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**DRAFT CARIBBEAN SYNTHESIS REPORT
ON THE IMPLEMENTATION OF THE MADRID INTERNATIONAL PLAN OF ACTION ON
AGEING AND THE SAN JOSÉ CHARTER ON THE RIGHTS OF OLDER PERSONS IN LATIN
AMERICA AND THE CARIBBEAN**

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Abstract

This report summarises the progress and challenges faced by the English, French and Dutch-speaking Caribbean Member States and Associate Members¹ in the implementation of the San José Charter on the rights of older persons in Latin America and the Caribbean and the Madrid International Plan of Action on Ageing (MIPAA) of 2002. As part of the third cycle of review and appraisal of the implementation of this Plan at the regional level, this report is based on replies received from States and other stakeholders to a questionnaire sent by the ECLAC subregional headquarters for the Caribbean on 13 January 2017.

As of 22 May 2017, 12 replies had been received to the questionnaire, from Anguilla, The Bahamas, Barbados, Belize, Bermuda, Cayman Islands, Dominica, Grenada, Guyana, Jamaica, Sint Maarten, and Trinidad and Tobago. The survey was aimed at identifying measures taken to promote the development of a society for people of all ages in the Caribbean, as enshrined in both agreements, including actions towards improving their well-being and quality of life and the enjoyment by older persons of their human rights. It was complemented by additional research to cover the situation of older persons in the other countries of the subregion. This report assesses the development and implementation of legal, regulatory, policy and institutional frameworks for older persons in key thematic areas, while identifying good practices and gaps in the implementation of existing agreements. It also contains conclusions that summarise the priorities for future actions and provides a series of targeted recommendations for the next quinquennial implementation phase of the MIPAA in the Caribbean.

¹ Member States: Antigua and Barbuda, The Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago; Associate Members: Anguilla, Aruba, Bermuda, British Virgin Islands, Cayman Islands, Curaçao, Guadeloupe, Martinique, Montserrat, Sint Maarten, Turks and Caicos Islands, and United States Virgin Islands.

Introduction

Population ageing is a global phenomenon and the Caribbean is not exempt from this demographic transformation. According to the latest projections, the global population of older persons is expected to rise from 901 million in 2015, representing 12 per cent of the global population, to 1.4 billion by 2030 and 2.1 billion by 2050, when, for the first time, there will be more older persons in the world than children under the age of 15.² At the regional level, the ageing process is a little more advanced across the Caribbean than in Latin America, but far less advanced than in North America.³ To illustrate the point, the dependency ratios (persons 65+/persons 15-64) in 2015 were 11 in Latin America, 14 across the Caribbean and 22 in North America. By 2040, it is projected that the dependency rates will have more than doubled: 24 in Latin America, 28 in the Caribbean and 37 in North America. This means that over the next twenty years, the number of older persons will double in the Caribbean, from 1.1 million, which corresponded to 13 per cent of the population in 2015, to 2 million or the equivalent of 22 per cent in 2035. Another global phenomenon that is important to highlight is the ageing of this age group itself, a trend that is also occurring across the Caribbean. The number of people aged 70 and over in the sub-region is expected to increase from 500,000 (or 6 per cent) in 2015 to 1 million (or 11 per cent) in 2035, and there is likely to be an accelerated increase in persons aged 90 and over after 2035⁴.

All States and territories across the Caribbean are, therefore, concerned by this demographic transformation although the dynamics of ageing vary from country to country. According to ECLAC (2016), the regional average of the national dependency ratios was 13 for the Caribbean in 2015. The ageing of the population is, however, more advanced in Aruba, Curaçao, Guadeloupe, Martinique and the United States Virgin Islands, with dependency ratios in 2015 ranging from 18, in Aruba, to 30 in Martinique. In Antigua and Barbuda, Barbados and Trinidad and Tobago, the dependency ratios are close to the regional average of 13, whereas the process is less advanced in Belize, Guyana, Jamaica and Suriname, with dependency ratios below the regional average⁵. Despite these differences, the ageing of the population is a common and pressing issue having considerable impacts on all Caribbean societies and important implications for public policy in terms of how to respond not only to the challenges associated with this phenomenon but to the opportunities it presents.

² UNDESA, World Population Prospects, the 2015 Revision, p.7.

³ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.16.

⁴ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.7.

⁵ Ibid. p.17.

Recognising the unprecedented demographic transformation already under way, the Madrid International Plan of Action on Ageing (MIPAA) was adopted, fifteen years ago, by 159 States, (including 8 from the Caribbean: The Bahamas, Barbados, Belize, Saint Kitts and Nevis, Guyana, Jamaica, Suriname, and Trinidad and Tobago) at the Second World Assembly on Ageing, as a global policy document on ageing aimed at achieving a society for all ages. It contains three broad priority directions: older persons and development; advancing health and well-being; and ensuring enabling and supportive environments. It defines 18 priority issues, with 35 objectives and 239 recommendations for action. The Plan is intended to be a reference and guiding document for designing policies and programmes on ageing, and a practical tool to assist policy-makers in focusing on priority themes while enabling them to adapt these issues to their own realities and circumstances in their respective countries and regions. The document also includes a specific section on implementation and follow-up to ensure systematic evaluation and responsiveness to new challenges. According to Resolution 42/1 on the modalities for review and appraisal of the MIPAA of 2004, the United Nations Commission for Social Development decided that this assessment should take place every five years through a bottom-up and participatory approach involving Governments, which have the primary responsibility for implementing the Plan, in consultation with other stakeholders, including civil society organisations for older persons and the private sector.

The review process of the MIPAA includes a regional dimension, which serves as a crucial bridge between national and global reviews, with the five United Nations regional commissions, including the Economic Commission for Latin America and the Caribbean (ECLAC), which are requested to facilitate and support Member States and other stakeholders in this exercise. A first and second review and appraisal of the Plan were already concluded in 2008 and 2013 respectively. The previous review included information about twelve Caribbean countries: Antigua and Barbuda; The Bahamas; Barbados; Dominica; Grenada; Guyana; Jamaica; Saint Kitts and Nevis; Saint Lucia; Saint Vincent and the Grenadines; Suriname; and Trinidad and Tobago. Between the period of the first and second review and appraisal exercises, it was reported that these States had made progress on social security; access to health services; health promotion; training for health workers; social support and care; support for caregivers; accessibility of public space and housing; and the promotion of a positive image of old age. Some areas were still considered to require additional efforts in order to address the needs of older persons, such as access to credit for older persons; palliative care; care for persons with disabilities; access to health care for older persons with HIV; the establishment of monitoring mechanisms for long term care institutions; and measures to eliminate elder abuse and discrimination based on age⁶.

Each review and appraisal exercise at the national, regional and global levels allows one to identify the achievements and the obstacles in the implementation process of the MIPAA, exchanging experiences and good practices and selecting priorities for the next cycle of the implementation process. In order to address the specific challenges faced by countries in Latin America and the Caribbean, a Regional Strategy for the Implementation in Latin America and the Caribbean of the Madrid International Plan of Action on Ageing (hereafter referred to as the Regional Strategy) was adopted in 2003, then the Brasilia Declaration in 2007 at the Second Regional Intergovernmental Conference on Ageing, and more recently the San José Charter on the rights of older persons in Latin America and the Caribbean (hereafter referred to as the San José Charter) in 2012 at the Third Regional Intergovernmental Conference on Ageing.

This report summarises the progress and challenges faced by English, French and Dutch-speaking Caribbean States and Associate Members in the implementation of the latest agreement, the San José Charter, as well as previous regional agreements aimed at implementing the MIPAA. It is intended to inform the review of the implementation of the MIPAA and the San José Charter, which will take place at the Caribbean preparatory meeting for the Fourth Regional Intergovernmental Conference on Ageing and the Rights of Older Persons from 1 to 2 June 2017 in Port of Spain, Trinidad and Tobago. This subregional preparatory meeting precedes the Fourth Regional Intergovernmental Conference, which will be held in Asuncion, Paraguay, from 27 to 30 June 2017. This regional meeting, based on a participatory and bottom-up approach, provides the space for States, civil society organisations and older persons themselves to exchange experiences, identify best practices and challenges and decide on emerging issues and future key priority action areas for policy responses in the region, to be implemented by 2022. This regional process provides input to the global review by the Commission for Social Development, which will take place during its fifty-sixth session in 2018.

⁶ ECLAC, Synthesis report on the implementation of the Brasilia Declaration in the Caribbean, 2012.

I. Third review and appraisal of the implementation of the Madrid Plan of Action, including the San José Charter, in the Caribbean

1. Background

The MIPAA and regional agreements for its implementation - the Regional Strategy, the Brasilia Declaration, and, more recently, the San José Charter - are the guiding policy frameworks aimed at achieving a society for all ages in the Caribbean.

The MIPAA addresses ageing issues mainly from a developmental perspective, but it also makes links with other frameworks, including human rights. Pursuant to the Human Rights Council Resolution 24/20, the Independent Expert on the enjoyment of all human rights by older persons was requested to assess the human rights implications of the implementation of the MIPAA. According to her findings, while the MIPAA is not a human rights document, it contains a number of references relevant to human rights and adopts a conceptual approach that is in accordance with human rights' principles. The Independent Expert highlighted that this constituted a major step forward when compared to the welfare-oriented Vienna International Plan of Action on Ageing of 1982⁷. However, she further concluded that although the effective implementation of the priority objectives included in the MIPAA could lead to an improvement in the enjoyment of certain rights by older

⁷ A/HRC/33/44, para.96.

persons, mainly for those in need of care, the Plan was, in itself, not sufficient to ensure the full enjoyment of the whole spectrum of human rights by all older persons⁸.

This ‘protection gap’ has been discussed and reflected in the Latin America and Caribbean fora and agreements in the process of implementing the MIPAA in the region. In fact, from the Regional Strategy to the San José Charter, Member States of the region have broadened the scope of the protection of rights of older persons over the last 10 years.

Within the three priority areas of the MIPAA, which are older persons and development; fostering health and well-being during old age; and the creation of an enabling and supportive environment, the Regional Strategy of 2003 identified three overarching goals: the protection of human rights of older persons, with 6 objectives for its implementation; access to comprehensive health care services, also with 6 objectives to be achieved; and the enjoyment of physical, social and cultural environments by older persons that enhance their development and exercise of their rights, with 4 objectives.

In the Brasilia Declaration of 2007, Governments reaffirmed their determination to adopt measures in the three priority areas of older persons and development, promotion of health and well-being into old age, and the creation of an enabling and supporting environment. Member States also reaffirmed their commitment to promote and protect the human rights and fundamental freedoms of all older persons, to work to eradicate all forms of discrimination and violence and to create networks for the protection of this age group. The main areas of the Declaration cover the importance of adopting legal and policy frameworks in order to promote the well-being of older persons; ensuring the full and effective participation of older persons in socioeconomic development; to expand and improve the coverage of pensions; to promote dignified work for older persons; to promote access to timely and quality comprehensive health care services, including geriatric and gerontology care and studies (in this section, it also makes reference for the first time to the importance of palliative care at the regional level); and, finally, to improve the accessibility of public areas, including housing, and to promote continuing education and lifelong learning.

Compared to the previous regional agreements, Latin American and Caribbean Governments made a significant advance in the San José Charter of 2012, by going beyond the initial priority areas of the MIPAA in terms of human rights. The preamble included concerns over the dispersion of measures to protect the rights of older persons at the international level and further emphasised that this ‘hinders their implementation and results in a lack of protection at the national level’. It went on to explain the main objective of the agreement, which was to plug this protection gap at the regional level with additional steps to protect the civil, political, economic, social and cultural rights of older persons and their fundamental freedoms, without discrimination of any kind. From promoting the adoption of specific laws and policies that would provide differential and preferential treatment for older persons, to improving social protection, health and social care services, work and living conditions and environment for older persons, the San José Charter clearly strengthened the human rights perspective in the implementation of the MIPAA.

Through the San José Charter, Governments agreed to a comprehensive set of measures to reinforce the respect, protection and promotion of the human rights of older persons at the national level. More specifically, those actions included the enactment of specific laws for the protection of such rights, including institutional and civic measures aimed at guaranteeing the full implementation of the law. The Charter highlights the need for differential and preferential treatment of older persons in all spheres, and measures to prohibit multiple forms of discrimination against them. It also encompasses the creation of mechanisms to ensure the enforcement of laws, the strengthening of public and private institutions, and the participation of older persons. In certain areas, for instance regarding social protection and health care, the San José Charter returns to the MIPAA and the Regional Strategy with the objective of universalising rights to social security and comprehensive health care services, an aspect not included in the Brasilia Declaration. This is also the case in the area of autonomy and the independence of older persons in all spheres, including health, environment and decision-making. Elsewhere, the San José Charter put more focus on certain areas by creating specific commitments, for instance to combat all forms of elder abuse and gender-based discrimination, and introduced innovation by including other existing rights in the document, such as access to justice and the right to free and informed consent, as well as paying particular attention to the situation of groups that were invisible in

⁸ A/HRC/33/44, paras.101 and 123.

previous agreements, such as the rights of older persons who are deprived of liberty, and those in emergency/disaster related situations⁹.

Table 1- 2003-2012: From the Regional Strategy to the San José Charter's recommendations

2003	Regional Strategy for the Implementation of the Madrid International Plan of Action on Ageing	2007	Brasilia Declaration	2012	San José Charter on the rights of older persons in Latin America and the Caribbean
Area	Recommendations	Area	Recommendations	Area	Recommendations
Older persons and development	<p>Protection of human rights.</p> <p>Access to decent work in old age.</p> <p>Access to credit opportunities and training for older persons.</p> <p>Increased coverage of social security systems (including non-contributory).</p> <p>Promote the participation of older persons.</p> <p>Promote equality of opportunity and access to lifelong education.</p>	Economic Security	<p>Protection and promotion of human rights.</p> <p>Access to dignified work in old age, including the allocation of loan support, training and marketing programmes.</p> <p>Increased coverage of social security systems (and non-contributory).</p> <p>Examine the effects of migration on the ageing dynamic of the communities of origin, transit and destination of migrants.</p> <p>Ensure the full and effective participation of older persons in development.</p>	Legal, policy and administrative framework	<p>Differential and preferential treatment in all spheres and prohibition on all forms of discrimination.</p> <p>Strengthen the protection by enacting special laws for older persons.</p> <p>Priority and preferential treatment in processing, resolution and implementation of decisions taken in administrative and legal proceedings, and public services.</p> <p>Affirmative action to complement legal system and promote social integration and development of older persons.</p> <p>Raise awareness of the rights of older persons and access by older persons to information on their rights.</p> <p>Promote the participation of older persons</p>
Health and well-being in old age	<p>Universal access to comprehensive and integrated health care services.</p> <p>Care for older persons with disabilities.</p> <p>Promote healthy behaviours and environments.</p> <p>Regulation of long-term care services.</p> <p>Human resources training in geriatrics and gerontology.</p> <p>Monitoring the health of the older population.</p>	Health	<p>Care of older persons with disabilities.</p> <p>Equitable access to comprehensive health care services.</p> <p>Monitoring of long-stay institutions.</p> <p>Access to palliative care services.</p> <p>Access to health care for older persons with HIV/AIDS.</p> <p>Creation of degree programmes in geriatric and gerontological services.</p>	Social protection systems – social security, health, social services	<p>Promote the universalisation of the right to social security and guarantee the long-term sustainability of contributory and non-contributory pension schemes.</p> <p>Promote the universalisation of the rights of older persons to health in a comprehensive manner, including geriatrics and gerontological care services.</p> <p>Preferential access to medicines, equipment, assistive devices and comprehensive rehabilitation services.</p> <p>Promote the right to free and informed prior consent for any medical intervention.</p> <p>Promote access to palliative care.</p> <p>Establish mechanisms for regular monitoring and supervision of public and private care settings.</p> <p>Develop human rights based training for health professionals.</p>

⁹ MIPAA makes a series of recommendations but these were not included in the Regional Strategy, and the Brasilia Declaration only makes a brief reference to humanitarian emergency situations, such as natural disasters or forced displacements, without recommending specific measures to address them. para.7.

					<p>Design policies to address communicable and non-communicable diseases.</p> <p>Create and guarantee social services that promote independence, autonomy and dignity of older persons.</p> <p>Develop home-care services and providing support for informal caregivers.</p> <p>Create forums for inter-sectoral coordination and cooperation on care for older persons.</p> <p>Guarantee differentiated, preferential treatment of older persons with neurodegenerative diseases in both public and private institutions.</p> <p>Promote actions to address the situation of migrant older persons in countries of origin, transit and destination.</p> <p>Address the situation of older persons who are deprived of liberty.</p>
Enabling and supportive environments	<p>Accessibility of the physical environment.</p> <p>Sustainability and adequacy of social and community support systems.</p> <p>Eliminate all forms of discrimination and mistreatment against older persons.</p> <p>Promote a positive image of old age and ageing.</p>	Environment	<p>Promotion of continuing education.</p> <p>Accessibility of public space and adaptation of housing.</p> <p>Elimination of discrimination and violence in old age.</p> <p>Recognition of the contribution of older persons in the care economy.</p>	The right to work and access to income-generating activities	<p>Ensure equal treatment and equal opportunities, especially with regard to working conditions.</p> <p>Adopt active employment policies that promote the participation or re-entry of older workers in the labour market.</p> <p>Promote legal reforms and economic incentives to enable older persons to continue working beyond the retirement age.</p> <p>Disseminate information on the right to retire, preparations for retirement and possibilities of voluntary activities.</p> <p>Promote entrepreneurship and access to credit.</p>
				Elder abuse	<p>Implement policies and procedures to prevent, punish and eradicate any type of abuse or ill-treatment of older persons.</p> <p>Establish mechanisms for prevention and supervision.</p> <p>Guarantee special protection of older persons who are at greater risk of being abused.</p> <p>Provide access to legal remedies.</p>
				Living conditions and environment	<p>Ensure adequate housing.</p> <p>Ensure a secure, healthy environment and access to transport facilities and services.</p>

					Create and retrofit age-friendly safe public spaces.
				The right to education and continuous learning	<p>Combat illiteracy among older women and men.</p> <p>Facilitate access to recreational, cultural and sporting activities.</p> <p>Implement educational programmes that take into account intercultural approaches.</p> <p>Promote incorporation of the issue of ageing and old age in curricula at all levels.</p> <p>Promote actions to guarantee access by older persons to information and communications technologies.</p>
				Age and gender-based discrimination	<p>Prevent, punish and eradicate all forms of violence against older women.</p> <p>Promote the recognition of the role that older persons play in societies.</p> <p>Ensure involvement and equal participation of older persons in the design and implementation of policies, programmes and plans.</p> <p>Guarantee equal access to social security and other social protection measures.</p> <p>Protect inheritance rights of older widows, including to property and possession.</p>
				Emergency and Disaster related situations	<p>Include priority, preferential assistance for older persons in disaster relief plans.</p> <p>Prepare national guidelines that include older persons as priority group given preferential treatment in disaster preparedness, relief worker training and the availability of goods and services.</p> <p>Give priority and preferential treatment to the needs of older persons during post-emergency or post-conflict reconstruction.</p>

Notwithstanding their differences, the regional agreements all make reference to the international human rights framework and reiterate the responsibility of Member States to align their policies in accordance with these standards and to fully implement them at the national level. In addition, there are common thematic objectives that focus mainly on care, social protection, employment, education, participation, accessibility, age discrimination, and dignity and integrity. Furthermore, the regional agreements emphasise the importance of incorporating a gender perspective¹⁰ in all policies and programmes in order to take into account the differential impact of ageing on older persons, including the specific needs of older women, and highlight the heterogeneity of this age group. For example, in the Regional Strategy, when considering the life-cycle approach to the ageing process that displays a number of gender, ethnically and racially-based inequities that

¹⁰ San José Charter para. 12; Brasilia Declaration para.6.

have an impact on the quality of life and inclusion of older persons, in particular their access to health care, social protection, and their vulnerability to violence and abuse¹¹; in the Brasilia Declaration, when reaffirming the commitment to mainstreaming ageing into all policies and programmes, making distinctions between urban and rural areas and the recognition of the intergenerational, gender, race and ethnic perspectives;¹² and, in the San José Charter, when referring to gender-based discrimination and to the implementation of educational programmes that enable older persons of different ethnic and other groups to share their knowledge, culture and values, taking into account the intercultural approach¹³.

The San José Charter was built upon the political and programmatic value of preceding agreements and complements them to effectively implement the MIPAA. The current review process has considered the cumulative approach undertaken by States, analysing all regional agreements in order to have a complete overview of the implementation of the MIPAA, and to identify both the challenges and achievements across the Caribbean. This complementary approach is important since the MIPAA enables countries to adapt the broad priority directions to their national realities and even calls for a speedy and concerted action to address effectively debt problems in countries and to foster international and regional cooperation, but only the Regional Strategy makes reference to the specifics of the Caribbean. In fact, the Brasilia Declaration only refers to the different levels of advancement of the ageing process that bring different challenges for States in terms of finding appropriate responses, without mentioning the particular challenges faced by the different subregions, including the Caribbean. Similarly, the San José Charter makes only a few references to the differences among States with the term 'country-specific opportunities' regarding social security, health care services and employment measures.

Since the Regional Strategy is the only agreement that includes the particular context in which the ageing of the population is taking place in the region, part of this information still remains important in this review process in order to understand the situation of older persons in the Caribbean. The subregion is marked by persistent poverty, a substantial degree of informal sector employment, acute social inequalities and a low level of institutional development, as well as incomplete social security coverage.¹⁴ In addition, the economies are only slowly recovering from the global economic crisis and continue to be among the most indebted countries in the world. To make matters worse, public institutions in Caribbean countries and territories have limited capacity to develop new policies, laws and social programmes, and their difficulty in achieving economies of scale also results in higher administrative costs associated with the operation of social programmes.¹⁵

2. Methodology for reviewing and evaluating progress and challenges for the period 2012-2017

In accordance with Resolution 2015/5 on modalities for the third review and appraisal of the MIPAA, this report provides an analysis of the actions taken by Caribbean States since the second review and appraisal exercise, namely, for the period 2012 to 2017. It is based on the 12 replies received to a questionnaire sent by the ECLAC subregional headquarters for the Caribbean on 13 January 2017: 6 from Member States - The Bahamas, Barbados, Belize, Guyana, Jamaica, and Trinidad and Tobago-, 4 from Associate Members-Anguilla, Bermuda, Cayman Islands and Sint Maarten-; and 2 from civil society organisations in Dominica and Grenada. The survey, which was made available in English, French and Spanish, lists 29 questions requesting countries to provide updates on measures undertaken at the national level in order to improve the well-being, quality of life and protection of the human rights of older persons. Due to the limited number of responses received, and in order to have for the first time a comprehensive subregional overview, complementary research has been undertaken to provide a broader overview of the situation of older persons in all 25 countries and territories of the English, French and Dutch-speaking Caribbean. This has included an analysis of information from diverse sources including State, civil society organisations, academia, UN entities and other international and regional intergovernmental organisations. Despite efforts, more information is still needed regarding the following States and territories: Aruba, Curaçao, Guadeloupe, Martinique, Montserrat, Turks and Caicos, and United States Virgin Islands. This reflects one of the key challenges of each of the three

¹¹ Paras.6 and 31.d)

¹² Brasilia Declaration para. 7.

¹³ San José Charter, paras. 12 and 11.c.

¹⁴ Regional Strategy for the Implementation in Latin America and the Caribbean of the Madrid International Plan of Action on Ageing, para.4.

¹⁵ ECLAC, Studies and Perspective Series, N.45, p.8.

review and appraisal processes of the implementation of the MIPAA, which is that not all States have met their reporting duties, with the result that there is a need for those States to be further encouraged to do so in order to accurately identify commonalities and opportunities across the subregion.

This report includes an evaluation of the actions undertaken to implement the MIPAA and the latest regional agreement, the San José Charter, in those Caribbean countries and territories that have replied to the questionnaire and others where information was available. It has also adopted a cumulative and complementary approach by assessing the implementation of previous regional agreements on ageing, mainly the Regional Strategy and the Brasilia Declaration. An assessment of the legal, policy, regulatory and institutional frameworks that promote the rights and well-being of older persons has been made, while identifying both best practices and gaps in the implementation of both agreements. Since it has already been acknowledged that there have been international and regional advances in the application of human rights to the situation of older persons at the regional and international level¹⁶, a rights-based approach has been adopted in order to assess the progress made and the extent of the protection gaps in the realisation of the rights of older persons that still remain in the Caribbean subregion.

Fourteen key areas of concern for older persons have been identified:

1. Legal and policy frameworks;
2. Institutional framework;
3. Awareness-raising, data, survey and research;
4. Care;
5. Autonomy and independence;
6. Adequate standard of living and social protection;
7. Right to work and access to inclusive labour market;
8. Equality and non-discrimination based on age;
9. Accessibility, infrastructure and housing;
10. Participation and contribution;
11. Neglect, violence and abuse;
12. Access to justice;
13. Emergency and Disaster risk management; and
14. Education, training, lifelong learning and capacity-building.

These key areas encompass all the recommendations made since the MIPAA and subsequent regional agreements, including the San José Charter, which are based on human rights principles. These fourteen areas should be seen in an interconnected and comprehensive manner, since human rights are interrelated, interdependent and indivisible; rights which Member States assumed the obligation and duty to respect, to protect and to fulfil in order to guarantee that all older persons could enjoy a dignified life. This progressive and interrelated approach allows one to create the conditions and the means for the full and effective implementation of the MIPAA.

Furthermore, as the spirit of this review is aimed at identifying new challenges and emerging issues, it cannot exclude the latest advances at the international and regional levels that have occurred since 2012, many of which were initiated by Member States across the Caribbean. Therefore, this current review cycle has also considered new guidelines from the international and regional human rights systems, including the newest regional binding convention - the Inter-American Convention on Protecting the Human Rights of Older Persons - adopted by the Member States of the Organisation of American States on 15 June 2015¹⁷, which

¹⁶ From Commitment to action – Guide to the review and evaluation of the Brasilia Declaration in Latin America and the Caribbean p.11.

¹⁷ Antigua and Barbuda, The Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago are Member States of the Organisation of American States.

entered into force on 11 January 2017. This review also refers to the work conducted by the United Nations Independent Expert on the enjoyment of all human rights by older persons, created by the United Nations Human Rights Council in resolution 24/20 of 27 September 2013 and renewed in resolution 33/5 in September 2016; the work of the Open-ended Working Group on Ageing, established by the United Nations General Assembly in its resolution 65/182 in December 2010, as well as the activities conducted by the Groups of Friends for Older Persons in New York¹⁸ and Geneva¹⁹. It also takes into account recommendations made by the human rights treaty bodies, other special procedures of the Human Rights Council and the Universal Periodic Review of Caribbean countries. Finally, the review is also guided by the objectives set by the new 2030 Agenda for Sustainable Development and its 17 Sustainable Development Goals, as older persons are mentioned in at least 12 of the 17 Goals²⁰, as well as the Addis Ababa Action Agenda of the Third International Conference on Financing for Development, the New Urban Agenda of the United Nations Conference on Housing and Sustainable Urban Development (Habitat III), among others. This broad, integrated and comprehensive approach is crucial in order to provide support to Member States and Associate Members in the Caribbean in identifying potential synergies, new opportunities and a new set of priorities for the subregion for the coming years to tackle the challenges faced by Governments in the region when addressing the ageing of their populations. As a result, the report also includes a series of recommendations that are aimed at helping Caribbean countries to move forward in the effective implementation of the MIPAA and its regional agreements.

This report will be finalised in light of the main findings and additional information received by Governments during the subregional preparatory meeting for Caribbean Member States and Associate Members, which will take place from 1 to 2 June 2017 in Port of Spain, Trinidad and Tobago.

3. Main preliminary findings

A. Legal and policy frameworks

The San José Charter proposed a series of measures to strengthen the protection of the rights of older persons by enacting special laws for the protection of such rights and by updating existing legal mechanisms and public institutions working on behalf of older persons. Among the measures, it was recommended to revise existing policies to ensure that they promote intergenerational solidarity and social cohesion. Mention was also made of the importance of preparing five or ten-year plans to define priorities and strategies for action.

Since the last reporting in 2012, seven Caribbean States and territories have drafted or adopted national policies on ageing: Antigua and Barbuda (2013), The Bahamas (with the ‘Rationale for Proposed Legislation for Older Persons Draft 2016, and third reading of the Older Persons Bill 2017 in the Legislative Assembly), Barbados (with the National Policy on Ageing for Barbados: Towards a Society for all Ages 2013), and Belize (with the National Council on Ageing’s strategic plan 2015-2019); Cayman Islands (with the Older Persons Policy of 2016); Montserrat has recently reviewed a draft National Policy of Care of Older Persons initiated in 2007; and Sint Maarten is recently in the process of drafting a policy based on research conducted in 2012/2013. Based on the responses to ECLAC’s questionnaire, it is not evident that these policies and programmes have been built upon wide consultation with different stakeholders, including older persons themselves, although the MIPAA, the San José Charter and other regional agreements emphasise the importance of the participation of older persons in political and public spheres, by including them in decision-making that affects their lives. It is also difficult to assess at this stage if the implementation of these policies has included a human rights-based approach.

Other States are in the process of reviewing their previous plans/policies/strategies: Bermuda (a draft National Ageing Strategy is being reviewed), Jamaica (with the revision of the National Policy for Senior Citizens of 1997), and Trinidad and Tobago (National Policy on Ageing of 2007). Nonetheless, at this stage it

¹⁸ The Group of Friends for Older persons in NY was created during the Fourth Session of the Open-Ended Working Group on Ageing in August 2013, and it composed by Argentina, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Costa Rica, the Dominican Republic, El Salvador, Guatemala, Honduras, Indonesia, Kenya, Malaysia, Mexico, Panama, Peru, Qatar, Slovenia, South Africa, Trinidad and Tobago and Uruguay.

¹⁹ The Group of Friends of human rights of older persons in Geneva was created on 8 June 2016 and it consists of Argentina, Austria, Brazil, El Salvador, Namibia, Portugal, Singapore, Slovenia, Tunisia and Uruguay.

²⁰ <http://unsdn.org/2016/05/06/older-persons-2030-agenda-for-sustainable-development/>

is not clear whether these revisions will include the recommendations enshrined in the San José Charter related to intergenerational solidarity and to the duration of plans, which, it has been suggested, be of the medium to long-term plans. It is also not evident if this revision process guarantees the rights of older persons in the policy reviewing process and further implementation and monitoring.

The protection of older persons in some States and territories is still covered by their initial policy or law, which is the case in Anguilla (2009), Dominica (1999) and Grenada (2009). Therefore, it is suggested that these Governments assess the adequacy of their frameworks in order to effectively consider the needs of older persons in their countries. Since the last review, the following States have drafted policies on ageing but they still remain as drafts: Saint Vincent and the Grenadines (drafted in 2012); Saint Kitts and Nevis (drafted in 2009); Saint Lucia (drafted in 2003); and Suriname (drafted in 2006). It is suggested that efforts be made to identify the persistent challenges in these countries in order to move forward in updating and adopting these draft policies. Compared to the previous review, Guyana continues not to have a National Policy on Ageing or another framework that clearly makes reference to the rights of older persons.

Other countries have adopted specific policies in certain areas of concern to older persons: for instance, Antigua and Barbuda with the Mental Health Strategy 2013; Bermuda with its 2017 Long Term Care Action Plan, and Saint Kitts and Nevis with its 'National Social Protection Strategy and Plan of Action: 'Making St. Kitts and Nevis a great place to grow up and to grow old in 2012-2017'. As recommended by the MIPAA and subsequent regional agreements, which are in synergy with the new 2030 Agenda for Sustainable Development, other States have mainstreamed ageing into their development plans and poverty reduction strategies, for instance, Barbados, with the National Strategic Plan of Barbados 2005-2025; Belize with its Horizon 2030; Curaçao's National Development Plan 2015-2030; Grenada, with its Growth and Poverty Reduction Strategy 2014-2018; Guyana, with the recently adopted Green State Development Strategy 2017 to 2030 that makes some references to older persons; Jamaica, with its 'Vision 2030: Jamaica National Development Plan'; and Saint Vincent and the Grenadines with the 'National Economic and Social Development Plan 2013-2025'.

Despite the progress made in 12 Caribbean States and territories that have implemented laws, policies, or strategies on ageing out of the 25, after 15 years following the adoption of the MIPAA, there are still 13 countries in the region without a proper framework that effectively address the situation of older persons at the national level.

B. Institutional framework

The San José Charter proposed a series of measures to strengthen the institutional framework for policy for older persons. It was recommended that Member States strengthen the administrative powers and competencies of, and inter-agency links between, public bodies working on behalf of older persons. In addition, as already enshrined in the Brasilia Declaration, the San José Charter reaffirmed the importance of guaranteeing the necessary resources and budgets for the proper functioning of these institutions and conduct of activities in respect of older persons, as well as the development of regular evaluations of the programmes, projects and services for this particular age group. It also recommended the implementation of a system of specific indicators and information to serve as a frame of reference for the follow-up and evaluation of the situation of older persons at the national level, and it suggested that persons working in public institutions responsible for older persons be provided with adequate training.

As reported in 2012, the primary responsibility for coordinating the implementation of the policies and strategies on ageing across the Caribbean rests with ministries of social services/ affairs/ development or health related issues. For instance, in Sint Maarten, the Department of Social Development of the Ministry of Public Health, Social Development and Labour is in charge of promoting the general well-being of society, including the integration and improvement of the social position of vulnerable groups by developing and coordinating integrated and coherent policies aimed at the inclusion of men, women, youth, older persons, those with disabilities and migrants and to support the coordination and implementation of community care in time of disasters. Similarly, in the Cayman Islands, the Department of Children and Family Services in the Ministry of Community Affairs, Youth and Sports has responsibility for coordinating programmes for older persons.

Some countries have, however, established specific bodies in charge of monitoring the implementation of the policy on ageing and providing advice to governments. Their composition and functions

vary from country to country, as does the degree of participation of older persons. For instance, The Bahamas has established a National Council on Older Persons, which includes the participation of older persons, for example in the elaboration of the Universal Health Care system. More specifically, Belize established in 2003 a specific National Council on Ageing, which has a statutory board connected to the Ministry of Human Development, Social Transformation and Poverty Alleviation. The Council is governed by a board of directors who represent government, non-governmental organisations, church and older persons' organisations. Its main functions are related to the implementation, monitoring and evaluation of the National Policy for Older Persons. Similarly, in Guyana, the Government established the National Commission for the Elderly, which is a semi-autonomous body. It is chaired by a representative from a civil society organisation and includes representatives from different ministries (the Ministry of Public Health, Ministry of Social Protection), the National Commission on Disabilities, Parliamentary Political Parties and the Pensioners Association. Its main objective is to improve the well-being of older persons and it is also responsible for providing advice to the Guyanese Government in the formulation of a comprehensive policy for the care of older persons. In Jamaica, the Ministry of Labour and Social Security established a National Council for Senior Citizens. It was established in 1976 to advise the Minister of Labour and Social Security regarding all issues related to the well-being of older persons and to implement the National Policy for Senior Citizens. The Council oversees programmes and activities that promote active ageing, intergenerational interaction, participation of older persons in national development, and gives recognition to them. The Council operates from its secretariat with an officer in each parish and works collaboratively with government, the private sector and NGOs. Similar bodies have been established in Grenada and Dominica. Other countries, including Antigua and Barbuda, and Saint Vincent and the Grenadines²¹, have mentioned that they are planning to establish a specific institution in the second review, but have not yet done so.

Some countries have established a specific section/division, at the ministerial level, with responsibility for ageing, which deal with certain issues that impact on the well-being of older persons. For instance, Anguilla has established the Elderly and Disabled Unit in the Department of Social Development. This Unit is responsible for taking the lead in setting up and consolidating a social work intervention programme for older persons and those with disabilities, and for ensuring the formulation of a national minimum standard for all care homes responsible for older persons. Its key functions encompass the creation of a comprehensive system of community care that protects and enhances the independence, participation, care, self-fulfilment and dignity of older persons and those with disabilities, as well as the provision of a variety of social work techniques, and flexible professional services of a high standard to older persons and those with disabilities. Similarly, The Bahamas has the Senior Citizens Division in the Ministry of Social Services and Community Development in charge of the well-being of older persons.

In Barbados, the Ministry of Social Care, Constituency Empowerment and Community Development has a National Assistance Board, whose aim is to maintain the dignity of older persons, in particular those living under conditions of indigence, through the provision of a range of social support and recreational services, including home care programmes, night shelter for homeless men, and elderly day care centres, among others. More recently, Barbados has established a National Committee on Ageing to monitor the implementation of the national policy on ageing. More information, however, is needed to assess its effective functioning and the existence of mechanisms put in place, and whether or not there are indicators to assess and monitor the implementation of the policy as recommended in the San José Charter.

Bermuda has created Ageing and Disability Services in the Ministry of Health and Seniors. This body provides general information services to older persons and persons with disabilities regarding existing community or government resources. It also facilitates the planning, development and coordination of policies and programmes for these groups. Policy development and implementation is done in collaboration with public and private stakeholders. Similarly, Trinidad and Tobago established the Division of Ageing in the Ministry of Social Development and Family Services in 2003. From its inception, this Division has designed and developed programmes, projects and policies for older persons with the collaboration of other relevant Ministries, civil society organisations, the private sector, as well as community based-organisations and faith-based organisations.

²¹ See the national reports prepared for the Third Regional Intergovernmental Conference on Ageing in Latin America and the Caribbean held in 2012

Regardless of their structure and composition, all public institutions specifically created to address the situation of older persons in the Caribbean appear to incorporate a multi-stakeholder and participatory approach that facilitates consultation with older persons or civil society organisations for, or of, older persons themselves. Nonetheless, more information is needed regarding the existence of specific indicators developed by these institutions for the monitoring of existing legal and policy frameworks, as well as capacity-building programmes for those working in public institutions, as recommended in the San José Charter. Moreover, it will be important to receive detailed information regarding the budget allocations for these institutions in order to have a better assessment of their resources and capacity to function adequately and to conduct activities aimed at promoting the well-being of older persons. In addition, it would be valuable to have more information about the role of other institutions, such as National Human Rights Institutions or Ombudsman's Offices in the protection of older persons and the coordination mechanisms put in place at the national and local levels in order to reach out to all older persons, including those in capitals and others living in rural and remote areas. Only Bermuda with its Human Rights Commission appears to be involved in providing such assistance to older persons in their respective territories.

C. Awareness-raising, data, survey and research

The MIPAA and the San José Charter make reference to the importance of raising awareness of the rights of older persons, through policies and programmes.²² The Regional Strategy also highlighted measures aimed at promoting a positive image of old age, including the role of the media in this process.²³

Since the last review, many States have conducted awareness raising activities on a series of issues of relevance to older persons. Those activities continue to be mainly focused on specific international days, for instance the International Day of Older Persons on 1st October and the Elder Abuse Awareness Day on 15 June, with seminar, recreational activities and workshops, among others. This happened in Anguilla, Antigua and Barbuda, The Bahamas, Bermuda, Barbados, the Cayman Islands, Saint Lucia, Guyana, Saint Kitts and Nevis²⁴, and in Trinidad and Tobago where those days are annually commemorated, and where, in 2016, a Walkathon was held in observance of both days.

Particular attention has also been given in Antigua and Barbuda, Dominica, Grenada, Guyana, Saint Kitts and Nevis, and Trinidad and Tobago to centenarians and nonagenarians, with specific events that celebrate their contribution to society. In Barbados, the Government has even established a Centenarian Registry. In December 2016, 27 centenarians were featured on local stamps in Barbados and their contributions to society were listed and celebrated in a separate booklet that was distributed with the stamps.

Other activities take the form of workshops held during the year, for instance in Anguilla, the Government reported that there are workshops designed to educate people about their human rights and the human rights frameworks. In Trinidad and Tobago, the Director of the Division of Ageing of Trinidad and Tobago has made many presentations and seminars on the implications of the ageing of the population and the protection of the rights of older persons. In Barbados, the National Assistance Board has sought to ensure that civil society organisations, stakeholders in the public and private sector, and social partners are familiar with the National Policy on Ageing and has requested their assistance in implementing the recommendations of this Policy.

In addition, in Barbados, like in other countries, awareness raising activities have also been institutionalised, with the adoption of a National Recognition Programme for older persons through the National Committee on Ageing. Over the past five years, two formal events have been held in 2013 and 2016. In Barbados' Jubilee year, in 2016, the Prime Minister of Barbados conferred special honours, in various categories, on 50 outstanding older persons for their contribution to society. In Trinidad and Tobago, there are also 30 Constituency Councils and they annually recognise stalwarts in the community for their contribution to society. In Bermuda, the Ageing and Disability Services of the Ministry of Health and Seniors has the responsibility of developing and implementing public education and awareness events to enhance the community's understanding of services, actions and issues pertaining to persons with disabilities and ageing.

²² San José Charter para. 6.e)

²³ Regional Strategy, Objective 4.

²⁴ National Report Universal Periodic Review, 2015, para.55.

In addition, there is an annual event -the Department of Community and Cultural Affairs' Seniors Community Awards- which honours the contributions of older persons in the community with a luncheon and a publication.

In Bermuda, the Ageing and Disability Services develops and implements public education and awareness events to enhance the community's understanding of services, actions and issues pertaining to ageing and persons with disabilities. In addition, several government institutions are involved in other activities and events aimed at acknowledging the contribution of older persons. For instance, the Seniors Teas are supported by multiple government departments, municipalities and public schools. The Human Rights Commission of Bermuda also hosts a variety of educational initiatives on the duties and rights of older persons. The Ageing and Disability Services provides education, advocacy and policy direction to enhance the quality of life of older persons.

In the Cayman Islands, there are a Deputy Governors Award and the Cayman Islands Civil Service Association Long Service Award, which recognise productivity and contributions of older employees.

In Jamaica, one of the main objectives of the National Policy for Senior Citizens is to provide recognition of older persons. This is achieved through the various programmes and activities of the National Council for Senior Citizens and includes public education on ageing, preparation for retirement and the rights of older persons. It is reported that these areas should be further strengthened under the revised policy. The Council recently had an Awards Ceremony as part of its 40th anniversary celebrations where older persons and those who volunteer with older persons, the media and corporate groups were recognised for their contribution. Similarly, in Sint Maarten, older persons who contribute to their communities are recognised yearly by different foundations, groups, and service organisations in newspapers, the First Caribbean Bank's programme for local heroes and several other organisations.

In a similar vein, Trinidad and Tobago has reported the importance of launching a comprehensive public education and sensitisation campaign on ageing for the next five years. In that regard, all Governments are encouraged to develop such a national campaign, including all stakeholders, the private sector, the media and older persons themselves.

Furthermore, in the Regional Strategy, Governments were encouraged to collect information from censuses and other sources of data on the situation of older persons and to analyse and disseminate this information, disaggregated by age, gender, ethnic identity and race²⁵. Despite this recommendation, only Jamaica included an 'Ageing Module' in its survey of living conditions of 2012.

In the Brasilia Declaration, countries were also encouraged to conduct studies and research to facilitate informed decision-making on the issue of ageing. This was to include the preparation of demographic and socio-economic profiles of populations of older persons to enable them to identify gaps in the implementation of human rights and ways of ensuring their full enjoyment and the full and effective participation of older persons in development²⁶. Some countries have conducted extensive research on the situation of older persons as a means of providing up-to-date information to help policy makers and other stakeholders to find targeted solutions to the changes in the age structure and its implications. The Social Investigation Division in the Ministry of the People and Social Development of Trinidad and Tobago publishes research on population ageing. In Bermuda, although no specific research for older persons has been conducted since 2012, the 'STEPS to a Well Bermuda 2014' publication provided an assessment of selected chronic non-communicable diseases and their risk factors in the country. Anguilla has a position paper written on regular doctor visits for older persons in Residential Homes for older persons, and Sint Maarten reported that it had conducted research which is being used in the drafting of the current national policy on ageing. Similarly, the Cayman Islands reported carrying out a participatory process, through workshops and district focus groups, to collate information on the status of older persons that was used for their recently adopted Older Persons Policy.

The issue of ageing of the population is being recognised and over the years, societies are being sensitised by these awareness raising activities. Nevertheless, it will be important to have more information on the effective impact of such measures in empowering older persons themselves and in promoting intergenerational solidarity and social inclusion. No country has provided information on the monitoring and evaluation of these activities. In addition, more should be done to address the specific challenges faced by

²⁵ Objective 3, a.

²⁶ Brasilia Declaration para.9

older persons in rural and remote areas, where the access to these activities and programmes are often significantly more limited.

Moreover, each round of negotiations on regional agreements concerning ageing, and their review and appraisal processes, provide an invaluable opportunity for Governments to further raise awareness on ageing at the local, national and regional levels, through bottom-up and participatory approaches with all stakeholders. However, in the replies received to the questionnaire, no country has taken the opportunity to answer the questionnaire based on a consultative and participatory process with civil society organisations and older persons themselves. The survey was mainly completed by the ministry/division in charge of dealing with ageing related issues. The review cycle could significantly contribute to sensitising societies about population ageing, and countries should be encouraged to make better use of this review process to change attitudes and social perceptions about ageing.

D. Care

All regional agreements have focused on ‘care’ as the main priority requiring urgent attention in order to address the needs of an ageing population. When referring to care, Governments have committed themselves to improve the availability, accessibility, acceptability and quality of care services and settings for older persons so as to promote their autonomy, independence and dignity. This encompasses health promotion, disease-prevention, self-care, curative care, preferential access to medicines, treatment, rehabilitation, sexual health, geriatrics, gerontological and palliative care. Social and health care often tends to be analysed separately, but according to the Independent Expert on the enjoyment of all human rights by older persons, care should be understood in a complementary and integrated manner for the benefit of older persons. In her thematic report on care and autonomy²⁷, the Expert explained that care comprises a range of services, facilities, knowledge and support, aimed at increasing the individual’s physical, mental and social well-being. These can be provided either by formal or informal carers, through the public or the private sector, and in primary, secondary, tertiary health care facilities, or ambulatory, institutional and home settings²⁸.

In the light of this comprehensive approach towards care, it is important to note that, in the main, Caribbean countries have two-tier health systems, whereby, on average, 60 per cent of total health expenditure is public and 40 per cent is private, most of which is out-of-pocket expenditure. Therefore, free care for older persons is often provided by public health systems, but demand often outstrips supply particularly for secondary and tertiary care, and some medications.²⁹ To illustrate the point, according to the replies received, some countries provide universal health care, including Barbados and Belize. However, it was highlighted that although Belizean older persons can access primary health care free of charge, at a local government health centre, they have limited access to secondary or tertiary levels of care and to national health insurance, which is available in only three of out of six districts.

In Bermuda, the Government has adopted the ‘Bermuda Health Strategy 2014-2019’ and the ‘Future Care Benefits’ programme, aimed at ensuring access to basic health insurance for all residents of Bermuda and to essential healthcare, as well as protection from financial risk. It also wants to improve consistency in appropriate evidence-based screening, testing and treatment, across the system, to increase focus on neglected areas and reduce medically unnecessary interventions.

In Jamaica, the National Health Services Regulation abolished user fees at public health facilities for patients. Accordingly, Jamaican citizens are provided with unrestricted access to basic health services, including primary and secondary health care, emergency outpatient treatment, surgical operations, hospitalisation and in-patient medication. It has been reported that this has had a positive impact on the accessibility of care for those who are poor and/or living in rural areas (although there is still unmet demand). This is complemented by the Jamaica Drugs for the Elderly Programme (JADEP) and the National Health Fund (NHF), which are two programmes through which older persons can obtain health cards that assist in defraying the high cost of medications through the provision of subsidies for persons suffering from certain chronic illnesses.

²⁷ A/HRC/30/43

²⁸ Ibid. paras.70-71

²⁹ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.47.

In Sint Maarten, the Collective Prevention Services of the Ministry of Public Health, Social Development and Labour provides mobile screening services for older persons in targeted communities. In addition, the Government is concluding deliberations with consultants and stakeholders on a draft ordinance for a National Health Insurance scheme to be finalised in 2017. This health insurance is based on universal access with time frames for all participants to be part of the health insurance scheme. Most medications will be covered, at no direct cost to the individual by the existing health insurance system, if prescribed by a physician.

Since 2012, some States have adopted, or are in the process of **adopting, specific legislation in the area of care for older persons**. Trinidad and Tobago is in the process of adopting the ‘Homes for Older Persons’ legislation, which would control, regulate and monitor homes and care facilities for older persons in the country. This new legislation includes the establishment of a Facility Review Team, comprised of persons from the public and private sectors in various specialised fields, to augment, biennially, the inspection process in order to fulfil licensing requirements. Sint Maarten is drafting a ‘Social Care Policy’ that, once approved, will provide general services and also individual care, based on agreements for persons to be cared for in their home environment by caregivers of their choice. A sexual and reproductive health policy is also in the final draft phase and will make specific mention of marginalised groups, including older persons.

Countries have also adopted complementary social care services that provide for **free medical equipment and general assistance in case of emergencies**. Trinidad and Tobago has adopted the ‘Social Welfare Grant’, which can be used for wheelchairs, eye glasses and assistive devices, hearing aids, essential household items, minor house repairs, domestic help, special dietary items, burial and general assistance in emergencies. In Anguilla, the Social Protection Board issues medical exemptions cards to indigent persons, which relieves them of certain specified expenses. In Bermuda, the Ministry of Health and Seniors ensures publicly funded provision, under the Health Insurance Act 1970, of hospitalisation coverage for persons over 75. In addition, the provision of medical devices will be extended to include implanted pacemakers, defibrillators, and prostheses, under the Artificial Limbs and Appliance Act, expected to be adopted in 2017.

Some States provide free surgery and/or free medication to older persons **with chronic diseases or non-communicable diseases**. Among Caribbean countries, in territories such as the United States Virgin Islands and Martinique, where around 20 per cent of the population are aged over 60, 80 per cent of deaths are due to non-communicable diseases. In contrast, in Guyana and Belize, where only around 5 per cent of the population are aged over 60, non-communicable diseases account for between 60 to 70 per cent of deaths.³⁰ The major non-communicable diseases in the Caribbean share common underlying risk factors, namely unhealthy eating habits, physical inactivity, obesity, tobacco and alcohol use and inadequate use of preventative health services (PAHO and CARICOM, 2006).³¹

In Barbados, there is a ‘Non-Communicable Disease Programme’, where 80 per cent of persons registered are over the age of 65. The Barbados Drug Service supplies free medication to patients aged 65 and older to those diagnosed with hypertension, diabetes, asthma, glaucoma and epilepsy, under the special benefits services. Trinidad and Tobago has adopted the ‘Chronic Disease Assistance Programme’, which provides free medication, at prescribed pharmacies, to older persons who are living with diabetes, hypertension, high blood pressure, arthritis and other diseases, as well as free cataract surgery for older persons. In Belize, a ‘Non-Communicable Disease Protocol’ with an ageing component was introduced. In Bermuda, the Department of Health has three free clinics that host weekly screenings of blood pressure and blood sugar readings for senior clients. In addition, the ‘STEPS to a Well Bermuda’ provides an assessment of selected chronic non-communicable diseases and their risk factors, including for those aged 60 and above. The 2017 objective for all goals of this initiative is to target the reduction of chronic obesity and the rise in diabetes. In addition, with its ‘Enhanced Care Pilot Program’, begun in 2017, the Government is aiming to increase primary care, pharmaceutical access and health care services for persons with one or more chronic diseases. In Sint Maarten, older persons can qualify for chronic care based on the general insurance, AVBZ. This insurance takes care of medical costs related to chronic illness. In The Bahamas, there is the ‘National Prescription Drug Plan’ and MedCard Assistance, which provide medication and medical services, including a daily allowance in services for medication, x-rays or blood-works.

³⁰ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016 p.42.

³¹ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016 p.44.

In Grenada, it was reported that some of the health problems faced by older persons are obesity, diabetes and heart disease. There is a hospital and various health stations throughout the country, but the level of training, the ability to handle diabetic wounds, and the availability of appropriate medications are considered inadequate.

Compared to the last reporting cycle, which highlighted the absence of significant efforts to adopt specific measures with regard to **older persons living with HIV/AIDs**, many countries have since made significant progress to address this situation in terms of providing institutional framework, access to medication, and raising awareness.

In Anguilla, the Ministry of Health and Social Development covers all medical expenses for older persons living with HIV/AIDS. In The Bahamas, there is the HIV/AIDS Centre dedicated to providing coordinated, comprehensive, compassionate community-based, family-based care for persons with HIV and for their families. In Barbados, there is an HIV focal point at the National Assistance Board that reports to the National HIV Commission. The HIV focal point is responsible for the public education, outreach, provision of social services and dissemination of information to older persons in Barbados. Currently, the National HIV Commission is working on its HIV National Strategic Plan 2014-2018. In addition, the National Assistance Board has provided annual seminars to older persons in the community on HIV related topics, and the Senior's HIV Drama Group continues to sensitise communities through stage productions and skits. Since 2015, the Ministry of Health has made efforts to expand access to care and treatment of HIV, in addition to the services already provided by the central hub of clinical HIV care, the Lady Meade Reference Unit Clinic.

In Bermuda, the programmes offered by the Department of Health, such as the Communicable Disease Clinic's HIV program, do not distinguish between age, and their purpose is to prevent and control the spread of communicable disease, to educate and provide information to the public about immunisations for HIV, hepatitis, tuberculosis, influenza and other contagious infections. The HIV program's services include treatment for positive test results, including meeting the costs of the anti-retroviral medications for Bermudians; free male and female condom distribution and education to promote safer sex practices, free confidential testing for STIs/HIV; follow-up for those testing positive for STIs; behavioural change interventions for high-risk behaviours and sexual health. Also, there are weekly and monthly statistical information reports from the Epidemiology & Surveillance Department.

In the Cayman Islands, older persons with HIV and their families are supported through the Public Health, Social Assistance Programmes, counselling to caregivers, and the government partnerships with organisations, such as the AIDS Foundation.

In Jamaica, the National HIV/STI programme of the Ministry of Health implements measures with regard to all persons living with HIV and members of their support systems. The National AIDS Committee (NAC) provides legal assistance to persons living with HIV and advocacy services for supportive legislation through its team of lawyers on the Legal and Ethical sub-committee, and lobbies for improved awareness of stigma and discrimination issues. There is an HIV/AIDS workplace policy that is generic and does not make specific reference to older persons.

In Dominica, it was reported that there is no specific programme for older persons with HIV. In Grenada, there is HIV support and treatment, for instance provided by CARICOM, as well as a National HIV/AIDS Strategic Plan, 2012-2016, but it has been reported that not enough is done to make the public aware of these services.

It is important to receive information from those countries that provided relevant information about their programmes on HIV/AIDS in previous reviews, including Saint Kitts and Nevis, and Saint Lucia in order to identify new achievements and challenges since 2012.

Since 2012, when relatively few instances of action were reported, some States have made progress with the adoption of specific measures to **support older persons with physical and/or mental disabilities**, such as the establishment of a specific institution dealing with the situation of those with disabilities, the provision of rehabilitation services, as well as appropriate care and assistive technologies.

In Barbados, the National Disabilities Unit is the Government entity that provides medical and assistive devices for older persons, including prostheses, canes, grab bars and wheelchairs. In Bermuda, the Bermuda College offers courses for a nursing assistant certificate, including dementia care and fall prevention. The Mid-Atlantic Wellness Institute is a mental health hospital that operates 15 group homes for persons with cognitive disabilities, some of which have persons over 65 years of age. The Department of Financial Assistance meets the costs, for those eligible, of required equipment and technology in consultation with Occupational Therapist and Physical Therapist teams, the services of Medipendants (a medical alert system), personal home care services and respite care centres. In addition, the K Margaret Carter Centre (KMCC)- a Ministry of Health and Seniors managed centre- provides support and training for 53 adults with learning and physical disabilities. A day program is operated specifically for older patients. The Mental Health Act 1976 and regulations, which set standards for voluntary and involuntary admissions and public receivership for persons with disabilities, is also being reviewed with the aim of modernizing existing standards and increasing the protection for persons with disabilities, including older persons.

In the Cayman Islands, the Government is finalising a ‘Mental Health Policy’ and is planning to construct an adult mental health facility, which will also enable older persons to receive specific care. In addition, the Cayman Islands National Insurance Company (CINICO) makes the provision for receiving mental health services, caregiving services, rehabilitation services, and assistive technologies to support older persons with disabilities.

Since 2012, Jamaica has passed the Disabilities Act, 2014 although the Act is not yet in force. The National Policy on Ageing of Jamaica recognises the importance of supporting older persons with physical and mental disabilities. The Government is also working with the private sector and NGOs to provide support in these areas. The Bahamas has also adopted the Persons with Disabilities (Equal Opportunities) Act, 2014, and established the National Commission for Persons with Disabilities, which provides financial assistance, physiotherapy, home care services evaluation, group homes, hospital placement in a geriatric ward and individual and family counselling.

In Sint Maarten, older persons can receive devices for walking, wheelchairs, adjustment to their homes if they have disabilities, special transportation and home care. In addition, the Government provides subsidies through the White and Yellow Cross Foundation to the Mental Health Foundation, which offers psychiatric care, and there is also geriatric day care for older persons with dementia. In Trinidad and Tobago, the Social Welfare Grants are means tested and provide for free medical equipment, such as wheelchairs, eye glasses and assistive devices, hearing aids, essential household items, minor house repairs, domestic help, special dietary items, burial, and general assistance due to emergencies. In addition, the Ministry of Health provides free cataract surgery for older persons.

In Anguilla, the Government reported that it does not provide any rehabilitation services, care or assistive technologies. All public health care is provided by the Health Authority of Anguilla. In Belize, it was reported that there is no access to rehabilitation services for older persons with disabilities or access to day care services to provide families with alternatives to leaving relatives at home alone. It was also reported that there is a shortage of wheelchairs, especially for older persons in rural communities. In Grenada, one of the most serious challenges faced by older persons with disabilities is financial; few can afford the medical and mental health care they need, since limited rehabilitation services are available mostly on only a private basis.

In order to help support older persons to **live with autonomy and independently in their homes** for as long as possible, many Caribbean countries have developed programmes such as home care services, day care and activity centres. These services include nursing, social care and domestic assistance, including bathing, cleaning, cooking, shopping and companionship.³² For example, there is the Government Assistance and Residential Care for the Elderly and Eligible (GRACE) programme in Antigua and Barbuda. In Anguilla, the Government has adopted an ‘Upkeep assistance’ programme for persons and their families unable to meet the costs of care in their own homes. In the Cayman Islands, there is counselling services to cope with the stress of caregivers, as well as social assistance in kind and cash. In Dominica, the programme ‘Yes, We Care’ provides respite care and support to older persons suffering from frailty. In Grenada, there is the Geriatric

³² ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p. 53.

Caregivers Programme; in Guyana, the Home-Based Health Care Programme in 6 regions; in Jamaica, there is a very limited programme run by the National Council on Ageing; in Saint Kitts and Nevis, the Home Care programme for the Aged; Saint Vincent and the Grenadines offers some home-help programmes, from domestic chores to personal hygiene³³; and in Trinidad and Tobago, there is the Geriatric Adolescent Partnership Program (GAPP) that conducts annual training programmes in basic healthcare and geriatric care, for those aged between 17-35, in order to provide means-tested homecare services to older persons living in their own homes or to relatives in the community. The Homes for Older Persons legislation, which still awaits proclamation, mandates that homeowners, managers and caregivers at all homes and care facilities are trained in geriatric care services at accredited institutions.

In Barbados, the National Assistance Board has a home care programme, which is free to the recipient and ensures that older persons, or those with disabilities, receive assistance with a range of daily living needs such as cooking, washing, cleaning, grooming and shopping, so that they can remain in their communities, rather than being admitted to an institution. In 2015, it was reported that more than one thousand recipients had benefited from the National Assistance Board's Home Care programme.

In Bermuda, there is the provision of case management, in particular offered to older persons suffering from frailty or those with disabilities. Family caregivers are also eligible for case management services offered by the Ageing and Disability Services of the Ministry of Health and Seniors. In addition, the Government introduced the 'Personal Home Care Benefit' in 2015, which subsidises health care insurance programmes for those in need of long-term care services at home. The Government also provides a grant to the charity Meals on Wheels, which provides cooked meals to older persons in their homes, and a grant to Age Concern, a senior charity, which provides a handyman program to assist older persons to remain in their homes.

Some countries mainly rely on the services provided by non-state actors. In Belize, there has been an increase in community based organisations, such as HelpAge, Port Lolya Organisation for Women, Living Independently and in Full Existence, and Ageing with Grace and Enthusiasm, which help meet the basic needs of older persons suffering from frailty; services include domestic tasks, transportation to doctors' appointments and in-home vital checks and readings. These services are, however, often limited to the capital, Belize City. Home care services are also provided by the Government of The Bahamas, with the support of the Red Cross. In Saint Lucia, the Government provides a subvention to the 'HelpAge Saint Lucia National Council of and for Older Persons', which provides daily care within the community, with food and social interaction³⁴.

Other countries provide activity centres for older persons, as **multiservice facilities, which provide educational and recreational activities**. Since the last review, Barbados has established a second, State operated, Elderly Day Care Centre. Trinidad and Tobago has established such centres in 9 districts in Trinidad and 4 in Tobago. Activities include computer literacy, art and craft, gardening, yoga, and dance, among others. Additional centres are proposed for the East/West Corridor of the country. In Bermuda, the Ageing and Disability Services of the Ministry of Health and Seniors oversees the K. Margaret Carter Centre, which provides ability-focused enrichment programs and training, and an adult day centre for those aged 60 or above. In Barbados, there is a plan to increase the number of State-owned elderly day care centres so as to provide respite for caregivers.

Regarding **long-term care institutions**, in most countries there are government run homes but most of these institutions are run by private sector or community based organisations, with limited monitoring and regulation by government, which poses a series of concerns in terms of accessibility, affordability, sustainability and thus the quality of such care offered to older persons.

In Anguilla, the Miriam Gumbs Home for the Elderly is a division of the Health Authority of Anguilla, which together with three other privately owned and operated retirement homes, accepts indigent older patients, with the cost being covered either by the Social Security Board or directly by the Government. In Bermuda, the Department of Financial Assistance meets the costs of providing residential care homes, nursing homes and home care services for eligible older persons.

³³ National Report, Universal Periodic Review, 2016, para.15

³⁴ National Report, Universal Periodic Review, 2015, para.102.

In Barbados, the Ministry of Health is responsible for older persons living in public long-term care settings such as the Geriatric Hospital and District Hospitals, and has oversight of the private sector nursing homes and senior citizens homes. The Ministry of Health also has an 'Alternative care programme' that pays lodging expenses for older persons admitted into Senior Citizens' Homes in Barbados under this programme. It was reported that twice yearly, the Ministry of Health conducts seminars with the private sector nursing homes to improve clinical care and the administrative delivery of services.

In Bermuda, the Department of Health operates two long-term care facilities, and provides support to community health nursing services and community rehabilitation services to persons requiring episodic care, as well as grants to four care homes that are registered charities. The Government has recently adopted a long-term care action plan, 2017 that sets out actions to address long-term care needs within a year, including a commitment to a 3-5 year strategy, and has also adopted initiatives to increase private sector involvement in long-term care.

In Belize, there are only three main residential facilities in the country, which reportedly generates long waiting lists for all three facilities. In addition to these public-civil society jointly managed facilities, private residential facilities do exist but the costs of care are high, which is a major obstacle for local families. It was also reported that only draft regulations for residential facilities are available for use by the inspector of homes when evaluating long-term care institutions.

In the Cayman Islands, it is reported that the Government has instituted measures to provide public residential care facilities, as well as funding to support those in need of long-term care who are residents of the privately operated Pines Retirement Home.

In Sint Maarten, the Government subsidises the White and Yellow Cross Foundation, which provides residential housing and care to older persons and persons with specific needs. A new facility is being built that will house the older persons that are in the home, with additional placements for a few seniors.

In Jamaica, the National Council for Senior Citizens is a member of the committee spearheaded by the Ministry of Health that makes decisions regarding the monitoring and setting of standards of residential care facilities for older persons. Also, it was reported that the Nursing Homes Registration Act is to be revised.

In Trinidad and Tobago, the Community Care Programme is operated by the Ministries of Health and Social Development and Family Services through the Regional Health Authorities and the Division of Ageing respectively, to decant medically/discharged socially displaced persons from the hospitals and health institutions to receive social care in long-term care facilities.

In Dominica, there is reportedly no government operated nursing homes, but the Government does provide subventions to care centres. In Grenada, there are five NGOs managing homes with 150 residents and only one run by the Government, with 80 residents. While there are several nursing homes in Grenada and in Carriacou, many are generally of poor quality. It is reported that the staff are untrained, the facilities lack some of the most basic amenities, the residents have no programmes or activities to stimulate them, and the terminally ill and dying have no private rooms to help preserve their dignity. While regulations do exist, they are often changed and not followed by caregivers.

More specifically, significant progress has been made in the **establishment of regulations, standards and monitoring mechanisms for the quality of care offered to older persons**. In 2012, only Antigua and Barbuda, Barbados, Guyana, and Trinidad and Tobago had reported on the existence of such legal and institutional frameworks. Since then, more countries have established inspection systems in order to monitor the care provided to older persons, improved existing mechanisms or are in the process of drafting them. The Government of Anguilla has reported that new draft standards are under discussion, but that they have not yet been adopted. In Barbados, the Ministry of Health adopted a health service regulation in 2015 for private hospitals, nursing homes and senior citizens' homes, which was enacted under the Health Services Act that establishes standards for the operation of nursing homes and senior citizens' homes.

In Bermuda, the Residential Care Home and Nursing Home Act 1999 and Regulations 2001, which set minimum standards for care homes, are being amended to raise the existing standards of care with a focus on quality of care and quality of life requirements. Since 2015, the Ageing and Disability Services of the Ministry of Health and Seniors is responsible for the administration, coordination of the registration and oversight of care homes, including personal home care providers receiving payment through a government benefit. This includes receiving and investigating complaints. The Bermuda National Standards Committee (a charity group) has introduced a voluntary accreditation programme for care home providers, and the Ministry of Health is part of the group developing those standards.

In the Cayman Islands, it was reported that the Resident Care Supervisor, within the Department of Children and Family Services, is the person in charge of monitoring the quality of care services for older persons in accordance with the Standards for Operation and Management of Residential Care facilities for Older Persons. Homes are reportedly inspected by the Fire Service on a regular basis and medical practitioners and nurses are assigned to provide direct services to residents.

Since the last reporting cycle, Trinidad and Tobago has established the Inspectorate as part of an administrative mechanism in the Division of Ageing to assess and inspect the standards of care in homes for older persons. The Inspectorate is expected to work collaboratively with the Ministry of Health's multidisciplinary teams in conducting assessments and inspections of homes and care facilities. In addition, the Homes for Older Persons legislation that is pending proclamation, includes the establishment of a Facility Review Team, comprised of persons from various specialised fields in the private and public sector, to augment the biennial inspection process, in order to fulfil licensing requirements. In Guyana, the Government recently (2016) adopted a set of Minimum Standards for Elderly Residential Facilities. In Jamaica, responsibility for establishing and ensuring, through monitoring mechanisms, the maintenance of standards of care of older persons in public and private facilities, rests with the Ministry of Health. In Sint Maarten, the Government, through the White and Yellow Cross Foundation, has set standards for the different types of care and evaluates the care provided to older persons.

Despite this progress, it is unclear whether regulatory and institutional frameworks for monitoring care services and settings have included a human rights-based approach that will guarantee the human rights and fundamental freedoms of older persons when receiving care services or living in any care settings. Since the last reporting cycle, Grenada, Saint Kitts and Nevis, Saint Vincent and the Grenadines have been cited as countries needing to do more to improve the quality and monitoring of public and private residential homes for older persons, but more information is required in order to assess if there has been any advance over the last five years.

Regarding the provision of **human rights training programmes** for formal and informal caregivers for older persons, no country has adopted a human rights-based approach into their programmes, where they exist. Anguilla has waived the cost of obtaining work permits for persons who are not residents of Anguilla and who care for older persons or persons with disability, on a case by case basis. The Government has also reported that it does not provide training programmes for caregivers. From time to time, the Anguilla Community College and the Health Authority of Anguilla has offered training for persons who are caregivers for older persons. In Barbados, the National Policy on Ageing recognises the importance of training of formal and informal caregivers to facilitate access by community-based caregivers, but more information is needed about its implementation.

In Bermuda, Personal Home Care Benefit, in collaboration with Action On Alzheimer's and Dementia (AAD), provides training for informal and formal caregivers. The Department of Health Community Nursing Programme, through the Community Health Workers, teach family members that require skills to support the patient in activities of daily living. For formal caregivers, the Community Health Workers receive training from the Bermuda College, KEMH and other selected programmes, in addition to monthly staff in-service training.

In the Cayman Islands, it was reported that formal and informal caregivers can receive training that is coordinated through the University of the West Indies and the University College, as well as other private organisations.

In Grenada, it is reported that the Grenada Association of Retired Persons supports diabetic limb and wound treatment clinic training for nurses. Guyana has also offered national training for those involved in the care of older persons and the patient care assistant programmes. In Jamaica, professional training and accreditation of healthcare workers is provided by the relevant educational institution and licensing boards. Training for allied health care workers, such as nursing assistants, is regulated by the Ministry of Education. The National Council of Senior Citizens, in collaboration with its partners, conducts workshops for informal caregivers of older persons. In addition, families supporting older persons can obtain support from the National Insurance Scheme and other welfare programmes administered by the Ministry of Labour and Social Security, such as the 'Programme of Advancement Through Health and Education', which is a conditional cash transfer programme for the most vulnerable, and by the Ministry of Local Government and Community Development, through the Poor Relief Department.

In Sint Maarten, a new policy is under discussion designed to implement a social care policy that will regulate care for vulnerable groups, including older persons. It involves formal and informal caregivers as both segments of care need carers who have basic and/or advanced training. Quality care standards and control will also be established. In Trinidad and Tobago, the Government is waiting for the proclamation of the Homes for Older Persons legislation that will require all homeowners, managers and caregivers at all homes and care facilities to be trained in geriatric care services at accredited institutions.

More specifically, regarding **geriatric and gerontology care, services and training**, in Anguilla, the Anguilla Community College offers geriatric courses. In Barbados, formal gerontological training has been introduced at the Barbados Community College in the past five years.

In Belize, there are, reportedly, no geriatric nurses or doctors in the country nor geriatric protocols in the health system to address the health care of older persons. However, there is one geriatric clinic in the country, the Mercy Care Clinic, which has been placed under the National Health Insurance so making its service free to older persons in Belize City. It was also been reported that there is a need to develop geriatric protocols in the health system, implemented and monitored by the Ministry of Health.

In Bermuda, the Bermuda Hospitals Board, a quasi-autonomous non-governmental organisation, is responsible for providing acute care hospital and mental health hospital facilities, with continuing education to medical practitioners, including in the fields of geriatrics and gerontological care.

Trinidad and Tobago has introduced a patient care assistant programme and a Unit in one of the regional health authorities of the Ministry of Health. However, it has been acknowledged that there is dearth of geriatricians in the country and a proposal is under discussion, which recommends that the requisite training in geriatric care be made available for healthcare professionals to meet the increasing needs of the ageing population.

In Jamaica, the Government reported that it works with tertiary institutions, such as the University of West Indies, Mona, Jamaica, to introduce programmes for health care providers on geriatrics. In Sint Maarten, the Government subsidises the White and Yellow Cross Foundation, which provides geriatric and gerontological training for health care providers. Dementia is receiving attention within the Foundation with the aim of providing improved care for the residents and those that attend the day care programme.

In terms of the development of, and access to, **palliative care** to ensure that older persons with terminal illnesses die with dignity and free of pain, little information has been received from States and other stakeholders and in most countries services are not well developed. In Trinidad and Tobago, palliative care facilities have been introduced. There are a number of hospices providing care to terminally ill cancer patients and the first publically funded palliative care unit at a hospital opened in 2014. However, provision is still inadequate to meet demand and there have also been persistent problems related to the supply of drugs for pain management.

The Barbados Association of Palliative Care, a non-governmental organisation, continues to provide supportive services at no cost to individuals and families in the country. Opioids and other essential medicines are generally available although the country does not yet have a stand-alone hospice or palliative care facility.

In Bermuda, the programme ‘Personal Home Care Benefit’ provides home palliative care. It is reported that in Grenada, no palliative care treatment is available. In Sint Maarten, the Government subsidises the White and Yellow Cross Foundation, which provides palliative care for residents who can no longer live in their homes. Since 2012, an MSc in Palliative Care Medicine has been taught at the University of the West Indies.

Regarding the prevention and promotion of **healthy behaviours and environments**, in Anguilla, the National Policy for Older persons has, from 2009, included healthy and active ageing, as well as the Medical Exemption Programme. The Miriam Gumbs Senior Citizens’ home is the institution in charge of promoting such care. In Barbados, the Government has approved and supported the policy of ‘Active Ageing’. Annually, the National Senior Games are held in Barbados with over three hundred athletes participating, and the Government also financially sponsors approximately twenty-five athletes annually to attend the Huntsman World Senior Games in Utah, United States. In addition, there are sixteen State-run Seniors’ Recreational Activities Centres across Barbados that provide arts and crafts, exercise and dancercise, lectures and workshops on active ageing.

In Bermuda, there is the ‘Well Bermuda National Health Promotion Strategy’. Organised around the three themes of healthy people, healthy families and healthy communities, it includes, under Goal 11, the promotion of a better quality of life for older persons. In 2017, the objective for all goals is to target the reduction of chronic obesity and the rise in diabetes.

In Dominica, civil society organisations have dedicated radio programmes to promoting mass exercise sessions and to promoting healthy and active ageing. In Jamaica, the National Council for Senior Citizens, through its implementation of programmes and activities of the National Policy and its collaboration with other agencies including the Ministries of Health and Education, promotes healthy and active ageing. This includes health and information fairs, workshops, small group discussions, forums and clinics.

In Sint Maarten, the ‘Movement for the Elderly’ project is currently being implemented by the Collective Prevention Services of the Ministry of Public Health, Social Development and Labour, together with various NGOs. The Community Development, Family and Humanitarian Affairs division of the Ministry of Public Health is also implementing a voluntary backyard gardening project, which has a number of older persons as participants. After a successful first year for the project, a new call for volunteer participants saw an increase in interested seniors. In addition, there is a ‘Health Education Literacy Program (HELP)’ for older persons, as well as flyers and brochures on health and lifestyle.

In Trinidad and Tobago, the former Ministry of Social Development, through the Division of Ageing, developed the following programmes which are still in operation: an annual programme of two-day retirement planning seminars for public officers, aged between 20-60, commenced in 2008, to provide participants with the knowledge and skills required to make viable plans for their retirement; one of the modules addressed healthy and active ageing.

Intergenerational programmes are crucial to promote intergenerational solidarity and social cohesion³⁵ as recommended in the San José Charter. In previous agreements, the importance of intergenerational solidarity was also highlighted as a fundamental value in guiding measures targeting older persons.³⁶ Trinidad and Tobago has conducted, through the Health Promotion and Health Education Units, annual outreach intergenerational programmes, which include walking/running to promote healthy and active ageing. In Belize, the National Council on Ageing is piloting a programme called ‘Adopt-A-Grandparent’ aimed at connecting older persons living on their own, who may be experiencing signs of depression, with young people in the community to help promote intergenerational relations. In Grenada, the Grenada Association of Retired Persons, in cooperation with the St. George’s University Medical School, has established and is maintaining a diabetic clinic with young doctors to diagnose, treat and follow-up those patients who attend the clinic. In Sint Maarten, the Government is planning to implement an ‘inter-generational project’ that will create opportunities for seniors and young persons to share time together.

³⁵ Para 14.a.

³⁶ Regional Strategy para. 8.e; Brasilia Declaration para.7.

Considering that the structure of home and institutional long-term care services rely mainly on private and community-based services, more should be done to support families and informal caregivers, including the recognition of their work for pension calculation, the provision of financial support, counselling and the creation of home-like conditions and adequate environments for those in need of care, especially those who live alone or who cannot take care of themselves. No information has been provided regarding measures adopted to improve the accessibility to care services for older persons, especially in terms of transportation, flexibility of medical appointments, and the simplification of health care forms, especially for those living in rural areas and alone. In addition, no information has been received about the exercise of some rights that are fundamental for ensuring the autonomy and independence of older persons when making decisions about their health, such as the right to free and informed prior consent for any medical intervention, regardless of age, health or treatment, nor have countries provided information about the existence of educational material on the human rights of older persons in care facilities that could provide guidance on the options for care available to them and the rights they are entitled to. Any reference to the challenges faced by certain groups of older persons in accessing and receiving care, in particular older migrants, those belonging to ethnic, religious or linguistic minorities, those deprived of liberty, older women, or those who identified themselves as LGBTI, is also absent in the replies to the questionnaire. All older persons should be able to have access to quality care services regardless of their sex, gender identity, sexual orientation, nationality and migration status or any other consideration.

E. Autonomy and independence

Autonomy and independence are core principles of the San José Charter. It states, in its preamble, that the political, public and social participation of older persons is a fundamental human right, as well as respect for their autonomy and independence in decision-making. It also refers to autonomy when addressing the right to free and informed prior consent for any medical intervention and to the need to create and guarantee the social services necessary to provide care for older persons, taking into account their specific characteristics and needs, and to promote their independence, autonomy and dignity. The Charter also encourages the improvement of living conditions and the environment to strengthen the autonomy and independence of older persons.

In the replies to the questionnaire, these concepts are mentioned but without any reference to the adoption of a specific law or programme to strengthen the autonomy and independence of older persons. In the light of the Inter-American Convention on Protecting the Human Rights of Older Persons, which recognised for the first time, independence and autonomy as rights³⁷ per se, it is suggested that the next regional agreement include specific measures on these issues, including the right to equal recognition before the law, legal capacity and regimes for supported decision-making for older persons with disabilities, the right to choose where to live, and the right to participate in all decision-making affecting their lives. The thematic report of the Independent Expert on the enjoyment of all human rights by older persons, on care and autonomy, could provide helpful and useful guidance to Member States in this regard, in order to ensure the establishment of safeguards that will respect the rights, will and preferences of older persons in all spheres.

F. Adequate standard of living and social protection

As stated in the ECLAC 2016 study, there are still many older persons living below national poverty lines. Based on data for ten countries, the average poverty rate among persons aged over 65 was 17 per cent, although the rate varied significantly, from 7 per cent in Trinidad and Tobago to 34 per cent in Belize³⁸. In addition, it was reported that among older persons living in poverty, hunger was a frequently cited complaint, alongside the inability to maintain and repair their homes or afford medical expenses, as well as loneliness and lack of assistance and help.³⁹ Furthermore, all countries in the English-speaking Caribbean have social security systems, which are often also referred to as national insurance schemes in some countries. Social protection is fundamental to guarantee a minimum income for older persons in order to help promote their autonomy and independence. The coverage of social security systems, however, varies significantly from country to country

³⁷ Article 7.

³⁸ ECLAC, Studies and Perspectives Series- The Caribbean N.45, 2016, p.31.

³⁹ ECLAC, Studies and Perspectives Series- The Caribbean N.45, 2016, p.32.

according to the extent of formality or informality in each economy. In Trinidad and Tobago, The Bahamas, Barbados, Guyana and Saint Kitts and Nevis, it has been reported that the social security coverage is higher and a majority of older persons receive a contributory old age pension.⁴⁰ In contrast, in Belize, Saint Lucia and Saint Vincent and the Grenadines, a third or fewer of older persons receive a social security pension, which does not include non-contributory or other forms of assistance.⁴¹

Since the last review cycle, it is reported that the National Insurance Scheme in Barbados provides benefits for older persons who are 66 and half years old or older, once they have paid into the plan. In Bermuda, the Government has increased, by 5 per cent, the pension benefit payment in the social insurance. The National pension scheme requires that employers must have a pension scheme for employees eligible under the National Pension Scheme (Occupation pensions) Act 1999 and regulation. In 2017, a number of amendments to the existing legislation are being proposed to enhance the Pension Commission's powers of protection regarding members' rights and benefits. In Anguilla, the current social protection framework is also being updated with the Social Protection Act, replacing the Hospital and Poor Relief Act, enabling the new Social Protection Board to give relief to older persons in need.

In Dominica, pension provision coverage is limited to only those who contribute, requiring part-contributions from employer (3 per cent) and employee (7 per cent) for persons in the private sector. Government employees are covered under special designed conditions, and self-employed individuals in the informal sector are encouraged to contribute to the national social security pension scheme. There is no special differentiation between older men and older women as far as coverage or benefits are concerned. There is a suggestion to improve the provisions for the collection and payment of the pension to include rural areas and those working in the informal sector. The response to the questionnaire also indicates that more needs to be done to decentralise the system of social security collection and payment in the country.

In the same vein, in Grenada, it is reported that the pension provided by the Government is not adequate. Domestic workers, farmers and other private sector workers are not encouraged to pay into the National Insurance Scheme.

In Jamaica, the Ministry of Labour and Social Security administers social protection and social security legislation, policies and programmes with regard to older persons. The National Insurance Act and Regulations of 1965 regulate the administration of the National Insurance Scheme (NIS), which includes pensions and other benefits for older persons. Benefits that are available to older persons include retirement benefits and a benefit for persons born before 1 January 1908, which is targeted to capture all centenarians. All pensioners are also beneficiaries of the NIGOLD health plan for NIS pensioners, which provides assistance with medical expenses. The Programme of Advancement through Health and Education (PATH) is a proxy means-tested social assistance programme, which includes the payment of a social pension for older persons in selected households.

In Trinidad and Tobago, the National Insurance Scheme provides a contributory monthly pension benefit of 3.000 TTD (the equivalent of about 445 US\$) to workers who retire between the ages of 60-65 and who have made a minimum of 750 contributions. There is a Senior Citizens Pension, which provides a monthly pension of 3.500 TTD (the equivalent of about 522 US\$) to older persons aged 65 year or over who fulfil the requirements of residency status, age and income.

Since 2012, some countries have increased the pensionable age. For instance, in Dominica, the eligibility age for pension benefits from Social Security has increased from 60 to 61 and in some cases to 65 years or older, and in Sint Maarten, from 60 to 62 years old with an increase in the level of social assistance upon reaching retirement age.

⁴⁰ ECLAC-Studies and Perspectives Series- The Caribbean, No.45, 2016, p. 32.

⁴¹ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.36.

According to the ECLAC study 2016, not all older persons who are receiving a contributory pension, necessarily receive a full pension due to incomplete contribution records caused by breaks in employment often in the case of women, related to their unpaid care and domestic work.⁴²

Regarding non-contributory schemes, all Caribbean countries have implemented measures with the exception of Dominica, Grenada and Saint Lucia. Some countries have recently expanded the coverage and quality of these non-contributory pension schemes. Guyana and Suriname are the only countries to have established a universal pension scheme, which is offered to all citizens aged 65 and above. Others have established pensions that are provided to those who have no other pensions, or in specific situations. In Anguilla, it was reported that the non-contributory old age pension provides payments to older persons living in indigence situations and persons employed above the age of 65 years who are exempt from social security deductions. In Barbados, the non-contributory pension is for older persons who were never formally employed in the country and could not pay into a pension plan, and who now receive a stipend twice a month. In Belize, since 2003, there has been a non-contributory programme available to older women at 65, and older men at 67, through the Belize Social Security Board. This system is only available to one member of a couple and it corresponds to 100.00BZD a month (which is the equivalent of about 50 US\$). It was reported that the non-contributory pension programme are covering one quarter of the elderly population in 2013⁴³. Saint Vincent and the Grenadines has also established a non-contributory assistance age pension, which offers small financial assistance to older persons since 2009⁴⁴. Despite this progress, it is important to highlight that, with the exception of Trinidad and Tobago, it is assessed that non-contributory pension schemes are not well funded, which is reflected in their low level of benefits when compared with poverty and indigence lines; more needs to be done to provide adequate income to older persons to allow them to age with dignity.

In fact, only The Bahamas, Barbados and Dominica have introduced indexation based on the Consumer Price Index for social security pensions. These adjustments have been considered essential in order to minimise the impact of inflation on the real value of pensions and so help maintain older persons' purchasing power⁴⁵. Additional allowances and benefits have also been created in order to supplement old age pensions and guarantee a reasonable income for older persons due to the comparatively high cost of living in the region. In Antigua and Barbuda, the Senior Citizens Utilities Subsidy Programme has been established, which provides a monthly subsidy of EC\$100 (the equivalent of about 34 US\$) for utility bills for pensioners registered with the Social Security Board⁴⁶. In Bermuda, there has been a 5 per cent increase in pension benefit payment, and those without the financial resources can seek help from the Department of Financial Assistance. In 2012, the eligibility requirements for older persons were changed to enable those with property to receive assistance to address the challenges facing cash poor, land rich seniors. In addition, according to the Land Tax Act of 1967, the land tax payment is exempted under certain conditions, including the ownership of the unit, the age, the nationality status and the value of the unit. In the Cayman Islands, it was reported that the Government has in place programmes to provide social assistance to older persons in need of financial assistance, housing support, and assistance in kind, such as food. Guyana introduced a universal government-funded water subsidy to assist senior citizens with payment of their water bills, and there is also a programme that allows conditional withholding of tax waivers. The Government of Saint Vincent and the Grenadines also Established a Social Safety Net Programme, which provides public assistance to older persons, including monthly assistance of approximately 85 US\$, including housing, transportation, education and meals⁴⁷. In Suriname, elderly homeowners receive their electricity supply free of charge on condition that their usage does not exceed a designated maximum level. In Trinidad and Tobago, the National Social Development Programme (NSDP) provides free electrical re-wiring and plumbing to households, particularly to those which are headed by pensioners. There is also the 'Targeted Conditional Cash Transfer Programme' that provides a tiered monthly payment system to families for the purchase of food at designated grocery stores. Sint Maarten has implemented a relief program to reduce the utility bills of older persons.

⁴² ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.36.

⁴³ A/HRC/25/13, Report of the Working Group, Universal Periodic Review, 2013, para.25.

⁴⁴ National Report, Universal Periodic Review, 2016, para.77g).

⁴⁵ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016.35.

⁴⁶ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.40.

⁴⁷ National Report, Universal Periodic Review, 2016, para. 77 e)

The need for pension reforms has been highlighted in some replies, in order to maintain the sustainability of those schemes as the ageing of the population continues. In Belize, it was reported that 60 per cent of older persons do not have access to a pension. As recommended in the San José Charter, all such reforms should include an intergenerational aspect in order to foster social cohesion and strengthen solidarity between generations.

G. The right to work and access to an inclusive labour market

The San José Charter includes a specific section on the rights of older persons to work and to have access to income-generating activities. This encompasses the development of measures designed to ensure equal treatment and equal opportunities, especially with regard to working conditions, guidance and training at all levels; the adoption of active employment policies that promote the participation or re-entry of older workers in the labour market, including entrepreneurship and access to credit; the promotion of legal reforms and economic incentives to enable older persons to continue working beyond the retirement age, if they are able and want to do so; and the dissemination of information on the right to retire, preparations for retirement and its advantages, as well as on the possibilities of other vocational or voluntary activities.

According to the ECLAC Study 2016, many older persons continue to be active in the labour force across the Caribbean. It was reported that 40 per cent of older men in Jamaica and Belize are still active in the labour market. In other countries, such as Barbados, Suriname and Trinidad and Tobago, that figure is around 12 to 14 per cent⁴⁸. The labour force participation rates for older women are more than half the rates for older men. The study's analysis also revealed that the propensity of older persons to remain in the labour force was closely related to the coverage and level of social security in each country. In countries where the effective coverage rate of the contributory social security pension is relatively high, for example in The Bahamas, Guyana and Barbados, labour market participation among older persons is lower. Where there are fewer older persons receiving a contributory old age pension, for example, in Belize, Jamaica and Saint Lucia, older persons are more likely to remain in work⁴⁹. Among those who do work, they are more likely to be self-employed, engaged in informal activities.

Since the previous quinquennial assessment, Dominica is in the process of gradually increasing, by 2021, the national retirement age from 60 to 65. Despite such incremental increases in the pensionable age, there are provisions that allow older persons to opt to receive their old age pension earlier than the normal pensionable age, albeit with a reduction in the rate payable⁵⁰. This is also the case in the Cayman Islands, where the age of retirement was extended to 65 since October 2016. Other countries have implemented a series of measures, or are in process of adopting programmes, targeting older persons. In Jamaica, the Ministry of Labour and Social Security administers the country's labour laws, which though not specifically targeting older persons, include provisions for the right to work on the part of all citizens. The revised policy aims to promote work at the local level, to incorporate older persons who choose to contribute to the labour force as well as to the development of their own businesses. In Guyana, the policy decision regarding the establishment of measures that promote the participation or re-entry of older workers into the labour market is pending approval.

Some countries offer employment to persons aged 50 and over, to fill vacant contract positions in the public sector, which are skills-based related. In Anguilla, retired teachers are used as substitute teachers, retired nurses are used in the Residential Homes for older persons, retired dentists employed under contract with the Government, retired teachers working in the hotel sector, and retired civil servants working in the juvenile detention centres as cooks. In Trinidad and Tobago, senior public officers who retire are often recalled, on short-term contracts, to provide training and share their expertise.

In Bermuda, the Department of Workforce Development, under the Ministry of Home Affairs, provides services for older persons to re-enter the workforce, including career guidance, employment assistance, and career development services or training, for instance by assisting them with on-line job

⁴⁸ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p. 32.

⁴⁹ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.33.

⁵⁰ <http://www.dss.dm/pensioners/retirement-age/>

applications and job searches, among others. A repertoire of skills of older persons has been established in Trinidad and Tobago, which is in the process of revamping its programme Senior Citizens Bureau, established in 1996, to serve as a skills-bank for persons aged 60 and over.

In Belize, many older persons continue to work in the domestic field or as manual labour, including yard cutting, subsistence farming and babysitting. The income generated often meets their basic needs but does not provide any long-term security when the older person is no longer able to work and, as a result, will have no income. It has also been highlighted that there are no formal measures offering training to older persons for small-business and income generation.

In terms of training, there is a medium-long term goal in Barbados to promote the facilitation of employment for retired persons and to encourage training for older workers who enter and re-enter the labour market under the National Policy on Ageing. The Community Development Department, through its Community Impact Programme, offers a variety of educational programmes for older persons that are held in the communities where persons reside. The Community Development Department also offers a Community Technology Programme to older persons who can apply to be tested for National Vocational Qualifications.

In Dominica, employment opportunities for older persons are reportedly almost non-existent. A similar situation has been reported in Grenada. In fact, their lack of technology skills, limited financial resources are some of the challenges faced by older workers. There are non-governmental initiatives, such as the establishment of a Cottage Industry component which gives older, as well as younger, persons an opportunity to produce and sell a variety of items such as household goods, jewellery, decorative items, etc. Potential participants have the option to attend classes in handcraft and sewing, for a very nominal fee.

Some programmes have been established that help older persons to **plan for their retirement**. Trinidad and Tobago has created an annual programme of two-day retirement planning seminars for public officers, which provide participants with the knowledge and skills required to make viable plans for their retirements. In Grenada, the Grenada Association of Retired Persons had been running retirement and pre-retirement seminars to help people understand the necessity of planning for retirement, by establishing savings accounts and investing part of their monthly income on a regular basis.

Despite the advances made, the majority of countries have not implemented a specific measure to promote the participation or re-entry of older workers into the labour market, nor to provide access to credit facilities. For instance, Sint Maarten reported that there is no legislation that mentions that persons must retire at 62 years of age; therefore, it leaves persons free to decide whether they continue working or not. However, countries are strongly encouraged to adopt employment policies for older persons, especially those who are willing to continue working, including career support, elimination of all forms of discrimination against older workers, and the promotion of inclusive and conducive working environments, as well as volunteering programmes for older persons. The participation of older persons in the labour market will not only be to the benefit of the older persons themselves in terms of self-esteem, autonomy and independence, but their contribution will benefit the entire society.

H. Equality and non-discrimination based on age

The San José Charter recognises, in its Preamble, that age continues to be an explicit and symbolic basis for discrimination, which affects the exercise of all human rights in old age, and that older persons require special attention from the State. It enumerates a series of legislative, administrative and other measures designed to guarantee differential, preferential treatment of older persons, in all spheres, and prohibit all forms of discrimination against them. Reference is made to multiple forms of discrimination, including gender-based discrimination, in particular against older women. In fact, ageism is recognised as ‘the common source of, the justification for and the driving force behind age discrimination’.⁵¹ Ageism remains one of the main challenges faced by older persons to effectively exercise their rights on an equal basis with others. Negative stereotypes

⁵¹ E/RES/2014/7

and misconceptions about older persons and ageing are part of ageist attitudes and behaviours that governments have, since the adoption of MIPAA, committed themselves to challenge.

Since 2012, only a few countries have taken action to tackle ageism. Bermuda has amended the Human Rights Act, 2013 and included age as a protected ground in the area of goods, services, facilities and accommodation. In 2016, mental disability was also added as a protected ground in the Act. It is also reported that the Human Rights Commission engaged in a collaborative initiative with the Seniors Learning Centre, and partners, to progress support for amendments to protect against discrimination in employment, as well as address issues of discrimination facing older persons in the community. For instance, the Commission has adopted a financial assistance programme for older persons, by changing the eligibility criteria that enables older persons who are home owners to qualify for assistance. In other countries, the initiative is restricted to a specific area; for instance, in Jamaica, special lines are designed for older persons in banks and customer service areas of many organisations. In Dominica, age and gender based discrimination is frequent in employment advertisements, which set age limits and state that certain posts are only open to men, but no measure has been adopted to address this situation. In Belize, there are no specific measures for older persons with physical or mental disabilities, made worse by the lack of access to day care facilities that will help families.

Despite the fact that migration, and the situation of older migrants, are both included in the MIPAA and regional agreements, no information has been provided in this respect. The countries of the sub-region have high net emigration flows, but no actions have been adopted to facilitate access to services and benefits for older migrants in communities of origin, transit and destination.

More efforts are urgently required from Caribbean countries to adopt legal guarantees of equality for all groups of older persons to help prevent ageism in all spheres, including social security, care, employment, property and possession, in particular inheritance rights of older widows. The lack of targeted policies, legislation or institutions that address ageism will continue undermining older persons' rights and hinder their ability to make meaningful contributions to the social, economic, cultural and political life of the community.

I. Accessibility, infrastructure and housing

Accessibility has been one area where much progress has been made compared to the previous review cycle of five years ago. The MIPAA, as well as the San José Charter, recommend a series of measures to create enabling environments that meet the needs of older persons and consider their changing capacities. This requires putting in place age-friendly and barrier-free infrastructure, including transport facilities and services, public buildings and spaces, and housing.

Some States have implemented measures to improve the access of older persons to **transportation**. In The Bahamas, Barbados, Belize, Jamaica and Trinidad and Tobago, all have at least some reduced-fare scheme for older persons, or free transportation.

In Barbados, persons over the age of 65 can travel on public buses at no cost, and the National Policy on Ageing sets out a series of recommendations to improve the transportation sector over the next ten years. Trinidad and Tobago, established in 2012, the programme 'Elderly and Differently-Abled Mobile (ELDAMO)' Transport Shuttle, which serves as a dial-a-ride service for older persons, especially those with disabilities. In addition, the public transport service corporation, under the Ministry of Works and Transport, provides free bus travel for older persons over 60 years of age. It also provides free bus travel on the Deluxe Coach Service to/ from Port of Spain and San Fernando to older persons during non-peak hours, and on the Free Ferry Service to/from Port of Spain to Scarborough.

In Belize, the National Council on Ageing is in the process of launching a national campaign that will give priority to older persons with specific service lines in essential services, including public transportation. In fact, it was reported that there is only one bus line that offers reduced fares for older persons, and that priority boarding for older persons is not implemented at all bus terminals.

In Bermuda, public transportation is free for Bermudians over 65 years of age. In 2014/2015, the Ministry of Health and Seniors provided a grant to Project Action which provides affordable and accessible transportation to persons. In 2017, KMCC is investigating the extension of its wheelchair accessible bus to older persons and persons with disabilities in the community requiring accessible and affordable transport.

In Jamaica, the Government, through the National Council for Senior Citizens, provides older persons with special identification cards that allow access to concessionary rates on the government-owned public buses in the Kingston Metropolitan area and three other parishes where they operate. In Sint Maarten, a policy for older persons is being developed that will include special transportation arrangements for older persons and persons with disabilities. The Government is also implementing a pilot project to investigate options related to the special transportation needs of older persons.

For other countries, such as in the Cayman Islands and Dominica, it is reported that public transport is privately owned, and there is no specialised transport service for older persons or for those with mobility impairments. In the Cayman Islands, however, the recently adopted Older Persons Policy, 2016, addresses the issue of improving the availability and accessibility of transportation for older persons as one of its main goals. In Grenada, the transport system is also private sector driven and is costly, which has a negative impact on older persons' mobility. In Anguilla, the Government reports that there is no public transportation system either for older persons, persons with disabilities or others requiring assistance for medical reasons. The Government has, however, partnered with the Red Cross to provide transportation for older persons for specific purposes, since the Red Cross has transportation that is equipped with proper lifts and other supports for persons with morbidity challenges.

Regarding public buildings and spaces, in Barbados, the Physical Development Plan is in the process of being amended to include issues relating to the growing ageing population in order to adapt the physical and built environments in the country. In Bermuda, there is an Accessibility Officer who provides advice regarding accessibility requirements and best practices to government and private entities, primarily in the area of the Bermuda Building Codes. In Jamaica, the Government is expecting to improve access to public buildings with the Disabilities Act, 2014. In Sint Maarten, infrastructure developments are being considered within the older persons policy to make public buildings and relevant private buildings more accessible to older persons. The safety of older persons is also considered in terms of introducing good and well-maintained pavements for walking aids and wheelchairs, street lights in the neighbourhoods and walkways outside of homes. More service lines to improve access for older persons have been made available in government offices, banks, and utility and cable companies.

No country has, however, referred to the inclusion of standards of universal design in building codes and urban planning codes. Furthermore, more information is required to comprehensively assess the situation of older persons living in rural and remote areas and the level and adequacy of accessibility of infrastructure, services and facilities.

Another important element of accessibility is **housing**. The San José Charter clearly makes reference to the need to ensure that older persons enjoy adequate housing and are given high priority in the assignment of housing or land, particularly in situations of crisis, emergency, displacement or development-based evictions. Some States have referred to accessibility measures related to housing. In Barbados, the Ministry of Social Care, Constituency Empowerment and Community Development has assisted older persons with the repair of houses through their Poverty Alleviation and Reduction Programme. Similarly, in Trinidad and Tobago, older persons are also eligible for means-tested grants from the Ministries of Housing and Social Development and Family Services for minor house repairs, which allow them to adapt their own homes to meet the needs of ageing. It is also reported that the 'Housing Development Corporation's House Allocation Programme' allocated 5 per cent of its housing stock, in each of the Housing Development Corporations, to older persons. In addition, transferable mortgage payments to the dependents or next of kin of older persons, who die before completion of the mortgage term, have been established. There is also a 'Granny Suite Programme', whereby adult children who are responsible for their aged parents or relatives can be granted means-tested soft loans to extend their premises to accommodate their elderly relatives.

In Bermuda, the Bermuda Housing Corporation provides adequate and affordable housing and promotes independent living to enhance the quality of life of older persons. In previous years, the Government has provided a grant to the Bermuda Housing Trust, which provides quality and affordable rental accommodation to Bermuda's seniors who are in financial need, and are unable to live independently. The Ministry of Health and Seniors' 2017 Long Term Care initiatives include research to identify the need for home conversions and the mechanisms and incentives necessary to make home conversions more affordable for older persons and persons with disabilities.

In the Cayman Islands, the Needs Assistance Unit under the Ministry of Community Development Youth and Sports is implementing a Housing Repairs Assistance Programme. Older persons, who qualify for financial assistance under the Poor Relief Law, are also eligible to receive housing assistance under this initiative.

In Dominica, the Government has introduced a housing programme to build new homes and renovate existing houses. There is also a programme to eliminate pit latrines. In Jamaica, the revision of the National Policy for Senior Citizens will take into consideration access to housing designed to meet the needs of older persons. Social assistance with housing is provided through specific government agencies and local authorities. In Saint Kitts and Nevis, the Basic Needs Trust Fund created age-friendly ramps on sidewalks and the Ministry of Social Services provides assistance to older persons to repair their homes and to adapt houses to their needs. In Sint Maarten, the Community Development, Family and Humanitarian Services is implementing a 'Social Bank' project that will assist older persons in need. While the programme is intended to provide short-term assistance, many older persons will require longer-term structural assistance, making the Social Bank project less suitable. The government is also beginning a home repair project that specifically targets senior home owners if they match certain selection criteria. The housing vision of 2014 is being reviewed with development plans to provide housing for persons of different incomes. There are plans to build housing for older persons in designated areas where social housing can be built. The execution of the building plans has not yet started. The Bahamas also offers low income rental units for older persons, including rental assistance, small home repair and urban renewal house repair programmes.

In Belize, one of the most common problems faced by older persons is the maintenance, repair and adaptation of their homes, especially for those with disabilities. It is reported that there is a need for the establishment of a home subsidy program that would allow older persons to access financial or technical assistance to maintain and adapt their own houses. Also highlighted, is that in Grenada, the majority of Grenadians live from pay check to pay check, with inadequate pensions, and that housing maintenance is therefore very low on their survival list.

There is a general trend, from which the Caribbean is not exempt, which is that older persons are living in single generation households⁵², which puts them further at risk of isolation. Approximately 18 per cent of persons aged 60 and over in the English-speaking Caribbean live on their own.⁵³ In this context, Governments should be encouraged to put additional effort into ensuring that older persons live in secure, healthy and accessible environments in urban and rural areas alike, including those living on their own in remote areas, in order to avoid social exclusion and abandonment.

J. Participation and contribution

Participation is key to promote behaviour changes and tackle ageism. The San José Charter affirms that the political, public and social participation of older persons is a fundamental human right, as well as respect for their autonomy and independence in decision-making. It recommends measures to guarantee the participation of older persons in institutional consultation and accountability processes, and it makes a specific reference to the importance of ensuring the involvement and equal participation of older women and men in the design and implementation of policies, programmes and plans concerning them.

⁵² ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.51

⁵³ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.53

In comparison to the last review, Caribbean countries have made significant efforts to establish mechanisms that encourage older persons' participation in decision-making and policy-making. Several countries have adopted participatory mechanisms to ensure the participation of older persons. In Barbados, the Ministry of Social Care, Constituency Empowerment and Community Development has established a national committee on ageing that includes older persons from the community and community organisations that work with older persons. The National Committee on Ageing acts as an advisory body to the Ministry of Social Care on matters related to ageing, and makes recommendations to the Ministry responsible for older persons in the country. Similarly, the Seniors Advisory Council in Bermuda, which is a body appointed by the Minister of Health and Seniors to provide policy advice on seniors' issues, and to provide recommendations for the National Ageing Plan, the Long Term Care initiatives and the Senior Law Reform Review. The Council has meetings with seniors' organisations and seniors' advocacy charity organisations and the feedback from their members is used to inform policy development in the Ministry. In The Bahamas, the National Council on Older Persons benefits from the active participation of older persons regarding the Universal Health Care plan under development. Similarly, in Jamaica, the National Council for Senior Citizens provides feedback on policy, oversees the implementation of the National Policy for Senior Citizens, and supports and encourages the network of senior citizens' clubs across the country. Senior citizens have participated in conferences on ageing at both national and regional level and the clubs have organised activities promoting social interaction between generations, such as visits to schools.

The National Policy on Ageing of Trinidad and Tobago addresses participation, involvement and social inclusion as one of the twelve priority areas of action. Since 2006, there has been an Annual Public Open Forum for Older Persons, which serves as an outreach programme in rural and urban communities to share information on the government's social services available for older persons and their caregivers, including legal advice and on healthy ageing issues. Also, the Government continues with the Senior Citizens' Parliament event.

Other mechanisms have been established in order to receive inputs from older persons in the preparation and development of new policies and programmes. In Anguilla, the Elderly and Disabled Unit of the Government ensures that the Anguilla Retired Citizen's Association (ARCA) is consulted on any initiative that the Government is involved in that could affect the lives of older persons, such as the country poverty assessment review. In Bermuda, the Cabinet Office, Policy and Strategy Section requires the consultation of stakeholders as part of the standard policy development process of the policy development guide. In the Cayman Islands, older persons were appointed by the Government to the Older Persons Policy Steering Committee and to a Task Force established to develop the Older Persons Policy Implementation Plan in 2016, which is the outcome of a consultative and participatory workshop that took place in the same year.

In Trinidad and Tobago, in preparation for the proclamation of the Homes for Older Persons legislation, the government organised a two-day regulatory framework symposium to examine the legislation, identify key issues and concerns, as well as to formulate strategies by way of policy guidelines for its enforcement. Other forms of participation include the establishment of the Senior Citizens Parliament that simulates sessions of the Members of Parliament debating relevant issues, including the raising of the retirement age for members of the defence force and protective services, and elder abuse. It is reported that data obtained from the debates was subsequently used in programme development.

In Guyana, the Commission for the Elderly will conduct consultations in the third quarter of 2017 with older persons to ascertain policy areas to identify and report to the political directorate on issues affecting older persons.

In Dominica, there are non-governmental organisations that make representation to the Government and other agencies and seek to engage in activities for the improvement and well-being of older persons, such as the Dominica Council on Ageing Incorporated. Similarly, in Grenada, there are non-governmental organisations for older persons, such as the Grenada Association of Retired Persons (GARP) that provide advocacy services and support, ranging from training to recreational activities. In Sint Maarten, seniors' groups or organisations working with seniors are often consulted, during the policy design phase, for their input and comments if the policy will directly impact on their lives. It is reported that the development of a current

national policy for older persons has received inputs from older persons, and organisations working for older persons, since the Government first organised a symposium in 2014.

In Saint Vincent and the Grenadines there was a National Council of Older Persons, however, it is no longer functioning and therefore there is currently no formal mechanism for the engagement of older persons in policy making. In Saint Kitts and Nevis, the participation and engagement of older persons in policy making has been considered limited because there were no independent groups involving older persons or advocating on their behalf.⁵⁴

Additional measures that will serve to reinforce the inclusion of older persons in the processes of preparation, implementation and monitoring of policies should be promoted in the next set of regional agreements. This current review process has not included the participation of older persons, and their contribution should be encouraged in future review processes. The role of older persons should be strengthened at community, local and national levels, with the establishment of consultative mechanisms and through the strengthening of networks and associations working for and with older persons. Their traditional knowledge and their experience should be protected, and their role and contribution to sustainable development and to society more generally should be promoted in order to present a positive image of ageing.

K. Neglect, Violence and Abuse

The right to physical and psychological integrity and the principle of dignity is at the core of the regional agreements and the international human rights framework. When compared to previous regional agreements, the San José Charter brings a series of targeted measures to eradicate all forms of abuse, and includes preventive, legal and monitoring mechanisms to punish those who commit such type of violations against older persons, and provides legal remedies to protect them.

Some countries have reported that there is no data available on the prevalence of elder abuse, thus there is a need for the creation of a referral system that involves law enforcement officials, older persons organisations and departments of human resources in order to document and combat elder abuse. This is particularly the cases for Belize and Grenada.

By comparison, some countries have already adopted specific strategies for the prevention of elder abuse. Anguilla reports that the Dependent Adults Act covers issues of neglect, abuse and violence against older persons. In Bermuda, the Senior Abuse Register Act, 2008, was designed to bring awareness to Bermuda regarding Senior Abuse, protect seniors from abuse, provide for the mandatory reporting of abuse, initiate investigation of alleged senior abuse, and to establish a register of persons who have been convicted of abusing older persons.

Barbados mentions that the National Committee to Monitor the Implementation of the National Policy on Ageing has, as its next priority, the task of enacting a single codified law or amending current legislation to address the issue of elder abuse. In addition, a draft protocol for the prevention, reporting, investigation and management of elder abuse that was completed and presented to the Minister responsible for the elderly in Barbados in 2012, and the national Anti-Elder Abuse Programme Coordinating Committee was established. Over the past five years, it was reported that the Committee has successfully raised the level of public awareness and public debate on the issue of elder abuse, and has developed the case for legislation to tackle elder abuse and discrimination.

Dominica and Trinidad and Tobago are both in the process of establishing an integrated system to address reported cases of elder abuse. So far, in Trinidad and Tobago, the Homes for Older Persons Act, 2007, makes elderly abuse, occurring in a long-term care institution, an offence punishable by law, which is liable to summary or indictable conviction, with the payment of a fine or a stipulated prison term of two years or five years, respectively. There is also the Older Persons Information Centre (OPIC), which serves as a Help Desk and referral facility to link older persons to goods and services. However, over the past decade, this Centre has recorded an increase in the number of reported cases of elder abuse in the community, especially abuse being perpetrated by relatives of the older persons themselves. The Division of Ageing Inspectorate responds to the cases, which often require the assistance of the Community Police and District Health Nurses/Visitors. It also

⁵⁴ ECLAC, Studies and Perspectives Series-The Caribbean- No.45, 2016, p.55

offers counselling to older persons who are victims of abuse. The recently adopted Older Persons Policy and Bill in the Cayman Islands are also aimed at addressing elder abuse and neglect, in addition to the Protection from Domestic Violence Law, 2010.

In Guyana, whilst there are no new programmes or policies, however, the Maintenance Act, Poor Relief Act, the Old Age Pension Act and the Domestic Violence Act are all still in force and addresses various aspects of neglect, abuse and violence.

In Jamaica, there is no distinct legislation on elder abuse, only the National Policy for Senior Citizens that protects older persons from violence and abuse, as well as the Domestic Violence Act, the Offences Against the Person Act and the Sexual Offences Act. More specifically, regarding financial exploitation, all citizens are protected under the Law Reform – Fraudulent Transactions, Special Provisions-Act, 2013. There is a specific body in charge of investigating cases of fraud and scamming, which is the Major Organised Crime and Anti-Corruption Task Force. In Sint Maarten, the Government is in process of adopting a domestic violence policy.

In Bermuda, the Manager of Ageing and Disability Services is the Senior Abuse Registrar, who is responsible for receiving senior abuse referrals under the Senior Abuse Register Act, 2008; investigating or ensuring investigation into any senior abuse referral received; case management, maintenance of the register of persons convicted of senior abuse and permitting access to persons authorised for such. The Registrar also conducts public information sessions to raise awareness regarding abuse and the processes in place to prevent and assist persons in these circumstances. In Guyana, a mechanism was put in place in 2015 to investigate reports of financial exploitation and other forms of abuse and neglect of older persons through the probation and social services department, from the Ministry of Social Protection. Since its implementation, it was reported that the Ministry has received 4 reports of financial exploitation; all were investigated and are being monitored.

Some countries have established training in order to strengthen human capacity to detect cases of abuses. For instance, in Anguilla there is a domestic violence training programme for front line workers, including medical staff, social workers and police officers. In Bermuda, designated officers from the Police Service have received training in how best to respond to and investigate cases involving older persons, in addition to children and persons with disabilities.

Other States have established protective mechanisms, including shelters. In Guyana, the Palms Geriatric Facility, which is a government operated institution, provides accommodation, meals, medical services and recreational activities for older persons who are victims of neglect, abuse and violence. In Sint Maarten, the Community Development, Family and Humanitarian Affairs operates a ‘Women’s Desk’ that provides support to women in need, including older women. The Government also provides support to Safe Haven, a non-profit organisation, which offers free shelter, counselling and supportive services to victims of domestic violence. Crisis care can also be provided to older persons who live in situations of neglect or are subject to violence and abuse. Older persons that qualify for this assistance can receive crisis care for a maximum of three months. They can be provided with temporary shelter and connected to services, including counselling, if this is necessary.

Awareness raising measures have been the most common form of addressing elder abuse, with the commemoration of international days, such as the World Elder Abuse Awareness Day. Barbados continues to annually observe this day, which has been nationally recognised, with structured activities that promote awareness of this human rights violation. In Guyana, a ‘Stop Senior Citizens Abuse’ campaign was rolled out in 2016 through the use of posters, pamphlets and bumper stickers. The Ministry of Social Protection has been sensitising and educating the general public on the forms of abuse against older persons, and an impact assessment of this campaign will be conducted in the first quarter of 2019.

More specifically, regarding financial exploitation, Bermuda Senior Abuse Register Act, 2008, includes financial exploitation as grounds for prosecution. The Senior Review Law Committee, which is a sub-committee of the Seniors Advisory Council, conducted a 2016 review of the legislative mechanisms to address financial exploitation of older persons and provided recommendations for change. Trinidad and Tobago has implemented, through the Social Welfare Division in the Ministry of Social Development and Family Services, the Direct Deposit Programme, which facilitates approximately 85 per cent of the beneficiaries aged 65 and over who are in receipt of the Senior Citizens Pension, to have their monthly pension payments deposited to

their bank accounts instead of being mailed. A Social Safety Net is being formulated by the Ministry of Social Development in collaboration with the Inter-American Development bank, aimed at establishing additional checks and balances. The Biometric Card is another initiative, which allows beneficiaries of several grants to have the moneys uploaded onto one card, which is easily tracked via the recipient's fingerprints. The Division of Ageing Inspectors, in collaboration with the Social Welfare Division, have instituted tighter controls on the registration process for the issue of nominee cards. In Sint Maarten, married elderly persons receive their pensions separately to prevent financial abuse of one partner by the other.

Neglect, violence and abuse still continue to be a persistent problem in the region. Caribbean countries should identify the remaining obstacles to tackle this problem, by conducting research, surveys, studies and data collection, disaggregated by age, sex, type of offences, in order to give visibility to this often unnoticed violence, and which often occurs in family and long-term care settings. The findings could be used to develop further action. More needs to be done to provide measures to support older persons who are victims of violence, neglect and abuse, taking into account a gender and disability perspective. This should include not only emergency shelters, but also advice centres, free telephones lines, and preferential treatments to access legal remedies.

L. Access to Justice

The San José Charter recognises that access to justice is an essential human right and the fundamental instrument for guaranteeing that older persons are able to exercise and effectively defend their rights. It was acknowledged by many countries that the present mechanisms are inadequate to present, investigate and resolve complaints regarding the compliance with laws, policies and plans for ageing. One of the reasons highlighted by Trinidad and Tobago is the lack of data disaggregated in order to discern the significance of the complaints and the parameters of non-compliance regarding the specific group of older persons.

In Barbados, the Committee to Monitor the Implementation of the Policy on Ageing has the responsibility to ensure that the more than 100 recommendations listed in the National Policy on Ageing are implemented. One of the recommendations is that the Ombudsman should be directed to set up a procedure in relation to allegations, made by older persons, of improper or unreasonable or inadequate conduct by a government entity or authority. It has also been recommended that there be an examination of the Ombudsman Acts of other countries to help provide a basis for establishing an Ombudsman for older persons in Barbados.

In Bermuda, there are several institutions that provide support to older persons. The Human Rights Commission provides mechanisms to bring forward individual complaints of discrimination based on age, but collaborative commitment is required to eliminate maladministration or negligence in services mandated to support older persons. The Office of the Chief Medical Officer, which is a regulatory authority for the Residential Care Homes and Nursing Homes Act, 1999, oversee healthcare professional boards and councils. The Ageing and Disability Services, which administers the Residential Care Homes and Nursing Homes Act and Regulations, on behalf of Chief Medical Officer, receives complaints against facilities and coordinates investigations. There are a total of 22 registered care homes in the country. The 2017 proposed amendments to the legislation are expected to strengthen the standards and provide the mechanisms to enforce them in care homes. Finally, there is the Senior Abuse Registrar, who is responsible for receiving complaints and initiating investigations (often with the police) regarding abuse against older persons; 33 cases were investigated in 2016. The current adult protection system, both legislatively and operationally, requires strengthening to better protect older persons from multiple forms of abuse. The Ministry of Health and Seniors' action plans, strategies and steering committees are established to oversee implementation and monitoring. There is a 2017 Ministry of Health and Seniors complaints policy, established to provide clarity and oversight of complaints against services (including regulatory oversight and policy implementation) provided by the Ministry.

In Sint Maarten, the office of the Ombudsman is available to assist older persons when they have complaints against government. The Ministry of Public Health, Social Development and Labour has designed a public complaints system, but it is not yet operational. In addition, at the medical level, the Sint Maarten Medical Centre and the Government Medical Insurance provider and administrator for financial assistance to retirees, have both implemented complaints mechanisms. The Government has also implemented a number of decentralised 'community help desks' that allow persons to access certain government services in a low threshold environment in their own communities. One such help desk is specifically designed to provide

services to older persons and persons with disabilities. In The Bahamas, the Senior Citizens Division of the Department of Social Services is mandated to investigate and resolve complaints regarding the well-being of older persons. If necessary, complaints are forwarded to the judiciary for further review.

From the replies received, no comprehensive policy is implemented in any of the justice systems that gives preferential treatment to older persons in judicial proceedings, including legal aid for those living in situations of poverty and indigence. No information has been received regarding the existence of measures that ensure age-friendly legal information regarding the rights of older persons, the remedies available to them and how they can claim them. States have also not reported on the existence of facilities that could facilitate older persons' physical access to justice buildings, including transportation.

M. Emergency and Disaster risk management

The region of the Caribbean is particularly affected by climate change and disasters related to hurricanes, tropical storms and earthquakes. This could have a disproportionate effect on certain groups, including older persons due to their health or disability status. It is, therefore, important that disaster risk management and climate change mitigation policies include the situation of older persons, both as actors for the development, implementation and follow-up of these policies, and as victims in such emergency-related situations. Disaster risk management, in this context, is understood as the systematic process of planning, organisation, direction and control of all disaster-related activities, at all phases, including mitigation, preparedness, response and recovery. The San José Charter draws attention to the vulnerability of older persons in emergency situations and disasters, and recommends Member States to include the contribution of, and the needs of, older persons in disaster preparedness, relief, post-emergency or post- conflict plans, by providing preferential treatment and offering relief worker training.

In this regard, Anguilla reports that as part of the National Disaster Preparedness Plan, it maintains a register of older persons who can be in a vulnerable situation in times of disaster and who may require assistance. Barbados has a Vulnerable Persons Committee that is co-led by the Ministry of Social Care, Constituency Empowerment and Community Development and the National Assistance Board. The National Disaster Response System is comprised of several stakeholders and they have established an 'at risk register for vulnerable groups', which also includes older persons and those with disabilities. The Government reports that the aim is to strengthen public education directed to older persons on disaster preparedness and to encourage relevant entities to improve existing plans for the protection of older persons, especially those living alone.

Trinidad and Tobago included in its National Policy on Ageing a specific priority on disaster preparedness. This encompasses actions, personnel and amenities needed for shelters and coordinated responses to the needs of older persons, with particular attention to those with dementia and infirmity. In addition, provision is made in the Emergency Procedures section of the Homes for Older Persons legislation, which is proposed for proclamation in 2017, for biannual evacuation drills that should be conducted by homeowners in collaboration with designated responders to disaster relief programmes.

The Government of Bermuda has created an inter-ministerial Emergency Measures Organisation. Although there is no formal policy or plan for older persons, actions targeting older persons include ageing and disability services that support care homes requiring preparation or post-storm support. In addition, the Department of Health, via the Community Nursing Program, targets at-risk clients to ensure appropriate preparation and post-disaster response. Furthermore, public advisory announcements encourage neighbours to check-in on older persons before and after storms. More formal community-based arrangements are being explored by the Emergency Measures Organisation.

The Cayman Islands has a 'National Hurricane Plan', which identifies older persons as a priority for shelter and acknowledges the need to make accommodation for them and others with specific needs.

The Government of Guyana, through the Civil Defence Commission, has conducted several workshops with older persons and the Ministry of Social Protection during the observance of the International Day for Disaster Reduction. It has also distributed emergency kits to homes of older persons across the country, including basic supplies.

In Jamaica, there is no specific measure that gives preferential treatment to older persons during the various phases of disaster assessment. It is reported that this is case-specific. The Ministry of Labour and

Social Security coordinates Parish Shelter and Welfare Committees, at which the specific needs of older persons are represented.

The Government of Sint Maarten has a disaster plan for the entire population that offers assistance in the event of major disasters affecting the population. Health service support, social aid support and shelters in districts become available to the population, and thus also to older persons, when a disaster strikes. The Red Cross provides relief supplies as part of the relief effort of the Government. In addition, there is also a Crisis Care Service that is designed for individual crises and persons affected by small-scale calamities. This service helps residents within a timeframe of 24 to 72 hours following a traumatic event, and aims to restore the daily functioning of individuals, families or groups to an adequate level as soon as possible. It also provides support to those undocumented.

Several good practices have been provided by Caribbean States that could inspire other regions. In order to have a comprehensive assessment of the existing programmes of disaster risk management and building resilience policies and strategies, it will be important to receive additional information from the remaining countries under analysis.

N. Education, training, lifelong learning and capacity-building

The San José Charter re-iterates that older persons should enjoy the right to education and continuous learning, and therefore encourages Member States to promote active policies to combat illiteracy among older women and men; to facilitate older persons' access to and active participation in recreational, cultural, and sporting activities, and in information and technology, promoted by public or private organizations, associations and institutions; to implement educational programmes that enable older persons, of different ethnic and other groups, to share their knowledge, culture and values, taking into account the intercultural approach; and to promote the incorporation of the issue of ageing and old age in curricula at all levels, from the earliest age.

Despite these recommendations, only a few countries have developed lifelong learning programmes for older persons. Trinidad and Tobago has established the Adult Education Programme in the Ministry of Social Development and Family Services, which provides courses and exams at high-school level for adults and older persons who want to complete their education. It has also launched a programme to facilitate their access and use of information and communication technology under the 'ICT for Seniors Programme'⁵⁵. In Barbados, the Unique Helping Hands Senior School was opened in 2012. The School serves retired and independent persons aged 50 and over, and believes in the concept of learning through interaction. It offers programmes in areas such as information technology, arts and craft, music and foreign languages. The Cayman Islands have available programmes at the University College of the Cayman Islands and International College of the Cayman Islands.

No information has been provided regarding illiteracy programmes to reach older persons in rural areas or targeted programmes on technology readiness, computer and data literacy trainings for older persons, which could help keep them integrated into societies, extend their knowledge, promote intergenerational interactions, learning and understandings, via for instance, the creation of online community platforms.

⁵⁵ National Report, Universal Periodic Review, 2016, para.56.

II. Further actions to strengthen the implementation of both instruments

1. Conclusions

Fifteen years after the adoption of the MIPAA, Caribbean Member States remain committed to improving the well-being of older persons. This has been illustrated by measures adopted by Caribbean countries, especially with the adoption of National Policies on Ageing and the establishment of specific institutions leading on issues specifically related to older persons. Other good practices have included measures to monitor the quality of care provided in public and private settings, to provide geriatrics and gerontological care services, and for those living with HIV/AIDs, as well as to improve the accessibility of public spaces and buildings for older persons. Awareness raising activities have also been part of the effort to sensitise societies about the ageing of the population and to address the specific needs and challenges faced by older persons, including all forms of abuse and violence against them, with the aim of eradicating such practices and ensuring that older persons live with dignity and security.

Another positive trend is the inclusion of older persons in disaster risk management plans, from preparedness to post-disaster reconstruction, as well as their participation in the development of policies affecting their lives. This is particularly important considering the challenges faced by a number of Small Island Developing States, due to the impact of climate change on their societies.

Despite the progress being made, the implementation of existing policies has, so far, not incorporated a human rights-based approach, as recommended in the San José Charter. There is a dispersion of measures to protect the rights of older persons at the national level, and they are often focused on specific issues, mainly on health and social care measures, without considering the whole spectrum of rights enshrined in the Charter. The San José Charter generated a momentum in terms of highlighting the importance of adopting a human rights perspective when addressing ageing issues and it seems that member States have continued to implement the framework established by the Brasilia Declaration, which was less ambitious in terms of the scope of rights that address the situation of older persons.

In fact, little information has been given on a series of rights, including safeguards for free and informed consent for medical treatment, decision-making, legal capacity, access to justice and rights to culture. No information has been provided regarding policies or programmes that consider the heterogeneity of older persons, in particular those who are in healthy condition and not in need of care, and who would like to continue working beyond the statutory retirement age and contribute to sustainable development. More needs to be done to reform pension systems in order to guarantee their sustainability and achieve universal coverage, and specific measures should be introduced to encourage private sector decision-makers to hire older persons if both parties are willing, perhaps with flexible hours or through volunteer programmes.

No information has been received regarding the situation of specific groups of older persons, including older women, older migrants, LGBTI older persons, those belonging to ethnic, religious and linguistic minorities, those living on the streets or those who are deprived of liberty. More research, studies and data collection is needed to have a comprehensive understanding of the challenges faced by those groups and to introduce the necessary reforms and to update policies and legal frameworks on ageing.

A number of countries are in the process of reviewing existing policies and should therefore seize the opportunity of incorporating the recommendations of the present report, read in conjunction with the 2030 Agenda for Sustainable Development and its Sustainable Development Goals and other relevant international and regional instruments and frameworks addressing the situation of older persons, including the SIDS Accelerated modalities of action (SAMOA) Pathway, the Montevideo consensus on population and development, the Montevideo Strategy for implementation of the regional gender agenda within the sustainable development framework by 2030, the New Urban Agenda of the United Nations Conference on Housing and Sustainable Urban Development (Habitat III), the Sendai Framework for Disaster Risk Reduction 2015-2030, the reports of the Independent Expert on the enjoyment of all human rights by older persons and other special procedures of the Human Rights Council, as well as the reports of the Open-ended working group on ageing, among others.

2. Recommendations

The following series of recommendations are aimed at helping guide Caribbean countries in the implementation of the MIPAA and the San José Charter. Also, they attempt to identify new areas that need to be included in the next review cycle:

Context across the Caribbean:

- The new regional agreements should recognise the region's heterogeneity, the specific needs and challenges facing Small Island Developing States, middle-income countries, or highly indebted and vulnerable Caribbean countries, and the importance of strengthening long-standing cooperation, including regional, south-south cooperation and new forms of multi-stakeholder and public/private partnerships, and support provided by the international community, including the United Nations, ECLAC, international and regional institutions, financial and multilateral development partners. Importantly, they should highlight the ageing of the population across the subregion, and recognize explicitly that the growing numbers of older persons are not a homogeneous group; that particular attention needs to be given to their varied and different circumstances, whilst at the same time, identifying commonalities and good practices in addressing the situation of this age group across the subregion that, if properly harnessed and encouraged, will make a positive contribution to sustainable development.

Legal, regulatory and policy frameworks:

- Encourage Member States to ratify international and regional human rights instruments, including the Inter-American Convention for the protection of the rights of older persons, the American Convention on Human Rights, as well as the Convention on the rights of persons with disabilities, the International Convention on the Protection of the Rights of All Migrants and Members of Their Families. The ratification of those instruments will broaden the scope of protection of older persons in the Caribbean;
- Ensure the full enjoyment of all human rights and fundamental freedoms by older persons, through the amendment of existing national policies and strategies on ageing, the adoption of national policies/action

plans on ageing, as well as national development planning and sustainable development and poverty reduction strategies, which include a rights-based approach;

- Disseminate international and regional agreements and standards on the rights of older persons throughout society as a whole, including older persons themselves. National policies should be made available to older persons in accessible and age-friendly formats, in urban and rural areas alike.

Institutional frameworks:

- Strengthen national institutions by establishing a specific body at the governmental level, responsible for promoting the well-being and the rights of older persons, mainstreaming ageing in planning and budgeting, coordinating inputs for reporting, review and appraisals, including the MIPAA and its regional agreements, at the local and national levels. This body should be allocated with adequate and sufficient human, material and financial resources to achieve its objectives and to perform its tasks. Its composition should have an inter-institutional, inter-sectoral and multi-stakeholder approach in order to promote coordination and cooperation among the different actors, including governments, civil society, academia, and older persons themselves;
- Improve and/or strengthen the monitoring and evaluation aspect of such bodies, including the implementation of a system with indicators and the collection of disaggregated data by age, gender, disability, and other any relevant variable, in order to have a comprehensive assessment of the impacts of existing policies on ageing, on the well-being of older persons and on the enjoyment of their human rights and to identify challenges and good practices;
- Reinforce existing consultative and participatory mechanisms in national councils/divisions/ministries leading on issues affecting the well-being of older persons, in order to effectively allow them to participate and contribute to decision-making affecting their lives;
- Strengthen the establishment of networks, organisations and associations of older persons and invite them to participate in the review process of the MIPAA and regional agreements at the national and regional levels.

Awareness raising, data, survey, research:

- Carry out, in conjunction with national human rights institutions, academia and networks of older persons, awareness raising campaigns in order to change attitudes toward ageing, promote intergenerational dialogue and interaction, and social inclusion and cohesion. The positive contribution of older persons to sustainable societies should be highlighted, including with the active role of the media and private sector, in order to eradicate ageism, and all other forms of discrimination and abuse against them;
- Disseminate existing policies/strategies/regulation on ageing, at all levels of government and to those providing public services to older persons, including health and social care professionals, public transport providers, and inform older persons themselves about those policies and their rights;
- Ensure the availability, and systemic and regular collection of disaggregated statistics and data, and the accessibility of statistics to inform the development and implementation of policies;
- Conduct research in order to identify up-to-date challenges faced by older persons in each of the Caribbean countries, in partnership with academia, international and regional organisations, accompanied by the collection and analysis of disaggregated data by age, gender, disability and health status, and other relevant variables.

Care

- Promote the universalisation of the right of older persons to health, which should be based on a comprehensive and integrated social and health care approach in order to respect and promote their autonomy, independence and dignity and provide a continuum of care, from prevention, promotion, and rehabilitation to palliative care;
- Foster the implementation of measures that provide home-care services, respite care for informal caregivers and additional services to help families. Particular attention should be given to older persons living alone and/or in rural and remote areas;
- Foster public policies on the sexual and reproductive health of older persons;
- Continue promoting active and healthy ageing, and improving the nutrition of older persons;

- Develop comprehensive long-term care systems, with specialised and sufficiently trained personnel, well versed in the human rights of older persons, as well as public day-care centres, with operational rights-based guidance and standards;
- Adopt or reinforce monitoring and supervisory mechanisms to verify the quality of care offered in public and private care settings, including care provided at older persons' domiciles, with adequate and sufficient trained inspectors able to report to authorities;
- Put additional efforts into extending training and coverage of geriatric and gerontological care at the different levels of health care, in order to meet the needs of older persons, including those living in rural, coastal and remote areas. This should encompass the inclusion of geriatrics and gerontology in the university curriculum and nursing training programmes;
- Adopt measures that improve access to palliative care, in order to allow all older persons with terminal illnesses to avoid unnecessary suffering and die with dignity;
- Improve existing preferential measures that facilitate access to medicines, equipment, assistive devices and comprehensive rehabilitation services, in particular in rural, coastal and remote areas;
- Put additional efforts into providing human-rights training for formal and informal caregivers, and to inform older persons about their human rights in care settings, including their right to privacy and intimacy;
- Continue implementing specific programmes to address the situation of older persons with HIV/AIDS, and those suffering from communicable and non-communicable diseases; as well as to address emerging diseases, including chikungunya, dengue, and zika; including training for care providers and health professionals, and facilitating access to prevention, treatment and rehabilitation mechanisms;
- Pay particular attention to the situation of older persons with chronic degenerative diseases, Alzheimer's and other forms of dementia;
- Pay particular attention to the situation of certain groups of older persons, including those living on the streets, in rural, coastal and remote areas, those belonging to ethnic, linguistic or religious minorities, LGBTI older persons, and those deprived of their liberty.

Autonomy and Independence:

- Adopt or amend current legal/regulatory/policy frameworks on ageing to include specific references and actions that promote autonomy and the independence of older persons. Issues that need to be addressed in this regard include: the right of older persons to equal recognition before the law, legal capacity and regimes for supported decision-making, safeguards for free and informed prior consent for any medical decision, treatment, procedure, or research in the area of health, and the right to choose the place of residence, where and with whom they want to live; and the right to privacy and intimacy.

Adequate standard of living and social protection:

- Adopt measures to gradually expand the coverage and quality of social protection schemes, including non-contributory pension schemes, in order to reach those who have worked, or continue to work in the informal sector or as caregivers, with particular attention to older women and older migrants. These measures will allow older persons to receive a minimum income and reduce the risk of their living in poverty and indigence;
- Simplify administrative procedures for obtaining pensions, especially, non-contributory pensions, in order to expand the coverage of such pension scheme arrangements and avoid waiting lists, and any form of financial/ economic abuse that could be generated by the complexity of the procedures and need of family and external assistance to complete the forms and receive the benefit.

Right to work and access to an inclusive labour market:

- Include age as a ground for discrimination in all legislative, administrative, policies and other measures in order to promote inclusive labour markets and eliminate all barriers faced by older persons in the formal labour market;
- Undertake legal reforms to enable older persons to continue working beyond the statutory retirement age if they are able and willing to do so, with the adoption of flexible working hours and retirement arrangements, organisation of tasks and accessible working environments and other forms of income generating activities. Particular attention should be giving to those working in the informal labour market or as informal caregivers in order to improve their income and working conditions;

- Adopt measures aimed at promoting older persons' participation in entrepreneurship and volunteer programmes and to remind business actors of their role in respecting and protecting the rights of older persons, in accordance with the Guiding Principles on Business and Human Rights;
- Promote training programmes, vocational training and job placement for older persons, including in the areas of computing, communication, information and technology;
- Continue the dissemination of information on retirement, including the options available to keep active in society, including vocational and voluntary activities;
- Facilitate access to credit, and loans and eradicate all forms of discrimination based on age in the banking, insurance and other related sectors.

Equality and non-discrimination based on age:

- Amend current legal/administrative/regulatory and policy frameworks to include age as a ground for discrimination, with specific provisions prohibiting such acts in order to guarantee equal opportunity to all. Special attention should be given to multiple forms of discrimination, including those based on gender, sexual orientation, disability and health status;
- Adopt specific measures to address the specific needs of older persons, with particular attention to older women, regarding access to, ownership of and control over land, property, possession, natural resources and access to bank loans, credit mortgages and other forms of financial services, with the aim of empowering older women and achieving gender equality at all ages.

Accessibility, Infrastructure and Housing:

- Adopt measures to ensure accessibility, the personal mobility and security of older persons, including by adapting public transport, buildings and spaces to meet the needs of an ageing population and by removing all kinds of barriers to their physical access, and facilitating access to information, and improving urban-rural linkages. Building codes and urban planning directives should be revised accordingly, with the inclusion of universal design standards and signage in formats that are easy for older persons to read and understand;
- Continue efforts to broaden the scope of free public transport for older persons, including land, and sea transportation;
- Expand the coverage of existing programmes aimed at helping older persons to rehabilitate and adapt their homes to changes of circumstances and to reflect their reduced capacities, as well as to promote alternative types of housing for those in need of care, with the facilitation of home loans or other forms of financing without discrimination;
- Amend existing laws, policies and programmes in order to guarantee the right to decent and adequate housing, and the right of older persons to property, including the right to freely dispose of their property, and to prevent the abuse or illegal transfer thereof;
- Promote training on the human rights of older persons to all professional categories involved in the adaptation and retrofitting of public buildings, services and spaces.

Participation and contribution:

- Strengthen existing mechanisms of participation at the governmental level to allow the full inclusion, integration, and participation of older persons in all phases of decision-making on issues that have an impact on their lives, and promote new forms of participation, with networks of civil society organisations and associations, charity and community-based organisations;
- Adopt measures that will improve older persons' access to social, economic, educational, political, recreational, sporting, cultural and public engagement in their communities, and which will help them remain integrated and able to contribute to society. Particular attention should be given to older women and those belonging to ethnic, linguistic, and religious minority groups;
- Adopt measures that will ensure the effective exercise of their right to vote, to freedom of expression and opinion, and their right to access to information on an equal basis with other sectors of the population;
- Adopt measures that will ensure the right to identity and to nationality by all older persons;
- Adopt measures that preserve the cultural identity and the transmission of traditional knowledge and the experience of older persons to new generations.

Neglect, Violence and Abuse:

- Raise awareness on all forms of financial, physical, sexual, and psychological abuse, violence, abandonment, and neglect, with particular focus on family and long-term care in institutional settings, in order to sensitise civil servants, health and social care professionals, public prosecutors, judges, public transport providers, police officers, families and informal caregivers, among others, and to break taboos and negative images related to ageing. Particular attention should be given to older women, those with disabilities, those living alone and in need of care, those living on the streets, LGBTI older persons, and the age group of nonagenarians and centenarians, that could be at greatest risk of being abused;
- Adopt or amend existing legal/policy/regulatory frameworks to prevent, investigate, punish and eradicate abuse, abandonment, negligence, and all forms of violence against older persons. This should encompass practices that infantilise older persons or that jeopardize their safety and integrity;
- Develop human rights standards/codes in care settings, as well as training programmes for those working with older persons in public and private institutions, so as to improve the ability to detect abuse and to improve the mechanisms for administrative and legal complaints;
- Develop coordinated and inter-sectoral monitoring and reporting mechanisms for the registration of cases, and the provision of comprehensive assistance to those who are victims of abuse, including emergency shelters, phone lines, legal counselling, representation, health and social care services.

Access to justice:

- Adopt measures that will improve older persons' access to justice, by giving priority and preferential treatment in processing, resolution, administrative and legal proceedings, legal aid and counselling;
- Promote alternative dispute settlement mechanisms and mediation processes;
- Promote training for judges, lawyers, prosecutors, personnel of the justice administration, including police and prison staff, on the rights of older persons.

Emergency, Disaster Risk Reduction Management and Building Resilience

- Continue promoting the inclusion, full and effective participation of older persons in the design, adoption and implementation of disaster management plans and climate change adaption and mitigation strategies in order to build sustainable and resilient societies. Particular attention should be given to those living in coastal areas and remote areas.
- Promote measures that provide specific assistance to older persons in preparedness, prevention, response, reconstruction, and recovery activities, risk assessment and data, education and training programmes, associated with emergencies and disaster-related situations.
- Raise awareness of, and protect older persons from physical, psychological, sexual and financial abuse in all phases of emergency relief, evacuation and recovery measures.

Education, training, lifelong learning and capacity-building

- Increase investment in education and adopt specific programmes to reduce illiteracy among older persons, with particular attention to older women, and those living in rural and remote areas;
- Promote access for older persons to education and training programmes, including the creation of third age universities and other institutional programmes, which will reinforce intergenerational interactions and dialogues, with particular focus on numeracy, information and new technology, communication, and computing skills;
- Promote the incorporation of the issue of ageing and old age in curricula at all levels of the education systems and promote intergenerational interactions in schools;
- Develop accessible and age-friendly formatted information and educational programs, and materials that consider the needs and challenges faced by older persons, in particular those with disabilities.

Annexes

Annex 1: Regional Survey on ageing for the global review of the Madrid International Plan of Action on Ageing for Member States and Associate Members



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13 January 2017

ORIGINAL: ENGLISH

REGIONAL SURVEY ON AGEING FOR THE GLOBAL REVIEW OF THE MADRID INTERNATIONAL PLAN OF ACTION

The third five-yearly review and appraisal of the Madrid International Plan of Action on Ageing (MIPAA) will take place over the next year. As set out in Economic and Social Council (ECOSOC) Resolution 2015/5, regional reviews will take place in 2017 with a global review by the United Nations Commission for Social Development in early 2018.

In order to collect information to inform this process, ECLAC has developed this survey on the legislation, policies and programmes for older persons in your country. The survey contains questions on the measures taken to improve the economic, health and social welfare of older persons and the protection of their human rights.

As part of the review process, there will be a preparatory meeting for Caribbean member states which will precede the Fourth Regional Intergovernmental Conference on Ageing and the Rights of Older Persons in Latin America and the Caribbean to be held in Asuncion, Paraguay from 27 to 30 June 2017.

These meetings will assess the status of implementation of the Madrid Plan of Action (2002) and the most recent regional agreement, the San Jose Charter on the Rights of Older Persons in Latin America and the Caribbean⁵⁶. They will provide an opportunity for dialogue; networking; exchange of experiences and best practices; and will identify future priorities and policy responses.

The review of the Madrid Plan is an opportunity to assess the progress that has been made in addressing the issues discussed at the Caribbean Conference on Ageing, Elder Abuse and the Rights of Older Persons which was held in Roseau, Dominica.

It would be appreciated if you could kindly complete the attached questionnaire by 28 February 2017 and return it by email, together with relevant attachments, to Francis Jones

⁵⁶ ECLAC (United Nations Economic Commission for Latin America and the Caribbean) (2012), San Jose Charter on the Rights of Older Persons in Latin America and the Caribbean (LC/G.2537), Santiago, Chile.

(francis.jones@eclac.org), Statistics and Social Development Unit, ECLAC subregional headquarters for the Caribbean.

Please do not hesitate to contact us should you have any questions.

I. NATIONAL POLICY & IMPLEMENTATION OF MIPAA/SAN JOSE CHARTER

1. Please provide information about your Government's national coordinating unit/focal point for ageing and policies for older persons (60+ years).

Name of the coordinating unit/focal point	
Description (including governance, main functions and activities)	
Contact information, including mailing address, telephone, email and website	

2. Does your country have a national policy or plan of action on ageing/older persons?

Yes No

If "yes", please provide the name; the year of establishment and information on updates or revisions, if applicable. If "no", please elaborate on any effort towards the preparation and adoption of such a national policy or plan of action and/or legislation.

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Please attach a copy of any relevant documents (or links).

3. Has there been any specific survey or research on ageing or older persons in your country since 2012?

Yes No

If “yes”, please provide information (focus and coverage; year of survey/research; institutions involved):

Please attach a copy of any relevant documents (or links).

4. What are the three biggest achievements in addressing issues related to ageing and/or the rights of older persons over the last five years?

5. What are the most relevant issues regarding ageing and the rights of older persons that are anticipated to receive further public policy priority over the next five to ten years?

List up to five issues.

II. OLDER PERSONS AND DEVELOPMENT

6. Has your Government implemented any measures⁵⁷ to promote the participation of older persons in policy-making and/or decision making?

Yes No

If “yes”, please describe the measures taken (and provide an assessment of the results):

Please attach a copy of any relevant documents (or links).

7. Has your Government implemented any measures to strengthen social protection for older persons?

Yes No

If “yes”, please provide information on the policies and programmes (such as details of means-tested or universal pensions; other forms of income support or extension of social protection to informal sector workers).

Please attach a copy of any relevant documents related to the policies/programmes (or links).

⁵⁷ Measures refer to any actions taken to address the specific issue or objective. Measures may include policies and/or programmes. For instance, there may be a policy that leads to the adoption of a programme which then covers a number of activities. Please provide brief information on each of the measures undertaken.

8. Has your Government implemented any measures to promote the participation or re-entry of older workers into the labour market?

Yes No

If “yes”, please specify the nature of support in both informal and formal sector for both older women and older men:

Please attach a copy of any documents related to the policies/programmes.

9. Has your Government implemented any measures to give priority and preferential treatment to the specific needs of older persons in all phases (preparedness, relief and reconstruction) of humanitarian and disaster relief programmes?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impact):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

III. ADVANCING HEALTH AND WELL-BEING INTO OLD AGE

10. Has your Government developed any policies or programmes to promote healthy and active ageing?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

11. Has your Government implemented any measures to provide universal and equal access to health care services for older persons (primary, secondary and tertiary); palliative care; affordable access to essential medications and other medical devices for older persons?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

12. Has your Government implemented any measures to improve geriatric and gerontological training for health care providers?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

13. Has your Government implemented measures with regard to long term care of older persons (those living in institutions and those living in their own home)?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

14. Has your Government implemented measures with regard to older persons who are living with HIV and for those who are caregivers for HIV-positive family members?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

15. Has your Government implemented measures to support older persons with physical and/or mental disabilities, such as the provision of rehabilitation services as well as appropriate care and assistive technologies?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

IV. ENSURING ENABLING AND SUPPORTIVE ENVIRONMENTS

16. Has your Government implemented any measures to ensure that older persons enjoy adequate housing, are able to remain in their own homes, and retain their independence?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

17. Has your Government improved availability of accessible and affordable transportation to improve older persons’ mobility?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

18. Has your Government implemented any measures to develop training programmes for formal and informal caregivers for older people, including an accreditation system?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

19. Has your Government implemented any measures to establish standards and monitoring mechanisms to ensure the quality of older persons’ care services?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

20. Has your Government implemented measures to support families, especially older women, in taking care of older persons?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

21. Has your Government implemented measures to address neglect, abuse and violence against older persons?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

22. Has your Government implemented measures to address financial exploitation of older persons (either by relatives or non-relatives)?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

23. Has your Government implemented measures to enhance the public recognition of older persons as regards their human rights, their authority, wisdom, productivity and other important contributions to society?

Yes No

If “yes”, please describe (provide names of policies/programmes, time frames and impacts):

Please attach a copy of any relevant documents related to the policies/programmes (or links).

IV. HUMAN RIGHTS OF OLDER PERSONS

24. What are the main legislative reforms implemented in the last five years regarding the human rights of older persons?

Indicate the law or regulation and the main human rights protected:

25. Please indicate whether your country has made progress in the development of new laws protecting the human rights of older persons.

If yes, please detail current situation and plans.

26. Please indicate whether your country includes the situation of older persons in the reports submitted to the Committee on Economic, Social and Cultural Rights as set out in Comment 6 of 1995 or to other Committees created by international human rights treaties, such as the Human Rights Committee (UN) or the Committee on the Elimination of Discrimination against Women (UN).

27. Indicate the legislative, judicial, administrative, educational and other measures taken by the country to disseminate and implement international and regional norms and standards that protect the basic rights and fundamental freedoms of older persons.

Please detail measures (provide names of policies and programs, dates and impact):

28. Indicate whether your country has adequate judicial, administrative or other procedures to present, investigate and resolve complaints regarding compliance with laws, policies and plans for ageing.

If so, please provide information on these procedures.

29. What are the human rights of older persons which should be more strongly protected in a United Nations instrument in each of the following areas?

a.) Autonomy and independence

b.) Violence against older persons

c.) Equality and non-discrimination?

This survey was completed by:
(Please indicate details of the focal point and the name of all other Ministries/agencies involved in the completion of the questionnaire).

Signature: _____

Name: _____

Title/designation: _____

Ministry/Agency: _____

Country: _____

Date: _____

Annex 2: Regional Survey on ageing for the global review of the Madrid International Plan of Action on Ageing for civil society organisations



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ORIGINAL: ENGLISH

REGIONAL SURVEY ON AGEING FOR THE GLOBAL REVIEW OF THE MADRID INTERNATIONAL PLAN OF ACTION

The third five-yearly review and appraisal of the Madrid International Plan of Action on Ageing (MIPAA) will take place over the next year. As set out in Economic and Social Council (ECOSOC) Resolution 2015/5, regional reviews will take place in 2017 with a global review by the United Nations Commission for Social Development in early 2018.

In order to collect information to inform this process, ECLAC has developed this survey on the situation of older persons in your country, and measures taken to promote and protect the rights of older persons. The survey contains questions on the economic, health and social welfare of older persons and their human rights. This questionnaire is being sent to non-governmental organisations working with older persons while a similar questionnaire has been sent to governments.

As part of the review process, there will be a preparatory meeting for Caribbean member States which will precede the Fourth Regional Intergovernmental Conference on Ageing and the Rights of Older Persons in Latin America and the Caribbean to be held in Asuncion, Paraguay from 27 to 30 June 2017.

These meetings will assess the status of implementation of the Madrid Plan of Action (2002) and the most recent regional agreement, the San Jose Charter on the Rights of Older Persons in Latin America and the Caribbean⁵⁸. They will provide an opportunity for dialogue; networking; exchange of experiences and best practices; and will identify future priorities and policy responses.

The review of the Madrid Plan is an opportunity to assess the progress that has been made in addressing the issues discussed at the Caribbean Conference on Ageing, Elder Abuse and the Rights of Older Persons which was held in Roseau, Dominica.

It would be appreciated if you could kindly complete the attached questionnaire by 28 February 2017 and return it by email, together with relevant attachments, to Francis Jones

⁵⁸ ECLAC (United Nations Economic Commission for Latin America and the Caribbean) (2012), San Jose Charter on the Rights of Older Persons in Latin America and the Caribbean (LC/G.2537), Santiago, Chile.

(francis.jones@eclac.org), Statistics and Social Development Unit, ECLAC subregional headquarters for the Caribbean.

Please do not hesitate to contact us should you have any questions.

I. YOUR ORGANISATION

2. Please provide the following information about your organisation.

Name of the organisation	
Description (including governance, main functions and activities)	
Contact information, including mailing address, telephone, email and website	

3. What are the biggest achievements of your organisation in addressing issues related to ageing and the rights of older persons in your country over the last five years?

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II. ECONOMIC WELL-BEING

4. Please comment on the adequacy of pension provision in your country, for example the adequacy of pensions, pension coverage, protection of pensions against inflation, the respective situation for civil servants, private sector workers and informal sector workers. How are older women and older men affected? What measures have been adopted to address these issues? What additional measures should be adopted and by whom?

5. What are the most important issues related to older men's and older women's participation in the labour market? To what extent do older persons continue to work and to what extent is this through choice or necessity? What are the issues faced by older persons seeking to earn a living, for example, lack of opportunities, conditions of work, age discrimination or inflexible work place practices? What measures have been adopted to address these issues? What additional measures should be adopted and by whom?

III. HEALTH AND CARE

6. What are the most serious problems facing older persons in your country with regard to their access to health care services and medicines, for example: cost, availability, equality of access to services, quality and appropriateness of services for older persons or specific needs such as palliative care or treatment for older persons living with HIV? What measures have been adopted to address these issues? What additional measures should be adopted and by whom?

7. What measures have been taken to promote healthy ageing, healthy lifestyles, physical and mental well-being and the prevention of non-communicable diseases? What additional measures should be taken and by whom?

8. What support is available for frail older persons, for example: help with domestic tasks such as

shopping, cooking, cleaning and bathing; reading; companionship; programmes to encourage physical and mental well-being? What measures should be taken to improve such services? What support is available to families, especially older women, in taking care of other older persons or with other caring responsibilities, for example respite care?

9. Please comment on the situation with regard to the provision of care in residential and nursing homes in your country, for example the availability of places, equality of access, the quality of care, monitoring and regulation of homes, and the role of government, charitable organisations and the private sector. What additional measures should be adopted and by whom?

10. What are the most serious problems facing older women and men with physical and/or mental disabilities? Do they have access to rehabilitation services as well as appropriate care and

assistive technologies? What measures have been adopted to address these issues? What additional measures should be adopted and by whom?

IV. SOCIAL WELL-BEING

- 11. What are the most serious and common problems faced by older persons in respect of their housing and living arrangements, for example housing costs, home maintenance and repair, home adaption, conflict with family members? How are older women and older men affected? What measures are being taken (or should be taken) to ensure that older persons enjoy adequate housing and are able to remain in their own homes?**

- 12. Please comment on the age-friendliness of public transport in your country, for example ease of access; reduced fares for older persons; quality of service provided to older persons; availability of specialised transport services for older persons with impaired mobility. What additional measures should be taken and by whom?**

13. What measures have been taken (or should be taken) to promote older persons participation in social, cultural, civic, educational and sporting activities? What measures have been taken (or should be taken) to promote a positive image of ageing and older persons?

- 14. Please describe what is known about the extent of elder abuse in your country. Abuse can be emotional, physical, financial exploitation or neglect and can be carried out by family members, professional carers or others. It can affect older women or older men. What measures are being taken to prevent elder abuse? What additional measures should be taken and by whom?**

V. FUTURE PRIORITIES

- 15. What are the most relevant issues regarding ageing and the rights of older persons that should be the highest priorities for action by the Government and NGOs in your country over the next five to ten years?**

16. What are the human rights of older persons which should be more strongly protected in a United Nations instrument in each of the following areas?

a.) Autonomy and independence

b.) Violence against older persons

c.) Equality and non-discrimination

This survey was completed by:

(where there is more than one respondent please provide the details of all contributors).

Signature: _____

Name: _____

Title/designation: _____

Organisation: _____

Date: _____