capability building activities, sharing of studies/researches/evaluations and provision of similar opportunities;

d. To augment resources of LGUs, through the LSWDOs, to respond to the need of their constituents, i.e. disaster response and early recovery, and implementation of other LSWDO-led programs and projects as mandated by existing laws; and,

e. To assist LSWDOs in achieving a fully functional status.

43.4 Social situation (e.g., loneliness, social isolation, stress)?

*Please indicate when the measure was put in place and elaborate with data, as appropriate.*

The National Center for Medical Health (NCMH) Crisis Hotline offers a remote 24/7 crisis and suicide services for free and confidential consultation. Callers are received by mental health crisis responders and are referred to a hospital’s licensed psychiatrist, if needed.

The Philippine Mental Health Association (PMHA) established the Mental Health Community-Based Program (MHCBP) which is a community-based approach in promoting mental health, correcting mental health disorders and misunderstandings and educating the people to become advocates of mental health in their communities. MHCBP is conducted in Luzon areas in collaboration with the Department of Health (DOH) through the National Center for Mental Health (NCMH) and the Local Government Units (LGU).

43.5 Prioritized access to COVID-19 vaccines

Refer to Item 43.1.

**Good practices/lessons learned in Government response to COVID-19**

44 Are there any good practices and lessons learned from the above-mentioned policies and/or measures, including expanding participation of older persons?

*Please give examples.*

The Commission on Population and Development (POPCOM) developed and disseminated to local government units and the Department of Health (DOH) the Demographic Vulnerability Tool (DVT) which contains information on the number of senior citizens in households and those living alone in each barangay who shall be
prioritized for assistance during the pandemic to include vaccination, relief and other relevant interventions. These tools are available from POPCOM website and disseminated to concerned LGUs.

### Coordination of services for COVID-19 response

<table>
<thead>
<tr>
<th>45</th>
<th>Has the Government implemented measures to improve the coordination of primary health care, long-term care, social services and community-based services for older persons in order to ensure a continuum of care and support during the COVID-19 pandemic?</th>
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<tr>
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<td>Refer to Item 43.1.</td>
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<tr>
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<td>Yes ☒ No ☐</td>
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</table>

### Long-term measures

| 46 | Once the pandemic has subsided, do you intend to maintain any measures that were implemented to mitigate the impact of COVID-19 on older persons?  
*please elaborate with data, as appropriate:*
POP COM shall institutionalize the Demographic Vulnerability Tool (DVT) as well as other national agencies' mechanism (e.g., DSWD) to generate information about the demographic data and information on older persons in the design of interventions during crisis situations. The DVT will be specifically integrated in the country's guidelines in disaster risk reduction and management. |
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<td>Yes ☒ No ☐</td>
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### VII. Other issues

47. How has the Government designed and/or implemented measures for the pre-ageing population (future older persons) in the following aspects: (a) work; (b) income security; (c) health; and (d) participation. *(open-ended question; please limit response to 750 words)*

The Philippine Development Plan for 2017-2022 included as one of its socioeconomic agenda and strategies the attainment of demographic dividend. Under this strategy, the need to accelerate demographic transition, improve human capital development and formation and enhance youth employment or human resource utilization strategies. Under this strategy, the country is strengthening its population and family planning program to increase capacity of families to invest for the development of their members. Measures and investments on human capital formation such as education, health and skills development are likewise being pursued to ensure the quality of human resource that can positively contribute to the country's productivity.

By ensuring the country achieve its first phase of demographic dividend, that is, ensuring that the working age population accumulate savings and investments, older population would be assured of greater resiliency and development into older age.
48. Would you like to highlight any other issues related to the main challenges and opportunities of population ageing/older persons in your country since the adoption of MIPAA in 2002? Are there any lessons learned or good practices you would like to share?

With its gradually increasing proportion of older persons, the country shall benefit from the creation of the National Commission of Senior Citizen through RA 11350. The NCSC provides a more dedicated structure that can ensure the implementation of the programs, projects, and policies of the government on senior citizens. Once this agency is firmed up and fully mobilized, it can contribute in expediting the efficient delivery benefits to senior citizens and their families.

Other issues that need to be addressed include:

a. Stricter enforcement of law providing benefits to older persons;
b. Directing social protection programs for the older persons towards greater access through increased awareness of the available benefits and services;
c. Promoting employment of women in the labor force to improve their access to these social protection programs;
d. Harmonizing existing benefits and interventions and the modality or mechanisms of accessing these services;
e. Intensifying and establishing operational and functional mechanism for attaining and optimizing demographic dividend;
f. Strengthening the database and information system related to the situation of the older persons to efficiently inform related planning and policy development initiatives;
g. Establishing a policy and functional mechanism for long-term care insurance and the promotion of ageing-in-place; and
h. Increasing the participation of senior citizens in planning and policy development.

49. Is the Government engaged in any regional cooperation on matters related to “population ageing”, including the sharing of experiences in the implementation of MIPAA among ESCAP member States and/or engagement with ASEAN (where applicable) on the implementation of the 2015 Kuala Lumpur Declaration on Ageing.

The Philippine government has been supportive of the implementation of the Kuala Lumpur Declaration on Ageing, as the Declaration recognizes the need for strengthened health care and social support to meet the emerging challenges faced by older persons in the Region. Furthermore, the Philippines believes that the Declaration promotes healthy, active, and productive ageing in an enabling and supportive community. Just recently, the Secretary of the Department of Social Welfare and Development, in his capacity as the PH Chair of the ASEAN Ministerial Meeting on Social Welfare and Development (AMMSWD), endorsed the Regional Plan of Action on implementing the Kuala Lumpur Declaration on Ageing for adoption by ASEAN Member States.

At the ASEAN level, aside from the strengthening of cooperation between and among the concerned ASEAN sectoral bodies, the external ASEAN partners, and other stakeholders, the following initiatives that promote decent work for older persons are being recommended for consideration:

(i) To have an ASEAN-recognized age category of senior citizens;

(ii) ASEAN to have a strong position to support the Adoption of the Convention on the Rights of Older Persons;
(iii) Promotion of inclusive employment by enacting anti-age discrimination measures that aims to lift age limit;

(iv) Conduct of compendiums on best practices of AMS about decent work;

(v) Conduct of ASEAN-wide research studies on decent work for older persons by the ASEAN Center for Active Ageing and Innovation

THANK YOU!
SAMPLE RESPONSE

I. Older persons and development

For the following questions, please provide: (a) the name of the legislation, policy or action plan; (b) date of implementation and time frame; (c) its main elements; and (d) its main achievements. Please elaborate and attach copies of relevant documents or provide links to them.

**Education, training**

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<th>Has the Government supported older persons’ access to knowledge, education and training? (SDG 4.3.1; SDG 4.4.1; SDG 4.6.1)</th>
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<td>In 2012, the Government of XX adopted the Older Persons’ Decree which established that older persons have a right to lifelong learning (see: <a href="http://www.xxx.gov">www.xxx.gov</a>). The 3rd National Plan on Older Persons (2012–2020) requested that the Ministry of Education, through public universities and schools, offers free continuing education programmes for persons, 60 years or older. Older women and persons with disabilities will be given priority if demand for such programmes is greater than supply.</td>
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<td>For SDG 4.3.1, the latest data from the National Statistical Office show that as of 2020 (June), 85 per cent of youth (15-24 years) at the national level were in formal education in the previous 12 months (see: <a href="http://www.xxx.gov">www.xxx.gov</a>).</td>
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<td>For SDG 4.4.1, country XX has not collected any data; however, it has included a question on this in its 2022 population and housing census.</td>
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<td>As of May 2021, according to the Ministry of Education (2019–2020 Annual Report of the Ministry of Education, see: <a href="http://www.mineducation.gov">www.mineducation.gov</a>), 5 out of 20 public universities offer tuition-free continuing education programmes (3-months during the summer and fall semesters) to older persons. About 250 persons 60 years or older are enrolled in such programmes and are taking courses in architecture, literature and business administration. About 75 per cent of the “older students” are women.</td>
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<td>Since 2015, the City of XX and the City of YY in Country AA, have partnered with the City of ZZ in Country BB and are offering an exchange programme for older persons studying at their local universities. Since its inception in October 2015, 66 older persons have participated in the exchange programme and older persons of both countries have praised the exchange programme highly. The City of XX is exploring to expand the exchange programme to other countries and intends to make the programme intergenerational, something participates favoured.</td>
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|    | **a** Does the Government pursue a life-course approach to knowledge, education, training and work, such as lifelong learning opportunities? |
|    | Yes ☒ No ☐ |

|    | **b** Has the Government undertaken measures to promote digital literacy among older persons? Are there any programmes which encourage and support intergenerational exchange on digital literacy? |
|    | Yes ☐ No ☐ |
### Annex: Priority directions, issues and objectives of the Madrid International Plan of Action on Ageing

<table>
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<tr>
<th>Priority Direction</th>
<th>Issue</th>
<th>Objective</th>
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| Older persons and development | 1. Active participation in society and development  
2. Work and the ageing labour force  
3. Rural development, migration and urbanization  
4. Access to knowledge, education and training  
5. Intergenerational solidarity  
6. Eradication of poverty  
7. Income security, social protection/social security and poverty prevention  
8. Emergency situations | 1. Recognition of the social, cultural, economic and political contribution of older persons  
2. Participation of older persons in decision-making processes at all levels  
1. Employment opportunities for all older persons who want to work  
2. Improvement of living conditions and infrastructure in rural areas  
3. Alleviation of the marginalization of older persons in rural areas  
3. Integration of older migrants within their new communities  
1. Equality of opportunity throughout life with respect to continuing education, training and retraining as well as vocational guidance and placement services  
2. Full utilization of the potential and expertise of persons of all ages, recognizing the benefits of increased experience with age  
1. Strengthening of solidarity through equity and reciprocity between generations  
1. Reduction of poverty among older persons  
1. Promotion of programmes to enable all workers to acquire basic social protection/social security, including, where applicable, pensions, disability insurance and health benefits  
2. Sufficient minimum income for all persons, paying particular attention to socially and economically disadvantaged groups  
1. Equal access by older persons to food, shelter and medical care and other services during and after natural disasters and other humanitarian emergencies  
2. Enhanced contributions of older persons to the re-establishment and reconstruction of communities and the rebuilding of the social fabric following emergencies  |                                                                                                                                 |
| Advancing health and well-being into old age | 1. Health promotion and well-being throughout life  
2. Universal and equal access to health-care services | 1. Reduction of the cumulative effects of factors that increase the risk of disease and consequently potential dependence in older age  
2. Development of policies to prevent ill health among older persons  
3. Access to food and adequate nutrition for all older persons  
1. Elimination of social and economic inequalities based on old age or any other ground, including linguistic barriers, to ensure that older persons have universal and equal access to health care  
2. Development and strengthening of primary health-care services to meet the needs of older persons and promote their inclusion in the process |
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<td>3.</td>
<td>Development of a continuum of health care to meet the needs of older persons</td>
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<td>4.</td>
<td>Involvement of older persons in the development and strengthening of primary and long-term care services</td>
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<tr>
<td>3. Older persons and HIV/AIDS&lt;sup&gt;7&lt;/sup&gt;</td>
<td>1. Improvement in the assessment of the impact of HIV/AIDS on the health of older persons, both for those who are infected and for those who are caregivers for infected or surviving family members</td>
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<td>2. Provision of adequate information, training in caregiving skills, treatment, medical care and social support to older persons living with HIV/AIDS and their caregivers</td>
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<td>3. Enhancement and recognition of the contribution of older persons to development in their role as caregivers for children with chronic diseases, including HIV/AIDS, and as surrogate parents</td>
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<td>4. Training of care providers and health professionals</td>
<td>1. Provision of improved information and training for health professionals and paraprofessionals on the needs of older persons</td>
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<td>5. Mental health needs of older persons</td>
<td>1. Development of comprehensive mental health-care services ranging from prevention to early intervention, the provision of treatment services and the management of mental health problems in older persons</td>
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<tr>
<td>6. Older persons with disabilities</td>
<td>1. Maintenance of maximum functional capacity through the life course and promotion of the full participation of older persons with disabilities</td>
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**Ensuring enabling and supportive environments**

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<td>1. Housing and the living environment</td>
<td>1. Promotion of “ageing in place” in the community with due regard to individual preferences and affordable housing options for older persons</td>
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<td>2. Improvement in housing and environmental design to promote independent living by taking into account the needs of older persons, in particular those with disabilities</td>
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<td>3. Improved availability of accessible and affordable transportation for older persons</td>
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<td>2. Care and support for caregivers</td>
<td>1. Provision of a continuum of care and services for older persons from various sources and support for caregivers</td>
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<td>2. Support the caregiving of older persons, particularly older women</td>
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<td>3. Neglect, abuse and violence</td>
<td>1. Elimination of all forms of neglect, abuse and violence of older</td>
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<td>2. Creation of support services to address elder abuse</td>
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<td>4. Images of ageing</td>
<td>1. Enhancement of public recognition of the authority, wisdom, productivity and other important contributions of older persons</td>
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<sup>7</sup> This issue has not been addressed in the survey.