INTERNATIONAL DAY OF OLDER PERSONS

Taking care of our senior citizens

Мочикн Мантав

T is estimated that by 2050, about one in every four persons living in Bangladesh will be over the age of 60. That is a major chunk of the population: a population which will need accessible health facilities for the ailments that accompany age. There will be need for care facilities, and easy to use public transport, support from the community, and an understanding that we must do every thing we can to give them a life which is not one of neglect and apathy. Now, for those who can afford it, there are private homes, expensive hospitals, cars; they have unfettered access to the services required to live a comfortable retirement. But what about those, and they are the majority, who cannot afford to do so? Surely, our constitutional promise to provide social security to the elderly needs to be as inclusive as possible. And yet, the challenges of old age, and their care is an issue that is either talked of in purely sentimental tones, or not at all.

Growing old is inevitable. With all the progress in development and rapid urbanisation, our old familial support structures are all but gone. What is going to replace these structures? The government policies and programmes in effect are too little to be sustainable, while private facilities are mostly beyond the reach of those most-deprived. These leave the elderly in a position of neglect, where they cannot get access to the healthcare they need, or the support they deserve.

The United Nation's International Day of Older Persons is a reminder for us that the issues affecting the elderly, from the medical to the social, are concerns for us all. This year, the theme for the observation is: Take A Stand Against Ageism. Currently, about 7.7 percentage of the population of Bangladesh are elderly according to the Bangladesh Bureau of Statistics. Most of these people have no income to be selfdependent. And, even when each of us can contribute to make the country a better living place for the elderly, it is the state policies and interventions we must looks towards due to the economic realities of the country.



to live the with digitity and wellbeing.

The GlobalWatch Index 2015 ranks Bangladesh at 67 in terms of the social and economic well-being of the elderly. Even taking into account that Bangladesh is a developing country and cannot well be compared to the welfare states of Europe, that is a worrying number. Although the think tank cites that the elderly in Bangladesh are relatively content in terms of safety, public transport and civic freedom, compared to its regional neighbours, Bangladesh performs low in the health, life expectancy and income security. This is where the country's social safety-net and welfare policies should be making an impact.

The few schemes in terms of pension that

are currently available for the retired are only for government employees, and constitutes only a "negligible fraction of the total population." (Unnayan Onneshan Policy Brief On Present Social Context and Elderly Population in Bangladesh) The Seventh Five Year Plan of Bangladesh envisioned a comprehensive pension system for the elderly which would include the existing Old Age Allowance (OAA) for senior citizens, a national social insurance scheme. Its stated mission is to build a social security programme that "effectively tackles and prevents poverty and inequality and contributes to broader human development, employment and economic growth." But, gaps and inadequacies remain in the system. The OAA covers

only about 30 percent of the target population, and this too offers a monthly transfer amount of a few hundred Taka per beneficiary per month. "This figure compares poorly with the pension scheme of Nepal – (expenditure of 0.35 percent of its GDP, covering over 70 percent of older population)," writes Bazlul Khondker, an economics professor of the University of Dhaka. (Taking care of our senior citizens, *The Daily Star*, 2015) He also suggests that due to poor targeting over "50 percent of benefits go to non-poor older people and almost a third of the benefits go to those below the age of eligibility". These structural problems are mentioned

in the National Social Security Strategy of Bangladesh too, as it calls for structural and administrative reforms. That is, those who need it the most are not the ones being helped, and corruption and mismanagement remain the norm.

In terms of healthcare, Bangladesh lags behind its neighbours. This is compounded by our complete lack of empathy for the stress and inconvenience of our elderly. Effective infrastructure, such as public healthcare facilities where the elderly can get access to treatment are needed. The Population Reference Bureau (PRB) recommends a prevention approach to the healthcare for the elderly, which calls for encouraging healthy lifestyle choices "that would mitigate chronic diseases or delay their onset."

While Bangladesh has surely taken the right first step in ensuring social welfare of the elderly through its social security policy and the OAA, it is not enough. What is needed is a comprehensive plan which would ensure inclusiveness. And since the issue has not been given enough importance, little attention has been given to the plight of the elderly. But, in preparation of the changing demographics, we must bring effective reform. There have been suggestions of universal pension schemes for all tax-paying citizens after retirement, allocation of elderly cards for access to transportation and low- or no-cost healthcare, increasing budgetary allocation for the OAA, and community based services with the involvement of the private, public and nongovernment sectors. Our public health approach to child nutrition and mortality have been a massive success in the past, so maybe it a similar programme involving WHO's recommended prevention approach may be in order.

And of course, it goes without saying that in the spirit of this year's theme of the International Day of Older Persons, a social change must be encouraged so that in the tide of rapid development, our familial bonds are not overpowered, and our tradition of being there for our ageing family members does not go extinct.

The writer is a member of the editorial department, The Daily Star.

Fighting ageism in Bangladesh

SARAH ANJUM BARI

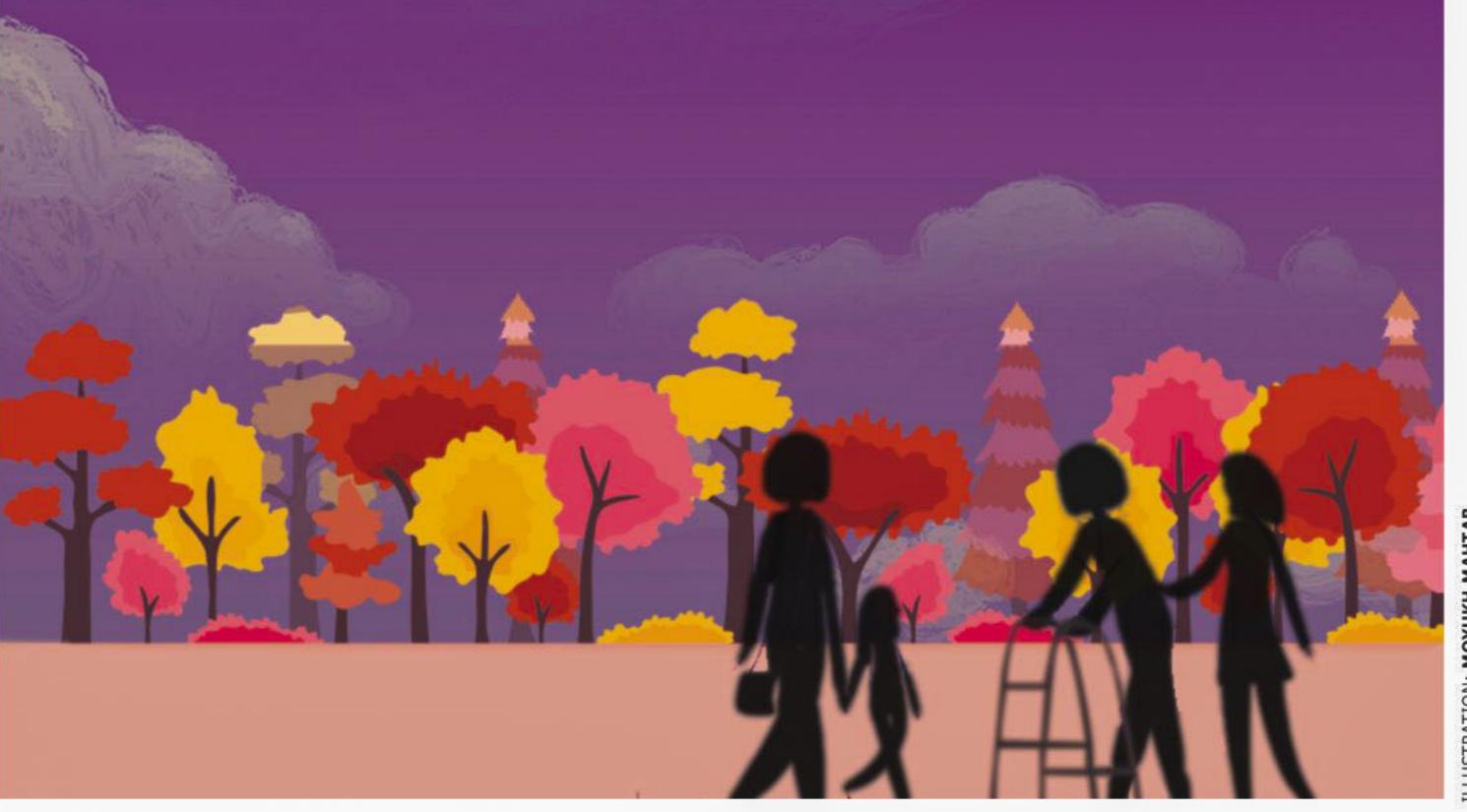
REQUENT illness or even just feeling unwell is a part of aging. In developed countries the wellbeing of its senior citizens is seen as a responsibility of the state and hence they are benefitted worldwide through the various healthcare facilities and pension funds available in most developed countries. Comparatively, the scenario is bleaker in this part of the world although some of our neighbouring countries have made visible strides in supporting their elderly. So when will Bangladesh will catch up?

One of the most comprehensive and impressive social initiatives to assist the elderly has been the UN's Madrid Plan of Action 2002. Created with the view to creating independent, social, and physical support systems for older persons in a host of countries including Bangladesh, the programme specially focuses on facilitating a dignified and pleasurable lifestyle for these people.

Bangladesh defines those above 55 years of age as an older person. With technology, education and successful awareness campaigns spreading health consciousness to even the most rural parts of the country, the average lifespan has increased too. The availability of facilities that could make these prolonged lives comfortable, however, are few and far between. A recent article published in The Daily Star explains how government service holders and other workers above 60, having worked for over 25 years, qualify for retirement pensions based on their last drawn salary amounts. This leaves out the innumerable underprivileged senior citizens who have neither the sufficient income nor the physical capability to support themselves.

This isn't to say there is absolutely no effort to assist senior citizens in our country. "The idea that parents are the heads of the family is still a prevalent culture in Bangladesh," reminds Dr. Muhammed Abu Selim, former Director of the Probin Hospital in Agargaon. That trend still keeps many senior citizens well looked after, some of whom can afford medical assistance at home even if their families do not live with

That's just the top percentile, though. Around 45 million people – one-third of the population – live under the poverty line in Bangladesh, according to the Rural Poverty portal. This takes up almost 36 percent of the rural population and 28 percent of the rural population and 28 percent of those in urban areas. Once again, the figures need reminding that weakening biological systems and the lack of sufficient nutrition rob these people of the ability to work and earn sustenance. More importantly, a large portion of these people are women, who especially in rural scenarios are expected to take



care of household chores well into their old age, irrespective of whether they are capable of it.

Keeping these notions in mind, close to 100 old age facilities have been established in several parts of the country. The more commonly known among them are Givensee Group's Rehabilitation Centre in Gazipur, Swapnolok properties by Subarta Trust and the Bangladesh Association for the Aged and Institute of Geriatric Medicine (BAAIGM) in Agargaon.

Dr. Selim, who is also a Life Member of BAAIGM, elaborates on the basic amenities that the place provides – including, two-bedded rooms costing Tk 4,000 per month, food costing Tk 2,500 per month, general medical services, a library and cultural eve-

Initiatives by other countries

In India, the National Policy for Older Persons started in 1999. In an interesting twist on the concept of simply setting up old homes, the policy aims to assist families with the financial and medical facilities required to take care of older persons – an idea that pays tribute to the tradition of family unity prevalent in our culture. Besides this, pension funds are provided at Rs. 1000 per month per person and food rates are subsidised for the elderly and the marginalised; old age homes and day care

centres have been established, and NGOs and other humanitarian organisations are provided with the funding required to set up their own assistance programmes. Most importantly, the National Mental Health Programme takes care of the often overlooked psychological needs, providing treatments for Alzheimer's and Parkinson's diseases, clinical depression and other geriatric illnesses.

China's National Law on

China's National Law on Protecting The Rights of the Older Persons (1996) provides universal social pensions for all citizens older than 60, similar to that of Nepal.

Indonesia's National Plan of Action carries out older persons' welfare through local and central governments and other organisations in providing educational and skills training besides providing the usual basic services, and the ASLUT or Older Person Social Assistance program provided Rp. 200,000 a month to senior citizens throughout their lifespans as of 2013.

nings on special occasions. The medical wing comprises ENT, dental, eye departments, and the surgeons sitting in on prearranged days carry out minor surgeries. While the Agargaon based organisation is the biggest such facility of its kind, the total cost of Tk 6,500 cannot be afforded by the underprivileged – leaving the initiative open to only middle to upper-middleclass citi-

Catering to such loopholes despite the best interests of these larger organisations, the personal initiatives taken up by affluent citizens go a long way in helping those in need. Started as an informal arrangement in Ramadan of 2015, the Apon Nibash Briddha Asroy Kendro was set up by Syeda Selina Sheli to give shelter to abandoned, isolated and underprivileged older women in Uttara's Chandpara, Uttarkhan area. Tk 200 is charged of those who can afford to pay for the food, and laundry provided at the two storey house. The land was supplied free of rent as a philanthropic gesture by a local member of the residential area, a supervisor named was employed and a cook was hired to prepare the food provided by Khadija Begum, another member who lives in Chittagong. Sizeable contributions are also made by another member, Farida Rita Ahmed. Managed by 52 female members of various age groups who pay for the residents' food items, washing machine, medical bills and other basic needs, the arrangement currently houses 17 women who have been estranged from their families for various reasons. "We try to visit the residents from time to time to personally check on their needs, and try to cater to them through donations paid out by each of us in circulation when we can," said Khuki Begum, one of the members of the organisation.

Research and government bodies across the world are stressing on the rapidly growing aged population of most countries, citing the fall in birth rates due to effective family planning, and increased life expectancy as a result of modern medicine. The mission, however, is not just to let people live longer but lives that are comfortable and meaningful. Bangladesh is slowly making progress in terms of private initiatives that attempt to lend a helping hand, but the situation is still far from ideal. It is up to the state to implement better and more farreaching welfare policies to the elderly, especially to the poor and incapacitated. Technical expertise must be employed at the facilities to provide truly effective assistance to those who need it - with focus on physical and psychological support. Finally, it also lies in the hands of those who are younger to take responsibility of their older fellow citizens.

The writer is a student of English and Economics at NSU, and an intern of the editorial department, The Daily Star.