Encouraging agencies to pay attention to the needs, knowledge and experience of older people

When communities are displaced by conflict or forced to leave their homes because of natural disasters, older people are often left behind or neglected.

Aid agencies also make choices, performing a form of ‘triage’ in which the needs of older people are considered of less importance than, for example, those of women and children. In research carried out in 1999-2000 on emergency responses in natural disasters and conflicts, HelpAge International (HAI) found that older people commonly have specific needs as frailty, lack of mobility and chronic health problems can become acute and life-threatening in a crisis. At the same time, older people may take on new responsibilities, looking after children whose parents are dead or absent and caring for relatives who are ill or have disabilities.

The research also found a mismatch between aid agencies’ ideas of what older people need in emergencies and what older people themselves see as most important. Older people ranked their most acute problems in descending order as income, access to health services, shelter, food and nutrition, and isolation/separation from families. Aid agencies, on the other hand, identified older people’s main problem as food and nutrition, followed by isolation/separation and access to health services, making almost no mention of income issues.

Since that time, HAI has worked to encourage other organisations involved in relief and rehabilitation to include older people in needs assessments, planning and programmes, stressing the importance of looking across generations at support mechanisms in families and among neighbours or communities. The following are some examples of approaches that HAI has used to raise awareness and to encourage both local and international NGOs to take account of older people’s needs and contributions.

Accurate information

A crucial first step is to establish what older people’s needs are in each particular emergency situation. Rapid needs assessments in the field allow relief workers to identify vulnerable older people. Nutrition surveys usually leave them out, focusing on the under-fives as the most vulnerable group. Older people have specific nutritional requirements relating to compromised digestive systems and dental problems, yet these are rarely taken into account in planning food distributions. Emergency health personnel may be able to establish what the main needs are in a community but older people are often under-represented at emergency clinics because they are often unable to reach the centre, or cannot stand in line for hours. Most of all, older people are rarely asked about their needs, nor are they consulted on their knowledge of community relations or experience from previous crises.

HAI has developed rapid needs assessment questionnaires which can be used at both community and camp level and which are geared to identifying older people’s needs and vulnerabilities. The forms, used successively in Orissa, Mozambique, Kosovo, Gujarat and recently Goma, have been revised and adjusted according to experience and changing circumstances. Experience in Gujarat and Mozambique showed the value of...
providing initial training for local organisations, community members and volunteers embarking on this work.

The main questionnaire asks whether the older person has any kind of support, whether s/he is living alone or with family members, or if s/he is caring for other family members. They seek to establish what level of mobility and independence an individual has: whether s/he is able to collect water and wood, prepare food, visit neighbours, and go to the market. The questions also cover health problems specific to older people, in particular joint pain, respiratory and digestive problems, and swollen feet. Housing conditions are investigated and recently questions have been added to help identify psychological and social problems. A separate form focuses on rebuilding livelihoods, particularly the needs of older people and their families for shelter and income.

Support for vulnerable older people, both during the emergency relief phase and in subsequent rehabilitation programmes, needs to ensure that the older person’s family is also included. HAI has learned from experience that singling out older people can cause resentment in hard-pressed communities, and may expose them to abuse. Generally speaking, if the older person, with support, can contribute more effectively within their family, assistance is likely to be welcomed and their status improved.

After the recent lava flows in Goma, HelpAge International’s local partners, community members and volunteers undertook surveys of Goma town, Nkamira Camp and three rural districts near Goma after receiving training in working with older people in the field. Given the long-running conflict in the region, a large, though uncertain, proportion of those displaced by the lava had already been displaced by conflict, with many families split up. The surveys indicated high levels of vulnerability among older people, confirming anecdotal evidence that little attention had been paid to their difficulties. In the camp and in the rural areas, a large proportion — more than 60% — of older people were living alone. An even higher proportion had no support for key activities such as cooking and gathering fuel and water. Severe nutritional deficits were indicated by older people’s own accounts. The basic needs surveys, however, also revealed patterns of difference. In the camp, where rates of malnutrition were very high, older men outnumbered older women 62/38%, in contrast to all the other locations where older women formed the majority of older respondents.

One weakness of these rapid needs assessments is that they do not necessarily provide explanations for such variations. They provide a vital starting point but follow-up work is always needed. There are also as yet unresolved questions on how best to gather information on highly sensitive issues, such as HIV/AIDS. Older people may be infected or be looking after infected family members or their orphans. Such is the stigma attached to HIV/AIDS that direct questioning may not give an accurate picture.

**Working with other NGOs**

HAI’s original research identified the need to develop advocacy and awareness-raising with other national and international NGOs, UN agencies and government bodies. A key goal is to encourage agencies that do not specialise in working with older people to become more aware of their needs, and either address them within their own programmes or identify them to more specialised agencies such as HAI.

One of HAI’s needs assessment forms asks UN agencies and international NGOs to identify any vulnerable older people found in their areas of work, and to say whether these older people have any support. If they are not supported, HelpAge International attempts to provide that support, or to provide advice to organisations already working with other groups. Training and capacity building with local partners and communities helps these local organisations to continue both programme work with older people and advocacy with the aid community after the immediate crisis is over.

After the major floods in 2000 in Mozambique, HAI was able to collaborate, at a practical as well as advocacy level, with other NGOs, both national and international, and with local authorities. HAI urged agencies to assess the most vulnerable older people and their needs not in isolation but as part of a family or community unit. Vulnerable individual checklists and village assessment forms were distributed at inter-agency coordination meetings in Maputo during the crucial first weeks of the emergency. These continued to be used for communities in Gaza Province as a guideline for best practice, for monitoring and on-going assessment purposes, raising awareness of older people’s needs and ensuring these are met in areas that HAI could not reach.

Raising the profile of older people’s needs had an impact on local government authorities as well. "The presence of HelpAge International and its constant pestering at meetings meant that we simply could not ignore our older people," said Camilo Chone, Deputy District Administrator of Chokwe. "The younger people were wondering why you were targeting these people and started to take notice. Older people told me how good it was to be recognised. They felt less depressed and wanted to help with distributions."

HAI established a working relationship with several international agencies providing support direct to older people and was also able to strengthen and improve the capacity of local partner organisations VUKOXA and APOSEMO and their network of volunteers. Throughout the emergency, it provided training workshops on Participatory Needs Assessments, advocacy and community awareness-raising on the needs of older people in an emergency situation, and helped strengthen the partners’ administrative and financial capacity.

In Goma recently, HAI has found greater difficulty in engaging with INGOs and international agencies. Receptiveness to the approach as used in Mozambique varies according to the situation on the ground and the degree of coordination established within the aid community.

A further problem is HAI’s own capacity. In Kosovo, for example, expectations were raised among local and international organisations which proved beyond HAI’s capacity to meet. HAI also needs to develop more effective monitoring of the outcomes of its advocacy to other NGOs. Sometimes it is not clear whether agency responses are a direct result of HAI’s advocacy work or because of other factors, internal to aid agencies themselves.
Long-term needs

Getting international organisations and NGOs to engage with issues relating to older members of refugee and IDP communities is also important in situations where displacement lasts for long periods of time, where economic and social difficulties become critical.

Their most common concern was insecurity.

In Serbia, older refugees from Bosnia and Croatia (who first fled during the Balkan wars of the early 1990s) still live in collective centres where they feel invisible and isolated. Some of these older refugees attended a workshop held in Belgrade in June 2001, organised by HAI, which brought them together with representatives from the collective centres, national and international NGOs, UNOCHA and UNHCR.

Many of the older refugees want to move out of the collective centres but do not have any money or prospect of finding housing. Their most common concern was insecurity. They cannot claim their pensions from their country of origin while they are living in Serbia. Some would like to return to their original homes but are too aware of the continuing fear and hostility towards Serbs in Bosnia and Croatia; furthermore, there is little legal information or advice for older people who would like to return. Food assistance is comprehensive and effective but older people are particularly vulnerable to the problems faced by Serbs generally — the high cost of living, shortages of heating fuel and deteriorating medical care. For older people with chronic illnesses, medicines are only available at high prices from private pharmacies.

Older people have little confidence in the government, which they feel has scant interest or knowledge of the problems and circumstances of older people. They would like to see the government expanding employment and income-generating opportunities for both older and young people, to enable families and older people to rely on their own resources.

The older participants also asked NGOs to include older people in all their programmes and organise training, in particular relating to healthy diet and social rights. International NGOs said the seminar was the first opportunity they had had to listen to what older people have to say.

Participation and self-reliance

When displacement and economic disruption persist for an extended period, the need to involve older people and their organisations is of equal importance. In Juba, southern Sudan, older people have become directly involved in needs assessment, distribution of assistance and planning.

The conflict and repeated population movements in southern Sudan have separated families, breaking down the support mechanisms that have traditionally provided care for frail older people. Conditions within Juba itself are gradually deteriorating, as access to farming land, shelter materials and inputs for traditional trades and handicrafts are being reduced. The general humanitarian crisis has been aggravated in recent years by harvest failures and annual flooding.

International and local NGOs have provided essential food and medical care, especially to the displaced population, but they have not catered specifically for older people. HAI began a nine-month emergency programme in Juba in July 1998 to distribute items such as seeds, tools and household equipment, to build houses and pit latrines and to rehabilitate water pumps and wells. It also provided training to older people and project workers to enable them to represent the needs of older people.

The programme started by bringing together older people and partner NGOs. Older people were invited to meetings at each of 23 existing distribution centres. They were encouraged to form committees for each centre to agree priorities for aid and decide the best way to organise services, keeping in mind the needs of disadvantaged older people.

Their involvement was backed up by training providing by HAI, particularly in developing criteria to assess vulnerability and needs. Older people were also included in training for NGO, government and UN staff which focused on older people's needs in conflict situations and how to ensure their participation.

The work of the committees has improved older people's capacity to assess their own situation and to lobby on their own behalf. The 23 committees decided to form a coordinating committee to deal with problems, coordinate activities and represent older people to the regional government and international donors. Some NGOs even complain that older people were becoming too vocal and that HAI is empowering them too much.
In addition to promoting their welfare, "the project helped the older person's image greatly", according to Samson Kwaje, 65 year old committee chairman. "They can dress well on social occasions, they feel well….

Those without shelters are sheltered, sanitation has been taken care of [and] the project has brought craft skills.

The process of including older people … is a slow one.

Every crisis has its own particular profile and demands, and ways of working have to adapt to differing situations. When international NGOs are involved, it is important to influence their perceptions of vulnerability to include older people. In Kurdish-controlled northern Iraq, most advocacy has been directed towards the two Kurdish regional administrations, as few INGOs remain in the region.

The problems of displacement date back to the Iraqi government’s Anfal campaigns of the 1980s which distorted family structures and left older people very vulnerable. Many years of displacement, war and economic sanctions have left a legacy of psychological problems associated with loss of family members and homes and the day-to-day problems of surviving in a precarious economy.

HAI has been working in northern Iraq since 1997. The programme began by distributing relief materials and rebuilding houses in the governorate of New Kirkuk. A home visiting programme was then established in Dohuk and New Kirkuk governorates to provide psychosocial and health care, plus other forms of practical support, to the most vulnerable older people and their families.

In 1999/2000, the programme adopted a more developmental approach, with a three-year plan to raise the profile of older people and ensure that they are actively included in the social and economic life of their community.

The economic future of the region remains uncertain so that poor older people are likely to remain a highly vulnerable group. The goal of the programme is to create sustainable support systems at local level for older people. HAI itself aims to withdraw from northern Iraq within three years, handing over the home visiting programmes to local government and community support networks. This involves mobilising and training older people themselves, as well as local government staff and community groups. Local media campaigns are being used to raise public awareness and interest local government officials in the issue.

Conclusion

The process of including older people in emergency responses and in rehabilitation and recovery programmes for refugees and the displaced is a slow one. NGO, UN and government staff on the ground may be convinced of the importance of including older people in their programmes, acknowledging the contribution that they make, but this may not immediately be reflected in wider agency policies. Some international agencies have worked out clear policies at head office level but these take time to filter to the field. HAI too has to develop and refine its methods of information gathering and advocacy, learning from its experience in the field. The goal is for older people to be able to participate and contribute during conflict and crisis. Their current neglect mirrors wider attitudes to ageing, which also need to change.

HelpAge International (www.helpage.org) is a global network of not-for-profit organisations with a mission to work with and for disadvantaged older people worldwide to achieve a lasting improvement in the quality of their lives.

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1. See Forced Migration Review issue 13, p46.