



Ageing in ESCWA member States

Fourth review and appraisal of the Madrid International Plan of Action on Ageing

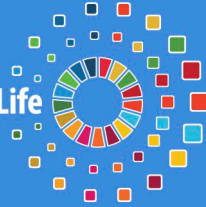


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Fourth review and appraisal of the Madrid International Plan of Action on Ageing



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Key messages

- *The Arab region is undergoing a very rapid ageing transition (i.e. the proportion of older persons in the population going from 7 to 14 per cent), and despite their different rates, most Arab countries are expected to have begun the ageing transition within the next 15 years.*

- *The relatively short transition (36 years) in the Arab region does not provide societies with sufficient time to adapt; countries in the region thus need to take swift policy action to improve the situation of older persons and ensure their health and social, economic and psychological well-being.*

- *The majority of countries have witnessed progress in the establishment of national bodies for older persons' issues, which play a key role in developing relevant national policies and strategies and coordinating among various actors, but most such committees do not have dedicated budgets, which limits their effectiveness and restricts their role to being advisory only.*

- *Although older persons have a distinct cultural and religious status in most Arab societies, few Arab countries have passed laws and policies on older persons. Most laws that cover older persons' issues do not directly target this group but address issues that impact their quality of life, such as violence, social protection and health.*

- *Several Arab countries have developed national strategies for older persons as part of their implementation of international conventions and the 2030 Agenda for Sustainable Development, mostly based on the United Nations Principles for Older Persons (1991) and the Madrid International Plan of Action on Ageing (2002).*

- *Research on older persons in the region lacks diversity and specialization, as well as the technical and personal expertise needed to provide adequate information about this age group. In many countries, surveys aimed exclusively at older persons are weak or completely non-existent.*

- *Countries in the region have pension systems, but they reinforce gaps between incomes in the public and private sectors and often include gender gaps and shortfalls in meeting the needs of older women. Innovative solutions are needed, particularly to cover the informal sector and ensure the sustainability of pension funds.*

- *Despite the development of literacy and education programmes for older persons, illiteracy rates remain high in Arab countries.*

- *Some countries have developed emergency response plans and some have taken into account the needs of older persons in emergencies, but most have no plans for dealing with crises. The COVID-19 pandemic has laid bare the fragility of many countries' risk management systems.*

- *Countries vary in terms of employment opportunities for older persons, but statistics are not available on the jobs held by older persons and why they continue to work.*

- *Most countries have made progress in health promotion activities and prevention policies, which is clearly demonstrated by support for primary health care centres and preventive medicine. However, they often lack medical professionals specialized in geriatrics.*

- *Most older persons in Arab countries live in their homes and only move to care homes in cases of severe disability. While the number of care homes in various Arab countries has increased, quality standards are generally missing, and even when present are not applied.*

- *Many Arab countries have begun to adopt measures to promote ageing in place by providing an enabling environment for older persons, but they vary greatly from one country to another.*

Contents

Key messages	iii
Introduction	1
Report methodology	3
1. Demographic transitions	5
2. Institutional structures for older persons	9
A. Institutional arrangements	9
B. National policies and strategies	12
C. Data, research and information	15
3. Older persons and development	19
A. Financial security	19
B. Literacy and continuous learning	29
C. Social inclusion and active ageing	31
D. Older persons in crisis situations	32
4. Health services and quality of life of older persons	37
A. Chronic diseases, mental health and older persons with disabilities	37
B. Health coverage	42
C. Primary health care and neighbourhood services	44
D. Training of health professionals	47
5. Ageing in place and the enabling environment	51
A. Living arrangements of older persons	51
B. The role of the media in improving the image of older persons in society	56
C. Older persons, abuse and discrimination	57
6. Policy recommendations to accelerate implementation of the Madrid International Plan of Action on Ageing	61
List of tables	
Table 1. Numbers and proportions of older persons in the countries participating in the report	6
Table 2. Government institutions responsible for older persons' issues	9
Table 3. National committees on older persons in participating countries	11
Table 4. Laws and strategies on older persons in Arab countries	13
Table 5. Entity responsible for statistics	16
Table 6. Retirement age in different sectors	20
Table 7. Percentages and numbers of pensioners and social coverage according to country reports	24
Table 8. Social assistance programmes and their providers	26
Table 9. Percentage of illiterate older persons in a number of participating countries	29
Table 10. Educational programmes in participating countries	29
Table 11. Voluntary activities for older persons and responsible authorities in participating countries	31
Table 12. General emergency and COVID-19-related plans and measures for older persons	33
Table 13. Chronic diseases among older persons in participating countries	37

Table 14.	Older persons with disabilities in some Arab countries	41
Table 15.	Health coverage and proportion of older beneficiaries	42
Table 16.	Primary health care and home care	44
Table 17.	Health professional training programmes	48
Table 18.	Marital status	52
Table 19.	Enabling environment	53
Table 20.	Anti-violence law in selected Arab countries	59

List of figures

Figure 1.	Ageing transitions in Arab countries	6
Figure 2.	Proportion of older persons in selected participating countries	7

List of boxes

Box 1.	“Takaful and Karama” programme – A pioneering experience in Egypt	27
Box 2.	National Platform for Volunteering – An innovative experience in Saudi Arabia	32
Box 3.	“Learn from My Experiences” programme – A pioneering experience in Iraq	32
Box 4.	National Registry of Older Persons’ and Retirees’ Skills 2003 – A pioneering experience in Tunisia	32
Box 5.	Saudi Alzheimer’s Disease Association – A pioneering experience in Saudi Arabia	46
Box 6.	Family integration and host families – A pioneering experience in Algeria	49
Box 7.	Construction of a treatment garden in a hospital – A pioneering experience in Algeria	55
Box 8.	Quality standards for older persons’ institutions – A pioneering experience in Lebanon	56

Introduction

The fourth periodic review of the Madrid International Plan of Action on Ageing (MIPAA) takes place 20 years after the adoption of the plan's decisions. However, this review is different from its predecessors and requires an approach that takes into account the disruptions caused by the COVID-19 pandemic at various levels around the world, particularly its profound health, social and economic impacts on older persons. The challenges of the pandemic are joined by growing numbers and proportions of older persons in the Arab region and the repercussions thereof, highlighting the importance of public policies and government programmes targeting older persons, ensuring high-quality social and health services, raising awareness of older persons' issues and the importance of their roles in society, and encouraging their integration in all areas and that their voices be heard, thereby helping protect them, safeguard their rights and provide them with a dignified and violence-free life.

Most Arab countries are expected to begin the ageing transition (i.e. the proportion of older persons in the population going from 7 to 14 per cent) within the next 15 years, but at different times and at varying rates. This pace is much faster than in regions where the transition has already occurred. The ageing transition in European countries, for example, took between 50 and 150 years, but the average ageing transition in the Arab region is expected to take just 36 years. This relatively short period does not provide governments and societies with

much opportunity to take action to adapt to the transition, nor to build the capacity to address the associated socioeconomic challenges. In light of this reality, States in the region must take policy action to improve the situation of older persons and ensure their social, economic, psychological and health well-being.

The Madrid Plan of Action, adopted at the Second World Assembly on Ageing in 2002, is a policymaking reference, proposing mechanisms and means for Governments, non-governmental organizations (NGOs) and entities active in older persons' issues to guide and improve services provided to this group of citizens. The Plan of Action marked a turning point towards frameworks and policies that establish "societies for all ages". Although not legally binding, the Plan of Action constitutes the most comprehensive and specialized international framework on older persons' issues and urges States to link ageing issues to other socio-developmental frameworks and human rights in line with and intersecting with the 2030 Agenda for Sustainable Development, which calls for a radical shift towards a world of justice and leaving no one behind.

The 2002 Global Assembly declared the need for a periodic and methodical system to assess the Madrid Plan of Action, track progress in its implementation and ensure the desired improvement in the lives of older persons. Resolution 8/2020 of the Economic and Social Council of June 2020 outlined the modalities to be followed in the fourth review and appraisal

of the Plan.¹ The resolution encourages Member States to establish a national coordination mechanism to facilitate the implementation of the Madrid Plan of Action, including its review and appraisal. It also urges Member States to use a participatory, bottom-up approach to appraisal, by inviting all stakeholders, including civil society, to participate in the review process.

The Economic and Social Commission for Western Asia (ESCWA) launched the fourth review of the Madrid Plan of Action in November 2020 at a capacity-building workshop that included the focal points for ageing in 14 member States, during which participants agreed on the methodology of the review for the Arab region. Based on the workshop, ESCWA developed a guiding template to assist member States in drafting national review reports. The template was presented and discussed at a regional capacity-building workshop on national reporting in April 2021. A second workshop was held in September 2021 to discuss progress and challenges and facilitate the exchange of best practices in the preparation of national review reports.

In keeping with the agreed timetable and in line with the recommended method of the Economic

and Social Council resolution to ensure the involvement of all stakeholders, ESCWA, in partnership with the United Nations Population Fund (UNFPA), organized two additional dialogues involving multiple actors, including civil society organizations, academics and representatives of Arab parliaments. The regional review process culminated in a regional conference that brought together all governmental and non-governmental stakeholders. The conference resulted in key messages that, along with messages from the two regional dialogues, were included in an outcome document to feed into the United Nations Secretary-General's report to the Commission for Social Development in February 2023.

The present report is the result of the regional review process and provides a summary of the most prominent findings from the national review reports submitted by Arab States. After a brief presentation of the demographic realities in the region, the report presents institutional arrangements for older persons, describes progress, achievements and challenges in economic support, social development and the health and well-being of older persons, and the promotion of a supporting environment for them within three key axes aligned with the MIPAA priority issues. The report also sets out recommendations to accelerate implementation in the region.

1. Resolution 8/2020, adopted by the Economic and Social Council on 18 June 2020, is the fourth review and appraisal of the 2002 Madrid International Plan of Action on Ageing.

Report methodology

The present report was prepared using a participatory approach in which ESCWA and UNFPA launched the fourth review of the Madrid International Plan of Action on Ageing through a number of activities as mentioned above, including an agreement with member States on the review methodology and development of a template with questions to support and guide States in drafting national reviews.²

The guiding template, which has been sent to Member States, contains a brief definition of “older persons” and questions about the institutional structures concerned in each State and the priority issues and objectives set out in the plan’s directions: older persons and development, health care and a supportive enabling environment. States were invited to include strategies and policies for older persons in national review reports.

Fourteen of the 20 member States of ESCWA (Algeria, Egypt, Jordan, Iraq, Kuwait, Lebanon,

Morocco, Oman, the State of Palestine, Saudi Arabia, the Sudan, the Syrian Arab Republic, Tunisia and Yemen) responded with their reviews. Report completion rates varied (measured as the proportion of topics/questions answered), but all rates exceeded 80 per cent, meaning that the reports were generally thorough and comprehensive.

Participating States were asked to provide detailed information on developments in older persons’ issues during the five years since the third review in order to make a comparative assessment, but while the reports listed achievements and described the reality of the situation in the participating States, it was difficult to see exactly what progress had been made over the past five years.

It should be noted that the present report presents information and statistics derived exclusively from national reports, and additional information may be available to other governmental or non-governmental agencies.

2. The guiding template is available at the following link: <https://www.unescwa.org/sites/default/files/event/materials/4th-mipaa-review-arab-guiding-template-en.pdf>.

1. Demographic transitions

This section addresses the reality of older persons in some Arab countries, as shown by statistics and information available from State reports, as well as United Nations statistics included in the ESCWA Population and Development Report Issue No. 9 (2022).

The definition of an older person varies from one Arab country to another but is most commonly defined as anyone over the retirement age. The majority of countries participating in the present report (Iraq, Jordan, Morocco, Oman, the State of Palestine, Saudi Arabia, the Sudan, the Syrian Arab Republic, Tunisia and Yemen) define older persons as those 60 or above, while Algeria, Kuwait and Lebanon use the age of 65. There is no doubt about the importance of chronological age for pension, social, health and care policies but the biological, mobility and cognitive changes that occur during ageing vary from person to person and therefore make older persons a diverse group with disparate needs. Chronological age is therefore not a sufficient criterion for use in policies to meet the needs of all older persons, which should instead be based on studies that classify this group into capacity-based categories.

The number of older persons in the Arab region has increased significantly over the last half century, from 4.5 million in 1970 to 20.8 million in 2020. Nevertheless, the Arab region is relatively young, with the number of persons

over 65 still very low compared to the number under 25. Yet the region will undergo a rapid ageing transition; while there were ten times more young people than older persons in Arab countries in 2020, by 2050 there will only be four times as many young people.

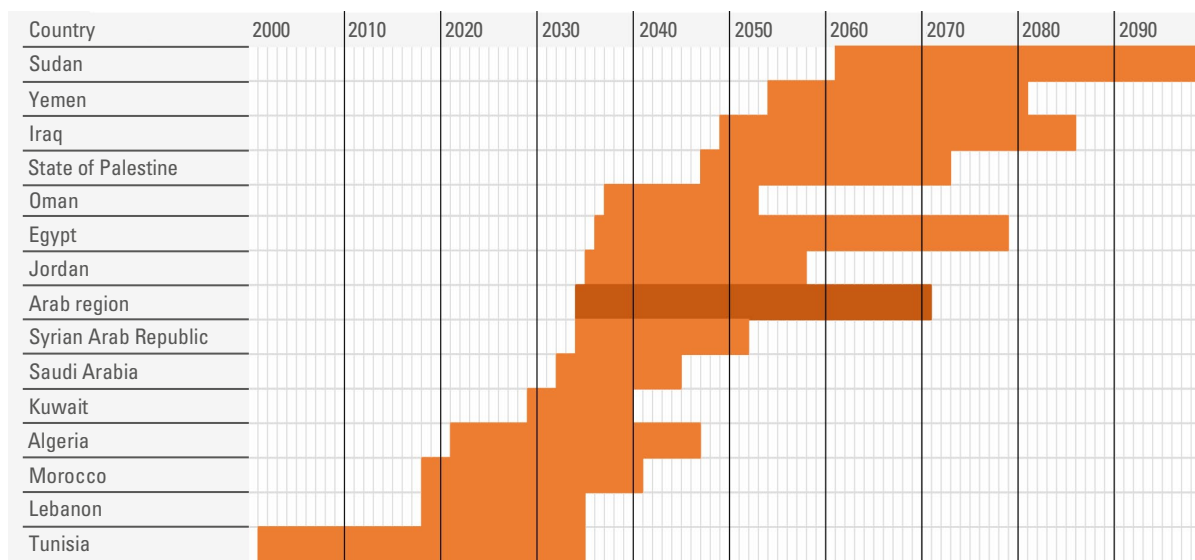
Put another way, in 1970 older persons accounted for less than 4 per cent of the total population of the Arab region and rose slightly to less than 5 per cent in 2020, but are expected to more than double to nearly 11 per cent by 2050.³

Arab countries differ in when the ageing transition will start and how long it will last, as shown in figure 1. Countries can be put into three categories according to the estimated or expected start date of the ageing transition: countries experiencing rapid, moderate and slow ageing. The countries experiencing rapid ageing (where more than 7 per cent of people are over 65) are: Tunisia (2001), Lebanon (2018), Morocco (2018) and Algeria (2021); the countries experiencing moderate ageing (where the ageing transition will begin before 2050) are: Kuwait (2029), Saudi Arabia (2032), the Syrian Arab Republic (2034), Jordan (2035), Egypt (2036), Oman (2038), the State of Palestine (2048) and Iraq (2049). The countries experiencing slow ageing (where the transition will begin after 2050) are: Yemen (2054) and the Sudan (2061).⁴

3. Population and Development Report, Issue No. 9, 2022.

4. Ibid.

Figure 1. Ageing transitions in Arab countries



Source: Population and Development Issue No. 09, 2022.

Note: The estimated length of the ageing transition is between parentheses.

Table 1. Numbers and proportions of older persons in the countries participating in the report

Country	Year	Number of older persons	Proportion of older persons (percentage)
Algeria (60 and above)	2021	4,519,000	10
Egypt (60 and above)	2020	7,000,000	7.1
Iraq (65 and above)		1,374,211	
Jordan (60 and above)	2020	588,100	5.5
Kuwait (65 and above)	2015	87,352	2.10
Lebanon (65 and above)	2012	--	11.9
Morocco (60 and above)	2021	4,300,000	11.7
Oman (60 and above)	2020	197,712	
State of Palestine (60 and above)	2021	282,679	5.4
Saudi Arabia (60 and above)	2017	854,281	4.19
Sudan (65 and above)	2022	1,322,592	
Syrian Arab Republic (60 and above)	2020	1,850,000	8.4
Tunisia (60 and above)	2018	1,493,617	13
Yemen (60 and above)	2020	1,396,000	4.50

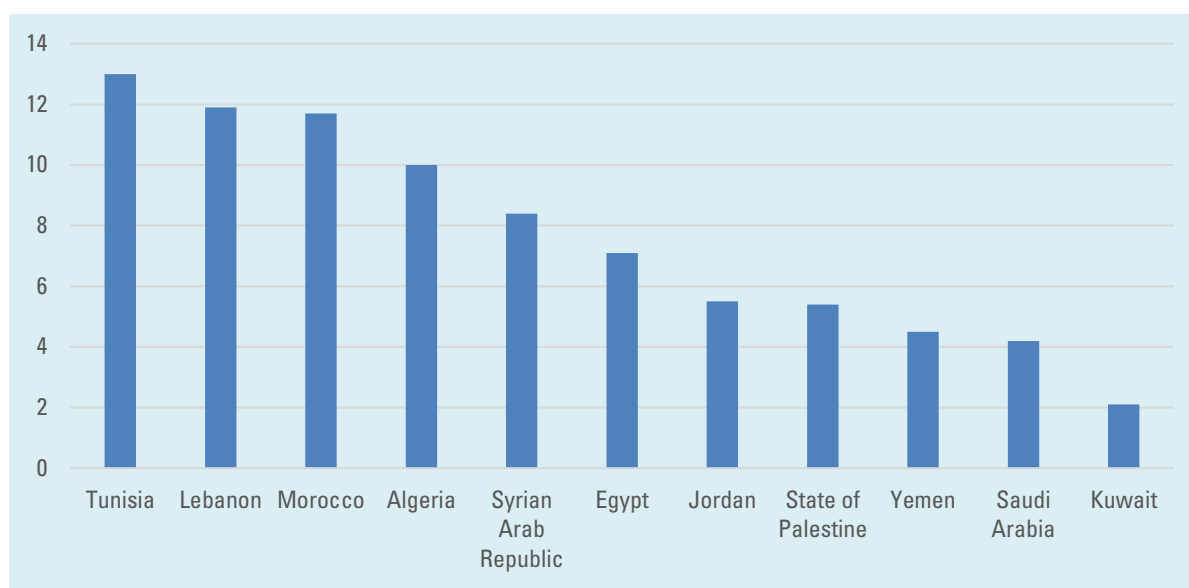
Source: ESCWA, based on reports from participating countries.

Note: The figures for Saudi Arabia pertain only to Saudi citizens.

Table 1 shows the numbers of older persons in Arab countries, their proportion of the total population in each country according to the applicable definition of older persons and the year for which data are available. Figure 2 shows the difference in the proportions of older

persons between Arab countries, with older persons over 60 years of age representing more than 10 per cent of the population in Algeria, Morocco and Tunisia, but less than 7 per cent in Egypt, Jordan, the State of Palestine, Saudi Arabia and Yemen.

Figure 2. Proportion of older persons in selected participating countries



Source: ESCWA calculations based on country reports.

Note: The proportions refer to older persons 60 years of age and older except for Kuwait and Lebanon, which refer to older persons 65 years and older; figures for Saudi Arabia refer to Saudi citizens only.

2. Institutional structures for older persons

Governments have the primary responsibility for implementing the Madrid International Plan of Action and promoting older persons' issues, in cooperation with all governmental, non-governmental and private sector actors, and older persons themselves. The Madrid Plan emphasizes the importance of engaging many stakeholders, such as professional and labour associations, cooperatives, educational, research and academic institutions, the media and others, in working to improve the quality of life of older persons.

The present section addresses the response of institutions in the participating States to the demographic transformation discussed in section 1, the challenges in the areas of policy and institutional procedures caused by this transformation and the progress that States have made over the past five years.

A. Institutional arrangements

1. Authorities concerned and their functions

Government arrangements for addressing the affairs of older persons vary. Some

countries dedicate a single ministry or government agency to this effort, while in other countries this work intersects multiple ministries.

Table 2 shows the arrangements in participating countries, primarily involving ministries of social affairs as the entities directly responsible for the affairs of older persons, followed by ministries of health. In some countries, there is a ministry of the family as in Algeria, Morocco, and Tunisia and departments for older persons in relevant ministries, as in Jordan, Kuwait, the State of Palestine, the Sudan and Yemen. The roles of these institutions vary, ranging from developing and implementing plans and programmes to empower older persons socially and economically, raising awareness of their needs and protecting their rights to providing social, psychological and health services to older persons and providing cash assistance to the needy, as well as shelter services, home care and day care services. Government agencies in many countries collaborate with NGOs, charities, the private sector, volunteers and older persons themselves to provide these services.

Table 2. Government institutions responsible for older persons' issues

Country	Responsible government institutions
Algeria	Ministry of National Solidarity, Family and Women's Affairs
Egypt	Ministry of Social Solidarity

Country	Responsible government institutions
Iraq	Ministry of Labour and Social Affairs Ministry of Planning Ministry of Health
Jordan	Ministry of Social Development
Kuwait	Ministry of Social Affairs
Lebanon	Ministry of Social Affairs Ministry of Public Health
Morocco	Ministry of Solidarity, Social Integration and the Family
Oman	Ministry of Social Development Ministry of Health
State of Palestine	Ministry of Social Development
Saudi Arabia	Ministry of Human Resources and Social Development Ministry of Health
Sudan	Department of Social Development and State Ministries of Social Action
Syrian Arab Republic	Ministry of Social Affairs Ministry of Health Syrian Commission for Family and Population Affairs
Tunisia	Ministry of Women, Family, Children and Seniors Ministry of Social Affairs Ministry of Public Health
Yemen	Ministry of Social Affairs and Labour

Source: ESCWA, based on country reports.

2. Committees concerned and their functions

National committees or commissions for older persons are of great importance for developing programmes and policies, coordinating between the sectors concerned in their implementation and expressing opinions on all issues relating to older persons. Various reports show development in this area, with seven participating countries having special committees for older persons.

Table 3 details the functions of the various committees, which do similar types of work in terms of preparing programmes and submitting proposals and ideas for the development of national policies and strategies, as well as coordinating between the various entities to advance older persons' issues. Country reports also show that the majority of committees do not have dedicated budgets and their advisory role is limited, which limits and hinders their work and efficiency.

Table 3. National committees on older persons in participating countries

Country	National committees (and their years of establishment)	Overseeing entity	Functions
Algeria	National Committee for the Protection and Well-being of Older Persons – 2014 (established by decision on 8 May 2014)	Ministry of National Solidarity, Family and Women's Affairs	Develop concepts, programmes, suggestions and ideas to draft a national policy and future strategies for the protection of older persons.
Egypt	Supreme Committee for the Care of Older Persons	Ministry of Social Solidarity	Develop an integrated plan for the care of older persons, work to develop legislation governing their rights, organize and coordinate the programmes of ministries and agencies concerned with their care, propose programmes and activities to ensure their active participation in society, establish an information network mapping services for them and identify older persons not covered by health insurance services to provide treatment services at public expense.
Iraq	National Committee for Older Persons – 2015	Ministry of Labour and Social Affairs	Handle older persons' issues.
Jordan	National Committee for Older Persons – 2012	Cabinet	Follow-up and implementation of the executive plan of the Jordanian National Strategy for Older Persons and update it continuously.
Kuwait	Supreme National Committee – National Assembly for Older Persons	Ministry of Health	Handle older persons' issues.
Lebanon	Permanent National Commission for Older Persons in Lebanon		Follow-up on older persons' issues and implement the Madrid Plan of Action.
Oman	National Committee for Family Affairs – 2007 (Sultani Decree No. 12/2007 establishing the Committee's bylaws)	Ministry of Social Development	Supervise the development of social, cultural and health policies and follow up on their implementation with various stakeholders.

Country	National committees (and their years of establishment)	Overseeing entity	Functions
State of Palestine	Supreme National Committee for the Care of Older Persons – 2011	Ministry of Social Development	Oversee the implementation of the National Strategy for Older Persons; draft the older persons protection act; determine needs and priorities nationally, implement plans and programmes and make decisions pertaining to older persons; monitor the performance of governmental agencies and non-governmental entities on older persons' issues.
Saudi Arabia	Committee for Older Persons – 2016 (Cabinet Resolution No. 433, article 6 of 20/10/1437 A.H. [25 July 2016 A.D.])		Develop preventive projects and awareness programmes, draft policy for the care of older persons, propose regulations and develop methods for care and services.
Sudan	National Committee for Older Persons		
Syrian Arab Republic	National Committee for the Care of Older Persons – 1994	Ministry of Health	Develop the National Health and Social Care Strategy for Older Persons, with the aim of improving their social, economic and health status.
Yemen	National Committee for the Care of Older Persons – 2019 (Cabinet Resolution No. 6 of 2019)	Ministry of Social Affairs and Labour	Develop and implement the strategy of care for older persons.

Source: ESCWA, based on country reports.

B. National policies and strategies

Many Arab countries have reaffirmed their commitment to the Madrid Plan of Action and the 2030 Agenda for Sustainable Development and their vision of leaving no one behind by adopting legislation to meet the challenges facing older persons, backed by strategies that protect the rights of older persons and ensure that they can age with dignity, as essential members of societies and active contributors to development.

1. Legislation

Older persons have a distinct cultural and religious status in most Arab societies, but few Arab countries have passed laws on older persons. Some countries have sought to strengthen their status by including them in processes in various sectors, and laws are being prepared to promote their rights.

Table 4 presents all laws dealing with older persons, the majority of which do not directly address to them but address some issues and services that affect their quality of life, such as violence, social protection and health.

Table 4. Laws and strategies on older persons in Arab countries

Country	Related laws	Strategy
Egypt	In accordance with article 83 of the Constitution, in September 2021 the Cabinet approved the Older Persons' Rights bill, which is now under consideration by the Parliament.	The National Human Rights Strategy was launched in September 2021, and older persons' rights are included in the third axis
Iraq	<ul style="list-style-type: none"> Article 29 of the Constitution, which guarantees protection during motherhood, childhood and old age The Social Welfare Act and Penal Code, which provides for cases of violence and neglect of older persons 	Cooperation is underway with ESCWA to prepare a strategy for older persons
Jordan		National Strategy for the Care of Older Persons, 2018–2022
Lebanon	<ul style="list-style-type: none"> Law No. 293 (7 May 2014) on the protection of women and all family members from domestic violence Law No. 27, passed on 10 February 2017, concerning the benefit of retired persons from payments from the Sickness and Maternity Insurance Branch of the National Social Security Fund Circular No. 109 of 2 August 2016 of the Minister of Public Health on the adjustment of hospital health coverage for those over the age of 64 to 100 per cent instead of 85 per cent 	National Strategy for Older Persons in Lebanon (2020–2030)
State of Palestine	Revision of the draft older persons protection act in preparation for it to be passed	National Strategy for Older Persons for 2021–2026
Saudi Arabia	<ul style="list-style-type: none"> Royal Decree No. M/22 of 9/6/1392 A.H. (19 July 1972 A.D.) to fight and eliminate illiteracy 	A strategy in which the Family Affairs Council cooperates with various stakeholders in three phases over five years

Country	Related laws	Strategy
	<ul style="list-style-type: none"> • Cabinet Resolution No. 224 of 15/9/1421 A.H. (11 December 2000 A.D.) for the care of persons with disabilities • Royal Decree No. M/11 of 23/3/1423 A.H. (4 June 2002 A.D.), article 4, which provides for “health care for the disabled and older persons” • Royal Decree No. M/45 of 7/7/1427 A.H. (1 August 2006 A.D.), article 3, regulating social security for older persons • Cabinet Resolution 322 of 14/9/1434 A.H. (22 July 2013 A.D.) regulating social care homes • Royal Decree No. M/52 of 15/11/1434 A.H. (21 September 2013 A.D.) regulating protection from abuse 	
Sudan	National Law on the Care and Protection of Older Persons of 2020	Cooperation is underway with ESCWA to prepare the draft of the National Strategy for Older Persons for 2020–2030
Syrian Arab Republic	<ul style="list-style-type: none"> • Law 20 of 1981 creating care homes for older persons in the Syrian governorates • The Personal Status Act, which guarantees support for older persons • The Penal Code, which guarantees the protection of persons with disabilities, older persons and children • The Local Administration Act, which establishes care centres for older persons and persons with disabilities and expands facilities granted to them • The Customs Act, which exempts orphanages, charities and care homes from customs duties and other duties and taxes 	National Strategy for the Care of Older Persons in the Syrian Arab Republic, 2030
Tunisia	Law 114 of 1994 on the protection of older persons	National Strategy for Older Persons (2021–2030)
Yemen		National Strategy for the Care of Older Persons (2022–2028)

Source: ESCWA, based on reports from participating countries.

2. National strategies

The past five years have seen many Arab countries prepare or update national strategies for older persons, as shown in table 4, in order to accelerate the implementation of international conventions and the 2030 Agenda for Sustainable Development.

The strategies were mostly based on the United Nations Principles for Older Persons (1991) and the Madrid International Plan of Action on Ageing (2002). They were also consistent with the regional and international paths towards achieving the 2030 Sustainable Development Goals and the Arab Strategy for Older Persons (2019–2029). The majority of strategies reflected priority themes in the Madrid Plan of Action such as: promoting the physical and mental health of older people; ensuring economic and social security; enhancing the active participation and engagement of older people in society; providing family support and promoting intergenerational solidarity; creating a safe, supportive and age-friendly physical environment; and preventing violence and supporting older people victims of violence and those in crisis and conflict situations.

C. Data, research and information

The Madrid International Plan of Action on Ageing and other recommendations of international and regional conferences stressed the importance of collecting and analysing data on older persons, developing statistical mechanisms and conducting comprehensive, diverse and specialized research to ascertain the realities of older persons at all levels in order to develop effective evidence-based policies and

programmes that respond to their needs. While national statistical offices in Arab countries undertake the collection of data and administration of general surveys, some ministries responsible for the affairs of older persons contribute to the collection and updating of data on older persons. The indicators and information that are collected vary from country to country, as do the responsible entities and the frequency of data collection, as shown in table 5.

The majority of countries face challenges to their work in this area, including the presence of multiple governmental and non-governmental entities monitoring and compiling information related to older persons, the lack of any clear coordination or distribution of functions and roles between them and the absence of independent oversight. The majority of countries also find it difficult to reach older persons and have few or no surveys directed exclusively at this demographic, instead usually targeting the family in general. As a result, they lack detailed information on older persons and socioeconomic indicators related to them and do not have a clear picture of their reality. Researchers and technicians do not have sufficient experience in specialized surveys for older persons and do not have the skills to communicate with them or to select samples, indicators and clear and appropriate questions and communicate them to older persons in simple and comprehensible language. These factors may cause data on older persons to be fragmented between different sectors and difficult to access and prevent the development of inclusive and diverse research on ageing. Perhaps the most significant challenge directly affecting countries' work in this area is the scarcity of financial resources allocated to surveys of older persons.

Table 5. Entity responsible for statistics

Country	Entity responsible for statistics	Study/statistic
Algeria	Office National des Statistiques	Projected change of the population pyramid
	Offices of the Ministry of National Solidarity, Family and Women's Affairs	Statistics and follow-up of the situation of older persons and identification of the type of assistance and field intervention
	Ministry of Labour, Employment and Social Security	Beneficiary census
Egypt	Takaful and Karama programme	Creation of a national database on poor families
Iraq	Ministry of Planning	Annual field survey
	Central Bureau of Statistics	Annual field survey
Jordan	Department of Public Statistics	Family expenditure and income survey 2010 Last census in 2015 In-house IT use survey 2015
Kuwait	National Center for Health Statistics at the Ministry of Health	Annual field survey Health survey of older persons in Kuwait 2016
	Central Statistical Bureau	Annual field survey Statistics 2021
	Department of Older Person Care at the Ministry of Social Affairs	Statistics 2021
	Department of Older Person Services at the Ministry of Health	Health survey of older persons in Kuwait 2016
Lebanon	Central Administration of Statistics	National Survey 2012–2019
	Center for Studies on Aging	Study of the implications of the 2020 crises on the living conditions of older persons Study: "Elder Abuse in Lebanon: Initial Study and Call for Policies and Programmes to Address it"

Country	Entity responsible for statistics	Study/statistic
Morocco	Ministry of Solidarity, Social Integration and the Family	2014 general census Study on the status of older persons 2017
	Ministry of Health and Social Protection	National Survey on Population and Family Health 2018
	National Observatory for Older Persons	First report on the situation and challenges facing older persons 2018
	High Commission for Planning	General census 2014–2021
Oman	National Centre for Statistics and Information	E-census 2020
State of Palestine	Palestinian Central Bureau of Statistics	General census 2017
Saudi Arabia	General Authority for Statistics	Older persons survey 2017 (triennial) Waqar Society Comprehensive Field Survey
Syrian Arab Republic	Central Bureau of Statistics	Production of data and indicators related to older persons Some surveys
Tunisia	National Institute of Statistics	General census 2014
Yemen	Central Bureau of Statistics	2004 general census Household budget survey 2014 Labour force survey 2013–2014

Source: ESCWA, based on country reports.

3. Older persons and development

The Madrid Plan of Action recommends that older persons should participate fully in the development process and benefit from their growing life experiences and knowledge. It also urges States to develop policies that further opportunities to integrate older persons in society, through volunteering and the labour force, while ensuring comprehensive and sustainable social protection systems and eradicating poverty.

Despite the disparity in these areas between ESCWA member States, there are many points of similarity in their societies, economies and productive capacities.

This section presents policies and programmes to integrate older persons into society, as well as social protection systems in a number of countries and policies and programmes pertaining to income generation, continuing education and literacy.

A. Financial security

1. Pension policies

Social protection systems, particularly pension, poverty reduction and social welfare

policies, promote the social well-being of older persons by securing income and enabling them to have adequate living standards and health care, allowing them to age with dignity. Pension systems vary between Arab countries in terms of their comprehensiveness and application, as do retirement ages in different countries and between men and women and between the public and private sectors within the same country as shown in table 6 and table 7.

Country reports show that the majority of pension schemes reinforce income differences because they are usually contributory and cover the formal sector while ignoring workers in the informal sector. The majority of pension systems contain gaps in gender equality and how well they meet the needs of older women, as there is a large coverage gap between men and women. This may be due to go-to gender stereotypes affecting educational pathways and careers, which lead to low employment of women in the formal sector and thus inadequate coverage of women through contribution-based pensions. This may lead to a higher proportion of older women living in poverty than men. Below are summaries of the retirement policies of participating countries.

Table 6. Retirement age in different sectors

Country	Retirement age in different sectors
Algeria	60 for men and 55 for women
Iraq	60 for women and men in the public sector 60 for men and 55 for women in the private sector
Jordan	60 for men and 55 for women
Kuwait	55 for men and 50 for women
Lebanon	64 in the public and private sectors 50 and above in the military 68 for women in the judiciary
Morocco	63 for women and men in the public sector 60 for women and men in the private sector 65 for non-wage workers 55 for miners
Oman	60 for both genders in the public sector 60 for men and 55 for women in the private sector
State of Palestine	60 for men and women in the public sector and some parts of the private sector 65 for academics in private universities 70 for justices on the High Judicial Council
Saudi Arabia	60 for men and 55 for women
Sudan	65 for everyone
Syrian Arab Republic	60 in the public sector
Tunisia	62 in the public sector 60 in the private sector
Yemen	60 for men and women Between 50 and 60 by rank in the military

Source: ESCWA, based on country reports.

Algeria

Algeria has enacted legislation to provide basic services for all citizens. Various labour laws have clearly stipulated all of workers' rights, duties and privileges. Through the National Social Insurance Fund, the Government provides many digital services to

wage workers to ensure the quality of remote public services, particularly for older persons and persons with disabilities. The retirement age in Algeria is 60 for men and 55 for women, after seven and a half years of active employment and social security participation. Employment can be extended for an additional five years.

Iraq

The retirement age in Iraq is 60 for women and men in the public sector, and 60 for men and 55 for women in the private sector. In the event of a pensioner's death, his or her husband or wife benefits from the pension. The Consolidated Retirement Act No. 9 of 2014 allows for the early retirement of a mother with three children under the age of 15 after serving 15 years, provided she is at least 50 years of age and has completed 25 years of service. 120,980 men over 60 years of age and 158,729 women over 55 live below the poverty line in Iraq.

Saudi Arabia

In Saudi Arabia in the past, the pension system varied by sector. In the public sector, the pension rights of employees regulated by the Public Pension Agency. In the private sector, the General Organization for Social Insurance regulates Saudi workers' pension rights. These institutions were then integrated to achieve equality and increase productivity. The retirement age in Saudi Arabia for men and women is 60, but in some cases it can be extended to 65. Persons 60 or over who participated for 120 months and are not engaged in any activity subject to the system are eligible for pension benefits. According to a report of the International Monetary Fund, the Saudi pension system is generous compared to the rest of the world, with a pension of up to 100 per cent, and a large number of family members may benefit from the pension of a deceased pensioner, depending on the situation. Early retirement is allowed after 25 years of service, and an employee may apply for retirement after 20 years of service, with the consent of the competent authority, which may be reduced to 15 years in some cases. In the event that an employee dies, has a disability or reaches the retirement age, he

or she is entitled to a pension regardless of the duration of his/her service. It is also facilitated for a retiree to work remotely or under the flexible working system, and to receive financing for his or her businesses, and this can be completed entirely electronically.

Kuwait

In Kuwait, the law does not differentiate between government employees and civil and oil sector workers in terms of the age for pension eligibility. This age is 55 for men and 50 for women. Under the Social Insurance Law, persons with pension insurance can receive their pension before the age of 50 if their term of service is at least 20 years, and at the age of 50 if their term of service is at least 15 years. As an exception, they can also retire for health reasons provided they have served at least 10 years. Early retirement is allowed as soon as the term of service reaches 15 years, for men at least 50 years of age and women at least 45 years of age, in exchange for a reduction in the pension in proportions established by the Law. Self-employed men and women are entitled to a pension after at least 15 years of participation, provided they are at least 60 years of age, or 20 years of service provided they are at least 55 years of age. Members of the military are entitled to a pension if their term of service is at least 15 years provided they have reached 50 years of age, or 20 years of service for those under the age of 50. The Social Security Law also allows a wife whose husband dies to receive a share of his pension regardless of whether she works. A husband is entitled to a share of his wife's pension if he is found to be unable to work.

Lebanon

In Lebanon, the age of 64 is the basic threshold for retirement in the public and private sectors, but there is some disparity in the retirement age

between different sectors. The rights of older persons are guaranteed by the State Employees Cooperative in the public sector and the National Social Security Fund in the private sector. The Lebanese Ministry of Culture has also established a unified mutual fund for artists and entered them into the Fund with a monthly pension. Husbands and wives are also eligible for the various national social security fund payments in the event of the death of an insured spouse. The percentage of the population living below the national poverty line has risen to 82 per cent. Perhaps the most vulnerable segment of the population is older persons, the percentage of whom experiencing multidimensional poverty has risen from 44 per cent in 2019 to 78 per cent in 2021.

Oman

The retirement age in Oman is 60 for both genders in the public sector, while the private sector differentiates between them with a retirement age of 60 for men and 55 for women. In the event of a pensioner's death, his wife receives the pension as stipulated in Law 26/86 as long as she does not remarry, while a husband benefits from his deceased wife's pension if he is found to be incapacitated. The pension system in Oman encourages early retirement, as retirement is allowed at any age after 20 years of service in the public sector, and at the age of 45 with 20 years of service for men and 15 years for women in the private sector.

State of Palestine

In the State of Palestine, 60 is the mandatory retirement age for men and women in the public sector and a number of private sector entities, with certain exceptions for judges and academics. Widows receive pension benefits from their deceased husbands, while widowers

must demonstrate they are unable to work in order to receive their deceased wives' pensions. There is no policy encouraging early retirement, and early retirement is only allowed with the approval of the Palestinian Pension Agency, provided the individual has completed 15 years of service and is at least 55 years of age.

Morocco

In Morocco, different retirement ages apply in the public and private sectors. In the public sector, the retirement age is 63 for women and men, while in the private sector both genders retire at 60. Retirement is allowed in the private sector as early as 55, and for non-wage workers the retirement age is 65, and 55 for miners. Husbands and wives are also eligible to receive their spouse's pension and all services granted to them in the event of their death.

Yemen

In Yemen, pensions are managed by the General Authority for Social Security and Pensions for the public sector, by the General Corporation for Social Insurance for the private sector and by the Military Pension Administration for the Armed Forces. The law sets the mandatory retirement age at 60 for men and women, and optionally for women at the age of 55 after completing 35 years of active service. In the military, the retirement age is between 50 and 60 according to rank. After the death of a pensioner, whether a man or a woman, his or her legal dependents are entitled to his or her pension. Men retire after 30 years of service and women after 25 years, regardless of their age. Early retirement is possible once a man has completed 25 years of service and reached the age of 50, and for a woman once she has completed 20 years of service and reached the age of 46. An early retirement pension is reduced by 5 to 10 per cent if the beneficiary has reached the age of

45, provided that his/her contribution period is not less than 240 months. Poverty rates rose from 48.6 per cent in 2014 to 78.9 per cent in 2018, of whom 45 to 50 per cent are older persons. This percentage is expected to increase due to the deteriorating security and economic situation.

Tunisia

In Tunisia, social security funds provide social and health coverage, services and benefits to defined groups of beneficiaries, including pensioners, their families and the incapacitated. Pensions account for the largest share of social security fund expenditures (70 per cent), and this share is expected to rise. To ease this burden, the retirement age was raised in 2019 to 62 in the public sector, while remaining at 60 in the private sector. There are exceptions for early retirement for economic reasons, for physical incapacity and for mothers with three or more children not over 20 years of age or a child with a disability, after 15 years of active service. According to data from the National Social Security Fund and the National Pension and Welfare Fund, 29.5 per cent of older persons who receive pensions received them from the public sector in 2018, and 70.5 per cent received them from the private sector. After the death of a social insurance beneficiary, his or her husband or wife as well as children under the age of 21, children with disabilities, children enrolled in university education until they reach the age of 25 and daughters as long as they do not have livelihood resources are eligible for social insurance and health coverage.

Syrian Arab Republic

About 800,000 older persons are receiving pensions in the Syrian Arab Republic, or about 42 per cent of all older persons. The number of persons currently registered increased slightly

from 1.95 million in 2010 to 2.1 million in 2015, and then to 2.3 million in 2020, out of a workforce of more than 5 million. The Social Security Law regulates issues relating to the eligibility of husbands and wives to receive their spouse's salary in the event of their death. Article 90(b) provides that a widow is entitled to receive her husband's salary for her lifetime, until she marries or joins a job or profession, while a man continues to receive his wife's pension after her death even if he remarries, and there are demands for equal rights in this issue.

Jordan

Currently, there are three pension systems in Jordan: civil pensions, military pensions and the social security system. All civil service and military employees began to be enrolled under the Social Security Law in 2003, and the civil service and military pension system is expected to cease operations by the end of 2045, making the Social Security Corporation the primary comprehensive pension scheme for all retirees. The retirement age is 55 for women and 60 for men, according to the Social Security Law and its amendment No. 1 of 2014. In the event of a husband's death, his wife receives his pension, but the opposite is permitted only if the husband is completely incapacitated and has no wage from work, income from a profession or another pension.

Sudan

Older persons are covered by health insurance services at the National Pensions and Social Insurance Fund in all states of the Sudan. As of March 2022, there were 187,539 beneficiaries.

Egypt

The Egyptian Government provides a social security pension to older persons who do

not receive an insurance-based pension and have no income. Social safety nets have been developed by the Karama programme, which provides a pension to older persons upon reaching 65, and to those with a chronic disability or disease. Pensions cover more than 56 per cent of all older persons. The Ministry of

Solidarity has issued a decision to exempt older persons over 70 from public transport expenses, including railways and subways, in addition to a 50 per cent exemption for those over 65. The Ministry of Social Solidarity is responsible for paying these costs to the corresponding ministry.

Table 7. Percentages and numbers of pensioners and social coverage according to country reports

Country	Percentages and numbers of pensioners and social coverage according to country reports
Algeria	<p>Number of pensioners aged 65 and over: 1,169,923 (1,032,898 males and 137,025 females)</p> <p>Number of insured wage earners: 3,894,031, equal to 92.21 per cent of the total number of older persons aged 60 and over (2020)</p> <p>Number of women insured: 2,063,189, or 52.98 per cent of the total</p> <p>Total number of insured older persons in the wage and non-wage categories: 4,115,758 persons (2020) with an estimated total social coverage rate of: 97.46 per cent</p>
Iraq	625,844 males and 741,179 females receive pensions
Jordan	74.7 per cent of older persons benefited from social coverage at year-end 2013
Lebanon	<p>There are 15,878 male and 10,214 females</p> <p>There were 60,635 beneficiaries of the State Employees Cooperative as of 2020:</p> <p>Pension or compensation: 26,092 people; older persons in the care of their children: 34,543</p> <p>Number of older persons benefiting from the National Social Security Fund based on a child or spouse: 129,152 (2020)</p>
Morocco	42.4 per cent rate of participating in the pension system as of 2020
Oman	<p>The number of pensioners are:</p> <p>31,912 males in the public sector</p> <p>5,534 males in the private sector</p> <p>1,779 females in the public sector</p> <p>1,070 females in the private sector</p> <p>Total number of pensioners in the public sector: 33,691</p> <p>Total number of pensioners in the private sector: 6,604</p> <p>Pensioners in the public and private sector represent 26.6 per cent of all older persons</p> <p>Number of participants in the public administration and those covered by the social protection system: 162,653 in 2021, 51 per cent of whom are men</p>

Country	Percentages and numbers of pensioners and social coverage according to country reports
State of Palestine	47,409 male and 45,884 pensioners Pensioners represent 20 per cent of all older persons 71 per cent of working age men registered in pension programmes, compared to 29 per cent of women
Saudi Arabia	Number receiving benefits from the General Organization for Social Insurance: 186,547 males and 16,869 females (2021) More than 165,000 recipients of funding from the Social Development Bank and 203,416 from the General Organization for Social Insurance
Sudan	187,539 social insurance beneficiaries (2022)
Syrian Arab Republic	72 per cent of pensioners were male as of 2020
Tunisia	66.65 per cent of beneficiaries were male as of 2018 18.31 per cent of all beneficiaries were female as of 2018 Percentage of pensioners (2018): 51 per cent of all older persons, 29.5 per cent of whom were from the public sector and 70.5 per cent of whom were from the private sector Total number of older person pensioners: 756,927 (2018)
Yemen	Drop in population pension coverage from 6.4 to 5.9 per cent from 2015 to 2019

Source: ESCWA, based on country reports.

2. Social assistance programmes

The majority of countries use multiple social programmes targeting the poorest, including older persons in difficult economic conditions, to provide financial or in-kind assistance or moral, logistical and administrative privileges that take into account their needs and help them live a decent life. In some countries, these measures are an attempt to mitigate the effects of inadequate pension systems and their failure to cover many older persons, who are thus left

vulnerable to poverty. Civil society organizations contribute to many programmes, along with the Government. Table 8 summarizes all social payments as well as the entity providing them. Although these programmes are important in alleviating the burden of poverty on older persons, the best solution remains to develop comprehensive social policies and systems that ensure a monetary income for this age group that preserves their dignity and ensures that they can live in peace and safety.

Table 8. Social assistance programmes and their providers

Country	Programme	Provider
Algeria	Solidarity grant system for groups in need without discrimination between men and women	Agence Nationale under the Ministry of National Solidarity, Family and Women's Affairs
Egypt	Conditional cash support programme "Takaful and Karama"	Government of Egypt
	The Karama programme provides a pension for older persons from the age of 65, and for those with disabilities or chronic illnesses	Government of Egypt
	The "Decent Life" initiative in 2019, to provide a decent life for the segments of society most in need of care	Presidency of the Republic
Iraq	Social welfare salary via bank card Loans to older pensioners	Mobile teams of social researchers
Jordan	Spending of income from the Charitable Endowment for the Care of Older Poor Persons	Ministry of Awqaf, Islamic Affairs and Holy Places
	Provision of aid	Zakat Fund
	Provision of regular monthly aid, irregular emergency assistance and physical rehabilitation assistance	National Aid Fund
	Social Security Recipient Funding Programme	Social Security Corporation
Kuwait	Financial assistance and housing allowance for older persons 60 years and older and female heads of household 55 years and older without income	Ministry of Social Affairs
Lebanon	National Poverty Targeting Program	Ministry of Social Affairs
	Emergency Assistance Program	Prime Minister, Ministry of Interior and Municipalities and Ministry of Social Affairs
Morocco	"Dignity income" for poor older persons and those in care institutions	Government of Morocco
Oman	Social assistance programmes	Government of Oman
State of Palestine	Social assistance programmes for older persons	Ministry of Social Development, zakat committees, United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), civil society organizations

Country	Programme	Provider
Saudi Arabia	Financial and in-kind assistance to the needy and their families	Social Security Agency
	Priority card for accessing health services	Ministry of Health
Sudan	Improving the economic and social conditions of pension recipients in the public sector and encouraging them to produce Microfinance service for pension beneficiaries	Pensioner Social Development Corporation Sudanese Society for Care of Older People (SSCOP/Jisr)
Tunisia	Promotion and integration programmes for poor groups without coverage	Government of Tunisia
Yemen	Social and cash assistance	The World Bank
	Programmes targeting rural poor	Social Fund for Development

Source: ESCWA, based on country reports.

Box 1. “Takaful and Karama” programme – A pioneering experience in Egypt

The Government has launched a conditional cash transfer programme called “Takaful and Karama” to further social justice. It has 3.8 million beneficiary families, including 14.1 million individuals. The budget allocated to this programme has also increased from 147 million Egyptian pounds (EGP) in 2015 to 19 billion EGP in 2022, reducing poverty rates by 5 percentage points. A fund has been approved to sustain funding for “Takaful and Karama” and expand the number of beneficiaries.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Egypt.

require some adjustments to the work environment to help integrate older workers. Attention must also be given to women’s participation in paid work, given the unjust cultural practices precluding them from entering the labour market or discriminating against them in pay compared to men, and repeated interruptions of work to provide care in the home, resulting in fewer retirement resources.

Although there are no accurate statistics on the proportion of older wage earners in ESCWA member States, there is a clear general trend of initiatives to provide opportunities for older persons to continue being economically active, but with discrepancies between different countries.

3. Labour market participation

The Madrid Plan of Action emphasizes the need for flexible retirement policies that allow older persons to continue their economic activities to ensure a steady income and allow employers to benefit from their skills and expertise. This may

In Saudi Arabia, labour law gives any citizen the right to work without discrimination on the basis of sex, age or otherwise. Numerous initiatives have been launched, such as the “Marn programme” to facilitate self-employment, especially for pensioners wishing

to continue working. As part of Saudi Vision 2030 and the Sustainability of Lifelong Learning initiative, efforts are being made to develop the human capacities of older men and women and help them to enter the labour market and participate in the development process. Programmes have also been introduced to develop the digital and technical skills of older persons to enhance their effectiveness and contributions, particularly during the COVID-19 pandemic.

In Algeria, a worker of retirement age can request a five-year extension of employment during which his/her employer cannot transfer him/her to retirement.

In Kuwait, even after reaching the end-of-service age, Kuwaiti retirees may be employed in accordance with relevant ministerial decisions under specific conditions.

The public sector in Oman allows retirees and those over the age of 60 to work on temporary contracts or part-time contracts. The Central Bank encourages all banks to create banking products that suit the category of retirees, such as the "Waqar" product, which provides them with banking facilities in several areas at reduced interest rates. It is also working with insurance companies to provide special coverage in addition to the use of the services of the Oman Credit and Financial Information Center (Mala'a).

Morocco encourages older persons to continue working by extending the retirement age from 60 to 63, and Law 65/99 on the Labour Code, Section VIII, article 526 provides for the possibility of 60-year-olds to continue working. The Integrated National Programme for the Advancement of Older Persons 2021–2030 provides for support and accompaniment for

older persons in launching businesses, seeking to invest their expertise and pass it on to young people.

In the State of Palestine, the participation rate of older persons in the labour market varies across the West Bank and Gaza Strip. The labour force participation rate among older persons in 2019 was 14 per cent, broken down as 18 per cent in the West Bank and 6 per cent in the Gaza Strip. The Ministry of Culture sponsors income-generating activities for older women through exhibitions of handicrafts and traditional products.

In Lebanon, 14.4 per cent of older persons continue to work. In rural areas, older persons are supported through cooperatives based on rural and agricultural development policy. It should be noted that women make up 72 per cent of the members and managers of these cooperatives.

In Yemen, in 2014, 22.3 per cent of older persons were in the labour force, of whom only 2.7 per cent were female. This is due to customs and traditions that limit women's work. Some private sector companies benefit from the expertise of retirees from the public or private sectors in the specialties they need.

In Iraq, in 1985, the Government issued a special decree for the employment of older persons in government departments.

In the Syrian Arab Republic, 11.3 per cent of older persons continued to work in 2010. Only 4 per cent of older women work, while 20 per cent of older men work, according to a study of older persons. Twenty-four per cent of older persons expressed their desire to work if it were possible. In 2021, 14.2 per cent of all older persons were employed.

In Jordan, Social Security Law No. 1 of 2014 provides for the possibility of continuing to work after retirement age, while still being covered by the Social Security Act up to the age of 65 for males and 60 for females, but no legal provision encourages the employment of seniors.

In Egypt, there are 1.1 million older persons working, accounting for 16.5 per cent of all older persons, with the highest proportion working in agriculture and fishing (50.5 per cent), followed by wholesale commerce and civil society organizations.

B. Literacy and continuous learning

All Arab countries recognize the importance of providing lifelong learning opportunities to older persons as well as working to reduce illiteracy, as this has an impact on development and on their integration into their communities and their continued activity. Despite the development of literacy and education programmes for older persons, illiteracy rates remain high in various countries, particularly among women (table 9), and enrolment in these programmes remains low. Table 10 shows all literacy and continuing education programmes of participating countries.

Table 9. Percentage of illiterate older persons in a number of participating countries

Country	Illiteracy among older persons (percentage)	Illiteracy among older men (percentage)	Illiteracy among older women (percentage)
Egypt (2020)	56.5	43.8	70.6
Iraq (2016)	55.7	36.1	73.9
Jordan (2015)	34.7	17.2	51.6
Lebanon (2007)	41.4		
Morocco (2018)	71.6	60.1	83.6
Syrian Arab Republic (2021)	38.2		

Source: ESCWA, based on country reports.

Note: The age for defining older persons varies from country to country.

Table 10. Educational programmes in participating countries

Country	Programme
Algeria	<ul style="list-style-type: none"> Office National d'Alphabétisation et d'Enseignement des Adultes (ONAEA) National strategy to fight illiteracy
Egypt	<ul style="list-style-type: none"> General Authority for Adult Education
Iraq	<ul style="list-style-type: none"> Granting of the title of tenured professor to retired professors, allowing them to teach and supervise post-graduate theses as needed, earn a salary and receive several other benefits Postdoctoral study

Country	Programme
Jordan	<ul style="list-style-type: none"> • Literacy centres
Kuwait	<ul style="list-style-type: none"> • Education and training in modern technology and communication • Literacy programmes
Lebanon	<ul style="list-style-type: none"> • University of Seniors • Training on technology, computers and language
Morocco	<ul style="list-style-type: none"> • Literacy programme • Post-literacy programme • Career literacy programme
Oman	<ul style="list-style-type: none"> • Programme to hire graduates of the Diploma of Public Education to teach literacy classes • Educated Village Programme, with 30 participating villages • Cooperative Schools Project, with 71 participating schools • Electronic registration of learners in literacy classes • Literacy projects for all groups • Rebuilding and design of existing literacy curricula • Celebration of Arab and International Literacy Day • Training of older people in the use of smartphones and other communication devices
State of Palestine	<ul style="list-style-type: none"> • Programmes by the Ministry of Education, civil society organizations and universities in line with the goals of the National Strategy for Older Persons • Establishment of a national team chaired by the Ministry of Education for the advancement of adult literacy and lifelong learning • Partnership and cooperation agreement with the German Adult Education Association (Deutscher Volkshochschul-Verband)
Saudi Arabia	<ul style="list-style-type: none"> • Saudi Adult Education and Literacy Law • iEN e-learning portal
Sudan	<ul style="list-style-type: none"> • National Council for Literacy and Adult Education
Syrian Arab Republic	<ul style="list-style-type: none"> • Literacy courses
Tunisia	<ul style="list-style-type: none"> • Training programmes at the Centre national d'éducation des adultes (CNEA) • Development of the Tunis University for lifelong learning
Yemen	<ul style="list-style-type: none"> • Opening of adult education centres • Opening of life skills training centres

Source: ESCWA, based on country reports.

C. Social inclusion and active ageing

The aim of building a society for all ages is to provide older persons with the opportunity to continue to participate in community affairs, which requires the elimination of all aspects of the exclusion and discrimination of older persons. Older persons play critical roles at the family and community levels and make many valuable contributions that are not necessarily captured by economic measures: such as family care, subsistence work, household maintenance and volunteering. Moreover, these roles contribute to the preparation of the future labour force. All these contributions should be

recognized, including contributions through unpaid work, in all sectors and by persons of all ages, especially women. Programmes for the integration of older persons vary between countries in terms of their quality and follow-up. There are often no statistics showing the comprehensiveness of these programmes and to what degree they provide opportunities to all older persons, and no studies using indicators or data to measure the societal recognition of older persons' social, cultural, economic and political contributions. Table 11 and box 2, box 3 and box 4 show the most prominent initiatives by countries to integrate older persons and further their participation in society.

Table 11. Voluntary activities for older persons and responsible authorities in participating countries

Country	Volunteer activity	Responsible entity
Algeria	<ul style="list-style-type: none"> National Programme for the Integration of Older Persons Issuance of an older person card 	Government of Algeria
Iraq	<ul style="list-style-type: none"> Volunteering in education "Learn from My Experiences" programme 	Government of Iraq
Jordan	<ul style="list-style-type: none"> Teaching of students by older persons in 2018 Leveraging older persons' expertise by hiring qualified people to provide consultancy services in 2017 	Initiative of Samir Shamma Society Homes for Older Persons Directorate of Reform and Family Reconciliation in the Chief Justice Department
Lebanon	<ul style="list-style-type: none"> Volunteer camps 	Ministry of Social Affairs
Morocco	<ul style="list-style-type: none"> Integrated National Programme for the Advancement of Older Persons 2021–2030 	Ministry of Solidarity, Social Integration and the Family
Oman	<ul style="list-style-type: none"> Sultan Qaboos Award for Volunteering 	Government of Oman
	<ul style="list-style-type: none"> Life experience exchange programmes 	Ihsan Association
State of Palestine	<ul style="list-style-type: none"> Review and audit of books and research 	Ramallah Forum of Expertise

Country	Volunteer activity	Responsible entity
Saudi Arabia	• National Platform for Volunteering	Ministry of Human Resources and Social Development
	• Sustainable Development Center	Riyadh Chamber of Commerce
	• Social responsibility track in the Taqdeer programme	General Organization for Social Insurance
Tunisia	• Development of the National Registry of Older Persons' and Retirees' Skills	Government of Tunisia
	• Provision of financial and technical support for projects	Mercy House Association for the Care of Older Persons in Tataouine Governorate
Yemen	• Voluntary projects and programmes	Social Fund for Development

Source: ESCWA, based on country reports.

Box 2. National Platform for Volunteering – An innovative experience in Saudi Arabia

The Ministry of Human Resources and Social Development has launched the National Platform for Volunteering, a national volunteering incubator that provides a safe environment to serve and regulate the relationship between volunteers and providers of volunteer opportunities in Saudi Arabia.

The restrictions and conditions for joining voluntary opportunities are determined in accordance with the provider's requirements.

The General Authority for Statistics (GaStat) found in 2018 that older volunteers represented 4.6 per cent of the total Saudi population, reflecting older persons' growing interest in volunteering.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Saudi Arabia.

Box 3. "Learn from My Experiences" programme – A pioneering experience in Iraq

Through the Learn from My Experiences programme, older persons give awareness-raising, social and religious talks for young people to benefit from their long experiences, knowledge and skills.

This programme has a direct impact on older persons' well-being and helps them integrate into society, achieves social and intergenerational solidarity and gives older persons the opportunity to volunteer.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Iraq.

Box 4. National Registry of Older Persons' and Retirees' Skills 2003 – A pioneering experience in Tunisia

The National Registry of Older Persons' and Retirees' Skills was created in 2003 with the aim of making greater use of the expertise and skills of older persons for the public good.

The Registry contains information on the skills of older persons and pensioners who have expressed their desire to employ their intellectual or professional expertise and skills for the benefit of society, and to contribute actively to the development process in the context of active ageing. It has helped to promote the social inclusion of retirees and older persons and to leverage their experiences in volunteering.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Tunisia.

D. Older persons in crisis situations

Older persons in crises, such as natural disasters and other humanitarian emergencies, are often at risk of injury, isolation, psychological and physical illness and neglect due to their specific needs or vulnerability. On the other hand, older persons can play key roles such as providing care or contributing to

the building of post-conflict or post-war societies.

The COVID-19 pandemic has spread fear among older persons around the world, as the death rate among those over 80 has been five times the average. There were also less obvious but equally important implications: failure to receive care for conditions not related to the pandemic; neglect and abuse in care institutions and facilities; high rates of poverty and unemployment, as well as a significant impact on well-being and mental health, and trauma from stigma and discrimination.⁵ The pandemic has exposed many flaws and weaknesses in many systems, as well as gaps in how countries manage risks. Countries, including Arab

countries, in cooperation with the World Health Organization (WHO) and other international organizations, have worked to contain the consequences of the pandemic. Actions and responses have varied, with some countries adopting comprehensive plans for all citizens, and others making emergency plans tailored to older persons' needs.

Country reports show that some countries do not have emergency response plans, and where they do exist, they generally lack policies and programmes for older persons as a population segment with its own particularities. Table 12 provides a summary of national emergency response plans, if any, and plans to respond to the COVID-19 pandemic.

Table 12. General emergency and COVID-19-related plans and measures for older persons

Country	Existence of a general emergency plan	Existence of a COVID-19 pandemic plan	Measures for older persons during the COVID-19 pandemic
Algeria		<ul style="list-style-type: none"> United Nations-approved health protocol 	<ul style="list-style-type: none"> Complete quarantine of nursing homes Hygiene and sterilization measures Priority vaccination for older persons
Egypt		Governmental plan to address COVID-19	<ul style="list-style-type: none"> Priority vaccination for older persons Special protocol for shelters for older persons
Iraq		<ul style="list-style-type: none"> Preparation of an exceptional plan to provide access to Coronavirus prevention measures 	

5. World Health Organization, Policy brief: The impact of COVID-19 on older persons (May 2020). <https://www.who.int/publications-detail/covid-19-strategy-update---14-april-2020>.

Country	Existence of a general emergency plan	Existence of a COVID-19 pandemic plan	Measures for older persons during the COVID-19 pandemic
Jordan		<ul style="list-style-type: none"> • Development of awareness-raising programmes on the pandemic and its risks, how to reduce community spread and education for young people not to mix with older persons in order to preserve their health 	<ul style="list-style-type: none"> • Priority vaccination for older persons, and Government provision of vaccines in care homes
Kuwait		<ul style="list-style-type: none"> • Launch of instructional programmes 	<ul style="list-style-type: none"> • Priority vaccination for older persons
Lebanon		<ul style="list-style-type: none"> • Lifting of maximum readiness 	<ul style="list-style-type: none"> • Priority vaccination for older persons
Morocco	National emergency response plan(ORSEC)	Quarantine and essential services per WHO recommendations	Provision of supplies for hygiene and prevention to social care centres for older persons as well as free vaccination
Oman	<ul style="list-style-type: none"> • Operation of the National Emergency Management Centre 	<ul style="list-style-type: none"> • Complete lockdown, sterilization and social distancing • Allocation of funds to support all sectors and raise awareness 	<ul style="list-style-type: none"> • Lockdown and sterilization of care homes for older persons • Precautionary action among older persons and priority vaccination
State of Palestine	National response plan of the Palestinian Red Crescent Society	Lockdowns and precautionary measures to address the pandemic	<ul style="list-style-type: none"> • Providing for older persons' needs within their families, care institutions and hospitals through actions by the Ministry of Social Development, the Ministry of Health and civil society organizations

Country	Existence of a general emergency plan	Existence of a COVID-19 pandemic plan	Measures for older persons during the COVID-19 pandemic
Saudi Arabia		<ul style="list-style-type: none"> Economic stimulus Deferred tax payments Suspension of the <i>umrah</i>, studies and flights Curfew and social distancing 	<ul style="list-style-type: none"> 98 per cent vaccination rate among older persons
Sudan			<ul style="list-style-type: none"> Preparation and review of a special protocol for shelters for older persons with the Ministry of Health
Syrian Arab Republic			<ul style="list-style-type: none"> Priority access for older persons to health services and vaccines
Tunisia	<ul style="list-style-type: none"> Law No. 39 of 1991 on disaster prevention, response and aid regulation Decree No. 2723 of 2004 controlling the methods for preparing and implementing national and regional disaster prevention and response plans and regulating aid 	Adoption of proactive protection measures (sterilization, health protocols, vaccine provision, etc.)	<ul style="list-style-type: none"> Provision of a basket of neighbourhood services such as mobile mail services, and mobile teams to provide home social and health care Priority vaccination for older persons
Yemen	<ul style="list-style-type: none"> United Nations Yemen Humanitarian Response Plan 2021 	<ul style="list-style-type: none"> Vaccinations for interested individuals Humanitarian response plan to limit the spread of the virus 	<ul style="list-style-type: none"> Priority vaccination for older persons

Source: ESCWA, based on country reports.

4. Health services and quality of life of older persons

With age and associated physiological changes, older persons suffer from a gradual decline in their physical and mental capacities, increased risk of disease and the emergence of many complex age-related health conditions. These changes do not occur in a single uniform way for all and are not always related to ageing. In addition to physiological changes, physical and social environments directly affect health, through barriers or incentives for healthy decisions and behaviour. Maintaining healthy behaviours throughout life contributes to reducing the risk of non-communicable diseases, improving physical and mental capacity, delaying the dependence on care and maintaining active participation throughout the course of life.

For this reason, the recommendations of the Madrid Plan of Action and other recommendations on older persons have emphasized the need for policies and programmes based on the concepts of the life cycle and active ageing. Many countries, including Arab countries, have changed health

policies and adopted programmes to fill gaps and provide care that meets the needs of older persons.

The present section reviews health policies and programmes adopted in selected Arab countries as well as the human resources available to care for older persons.

A. Chronic diseases, mental health and older persons with disabilities

1. Chronic diseases

Rates of chronic non-communicable diseases are known to rise with age. Rates of chronic diseases have reached 64.4 per cent in Morocco, 70.3 per cent in Lebanon and 78 per cent in Iraq. In Saudi Arabia, the proportion varies between women and men, with older women at 77.3 per cent compared to 70.8 per cent among older men. Table 13 provides the incidence of major types of chronic non-communicable diseases among older persons.

Table 13. Chronic diseases among older persons in participating countries

Country	Percentage of older persons with hypertension		Percentage of older persons with diabetes		Proportion of older persons with heart disease	
	Male (percentage)	Female (percentage)	Male (percentage)	Female (percentage)	Male (percentage)	Female (percentage)
Algeria	22.4	35.9	14.1	16	4.2	4.7

Country	Percentage of older persons with hypertension		Percentage of older persons with diabetes		Proportion of older persons with heart disease	
	Male (percentage)	Female (percentage)	Male (percentage)	Female (percentage)	Male (percentage)	Female (percentage)
Iraq	76.6	80.1	29.9	29.5	27.6	20.3
Jordan	40.6		27.7		11.1	
Kuwait	100 (80 and older) 82.7 (60–69)		66.6 (80 and older) 40.8 (60–69)			
Morocco	26.2	41.9	17.3	22.8	6.9	9.3
Oman	8.69	10.10	8.36	9.07		
Saudi Arabia	48	55.3	48.9	49.4	12	10.1
Syrian Arab Republic	30		17		15	
Tunisia	62.5	74.75	37.1	36.65		

Source: ESCWA, based on country reports.

2. Mental health

Tunisia has focused on the mental health of older persons, including it in the “Multi-Sector National Strategy for Older Persons”, and has worked to provide health and psychological services to older persons, especially in times of crisis, loss of loved ones or exposure to violence.

In **Algeria**, institutions for older persons provide a range of mental health-related activities, such as educational workshops.

In **Saudi Arabia**, the Ministry of Health provides comprehensive high quality health services to older persons for the early detection of physical, mental and psychological health problems. The Ministry also hosts educational content on older persons’ mental health on its website on a page titled “Health awareness”, and released the application Qariboun (We are

close by) to facilitate psychological and mental counselling supervised by specialized staff from the National Center for Mental Health Promotion. The Saudi Alzheimer’s Disease Association has also been established to create public awareness and help patients and their families.

In **Kuwait**, during the COVID-19 pandemic, the Government developed a plan that included guidance programmes to reduce the psychological and social effects of the pandemic on older persons.

In **Lebanon**, the National Strategy for Older Persons 2020–2030 included an axis for promoting the physical and psychological health of older persons.

In the **State of Palestine**, the National Strategy for Older Persons includes volunteer programmes for university students to provide

psychological support to older persons. UNRWA provides psychological support to older persons through a support line. Caritas in Ramallah holds venting sessions and joint activities with older persons such as yoga, sports, and lectures.

In **Morocco**, the Ministry of Solidarity, Social Inclusion and the Family provides recreational activities to combat older persons' sense of isolation and alienation and the psychological stresses associated with ageing. The Ministry of Health and Social Protection has taken a number of steps to improve the mental health of older persons, such as raising the budget for the acquisition of psychiatric medicines, establishing a psychiatry unit for older persons at the Al-Razi University Psychiatric Hospital in Sale, establishing a day centre for persons with Alzheimer's disease in Rabat in 2017 and creating the National Mental Health Strategy in 2013.

In the **Syrian Arab Republic**, the psychosocial support programme aims to provide psychological support to those affected by the war, as well as strengthening cultural programmes in community rehabilitation institutions. The programme uses psychosocial counselling in educational and university institutions to regulate and strengthen the bonds between different components of society.

In the **Sudan**, the Ministry of Health provides treatments for mental changes in older people, from memory impairment and Alzheimer's to depression.

In **Egypt**, the Ministry of Social Solidarity seeks to provide psychological care programmes in social welfare institutions for older persons and through the Older Companion project.

3. Older persons with disabilities

The risks of vulnerability and disability increase with age, and the effects of disability are often exacerbated by stereotypes towards persons with disabilities and inadequate measures to integrate them and meet their needs, resulting in them being isolated and seeing their capacities diminished. Table 14 shows disability rates among older persons in different countries where measures taken to mitigate the impacts of disabilities vary. Older persons often benefit from policies and initiatives for persons with disabilities, however the majority of such policies do not specifically take the needs of older persons into account.

The Government of **Algeria** facilitates older persons' access to various services and guarantees their right to technology by launching a variety of digital social and administrative services in the areas of health, social security and others, providing access to services without having to travel to various offices.

In **Saudi Arabia**, persons with difficulties are provided with monthly subsidies, medical devices and barrier-free access to their destinations through the "Al Mosef Al Awal" and "Meysra" initiatives, which facilitate their transportation in private cars with drivers and mobility aids. The "Mowaamah" (matching) programme of the Ministry of Human Resources and Social Development also aims to enable persons with disabilities to access suitable employment opportunities, in an environment appropriate to them.

In **Kuwait**, older persons with disabilities enjoy special transport policies, mobile service centres to reach them wherever they are, access to parking in all facilities they frequent, priority

in their transactions at all institutions and accessible public transport to meet their needs.

In **Lebanon**, older persons with disabilities benefit from a support programme for persons with disabilities, which includes exemption from the car registration fee, a reserved parking spot from the municipality, and exemption from municipal fees. A total of 80,000 miscellaneous services are provided yearly for older persons with disabilities such as wheelchairs, crutches, medical beds, etc.

Oman gives people with disabilities and difficulties special importance, providing them with a basket of facilities including a 50 per cent reduction on travel tickets for them and one companion, exemption from public transport costs, a 35 per cent discount for their companions, dedicated parking and wheelchairs at the airport and facilitated access and service at public facilities.

In the **State of Palestine**, cooperation is ongoing with the General Union of People with Disabilities, NGOs and local community organizations in this field to provide services to older persons with disabilities. These services include regular and emergency cash assistance, health insurance, residential care, day and home services, home modifications and auxiliary medical devices.

In **Morocco**, the National Initiative for Human Development targets persons with disabilities, especially older persons. A total of 39,547 people have received technical aids and prosthetic devices, 40 per cent of them women. The Social Protection and Social Cohesion Support Fund supports 78 reception centres to guide and assist persons with disabilities. The Ministry of Solidarity, Social Inclusion and the Family encourages older persons to receive

care in their homes, provides incentives, support, advice and activities to caregivers by various means and facilitates the mobility of older persons, especially those with disabilities, through several programmes such as “Accessible Cities” and reduced train fares.

In **Yemen**, the Disability Care and Rehabilitation Fund provides health services, in-kind and financial assistance, education and rehabilitation services and material support to associations in this area. The ongoing conflict in Yemen has led to a decrease in these services and an inability of persons with disabilities to move about.

In the **Syrian Arab Republic**, the Strategic Action Plan 2030 included the National Social Empowerment Programme, which in turn includes the Programme for the Care of the Older Persons and Persons with Disabilities. Cooperation is under way between the Ministry of Local Administration and the Union of Engineers to prepare engineering standards for modern buildings that are sensitive to the needs of older persons. The Ministry of Social Affairs and Labour works in cooperation with relevant NGOs to provide mobility aids and medications for older persons registered with NGOs or the Ministry, through grants from international organizations.

In **Jordan**, older persons with disabilities receive services from the Supreme Council for Persons with Disabilities in terms of access to mobility, auditory and visual aids, with some 329 older beneficiaries in 2015 and 365 in 2014. In 2015, older persons who received physical rehabilitation services (medical aids) through the National Aid Fund represented 1.8 per cent of total beneficiaries. The Jordanian Government has also worked to create residential care homes and day clubs for older persons in accordance

with the regulations and instructions of the Ministry of Social Development on licensing requirements, the most important of which is to comply with national building standards. However, only 10 per cent of government buildings are adapted for persons with disabilities and older persons. Seven of the 12 governorates apply national building standards, or 58 per cent. With regard to public transport, only 12 buses have designated seats for older persons, and only 28 public vehicles are licensed to serve older persons with special needs.

In **Egypt**, in accordance with the provisions of Law No. 10 of 2018 on the Rights of Persons with Disabilities, the Ministry of Social

Solidarity provides its services to persons with disabilities in general and older persons with disabilities in particular through a clear plan based on combining two pensions they are eligible for without restrictions, coordinating integrated services, providing temporary or continuous services for them in dedicated residential institutions, arranging physiotherapy services for the rehabilitation and societal integration of persons with motor and hearing disabilities, implementing training programmes for employees of rehabilitation bodies under the supervision of the Ministry and working towards greater establishment of institutions to care for older persons with disabilities.

Table 14. Older persons with disabilities in some Arab countries

Country	Number and proportion of older persons with difficulties and disabilities	Hearing difficulties	Mobility difficulties	Visual difficulties	Mental difficulties	Physical difficulties
Algeria	36,723					
Kuwait	5,844/6.69 per cent	879	1,430	932	170	2,391
Lebanon	29,509/8.15 per cent					
Morocco	47.8 per cent/33.7 per cent	65.2 per cent	60.6 per cent	53.8 per cent		
Oman	7,555/3.82 per cent	1.65 per cent		6.72 per cent	1.75 per cent	
State of Palestine	14.6 per cent (2017)	3.9 per cent	8.9 per cent	5.5 per cent		
Syrian Arab Republic	4.4 per cent					
Tunisia	58,290	8.80 per cent	24.35 per cent	22.60 per cent	3 per cent	4.80 per cent

Source: ESCWA, based on country reports.

B. Health coverage

The concept of the life cycle focuses on preventive activities to improve the health of older persons and equal access to health care services to maintain good health as they age. This concept includes activities focused on promoting independence, preventing and delaying disease and disability, providing treatment for chronic diseases and physical and mental rehabilitation of older persons, facilitating the integration of older persons with disabilities, improving their quality of life, facilitating their performance in life tasks, providing palliative care, taking all measures to achieve equal

distribution of health and rehabilitation resources and services to older persons, and ensuring that poor older persons and those from disadvantaged areas such as rural and remote areas can enjoy resources and services, including access to affordable basic medications.

Measures taken to provide therapeutic, preventive and diagnostic services for older persons vary from country to country, and table 15 presents services in the reporting countries and the programmes under which services are provided, together with the proportion of beneficiaries and the scope of coverage.

Table 15. Health coverage and proportion of older beneficiaries

Country	Percentage of older person beneficiaries	Services	Programme coverage	Scope of coverage
Algeria	All older persons	Free health coverage for all types of diseases	Social security	Primary and secondary care, hospitalization and medications
	8 per cent		Solidarity allowance	
Iraq		Health care, medications for chronic diseases and drug cards		
Jordan	85 per cent	Treatment and operation costs in addition to medications	Health insurance with the Royal Medical Services Ministry of Health programme	
Kuwait	100 per cent	All medical and medical support procedures and medications	Health insurance and Afya health insurance card	Comprehensive health coverage
Lebanon	64.8 per cent	Medical and hospital care	Chronic disease programme Palliative care programmes	

Country	Percentage of older person beneficiaries	Services	Programme coverage	Scope of coverage
Morocco	67.8 per cent	Treatments associated with serious or chronic diseases, hospitalizations	Compulsory health insurance programme (AMO)	Basic compulsory coverage
	14 per cent		Medical Assistance Plan (RAMed)	
Oman	51.9 per cent		Senior Care and Community Health Programme	49.8 per cent primary care and 22.2 per cent secondary care
State of Palestine	75 per cent	Primary health care services		
Saudi Arabia	100 per cent	Comprehensive and integrated preventive, therapeutic and rehabilitative health services	Elderly Care Program	Primary therapeutic services
Sudan		Health service package consisting of home care to medication review to address mobility problems, provide integrated healthy food for older persons and provide regular screening for all chronic diseases that accompany ageing	Ministry of Health programme	100 per cent
Tunisia	4 per cent	Free and low-cost treatment	National Programme for the Health of Older Persons, 1995	Comprehensive health coverage
	43 per cent	Health insurance benefits		
Yemen	39 per cent	Partial health coverage	Health Insurance Agency	Almost non-existent

Source: ESCWA, based on country reports.

C. Primary health care and neighbourhood services

Primary health care is a very effective way to address the main causes of health problems, and a good investment that reduces health care costs and hospital admissions by promoting prevention and early detection of diseases and responding to community needs.

Arab countries provide primary health care services and neighbourhood services in different ways, as shown in table 16. Most countries have made progress in promoting health, which is evident in the fact that all participating countries support primary health care centres and preventive medicine.

Table 16. Primary health care and home care

Country	Primary health care and home care
Algeria	Provision of neighbourhood services through direct work in locations where older persons are present and advocacy and awareness programmes on older persons' issues, which has improved the situation of older persons in their homes.
Egypt	Thirty older person service offices, which serve older persons in their homes, operate nationwide. The "Older Companion" project in 2019.
Iraq	Primary health care programme. Promotion of community support at home and in older person-friendly centres. Health visitor programme.
Jordan	There are 47 nursing homes and 85 medical centres that provide 24-hour medical services. The organization Al Malath Hospice also provides free home palliative service for cancer patients, including older persons. There are 9 government health centres friendly to older persons, two of which are in rural areas.
Kuwait	Provision of medical equipment, diapers, all kinds of supplies and free home visits. Provision of home care services through a mobile unit that provides treatment and preventive and emergency services. Ensuring the safety of the home environment and the safety of older persons. Provision of primary care services in each region and a major hospital in each province with all specialties needed by older persons.
Lebanon	The older person palliative care programme and centres provide specialized care for sick older persons, relieve pain and suffering, support families and provide necessary medical services.
Morocco	Care for older persons in primary health care facilities. Work to implement the national plan of action "For healthy ageing". The National Health Insurance Agency contributes to the process of creating a smart health card.

Country	Primary health care and home care
Oman	Health care system in care centres and at home (active ageing in the family). Mobile physiotherapy units.
State of Palestine	Primary health care programmes are available in health centres and clinics under the Ministry of Health, and programmes are implemented by NGOs, the Palestinian Red Crescent and UNRWA. Mobile medical services are available from health-related NGOs, such as the Palestinian Medical Relief Society and the Union of Health Work Committees. The Red Crescent provides home services to older persons at 100 locations. The Ramallah Municipality Forum of Expertise runs a home visit programme to provide psychosocial support to older persons living alone.
Saudi Arabia	Primary health care centres are available in all cities and villages. The Ministry of Health and the Ministry of Human Resources and Social Development provide home care to older persons.
Sudan	The health service package includes home care to protect older persons from injuries caused by falls in their homes.
Tunisia	The Mobile Teams Programme provides social and health services through a field outreach approach to older persons who lack family support to provide them with all their needs.
Yemen	Almost non-existent.

Source: ESCWA, based on country reports.

The Government in **Iraq** provides services through health care centres for all groups. It has launched mental health training programmes and primary health care programmes with low-cost medications for older persons. It has also created mobile medical teams called health visitors for families of older persons.

In **Saudi Arabia**, primary health care centres for older persons are available throughout the country, including in 40 remote areas, and are tasked with monitoring their health conditions and facilitating their needs. They provide early detection services for depression and cognitive and memory disorders, and detected cases are

then referred to specialized hospitals. Older persons are also provided assessments of their basic daily functions and their hearing, vision and cognition in order to discover common chronic diseases. The Ministry of Health and the Ministry of Human Resources and Social Development are also working to provide home care to older persons at home through the mobile clinics initiative, which seeks to provide health care services in remote and peripheral communities (approximately 409 residential communities). These mobile clinics are equipped with basic equipment to provide high-quality efficient health services in remote locations using qualified and trained staff.

Box 5. Saudi Alzheimer's Disease Association – A pioneering experience in Saudi Arabia

The Saudi Alzheimer's Disease Association was founded to break the silence and shame; shed light on Alzheimer's disease; build public awareness to serve patients and their families; help decision makers understand the disease, its impacts and the costs of treating it; and provide care to patients and their care providers. One of the Association's most prominent efforts is to provide an opportunity on its website to register for e-learning to learn about Alzheimer's patients and the best ways to work with them. The Association has a development and strategic support programme for Alzheimer's disease that includes several tracks:

Masa'i track: Based on the request by the Association's Board of Directors to include Alzheimer's patients in the health insurance card, the Council of Health Insurance made extensive adjustments to the schedule of the cooperative health insurance policy, among them the addition of nine new covered cases, including the cost of treating Alzheimer's patients. The Association has pushed the domestic medical sector to establish five specialized clinics for the disease and has established a national register and database of patients with the disease in which more than 30 specialized centres participate, through a cooperation agreement between the Association and King Faisal Specialist Hospital, in addition to other efforts to this end.

Eraq track: One of the most notable efforts is a global award on behalf of Prince Sultan bin Abdulaziz for prominent charity work on Alzheimer's disease in order to encourage such activities.

Mu'in track: This track consists of providing workshops and training courses to empower care providers of Alzheimer's patients within Saudi cities and provinces, including covering the rents of families of low-income Alzheimer's patients and providing free psychosocial and legal support.

Tiryaq track: Support for specialized medical care, medical devices, free visits to clinics and medications.

Mubader track: This track consists of promoting and spreading a culture of volunteerism, including through initiatives such as the Mzwalah Initiative, the first Arab voluntary initiative of its kind, launched by members of the Saudi Alzheimer's Disease Society to harness their resources and potential in order to raise awareness of Alzheimer's and educate the community about the suffering of their families and take up their cause as they seek to improve their communities and leverage new sources of income to enable sustained charitable work.

Wa'in wa-Ra'in track: International representation, training of doctors and health practitioners and other efforts.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Saudi Arabia.

In **Kuwait**, the Ministry of Health has established the Department of Health Services for Older Persons to develop plans and physical, psychological and social health services and establish health centres throughout the country with all the specialties needed by older persons, including a programme of visits, home care and mobile care for older persons.

In **Lebanon**, developmental service centres of the Ministry of Social Affairs and primary health care centres of the Ministry of Public Health

provide health care services throughout the country. These centres coordinate home visits in cases of emergency or when an older person is unable to travel to the centre. The Ministry of Social Affairs has also begun to consider providing palliative and specialized care to older persons through cooperation with an association in this area, in addition to specialized services to improve the lives of older persons by identifying necessary treatments, providing support and guiding older persons' families in how to accept their situation and take care of them.

In **Oman**, primary health care services are provided in all health institutions across the country, with one health centre per 10,000 people to facilitate access. In addition, community nursing care covers 39,438 of 75,398 older men, and 45,308 of 87,877 older women. Prior to 2019, this care was part of a home visit programme, but has since been integrated with the public health programme.

Morocco has established 3,005 primary care institutions, with 2,038 in rural areas and the rest in urban areas, an average of one for every 11,600 inhabitants, as well as mobile medical services to reach the regions. There are also mobile medical services for the population, including older persons, in all remote areas, a psychiatric unit and new geriatric units in several hospitals and a day centre for Alzheimer's patients in Rabat.

In **Algeria**, the solidarity sector monitors all fragile situations in isolated areas through local teams and through following up on notifications to public social affairs and solidarity offices via the digital applications of the Ministry of National Solidarity, Family and Women's Issues, to take necessary measures on a case-by-case basis. Between 2017 and 2021, 216,740 older persons benefited from targeted activities, escort services, social mediation and outreach activities.

In **Tunisia**, the Ministry of Health is working to mitigate health risks and extend life without disability by providing health services to older persons through its treatment and hospital institutions and by providing programmes such as the National Programme for the Health of Older Persons, created in 1995.

In **Jordan**, there are 47 home-based nursing centres and 85 24-hour medical centres, all

private and licensed by the Ministry of Health. The organization Al Malath Hospice also provides free home palliative service for cancer patients, including older persons. At year-end 2015, there were nine government health centres friendly to older persons, two of them in rural areas (Sakhra and Rajeb in the Ajloun Governorate).

In the **Sudan**, free health services include home care to protect older persons from injuries caused by falls in their homes.

In **Egypt**, the Government runs service offices to provide older persons in their homes with services such as meal delivery, health care, social welfare, assistance throughout the home and help in performing various services at government offices. There are 30 such offices nationwide. It also launched the "Older Companion" project in 2019, which aims to maintain family cohesion and links by providing home care to older persons within their families as an alternative to institutional care, through coordination with partner NGOs to provide services at affordable prices. In addition, a system and integrated database have been developed to provide the older companion service.

D. Training of health professionals

The growing ageing population requires more specialized health care for older persons and more specialists in geriatrics and gerontology. The Madrid Plan of Action emphasized to all countries the need to expand educational opportunities in this area for all health professionals working with older persons and focused on the importance of expanding educational programmes on health and older persons for social workers, service providers

and informal caregivers such as older persons' families and others around them. All Arab countries suffer from a severe shortage of individuals specialized in geriatrics in the medical and nursing systems, and the majority of countries make up for this shortage through specialized training for caregivers.

In response to this challenge, Arab countries have started various educational programmes to prepare specialized staff, begun to study geriatrics in a few countries such as Egypt, Lebanon, Morocco and Saudi Arabia and instituted specialized training for workers in many countries, as shown in table 17.

Table 17. Health professional training programmes

Country	Training programme
Egypt	<ul style="list-style-type: none"> • The "Older Companion" project, which trains young people of both sexes to work as companions for older persons and provides them with employment opportunities • Training of caregivers in care homes as part of a project to develop and increase the efficiency of social welfare institutions • Specialized programmes and training courses for employees of rehabilitation bodies under the supervision of the Ministry in order to improve the quality of the services and activities they provide to persons with disabilities
Iraq	<ul style="list-style-type: none"> • Theoretical and practical training on geriatrics for family and community medicine students • Mental health training programmes
Jordan	HelpAge International initiative to train girls in different governorates in how to interact with and care for older persons
Kuwait	Educational workshops to train doctors to provide better medical services for older persons Compulsory training of Kuwaiti board doctors in the geriatrics department of government hospitals and external missions to study geriatrics in foreign universities
Lebanon	<ul style="list-style-type: none"> • The geriatrics specialty is available in Lebanese universities, and by 2016, there were 14 geriatricians • Specialized and comprehensive training programme on the concept of quality and how to apply it in older persons institutions, 2017
Morocco	Geriatrics was introduced into nursing curricula in 2002 and in 2014 the university diploma in geriatrics at the Faculty of Medicine and Pharmacy was created, in addition to courses for doctors and nurses on the prevention and treatment of geriatric diseases
Oman	Five-day regular training provided by the Omani Health Programme to medical and nursing staff to ensure the best care for older persons
Saudi Arabia	<ul style="list-style-type: none"> • The specialty of geriatrics is available through a training programme provided by the Saudi Commission for Health Specialties • A fellowship programme to train specialists from departments of internal medicine and departments of family medicine to obtain a fellowship in the specialty of "medicine for older persons"

Country	Training programme
Sudan	<ul style="list-style-type: none"> • Workshop titled “The role of social protection systems in the care and protection of the elderly” • Training workshop on tools and methods for dealing with older persons amid crisis situations (such as the COVID-19 pandemic) • Training workshop on integrating issues of older persons and persons with disabilities into public policies and development plans in coordination with ESCWA
Tunisia	<ul style="list-style-type: none"> • Training workshops on “The unspoken abuse of older persons” for caregivers and staff of older persons’ care institutions • The Ministry of Public Health supports continuous training targeting all health professionals, with the National Institute of Public Health, the Department of Basic Health Care and regional health departments playing an important role in training and developing the professional competencies of medical and paramedical personnel, in addition to the active contribution of the Tunisian Geriatric Society • The inclusion of geriatrics in the curricula of higher schools of health and faculties of medicine, dentistry and pharmacy, and the development of a postgraduate certificate in the field by the medical colleges of Sfax, Tunis and Monastir

Source: ESCWA, based on country reports.

Box 6. Family integration and host families – A pioneering experience in Algeria

The family has a central role in providing familial warmth, maintaining the psychological stability of older persons, upholding their dignity and enabling them to thrive amid the effects of old age.

In this vein, to complement institutional support, older persons’ homes are investigating the reintegration of residents into their family environment, and during 2020 101 residents, including 67 women, were reintegrated, despite the exceptional circumstances of the COVID-19 pandemic.

Arrangement with host families

Residents of institutions who have been abandoned by their families and/or those without family ties are integrated into temporary or permanent alternative host families that volunteer to receive older persons to live in a family environment. As a result of awareness and advocacy activities on the issues of older persons in Algeria and the spread of social awareness among many families and people about the need to address their issues and work to care for and protect them, many families were interested in hosting older persons, with 96 persons registered with host families in 2020, including 76 women.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Algeria.

5. Ageing in place and the enabling environment

Adequate housing and a friendly environment for older persons are key elements for their mental health and ability to age in place. Adequate housing and a friendly environment require safety, easy mobility and the means to take care of the home, contributing to emotional and psychological reassurance and promoting the health and well-being of older persons in their surroundings, and these factors should be integrated into policies and programmes.

The general conditions in Arab countries, coupled with the migration of families and the decrease in the number of young people as a result of wars, have posed significant challenges in this context, as the number of older persons living in isolation in rural areas instead of with extended families has increased, and these older persons often lack adequate means of transport and assistance. Thus, providing a friendly housing environment and appropriate transportation for older persons is a major challenge in order to ensure their independence, protect them from isolation and provide conditions for their integration into their communities.

This section deals with the living arrangements of older persons, from their homes to day clubs to care centres, as well as the external environment in which they live, the measures taken in some Arab countries to allow older persons to remain in their communities and age in place and the role of the media in shedding light on older persons and changing stereotypes

of them, based on the information received in country reports. This section considers the mechanisms and actions taken to address neglect, abuse and violence against older persons and examines policies and programmes to protect them.

A. Living arrangements of older persons

Most older persons in Arab countries live in their homes, and the prevailing religious teachings, traditions and social concepts affect families' decisions to move their parents into care homes even in cases of severe disability. The figures from country reports confirm this trend and show that relatively few older men and women live in care homes. Although the number of care homes in various Arab countries has increased, there is still little information on them, the care they provide and their quality, and quality standards are absent in the majority of homes. These standards have been adopted in Lebanon, but they are not applied. It is striking that in most countries there are more older married men than older married women (table 18), and more older widows live alone than do older men, putting older women at greater risk of isolation than men. Day clubs may help protect older people from isolation, but they are only available in Egypt, Jordan and Lebanon, and home care is still not available in many countries.

Table 18. Marital status

Country	Older persons Married		Older persons Widows	
	Male	Female	Male	Female
Lebanon	86.8 per cent	47.2 per cent	10 per cent	46.6 per cent
State of Palestine	93.3 per cent	53.9 per cent	5.2 per cent	37 per cent
Saudi Arabia	46 per cent	24 per cent	2 per cent	25 per cent
Tunisia	91 per cent	52.53 per cent	6 per cent	42.6 per cent

Source: ESCWA, based on country reports.

Living arrangements and procedures in place in each country to encourage older persons to remain in their homes vary (table 19).

In **Algeria**, for example, the treatment and recovery of older persons in their homes is guaranteed through Law 18-11, article 87, and provisions for subsidies and care are provided pursuant to Executive Decree No. 16-294 of 2016. There are also day centres for older persons living at home in need of social and psychological assistance and accompaniment. Algeria is also working to reintegrate residents into their families or host families through family and social mediation. Host families are alternative families (box 6) that volunteer to host older persons to live in a family setting. Efforts in Algeria to create an enabling environment to facilitate the lives and mobility of older persons also included the allocation of

green spaces and public spaces to them along with help accessing them. As part of the next five-year plan of action, the national solidarity sector is a national programme to strengthen the supportive and age-friendly environment by improving and adapting public facilities and accompanying and enabling older persons to access various services.

Saudi Arabia, through the National Plan for Older Persons, is integrating older persons into society by promoting their respect and safety and providing them with home health care services. The Ministry of Health has also launched a programme of support offices to provide logistics services and prepare all health facilities to be friendly for older persons and help them reach the highest levels of independence.

Table 19. Enabling environment

Country	Transportation measures	Friendly engineered environment	Care homes	Home care	Home management services	Priority reception in public offices	Other measures
Algeria							Alternative Families Programme
Egypt							Creation of day clubs "Older Companion" Project
Iraq							
Jordan							
Kuwait							
Lebanon							Creation of day clubs
Morocco							
Oman							
State of Palestine							
Saudi Arabia							
Sudan							
Syrian Arab Republic							
Tunisia							Family Deposit Programme

Source: ESCWA, based on country reports.

In **Kuwait**, home health care services are provided through a mobile unit, and the safety of the home environment and the safety of older persons are ensured through a single home visit and home care programme jointly implemented by the Ministries of Health and

Social Affairs. The Kuwaiti Government is also working to make public places easily accessible, ensuring that older persons benefit from public services by giving them priority and equipping public transport for them.

In **Lebanon**, the Government and civil society organizations have taken several steps to encourage older persons to remain in their communities. For example, there are about 15 day clubs that provide integrated day services to promote the independence of older persons through home visits, food, recreational activities, personal hygiene, shaving, etc. There are also palliative care centres that provide specialized care and support for older persons through home visits as well as guidance to their families on accepting their status and providing care for them.

In **Oman**, the National Programme for the Care of the Elderly has worked under the banner of “active ageing in the family” to provide home medical visits and training for caregivers. The ministries concerned also prepare the house in accordance with the older person’s needs, such as by building an annex and providing material and moral support to him or her, whether with his or her relatives or an alternative family. They are provided with facilitated access to health facilities and public places through dedicated parking spots and ramps, and given priority in buses and road and sidewalk design to suit their needs.

In the **State of Palestine**, financial assistance is provided to families providing care for older persons, in addition to various trainings for caregivers, including children of older persons and others. Charities provide specific services to those living in their homes alone or with their families to integrate them into society and positively impact their physical and mental health. The Red Crescent also provides health care to a large number of older persons.

In **Morocco**, the Ministry of Solidarity and Social Inclusion attaches great importance to older persons remaining in their homes and to encouraging their care and integration in the

family environment through remote care to meet their needs and help families and organizations working in the field of home care. The transport network and public facilities have been equipped for older persons and persons with disabilities through the “Accessible Cities” programme to diagnose and eliminate physical barriers.

In **Yemen**, older persons prefer to live with their families as a result of the low quality of services in social care homes, and due to customs, traditions and religious teachings. There are still shortcomings in operational policies and procedures for making public places safe and accessible to older persons.

In **Tunisia**, a family deposit programme dating back to 1996 provides older persons without familial bonds with care in alternative families in exchange for a monthly grant. In order to facilitate their mobility and ability to take care of their affairs, older persons and persons with disabilities are given priority service at public and private agencies and companies as well as designated spaces on public and private transport.

All Arab countries have taken measures to keep older persons in their homes in line with the concept of ageing in place, and where this is not possible, they have found alternative families or established and equipped care homes for older persons. The paragraphs below summarize information on these measures as gleaned from country reports.

In **Algeria**, the Ministry of National Solidarity, Family and Women’s Affairs has improved and created older persons’ homes to be a friendly and supportive environment. Nevertheless, the number of residents in these homes has decreased, from 2,185 in 2010 to 1,993 in 2015 and 1,444 in 2021.

In **Iraq**, 361 older persons live in care homes, and these homes have sections for persons with difficulties and disabilities. They receive special care and monthly financial assistance and are covered by the social protection network.

In **Kuwait**, there are only 19 older person residents of care homes, but despite this relatively small number, the Kuwaiti Government is equipping nursing homes as needed to meet older persons' needs.

As in Kuwait, the number of residents in **Oman** is low, with only 36 older persons living in care homes, and the country has been keen to promote a positive image of older persons by promoting community awareness, ensuring the best care for older persons and persons with disabilities, whether in their homes or in care homes, and providing financial and moral support to them and their caregivers. Oman has trained family caregivers and personal assistants through workshops and educational programmes. Monthly financial assistance is disbursed to caregivers and exemptions are provided from the recruitment fees for domestic workers.

The situation varies in terms of numbers in **Lebanon**, where some 2,000 older persons live in the Ministry's four centres and 32 contracted institutions.

In the **State of Palestine**, 600 older persons live in care homes. In **Morocco**, Ministry of Health statistics in 2018 showed that 5,885 older persons, including 2,328 women, were living in the 59 social care institutions. In **Yemen**, 200 older persons live in care homes, and this number has decreased over the course of the war.

In the **Syrian Arab Republic**, there are currently 20 homes operating in cooperation with civil society, with Damascus Governorate having nearly 70 per cent of them, both private and public, while Aleppo is ranked second. The Ministry of Social Affairs and Labour oversees social care institutions for older persons and persons with disabilities in various provinces and provides them with all integrated care services (health, social, physical therapy, psychological support programmes, recreational activities and programmes).

In **Jordan**, there are 47 home-based nursing centres and 85 24-hour medical centres, all private and licensed by the Ministry of Health. The organization Al Malath Hospice also provides free home palliative service for cancer patients, including older persons. At year-end 2015, there were nine government health centres friendly to older persons, two of them in rural areas.

Box 7. Construction of a treatment garden in a hospital – A pioneering experience in Algeria

The Ministry of Environment's initiative to establish a treatment garden within a hospital has been successful and should be more widely discussed. On 27 April 2021, a contest to create the best garden was announced between older persons' homes as a means of creating an atmosphere of friendly competition and working to improve the environment within them and find alternative ways for older persons to stay active. The contest concluded in mid-September 2021, when the winning institutions were announced on the International Day for Older Persons. The experience was pioneering in terms of the improved environment in homes, the creation of quiet green spaces and how older persons worked together to contribute to the process.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Algeria.

Box 8. Quality standards for older persons' institutions – A pioneering experience in Lebanon

The Ministry of Social Affairs launched quality standards for older persons' institutions in Lebanon in 2017, developed in collaboration with UNFPA, and worked to prepare a comprehensive training programme built around the concept of quality and how to implement it in older persons' institutions. The programme seeks to promote the creation of plans to improve the quality of services for older persons at residential institutions contracted by the Ministry and provides social service workers with knowledge about the psychological, health and social aspects of ageing, equipping them with skills to develop and follow up on the implementation of quality improvement plans at institutions. Work has also been done to develop a specialized form based on standards in order to assess the status of older persons' institutions contracted by the Ministry before starting training courses. The training programme is divided into two phases, the first of which includes general training on the concept of quality, ageing and the reality of older persons in Lebanon, while the second consists of specialized training on how to prepare a quality improvement plan. The training for the first phase was conducted in November 2018. The standards in this training are a road map to improve the quality of services provided in older persons' institutions in Lebanon, but have not been adopted and training has not been completed due to a lack of financial resources.

Source: National Report on the Fourth Regional Review of the Madrid International Plan of Action on Ageing – Lebanon.

In the **Sudan**, the Government provides care for older persons without a breadwinner, with two nursing homes in Khartoum State as well as homes in other states to improve the situation of older persons.

In **Egypt**, 165 social care institutions for older persons (older person homes) are available within 22 governorates, benefiting some 3,000 older persons. There are also older persons'

clubs, which are day centres providing various services and social, health and cultural programmes to older persons, with a total of 37,000 beneficiaries. The Ministry of Social Solidarity is working to protect and provide shelter and social, psychological and health care for older men and women who are not healthy, are unable to work and have no shelter through 22 institutions with some 800 beneficiaries.

B. The role of the media in improving the image of older persons in society

The media play a pivotal role in guiding public opinion and framing people's attitudes, opinions and beliefs. The media contribute to perpetuating negative stereotypes about older persons, often portraying them as weak or helpless and as a burden on society, rather than highlighting their competencies, strengths and contributions to the development process.

The Madrid International Plan of Action stressed the importance of the role of the media in changing the stereotype that has stuck with older persons. In this context, different countries and the media have taken a variety of measures; Algeria for example is working to complete its policies to improve the situation of the older persons through information programmes aimed at introducing and promoting relevant governmental efforts to the media. It is also preparing a communication plan to raise awareness of older persons' issues and the importance of protecting them and changing stereotypes about them as a national duty shared by all segments of society from the family to civil society associations and all relevant governmental agencies and bodies.

Many Arab countries, such as Lebanon, Saudi Arabia and Tunisia, have used social media to

help change negative stereotypes about older persons, promote active ageing, advocate for older people's issues and combat all forms of abuse and violence against them. In Oman, the Ministry of Education, the Ministry of Health and civil society institutions are implementing awareness-raising and educational programmes for all groups of society on the importance and role of older persons in order to instil a positive image of them. International and national days for older persons, such as the International Day for Older Persons, are celebrated on 1 October.

Despite the increase in programmes focused on older persons, there are not unified national information strategies in all countries to break negative stereotypes of older persons.

C. Older persons, abuse and discrimination

Elder abuse and violence take many forms, such as physical, psychological, moral and economic and occur in various geographical, cultural and social environments. As the physical and mental abilities of older persons decline, the effects of violence on them worsen and, in conjunction with shame, prevent them from reporting and seeking help. Older women are at greater risk of ill-treatment, due to certain traditional practices and discrimination against them. This section considers the mechanisms and actions taken in various countries to address neglect, abuse and violence against older persons specifically and examines policies and programmes to protect them.

In **Algeria**, any injury of any kind can be reported by anyone through a digital service. **Iraq** also has measures to protect older persons from harm through awareness sessions against violence and criminal penalties against anyone who abuses

older persons, who can be reported by victims themselves or others through social media, NGOs and media channels.

In **Saudi Arabia**, a plan has been developed to protect vulnerable groups by criminalizing violence and abuse, creating a mechanism for reporting through a hotline and taking corresponding measures. The Committee for Older Persons has also developed preventive plans and awareness-raising programmes to ensure the right of older persons to live in dignity and to encourage families to care for older persons, as well as developing methods for care in specialized nursing homes. Social and family counselling services are also provided to those in need or the case is referred to an administrative authority or security agency for rapid intervention, and the National Health Committee has been set up to deal with cases of violence and abuse.

In **Kuwait**, any incident of violence or neglect can be reported, with violations punishable by imprisonment or fines. This issue is also addressed through social media discussions and lectures to raise awareness of the role and status of older persons in society. Kuwait has also focused on policies to enhance the image of older persons in society, whereby in addition to protecting their civil, political and social rights, their integration into society is being worked on according to their abilities and health status.

In **Lebanon**, the protection of older persons is guaranteed by law along with other vulnerable groups. Cases of violence are encouraged to be reported wherever they occur, via the website of the Internal Security Force or a dedicated hotline. The Ministry of Social Affairs has trained task forces to identify and assist victims of abuse and violence, and the Ministry of

Information has carried out awareness campaigns to reduce this scourge.

Oman has supported the rights of older persons to protection by encouraging reporting, in person, via the committee's website or via WhatsApp, any abuse of their rights, with violators punishable by imprisonment and fines.

In **Morocco**, the Ministry of Solidarity, Social Inclusion and the Family has fought all forms of violence and developed a reporting mechanism to provide direct support. Digital platforms have been introduced for rapid response by concerned courts, as well as a mobile phone application with geotracking which has been shown to be effective in protecting individuals from danger. These measures have been accompanied by awareness campaigns to establish a positive image of older persons and an appreciation of their role in their families and society.

In **Tunisia**, Basic Law 58 of 11 August 2017 on the elimination of violence against women is a strong support for protecting older women from abuse and violence. The Law provides that "the State undertakes to inform women victims of violence and is committed to developing national policies, strategic plans and joint or sectoral programmes with a view to eliminating all forms of violence against women". The Law also guarantees women victims of violence certain rights, the most important of which are health and psychological check-ups, social companionship and, where appropriate, care by government institutions and associations, including listening and immediate shelter.

The **State of Palestine** is committed to protecting older persons from all forms of

violence and has clear mechanisms for monitoring and reporting cases of violence against older persons. Any person who commits violence against an older person is subject to prosecution under applicable laws. In **Yemen**, anyone who has bodily assaulted another person, regardless of the type of assault, is punishable by imprisonment and a fine. The Government has furthered the fight against abuse by raising awareness of the importance of appreciating older persons and the need to protect them from violence and harness energies in service of their issues and their integration in society.

In the **Syrian Arab Republic**, work is under way on the domestic violence law, which allocates an important space for cases of violence and exploitation within the family, including against older persons.

In **Jordan**, there is mutual and ongoing cooperation and coordination between the Ministry of Health and the National Centre for Human Rights on the one hand and the Ministry of Social Development on the other to monitor any violations in nursing homes and take necessary action in response. The Family Protection Department of the Public Security Directorate has set up a hotline to report cases of abuse and violence and publishes a monthly bulletin.

Although there are mechanisms for reporting cases of violence against older persons in various countries, there is generally no dedicated legal protection for older persons. The protection of older persons falls under domestic violence laws in some countries or under general laws in others, as shown in table 20.

Table 20. Anti-violence law in selected Arab countries

Country	Anti-violence law
Algeria	Law 10-12 of 2010, in particular articles 10 and 11
Iraq	Penal Code No. 111, article 383 of 1969
Kuwait	Law No. 18, article 19 of 2016
Lebanon	Law No. 293/2014
Oman	Royal Decree No. 6/2021
Saudi Arabia	Royal Decree No. M/52 of 15/11/1434 A.H. (21 September 2013 A.D.)
Tunisia	Basic Law No. 58 of 2017
Yemen	Crimes and Penalties Act No. 12 of 1994

Source: ESCWA, based on country reports.

6. Policy recommendations to accelerate implementation of the Madrid International Plan of Action on Ageing

After reviewing the national reports submitted by the 14 countries that participated in the fourth regional review and appraisal of the Madrid International Plan of Action on Ageing and their progress in implementing the

recommended goals, this section presents policy recommendations on the issues and rights of older persons to ensure their protection, dignity and participation in development efforts.

Area	Focus	Policy recommendations
Institutional structures	Institutional arrangements	<ul style="list-style-type: none"> • Develop a follow-up and evaluation tool with indicators to monitor each country's progress in implementing the Madrid Plan of Action on Ageing. • Set 65 as the unified threshold for older age, due to the increase in life expectancy at birth, and link retirement to that age to allow older persons to continue to work longer, especially since they now enjoy better physical and cognitive health. • Activate the role of national committees and bodies for older persons' affairs to include all government and non-governmental sectors working on older persons' issues, in addition to older persons themselves, and give them an executive role that enables them to propose policies and play an evaluation and oversight role in addition to monitoring their own budgets.
	National policies and strategies	<ul style="list-style-type: none"> • Establish laws for older persons that define and protect their rights. • Activate partnerships and coordinate between sectors working on older persons' issues in each country to unify efforts. • Develop and implement national strategies and action plans to advance ageing issues and allocate a budget for job creation.

Area	Focus	Policy recommendations
	Data, research and information	<ul style="list-style-type: none"> • Conduct research on older persons and network with universities, experts and academics to address new topics. • Establish an observatory for older persons in the Arab world to obtain statistical data and indicators and leverage and develop regional success stories.
Older persons and development	Social protection policies	<ul style="list-style-type: none"> • Build more comprehensive social protection systems to secure income for older persons, including expanding coverage and reforming the pension system to include more older persons, particularly women and workers in the private and informal sectors. • Include older persons in policies and programmes on poverty reduction.
	Social inclusion and active ageing	<ul style="list-style-type: none"> • Develop policies that promote the economic activity of older persons; leverage the pioneering experiences of some Arab countries by developing a database of the competencies and skills of older persons and their interest in using them to contribute to society; and amend laws that hinder older persons' ability to engage in economic activity. • Promote the participation of older persons in social and political life and give them an opportunity to integrate effectively and allow new generations to benefit from their experiences.
	Older persons in crisis situations	<ul style="list-style-type: none"> • Recognize and integrate the needs of older persons into emergency planning and disaster preparedness, response and recovery and develop mechanisms that contribute to strengthening the role of older persons in building post-war societies.
Health services and quality of life of older persons	Primary health care and neighbourhood services	<ul style="list-style-type: none"> • Promote home care and palliative care services and ensure their quality and availability to all older persons.
	Chronic diseases and physical and mental health	<ul style="list-style-type: none"> • Develop mental and psychological health policies and programmes for older persons for prevention, early detection and appropriate treatment. • Promote the independence of older persons with disabilities and work to provide them with opportunities to participate in social life.

Area	Focus	Policy recommendations
	Training of health professionals	<ul style="list-style-type: none"> • Encourage the establishment of departments for gerontology and geriatrics in universities to develop a specialized cadre of doctors, nurses and other professionals to care for older persons.
Ageing in place and the enabling environment	Living arrangements of older persons	<ul style="list-style-type: none"> • Work to develop housing and a built environment friendly to older persons that enhance their independence and activity within their community and promote the principle of “ageing in place”. • Develop transport infrastructure in terms of access and times that are suitable for older persons. • Establish laws and standards for quality of long-term accommodation in care homes to ensure the quality of services. • Establish day clubs and pass a law on their establishment and operations. • Leverage technological development to facilitate all administrative transactions and promote a policy of priority service for older persons.
	Older persons, abuse and discrimination	<ul style="list-style-type: none"> • Develop and enforce laws to combat violence and abuse of older persons, and develop support and integration programmes for survivors, especially women.
	Changing stereotypes	<ul style="list-style-type: none"> • Raise public awareness of older persons’ issues and improve their image through the media and social media. • Introduce older persons’ issues into educational curricula to change stereotypes among new generations.

