UNFPA/WHO/UNECE/OHCHR and HelpAge International
Joint Programme on Ageing

Building forward better in light of COVID-19:
Upholding the rights and dignity of older persons through
health, social care and enabling environments in
Europe and Central Asia

in collaboration with the
United Nations Regional System Issue Based Coalition
on Health and Wellbeing

The COVID-19 pandemic has put a spotlight on the rights and health of older persons in our societies. While the infection spreads among persons of all ages, older persons and those with underlying medical conditions are at higher risk of serious illness and death from COVID-19. As of September 2020, 88 percent of COVID-19 related deaths in the WHO European Region were in persons aged 65+. Symptomatic individuals in their seventies are twenty times more likely to require hospitalization than young adults, and case fatality rates suggest a notable increase in risk after age 60, with progressively worse outcomes at older ages. Among these, older people from lower socio-economic status have experienced a worsening of their living conditions, being confined to overcrowded or deprived houses and confronted with housing and food insecurity. Less visible but no less worrisome are the broader effects: health care denied for conditions unrelated to COVID-19; neglect and abuse in institutions and care facilities; an increase in poverty and unemployment; the dramatic impact on well-being and mental health; social isolation and exclusion, stigma and discrimination.

As the pandemic spreads across the region, the needs of older persons may also differ, and severe disease and mortality rates for older persons may increase even further if fragile health and social protection systems are overwhelmed. Early analysis of available data also shows differences between women and men. As of July 2020, 54 percent of COVID-19 cases in the WHO European Region were women, but men have higher rates of hospitalization and intensive-care admissions. As of September 2020, 58 percent of COVID-19-related deaths were in men. Older persons who contract COVID-19 disease
are often also affected by chronic conditions including hypertension, diabetes, and cancer, which may add to the risk of developing severe forms of the disease that may result in death.¹

However, efforts to protect older persons should not overlook the diversity among them. Socio-economic status, educational level, and gender, among other factors, affect access to health care and health outcomes over the life course as well as their resilience and positivity, and the multiple roles they have in society, including as caregivers, volunteers and community leaders. This is relevant now and beyond COVID-19. We must also recognize the important role of older persons in the crisis response, including as health workers and caregivers. Many actors – States, businesses, international organizations, civil society and community groups and older persons themselves – have been actively drawing attention to their challenges and needs, including the need to preserve their dignity and autonomy, delivering services at community level and ensuring that older people’s voices and opinions are heard.

Since the onset of the pandemic, the United Nations has given priority to the needs of older persons in its collective preparedness and response action at global, regional and country level. The UN Secretary General’s Policy Brief on the Impact of COVID-19 on Older Persons underscores the imperative of protecting the human rights of older persons and responding to their specific needs. Specifically, the Policy Brief calls on the UN system to prioritize older persons, who may be at the particular risk of being left behind, in the UN socio-economic responses to the pandemic in building back better. UN Resident Coordinators, UN Country Teams and the Regional UN system has been working to do just that. In addition, civil society organizations, like HelpAge International, are working with local network organizations to address the disproportionate health risks faced by older people and mitigate against the collateral impacts of measures such as lockdowns and closures.

In order to build on the above efforts and ensure a coordinated and scaled up response in Europe and Central Asia, the United Nations Population Fund Regional Office for Eastern Europe and Central Asia (UNFPA/EECARO), the World Health Organization Regional Office for Europe (WHO/EURO), the United Nations Economic Commission for Europe (UNECE), the Office of the United Nations High Commissioner for Human Rights (OHCHR) and HelpAge Regional Office for Eurasia and the Middle East, supported by the United Nations European Regional Issue Based Coalition on Health and Wellbeing, have established the joint programme Building forward better in the light of COVID-19: Upholding the rights and dignity of older persons through health, social care and enabling environments in Europe and Central Asia to support the work of United Nations Country

Teams in the Europe and Central Asia region to help governments implement the above priorities as part of a wider programme on ageing and to ensure that older persons are consulted on a regular basis and have access to the essential information, goods and services they need, including to essential healthcare and lifesaving procedures, and to social care and support services during the COVID-19 pandemic and beyond.

What will the programme focus on?

The joint programme proposes collaborative action over the next three years (2020-2023) among agencies of the UN system and civil society stakeholders at regional and national level working closely with governments across Europe and Central Asia.

It comprises the following three principle areas for strengthening the rights and dignity of older men and women through improving health and social care provision and enabling environments for older persons in Europe and Central Asia.

1. **Enhancing preparedness and emergency response to mitigate the risks for older persons during the ongoing COVID-19 pandemic.** This programme element includes monitoring and mitigating the risks for older people in nursing homes and other long-term care settings, in prisons and other detention settings, clinical care settings and the community; ensuring that difficult health-care decisions affecting older people are guided by a commitment to dignity, the right to autonomy, health, and to strengthening social inclusion and solidarity during physical distancing.

2. **Supporting the delivery of person-centred integrated health and social care for older people beyond the COVID-19 pandemic** in the context of demographic and epidemiologic change in Europe and Central Asia to ensure ageing with dignity. This programme element includes assessing care and support system preparedness for population ageing and providing tailored support to countries in their reform efforts, as well as promoting research and capacity building.

3. **Changing the narrative, promoting the human rights of older persons and creating participatory and enabling environments.** This programme element includes raising awareness and promoting a societal dialogue on ageing, older persons’ rights and ageism, expanding advocacy to ensure the response and recovery efforts are anchored in key human rights principles such as equality and non-discrimination, supporting the participation of older persons and their autonomy and independence, sharing good practices, and harnessing knowledge and data on ageing and the rights of older people. It will also foster capacity building processes in Member States and building alliances among key stakeholders and mobilizing resources to secure sustainability.
How will the programme be implemented?

The primary aim of the joint programme is to provide coordinated support to UN Resident Coordinators and UN Country Teams in their leadership and engagement with national partners to collectively step up action for older persons to preserve their rights and dignity.

The United Nations Population Fund Technical Brief on Implications of COVID-19 for Older Persons provides guidance to UN Resident Coordinators and UN Country Teams on scaling up urgent response measures for older persons, in keeping with the UNFPA COVID-19 Global Humanitarian Response Plan. The Office of the High Commissioner for Human Rights and the Department of Economic and Social Affairs developed a Checklist for the inclusion of older persons in UN COVID-19 socioeconomic response plans, which aims to support the UN Country Teams in integrating older persons in developing socioeconomic impact assessments, responses and recovery plans with a human rights-based approach to help countries tackle the devastating social and economic dimensions of the pandemic, with a focus on older persons as a priority group. In addition to its COVID-19 Strategy, the World Health Organization’s technical guidance on infection control, clinical management, maintaining essential health services, including community-based health care, and long-term care all cover older persons, as does its brief on COVID-19 and violence against older people. All of these documents provide recommendations for practical actions that countries can take at national, regional and local levels to protect the rights and address the needs of older persons, implement the Madrid International Plan of Action on Ageing (MIPAA) and to support the “Decade of Healthy Ageing,” a broader inter-agency initiative led by WHO.

Drawing on the different partners’ expertise, the joint programme will provide tailored policy advice and guidance on ageing, technical support in the design and implementation of ageing-related activities, information sharing and support with advocacy, support in fundraising and dialogue and information exchange at regional level. This will be achieved by leveraging and strengthening synergies among each partner’s existing work plans and activities on ageing at both country and regional levels. The programme will encourage a societal participatory review and appraisal of the situation of older persons, gender and intergenerational relations and to identify policy priorities.

Several ongoing international processes can also be leveraged in support of programme implementation, including: the 2030 Agenda for Sustainable Development; the Decade of Healthy Ageing (2020-2030), the UN General Assembly’s Open-ended Working Group for the purpose of strengthening the protection of the human rights of older persons; the UN Human Rights Mechanisms including the Human Rights Council and its Universal Periodic Review and the Special Procedures such as the mandate of the Independent Expert on the full enjoyment of all human rights by older persons, as well as Treaty Bodies; commitments to minimum social protection floors; the strive towards universal health and pension coverage, the WHO Global Campaign on Combating Ageism, the
Global Action Plan for healthy lives and well-being for all, the regional review and appraisal of the implementation of the Madrid International Plan of Action on Ageing (MIPAA) and its Regional Implementation Strategy in 2020-2022 as well as the preparations for the 5th UNECE Conference on Ageing that will take place in 2022.

Where will the programme be implemented?

The joint programme will focus efforts to support Resident Coordinators and UN Country Teams in programme countries in the European and Central Asia region: Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Georgia, Kazakhstan, Kosovo\(^2\), Kyrgyzstan, Montenegro, Republic of Moldova, North Macedonia, Serbia, Tajikistan, Turkey, Turkmenistan, Ukraine, and Uzbekistan. The programme will benefit from the work of the regional UN System Issue Based Coalitions (IBCs) and engage them accordingly throughout the implementation. Special support will be provided by IBC on Health and Wellbeing.

How will activities be funded?

Funding for activities that are part of existing organisational work plans has been secured and new funding for joint activities will have to be sought through multiple sources. Programme partners will work with regional agencies and country offices to mobilize resources.

\(^2\) References to Kosovo shall be understood to be in the context of Security Council resolution 1244 (1999)
Joint Programme on Ageing – A Roadmap

Programme Area A:

Enhancing preparedness and emergency response to mitigate the risks for older persons during the ongoing COVID-19 pandemic

The UN Secretary General has raised the alarm on the astonishing share of COVID-19-related deaths in care home. According to the International Long-Term Care Policy Network the share of care home residents among all COVID-related deaths in 26 countries was on average 47 per cent. Recent reports from the Western Balkans and the Russian Federation point to similar challenges. In some countries, insufficient health and social system capacity forced healthcare providers to make difficult decisions about who gets access to life-saving care, how to manage scarce supplies and resources, with older persons at risk of being considered less of a priority than younger patients, resulting in de facto age discrimination. Lock-down measures are increasing the risk of social isolation, violence, abuse and neglect for older persons.

There is an urgent need to more effectively link public health interventions and primary health care with long-term care and social support services both in institutions and in the community, to ensure continuity of essential care and support services (including non-COVID-19 related health services) with appropriate health security protecting older persons, their caregivers and families from COVID-19.

In the response to the COVID-19 pandemic and its impact on older persons, support to Member States will be provided through the development of coordination mechanisms, the creation of national task forces and action plans and the dissemination of available guidance and good practices. Advocacy will be carried out and information will be shared and widely disseminated to relevant stakeholders through UN Country Teams.

The programme aims to take stock of the challenges, shortcomings and success stories that the COVID-19 crisis has brought to light through rapid assessments of the impact of the COVID-19 pandemic on older persons at country level to support national governments to develop policies, strategies, legislation and action, ensuring that older persons are fully integrated in national response plans and future emergency preparedness plans to better protect and safeguard their rights, their health and their dignity.

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The pandemic has also revealed important gaps in the availability of age-specific data, which hinders the assessment of full impact of the pandemic on older persons and the development of targeted responses. Through technical advice and guidance, the programme will support the collection and analysis of data on older persons disaggregated by age groups and covering all living arrangements such as older persons in residential care facilities.

Addressing the health, social and economic rights and needs of older persons lacking protection and access to health and social services is essential. This initiative will help to fully integrate a focus on older persons into the socio-economic and humanitarian response to COVID-19 and help promote a sense of urgency for swift, rights-based and concrete responses to the challenges identified.

**This programme element includes the following intervention areas:**

1. Ensure the protection of older persons from the risk of developing COVID-19 and mitigate the negative impact of the pandemic on older persons’ rights, well-being and livelihoods.
2. Ensure that older people have access to preventive and curative quality care regardless of the setting where they are living
3. Strengthen the interface between health systems and social services for protecting and better caring for older persons
4. Support age-specific data collection and evidence-based knowledge management practices
5. Strengthen UN system capacity to address impact of COVID-19 on older persons
6. Scale up support for community services and civil society engagement

**Proposed areas for collaboration and activities that can be further explored with Resident coordinators and UN country teams:**

**Tailored policy advice and guidance**

- Support the integration of the rights of older persons in UN SEIA and SERPS and provide technical support on ageing in the related implementation activities
- Compilation and provision of guidance and good practices of COVID-19 response for older persons to UNCT for dissemination to national stakeholders.
Technical support

- Development of a methodology for rapid assessments of the impact of COVID-19 on the long-term health and social care services and support for older persons that can inform UNCT and national SERPs
- Support UNCTs in advocacy and follow-up with national and subnational public authorities and civil society organizations to implement the necessary measures for protecting the rights of older persons and responding to their needs

Engagement and involvement of older persons and civil society organisations

- Guidance on the consultation and involvement of older persons and older persons organisations in the development and implementation of activities

Programme Area B:

Supporting the delivery of person-centred integrated health and social care for older people in the context of demographic and epidemiologic change in Europe and Central Asia

Older men and women continue to have a right to health, participation and to be treated with respect and dignity regardless of possible declines in physical and mental capacity. In the regional context of population ageing and changing family and living structures, and the challenging context and longer-term socio-economic implications of the COVID-19 pandemic, it is important to develop and strengthen person-centred integrated care systems that enable older people, who experience significant declines in capacity, to receive the care and support they need. This includes long-term care and supportive social services, consistent with their life aspirations, human rights, fundamental freedoms and human dignity that are gender-responsive and delivered without discrimination of any kind.

The health and social care needs of older men and older women and how these arise, evolve, are experienced and addressed are influenced by gender norms, roles, relations and inequalities as well as biological differences. Women predominate both among professional and informal care providers and form the majority of long-term care recipients. A gender approach will be integrated across all programme components.
Programme activities under this component will help build national capacities, improve integrated intersectoral coordination mechanisms, scale up acute comprehensive responses, strengthen preparedness and promote and support sustainable recovery, medium- and long-term measures. It will also constitute a catalytic force for promoting the design, formulation and implementation of policies, strategies and programmes for attaining greater inclusion, visibility and respect for older persons, and for developing the gradual steps to strengthening national health and social care systems to ensure access to goods and services for older persons in need of acute and long-term care and support, including during and after emergency situations. The initiative will consider and learn from the current risks associated with the COVID-19 pandemic.

This component of the programme includes the following intervention areas:

1. Raise awareness of changing demographic and epidemiologic profiles and the societal need to adapt to population ageing.
2. Carry out country assessments of care systems to gauge the present policy framework and structure of health and social care provision for older persons in different settings and the extent to which they are prepared for increasing demand as a result of demographic and epidemiologic change. These will include the perspective of older people, both recipients and providers of care, across the spectrum of care settings.
3. Provide advisory services on long-term care and support systems to support governments in developing action plans to develop and strengthen sustainable long-term care and support systems, including investments in the care workforce through improved forecasting and planning that is aligned with services needs, as well as country-tailored recommendations aligned with the relevant international policy frameworks and drawing from international good practices.
4. Promote intersectoral and sectoral advocacy, policy developments and legislation to improve health and social care provision to older persons, and promote that appropriate social protection measures ensure minimum living conditions.
5. Raise the capacity and identify approaches for more meaningful engagement communities and older people to steer the planning, management and support for services.
6. Promote research and capacity-building initiatives.

Programme activities under this component also aim to support national governments in implementing the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy and subsequent GA resolutions, the 2017 UNECE Lisbon Ministerial Declaration, the WHO Decade of Healthy Ageing, policy guidance on
integrated long-term care for older persons, the regional ICPD@20 and ICPD@25 review outcomes and the Agenda 2030 with the commitment of leaving no one behind and in particular SDGs 1, 2, 3, 5, 10, 11 and 17.

In addition, the following outlines proposed areas for collaboration and activities that can be further explored with resident coordinators and UN country teams:

**Awareness raising and advocacy**
- Raise awareness of changing demographic and epidemiologic profiles and the societal need to adapt to population ageing through *country-specific issue briefs*.

**Technical support**
- Support the preparation of *country assessments of care and support systems for older persons* to gauge the present policy framework and structure of health and social care provision for older persons and the extent to which they are prepared for increasing demand as a result of demographic and epidemiologic change. These will include the perspective of older people, both recipients and providers of care, across the spectrum of care settings.
- Provide technical support for guidance to national governments in reforming their care and support systems.
- Provide technical guidance on supporting governments in mainstreaming ageing across policy fields

**Programme Area C:**

**Changing the narrative, promoting the human rights of older persons and creating participatory and enabling environments**

The COVID-19 pandemic has exposed and exacerbated existing ageism and age-based discrimination throughout society. We have seen a surge in negative stereotyping, prejudice and behaviour towards older people. Framing COVID-19 as an ‘older person’s disease’ and singling out older people as only vulnerable and weak, is stigmatizing.

We have also seen examples of disregard for the lives of older adults living in care homes and the failure to protect older people’s rights, especially those socially isolated, with no
family, or that the society may perceive as non-productive, including the right to life and right to health. Older persons have been hit particularly hard by the virus itself but the failure to protect their rights in the response has led to unnecessary deaths, deterioration of cognitive, mental and physical health, unmet health and other support needs, increased poverty, discrimination, abuse, vilification and stigmatisation.\textsuperscript{5} There is a need to better understand the experiences of isolated older people in care settings and living in their homes during the current pandemic, and reflect their voices in the response and recovery efforts.

The risks older persons are facing in the pandemic have highlighted the extent of institutional ageism and chronic lack of adequate attention paid to the human rights of older persons in laws, policies and practices as well as in media. In order to build forward better we must change the way older people are perceived and treated, from passive recipients of care and social welfare to full, equal rights holders. We must listen to older people and work with them to create enabling environments and a society for all ages where everyone can age with dignity, independently of their socioeconomic status or their productivity and enjoy the full extent of their rights. Now more than ever we need to change the narrative about ageing and older people and challenge ageism at all levels.

This component of the programme will therefore include the following objectives/activities:

1. Raise awareness and promote a societal dialogue on ageing, older persons’ rights and ageism;
2. Improve the knowledge base on ageing and the rights of older people, and strengthen CSO engagement;
3. Create enabling environments, promote intergenerational solidarity and increase participation of older persons;
4. Promote a wider understanding of the cultural, social and economic role and continuing participation of older persons in society, including that of unpaid work.

Older persons constitute an incredibly diverse group. Many older persons, particularly older women, are playing multiple roles in the pandemic response, including as caregivers, volunteers and community leaders. It is important to raise awareness about the opportunities of individual and population ageing, to recognize the important contributions that older persons have made and may still make to society, their families and communities. Older persons, like everybody else, have the right to autonomy and independence and to participate in all stages of policy development across all sectors.

\textsuperscript{5} https://www.age-platform.eu/publications/time-un-convention-rights-older-persons-discussion-paper
The following outlines proposed **areas for collaboration and activities that can be further explored with resident coordinators and UN country team:**

**Awareness raising and advocacy**

- Advice on how to leverage international and regional processes on ageing for **awareness raising and engagement of national stakeholders**, in particular the UN Decade of Healthy Ageing, the periodic review of the Madrid International Plan of Action on Ageing (MIPAA) and national reporting on UN Human Rights Mechanisms and the 2030 Agenda for Sustainable Development
- Support UN Country Teams in raising awareness on the need to **combat ageism and promote intergenerational solidarity** through communication campaigns and events

**Technical support**

- **Guidance on how to support governments in analyzing existing national plans of actions and road maps with an ageing, gender and human rights lens and with the participation of older persons**, with a view to aligning them with international standards and to closing the protection gaps of older persons.
- **Provide support in improving data collection and analysis of the situation of older women and men**
Programme Partners

The following programme partners have joined forces to coordinate activities and draw on their complementary mandates and expertise on ageing:

UNFPA’s Regional Office for Eastern Europe and Central Asia (UNFPA EECARO)

UNFPA EECARO has been working to promote the rights, protection and health of older persons for decades. UNFPA supports governments in the implementation and monitoring of MIPAA. In addition, during the COVID-19 pandemic, UNFPA has played a leading role in advocating for the rights and health of older persons within the UN COVID-19 Response and facilitating coordination of UN system action for older persons at country level. Together with governments and civil society, as part of its COVID-19 response UNFPA has undertaken the following:

- Provide demographic data for preparedness. UNFPA supports governments to rapidly generate population data that illustrates demographic risks, including the relative and absolute numbers of older persons in different localities, and their living conditions.
- Develop COVID-19 response and recovery strategies that focus on the protection of older persons, and support the continuity of essential services.
- Support national-level coordination between Ministries of Health and Social Protection, WHO, UNFPA, and other UN/non-UN partners to ensure that the care and support for older persons and their caregivers is prioritized.
- Bring a gender perspective to the analysis of challenges faced by older persons in the context of COVID-19. UNFPA provides a gender lens to identify particular vulnerabilities faced by older women, such as gender-based violence, in a context in which intersecting discrimination on the basis of gender, disability and socioeconomic status is compounded by ageism.
- Support older people to remain autonomous and important pillars of their communities. UNFPA is supporting this effort through the development of public health messaging specifically tailored to older individuals with information on how they can protect themselves while continuing important care functions (such as taking care of grandchildren).
- Harness Inter-generational Solidarity and address age based discrimination. Cultivate compassion, raise awareness of and protection from the virus, promote healthy behaviour and social norm change, eliminate stigma and discrimination of older persons, health workers, and caregivers through established UNFPA community networks including youth and women’s organizations and religious and traditional leaders.
World Health Organization Regional Office for Europe (WHO/Europe)

WHO/Europe works with Member States and partners to promote good health throughout the life-course. This includes counteracting growing inequalities in old age, strengthening rights-based and gender-responsive health and long-term care systems to meet the changing needs of an ageing population and expanding the evidence base for health and social care policies for older people. During the COVID 19 pandemic, WHO has issued a number of guidelines and statements to bring the needs of older people, and of staff and family members supporting them in different care settings, into the focus of attention in order to make the investment case to build sustainable people-centred long-term care in the wake of COVID-19. WHO has also issued several guidelines on how to address the impact of the COVID response on gender inequalities and an initiative on redressing gender unbalance in long term care initiatives is underway.

WHO publishes regular situation reports and epidemiological updates for individual countries and sub-regions of Europe; it coordinates national response operations, provides training, as well as other support, including medical goods. Country support is provided through “virtual” missions or missions on the ground. WHO also cooperates with its networks of Healthy Cities and the Global Network of Age-friendly Cities and Communities to support local governments mitigating the effects of Covid-19 for older people.

The United Nations Economic Commission for Europe (UNECE)

The Population Unit of the United Nations Economic Commission for Europe (UNECE) works to promote policy dialogue on various facets of demographic change across the UNECE region, with a particular focus on ageing. Through the inter-governmental Standing Working Group on Ageing (SWGA), UNECE supports its 56 member States in the implementation and monitoring of the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy for the UNECE region (MIPAA/RIS). Ageing-related policy priorities include a better recognition of the potential of older persons, enabling longer working lives and ensuring ageing with dignity. Combating ageism, promoting mainstreaming ageing across all policy fields, as well as older persons in emergency situations are among the current focus areas of UNECE work in 2019-2020.

UNECE regularly publishes policy briefs on ageing, organises policy seminars, and is currently developing guidelines for national policy makers on the forthcoming MIPAA/RIS review and on mainstreaming ageing. This years’ policy brief and policy seminar will focus on older persons in emergency situations and the lessons learnt from the COVID-19 pandemic.
Office of the High Commissioner for Human Rights (OHCHR)

The Office of the High Commissioner for Human Rights (OHCHR) strives to ensure that neglected population groups, including older persons, are given space and weight in the human rights agenda, and that governments take all measures required to protect and promote their human rights. The role of the OHCHR is to ensure a voice for all, especially for those whose voices are seldom heard. Together with the UN Department of Economic and Social Affairs (DESA), OHCHR serves as the joint Secretariat of the Open-ended working group on Ageing for the purpose of strengthening the human rights of older persons. OHCHR implements activities in compliance with Human Rights Council mandates related to promoting and protecting the full enjoyment of all human rights of older persons, including providing secretariat and substantive support to the mandate of the Independent Expert on the full enjoyment of all human rights by older persons.

Since the outbreak of the COVID-19 pandemic, OHCHR has been actively monitoring its impact on at-risk populations. OHCHR Regional Offices and many of the field presences in the European and Central Asian region are paying particular attention to the situation of older persons in care facilities (e.g. Moldova, Serbia and Ukraine), and are actively contributing to the development of UN socio-economic assessments and responses to the pandemic.

HelpAge International

HelpAge’s global network of members and partners spans all regions. The network includes over 150 members in more than 80 countries. The majority of our network members work at national and local levels. They have established relationships with communities and are known to older people and the organizations they engage with.

Through the network, HelpAge provides an opportunity to meaningfully engage older people in the design, delivery and monitoring of services, in campaigning and in advocacy at all levels from local to global.

Our relationships mean we are able to support a bottom-up approach that ensures older people’s voices are heard in discussions and processes they might otherwise be excluded from. HelpAge has regional offices in Asia, Africa and Eurasia Middle East (EME). Within the Europe and Central Asia region, HelpAge runs country programmes in Ukraine, Moldova and Kyrgyzstan, and network member and partner-led programmes in countries such as Armenia, Albania, Serbia, Bosnia Herzegovina, Kazakhstan, Tajikistan and Azerbaijan. This platform of country and community level work offers a significant opportunity to engage with the Voice and Participation components of this initiative.
This regional programme forms part of a global collaboration between UNFPA and HelpAge, now being finalized in a global Memorandum of Understanding (MOU), which includes an Implementation Partnership Agreement with HelpAge to conduct a global research project over August-December 2020 to investigate the impact of COVID-19 on older women, older men, and older people with disabilities. This is intended to contribute to our shared knowledge base on the direct and indirect impacts of COVID-19 and inform our own and other policy makers’ efforts to ensure responses are inclusive of older people. Under this project, HelpAge will be collecting country-specific evidence in its Eurasia and Middle East (EME) region, including country case studies in Moldova and Ukraine. The results of this will be used to inform and shape further collaboration activities under the MOU with UNFPA by informing programmatic responses, policy advice and joint advocacy.

The UN Regional System Issue Based Coalition on Health and Wellbeing

Under the UN Regional System for Europe and Central Asia the Issue-based Coalition (IBC) on Health and Well-being, supports countries in the achievement of SDG 3 – to ensure healthy lives and promote well-being for all at all ages – and the health-related targets present in other SDGs. Focus joint activities include the development of guidance notes, policy advice, advocacy material, and technical assistance to support countries in specific areas, like Universal Health Coverage, migration, communicable and non-communicable diseases. In March 2020, the WHO-UN-Red Cross COVID-19 Platform was embedded into the IBC-Health, to facilitate coordination at the regional level to enhance multi-stakeholder engagement at the country level, ensuring a multi-sectoral response to COVID-19.

Due to the strong interconnections between health and sustainable development, coordination and partnerships across sectors are crucial to ensure harmonized and effective efforts. The IBC is led by WHO/Europe and brings together twelve UN agencies as well as cooperates with ongoing partnership initiatives, such as those on migration and health, environment and health, UHC2030, and the global action plan for health and well-being (GAP). Wider cooperation with all the IBCs is envisaged, as all, including gender, social protection, environment and climate change, and youth can contribute to strengthen the rights and dignity of older persons.