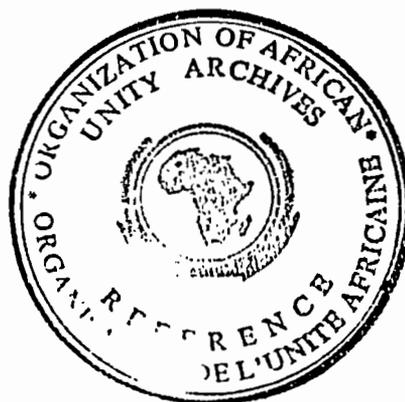




FINAL REPORT
OF THE EXPERTS MEETING TO DEVELOP AN OAU POLICY FRAMEWORK AND
PLAN OF ACTION ON AGEING
27 November-1 December 2000
Kampala, UGANDA



FINAL REPORT**OF THE EXPERTS MEETING TO DEVELOP AN OAU POLICY FRAMEWORK AND****PLAN OF ACTION ON AGEING****27 NOVEMBER-1 DECEMBER 2000****KAMPALA, UGANDA****A. INTRODUCTION**

1. In many countries in Africa the trend towards an ageing society has not yet attracted the attention it deserves from policy makers and planners. Despite the fact that the population of Africa is predominantly youthful, the number of older people is increasing. The proportion of older people is also increasing; today people aged 60 and over account for 4.52% of the population in Africa and by 2050 it is projected to increase to 11.32%. Consequently, the OAU Member States need to develop new policies, strategies and programmes to support an ageing society based on the social and economic realities of Africa.
2. This was the background to the Experts Meeting to Develop an OAU Policy Framework and Plan of Action on Ageing, which was jointly organised by the Organisation of African Unity (OAU) and HelpAge International Africa Regional Development Centre in collaboration with the Government of Uganda, from 27th November to 1st December 2000, in Kampala, Uganda, at the kind invitation of the Government of Uganda.
3. Financial support for the Experts Meeting and associated activities prior to and after the Meeting was provided by the Department for International Development (UK), World Health Organisation (Africa Regional Office - Zimbabwe), United Nations Trust Fund on Ageing (USA) and The Rockefeller Foundation (USA).

B. PARTICIPATION

4. Participants came from the following twenty-seven (26) OAU Member States, representing the five regions of the continent: Algeria, Angola, Botswana, Burundi, Cameroon, Chad, Egypt, Ethiopia, Ghana, Kenya, Lesotho, Mali, Mauritius, Mozambique, Nigeria, Rwanda,

Senegal, Sierra Leone, South Africa, Sudan, Tanzania, Togo, Tunisia, Uganda, Zambia and Zimbabwe. Switzerland and the United Kingdom were also present.

5. The Meeting received a goodwill message from the Retirees Welfare Bureau of Zambia which could not be represented at the Meeting but submitted a paper for consideration. Many letters giving apologies for absence were received from organisations throughout the continent with requests that they should receive the subsequent Meeting report and associated documents.
6. The following Organisations also attended: African Development Bank, Department for International Development (UK), Economic Commission for Africa, HelpAge International, International Labour Organisation, Organisation of African Unity, United Nations High Commission for Refugees, World Health Organisation.

C. OPENING CEREMONY

7. The Opening Ceremony, which was held at the Nile Conference Centre, was chaired by the Permanent Secretary in the Ministry of Gender and Community Affairs Development, Amb. Kakima Ntambi. The guest of honour was H.E. Brigadier Moses Ali, the second Deputy Prime Minister and Minister of Internal Affairs of Uganda, as representative of H.E. President Yoweri Kaguta Museveni.
8. Three other Ministers from the Government of Uganda attended the opening session, namely: Hon. Muruli Mukasa, Minister in the Office of the President responsible for Security; Hon. Jaber Bidandi Ssali, Minister of Local Government; and Hon. Florence Nayiga Ssekabira, Minister of State for Elderly and Disability Affairs. Other high ranking officials present from the Ministry of Gender and Community Development Affairs were the Director for Gender and Community Development, Mrs Jane Mpagi, and the Commissioner for Elderly and Disability, Mr. Herbert Baryayebwa.

9. After welcoming all present, the Hon. Minister thanked the OAU and HelpAge International Africa Regional Development Centre for the work they had put into organising and holding the Meeting.

10. He underscored the commitment of the Government of Uganda to, and support for, issues affecting marginalised groups, including older people. He cited article 32 of the Constitution of Uganda, which requires the State to provide for all marginalised groups. To this end, the government has continued to support older people and their associations.

11. He noted the contribution of older men and women in general to the development process and said that they are entitled to development as a human right. The pensions and provident funds that have been provided would continue to assist the older people who have been involved in the formal employment sector, he said. He called for schemes that also target older people in rural areas. He suggested that the rights-based approach should be the corner stone of the policy that would be developed. He advised the experts in their deliberations, to focus on education and the media, health, family, issues of co-ordination/collaboration and the development of indicators by which the implementation of the Policy can be measured.

12. He then declared the Meeting officially open.

13. The representative of older persons, Canon John Bikangaga, took the floor next. He welcomed all present and expressed his gladness to be associated with the Meeting, especially because of his personal proximity to the issues under discussion. He welcomed, too, the statement of intent made by the representative of the Government of Uganda, and hoped that the expected benefits would actually reach older persons.

14. While recognising the strides made by the government of Uganda in this area, Canon Bikangaga decried the lack of such policies in the rest of Africa. Citing anecdotes from his experiences, he noted how the advent of modernisation has eroded the basis of respect traditionally accorded older persons in African society. He also underlined the heterogeneity of the category of older persons. He singled out two groups: the majority who, in days gone by, eked a living from peasant agriculture who are neither trained nor physically able

anymore to continue to exploit the earth for a living; and (ii) those who are well trained and very experienced but have retired. He called upon governments to “harvest” and continue to use this valuable reservoir of wisdom, experience and expertise.

15. He observed that assumptions regarding traditional forms of care no longer hold, a fact which had been compounded by the HIV/AIDS epidemic and the disintegration of the extended family system. The special health needs of older people require special health services for the elderly, he said. Elderly women with disability suffer double tragedy, especially as regards the housing situation which is generally deplorable. He concluded by noting that the Meeting comes at a very appropriate time, and thanking all who had worked to make the Experts Meeting a reality.
16. Professor. Nana Apt, Board Member of HelpAge International, who spoke next, thanked the Government of Uganda for agreeing to host the Meeting in spite of financial and other resource constraints. She thanked the OAU for being a strong partner in this initiative; the donors, especially DFID, for their support to ageing issues over the years; and the participants for attending the Meeting.
17. She noted that by 2050, the number of older people would be more than the number of children under the age of 14 years. Unfortunately, the increase was taking place in a situation where not much contingent planning was taking place for older people. She observed that the purpose for which the Meeting was convened was important because the development of policies and legislation in Africa was long overdue. A start had been made through the co-operation and commitment of the OAU and HelpAge International Africa Regional Development Centre; it needed to be followed through.
18. She was confident that, because of the regional representation of the Experts invited and their deep understanding of, and commitment to, ageing issues, the Policy Framework and Plan of Action to be developed would be both extensive and comprehensive.
19. In his statement, on behalf of the sponsors of the Meeting, Mr. Martin Eliot of the Department for International Development (DFID), noted that even in the mid-1980s, socio-

economic pressures on older people were mounting, especially as the HIV/AIDS decimated the younger segments of society. In a number of countries, conflict and economic crisis have exacerbated the situation.

20. He stressed the need to recognise the pivotal role older people play in society. He added that when development issues are being discussed older people should be involved. He noted, that donors were sometimes guilty of not recognising the role of older people in the development process. He advised that the North must work together with stakeholders in the South to help identify lasting solutions to ageing issues. His Government, through DFID, was proud to play its part in this process.
21. He suggested that one way to achieve this would be for the process initiated on this day to develop and maintain very strong links with national poverty-reduction strategy processes or their equivalent that many countries currently have underway. Thereafter he called for the integration of ageing issues into national poverty-reduction analyses and debates which will help to both mainstream this work and reduce the transaction and bureaucratic costs that the multifarious processes impose.
22. The representative of ILO spoke next. He observed that employment, particularly decent work, is the bedrock of all other human entitlements. Drawing upon a wide range of statistical data, he painted a dire picture of the plight of older persons. He further noted that because of gender roles, which concentrate women among the most deprived and marginalized groupings, older women are particularly vulnerable. He underscored the need to give back to older persons because they have given so much to the development of their families and communities.
23. Underscoring the role and work of the ILO in this area, the ILO representative recalled a number of ILO provisions, which if implemented, would go a long way towards improving the conditions of life and work of older persons. He ended by calling for international policy dialogue between all stakeholders.

24. In his statement, the representative of the OAU, Mr. Etim Akpan, noted that the fact that the Government of Uganda was hosting the Meeting was eloquent testimony to the importance which the Government and people of Uganda attach to issues of ageing and older persons. He paid tribute to President Museveni, to the people of Uganda, and to those who had worked tirelessly in ensuring the success of the Meeting; and to HelpAge International Africa Regional Development Centre for its collaboration with the OAU and for its dedication and enthusiasm.
25. He observed that the issues concerning ageing were inescapable although they were yet to be mainstreamed into policies and programmes of most OAU Member States. Although currently OAU Member States had only a small percentage of their populations in the aged and ageing category, the percentage was on the increase. He further noted that factors such as the move toward more nuclear families, urbanisation of populations and other socio-economic trends and conflict situations were daily eroding traditional norms and ethics. He stressed that the situation of elderly women was particularly grave, especially regarding their access to health services, food and nutrition which is made more complicated when they are childless.
26. He noted that the various global and regional initiatives regarding the issue of the ageing and aged persons were directed at ensuring that priority attention was given to the situation of older persons. For its own part, the OAU had, since its inception in 1963, been seized with the promotion and co-ordination of policies and activities that enhance the welfare of all the peoples of Africa. It was for this reason that at its Twenty-Second Session in Windhoek, Namibia, in April 1999, the OAU Labour and Social Affairs Commission considered the issue of ageing. This initiative had culminated in this Meeting of Experts to elaborate an OAU Policy Framework and Plan of Action on Ageing.
27. He informed the Meeting that the Policy Framework and Plan of Action would be presented to the 24th Ordinary Session of the OAU Labour and Social Affairs Commission in 2001. Thereafter, they would be tabled for endorsement and adoption by the Seventy-Fourth Ordinary Session of the OAU Council of Ministers and the 37th Ordinary Session of the Assembly of OAU Heads of State and Government, respectively.

28. Hon. Ssekabira, Minister of State for Elderly and Disability Affairs, who took the floor next, welcomed the delegates to this very important and historic Meeting. After introducing the Minister of Local Government who was present, she noted that Uganda would benefit immensely from the Experts Meeting.
29. She thanked the organizers for choosing Uganda to host the Meeting, and assured the delegates of the Government's continuing commitment and support. She thanked the DFID representative for calling upon all social partners in development to support ageing issues. She informed the Meeting that since becoming the Minister responsible for ageing issues, she had approached different development partners regarding older people, although the response had not always been positive. She then thanked everyone for coming and invited Mr. Khalfan H. Khalfan to move a vote of thanks.

Vote of Thanks

30. The vote of thanks was proposed by Mr. Khalfan H. Khalfan, the representative of the Pan-African Federation of the Disabled. He thanked the Guest of Honour for his statement, which, he noted, gave the guidelines for achieving the goals of the Meeting. He also thanked the Government of Uganda, the OAU and HelpAge International Africa Regional Development Centre, ILO, DFID and all Experts and Participants at the Meeting.

Presentation by the OAU representative

31. The OAU Representative, Dr. Mary Maboreke, referred to the Aide-Memoire which had been circulated and provided the background to the issues to be discussed. She noted that, much as most of the people in the room were aware of the issues, the need for Africa to start planning ahead before there was a major catastrophe should be emphasised.
32. The OAU Labour and Social Affairs Commission Session held in Namibia in April 1999 underscored the need for concerted efforts in dealing with issues affecting older people. The

OAU and HelpAge International Africa Regional Development Centre were charged with ensuring that steps to address the issues were taken urgently.

33. Outlining the objectives of the Meeting, she indicated that the main objective was to produce a Policy Framework and Plan of Action on Ageing. The Policy Framework and Plan of Action would go through the various OAU processes until its adoption by the Assembly of Heads of State and Government in July 2001. After its adoption, it would be used by Member States to develop policies and legislation in their own countries.
34. She said that there was need for the creation of awareness regarding the Policy Framework and the Plan of Action, as well as the activities that would be carried out. That awareness had started with a Press Conference held by the organisers on the day before, on 26th November, 2000. There was need to set some time frames, targets and indicators so that each and everyone of the stakeholders would come back and report on what they would have done in this area at the next rendezvous.
35. The process of the preparation of the Policy Framework and the Plan of Action would result in the following outputs:
- Increase in awareness of ageing issues and the rights of older people;
 - Establishment of links with/between those involved in issues relating to ageing and older people in Africa; and
 - Development of national policies and plans of action on ageing by Member States, where there do not exist, by 2006.
36. The OAU representative underscored the need for partnership and involvement of all stakeholders to make concrete contribution to strategies and implementation of the Policy Framework and Plan of Action after its adoption by the OAU Heads of State and Government.

D. ADOPTION OF THE AGENDA AND ORGANISATION OF WORK

37. The Meeting adopted its Agenda and Programme of Work (annexed to this report as Annex I).

E. ELECTION OF THE BUREAU

38. The Meeting elected its Bureau as follows:

Chair-person:	Ambassador K. Ntambi, Uganda-host (East)
First Vice-Chairperson:	Mr. Mamadou Konate, Mali (West)
Second Vice-Chairperson:	Agnes Allafi, Chad (Central)
Third Vice-Chairperson:	Manāï Monjia, Tunisia (North)
Rapporteur :	Mr. Zifa Kazeze, ECA – SRDC (SA) (South)

F. ACCOUNT OF PROCEEDINGS

(a) Presentation of Themes

39. A number of papers were presented by Experts on selected themes. These presentations were followed by discussions during which several issues were raised, and proposals and recommendations made for inclusion in the Policy Framework and Plan of Action. These have accordingly been included in the Policy Framework and Plan of Action on Ageing.

i) Theme One – Health and Nutrition:

- Health – Dr. Aziza Suliman Ali, Geriatrician, Sudan Society for the Care of Older Persons, Sudan
- Nutrition – Prof. Hilda N. Kigutha, Department of Human Nutrition, Egerton University, Njoro - Kenya

ii) Theme Two – Family, Community and State:

- Family and Community – Monsieur Traore Gaoussou, Mali

- State Presentation – Mrs Iran Ajufo, Head of the Care for the Elderly Division, Nigeria

iii) Theme Three – Social and Income Security:

- Social Security – Dr. Edwin Kaseke, Principal of the School of Social Work, Zimbabwe
- Income Security – Prof. Soodursun Jugessur, Consultant, Director REPAC, Mauritius

iv) Theme Four – Rights and Exclusion:

- Rights – Prof. Nana Apt, Legon University, Ghana
- Exclusion – Honourable Minister Florence Ssekabira, Ministry of Gender, Labour and Social Development, Uganda

v) Theme Five – Epidemics and Emergencies:

- Epidemics – Prof. Sheila Tlou, University of Botswana, Botswana
- Emergencies – Straton Nsanzabaganwa, Rwanda

vi) Theme Six – Basic Needs:

- Food and Water – Mr Andrew C Nyanguru, Senior Lecturer, University of Lesotho
- Shelter – Monsieur Abdoulaye Khouma, President de l'Association pour la Promotion et l'Assistance des Personnes Agées, Sénégal

(b) Group Work on the Draft Policy Framework and Plan of Action

40. Summaries of the presentations and the subsequent discussions are appended hereto as Annex II.

41. After the presentation and discussions the participants broke into two Working Groups. Each Working Group discussed three themes. Working Group I discussed the following themes: Family, Community and State; Basic Needs; and Rights and Exclusion. Working Group II

considered the other three themes namely: Health and Nutrition; Social and Income Security; and Epidemics and Emergencies. The discussions in the Working Groups went on for the whole day.

(c) Recommendations from Working Groups

42. The participants then reconvened in plenary and reported back on their discussions. The substance of these recommendations has been incorporated directly into the draft policy Framework and Plan of Action.

(d) Address by the Executive Director of the Uganda National Bureau of Standards

43. The participants were addressed by Dr. Eve Kasirye-Alemu, the Executive Director of the Uganda National Bureau of Standards. Associating herself and her organisation with the objectives of this Meeting, she informed the participants of several initiatives that the Uganda National Bureau of Standards currently has underway. She referred to the International Organisation for Standardisation/International Electrotechnical Commission (ISO/IEC) Policy Statement for “addressing the needs of older persons and people with disabilities in standardisation work, 2000”. Among other things, this policy encourages the application of principles of universal/accessible design so that products and services can be used by all; it calls for representation of older people and people with disability in the formulation of standards; it further asks that efforts be made to take the needs of older people and people with difficulties into account when setting standards.
44. The Executive Director underscored the need for “age-friendly standards for an ageing world”. At the level of the East African Co-operation (Kenya, Tanzania and Uganda) she highlighted the regional commitment to involve older persons and all other stakeholders in ensuring that the priority needs of older persons are recognised and addressed.
45. In the ensuing discussion, the OAU, WHO, HelpAge International, and the Pan-African Federation of the Disabled all commended the work of the Uganda National Bureau of

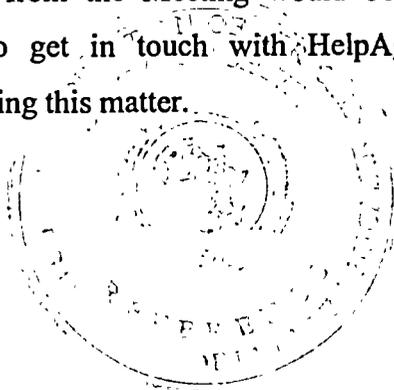
Standards, and thanked the Executive Director for her address. Thereafter, one of the participants moved a vote of thanks for the address on behalf of the Meeting.

G. PROJECT VISITS

46. While the Secretariat put the Draft Policy Framework and Plan of Action and the Report of the Meeting together, the participants were taken to visit a number of projects targeting older persons in and around Kampala. In this regard, visits were made to the Kitagobwa Catholic Women's Association and the Nakanyoyi Home for the Elderly.
47. The Kitagobwa Catholic Women's Association, which is situated about 10 kilometres to the North East of Kampala, is composed of 50 members and was established with the help of the Catholic Church in Kitagobwa. It has as some of its objectives the improvement of the income and thereby the general welfare of the family, information sharing, the support of the aged, and for the aged to pass on their knowledge to the young. The Nakanyoyi Home for the Elderly, which is under the supervision of the Church of Uganda in Mukono Diocese, started as a home for the elderly and later became a day centre. Some of the activities give the elderly the opportunity to learn from each other and produce and sell handicrafts. The Centre also provides medical treatments and feeding for the elderly.

H. ANY OTHER BUSINESS

48. The representative of the Pan-African Federation of the Disabled thanked the OAU and HelpAge International Africa Regional Development Centre for inviting the Federation to the Meeting. He promised to ensure the inclusion of the concerns of older persons on the agenda of the disabled. He further informed the Meeting that his Federation would be convening its first workshop on the aged and disability shortly.
49. In the same vein, the representative of the African Union of the Blind promised to ensure that the documents emanating from the Meeting would be made accessible to the visually impaired. He promised to get in touch with HelpAge International Africa Regional Development Centre regarding this matter.



I. ADOPTION OF DRAFT OAU POLICY FRAMEWORK AND PLAN OF ACTION ON AGEING

50. The Policy Framework and Plan of Action was adopted by the Meeting. Participants promised to send possible amendments by the 15th of December 2000, to the secretariat of the Meeting.

J. ADOPTION OF THE REPORT

51. The Report of the Experts Meeting was adopted by the participants at the Meeting.

K. CLOSING CEREMONY

52. In his Closing Remarks, the Chairperson of the Experts Meeting thanked participants and the secretariat for working hard to ensure the success of the Meeting. He also noted the efficient manner in which all the outcome documents were made ready.

53. The Regional Representative of HelpAge International, Mr Tavengwa Nhongo, in his brief remarks, thanked the media for the coverage given to the Meeting; the Chairperson and the Bureau for guiding the Meeting; the Rapporteur, the participants drawn from all over Africa who had contributed their rich experiences; the resource persons who presented papers without asking for or receiving any honorarium; and the Government of Uganda for agreeing to host the Meeting and ensuring its success. He thanked the OAU for its commitment to matters concerning the ageing and the aged, and also thanked his colleagues from HelpAge International Africa Regional Development Centre for working hard for the ageing and aged of Africa.

54. The OAU representative, in his closing remarks, stressed the importance of the issues concerning older persons to OAU Member States. He informed the Meeting that the OAU Policy Framework and Plan of Action on Ageing would be presented to all the OAU Policy

Organs for adoption. He then thanked the President and people of Uganda while also noting that the country has blazed the trail in many developmental areas.

55. Hon. Florence Nayiga Ssekabira, Minister of State for Elderly and Disability Affairs, brought greetings from Hon. Janat B. Mukwaya, the Minister of Gender, Labour and Social Development, who was unavoidably absent throughout the meeting.

Vote of Thanks

56. The Vote of Thanks was given by Prof. Josephine Namboze Kiggundu on behalf of participants at the Meeting. She thanked the OAU, HelpAge International Africa Regional Development Centre and the Government of Uganda. She expressed the hope that all stakeholders would be brought on board in policy formulation and implementation of issues concerning older persons. She ended by thanking the Chairperson, the Bureau, presenters, media, interpreters, translators and all those who worked to ensure the success of the Meeting and wished all participants a safe journey home.

**DEVELOPING A POLICY FRAMEWORK AND PLAN OF ACTION ON AGEING
DRAFT PROGRAMME OF WORK**

Monday 27th November 2000

8.30am - 10.00am	Registration of Delegates
9.45am	Delegates and Invited Guests take their seats
9.55am	Arrival of Guest of Honour
10.00am – 12 noon	Opening Ceremony (see separate agenda – attached)
12 noon – 2pm	Lunch Break
2.00pm – 2.15pm	Election of Bureau Adoption of Agenda and Organisation of Work
2.15pm – 2.45pm	Background and Expected Outputs from the Meeting
2.45pm – 3.15pm	Theme 1 Presentations – Health and Nutrition <ul style="list-style-type: none"> • Health - Dr Aziza Suliman Ali, Geriatrician, Sudan Society for the Care of Older Persons, Sudan • Nutrition – Prof. Karen Charlton, Head: Nutrition and Dietetics Dept, University of Cape Town, South Africa
3.15pm – 4.15pm	Discussions
4.15pm – 4.30pm	Tea/Coffee Break
4.30pm – 5.00pm	Theme 2 Presentations – Family, Community and State <ul style="list-style-type: none"> • Family and Community – Mr Traore, Mali • State Presentation – Mrs Iran Ajufo, Head of the Care for the Elderly Division, Nigeria
5.00pm – 6.00pm	Discussions
6.00pm – 6.30pm	Summary of Identified Key Issues from Themes 1 and 2

Tuesday 28th November 2000

9.00am – 9.30am	Theme 3 Presentations – Social and Income Security <ul style="list-style-type: none"> • Social Security – Dr. Edwin Kaseke, Principal of the School of Social Work, Zimbabwe • Income Security – Prof. Soodursun Jugessur, Consultant, Director REPAC, Mauritius
9.30am – 10.30am	Discussions
10.30am – 10.45am	Tea/Coffee Break
10.45am – 11.15am	Theme 4 Presentations – Rights and Exclusion <ul style="list-style-type: none"> • Rights - Prof. Nana Apt, Legon University, Ghana • Exclusion – Honourable Minister Florence Ssekabira, Ministry of Gender, Labour and Social Development, Uganda
11.15am – 12.15pm	Discussions

12.15pm – 12.45pm	Summary of Identified Key Issues – Themes 3 and 4
12.45pm – 2.45pm	Lunch break
2.45pm – 3.15pm	Theme 5 Presentations – Epidemics and Emergencies <ul style="list-style-type: none"> • Epidemics – Prof. Sheila Tlou, University of Botswana, Botswana • Emergencies – Straton Nsanzabaganwa, Ministry, Rwanda
3.15pm – 4.15pm	Discussions
4.15pm – 4.30pm	Tea/Coffee Break
4.30pm – 5.00pm	Theme 6 Presentations – Basic Needs <ul style="list-style-type: none"> • Food and Water – Magdar Iskander, Egypt • Shelter – Monsieur Abdoulaye Khouma, President de l'a Association Pour La Promotion et L'Assistance Des Personnes Agees, Senegal
5.00pm – 6.00pm	Discussions
6.00pm – 6.30pm	Summary of Key Identified Issues – Themes 5 and 6

Wednesday 29th November 2000

9.00am – 9.30am	Introduction of Policy Framework and Plan of Action
9.30am – 9.45am	Plenary divides into 3 working groups to discuss two Themes per working group
9.45am – 11.00am	Discussion in Working Groups
11.00am – 11.15am	Tea/Coffee Break
11.15am – 1.00pm	Discussions in Working Groups Continue
1.00pm – 3.00pm	Lunch Break
3.00pm – 4.15pm	Discussions in Working Groups Continue
4.15pm – 4.30pm	Tea/Coffee Break
4.30pm – 6.00pm	Discussions in Working Groups Continue and Recommendations Finalised

Thursday 30th November 2000

9.00am – 9.15am	Recommendations – an Introduction
9.15am – 10.15am	Presentation and Discussion of Recommendations from Theme 1 – Health and Nutrition
10.15am – 11.15am	Presentation and Discussion of Recommendations from Theme 2 – Family, Community and State
11.15am – 11.30am	Tea/Coffee Break
11.30am – 12.30pm	Presentation and Discussion of Recommendations from Theme 3 – Social and Income Security
12.30pm – 2.30pm	Lunch Break
2.30pm – 3.30pm	Presentation and Discussion of Recommendations from Theme 4 – Rights and Exclusion
3.30pm – 4.30pm	Presentation and Discussion of Recommendations from Theme 5 – Epidemics and Emergencies
4.30pm – 4.45pm	Tea/Coffee Break

4.45pm – 5.45pm	Presentation and Discussion of Recommendations from Theme 6 – Basic Needs
5.45pm – 6.30pm	Conclusions
6.30pm – 7.30pm	Break
7.30pm	Cocktail reception at Nile Hotel

Friday 1st November 2000

9.00am – 3.00pm	Project Visits, Free time and Lunch
3.00pm – 3.30pm	Any other Business
3.30pm – 6.30pm	Adoption of OAU Policy Framework and Plan of Action on Ageing
	Adoption of the Report
	Closing Ceremony (see separate agenda – attached)

Programme for the Opening Session

1. Chairperson – Minister of State for Gender, Labour and Social Development in-charge of Disability and Elderly.
2. Remarks and Citation from Mr. Bikangaga, Representative of Older Persons.
3. Remarks from Professor Nana Apt, Representative of HelpAge International.
4. Remarks from Mr. M Elliott, Representative of DFID
5. Address from Mr. Akpan, Representative of the OAU
6. Address from the Minister of Gender, Labour and Social Development, Chaired by the Minister of State for Disability and Elderly.
7. The Minister of Gender, Labour and Social Development, invites the Guest of Honour to open the Experts Meeting.
8. Address by the Guest of Honour to open the Experts Meeting.
9. Vote of thanks.

Programme for the Closing Session

1. The Permanent Secretary, Ministry of Gender, Labour and Social Development chairs the Session.
2. Mr Akpan, Closing Remarks.
3. The Permanent Secretary invites the Minister of Gender, Labour and Social Development to make the closing address for the Experts Meeting.
4. A Representative of older persons, Mrs. Ntiro, to make a vote of thanks to the organisers and participants of the Experts Meeting on Ageing and the Aged.
5. People depart.

THEMES PRESENTED IN PLENARY SESSIONS

The Experts considered six themes in Plenary Sessions. These were:

1. Health and Nutrition;
2. Family, Community and State;
3. Social and Income Security;
4. Rights and Exclusion;
5. Epidemics and Emergencies; and
6. Basic Needs.

Key issues highlighted in the papers and the discussions under each theme are presented below.

THEME 1: HEALTH AND NUTRITION

Two presentations were made, one focused on Health and one on Nutrition.

Key issues raised in the two papers and during the discussions included:

1. Life styles from early ages affect the health conditions in old age and these have to be taken into account in policy formulation. For example, involvement in sports and exercises from early ages needs to be given strong advocacy by governments and communities;
2. General policy on education should include preparation of the young for old age;
3. There is need to undertake health situation analysis for older people and respond accordingly to their needs;
4. There is need for health personnel to respond and attend positively to the health needs of older people and not to deny them services by attributing all their problems to age;
5. There was concern that poor quality of health services, distance to health facilities and user-fees discouraged older people from accessing health services;
6. HIV/AIDS issues affecting older persons were not given due attention;
7. There was need to link HIV/AIDS – related issues of ageing to other aspects of life, including primary health care, poverty reduction programmes, food production policies and programmes with particular emphasis on rural development programmes.
8. There was a call by participants to integrate the health programmes of older people into overall health problems, thereby ensuring a holistic approach to the health needs of older people;

9. Current primary health care programmes were not having the desired impact on older people. There was, therefore, need for sensitising decision makers to accord health for the aged, a national priority status;
10. The communities also need to be sensitised to address the health needs of older people in various ways. For example, children and young people should be encouraged to perform certain activities for older people, e.g. bringing water for them.
11. Problems of older persons who are disabled need greater attention as such people suffer a double tragedy.
12. Rehabilitation of older people should give priority to community-based programmes, rather than institutional ones which most older people do not want and which most African countries cannot afford to finance.
13. There was expressed need for establishing an African Centre with links and support from the United Nations system, to focus on training and research on issues of older people. Such an institution has been established at the University of Cape Town;
14. While some participants felt it was necessary to establish geriatric wards in order to adequately address the health needs of older persons, others felt this could be difficult to implement;
15. Nutrition problems affect all groups; however, older people are particularly vulnerable especially in situations of drought, war and other emergencies where this group is not given priority;
16. One of the ways to improve the nutritional status of older people is to encourage the elderly to take fruits where these are readily available. Educational programmes on general eating habits should advocate change in the traditional eating habits which have a negative impact on women, in particular, and on older people generally. Some taboos regarding eating certain foods by elderly people or women do not serve a useful purpose as they exacerbate the situation;
17. Programmes to ensure a balanced diet for all population groups, including older persons need to be linked to production of adequate household food security and increasing economic purchasing power;
18. Dental problems of older people need to be given special attention as they affect their nutrition condition in several ways;
19. Existing interventions that have been proved to work regarding nutrition should be replicated to reduce malnutrition-related health problems; and
20. Milk and vegetables were considered essential in the diet of older persons.

THEME 2: FAMILY, COMMUNITY AND STATE

There were two presentations on this theme: one on “Family and Community”, and the other on “State Initiatives”.

Key issues identified in the two presentations and in the ensuing discussions included:

1. The dynamic transformation in the structure and role of the family was recognised;
2. There is no standard family as each family differs from the others through culture and over time;
3. These changes notwithstanding, the family still remains the nucleus of African societies;
4. Migration to urban areas, unemployment, poverty and other factors all affect family survival and impact negatively on elderly people;
5. Grandchildren brought up in an environment which is different from that of their grandparents have a negative attitude towards elderly people;
6. Member States need to ensure the development of institutions that take advantage of the experience, expertise and wisdom of elderly people;
7. Member States should find the best and most appropriate ways of promoting the most suitable ways of supporting older people;
8. Elderly people with physical abilities should be encouraged to help themselves wherever possible;
9. Member States should show commitment to the implementation of the African Charter on Human and People’s Rights and other instruments as they relate to issues affecting elderly people;
10. Relevant and appropriate social policies on the family should be formulated and implemented at national and local levels;
11. Despite the need to recognise and address the conflicts and abuse that occur in the families and communities with regard to elderly people, there is need to protect and maintain the elderly within the family unit;
12. Families have the obligation to help and protect the elderly;
13. Religion should be included as an important aspect that influences family ties and relations with regard to the elderly;
14. A Policy Framework which can be translated into concrete action, needs to reflect the needs of the elderly;

15. Education in schools and communities concerning taking care of older people should be given priority;
16. Educating the population in general on issues of ageing through various channels is crucial in seeking solutions to problems affecting elderly people;
17. Policy goals should focus on improving the quality of life of older people;
18. Whenever possible, the elderly should be involved in formulating and implementing policies which affect them;
19. Programmes to protect and improve the social life of the elderly should be supported through legislation;
20. The State should encourage and support organisations which provide care for the elderly;
21. A bottom-up approach that adequately consults the grassroots in formulation of policies should be used to ensure that the affected people express their needs, which should be reflected in the policies. Policies targeting problems of ageing should also take on board concerns of the elderly who are disabled;
22. Member States should attach priority to the problems of the elderly, which should no longer be ignored.

THEME 3: SOCIAL AND INCOME SECURITY

Two presentations were made, one on "Social Security – Focusing on Eastern and Southern Africa", and the other on "Income Security".

The main issues in the two presentations and those from the discussions included:

1. Social Security systems in Africa were not well established and the declining and weakening family support systems were seriously affecting the social and income security of the elderly;
2. Where occupational pensions, provident funds, national pension schemes (both contributory and non-contributory) and social assistance schemes exist, these are ineffective. Contributory schemes apply to a limited proportion of people, that is, those in the formal sector; the situation is exacerbated by reforms, which result in retrenchment, especially of older persons. Non-contributory schemes do not provide adequate benefits, and they generally do not even reach the intended beneficiaries, especially the elderly;
3. Poor management of resources of existing social security schemes further detracts from the impact of social security schemes;
4. Provident Fund Schemes do not provide effective social security as they have no sustainable income maintenance to insure against the impact of inflation;

5. Social Security insurance schemes like those in Mauritius require a long gestation in order for elderly people to benefit from them;
6. Public assistance schemes are inadequately funded and are inaccessible to older people who find it difficult even to pay for transport cost to claim these from the nearest public offices; and the facilities in the public offices do not cater for the needs of older persons;
7. Efforts are required to provide social protection for older persons from both the formal and informal sectors;
8. Occupational pensions should be made transferable from one employment situation to the other;
9. It was noted that the ILO approach and that of the World Bank on social and income security were different. However, they were now moving towards convergence. The Bank has realised the importance of the informal sector in providing income security to the elderly in developing countries. This convergence is evident in recent poverty eradication programmes;
10. There is need to pay attention to the social security protection needs of elderly women;
11. Member States should set-up national commissions, where these do not exist, to deal with social security protection issues of the elderly as well as disabled persons who should participate on the boards of these commissions;
12. Comprehensive social and income security protection approaches are needed especially in rural areas;
13. Governments' commitment to deal with social and income security issues for the elderly should be reflected in budgetary allocations;
14. Poverty reduction programmes are central in improving social and income security for the elderly;
15. Poverty reduction strategies should seek to enhance the capacity of capable elderly persons to be productive and contribute towards their own up-keep and that of their families;
16. Social security schemes and programmes should provide health insurance for the elderly;
17. Although provision of social and income security could be viewed as perpetuating dependency on the part of the elderly, this was not quite the case as this argument is sometimes used to justify the failure to adequately provide social and income security for the elderly;

18. Although social security and income security for elderly people will continue to weigh heavily on families and communities, community-based care for the elderly should be preferred option. However, in some exceptional circumstances, programmes such as homes for the elderly may provide alternatives depending on available resources; and
19. All possible innovative approaches to enhance social security protection for the elderly should be explored including establishing foundations to support them where feasible.

THEME 4: RIGHTS AND EXCLUSION

Two presentations were made under this theme: one on “The Rights and Protection of Older Persons in Africa”, and the other on “Exclusion and Policy Recommendations on Older Persons Issues”.

Key issues addressed in the two papers and discussions included :

1. The majority of Africa’s ageing population is poor and poverty has made the elderly particularly powerless;
2. Human rights for elderly people include access to basic needs such as food, clothing, shelter, employment, health care and education; freedom from discrimination, participation in political, social and religious life; the right to be free from arbitrary and unjust treatment;
3. The following are key to protecting the rights of older people from further marginalisation: poverty eradication in general and especially among the elderly people; empowerment of the elderly to participate in political, social and economic matters; formulation and implementation of appropriate social policies for older persons; political will to underpin action directed at addressing issues regarding the elderly and disabled persons; ensuring the right to education and retraining for the elderly;
4. Vulnerable groups, especially, the elderly and disabled, should form organisations and lobby for their rights;
5. Lack of implementation of existing human rights agreed to by Member States was an obstacle to addressing the human rights of the elderly;
6. The media should advocate for older people’s rights;
7. Exclusion of the elderly and the disabled is reflected in their not being included/targeted in HIV/AIDS campaigns, poverty eradication programmes, political representation initiatives, provision of health services etc.;
8. Issues of ageing should be included in educational curricula as well as in community and home-based programmes;
9. The elderly should be educated on their rights;

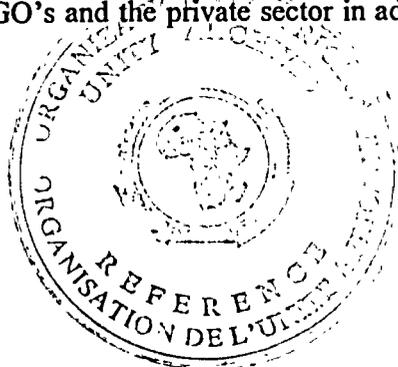
10. Ensuring that all individuals have equal rights would contribute significantly in raising awareness, creating support, improving human rights of older people and reducing isolation of older persons;
11. There is need to articulate the rights of older people in a similar way to that used to raise awareness regarding the rights of women and children;
12. It is necessary to target the elderly in communities where they live.

THEME 5: EPIDEMICS AND EMERGENCIES

Two presentations on this theme covered experiences from Botswana on HIV/AIDS and from Rwanda on the emergencies that this country went through.

Key issues and observations from the presentations and discussions included:

1. Epidemics and emergencies take various forms and these include HIV/AIDS, other disease outbreaks (eg cholera, malaria, ebola), emergencies from natural disasters (floods, droughts) as well as those that are man-made such as civil conflict resulting in refugee situations;
2. Older persons and the disabled are among the most vulnerable to the effects of epidemics and emergencies;
3. Lessons from Botswana with regard to good governance, political stability, good economic management, as well as allocation of resources to combat HIV/AIDS programmes should be emulated by other countries as these have an impact in minimising problems faced by older people;
4. Exchange of experiences and lessons from those countries which have made progress in the fight against HIV/AIDS (Uganda and Senegal), particularly as it affects older persons, should be encouraged;
5. It was essential in the fight against HIV/AIDS to break the silence on the pandemic, especially its impact on older persons, and government's commitment on this was vital;
6. Efforts to change attitude and behaviour regarding issues such as HIV/AIDS are vital in combating the disease. Intensive educational programmes which include the elderly are important;
7. Older persons are generally not targeted by HIV/AIDS interventions, and yet they are also affected just like the other age groups. In addition, older persons bear the brunt of looking after those suffering from the pandemic as well as looking after orphaned children, some of whom are also infected. Therefore, HIV/AIDS interventions including information and support, should also target older persons;
8. There is need for coordinated efforts among all stakeholders including older persons, the communities, NGO's and the private sector in addressing HIV/AIDS and other epidemics;



9. In emergencies, older people suffer, among other things, psychological and emotional problems including depression. Special counselling services should be provided for them;
10. Emergency situations and epidemics are sometimes beyond an individual country's capacity to handle effectively. This calls for solidarity and cooperation among Member States with support from the OAU, donors and international support as has happened in the past; however, the response should be quicker and the amount of assistance should be increased;
11. Effective early warning mechanisms and systems (at national, regional as well as at the OAU level) are essential in mitigating epidemics and emergency situations. The existing early warning systems need to be strengthened;
12. Arrangements for preparedness before emergencies should take into account the needs of older people for family support, protection, health care and food needs; and
13. Older people should be involved and their needs should be taken into account in post-conflict rehabilitation, reintegration, reconstruction and peace-building initiatives, as well as after emergencies and epidemics.

THEME 6: BASIC NEEDS

Under this theme, discussions were based on two presentations one on "Food and Water" and the other on "Shelter".

The key issues and observations from the presentations and the ensuing discussions included:

1. While food insecurity issues are generally serious problems in most African countries, the elderly are particularly affected. The problems worsen in times of conflict, epidemics and other emergencies. Older people, due to their physical health and not being able to compete for access to food in such cases, suffer. There should be equitable distribution and access to food;
2. Older people are also disadvantaged vis-à-vis food due to their eating habits; these are further affected by their loss of teeth;
3. Food security programmes should receive top priority in order to minimise food and nutrition-related problems affecting the population in general and the elderly in particular;
4. Food preservation methods used in the past and which were effective, should be revisited and utilised;
5. Older people should be encouraged to eat fruit, drink enough water and eat food that provides them with adequate nutrients;
6. Older women, in some cases, eat last, and may not, therefore, have adequate food. They should be empowered to reverse this;

7. Lack of economic power seriously affects older people's access to food;
8. Land reform programmes are biased against the elderly and hence reduce their potential to contribute to food production. This is more serious with regard to older women after the death of their husbands, as in many cases land is taken away from them. Such problems need to be addressed and redressed;
9. Contaminated water is a source of most waterborne diseases. Older people suffer most from the effects of these diseases;
10. Government, the private sector, communities and other stakeholders should work together on programmes and projects (eg sinking bore-holes) to improve availability of clean water in both urban and rural areas in order to make clean water more easily accessible to older people and to lessen waterborne communicable diseases. Such efforts would go along way in improving the health of the population as a whole and the elderly people in particular;
11. Older people should be involved in the formulation, design, implementation, monitoring and evaluation of water projects and programmes, for example, in making decisions on where bore-holes should be located, or location of taps where running water projects are being undertaken;
12. It is essential that elderly people be provided with basic shelter. Much of this should be done at the community and family level, particularly in the rural areas. Most people, older people included, want to remain and die in the rural areas;
13. In some countries, there is a trend for the people to move into urban areas and remain there. This has created slums, which are associated with serious health and social problems. Life is particularly difficult for older persons caught up in such situations, at the same time as the number of such older persons is increasing;
14. Development programmes are essential to improve living conditions in rural areas to reduce migration to urban areas where life is already very tough for all, but especially for older persons; and
15. The issues of old people's homes, to be used in exceptional cases and as a last resort, should be considered for the very vulnerable, where circumstances necessitate and resources permit. A better alternative would be to settle homeless older people in the community where they can continue to be involved in the life of the community and in community activities.

DRAFT POLICY FRAMEWORK AND PLAN OF ACTION ON AGEING

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Draft Policy Framework and Plan of Action on Ageing

1 Preamble

The Meeting of Experts to develop a Policy Framework and Plan of Action on Ageing that was held in Kampala, Uganda, from the 27th to 1st December 2000, reviewed key issues affecting older people in the continent.

The Meeting considered relevant Resolutions, Recommendations, Declarations, Decisions and Conventions that deal with the issues of ageing and older persons. These included the 1982 International Plan of Action on Ageing (UN Resolution 37/51) and the UN Principles for Older Persons (UN Resolution 46/91).

Although the UN Principles for Older Persons and the International Plan of Action provide a framework for action, more specific approaches, policies and programmes needed to be developed in the context of the traditions, cultural values and socio-economic situation of individual African regions and countries. It is within this context that the Policy Framework and Plan of Action has been developed.

The Meeting underscored the need for close co-operation between the OAU, HelpAge International, relevant UN agencies and other stakeholders to increase awareness of issues affecting older people and ways of mobilising resources to address their needs and rights.

The Experts Meeting held in Kampala stressed that the areas identified in the Policy Framework and Plan of Action will serve as guidelines for the development of National Policies and strategies for the implementation of programmes for older people. The Meeting recommended the following Policy Framework and Plan of Action for consideration and adoption by the appropriate organs of the OAU so as to facilitate their endorsement by the 37th Ordinary Session of the Heads of State and Government in July 2001.

2 Context

2.1 Demographic Profile

The world population aged 60 years and above is increasing rapidly. Whereas in 1950 it was 200 million, by 1999 it had increased to nearly 600 million. It is projected that by 2025, the world population will reach 1.2 billion and by 2050, 2 billion. The older population of Africa, currently estimated to be slightly over 38 million, is projected to reach 212 million by 2050. Thus, Africa's older population will increase six-fold in five decades.

Although the AIDS epidemic is projected to reduce life expectancy in affected countries, the older population of Africa will continue to grow. Over the next 30 years (2000-2030) the population of older people will more than double in many countries including the Democratic Republic of Congo (2.1 to 4.9 million), Mozambique (0.8 to 2.1 million), Cameroon (0.8 to 1.6 million), Ghana (1 to 2.8 million) and Uganda (0.8 to 1.9 million). During the same period, the proportion of older people will also rise dramatically in many countries. For example; in South Africa the increase will be from 7 to 11.5%; in Ghana 5.1 to 9.5%; Guinea 4.5 to 6.0% and Sudan 3.9 to 6.4%; Mozambique 3.9 to 5.7%. Despite AIDS, the majority of people in Africa will thus grow older and will, in all probability, live longer than previous generations.

The majority of older persons in almost every country are women (55% globally), with differences in gender ratios increasing with age. The majority of older people in Africa live in rural areas and this trend is expected to continue. By 2020 it is projected that 64% of people over 60 years will be living in areas defined as rural.

This increase in the number of older people provides a challenge for the continent as a whole, as well as for individual countries.

2.2 Key International Instruments and UN Conventions

There are three age-specific international instruments that should protect the rights of older people namely the:

- UN Plan of Action on Ageing - 1981
- UN Principles for Older Persons -1991
- UN Proclamation on Ageing - 1992

In addition there are many other non-age specific instruments that should ensure the protection of older people including:

- UN Universal Declaration of Human Rights - 1948
- Africa Charter of Human and People's Rights
- International Covenant on Civil and Political Rights (ICCPR)
- International Covenant on Economic, Social and Cultural Rights (ICESCR)
- UN Declaration on the Right to Development - 1986
- The Convention on the Elimination of Racial Discrimination (CERD) – 1965
- The Convention on the Elimination of all forms of Discrimination against Women (CEDAW) – 1979
- The Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (CAT) – 1984
- The Convention on the Rights of the Child (CRC) - 1989
- International Labour Organisation Conventions (Various)
- UN Standard Rules on Equalisation of Opportunities for Persons with Disabilities 1996

2.3 Collaboration Between the Organisation of African Unity and HelpAge International

In 1999, during the International Year of Older Persons, the Twenty Second Ordinary Session of the OAU Labour and Social Affairs Commission considered issues affecting older persons. The Commission recommended that a Memorandum of Understanding be signed between the OAU and HelpAge International, and that collaborative work be initiated to advocate and advance the rights of older persons; to promote issues of ageing; and to develop interventions to address the needs of older people in Africa.

In this regard, a Memorandum of Understanding between the OAU and HelpAge International was signed in March 2000 and the two organisations embarked upon joint activities directed at implementing the work mandated by the Commission. In November 2000, the OAU and HelpAge International hosted an Experts Meeting to draft a Policy Framework and Plan of Action on Ageing that will, once adopted, be used by Member States to help guide the development of National Policies on Ageing.

3 The Goal

The Policy Framework and Plan of Action will guide OAU Member States as they design, implement, monitor and evaluate appropriate integrated national policies and programmes to meet the individual and collective needs of older people.

4 Stakeholders

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It is vital that all stakeholders are actively involved in the design, development and implementation of National Policies and Plans of Action on Ageing. There is need for strategic partnerships at all levels involving individuals, communities, NGOs, donors, the private sector, the media, Governments, religious bodies and other civil society groups.

5 Policy Recommendations and Plan of Action

5.1 Rights

The Issues

In Africa, it is often believed that traditions of respect mean that all older people are well supported. This is not always the case. Older people are abused socially, economically and psychologically. Their basic human rights such as the right to life and liberty, the right to work and the right to freedom from discrimination are violated. Older people are physically abused by family and community members and are accused of everything from witchcraft to preventing or causing too much rain – for this they are tortured and assaulted. Economically they suffer as their assets are stolen and financial institutions refuse credit and other services. Age based discrimination is pervasive and prevents older people from accessing basic rights such as adequate health care and legal protection.

Recommendation I: Member States undertake to ensure that the rights of older people are protected by appropriate legislation; including the right to organise themselves into groups in order to advance their interests.

Actions:

- a) Review and amend the Constitution to ensure that the needs of older people are included and that their rights are protected.
- b) Include older persons in the development, review and implementation of a comprehensive and integrated national policy to meet the needs of older people.
- c) Ensure that the UN Principles for Older Persons (independence, dignity, self-fulfilment, participation and care) are legally binding and implemented.
- d) Develop and review legislation to ensure that older people, especially women, receive equitable treatment from customary and statutory laws including reviews of legislation on property and land rights; inheritance laws; social security legislation and so on.
- e) Enact legislation recognising the mental and physical abuse of older people by family members, the community and any other persons as an offence.
- f) Enact legislation requiring adult children to provide support for their parents.
- g) Enact legislation to ensure that when children are left in the care of older relations, the parents of the children provide adequate levels of financial support.
- h) Enact legislation that requires, in the event of the death of a child, a percentage of the estate is left to the older person; this is particularly important in cases where older people have used their resources to care for sick children.
- i) Enact legislation that pays particular attention to the needs of older people with disabilities.

Recommendation II: Member States should undertake all the necessary measures to ensure that older people can access all their rights.

Actions:

- a) Ensure that information is collected regarding the number of older people who are victims of crime.
- b) Implement programmes of civic and public education, including schools, to address issues arising from witchcraft allegations and other human rights abuses.
- c) Improve older people’s access to legal services through public education targeting (i) older people to ensure they are aware of their rights and (ii) communities to ensure that they understand the rights of older persons.
- d) Ensure that sensitisation and information programmes relating to the rights of older persons involve older people at all levels.
- e) Ensure that the training of all civil servants includes information on the rights of older persons.
- f) Develop and review the training curricula for social workers, care givers and all those working with older people to ensure that they adequately include the rights of older persons.

5.2 Information and Co-ordination

The Issues

Unlike most other population groups there is relatively little information about the situation of older people. The absence of comprehensive information means that ageing is poorly understood and, as a result, resources are not allocated to meet the needs of the older population. The absence of an agreed definition of ‘older person’, at country as well as continental level, means that where data exists it is often not comparable.

The needs and rights of older people are cross cutting and so ageing issues need to be integrated into the policies and work of all Ministries at all levels. Whilst integration is desirable, it may result in duplication or omission unless there is an overall policy on ageing and co-ordinating structures are established to oversee its implementation.

Recommendation I: Member States undertake to standardise the definition of older people.

Action:

- a) Review and harmonise definitions of older persons in line with UN definition of older persons i.e. those aged 60 years and above.

Recommendation II: Member States undertake to ensure that comprehensive data on the situation of older persons is compiled and made accessible.

Actions:

- a) Ensure that the collection and analysis of national census data includes issues specific to the needs of older people and that data is fully disaggregated by age (without upper age limits) and gender.

- b) Ensure that all household surveys and other information collection activities compile, analyse and present issues and questions related to older people in society and that data is fully disaggregated by age (without upper age limits) and gender.
- c) Ensure that the collection, compilation and analysis of data includes socio-economic and other indicators specific to issues affecting older people (including number of dependants and family support) for utilisation in policy and programme planning.
- d) Ensure that all information on ageing is collected, analysed and published in a format that expresses the differences in ageing between men and women.
- e) Undertake research to identify the impact of differences in longevity between women and men in terms of living arrangements, income, health care and other support systems.
- f) Improve data collection about the contributions of older people to the economy, including their participation in the informal economy and in unremunerated work including household work and subsistence agriculture as reflected in the United Nations System of National Accounts.
- g) Collect, compile, analyse and utilise data on contributions made and benefits received from State and other social security systems for the purpose of improving older people's access to such systems.
- h) Strengthen statistical systems to ensure effective analysis of data by age and gender; including the development of indicators to assess issues of specific concern to older people.
- i) Identify information gaps that exist in relation to the needs and rights of older people and an ageing society. Address the identified information gaps by including the needs of older people in on-going research work and by commissioning older people specific research.
- j) Improve the collection of data on access to all essential services by age group with special emphasis on health services (including access to age and gender specific health services).
- k) Ensure that the collection of data relating to those who are victims of crime and abuse is fully disaggregated by age and gender (including issues of rape, financial abuse and household conflict) so that appropriate measures can be taken to ensure the protection of older people.
- l) Provide tax relief to individuals and organisations that give assistance to organisations working with and for older persons.

Recommendation III: Member States undertake to ensure that the needs and rights of older people are integrated into all existing and new policies in all sectors.

Actions:

- a) Ensure that older people are actively involved at all levels of policy development, strategy formulation, action, implementation and monitoring and evaluation.
- b) Formulate and modify existing policies (in all sectors) to ensure that the specific needs of older people are included and that they complement the national policy on ageing.
- c) Draw up guidelines to facilitate the implementation of appropriate policies regarding older persons.

Recommendation IV: Member States should undertake to ensure that co-ordinating and monitoring mechanisms are established, at all levels, so that issues affecting older people are addressed effectively.

Actions:

- a) Establish a Ministerial position responsible for issues affecting older people.
- b) Strengthen or establish national co-ordinating structures (bringing together representatives of older people, different Ministries and other stakeholders as appropriate) to ensure that the needs of older people are addressed.

5.3 Poverty

The Issues

Older people are consistently among the poorest of the poor, yet their needs are seldom acknowledged in poverty reduction initiatives. Most people in Africa enter older age without any formal social security and so rely on their own, and their family's ability to meet their needs.

Older people are severely affected by structural adjustment policies; they are the first to be targeted during periods of retrenchment and are hardest hit by cuts in social welfare programmes. Despite their needs, older people are systematically denied access to credit, training and other services that would enable them to increase their income.

Recommendation I: Member States undertake to ensure that the rights and needs of older people are comprehensively addressed in poverty reduction strategies.

Actions:

- a) Collect, compile, analyse and disseminate information on the factors that contribute to the poverty experienced by older people.
- b) Develop and review policies and programmes on poverty reduction programmes that ensure that the specific needs of older people are taken into account.
- c) Involve older people in the assessments, planning, implementation, monitoring and evaluation of poverty alleviation programmes.
- d) Conduct research prior to the implementation of structural adjustment policies to determine the potential impact of such policies on older people.
- e) Implement poverty reduction programmes specifically targeting the needs of older people; including, for example, specially designed credit programmes.
- f) Review anti-poverty programmes to ensure that they support, rather than contribute to the decline of, traditional support structures.
- g) Older persons should be exempted from tax.
- h) Ensure enlightenment of the populace to change attitudes that prevent older people from accessing services available to other population groups.

5.4 Health

The Issues

Older people's capacity to earn a living and participate in family and community life is governed, to a large extent, by their health status. Even though health is a basic human right, older people are denied access to essential health services. The training of health personnel gives little attention to older people and very few specialist services exist. The negative attitudes of health workers that perceive the treatment of older people as a waste, result in them being refused treatment. Many older people are unable to afford even basic drugs, let alone, the medications needed to control chronic diseases that become more prevalent in older age such as diabetes and hypertension. The positive role that older people can, and do, play as providers of traditional medicine and carers of family and community members is seldom acknowledged or supported.

Recommendation I: Member States undertake to ensure that older people's rights to appropriate health care are legally constituted and guaranteed.

Actions:

- a) Develop and review all national health policies to ensure they respond to specific needs of older people.
- b) Involve older people in the development and revision of health policies.
- c) Implement legislation to ensure that health workers do not discriminate against older people.

Recommendation II: Member States undertake to guarantee the delivery of health services that meet the specific needs of older people.

Actions:

- a) Undertake research to establish the nature and extent of the physical, social and mental health needs of older people, with due consideration to promotive, preventative, curative and rehabilitative health issues. Ensure that research reflects the different health issues affecting older women and older men.
- b) Develop and review health budgets to ensure that adequate funding is devoted to the provision of services for older people, taking into account the higher per capita health requirements of older people.
- c) Involve older people in the design, provision and monitoring of health services targeting older women and men.
- d) Develop and review the pre-service and in-service training curricula of health professionals to ensure that the health needs of older people are adequately reflected.
- e) Ensure appropriate training on ageing issues for family and community health workers and thereby enable them to provide support to older people and their families.
- f) Ensure national coverage of promotive, preventative, curative and rehabilitative health services, including HIV/AIDS services, designed to meet the needs of older people, especially those in rural areas.
- g) Establish or strengthen integrated geriatric services at all levels of the health care system.
- h) Provide free access for older people, especially older people with disability, who are unable to meet the costs of basic health services.

- i) Develop and implement a strategy for the provision of safe traditional medicine reflecting the fact that, for cultural and cost reasons, older people are proportionally higher users of traditional medicine than other population groups.
- j) Provide promotive, preventative, curative and rehabilitative ophthalmic and oral health services for older people and ensure that National Prevention of Blindness strategies give due consideration to the needs of older people reflecting the fact that eye health issues disproportionately affect older persons.
- k) Subsidise the costs of walking aids, hearing aids, dentures, prosthesis, glasses and other assistive devices for older persons.
- l) Develop and implement a strategy for the management of chronic health conditions that become more prevalent in old age including, for example, dementia, hypertension and diabetes.
- m) Review the provision of existing sexual and reproductive health services to ensure that they meet the needs of older people.
- n) Strengthen public health programmes to ensure accessibility to safe water and adequate sanitation.
- o) Implement national education programmes that focus on healthy lifestyles for all age groups to improve the health status of people as they enter their older years.

5.5 Food and Nutrition

The Issues

Nutrition research and interventions have tended to focus on the needs of the under 5's, lactating mothers and other younger population groups. Whilst important to lifetime health, this focus has resulted in a failure to acknowledge the needs of other population groups. It is a fact that very little is known about the nutritional situation and needs of older people in the continent. Most nutrition training curricula do not include older people and nutritional assessments fail to include this age group.

In rural areas, older people produce food for themselves and their families and sell surpluses to meet other household needs. However, food production and marketing programmes usually exclude older people.

Recommendation I: Member States undertake to ensure that older people's rights to adequate food and nutrition are legally constituted and guaranteed.

Actions:

- a) Develop and review national food and nutrition policies (including those governing emergency situations) to address the specific needs of older people.
- b) Involve older people in the development and revision of food and nutrition policies.

Recommendation II: Member States undertake to ensure that older people have access to adequate food and nutrition.

Actions:

- a) Undertake research into the nutritional status, vulnerabilities and needs of older people to guide the development of food and nutrition policies.
- b) Ensure that issues related to the food and nutritional status, vulnerability and needs of older people are included in national, local and household nutritional surveys.
- c) Provide subsidy to older people for medically recommended foods, medication and related health services.
- d) Develop and review the pre-service and in-service training curricula of food and nutrition professionals to ensure that the food and nutrition needs of older people are adequately addressed.
- e) Ensure that all nutrition education programmes give equitable consideration to the needs of older people.
- f) Implement national nutrition education programmes for all age groups to improve their nutritional status as they enter their older years.
- g) Ensure that the nutritional needs of older people are specifically addressed in relief and emergency programmes.

Recommendation III: Member States undertake to ensure that older people have equal access to means of food production and marketing.

Actions:

- a) Ensure that land distribution policies do not discriminate against older people.
- b) Enact and review laws to ensure that older women have the right to land tenure irrespective of marital status.
- c) Develop and review government agricultural and food security programmes to ensure that the needs of older people are taken care of.
- d) Ensure the inclusion of older people in the planning, implementation, management and evaluation of all agricultural and food security programmes.
- e) Develop and review the pre-service and in-service training curricula of food and agricultural professionals to ensure that the needs of older people are adequately addressed.
- f) Recognise the role of older people in all aspects of food production and ensure that financial institutions do not prevent older people from accessing credit facilities on the basis of their age and gender.
- g) Establish specialist credit facilities for older men and women recognising the fact that older population groups often have low levels of literacy.
- h) Implement agricultural marketing programmes to meet the needs of older people and other groups who have small amounts of surplus produce to sell.

5.6 Housing and Living Environments

The Issues

Many older people are denied access to decent shelter as a result of socio-economic changes and belief systems. The majority of older people live in rural areas where, in many cases, land ownership is governed by customary law. Property disputes affect older persons as family and community members strive to take control. This is particularly true for older women following the death of their spouse.

Building designs often limit older people's access to services as well as reducing their access to political and civic representation. Equally, public transport and communication systems need to be responsive to the needs of the older population group.

Recommendation I: Member States undertake to ensure that older people have access to safe, durable and affordable shelter.

Actions:

- a) Review and update housing policies to ensure that they reflect the needs of older people in both rural and urban areas.
- b) Ensure that policies and legislation governing land rights, including security of tenure, in urban and rural areas do not discriminate against older people.
- c) Review and revise laws to ensure that older women enjoy property rights.
- d) Enact and implement legislation to protect the rights of older people living in 'older people's homes' (both Government and private) with due regard to issues of security, private space and privacy.
- e) Ensure that families caring for older relatives are given priority in public housing schemes.
- f) Ensure that older people and families caring for older relatives are eligible for subsidised housing, low cost interest housing loans and other similar benefits.
- g) Provide preferential allocation of ground floor accommodation for older people in respect of high rise buildings.
- h) Incorporate shelter issues affecting older people into programmes monitoring poverty and its reduction.

Recommendation II: Member States undertake to ensure that public infrastructure accommodates the needs of older people.

Actions:

- a) Design accessible public buildings to accommodate the needs of older people.
- b) Modify existing public buildings during periods of refurbishment and renovation to ensure access for older people by providing ramps, rails etc.
- c) If lift access is not available, ensure that services for older people are located on the ground floor of public buildings.
- d) Develop and review the pre-service and in-service training curricula of architectural professionals to ensure that the needs of older people are reflected in their training.

- e) Ensure there is equitable distribution of services for older people between urban and rural areas.
- f) Provide accessible transport for older people.
- g) Subsidise transport costs for older people using public transport.
- h) Develop or review and revise services and systems to ensure that older people are given priority when purchasing and using public transport and communication services.
- i) Ensure that universal standards are observed in the provision of goods and services for older people.

5.7 Family

The Issues

Although the family remains the most important source of support for older people, family structures are changing and traditional patterns of care are no longer guaranteed. Living patterns are fundamentally changing. For example, urbanisation has resulted in many older people living alone in rural areas. Economic pressures and changing social values mean that many families are either unable or unwilling to care for older relatives and that cases of abuse (physical, social and economic) by family members are increasing. The contributions that older people make to the family are seldom acknowledged and programmes designed to support families fail to take into account the valuable role that older people can and do play. In communities affected by AIDS, older people are the primary carers of the sick and of the large numbers of orphaned grandchildren.

Recommendation I: Member States undertake to enact legal provisions that promote and strengthen the role of the family in the care of its older members.

Actions:

- a) Review and revise family focused legislation to ensure that it is inclusive of the needs of older persons within the family.
- b) Ensure legislation pertaining to taxation encourages the care and support of older persons within the family e.g. provision of tax concessions for those supporting older relatives.
- c) Learn from traditional values and norms to inform legislation about family values and the care of older persons.
- d) Identify, support and strengthen traditional support systems to enhance the ability of families and communities to care for older family members.

Recommendation II: Member States undertake to ensure that legal instruments exist to protect the rights of older people within the family.

Actions:

- a) Develop or strengthen legislation specifically designed to protect the rights of older people within the family.
- b) Provide training for the judiciary and law enforcement agencies on the legal rights of older persons within the family.

- c) Train older persons to provide information and advice relating to older person's rights and their right to protection within the family.
- d) Implement public education programmes to create awareness and understanding of the rights of older people to strengthen the image and dignity of older people in society.

Recommendation III: Member States undertake to develop and strengthen strategies that empower older people to contribute to their families.

Actions:

- a) Encourage the involvement, role and contribution of older persons in the family, community and the State.
- b) Collect, analyse and disseminate information about the contributions that older people make to their families and society.
- c) Involve older people in all stages of the design, development, implementation, monitoring and evaluation of programmes.
- d) Establish vocational training and retraining programmes specifically for older persons to ensure self-sufficiency, enhance self-esteem, and facilitate their participation in the economic life of their communities.
- e) Strengthen the development of the informal sector recognising that most older people are not employed in the formal sector.
- f) Ensure that older people have access to low interest loans and other credit facilities, taking into account that older people have limited resources and repayment capacity.

Recommendation IV: Member States undertake to implement policies and programmes that strengthen families and are inclusive of older people.

Actions:

- a) Review and update policies and programmes relating to the family to ensure they make adequate provision for the specific requirements of older persons.
- b) Include issues related to older persons and family responsibilities in the curricula of all educational institutions.
- c) Strengthen the development of rural economies to curb the speed of the rural/urban drift that negatively affects the support structures for older persons in rural areas.
- d) Establish or expand programmes of intergenerational social and cultural activities.

5.8 Social Welfare

The Issues

Traditional family structures are changing (see section 5.7) and older people can no longer rely on the family for support. Whilst the family remains the main and most appropriate form of support for older people, social welfare programmes have a vital role to play to ensure that the needs of the most vulnerable are addressed. Whilst social security legislation exists, in most cases it does not give specific consideration to the needs of older people. Many existing social welfare programmes are centralised

making them inaccessible to those older people who have limited mobility or who are unable to afford the cost of transport from their homes to centres where services are provided.

Recommendation I: Member States undertake to design, develop, and implement practical, realistic and appropriate social welfare strategies that include the concerns of older people.

Actions:

- a) Develop, review and implement strategies which emphasise traditional community support and care mechanisms for older people.
- b) De-emphasise the establishment of older people’s homes and institutionalisation of older persons; encourage the emphasis of community based support systems such as kinship, extended family, neighbourhood etc.
- c) Promote the participation of older peoples’ associations, self-help and NGO initiatives in all social welfare strategies.
- d) Recognise, support and encourage the contributions of older people as volunteers in community based initiatives.
- e) Provide and enhance access to social assistance schemes for older people e.g. public assistance programmes, old age pensions etc.
- f) Devise systems that ensure that older people are given priority when they seek social and other services including access to multi-purpose day centres.
- g) Ensure the provision of adequate and accessible recreational and leisure facilities both in urban and rural areas to avoid/reduce boredom, loneliness and depression.

5.9 Employment and Income Security

The Issues

Older people are among the poorest in most societies and often do not have access to a regular income. They are denied access to employment opportunities and are often the first to be targeted during periods of retrenchment. The ability to contribute to and benefit from formal social security programmes is generally limited to those in the formal sector and as a result, most people enter older age totally reliant on their ability to continue generating their own income. For those covered by social security systems, the value of their benefits are often eroded by inflation.

Recommendation I: Member States undertake to eliminate the discrimination against older people in accessing employment opportunities and retaining their jobs.

Actions:

- a) Enact legislation that prevents discrimination on the basis of older age during recruitment, promotion and retrenchment processes.
- b) Introduce flexible retirement policies and appropriate strategies and opportunities to enable older people to continue contributing to the workforce as long as they are willing and able.

Recommendation II: Member States undertake to promulgate legislation that ensures the establishment and implementation of formal and informal social security systems.

Actions:

- a) Provide public education on individual responsibility and social security issues so that people understand the need to plan for their old age.
- b) Enact legislation that ensures mandatory contributions to social security systems by all those in the formal and informal sectors, including part-time workers, rural, agricultural, domestic and migrant workers.
- c) Involve both younger and older persons in the design and implementation of strategies and policies relating to social security.
- d) Develop and implement strategies that extend the coverage of formal and informal social security systems.
- e) Strengthen the governance of social security systems to include performance targets relating to income growth and processing of payments and ensure transparency and solvency.
- f) Provide support to informal social security programmes through Government and non-government supported training.
- g) Ensure that social security and social programmes address the situation of older women whose employment has often been interrupted by maternity and family responsibilities.
- h) Conduct pre-retirement programmes to enable older persons to develop the necessary coping skills that will prepare them for the emotional, psychological and socio-economic challenges of retirement.

5.10 Emergencies and EpidemicsThe Issues

During periods of conflict and emergencies, older people talk of being invisible, excluded, marginalised and powerless. Their rights and needs are often overlooked by those implementing aid programmes and the contributions that older people can make are ignored. Emergency situations often result in rapid changes in social patterns, youth culture often takes over and the status accorded older people in stable situations is undermined.

The impact of HIV/AIDS and other epidemics on all sections of society is immense, but the specific impact on the older people is seldom analysed. In the case of HIV/AIDS, not only are older people at risk of contracting HIV but they are the main providers of care of those affected by AIDS and for orphaned grandchildren.

Recommendation I: Member States undertake to ensure that assistance reaches older people in situations of conflict.

Actions:

- a) Develop and review policies and practices related to conflict situations to ensure that the rights of older persons are protected.
- b) Recognise and utilise the potential contributions of older people e.g. their knowledge of traditional coping mechanisms; alternative health systems; conflict prevention and resolution strategies.

- c) Where communities are displaced, ensure that family tracing is undertaken to reunite older persons with family members.
- d) Develop and review appropriate social security legislation to ensure the inclusion of employed refugees.

Recommendation II: Member States undertake to ensure that the needs of older people in disaster situations are met.

Actions:

- a) Develop and review policies and practices related to disaster situations to ensure that the rights of older persons are protected.
- b) Ensure that older people are involved at all stages in the design and implementation of programmes intended to address the needs of those affected by disasters.
- c) Ensure that during assessments, the potential vulnerability of older persons is given special attention and specific action is taken to locate and identify them.
- d) Provide support to older people to meet their basic needs in terms of food, water, shelter, clothing, health care and fuel.
- e) Ensure that the design and delivery of services reflects the particular needs of older people for example 'fast track' systems for the distribution of basic necessities and special distribution points for older persons.
- f) Recognise and address the social and psychosocial needs of older persons.
- g) Recognise and support potential contributions of older people e.g. their care of children; knowledge of traditional coping mechanisms and understanding of alternative health systems.
- h) Ensure that older people are involved in, and benefit from, the design and implementation of rehabilitation and reconstruction programmes.
- i) Design and implement programmes that strengthen and sustain family structures during periods of displacement and the rehabilitation phases of a disaster.
- j) Ensure that appropriate food-for-work and other emergency relief programmes enable the participation of older people through the constructive use of their skills.
- k) Ensure that the special needs of older people are addressed during repatriation and resettlement programmes.
- l) Establish modalities that ensure that older persons who are former refugees receive their pension in respect of services rendered in the country of asylum.
- m) Ensure that older persons who have been forced to leave their homes are able to recover their property upon return.

Recommendation III: Member States undertake to protect the rights and needs of older people affected by HIV/AIDS and other epidemics.

Actions:

- a) Recognise the fact that HIV/AIDS and other epidemics affect older people in specific multiple ways.
- b) Conduct research to understand the nature and extent of the impact of HIV/AIDS and other epidemics on older persons.
- c) Develop and review policies relating to HIV/AIDS and other epidemics to ensure that they include issues affecting older persons.
- d) Develop and implement intergenerational public education programmes relating to HIV/AIDS and other epidemics.
- e) Develop and review policies and programmes on HIV/AIDS and other sexually transmitted infections to recognise that older persons are sexually active and therefore at risk.
- f) Ensure that public awareness campaigns on HIV/AIDS and other sexually transmitted infections include older people and that such campaigns are appropriately targeted.
- g) Ensure that policies and programmes relating to HIV/AIDS and other epidemics recognise that older people are major providers of care for those who are sick and for orphaned grandchildren.
- h) Provide a budget allocation to support older people caring for those affected by AIDS and other epidemics.
- i) Strengthen community based care mechanisms to ensure that older people who are carers of those affected by AIDS and other epidemics receive support.
- j) Strengthen community based care mechanisms to ensure that older people whose children have died of AIDS and other epidemics receive support including psychosocial support and counselling.
- k) Involve older people in programmes on HIV/AIDS and other epidemics as educators and learners.

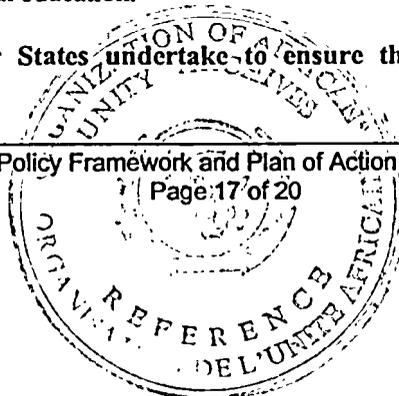
5.11 Education and Training

The Issues

Poor access to education earlier in life means that high proportions of older people are illiterate and unaware of their rights. Public education programmes often use language and images that are not accessible to older people. Education and training programmes have age limitations that prevent the participation of older people and thereby limit their access to new employment and other opportunities. As training and education programmes are developed, the skills and experience of older people are often overlooked and their contributions are not encouraged.

Myths and misconceptions are the cause of many of society's negative attitudes towards ageing and older persons. Issues relating to older people are absent from education and training curricula – from primary school to tertiary and professional education.

Recommendation I: Member States undertake to ensure that older persons have access to education and training.



Actions:

- a) Strengthen and extend adult education programmes to ensure that they are inclusive of the needs of older persons.
- b) Ensure that public education campaigns are culturally sensitive to the needs of older people.
- c) Ensure that public education campaigns are conducted in local languages and that they take account of literacy levels among older people.
- d) Design and implement vocational training programmes that encourage the participation of older people, including older people with disability.

Recommendation II: Member States undertake to develop and strengthen strategies that encourage older peoples' participation as educators and trainers.

Actions:

- a) Recognise and acknowledge the skills and knowledge of older persons.
- b) Provide opportunities for older people to be trained as formal, informal, non-formal, peer-educators and trainers in all sectors.

Recommendation III: Member States undertake to increase understanding and awareness of ageing issues through education and training.

Actions:

- a) Establish or strengthen national education, training and research on ageing.
- b) Include issues of ageing and traditional values in all formal and non-formal education.
- c) Create public awareness about ageing issues to encourage people to plan for their own old age and to support older family and community members.
- d) Promote positive images of ageing and address negative attitudes that exist towards older people.

5.12 Gender

The Issues

The majority of older persons in almost every country in the world are women, with the women to men ratio increasing with age. Ageing affects women and men differently both physiologically and socially. For example, older women's lack of property rights means that widowhood or the dissolution of marriage often brings with it a loss of home and property, whilst older men without a family may be more vulnerable than women who tend to have more domestic skills and access to wider social support networks. Gender should be integrated throughout policies and programmes that relate to older persons. Equally, gender focused programmes should consider the specific needs of older people.

Recommendation I: Member States undertake to mainstream ageing into policies relating to gender.

Actions:

- a) Investigate and disseminate information on differential ageing in women and men.
- b) Develop and review national gender policies and programmes to include the specific concerns of older women and men.

6 Resource Mobilisation

The development of a national Policy Framework and Plan of Action on ageing will have resource implications, both during design and implementation phases. Consideration needs to be given to the following:

- Availability of technical skills and appropriate human resource development
- Capacity building issues are highlighted throughout the Policy Framework and Plan of Action. Capacity building is particularly important given that ageing is a relatively new field in most countries.
- Financial resources will need to be allocated with specific budgets allocated to the development and subsequent implementation of the Policy Framework and Plan of Action.
- It should be recognised that some of the recommendations in the Plan of Action do not require additional resources but require changes to be made to the way existing resources are administered.
- Resource mobilisation needs to be considered by all the stakeholders involved, with effective co-ordination mechanisms (see section 5.2) needed to ensure appropriate use of resources and avoid possible duplication in some areas. Examples of the means by which stakeholders might be involved in resource mobilisation include:
 - Private Sector: revision of corporate policies that discriminate against older people; training on pension issues; pre-retirement training; contributions towards pension schemes; contributions to community development programmes targeting older people.
 - Non Government Organisations: the integration of issues relating to older people into existing programmes and the allocation of resources to develop older people specific programmes.
 - Religious bodies: the provision of specific services to older people; education on ageing and family issues for all age groups.
 - General public: the provision of support to older people within the family and community.
 - The media: provision of reporting time and space to address issues relating to ageing and older people.
 - The role of Government is outlined in the above Policy Framework and Plan of Action. As well as the provision of specific services, Government has responsibility to provide leadership on the development of National Policies and to challenge discriminatory practices. The rights and needs of older people should be included in national budgets and Governments should advocate the allocation of resources for programmes to address ageing issues from the international donor community.

7 Monitoring

Indicators against which progress can be monitored should include the following

- a) Development of a National Policy and Plan of Action on Ageing, with specific targets, timeframes and means of monitoring and evaluation.
- b) Review undertaken and the rights of older people included in the Constitution.
- c) Review and modification of national laws and legislation to include the rights of older people.
- d) Ministerial position or National Department responsible for ageing issues established.
- e) National budgetary allocations made to support policies and programmes of work with older persons.
- f) National legislation implemented to enforce the implementation of the UN Principles for Older Persons.

- g) Social security and social welfare policies reviewed and updated.
- h) Annual national reports submitted to the OAU.
- i) An appropriate existing international government organ has responsibility for ageing and older people's issues.
- j) Mechanisms for and participation of older people in national and other committees.
- k) An OAU Advisory Council on Ageing established and operational.

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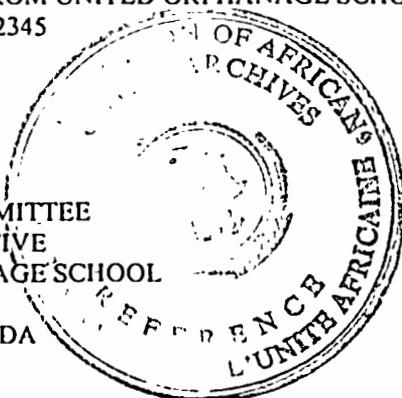
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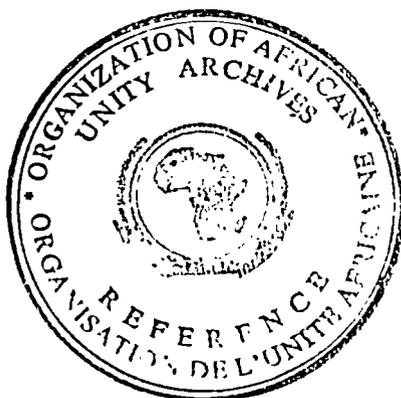
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