

ASSISTING DISPLACED AND CONFLICT-AFFECTED OLDER PEOPLE IN UKRAINE

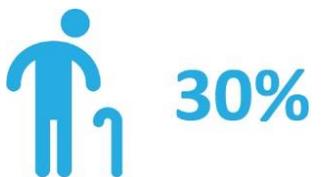


●●●● BACKGROUND

Ukraine has one of the 'oldest' humanitarian crisis: 30% of all people in need of humanitarian assistance are over 60.¹ They constitute over 50% of registered IDPs and 41% of the population living in isolated settlements² in government-controlled areas (GCA) along the contact line separating the GCA and non-government controlled areas (NGCA). Over 60% of those crossing the contact line daily between NGCA and GCA are older people.³ Older people often face overlapping vulnerabilities such as chronic diseases, disability and dire financial constraints, with a high proportion of older women amongst the conflict-affected population.

In eastern Ukraine, older people may belong to several groups with specific needs: isolated single older women and men who are frail or have disabilities; isolated older couples or couples where one or both partners have disabilities; isolated older women and men living with young dependents or living in families unable to support their older relatives, and older people living in institutional settings such as long term care homes. Many older people with disabilities do not have an official disability certificate, depriving them of government disability support. In 2018, a needs' assessment showed that out of the 4,595 older people surveyed, almost 800 were bedridden or immobile, of whom only 136 held a disability certificate.⁴ Older people, particularly when they have a disability, are often overlooked during consultations in the planning and delivery of humanitarian assistance.⁵ Their needs therefore tend to remain unidentified and neglected and their capacity to be active participants in recovery and response is often ignored by humanitarian actors.⁶

This note highlights the key protection concerns and needs of conflict-affected older women and men and older people with disabilities, as well as opportunities for humanitarian, development and government actors to enhance their protection.



of all conflict-affected people in Ukraine are over 60 years old

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¹ [Humanitarian Needs Overview](#) in Ukraine, January 2020.

² REACH, [Protection Assessment of Isolated Settlements in Government-Controlled Areas along the Contact Line](#), February 2019.

³ Right to Protection, [Crossing the Contact Line](#), March 2020.

⁴ HelpAge, [Emergency Protection-Based Support to Conflict-Affected Older Women and Men in the GCA of Luhansk and Donetsk Oblasts, Baseline Report](#), July 2018.

⁵ HelpAge International, [Missing Millions: How Older People with Disabilities are Excluded from Humanitarian Response](#), 2018.

⁶ HelpAge International, [Older Voices in Humanitarian Crises](#), 2016.

●●●● KEY PROTECTION CONCERNS

- **Isolation** – Because they were unwilling or unable to leave conflict-affected areas in Eastern Ukraine, older people were often left behind or became separated from their family or community. The isolation of many older people, including those with disabilities, is a key factor contributing to their vulnerability as it increases threats to their safety, security, as well as physical and mental health. In NGCA, as well as in isolated settlements in Donetsk and Luhansk oblasts, many younger people have left in search of jobs, which exacerbates isolation by disrupting or breaking down the support network and structures that older people may have previously relied on. The vast majority of older people in eastern Ukraine report feelings of depression, anxiety and helplessness – loneliness being one of the main causes.⁷
- **Limited mobility** – Limited freedom of movement, lack of transportation and insecurity due to landmines/ERW contamination and continued hostilities that impact conflict-affected people as a whole, as well as limited or inexistent physical mobility, further harms older people, in particular those with disabilities. Over half of older people require assistive products, including walking frames, canes and toilet chairs.⁸ This also contributes to difficulty in crossing checkpoints, which are too often not adapted to their needs, and which involve queuing for extended periods of time in harsh weather conditions.
- **Lack of livelihoods** – Nearly every conflict-affected older person relies on a pension as their main source of income. However, the interruption in payments of pensions undermines the ability of people relying on them as the only source of income to afford food, medicine and utilities, as well as to cover other basic needs. Between August 2014 and November 2019, there was a sharp drop of nearly 50% of pensioners registered in NGCA receiving their pensions⁹. In addition, many older people in isolated settlements along the contact line used to grow vegetables to sell to supplement their pensions as well as for their own food consumption. Due to heavy mine/ERW contamination, many cannot access their land anymore, further limiting their access to livelihoods and food.
- **Lack of access to and difficulty affording healthcare services** – General lack of healthcare services and medical practitioners¹⁰ in many areas of Donetsk and Luhansk oblasts is further aggravated for older people and those with disabilities because of their limited mobility and lack of financial resources. Although they spend the majority of their income on medicines (62%),¹¹ many older people report having to cut their spending on health. With 98% of people having a least one chronic disease, being unable to access healthcare is a major protection issue.
- **Heightened risk of abuse** – Dependency, discrimination and isolation can put older people, in particular those with disabilities, at heightened risk of neglect as well as emotional, financial, psychological abuse and physical and sexual violence. Abuse is often perpetrated by family members, neighbours or caregivers and is frequently unseen, unreported and unchallenged. In a 2020 survey, 6% of older people, of whom 73% are women, reported experiencing at least one type of violence and abuse.¹²

“There used to be a project in the city where volunteers came to help with housework, cooking and to keep me company. Now these projects are closed. [...] Humanitarian aid is such a great help. There is such joy when guests come to see you.”

Tatiana, 67

“For nine months, we had no pension and many people simply starved. I don’t know how we would have survived without aid.”

Anatoly, 89

“I have high blood pressure, I suffered a heart attack two years ago and my gallbladder was removed [...] all my savings were spent on the treatment afterwards. I had to borrow money from friends and neighbours and I am still paying it back. I have a knee condition and can barely walk. My life totally depends on my health.”

Tatiana, 67

⁷ REACH, [Protection Assessment of Isolated Settlements in Government-Controlled Areas along the Contact Line](#), February 2019.; HelpAge International, [Older Voices in Humanitarian Crises](#), 2016.

⁸ HelpAge International, [Snapshot Assessment on Humanitarian Needs of Older People in GCA](#), 2020

⁹ UN Briefing Note, [Pensions for IDPs and Persons Living in the Areas not Controlled by the Government in the East of Ukraine](#), 2020

¹⁰ Ukraine Protection and Health Clusters, [Exploring Access to Healthcare Services in Eastern Ukraine: a Protection and Health Perspective](#), July 2019.

¹¹ HelpAge International, [Snapshot Assessment on Humanitarian Needs of Older People in GCA](#), 2020

¹² Idem.

- **Lack of identity documentation:** Due to the conflict or subsequently during displacement, important documents such as those confirming identity and ownership of housing and land can easily be lost or destroyed. This can prevent people from registering for assistance or claiming rights and entitlements, including disability allowance, which leaves them unable to access state assistance. It is extremely difficult for those living in any isolated settlements to replace such documentation as it requires travel to bigger cities or crossing the contact line.
- **Housing, land and property rights:** Older persons who have lost or never had ownership documentation for their housing or land find it difficult to prove ownership. This raises issues for those trying to obtain compensation or repairs for their damaged or destroyed housing, as well as in situations of land or housing that may be used by the military.
- **Covid-19 pandemic:** Older people are already more susceptible to COVID-19 because of their weakened immune system and increased propensity for underlying health conditions, such as heart disease, diabetes or cancer. Older people living in conflict-affected areas, particularly in isolated settlements near the contact line in eastern Ukraine, where there may be challenges with access to food, water and health care, face even higher risk. For example, older people who are immobile and rely on home-based care, and those living in collective centers and homes for older people may not be able to take effective prevention measures such as physical distancing. Health centers in conflict settings struggle to provide basic health care in normal circumstances and are not equipped to respond to the demands that an outbreak of COVID-19 would create. It is vital that older women and men and older people with disabilities can access clear and accurate information, recognizing that many do not have mobile phones or computers. Information is also critical to reducing fear and fighting the stigma that can fuel discrimination, neglect and abuse. For example, where doctors operate a triage system to decide how to allocate scarce medical resources, a legitimate medical practice, these decisions should be based on medical grounds, scientific evidence and ethical principles, rather than by a discriminatory categorisation based on age.

NEEDS AND OPPORTUNITIES

- **Identification of older people and assessment of their needs** – It is crucial that older people are identified and included in assessments so that they can participate in and benefit from humanitarian programmes and targeted services. More sex, age and disability disaggregated data and information on older persons needs to be collected and analysed in order to ensure the rights and the needs of diverse groups are met. Most importantly, older people need to be consulted and involved in the design of the humanitarian response in Ukraine so that their concerns are heard and their needs identified. Only then will older people begin to access an inclusive response that recognizes and responds to their diverse needs and rights.
- **Tailoring assistance delivery** – Humanitarian actors need to mobilize, cooperate and increase their capacity to address the diverse challenges faced by older men and women and people with disabilities by providing appropriate support to older people and those who support them. This could include increasing home-based care and outreach services, as well as using mobile modalities for the provision of psychosocial support and other services, including legal assistance to assist with documentation, access to state assistance such as disability allowance, and housing land and property rights-related issues. Well-targeted interventions with those residing in long term care facilities could be strategic in reducing exposure and risk of infection and death. Older persons need to be involved as part of the decision making processes in community projects and activities to alleviate their isolation. In that respect, any

HOME-BASED CARE

Home-based care is assistance provided in the home that may include housekeeping support, including laundry and cleaning; preparing and cooking meals; personal care, including help with bathing, dressing and washing or drying hair. It can also include assistance with grocery shopping and collecting medication from a pharmacy as well as assistance in administering medication.

Home based care improves older people's psychosocial well-being and allows them to live independently in dignity. Home based care can also help connect them to available services and the wider community.

The frequency of home visits depends on individual needs; some people may require daily visits, while others may need assistance once or twice a week. Any assistance needs to be provided on a reliable and consistent basis.

services operated by humanitarian actors such as transportation, individual protection assistance and information dissemination needs to be adapted to reach older persons, including older persons with disabilities.



85% of older people are experiencing various conflict-related **psychosocial issues**



50% of older people reported that they are in need of **assistive devices**



98% of older people have at least one **chronic disease**



82% of older people require basic **hygiene items, urological pads and diapers for adults**



82% of older people stated that they had to **decrease their food intake during last 6 month**

Source: HelpAge International, January 2020 Needs Assessment in Donetsk and Luhansk oblasts (GCA)

- Increasing efforts from authorities** – The Government of Ukraine needs to ensure that all barriers to accessing pensions and other social entitlements, as well as public services, are removed for older people affected by the conflict. It is necessary to allocate funding and develop home-based care and outreach services for older persons living in isolated settlements who require this support. For those who are required to cross the contact line to access pensions, healthcare or to visit family, crossing procedures need to be significantly improved to avoid older people having to queue for hours, often in bad weather without suitable facilities such as drinking water or toilets. Local authorities should also increasingly refer older women and men to adequate and accessible public services when available or humanitarian assistance if required.
- Encouraging participation and recognizing older people’s contributions** – Older peoples’ knowledge of their community, experience, as well as their position of respect within families and communities makes them a valuable resource that should be drawn upon.¹³ Older people must not be stigmatised and treated as passive, weak victims who have no ability to exercise their own judgement. In order to recognize and support the contributions of older people, there is a need to not only consider them as recipients of aid but also as partners and actors of their own protection and the protection of their peers.
- Building capacity to work with older people, including those with disabilities** – Humanitarian actors need more information on the experience of older people, pilot programmes to give examples of good practices, training in age care issues and advocacy work to further develop inclusive humanitarian programmes and practice. The Humanitarian Inclusion Standards for Older People and People with Disabilities provide helpful guidance on how to ensure the meaningful inclusion and equal participation of older women and men in humanitarian action. Building capacity is important in the Ukrainian context as more organisations have launched projects targeting older people and people with disabilities. It is critical that organisations engaging with older women and men also consider the safeguarding of older people in carrying out their interventions. Capacity to identify and mitigate safeguarding risks is key to the humanitarian responsibility to do no harm.
- Humanitarian and development funding** – Older people are frequently overlooked in development and humanitarian strategy development and funding. They must be clearly identified and considered in funding applications and decisions at all levels and in all settings on an equal basis to others.
- The Ukraine Protection Cluster has a dedicated Age and Disability Technical Working Group**, led by Help Age International, which provides technical guidance and support to humanitarian organisations on working with older people and people with disabilities, and is unique platform for partners to exchange best practices, raise awareness and flag challenges related to assisting older people and people with disabilities, and which acts as a stimulus for mutual learning and peer support.

KEY RESOURCES

- o ADCAP, [Humanitarian Inclusion Standards for Older People and People with Disabilities](#), 2018
- o [IASC Brief for Humanitarian Actors on Humanitarian Action and Older Persons](#), 2008
- o UNHCR, [Working with Older People in Forced Displacement](#), 2013
- o HelpAge International, [Guidelines on Best Practices on Older People in Disasters and Humanitarian Crises](#), 2000
- o WHO, [Older People in Emergencies: Considerations for Action and Policy Development](#), 2008
- o HelpAge International, [Emergency Protection-Based Support to Conflict Affected Older Women and Men in Donetsk and Luhansk oblasts GCA, Baseline Report](#), 2018
- o ACCESS Consortium Factsheet, [Vulnerable and Forgotten: older people in Eastern Ukraine](#), 2018
- o HelpAge International, [Covid-19 Key Advocacy Messages](#), 2020
- o HelpAge International, [Snapshot Assessment on Humanitarian Needs of Older People in GCA](#), 2020

¹³ Independent expert on the enjoyment of all human rights by older persons, [Older Persons in Humanitarian Emergencies](#), May 2019.