

Mandate of the Independent Expert on the enjoyment of all human rights by older persons

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Independent Expert on the enjoyment of all human rights by older persons

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COVID-19**

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**1. Mandate of the Independent Expert on the enjoyment of all human rights by older persons
and the COVID-19 pandemic**

The mandate of the Independent Expert on the enjoyment of all human rights by older persons was established by the UN Human Rights Council in 2013 (resolution 24/20) and renewed regularly (most recently through resolutions [33/5](#) and [41/12](#)). The Independent Expert oversees the realization and fulfilment of the human rights of older persons, with her mandate including, *inter alia*, strengthening the realization of the human rights of older persons; assessing the implantation of relevant national, regional and international standards; identifying and promoting good practices; reporting on developments, challenges and protection gaps; and providing advice on ways to strengthen the protection of the human rights of older persons. The [current Independent Expert, Dr. Claudia Mahler](#), was appointed to her function in May 2020.

With the outbreak of the COVID-19 pandemic, the Independent Expert repeatedly called for solidarity and for stepping up action towards better protection of the rights of older persons among reports of age-based decisions regarding the allocation of scarce medical resources and the deep-rooted ageism that the pandemic has brought to the fore. In the mandate's first report to the General Assembly ([A/75/205](#)), the Independent Expert provided an initial assessment of the impact of COVID-19 on the human rights of older persons, noting that the pandemic has put a spotlight on the human rights protection challenges faced by older persons in societies around the world and magnified existing violations of their rights.

**2. An initial assessment of the impact of the COVID-19 pandemic and related measures and
restrictions on the human rights of older persons**

Drawing on the findings and conclusions of the above-mentioned report, several key elements can be highlighted:

- The pandemic revealed **deep-rooted ageist attitudes**, including in the form of verbal abuse and negative images targeting older persons in the media and public debates. The pandemic has made very evident the urgent need to combat stigma and generalisations of older persons as being vulnerable, unproductive and a burden to society. Such narratives can lead to older persons experiencing abuse, violence and neglect. Emphasis needs to be given to the diversity and agency of older persons as well as the value and need of inter-generational interaction and support.

- **Age discrimination** has occurred during the pandemic, while many national anti-discrimination laws fail to address it in a holistic manner due to the absence of age as a clear ground for discrimination in the international human rights framework. States should ensure that measures to protect the human rights of older persons, including their right to health during the pandemic, are in compliance with human rights law, do not discriminate on the basis on age and respect the independence and dignity of older persons (e.g. as regards isolation measures and restrictions on freedom of movement). Accountability mechanisms to redress and remedy violations must be available and accessible to older persons.
- During the pandemic, older persons' **access to medical treatments and health care** was hindered as health systems had to respond to insufficient resources. Restrictions on access to health care, such as triage procedures, must be in line with human rights tenets and States must ensure that medical services crucial for the continued healthy living of older persons are available on a non-discriminatory basis even during lockdowns. Good-quality palliative care must be available. Older persons also need to be provided with related information that is easy to understand and accessible. National health policies and strategies must be based on an assessment of the needs of older persons and developed in consultation with them. Particular attention needs to be paid to integrating care homes in health emergency strategies and to their monitoring.
- **Equal access to information** is vital, especially in the context of emergency situations such as the pandemic. Older persons must have access to public information on the COVID-19 response to enable them to take informed decisions and to challenge or influence public policies. This is particularly important for older persons experiencing social isolation or other forms of disruption.
- The pandemic put a spotlight on **digital inclusion** as the use of online and mobile services accelerated. It is essential to ensure that information is available and accessible to those with limited knowledge of and access to online services. The digital divide is visible in access to information when older persons are in need of support or help, for example because of abuse or neglect. Lifelong learning programmes need to take into account digital literacy programmes and support services to make information and services accessible for older persons, as well as the infrastructure required to access the Internet.
- Access to information and to digital technologies further form an important basis for social engagement and **participation** of older persons in community and public affairs. The voices, perspectives and expertise of older persons in identifying problems and solutions have at times not been sufficiently included in policymaking, particularly in areas in which older persons are affected by the decisions under consideration. It is therefore important to review participation modalities at both the national and global levels.
- The COVID-19 pandemic underlined the lack of a systematic and evidence-based approach to older persons. Although older persons constitute a focus group in the context of the pandemic, they remain chronically invisible. The inclusion of older persons in **public data, disaggregated by age, sex and relevant socioeconomic characteristics** is essential for effective public policymaking that is inclusive of older persons. A comprehensive data set could help with addressing underreporting of violence, abuse and neglect; challenge societal assumptions and stereotypes about ageing; contribute to awareness-raising and empowerment; shed light on multiple and aggravated forms of discrimination; and guide policy-making along a life-course approach to identify and tackle socio-economic, health and other factors that lead to old-age exclusion and inequality.

3. Building forward better: prioritizing the human rights of older persons and strengthening the international legal framework

The global pandemic has had severe consequences on older persons who are at higher risk of illness and death from COVID-19 and whose social and economic wellbeing has been affected by prolonged lockdowns, especially for those living alone. The pandemic has also put a spotlight on the human rights protection challenges older persons face around the world. With increased visibility and awareness, a paradigm shift towards a human rights based approach to ageing, one that recognizes older persons as rights' holders, needs to be strongly promoted. The diversity of older persons, their incredible resilience and positivity, and the multiple roles they play in society must be continuously highlighted and duly reflected in policy and decision-making, including by ensuring consultation with and participation of older persons.

There are some positive signs that the human rights of older persons have gained more visibility and prioritization. The Secretary-General's policy brief on the impact of COVID-19 on older persons, was endorsed by 146 Member States and could contribute to guiding the actions of Governments, civil society organizations, private support entities, health facilities, providers, institutions and hospitals, and older persons themselves. States, civil society organizations, United Nations organizations and human rights institutions need to make older persons a priority in their work.

COVID-19 has magnified pre-existing human rights challenges faced by older persons, including protection gaps in the international legal framework as outlined in the mandate's comprehensive study of 2016 ([A/HRC/33/44](#)). The lack of a comprehensive and integrated international legal instrument to promote and protect the rights and dignity of older persons continues to have significant practical implications, including for older persons in emergency situations. Current instruments do not specifically address the issues of ageing or make them sufficiently visible, and therefore preclude older persons from the full enjoyment of their human rights. Considering that there is agreement and awareness about the need to strengthen the protection of the human rights of older persons, States and other stakeholders need to urgently step up their efforts in this direction.