



Impact Report 2019-2020



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We are Age International

We are dedicated to responding to the needs, and promoting the rights, of older people in low and middle-income countries across the world.

We support older people in the poorest countries to improve their income, escape poverty, receive the right kind of healthcare, survive emergencies, and have their contributions to families and communities recognised and valued.

Our vision is a world in which women and men everywhere can lead dignified, healthy and secure lives as they grow older.

We want older people to be able to say:

"I am given the help and information I want in emergencies"

> "I have the income I need, and enjoy the best possible health and care"

"My voice is heard by decision makers"

"I am safe and secure, free from all forms of discrimination, violence and abuse"

Age International is the international arm of Age UK, the UK member of the HelpAge global network and a member of the Disasters Emergency Committee (DEC).

Foreword

I am pleased to have the chance to introduce an overview of Age International's work in the period 2019/20.

You will see that there is a fundamental premise that runs through everything that Age International does: a deeply-held belief that, wherever they are, people should enjoy the same rights at every stage of life, and a deeply-held concern that, too often, older people do not enjoy the same rights as others simply because of their age. All of our work flows from this belief, this concern, and from our desire to do something about it.

We have called this an Impact Report, because we want to demonstrate how our beliefs about the rights and needs of older people are translated into action and efforts that make a demonstrable, positive, widespread difference to how some of the world's poorest people experience later life.

So you will read about some of what we have helped older people to achieve in times of humanitarian crisis; their ability to access the right kind of healthcare, and their ability to secure a decent income. You will also read about how we have drawn on our experience, of supporting programmes of work across the world, to build the evidence we need to support our policy and advocacy work – enabling our partners to better influence their own governments, and advocating for more focus on the specific needs and rights of older people in the UK Government's approach to international aid and development. You will see how we seek to achieve real impact in this work by working closely with partners to increase the reach of our work, including other UK aid organisations and networks across the world.

As we entered 2020, the COVID-19 global pandemic has brought new and urgent attention to just how important it is to properly include older people in humanitarian and development efforts – older people have been among the most vulnerable to both the primary and secondary effects of the virus. We have redoubled our efforts to respond where we can, and we find we have a renewed determination to support and strengthen older people in some of the world's poorest places.

Chris Roles Managing Director, Age International



Our key achievements: improving the lives of older people

We aim to create long-lasting change for older people and their communities, improving the lives of the most vulnerable and excluded by providing emotional, social and medical support.

Cyclone Idai: rebuilding lives and regaining hope

Ilda is 75 years old and was attending the funeral of her niece in Beira, Mozambique when Cyclone Idai hit. Already coping with this devasting loss, she watched as the roof of the chapel was torn off above her by the cyclone.

Ilda received the materials and tools needed to rebuild her house including plastic covers for a roof, iron wires, nails, hammers, and a saw as part of the 'shelter kit', and plates, dishes, spoons, pots, a mosquito net, and clothes among other things as part of the 'family kit'.

"We didn't know if it was going to pass or not, so we just stayed each one in their place hugging each other. The tools that I received were very helpful because I didn't have any materials to rebuild my house, but when these came I was very happy because I could start rebuilding my house again." explains Ilda.



Ilda received a shelter and essential items kit to help rebuild her home, Beira, Mozambique

Facing COVID-19 after fleeing war

Abu Saeed is 67 and comes from Palmyra. He has been displaced for the fourth time due to the Syrian conflict, and currently resides in the city of Al-Bab, Aleppo.

"Other relief organisations have abandoned us and so have the authorities, my wife and I do not have children, so we don't have the right to get any assistance. Who does have the right then? I am elderly, I previously had open-heart surgery, and I am now suffering from diabetes and high blood pressure."

Healthy ageing: the right to lead the healthiest life

We aim to maintain people's ability to be and do what they most value. This includes older people having access to health services, care and support.

Dr Gopal said: "Being able to come to where people live instead of them coming to the hospital, means that I can offer continued care and can monitor their health every week and give free medicines which many people cannot afford." Abu Saeed talks about the danger of COVID-19, Aleppo, Syria

Mobile health clinic in South India, providing regular blood pressure and diabetes checks

Where we work

Over the year, we worked in more than 25 countries.

We have been supporting older people in these countries to improve their quality of life in a range of ways that are important to them. Our work is far-reaching, ranging from emergency humanitarian aid and long-term emergencies, to income security, healthcare, advocacy and policy influencing. This map shows some of the places and ways our work has supported older people across the world this year.





Lebanon Over 7,500 older people at isk of developina diabetes eceived screening with more han 2,000 being referred for rther treat





Europe

Moldova Ukraine

Middle East

Jordan Lebanon

South America



Mozambique

Africa

Ethiopia Kenya Malawi Mozambique South Sudan Tanzania Uganda Zimbabwe

Asia Cambodia

India Indonesia Kyrgyzstan Myanmar Pakistan Philippines Sri Lanka Thailand Vietnam

Kyrgyzstan

India



Colombia

Kyrgyzstan

ned 60 nurses and 200



Myanmar

ned more than 1,500 tial earl





Our impact in 2019-20

We are proud to be the UK member of HelpAge International, working together to deliver our programmes and influencing work. With our support, the lives of millions of older people have been improved.

"I have the income I need"

- **1.28 million older people** in six countries received a social pension for the first time.
- 38,000 older people (63% women) across nine countries had their financial and food security protected and supported through our humanitarian and disaster risk reduction programmes.
- £4.88 billion+ was paid to older people in the 18 countries where HelpAge has actively worked on social pensions over the past five years, representing a year-on-year increase of £202 million.

"I enjoy the best health care and quality of life"

- 225,784 older people in 17 countries received better health and care services or support as a result of our work with our partners – the majority of whom were older women (62%).
- 3.1 million older people benefitted from new or revised government health and care policies.
- 51,500 older people (63% women) in 11 countries had their health, care and nutrition requirements provided for and protected during humanitarian crises, through emergency responses and disaster risk reduction.

"I am safe and secure, free from all forms of discrimination, violence and abuse"

- 183,000 older people (60% women) received humanitarian aid in 30 countries.
- 45,404 people across nine countries took part in disaster preparedness work or training.
- Five national policies were introduced in Kenya, Kyrgyzstan and Tanzania to protect older people from violence and abuse.
- **156 partners in 15 countries** enabled almost 431,500 older people to access information about laws and support services relating to violence and abuse.

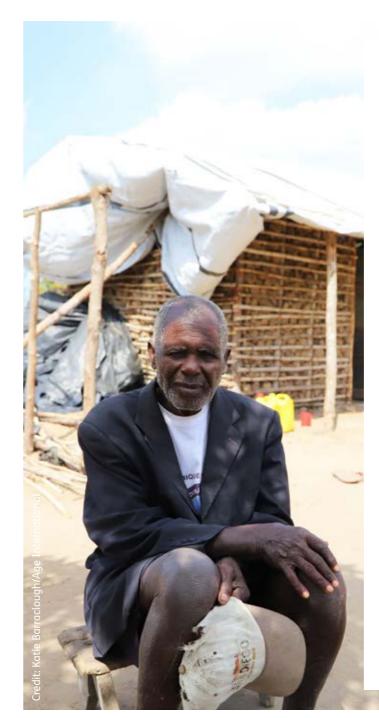
"My voice is heard"

- 254,000 people were mobilised to campaign for better policies and practice for older people in 30 countries.
- 2,817 Older People's Associations in 16 countries monitored the delivery of social pensions, health services and other entitlements.
- **1.5 million older people** in five countries adopted age friendly policies and programmes in response to the Sustainable Development Goals and international humanitarian law.

Our emergency response

When disaster strikes older people are often overlooked and left behind. We respond to crises with emergency aid specifically designed to meet the needs of older people.

In 2019 to early 2020, Age International responded with HelpAge network members and local partners to emergencies ranging from Cyclone Idai in Mozambique, Malawi and Zimbabwe to the Taal volcano eruption in the Philippines. We also continued to work on the long-term recovery of older people affected by disasters such as the Indonesia Tsunami and lesser known emergencies like the Baluchistan floods in Pakistan.



Cyclone Idai, Mozambique

In March 2019, one of the worst tropical cyclones on record devastated parts of Malawi, Mozambique and Zimbabwe. Cyclone Idai swept through the region causing catastrophic damage.

We delivered clean water, food, clothes and hygiene kits to older people immediately. Mobile medical teams provided vital health and care support deploying nurses, social workers and trained volunteers to meet the needs of older people affected by the disaster. With our partner HelpAge we set up water purification stations in nine health centres across Mozambique, each produced over 12 thousand litres of clean water per day for local people.

Over the last year, our support has transitioned from life-saving relief to rebuilding lives; delivering health support, care at home, and psychosocial support for traumatised older people. To provide hope for future financial security, we began seed distribution amongst communities in the affected regions, allowing older people to resume farming as a sustainable source of food and income.

Joao Jamal's home was destroyed in Cycione idai, we gave him aid and tools to rebuild.

Taal volcanic eruption, the Philippines

In January 2020, Taal Volcano, around 70km south of Manila in the Philippines, erupted, leaving 736,802 people affected. Many older people suffered greatly, losing livelihoods, homes and suffering from poor health.

A Rapid Needs Assessment showed gaps in government and humanitarian aid in terms of the needs of older people including medicine, appropriate food and incontinence products.

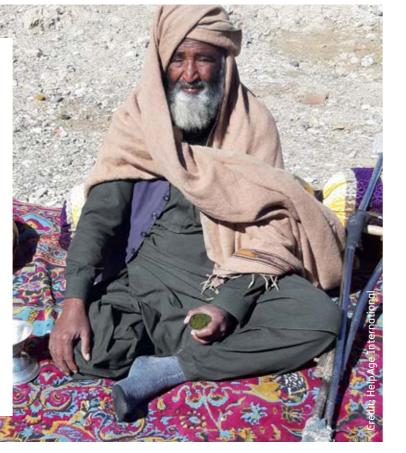
We identified the most affected older people in Laurel, Batangas, one of the badly affected areas, and provided funds for 125 vulnerable families to meet these immediate needs.



Balochistan floods, Pakistan

Snowfall and heavy rains damaged homes and swept away livestock across 10 districts in Balochistan in Pakistan, affecting more than 27,000 families.

We were awarded money from the Start Fund as part of a consortium to reach older people with immediate and appropriate support. In collaboration with HelpAge International, we set up medical camps ensuring those who were adversely affected received vital health care checks, medication and support.





Tsunami, Indonesia

In September 2018, a 7.4 magnitude earthquake hit Central Sulawesi, Indonesia. The earthquake and resulting tsunami, landslides and liquefaction led to 173,000 people being displaced, with 4,000 people dead and a further 4,400 seriously injured. We were able to respond during the emergency and aftermath in collaboration with the Yayasan Kristen Untuk Kesehatan Umum Emergency Unit (YEU) thanks to appeal donations and funds from the DEC's Indonesia Tsunami Appeal.

In the immediate aftermath, we worked with our partners to deliver healthcare, food and community support suited to older people. Within six months of the response, 1,599 older people benefited from exercise, nutrition, and health checks, 153 received vital home care from trained volunteers, and 366 received cash grants to run their own business and raise income.

Six Older People's Associations (OPAs) were established where members can exercise and socialise together and discuss their businesses, whilst also supporting the vulnerable or sick in the community. Some pooled resources to support others by donating rice. Training was delivered to staff, OPA members, volunteers and family caregivers, on healthcare to business.

After the tsunami, psychological, social, nutrition and hydration needs were found to be major problems for older people who were lonely or lived alone. Family members were not fully aware of these issues, which had a detrimental impact on their support.

We trained health and homecare volunteers, supporting them to be aware of and discuss these issues. As a result, families started taking better care of their older relatives. We supported volunteers and family members to have closer links with the community health centres, ensuring older people received medical referrals when necessary.

Coronavirus (COVID-19) pandemic

In March 2020, the world was hit with a new, threat: the coronavirus pandemic.

Whilst our sister charity Age UK worked tirelessly to help older people in the UK, we understood that globally there was a vital need to act in the most vulnerable communities where healthcare systems are already severely stretched, weak or even non-existent.

Older people, those already in poor health or with underlying health conditions are most at risk. We immediately supported efforts by our partner, HelpAge International, and our donors such as the UK Government and the EU, to respond to the challenge quickly to prevent the spread of the virus amongst older people and their communities.

Within days, existing projects were redesigned to prevent the spread of coronavirus and protect older people. Our policy and advocacy team focused on influencing governments, international actors and service providers to uphold their duty of treating older people equally in the fight against the virus.

Awareness raising Raising awareness and sharing information on handwashing and hygiene practices amongst older people and their communities was the first step in preventing the spread of the deadly virus. Mass communication campaigns were held across many countries. In Indonesia, we distributed guidance leaflets about COVID-19 in local languages, in areas of public gatherings and to Older Peoples Associations.

Soap, water and essentials

For many in the poorest parts of the world, unsanitary conditions and lack of access to basic hygiene items is a daily reality. In order to prevent the spread of the virus we incorporated hygiene kits and the installation of wash basins into existing emergency relief projects. In South Sudan, we ensured displaced older people received hygiene kits including soap and detergents, and installed accessible handwashing stations.

Protective equipment

In order to continue to protect older people we ensured our local healthcare teams working in medical camps, hospitals and clinics, had adequate protective clothing. From Syria and Indonesia to South Sudan, healthcare staff and colleagues received facemasks, gloves and suitable protective equipment ensuring theirs and their patients' safety.



Tackling coronavirus: Syria

In Syria, the ongoing war has resulted in hundreds of thousands of people in the north-west region being forced to leave their homes in this year alone.

Many people live in temporary shelters in inadequate conditions. Health services are fragile and disrupted, and they are inadequately prepared to detect or respond to any crisis. We are working with our partner, SEMA, to reduce the impact of COVID-19 on older people by ensuring health facilities are prepared.

According to the Idlib Health Directorate, the north-west region of Syria has a capacity of just 100 intensive care unit beds for a population of almost three million. Through SEMA, health facilities were sterilised, additional medically

'We supported outreach workers in key areas such as mosques, community centres and refugee camps to raise awareness of the virus and infection prevention.' equipped facilities were set up, and frontline healthcare staff were trained on early detection of COVID-19 and were provided with hygiene kits, gloves, masks and suits. Additionally, we ran an online awareness-raising campaign targeting health workers.

To help delay the peak of the infection in order to enable health systems to cope better when it came, we supported outreach workers in key areas such as mosques, community centres and refugee camps to raise awareness of the virus and infection prevention.

We have also supported effective coordination with health authorities and partners across the region to maximise our response efforts.

Protracted emergencies

In recent years, the world has seen a significant increase in long-term conflict and displacement.

Such protracted crises disrupt the lives of older people and those supporting them, including their economies and societies for longer periods of time. Age International is committed to supporting older people during the immediate aftermath of a crisis and throughout the long-term recovery.

Burundian refugee crisis

The Burundian refugee crisis began five years ago. There are now over 350,000 Burundian refugees in surrounding countries who fled the ongoing internal conflict in their home country, and have not been able to return home.

Age International and our partners have been working with Burundian refugees and asylum seekers in Tanzania since 2015, assisting older people, disabled people and those with chronic health conditions with their physical rehabilitation. Our focus is to supply vital mobile aids, such as walking sticks and wheelchairs, and provide psychosocial support. We work alongside organisations based in the camps to ensure older peoples' voices are heard and their needs met.

We have set up and facilitate Active Ageing Clubs for older people – fun and healthy places offering health care services, exercise and opportunities to come together and take part in traditional dancing and singing.

Ngurubzira, 72, is part of a group provided with materials and training to weave baskets. Her income goes towards buying additional food; allowing financial stability and dignity.





Humanitarian crisis, Ukraine

Since the start of the conflict in 2014, the situation in eastern Ukraine has remained extremely volatile with humanitarian needs continuing to rise.

Recognising the significant risk of isolation and lack of aid affecting older people disproportionately in the region, we provided community safe spaces in Donetsk and Luhansk for those with vulnerabilities and disabilities. These safe spaces mean older people's needs and rights can be heard and addressed.

Our homecare support service also meant volunteer carers were able to visit extremely vulnerable older people in their homes, helping them to move around, providing shopping assistance and social support.

Rohingya refugee crisis

We have continued our work in the Rohingya refugee camps by providing an 'age friendly space' where traumatised older people can find solace and support.

In just one day, as many as 200 visit the space, where they get medical attention and socialise with other older refugees.

There are four paramedics and counsellors to help with medical and psychological support and the space is designed to be as accessible as possible. edit: Fabeha Monir/Age Internat

Key programmes

Our key programmes aim to achieve long-term, high impact change for older people, and to build the evidence of the value of the approaches they take, for us to use in our advocacy work with opinion formers and policy makers.

These programmes have improved the lives of the most vulnerable older people across the world. We are so proud to have improved the lives of millions already. These programmes range from social protection and healthcare to supporting refugees. See the impact these programmes have made below.

Promoting wellbeing and resilience

Our Strengthening Ageing Networks programme focuses on improving the wellbeing of older people, their families and their communities through self-sustaining community led groups often referred to as Older People's Associations (OPAs) in Vietnam, Bangladesh, Indonesia, Cambodia, Bangladesh and the Philippines.

Psycho-social support

In Cambodia, the civil war ended less than 40 years ago and many of the current OPA members have been affected by violence or the trauma of conflict. Activities like singing and dancing are helping to facilitate the re-building of community ties that are still weak after the conflict, whilst providing a mechanism through which older people can remember and re-connect to happier times. According to the Cambodia staff, many older people are isolated and have forgotten what it felt like to dance or even have fun. The OPAs create a welcoming space in which older people can re-connect with their neighbours without fear.





Income generating activities

In Nglumut subvillage in Indonesia, OPAs have used a grant to establish a 'waste bank', a useful way of generating revenue for the OPA and its members, and the wider community members too. The annual income from the waste bank for each member is significant, and close to an average week's wages in the community. Following the success of the initiative, members are developing 'upcycling' activities: rather than just collecting and selling recyclable waste, they use the waste to make products for sale.

Better health for older people

Our Better Health for Older People programme is in its second year. Whilst life expectancy is increasing, the years spent in good health are not. This year, our work has included training over 700 members of older people associations in Mozambique and Kenya to ensure greater inclusion of older people and those with disabilities in the health system, whilst supporting individuals with disabilities and their families. We've also developed a home-based care package with a focus on older people with disabilities.

Improved health for diabetic patients

In Kyrgyzstan our innovative health programme is helping diagnose and treat diabetic foot to save lives. In a country where there were no specialist podiatrists, we focused on training podiatrists and stationing them in fully equipped 'podiatry rooms' (in the equivalent of GP surgeries) so patients receive check-ups and early treatment. More than 1,400 older diabetic patients received awareness sessions on the prevention and 810 patients were diagnosed with the disease and referred to endocrinologists for treatment.



Improving healthcare

Age International works in low and middle-income countries where healthcare is stretched and limited. We support older people get the specialist healthcare they need.



Battling chronic diseases, Myanmar

Each year more than 40 million people die from noncommunicable chronic diseases; also known as NCDs. The main types which occur in older people are heart attacks, stroke, cancers, chronic respiratory diseases and diabetes.

With funding from the EU we worked in Myanmar with the Ministry of Health and Sports to better prevent, identify and manage NCDs through its health systems. To improve older people's access to health facilities, we established health clinics every across town boroughs, specialising in identifying, monitoring and treating NCDs and offering free screening, medication, treatment and workshops on heathier lifestyles.

Often, many older people living in remote areas or those who struggle to walk, find it difficult to receive specialised healthcare. These new clinics, closer to people's homes, not only increase access for older people but also ensure the opportunity for early preventative treatment. Screenings ensure symptoms indicating the beginning of an NCD are treated, and in some cases such as diabetes and hypertension, reversed.

A large challenge in battling such chronic diseases amongst older people in Myanmar is the lack of trained health staff to help those affected. With the Ministry of Health and Sports, we developed a training manual for healthcare specialists to deliver high-level training for staff working in low resource settings. More than 1,500 basic health staff across 330 boroughs were trained on essential early treatments for chronic diseases. Both the clinics and the health staff training are transforming patient wellbeing and disease management in the local area.

Our programmes are significantly helping to reduce NCDs and their complications in older people.

"The funding supports training of colleagues and compliments the increased action by the Ministry of Health and Sports. We need to continue to action on NCDs, but we have come an extremely long way already in just a few years as a result of this project." Prof Ko Ko, Professor and Head of Department of Diabetes and Endocrinology, University of Medicine



Healthcare in focus: India

Our partners in India, HelpAge India and GRAVIS, bring their expertise and understanding of the greatly varying regions in which we support work and the needs of older people in their communities.

Older people in India do not have access to a pension or an income; poverty can be high particularly in more rural areas. Many families have left villages to seek work in neighbouring towns and cities and older people have been left alone or responsible for looking after the grandchildren.

Building business, fighting for rights and improving quality of life

In many states in India, we work with our partner HelpAge to support older people create small businesses via village self-help groups and Older People Associations. Older people decide which income-generating activities they want to run and the programme provides a small loan to get work started – a loan which is paid back, with modest interest. This business activity gives older people a real sense of worth and satisfaction contributing to their personal and community wellbeing.

Our programme also brings mobile health clinics to communities who would normally have to travel a great distance to visit a hospital. The clinic delivers high-quality, regular healthcare through a professional and qualified medical team consisting of a medical consultant, a pharmacist and a physiotherapist. The clinic carries out vital health checks; monitoring blood pressure and blood sugar levels. Patients have regular checkups and receive prescribed medications for the treatment of diabetes, high-blood pressure and many other conditions. These medications are provided for free in a community where some patients would not otherwise afford them.

Bringing water to villages and living a healthy life

We have been working with our partner GRAVIS in Rajasthan state, for a number of years reaching over 1.3 million people across a very large number of remote villages. A dry and arid region, rainfall is low and ground water is not suitable as drinking water and impacts on livelihoods. Much of the younger population have migrated away from rural areas or work, a move that has had a significant impact on older people, particularly older women.

Our work in this region is focused on clean water access, education, health, agriculture, research and advocacy. Each community has a village older people's association to help identity those most in need, prioritise activities, and lead activities and awareness.



With our partner, we are planning to enhance the voices of women and girls in drought mitigation work as part of the essential effort to adapt life in response to climate change in the region. Older People's Self Help Group Tamil Nadu, India

Policy, advocacy and influencing

Keeping older people on the international development and humanitarian agenda

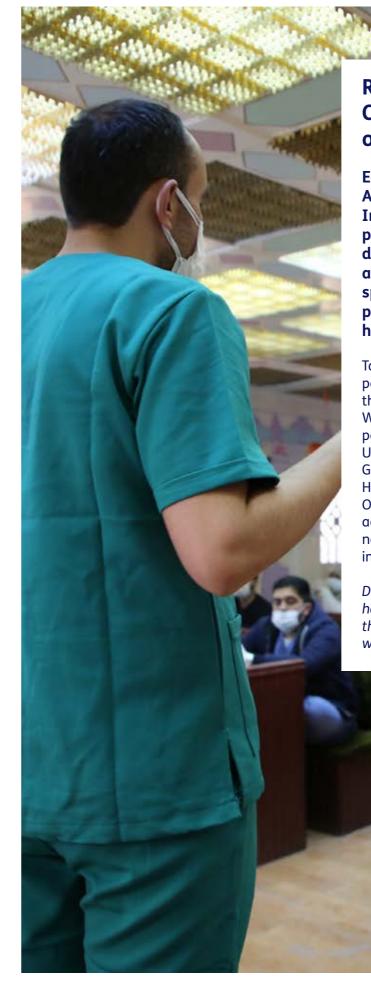
The financial year came to a close with two defining moments for older people's rights in the UK government's international agenda. COVID-19 struck older people with a force that no-one could anticipate, with responses to the virus uncovering disturbing levels of discrimination against older people globally.

At the same time, a Government reshuffle pushed ageing out of DFID's inclusive societies ministerial portfolio. This ministerial responsibility allowed older people to be visible in the Government's international development priorities alongside other groups at risk of being left behind.

Age International rallied the support of both MPs and Peers to question the Government's decision to drop ageing as a ministerial responsibility and were successful in getting it reinstated. This happened as the full impact of COVID-19 began to unfold and we made the Government aware of its responsibility to be explicit about the impact of the pandemic on older people in low and middle-income countries.

Installing a hand washing area in a village office, Indonesia





ΥFU

Raising awareness of COVID-19's impact on older people

Early in the coronavirus crisis Age International and HelpAge International produced a briefing paper targeting other international development and humanitarian actors to make them aware of the specific needs and rights of older people and what they can do to help.

Together we shifted the UK Government's position to be more explicit in recognising the risks older people were facing. Working alongside our international partners we took this message to the UN, which resulted in the UN Secretary-General, the UN High Commissioner for Human Rights, and the World Health Organisation's Director-General all acknowledging and responding to the need to take the rights of older people into account.

Dr Wasel educating health workers on how to best protect themselves and their patients from Covid-19 by properly washing hands



Strengthening older people's rights globally

Our support for the Global Alliance for the Rights of Older People (GAROP) helped the network to firmly establish its presence and amplify the voices of older people in the UN.

Not only was engagement with Member States and other stakeholders strengthened at the 10th Session of the Open-Ended Working Group on Ageing (OEWG), GAROP also organised two regional meetings for its members in Africa and Asia which greatly enhanced GAROP members' ability to influence their governments. GAROP members also organised the first official OEWG intersessional event in Africa, which was hosted by the Economic Community of West African States (ECOWAS) Parliament and opened by the President of the UN General Assembly.

In the UK, Age International and Age UK continued our engagement with other stakeholders and the Government demonstrated its support for the rights of older people globally at the UN in both New York and Geneva.

Ensure healthy lives and promote well-being for all

The language of Sustainable Development Goal 3 makes clear that the health and wellbeing of older people must be protected alongside other age groups.

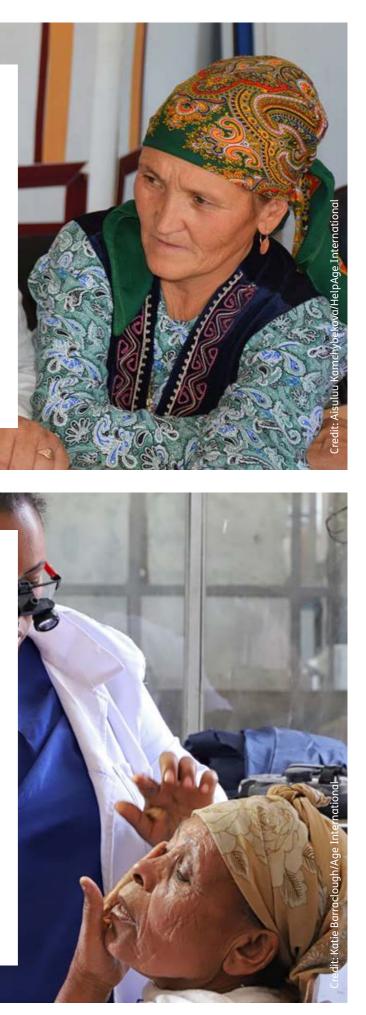
In preparation for a UN High-Level Panel on Universal Health Coverage, Age International organised a policy roundtable to ensure that older people's right to health was included. We also supported HelpAge in contributing to the development of the Decade of Healthy Ageing, which has been officially launched in 2020.



Focus on gender

To better understand how to address gender inequality in later life, Age International carried out research in Ethiopia and Malawi about what work means for older women and what support they need to make choices in their lives.

The research was completed just before COVID-19 struck and the report will be launched in early 2021. Throughout the year, we continued to take our message of older women's economic empowerment to various international policy discussions, including an Asia-Pacific regional forum to prepare for Beijing +25, the Organisation for Economic Co-operation and Development (OECD) Global Strategy Forum, and the Women Deliver conference in Canada.



Meet the team

Interview with Saara Rashid, Development and Funding Officer – Africa region, Age International

Saara has been working in humanitarian response and international development for over seven years. She has worked in a number of contexts particularly in Uganda and Pakistan. She heads up our programme development and funding across Africa.

What are you most proud of?

"It is sometimes hard to imagine the tangible benefits of the projects I help to develop and secure funding for. Based in London, it is often the case that I receive project update reports that contain vital information on the specific country context, details of the work that has been achieved and how many older people we have reached. While these facts and figures are hugely important and allow us to report to our donors, it is hard to put it in context without ever having visited that particular country and seeing the situation of older people in real life.

The first time I was able to visit a project I supported was incredibly humbling. It was in Mozambique, six months after Cyclone Idai devastated a large part of the country. Age International was able to respond and provide support to older people and people with disabilities in the wake of the cyclone. During my visit, I had the opportunity to visit one of the locations we worked in together with our partner."

Albano Matunaga, 68 received a tricycle to move about after Cyclone Idai.



What did you hear from older people?

"When I was in Mozambique, I had the opportunity to meet with older people in Beira who had received support from Age International and our partners. Our response in Mozambique, funded mostly through the Disasters Emergency Committee, focused on health, both physical and mental, food and non-food items support and water and sanitation. Outreach teams, who consisted of social workers, health workers and community volunteers were able to reach older people and people with disabilities.

What have you learned?

"Before joining Age International, I was working outside of the UK in the international development sector. In the time I spent working with NGOs, it was evident that the needs of older people and people with disabilities were rarely included in project design. This is of course at the core of the work Age International does. Not considering the needs of older people when designing projects means a large part of the population will find it difficult to access important life-saving services."



The team working on the humanitarian response left to right: Juelma Uaivo, community outreach team member, Frede Frederich, president of the Community Older People Association, Saara Rashid, Age International, Ináncia Varela, community outreach team member, Alvaro Zimba, former project manager, HelpAge.

Pessoa

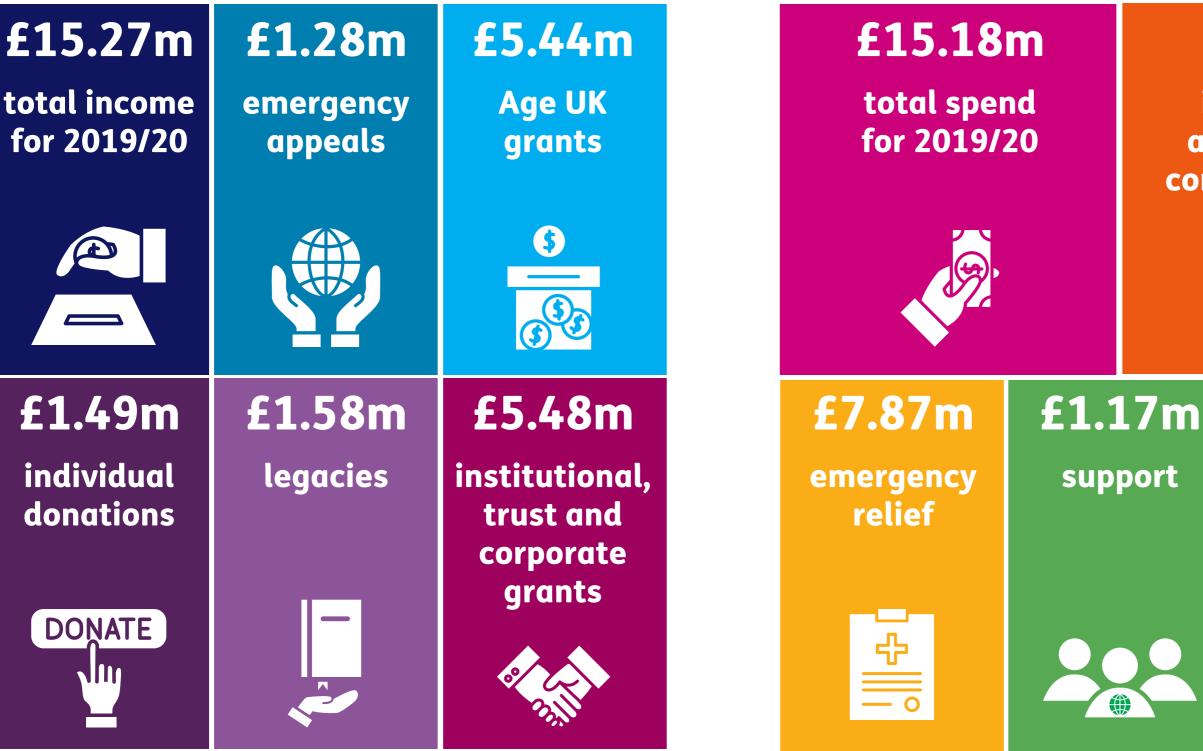


How we raise our money

We receive grants and donations from UK individuals, Age UK, institutional, trust and corporate donors. Please note: emergency appeals, individual donations and legacies are received via Age UK as a grant.

How we spend our money

Most of our income is spent on emergency relief and rehabilitation, development, advocacy and influencing.



£1.49m

individual

donations

DONATE



£0.45m

influencing, advocacy and communications



£5.68m

development programmes and support for HelpAge operations

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Looking ahead: plans for the year

We work to improve the lives of older people, raising funds for emergency response programmes to meet immediate needs, and implementing development programmes that create long-term change. In the coming year we will continue to champion the needs of older people across the world.

1. Humanitarian response

'I am given the help and information I want in emergencies'

We will continue to implement our new approach to humanitarian response, with a strong focus on rapid needs assessment in emergency situations, and prioritising the inclusion and protection of older people. A very prominent focus of our work in 2020/21 will be responding to the COVID-19 pandemic. We will continue to be an active member of the Disasters Emergency Committee.

2. Programme support and development

'I have the income I need, and enjoy the best possible health and care'

We will deepen the support we offer to our implementing partner HelpAge around the world as we work together to develop programmes and seek out funding opportunities. We will place special emphasis on programme design that is gender-sensitive and we will document the economic contribution of older women.

3. Rights

'My voice is heard by decision-makers'

We will advance the case and support for a UN Convention, working as an active part of the Global Alliance for the Rights of Older People, engaging the UK Government and civil society. We will place special emphasis on highlighting the needs and rights of older people in the case for Universal Health Coverage.

4. Accountability

'I am safe and secure, free from all forms of discrimination and abuse.'

We will implement a new safeguarding action plan annually and secure external verification of our Core Humanitarian Standards (CHS).

5. Communications

We will implement a revised positioning and tone of voice for Age International to strengthen the impact of our communication with key audiences in the UK, which range from individual supporters to the media and policy and decisionmakers.

6. Funding strategy and individual giving plan

With a new team within Age International, we will prioritise the development of our fundraising with individual supporters in the UK. We will work to ambitious targets for securing income for new programmes from institutional sources. These targets are backed up by a strong pipeline and secure contracts.

7. Organisational development

Our staff will each contribute to and benefit from a focus on learning and professional development, and we will support staff working groups focussed on gender and safeguarding.

Thank you

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- Swedish Postcode Lottery
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