

## Right to health and access to Health services

### National legal and policy framework

#### **1. (What WHO is doing to support countries around) the legal provisions and policy frameworks 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?**

WHO leads the implementation of the UN Decade of Healthy Ageing (2021-2030), in collaboration with other UN agencies to realize the Decade's vision of longer and healthier lives for all. WHO supports countries on the development and the update of Member States' policies and strategies to foster healthy ageing across the Decade four areas of action. That includes 1. addressing ageism as a public health problem that hinders the right of older persons to the enjoyment of the highest attainable standard of health by raising awareness and advocating for the implementation of evidence based strategies including: policy and law, intergenerational contact and Education.; 2. the development of age-friendly cities and communities that enables older people with a wide range of capacities to participate and contribute to their communities while retaining their autonomy, dignity, health and well-being; 3. promoting Integrated care for older people (ICOPE) approach as a part of UHC, that covers promotion and prevention of declines in physical and mental capacities, management of underlying diseases, rehabilitation and palliative care, addressing a person's immediate social and physical environment including provision of assistive products; 4. supporting the design and shaping of long-term care systems as a part of UHC and promoting investments in health and care workforces including informal caregivers.

WHO also takes action to enable older persons with dementia or disability to enjoy the right to health. The [global action plan on the public health response to dementia](#) calls for intersectoral actions to improve the lives of people living with dementia globally, their families and care givers. The plan set the target that by 2025 75% of Member States would have dementia policies that can be integrated into national ageing or long-term care frameworks so that the rights and wishes of older persons are respected and protected. [Global report on health equity for persons with disabilities](#), highlighting the links between ageing and disability. It recommends 40 targeted actions to address health inequities for persons with disabilities based on the PHC framework and related health system strengthening efforts.

#### **2. (What WHO is doing to support countries) to ensure that every older person has access to affordable and good quality health care and services in older age without discrimination?**

WHO supports member states to provide continuum of health care and services (i.e., promotive, preventive, curative, rehabilitative, and palliative care) without financial burden and without discrimination related to age or disability -discrimination. For example, by providing a repository of health and long-term care interventions linked to healthy ageing (i.e., UHC compendium) as well as developing indicators for monitoring effective coverage of health and social care services to ensure older people are not left behind in the UHC Agenda 2030.

WHO leads, through the Global Campaign to Combat Ageism, efforts to address ageism and ableism ,which have deleterious effects on older people's health and their access to care services, including older people with disabilities.

**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.**

WHO has developed the [ageing data portal](#), that brings together data, disaggregated by sex and age, on available global indicators relevant to monitoring the health and well-being of older persons. This information helps to strengthen the visibility of older people and inform actions to improve health and well-being across countries, in line with global, regional, and national commitments.

[The Global Dementia Observatory \(GDO\)](#) is the monitoring mechanisms of the global dementia action plan and collects key information on [dementia policies and laws](#), what extent to which human rights, equity and other principles are safeguarded, service delivery and information/research at national levels.

WHO Hosts a knowledge exchange Platform on the Decade of healthy ageing which enables people to find, share and co-create knowledge and links to the Ageing portal and the Dementia observatory.

WHO is developing a Monitoring and Evaluation framework for the Decade of Healthy Ageing, which will be made up of over 60 indicators organized multiple domains including political commitment and leadership, human rights, availability of care services, age-based discrimination in health and social care, age-friendliness of communities, functional ability, and intrinsic capacity. WHO also calls member states to take action to advance health equity for persons with disabilities by integrating indicators for disability inclusion into the monitoring and evaluation frameworks of national health systems<sup>1</sup>

**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?**

WHO provides various training on healthy ageing, age-friendly environments, integrated care for older people to diverse stakeholders, from policy makers to health and care workers and caregivers of older persons. That includes the training for health and care workers how to identify and manage diverse health and care needs of older people and self-help training and support manual for carers of people with dementia (iSupport). WHO, together with partners, has already supported the provision of training in the ICOPE approach in 17 countries in all 6 regions.

WHO also provides regular training on Age-friendly Environments, including through the Age-friendly Environments Mentorship Programme (MENTOR-AFE), with more than 300 people trained in all WHO Regions in 2022.

WHO provided the Healthy Ageing Leadership training to 1000 Government, non-government, academic and UN personnel working on ageing.

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<sup>1</sup> Global report on health equity for persons with disabilities  
<https://www.who.int/publications/i/item/9789240063600>

**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?**

WHO advocates the regional convention and the protocol related to the older person's right to health, that includes the Inter-American Convention on Protecting the Human Rights of Older Persons by Organization of American States (OAS) and African Charter on Human and Peoples' Rights on the Rights of Older Persons in Africa by African Union. Member States are supported to develop healthy ageing strategies and implementation frameworks that take into consideration the provisions in the relevant Articles.

In 2021 at the 74<sup>th</sup> World Health Assembly, WHO Member States adopted the resolution on *The highest attainable standard of health for persons with disabilities*. The resolution aims to make the health sector more inclusive of persons with disabilities, through tackling barriers that persons with disabilities experience on the access to health services. The resolution recommends targeted actions for WHO, Member States and international development partners to progress the realization of the right to the highest attainable health for persons with disabilities including older people.

In 2022, WHO Regional Office for Europe (WHO/Europe), together with United Nations High Commissioner for Human Rights (OHCHR), United Nations Population Fund (UNFPA), and HelpAge International, published a joint statement on the humanitarian situation of older persons in Ukraine, advocating for special attention to their specific needs<sup>2</sup>.

**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?**

There are multiple challenges to hinder the right to health and access to quality health services for older people. For example, 1. Availability, affordability, accessibility of quality health care services including prevention, promotion, provision of assistive products, assistive care and palliative care, 2. lack of competency and knowledge of health and care workers to address complex health and care needs 3. fragmented health and care system and service delivery, 4. ageist attitude by health and care workers and age- or disability - based discrimination in service delivery, 5. lack of age-disaggregated data to inform policies and programmes 6. Self-directed ageism 7. Lack of support for caregivers 8. Lack of meaningful engagement of older people in programme design or evaluation. 9. poor attention on the need of adapting the physical and social environment (e.g., reducing poverty, and improving housing,

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<sup>2</sup> <https://www.who.int/europe/news/item/14-06-2022-joint-statement-on-the-situation-of-older-persons-in-ukraine>

education, information, transportation, and social engagement) 10. Interactions of ageism with other forms of disadvantage, such as sexism, ableism, and racism.

**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?**

WHO leads a Global Campaign to Combat Ageism that works to reduce and prevent ageism at all levels, including the personal, institutional, and societal. [Three strategies](#) to reduce ageism are promoted, the development and implementation of policies and laws that address age-based discrimination and inequities, intergenerational interventions and educational activities.

WHO provides ethical principles for optimal care stating that ‘Treatment and care decisions should be based on medical needs and not on irrelevant or discriminatory features such as ethnicity, religion, sex, age, disability or political affiliation’.

UN Decade of Healthy Ageing Monitoring and Evaluation Framework includes an indicator that measures age-based discrimination in health and social care. WHO is developing a new scale to measure ageism. WHO will also monitor self-reported age-based discrimination in health and social care through data collected through population-based surveys in countries.

**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?**

WHO recommends that health and care workers should assess the older person’s care needs in a holistic and person-centred manner. This requires the participation of the older person (and caregivers) in the decision-making process, explaining the options and limitations of interventions in respect of their priorities and preferences, facilitated by accessible communication. The approach is pivotal to guide the delivery of person-centered interventions nested in an integrated continuum of care.

[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?**

The recent WHO global report on health equity for persons with disabilities recommends countries to ensure disability-inclusive feedback mechanisms for quality of health services.

**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**

Meaningful engagement of older people is critical as both agents of change and health service users. Listening to the voices of older people and ensuring their meaningful engagement is a key enabler for

the UN Decade of Healthy Ageing. WHO is developing and testing methodologies to ensure older people are at the centre of all work done to implement the Decade <https://www.decadeofhealthyageing.org/find-knowledge/voices> .

WHO recommends older persons active involvement in the planning, design, implementation, and evaluation of laws, policies, programmes, and services, in its guidance materials on age-friendly cities and communities, ICOPE and long-term care. WHO engages civil society organizations to discuss sustainable mechanisms to ensure meaningful engagement of older people and carers in WHO's work on healthy ageing and long-term care.