The impact of the Indian Ocean tsunami on older people

Issues and recommendations
Acknowledgements

The research project was coordinated by HelpAge International with the involvement of network partners HelpAge India, HelpAge Sri Lanka, and InResAge in Indonesia. Research teams in India, Sri Lanka, Thailand and Indonesia conducted the research.

Help the Aged works through, and funds its international partner HelpAge International during times of international emergencies which threaten the lives and livelihoods of older people. Help the Aged is responsible for raising funds from its own supporters and is also part of the Disasters Emergency Committee (DEC). The DEC brings together 13 of the UK’s lead aid agencies, and other supporters, to launch national appeals during times of major international humanitarian disasters.

Help the Aged and Help Age International have chosen to work primarily in countries where it has strong partners working in the affected communities. In India and Sri Lanka the partners are HelpAge India and HelpAge Sri Lanka. In Indonesia, HelpAge International is working with partner InResAge on advocacy for older people during emergencies.

Published by HelpAge International
HelpAge International
PO Box 32832, London NI 9ZN, UK
Tel: +44 (0)20 7278 7778 / Fax: +44 (0)20 7713 7993
Email: hai@helpage.org  Web: www.helpage.org

HelpAge International Asia Pacific Regional Development Centre
C/o Faculty of Nursing, Chiang Mai University, Chiang Mai 20200, Thailand
Tel: +66 53 225081 / Fax: +66 53 894214
Email: hai@helpageasia.com

© HelpAge International 2005
Registered charity no. 288180

Cover photos: John Cobb/Help the Aged

Any parts of this publication may be reproduced without permission for educational and non-profit purposes if the source is acknowledged.
## Contents

Executive summary 2  
Introduction 4  
Research aims and methodology 5  
Summary of key findings 6  
  Data on older people affected 6  
  Discrimination 7  
  Rights 8  
  Livelihood security 8  
  Social protection 10  
  Participation 11  
Issues for older people in disaster response and recovery 13  
Recommendations 15
Executive summary

This report describes the impact of the Indian Ocean tsunami on older people in four severely affected countries – India, Indonesia, Sri Lanka and Thailand – based on a rapid assessment survey carried out during the initial relief phase. It aims to inform agencies working on relief and rehabilitation plans and to assist future emergency response planning.

Older people, often neglected in normal circumstances are even more vulnerable in disasters. Despite international protocols such as the Madrid International Plan of Action on Ageing and the Sphere guidelines the research confirms that in the tsunami they were not specifically targeted and in some cases, the relief effort discriminated against them. In many cases older men and women were unable to access health care, food and cash support due to discrimination, lack of information or support mechanisms.

Older people form nearly 10 per cent of the population in Asia and before the tsunami they actively supported their families through cash earnings, pensions or work in kind – looking after children or working in family businesses. Now they want to be consulted on the decisions that affect them and secure support for themselves and their families to rebuild their livelihoods.

Summary of key findings

Lack of data on older people affected
The lack of accurate data disaggregated by gender and age hindered assessment of the impact on older people, and concealed their vulnerability. As a result they were overlooked in the initial relief effort. The failure to record the number and location of older survivors also means that this section of the population is likely to be forgotten in plans for recovery and rehabilitation.

Age discrimination
Age discrimination caused older survivors to miss out on distribution of relief supplies, monetary compensation and access to services. Older people living with their children’s families became almost invisible when the relief material was distributed to the younger adults. Relief workers interviewed generally identified children, particularly orphans, as the main group needing special provision and did not regard older people as a vulnerable group with particular needs.

Denial of rights
Most older people wanted to return to their previous living arrangements and felt living in camps further undermined their independence. Those who had lived with their families wanted to stay with them and those who had lived alone wanted their own accommodation. Policies that prevent communities from returning to coastal land will have a serious impact on older people, who are less likely to have documentation and more likely to be excluded from housing reconstruction assessments. The research shows that this insecurity is especially strong among the older women interviewed, who displayed the strongest ties to their homes.

Exclusion of older people
Relief interventions did not recognise older peoples positive contribution in coping with emergencies and little effort was made to consult older people or to recognise the supportive roles they play in communities. Relief workers viewed older people as recipients of help and not as active contributors and made no effort to include them in camp activities.
Livelihood insecurity
Financial insecurity was the main concern of older survivors. Many had lost their livelihoods as well as family members who had provided them with support. Despite evidence of the complex reciprocal arrangements in families, with older people both providing support and being supported, livelihood assessments carried out by relief agencies ignored their roles and needs.

Social protection
Older survivors sought help in obtaining social pensions, where these already existed, or access to short-term relief payments. The possibility of a regular cash income, however small, provides critical support for older people, especially older women, who are among the poorest. The particular health problems that older frail people encounter in an emergency were not adequately addressed, for example, treatment for chronic diseases and psychosocial problems.

Summary of recommendations
HelpAge International is calling on governments and relief agencies to:
- Collect disaggregated data by age and gender
- Recognise older people as a vulnerable group and implement intergenerational approaches in emergency response programmes that support older peoples roles
- Establish mechanisms to support older people to access their entitlements
- Develop social protection schemes in the form of small regular cash payments to older people
- Support vulnerable older people who want to work to establish their livelihoods
- Create opportunities for older people to participate in decision making
Introduction

Older people in emergencies

HelpAge International has over 20 years’ experience of working in emergencies worldwide. In 1999 it commissioned a major research project on how older people are affected by disasters and humanitarian emergencies and how humanitarian agencies addressed their needs. The research concluded that older people’s basic needs were typically overlooked by planners and humanitarian agencies and they often experienced difficulty in accessing support and services.

Since the publication of this report in 2000, HelpAge International has worked with international bodies such as the UN High Commission for Refugees and lobbied governments and other NGOs to include older people and give them a voice in disaster relief and rehabilitation planning. It has also advocated for changes in the collection of data in emergencies to allow older people’s needs to be identified. In 2003 the Sphere project’s guidelines, *Minimum Standards in Disaster Response for Humanitarian Workers*, incorporated issues affecting older people in key areas of emergency relief, such as food distribution, nutrition, health, and shelter.

This rapid assessment report demonstrates that, despite being identified as a vulnerable group, little progress has been made and older people’s issues are still not being addressed.

The situation of older people before the tsunami

In Asia, the older population is expected to increase at a faster rate in the next 50 years, with the share of population over 60 years of age more than doubling from 9.4 per cent of the total population in 2000 to an estimated 23.5 per cent by 2050. By 2050, Asia and the Pacific will be home to 1.2 billion people aged over 60 years and this will account for 63 per cent of the world total. In Thailand today, people aged 60 and over already represent about 10 per cent of the total population of 63 million.

A recent UNESCAP study shows that where older populations are growing fastest, they are consistently and disproportionately among the poorest of the poor. The continuing gender gap in life expectancy in the region means that many older people living in poverty are women.

In the four countries studied, the tsunami disaster struck hardest in coastal communities where people made their living as fishermen, farmers or artisans. They suffered the most damage in terms of housing and livelihoods, losing dwelling units, household goods and productive assets such as boats and nets. The poorest groups were already particularly vulnerable and were the hardest hit. These included older people and their families. In India, an estimated 40 per cent of older people live below the poverty line.

The predominantly rural character of the population, coupled with insufficient opportunities for waged or salaried employment, means that many people in these countries are compelled to extend their working lives for as long as is physically possible and often continue to work beyond the age of 60.

---

2 The Sphere project includes humanitarian agencies and the Red Cross and Red Crescent movements
3 UNESCAP, *Economic and Social Survey of Asia and the Pacific*, 2005
4 UNESCAP, 2005
5 Thai Society of Gerontology and Geriatric Medicine, *Family planning and population fact sheet*, 1999
6 UNESCAP, 2005
7 University of Manchester, *Chronic Poverty Research Centre, Chronic Poverty in India: Overview Study*, 2002
Research aims and methodology

Research aims

The 2004 Indian Ocean tsunami affected ten countries, leaving more than 300,000 people dead and one million displaced. Information emerging in the first two weeks after the tsunami disaster raised concerns about the situation of older people, including their greater vulnerability in the immediate aftermath and difficulties accessing available support. HelpAge International initiated a rapid assessment of four of the most affected countries to obtain a picture of the impact on older people and to identify their key needs and demands.

The aim of this assessment project was to find out:

- how older people were affected by the tsunami immediately and in the initial aftermath
- whether their needs were met during the initial relief efforts
- what lessons could be identified for future disaster preparedness and relief programmes in the region.

Its objective was to:

- inform governments and agencies working on relief and rehabilitation of the situation facing older people after the tsunami
- plan more in-depth research that would inform the development of disaster preparedness plans at national and community levels to include specific responses to the needs of older people.

Methodology

Four teams in Thailand, India, Sri Lanka and Indonesia carried out the research over a two-week period during the initial relief phase. The researchers collated data from official statistics on population structure by age and sex, before and after the disaster in geographical areas where statistics existed. They also conducted semi-structured interviews with relief camp workers and older people in selected research sites.

In each of the four countries, two states or administrative areas were identified that appeared to have been badly affected. Within these areas, camps for displaced people or villages receiving relief were chosen. The number of camps visited and interviews recorded differed slightly in each location, with an average of six sites visited in each country.

<table>
<thead>
<tr>
<th>Country</th>
<th>Administrative areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indonesia (Nias Island)</td>
<td>Sirombu and Lahewa</td>
</tr>
<tr>
<td>India</td>
<td>Tamil Nadu and Kerala</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>Matara and Batticaloa</td>
</tr>
<tr>
<td>Thailand</td>
<td>Phangnga and Phuket</td>
</tr>
</tbody>
</table>

The scope of evidence gathering was limited by the short timescale, varying degrees of cooperation from camp officials in gaining permission to interview relief workers and older people and the lack of data available to the researchers from government, multilateral and NGO sources. Many administrative districts did not hold data on the older population and in the camps the few cases where data was collected by age it was generally only for those classified as children. The lack of available data which would allow a more in-depth assessment of how the tsunami disaster affected older people indicates that in future the humanitarian community should include additional criteria for gathering and collating data which helps to analyse the situation of older people.

---

8 Disasters Emergency Committee press release, 10 May 2005
Summary of key findings

Data on older people affected

Disaggregated data by gender and age has not been routinely collated either before or after the tsunami. HelpAge International has therefore compiled estimates of the number of older people affected, based on the numbers of those killed and displaced and the percentage of older people in the population before the tsunami. Across the four countries, the estimated number of deaths for those over 60 is 13,954 and the estimated number of over 60s displaced is 92,762.

Table 1: Older people affected by the December 2004 Indian Ocean tsunami

<table>
<thead>
<tr>
<th>Country/area</th>
<th>Total dead</th>
<th>Over 60 (%)</th>
<th>Total displaced</th>
<th>Over 60 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indonesia</td>
<td>114,373ι</td>
<td>8ι</td>
<td>417,438ι</td>
<td>N/A</td>
</tr>
<tr>
<td>Sirombu</td>
<td>7ι</td>
<td>2ι</td>
<td>1,201ι</td>
<td>3ι</td>
</tr>
<tr>
<td>Lahewa</td>
<td>0ι</td>
<td>0ι</td>
<td>1,475ι</td>
<td>3ι</td>
</tr>
<tr>
<td>India</td>
<td>10,749ι</td>
<td>8ι</td>
<td>112,588ι</td>
<td>N/A</td>
</tr>
<tr>
<td>Tamil Nadu</td>
<td>7,983ι</td>
<td>9ι</td>
<td>44,207ι</td>
<td>9ι</td>
</tr>
<tr>
<td>Kerala</td>
<td>171ι</td>
<td>10ι</td>
<td>24,978ι</td>
<td>10ι</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>30,959ι</td>
<td>11ι</td>
<td>500,668ι</td>
<td>N/A</td>
</tr>
<tr>
<td>Matara</td>
<td>1,342ι</td>
<td>12ι</td>
<td>13,395ι</td>
<td>12ι</td>
</tr>
<tr>
<td>Batticaloa</td>
<td>2,840ι</td>
<td>NA</td>
<td>61,912ι</td>
<td>NA</td>
</tr>
<tr>
<td>Thailand</td>
<td>5,392ι</td>
<td>10ι</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Phangnga</td>
<td>4,222ι</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Phuket</td>
<td>279ι</td>
<td>7ι</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Total (estimates)</td>
<td>161,473</td>
<td>13,954</td>
<td>1,531,362</td>
<td>92,762</td>
</tr>
</tbody>
</table>

One district in Sri Lanka where fuller records were available shows that there were more deaths among people over 60 than in any other age group and a significantly higher number of female deaths in all age groups. (see Table 2). These findings are consistent with Oxfam research which shows that the disaster had a disproportionate effect on women, who died in greater numbers than men.

Table 2: Age and gender profile of tsunami deaths, Weligama Divisional Secretariat, Matara, Sri Lanka

<table>
<thead>
<tr>
<th>Age (years)</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 10 years</td>
<td>31</td>
<td>41</td>
</tr>
<tr>
<td>Over 60 years</td>
<td>38</td>
<td>91</td>
</tr>
<tr>
<td>Deaths</td>
<td>0</td>
<td>10</td>
</tr>
</tbody>
</table>

Sources
ι UN/DCHA Reliefweb, 10 February, 2005
ιι Estimates based on the 2001 Census of India for Tamil Nadu and Kerala
ιιι Nias District Health Service, 10 January, 2005
ιιιι Estimates based on Nias District Census 2003
ιιίι Special SITREP 35, Government of India, Ministry of Home Affairs, 18 January 2005
ιιιιι Estimate based on the 2001 Census of Sri Lanka for Matara and Batticaloa
ιιιιιι Thailand Ministry of Social Development and Human Security, 8th February, 2005
ιιιιιιι Estimates based on the 2000 Census of Thailand
ιιιιιιιι Estimates based on UN World Population Prospects Database
ιιιιιιιιι Oxfam, ‘The tsunami’s impact on women’ briefing note, March 2005
Discrimination

Age discrimination
Researchers found that most government and NGO relief workers interviewed did not regard older people as a vulnerable group with particular needs. Relief workers identified children, particularly orphans, as the main vulnerable group and in most camps special programmes were run for the benefit of children under 10 years of age, including the provision of play school and day care facilities. This was despite the fact that there were often comparable numbers of older people who should also be classified as a vulnerable group according to international humanitarian guidelines such as those produced by the Sphere project.

During the relief distribution no special measures were taken to ensure that vulnerable groups, including older people, got their share of supplies. Many older people reported being pushed out of the way by younger people in the chaotic relief distributions, and relief workers observed that who ended up getting the relief packages was down to ‘the survival of the fittest’.

Two weeks after the disaster, 1,507 older people surveyed in Cuddalore, India, had received very little or no relief, despite the fact that distribution had been underway for some time.

In Sri Lanka, it was observed that older people received no monetary compensation to help them restart their livelihoods if they were living with adult children. One older man complained that his son received all the relief material provided and he got nothing.

Gender and disability discrimination
Age discrimination can be compounded by other forms of discrimination based on gender or disability. Gender discrimination was identified in the research, which showed that where older women were heads of household responsible for taking care of orphaned grandchildren, no attempt was made to collect information on their circumstances.

Limited mobility was an issue for older people during and after the crisis. Relief workers did not take account of mobility issues for older people who were trying to reach the camps and many older people walked with difficulty to shelters. When a researcher asked relief workers in an Indian camp why there were few older people among the survivors, the response was that most of the older people could not run fast enough to escape the waves or swim to safety.

Many who were disabled found being in the camp environment especially difficult as they were not provided with wheelchairs, walking aids or glasses lost in the disaster. They had to rely on others for help collecting firewood, food and water. In some cases, camp workers were under pressure to provide minimum services as a uniform package to residents. In the absence of sufficient experience and resources, they were unable to respond to individual requirements, even when they felt that older people with disabilities required special assistance. For example, in an Indian camp the manager for services said, ‘Older persons find it difficult to sleep on the floor, but they have a very compromising attitude and they never complain.’

Researchers found that, in general, government or army camp workers saw no need for special measures for older people, while those who worked for NGOs appeared to be more sensitive to their needs.

Good practice:
In India, HelpAge International organised a separate distribution for vulnerable groups. Volunteers identified older people and their families in the community and told them when and where a specific distribution tailored to their needs would take place. They were then given a token to bring to the collection point to exchange for the relief package. Transport was arranged to and from the relief collection points for those who were identified with mobility problems, and seating was provided while they waited.
Rights

Independence
Most older people wanted to return to their previous living arrangements. Those who had lived with their families wanted to stay with them and those who had lived alone wanted their own accommodation in order to remain independent. In Indonesia, some older people were taken in by relatives and neighbours. They relied on them for scarce food and water in the first few days after the tsunami, but they did not want to remain dependent on their hospitality.

Older people living with their children’s families became almost invisible when the relief material was distributed to the younger members. It was left to the discretion of sons or daughters to take care of the older persons in the family, which increased their dependency.

Almost all of the older persons interviewed were unhappy within the camp environments. Many were uncomfortable because of the heat during the day and the cold during the night. Some older people complained that they were also uncomfortable sleeping on the floor without mattresses.

They were also bothered by the lack of privacy, the crowded noisy environment and the fact that the best of the shelters were being taken by the young. A grievance aired by many older people was the reliance on inappropriately donated clothing, especially undergarments. In Sri Lanka, older Buddhists wanted white cloth to observe religious days. Some wanted a separate quiet place for meditation and prayer.

Land

Older people were concerned that they might lose their homes because they lacked appropriate documentation for their property, either because it had been lost during the disaster or because it had not been required when their families settled on the land.

In all countries there were mixed feelings about the location of future housing. Some older people wanted to move to higher land due to fears of another tsunami, but most wanted to rebuild their homes in the original plots near the coast. Some older people reported that both national and foreign business people had arrived trying to buy land from those who were worried about another tsunami. Others had arrived, claiming to be private land owners who had rights to the land where older people and their families had been settled for many years.

In many camps older people reported being worried that they would be relocated due to coastal building restrictions. When the Thai government launched a plan to build permanent housing in a new location, there was resistance by the affected communities, as many did not want to leave their fruit trees and their access to the sea for fishing. Relief workers who had organised vocational training programmes for survivors told the researchers that many trainees, concerned that they might lose their homes, had left to rebuild their houses so they could claim ownership of the plots of land.

Livelihood security

Traditional livelihoods
The research showed that older people’s livelihoods in the tsunami-affected region were typically based on activities and sources of income outside the formal economy. In Sri Lanka, the majority of older coastal dwellers made a living from fishing, agriculture, the coir rope industry, trades and also in tourist-related services, from running taxis to small guesthouses.
Older people in India reported that they had been employed mainly in fishing and small-scale industries. They included handicraft workers, salt pan workers, small-scale agriculturists, farmers and those working in small trades such as weaving and coir rope work.

In Indonesia, the livelihoods of older people in the affected communities came mostly from fishing and supporting facilities such as ice plants, cold rooms, and fish-receiving centres, while others worked as traders or gardeners.

In Thailand many older people up to the age of 85 years told how they had worked as unskilled labourers packing fish, crabs and squid at fishing wharfs. Many in the two coastal areas also relied heavily on the local tourist industry and were employed as casual labour in restaurants and resorts.

**Restarting livelihoods**

An intergenerational approach to relief is needed which supports older people’s family and community roles and strengthens family survival mechanisms. However, when livelihood needs assessments were being carried out at household level older people felt invisible as their needs were ignored. The assessments assumed that older people either no longer worked or that they were going to be looked after by their family.

Financial insecurity was the main concern of all older people and most saw their livelihoods as linked to those of their families. Those who had been working wanted to resume work. Those who had depended financially on their sons and daughters were concerned that if their children were unable to find jobs or rebuild their businesses they would not be able to sustain themselves or their families in future.

Nagalingum, 77, from Nagapattinam, India, lost her daughter-in-law who had contributed financially to the household. She said, ‘My son is unable to support his family and now I have to take care of him as well as his two sons. I cannot manage it on the Rs200 (US $5) that I get as my pension. I need additional support.’

It is clear from the research that complex reciprocal arrangements exist between older people and their families. Older people contribute in kind to the household through child care and labour in family businesses. In some cases, they may also contribute financially to the family.

Paravathi, 60, also from Nagapattinam, who supported her alcohol-addict son’s family of five from her earnings said, ‘My son’s irresponsible behaviour worries me. I hope that he gets de-addicted and supports his family so that I do not have to earn for them and I can earn money for myself and live peacefully.’

The livelihoods of the majority of the older people interviewed were connected to fishing communities, which were devastated in the disaster. Some reported that they had previously relied on their employer but that now the employer was dead and their business ruined, there was no one to give them work. In Thailand many who had worked in tourist-related occupations worried about the revival of the industry. In India older small and marginal agricultural land-holders saw their crops such as rice, groundnut, coconut, cashew, mango, banana, millet and vegetables destroyed and land and water supplies contaminated by sand and salt water. The vulnerability of many of these communities was increased by their frequent indebtedness to informal money lenders.

Many respondents were keen to get back to work and wanted financial help to buy boats and fishing nets. In India a three-month ban on fishing in order to restore stocks meant even those who still had boats were prevented from fishing.

‘Our past has been washed away. The future looks hazy and bleak. Because of the tsunami I lost my boat, net and belongings and my family is suffering because we have no income’

Mavilla, 70, from India.

In Batticaloa, Sri Lanka, Kanagasooriyam, 60, a goldsmith needs the tools he lost to the waves to restart work. Arukanapathipillai, 66 who lost his wife and daughter to the tsunami, is a fisherman who repairs bikes off season.
Good practice:
In Kerala, India, a pension scheme organised by the state fishing cooperative (Matsyafed) has been in place since the mid-1980s. The scheme allows fishermen to contribute a nominal amount to their fishing cooperative pension account till the age of 60 years. This contribution entitles them to a regular monthly pension after that age. The existence of this scheme meant that even when the older fishermen lost most of their belongings in the disaster, they still had some assured monthly income to act as a safety net.

Social protection
Cash transfers and social pensions
The possibility of a regular income, however small, is of particular importance for older people, who are often among the poorest in the community. This is particularly true for older women survivors, who had previously had support from daughters or daughters-in-law who were lost during the tsunami. They were left to take care of their husbands and grandchildren with no income to support them. They felt that a regular income would help take care of their own and their dependants’ future needs.

In countries such as India, where limited social pensions already exist for the most vulnerable, older people asked how they could be included in the scheme, as they felt a small regular income would help them restart their lives. Older people who were able to claim the monthly pension before the disaster told researchers how it had helped support both them and their families. Just knowing that they had this safety net helped them cope with their uncertain future. One older man in Sri Lanka said, ‘I do not need anything. I am happy with the pension that I receive and what my wife earns.’

In India the government issued cash relief packages for affected families, those injured and as compensation for those who had died. In the Indian state of Tamil Nadu, the government also provided monthly payments of 200 Rupees (US$5) to vulnerable people over 60 who had been affected by the tsunami.

In Thailand a subsistence allowance was available from the government. However, the amount available was restricted to those in most need and researchers found that only 9 out of 237 older people had received the allowance. The government also paid compensation per body for those who lost family members. However, some older people reported being unable to claim the payment because they could not identify which body was their spouse or family member.

In Indonesia the government used village office registration details to identify and distribute the equivalent of US$10 to each tsunami affected person as a one-off payment. This was generally used to buy food. However, there was no evidence of any support mechanism to help older people in claiming this assistance.

Health and psychosocial issues
Many older people with chronic ailments such as diabetes and cancer faced difficulty in resuming treatment as many had lost their medical histories or had no means of travelling to hospital. In many camps older people reported difficulty in getting to and using the toilets and in collecting water. In some cases they had to pay for water but had no money so they went without.

In Sri Lanka, some older people reported that dust from open spaces in the camp had led to coughs and intensified asthma. In all camps weak eyesight and a need for eye clinics was a common problem, as was the lack of disability aids. Although older people often needed special diets due to ailments like diabetes, they reported that these special diets were not available. In many cases camp and relief workers showed no awareness of the dietary problems faced by older people.

There were a few exceptions to this attitude among the relief workers interviewed. The charge officer of Memana Camp in India said, ‘There should be special facilities for the health care of the older persons and there should be provision of special monetary assistance for them. Moreover, there should be interactive sessions to lessen their depression.’ In Sri Lanka, some camp administrators were aware of special dietary requirements of older people but were unable to provide such diets due to lack of resources.
Many older people showed signs of trauma and stress, and talked of their depression. Many had suffered financial and material loss. Six out of 13 older people interviewed in one camp in Thailand had lost spouses, children and grandchildren.

Ramathievanai, 62, from Batticaloa in Sri Lanka, who lost her husband six years ago, feels that there is no more hope. Researchers found this to be a common attitude among the older people in Batticaloa.

Researchers observed that psychosocial services were totally inadequate, and that older people’s recovery was hindered by the lack of special attention. In India, older people reported inability to sleep, body pain, and lack of familiar food. Competition with younger people for relief materials was making their situation more difficult. In Indonesia many older people were still traumatised and frightened that another tsunami might occur. In Sri Lanka there were reports that the high level of alcohol abuse among men in the camps was having a negative impact on the wellbeing of older people.

Participation

Consultation

In all the camps visited, researchers found that no specific efforts had been made by relief workers to consult older people or assess their needs. In some camps NGOs had asked respondents to identify the general needs of the family so that they could arrange distributions for them as a household. When asked to identify the most important relief needs of older people, there were noticeable discrepancies between the views of older people and relief workers.

Table 3: Comparison of older people’s needs perceived by older people and relief workers: Sirombu Village, Nias Island, Indonesia.

<table>
<thead>
<tr>
<th>Informant</th>
<th>Food</th>
<th>Health care</th>
<th>Water supply</th>
<th>Clothes</th>
<th>Shelter</th>
<th>Cooking utensils</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relief worker</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Older person</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Savagami, 75, lived with her eldest son Sabrommanni, his wife, and their four children, in the fishing village of Akkrapattai. Sabrommanni, who was cleaning his nets was swept 2 km by the wave.

‘My mother had taken refuge on the top floor of a building with three of my children.’ He lost his wife and son to the wave. ‘Now we are totally reliant on relief agencies for survival. I know only fishing, but since this incident I have lost all my confidence. We are ready for counselling but it will still take us time to go back to the sea.’

Savagami is in despair, ‘We lost everything. I am afraid to go back home, as it is a low-lying area. I would like to move somewhere else but we have no means to do so.’
In Sri Lanka, four of the camps in Batticaloa had committees made up of residents who helped in camp operations. However no measures were taken to ensure older people were included. In India researchers noted that no serious efforts were being made to involve older people in the activities of the camps. They were considered as recipients of help and not active contributors. Those who did contribute were those who took the initiative to help.

In all the camps relief workers did not perceive older people as contributing to the activities of managing the camp. They felt that older people had a general sense of apathy and fatalism, which prevented them from participating in camp activities. However, researchers observed that in some camps older people were helping in the communal kitchen, and doing work like cleaning and clearing debris. In Thailand many older people, given the opportunity, decided to join the vocational training programmes organised by the Ministry of Social Development and Human Security.

Roles in the community
The research showed that older people often had a major role in taking care of both their own grandchildren and orphans. They also played a key role in comforting those in distress by counselling younger camp members.

In Phuket, Thailand, one reason given for the relatively low death rate of older people and children is that older people had taken the children to celebrate the Buddhist Sabbath in hillside temples. On another day they would have been looking after the children near the beach.

Many older people viewed their role in maintaining social networks as important for restoring and maintaining their community. Paravathi, 60, from Neelatchiamman, India, helped relatives, friends and neighbours. ‘Many people in this camp are from the same street and village in which I live and we all help each other,’ she said.
Dayawathi, 70, Sirisumana
Vidyale relief camp, Matara, Sri Lanka.

Dayawathi is a widow who lost her son, two grandsons and her home in the disaster. Her son was a fisherman who provided the family's only income. Dayawathi now has two granddaughters to look after. She was completely distraught and it is hard to see how she can ever recover. She is grateful for the assistance (bucket, sheet, sarong, candles, matches, mosquito coil and balm) but will need much more - a new house, a means of income and a huge amount of support to help her cope with her loss.

Dayawathi is a widow who lost her son, two grandsons and her home in the disaster. Her son was a fisherman who provided the family's only income. Dayawathi now has two granddaughters to look after. She was completely distraught and it is hard to see how she can ever recover.

Issues for older people in disaster response and recovery

Data collection on older people

The lack of disaggregated data on older people before the tsunami means that it would have been difficult to make provision for older people in disaster preparedness plans. The failure to collect data on tsunami-related deaths by age, gender and disability except in the case of children, means that older people's particular vulnerability is hidden. Where data was available it showed a higher number of female deaths. The failure to record the number and location of older survivors also means that this section of the population is likely to be forgotten in plans for recovery and rehabilitation.

Discrimination

The research found that discrimination on the basis of age often appeared to be compounded by gender and disability. Helping older people survive and cope with disasters is not about creating special services, but about ensuring that their vulnerability, needs and rights are taken into account at all stages of a relief effort. This means locating and identifying older people at the outset; assessing needs through direct consultation; and tailoring services to take account of factors like poor mobility, special nutritional needs and chronic health conditions.

Rights

Older people are often neglected in normal circumstances. In disasters they are even more vulnerable. Our research confirms they are given low priority and little attention despite international protocols such as the Madrid International Plan of Action on Ageing and the Sphere guidelines. During emergencies, where rights for older people do exist, for example, access to free health care, food and cash support, older people are often unable to claim their entitlements due to discrimination, lack of information or inappropriate structures.

Policies which prevent communities from returning to coastal land will have a serious impact on older people, who are less likely to have documentation and more likely to be excluded from housing reconstruction assessments. The research shows that this insecurity is especially strong among the older women interviewed, who displayed the strongest ties to their homes. Older women were less likely to get support in starting over again due to their exclusion from land and property rights. They were also the most likely to be targeted by those looking to take advantage of their situation.

Livelihoods

Poor people depend on their physical health to make a living. When older people found themselves unable to carry on working following the tsunami, they were left without a source of income. During the recovery phase following a disaster, older people typically face exclusion from credit and income-generation programmes which exacerbates their isolation. A lack of consultation with older people means that they will be excluded from livelihood rehabilitation programmes and will become dependent either on their family or on government payments to the destitute.
Social protection

As physical health declines with ageing, older people are among those most in need of social protection measures such as health and income support schemes. Access to health care is a key concern for older people at the best of times but the tsunami left many without any access to services or medicine for disaster-related injuries and chronic conditions such as diabetes or heart complaints. This lack of access can be compounded by discrimination, lack of mobility and cost. Older people in this situation are less likely to regain their physical and psychological health and will often deteriorate.

Where cash transfers did exist before the tsunami, financial ceilings meant they were generally restricted to a small number of the most vulnerable, with long waiting lists for others who should be eligible. However, those who did benefit from social protection schemes reported that these had a great impact on reducing the effects of the disaster.

A strong body of evidence is emerging that providing people with cash in emergency situations like the tsunami works. The Overseas Development Institute suggests that it is possible to target and distribute cash safely and that people overwhelmingly spend the money on basic essentials. Cash provides a stimulus to local economies and is often more cost-effective than in-kind alternatives.\(^\text{12}\)

Recent research conducted by HelpAge International demonstrates that a social pension, in the form of a non-contributory, regular and universal cash transfer, is a proven means of reducing old age poverty. In emergencies such as the tsunami these cash transfers could be a useful way of supporting multi-generational households, as older people often spend their money on providing for their family’s basic needs.\(^\text{13}\)

Participation

Government agencies considered that it was in the best interest of separated or orphaned children to live with family members. The research indicates that many older people played this critical role in the recovery stage by looking after and counselling both their own grandchildren and orphans of friends and extended family. This role has generally fallen to older women, who traditionally have a key role in supporting and caring for other family members. They also helped in the camps by cleaning and food preparation in the communal kitchens. However, this went unnoticed by relief workers who concentrated on providing services tailored for children. While there were examples of individual efforts by relief workers to support older people these were not institutionalised or recognised as a key activity.

\(^\text{12}\) Overseas Development Institute, “Tsunami relief and reconstruction assistance, in-kind, or in cash?” Humanitarian Policy Group, January 2005

\(^\text{13}\) HelpAge International, Age and security: how social pensions can deliver effective aid to poor older people and their families, 2004.
Recommendations

HelpAge International calls for the increased inclusion of older people’s needs, rights and contributions in the plans and activities of governments, humanitarian and development agencies responding to the tsunami. It calls on governments and relief agencies to:

- Collect disaggregated data by age and gender
  Governments are asked to ensure that census records include disaggregated data on gender and age, including people over 60. This information can be used to develop disaster preparedness plans that take account of older people and allow analysis of how such disasters affect all age groups. Relief agencies and NGOs are asked to include older people in their registration processes and needs assessments. This information will help target older people as a vulnerable group and make rehabilitation programmes more inclusive.

- Recognise older people as a vulnerable group and implement intergenerational approaches in emergency response programmes that support older peoples roles.
  The Madrid International Plan of Action on Ageing acknowledges that in emergency situations, older people are especially vulnerable and should be identified and targeted for support. But it also suggests that interventions need to recognise that older people are part of families and communities and that they can make a positive contribution in coping with emergencies. Governments and humanitarian agencies should seek to strengthen older people’s roles. The Sphere guidelines also recommend that older people’s experience and needs are fed into humanitarian agencies’ rehabilitation programmes as part of an intergenerational approach. As well as implementing these guidelines, HelpAge International believes that one of the UN agencies should proactively support older people in the same way that UNICEF supports children during and after disasters.

- Establish mechanisms to support older people access their entitlements
  Older people need to been seen as independent householders in their own right. It should not be assumed that because they are part of a household that they will be cared for. Tailored relief packages should be available to older people, including access to basic services such as health centres and water distribution points, and affordable transport to reach these services. Where special entitlements for older people exist, for example, access to free health care, older people often fail to claim their entitlements due to lack of information or appropriate structures.

- Support vulnerable older people who want to work to establish their livelihoods
  Those planning reconstruction are asked not to assume that older people have families or access to social services which will provide them with support. They should quantify the economic contribution of older people by including them in livelihood assessments. This would help identify their livelihoods before the disaster and their needs and options in the future. In addition any policies which might involve the relocation of traditional fishing communities must consider the lack of alternative livelihood options and the long-term impact on community structures.

‘Orphans, widows, singleheaded households, old and disabled are especially vulnerable groups in terms of psycho-social distress, restoration of livelihood, and the legal and protection rights - on such issues as property and inheritance rights, and custody of children. This will need to be addressed’.11

Develop social protection schemes in the form of small regular cash payments to older people

The right to social protection is enshrined within the Universal Declaration of Human Rights. A priority should be that all older people, especially those with caring roles, receive cash transfers and support to access them so that other vulnerable groups such as children and the disabled will also be supported. The impact that social pension schemes can make on income security was highlighted in a cooperative scheme in Kerala, India which gave older fishermen a safety net. This type of scheme should be taken on board in the reconstruction plans for other fishing communities.

Create opportunities for older people to participate in decision making

In disasters the inclusion of older people in decision-making processes and in advocating for their own needs is crucial in the recovery of communities. Governments are asked to develop processes that will help them include and consult older people in rehabilitation planning which may affect them, such as relocation policies. This would help governments take forward their commitments to older people in the Madrid International Plan of Action on Ageing.
Background on HelpAge International

HelpAge International has over 20 years’ experience of work in natural disasters and complex emergencies. HelpAge International works as a catalyst to help relief agencies identify older people and their special needs and capacities in emergencies, and to ensure full and equal access to relief and to longer-term aid to rebuild lives and livelihoods.

While the most vulnerable benefit first, work also focuses on older people in the context of, rather than in isolation from, their families and the wider community. Maximum use is made of local knowledge and human resources, and the activities are integrated into local systems and cultures.

Resources

Emergencies Position Paper

Published in 2001 HelpAge International’s paper highlights how older people are particularly vulnerable in emergencies and are frequently marginalised, with very little attention paid to their specific needs or potential contributions, both during emergencies and during the recovery of communities.

http://www.helpage.org/emergencies/emergSum/emergSum.html

Older People in Disasters and Humanitarian Crisis: Guidelines for best practice:

In 1997 HelpAge International collaborated with the United Nations and European Community Humanitarian Office to publish guidelines which aimed to identify key approaches and actions that could help the humanitarian community reduce the vulnerability of older people in emergencies, and build on their contribution.

http://www.helpage.org/publications/publications.html

Participatory Research with Older People: a sourcebook

Drawing on the experience of HelpAge International programmes and partners, this book provides comprehensive guidelines for older people’s participation in planning, carrying out and disseminating research.

http://www.helpage.org/publications/publications.html

Sphere Guidelines

HelpAge International has been involved in The Sphere project which led to the development of a set of universal minimum standards in core areas of disaster response for humanitarian workers. The Sphere guidelines recommend that special care must be taken to protect and provide for all affected vulnerable groups including older people.

http://www.sphereproject.org/index.htm

Madrid International Plan of Action on Ageing

Agreed by 159 UN members in 2002, the guidelines call upon governments and humanitarian relief agencies to recognise that older people can make a positive contribution as carers, resource managers, and income generators in emergencies and in rehabilitation and reconstruction.

This report describes the impact of the Indian Ocean tsunami on older people in four severely affected countries – India, Indonesia, Sri Lanka and Thailand – based on a rapid assessment survey carried out during the initial relief phase. It aims to inform agencies working on relief and rehabilitation plans and to assist future emergency response planning.

Older people, often neglected in normal circumstances are even more vulnerable in disasters. Despite international protocols such as the Madrid International Plan of Action on Ageing and the Sphere guidelines the research confirms that in the tsunami they were not specifically targeted and in some cases, the relief effort discriminated against them. In many cases older men and women were unable to access health care, food and cash support due to discrimination, lack of information or support mechanisms.

Older people form nearly 10 per cent of the population in Asia and before the tsunami they actively supported their families through cash earnings, pensions or work in kind – looking after children or working in family businesses. Now they want to be consulted on the decisions that affect them and secure support for themselves and their families to rebuild their livelihoods.