

**Ministry of Social Integration, Social Security and National Solidarity
(Social Security and National Solidarity Division)**

13th session of the UN Open-Ended Working Group on ageing 03-06 April 2023, New York

Focus Area 1: Right to Health and Access to Health Services

National legal and policy framework

- 1. What are the legal provisions and policy frameworks in your country that guarantee the right of older persons to the enjoyment of the highest attainable standard of physical and mental health, including access to promotive, preventive, curative, rehabilitative and palliative health facilities, goods and services?**

All Mauritian citizens have the right to free primary to tertiary healthcare services including older people in all public health institutions. A fast track service exists in all public health institutions. Some medical services are provided free of cost to elderly people depending on household income. Older persons in Mauritius benefit from free public healthcare at all stages of their healthcare process, e.g. promotive, preventive, curative, rehabilitative and palliative stages. This includes the provision of medication, goods and services associated with healthcare provision. In addition, the *Health Sector Strategic Plan* and the *National ICOPE (Integrated Care for Older People) Strategic and Action Plan* further reinforce and fine-tune free and widely accessible healthcare services adapted to the needs of the elderly.

- 2. What steps have been taken to ensure that every older person has access to affordable and good quality health care and services in older age without discrimination?**

All health care and services provided in the hospital and in Primary Health Care centres to all patients including older age are free. Geriatrician has been appointed to meet the special needs of seniors. Priority counters in Pharmacy have been catered for elderly patients to receive their medications without delay. Health services are being decentralized and a fast-track system for elderly people at all healthcare facilities has been introduced. Yearly Immunization campaign targeting the elderly is ongoing to protect them against seasonal influenza.

The implementation of a Health Booklet for Mauritians aged 60 and above in order to promote integrated person-centered care and long-term care and support for older people in health and social services at community level, with a view to early identification of loss of physical and mental capacity (intrinsic capacity) and the provision of appropriate care.

An early dementia diagnostic clinic outpatient has recently been implemented in all five Regional Hospitals by a Geriatrician.

Non-discrimination against the elderly in Mauritius is enshrined in law through the *PEPA (Protection of Elderly Persons Act) 2005*, and the *WEPPU (Welfare of Elder Persons and Protection Unit)* under the Ministry of Social Integration, Social Security and National Solidarity investigates and provides support in reported cases of elder abuse. Furthermore, the *National ICOPE (Integrated Care for Older People) Strategic and Action Plan* will further explore and re-inforce rights of the elderly against discrimination through the collaboration of key Ministries involved in elderly care (Ministry of Health and Wellness, Ministry of Social Integration, Social Security and National Solidarity) and of other stakeholders.

3. What data and research are available regarding older persons' right to health and access to health care and services? Please indicate how national or sub-national data is disaggregated by sex, age and inequality dimensions, and what indicators are used to monitor the full realization of the right to health of older persons.

Around 260,000 Mauritians aged 60 years and above already benefit from free access to healthcare services, goods and medications, through the Ministry of Health and Wellness. A sub-set of approximately 16,000 elderly Mauritians who are bed-ridden also receive monthly medical visits at home through the Ministry of Social Integration, Social Security and National Solidarity. Data disaggregation by sex and age, and indicators to monitor the full realization of the right to health of older persons, is planned under the *National ICOPE (Integrated Care for Older People) Strategic and Action Plan 2022-2026*.

4. What steps have been taken to provide appropriate training for legislators, policymakers, health and care personnel on the right to health of older persons?

Staff training for personnel involved in caring for the elderly is planned under *National ICOPE (Integrated Care for Older People) Strategic and Action Plan*, to supplement training programmes that are already in force at the level of academia for doctors, nurses and other staff responsible for the care of older people.

Progressive realization and the use of maximum available resources

5. **What steps have been taken to align macroeconomic policies and measures with international human rights law, to use maximum available resources for the realization of older persons right to health, such as through expanding fiscal space, adopting targeted measures and international cooperation?**

The *National ICOPE (Integrated Care for Older People) Strategic and Action Plan 2022-2026* has been prepared in close collaboration with the World Health Organisation in conformity with associated defined international standards.

Equality and non-discrimination

6. **What are the challenges faced by older persons in their enjoyment of the right to health, including the impact of intersectional discrimination and inequality based on age, gender, disability and other grounds?**

Mauritius has a solidly-established culture of caring for the elderly, whether at family level or at system-wide level. For example, older persons benefit from free public transport, free healthcare and the Basic Retirement Pension (BRP) for all older people has been significantly increased in recent years. Accordingly, inequality and discrimination are rare in Mauritius in terms of access of older people to healthcare services.

Public infrastructure (buildings, roads) to be upgraded to facilitate movement.

7. **What measures have been taken to eliminate ageism and discrimination based on age, including discriminatory laws, policies, practices, social norms and stereotypes that perpetuate health inequalities among older persons and prevent older persons from enjoying their right to health?**

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8. What measures have been taken to ensure that older persons are able to exercise their legal capacity on an equal basis with others, including making an informed consent, decisions and choices about their treatment and care?

Older persons in Mauritius are routinely and actively involved in decision-making about their healthcare choices, for example when changing their medications or obtaining consent for surgery. The *National ICOPE (Integrated Care for Older People) Strategic and Action Plan* will further explore and re-inforce rights of the elderly in being active participants in decision-making about their healthcare choices, promoting their autonomy.

Accountability

9. What judicial and non-judicial mechanisms are in place for older persons to complain and seek redress for the denial of their right to health?

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10. What mechanisms are in place to ensure the effective and meaningful participation of older persons living in different geographic areas of the country in the planning, design, implementation and evaluation of health laws, policies, programmes and services that affect them?

The elderly living in all regions of Mauritius, whether urban, rural or outer-island regions, are actively involved in the planning, design, implementation and evaluation of health laws, policies, programmes and services that affect them. Multi-stakeholder involvement is common practice in matters of elderly care. For example, the *National ICOPE (Integrated Care for Older People) Strategic and Action Plan* was developed through and intensive collaborative process involving a broad number of stakeholders such as the Senior Citizens' Council and Non-Governmental Organisations working for the welfare of the elderly, amongst others.

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Social Inclusion

1. For the financial year 2022/2023, the National Social Inclusion Foundation has disbursed an amount of Rs 63.1 M as at date for 21 Charitable Institutions.
2. The Foundation has launched a Special Call in the year 2022 – Improving Care Environments in Residential Care Institutions and an amount of Rs 12.2 M was approved for 14 Charitable Institutions.
3. In the 2022/2023 budget, a measure was announced for an additional allowance of Rs 1800 to be provided to bedridden and severely disabled people residing in 21 charitable institutions and funds have been disbursed as from July 2022.