



IMPACT OF COVID-19 ON ELDERLY PERSONS IN INDIA

Neha Kothari¹ Dr. Pramila D'Souza²

¹Research Scholar, Shri. Jagdishprasad Jhabarmal Tibrewala University

²Mulund College of Commerce, Adjunct Guide Shri JJT University

Corresponding Author- Neha Kothari

Email- nehakothari123@gmail.com

DOI- 10.5281/zenodo.7070137

Abstract :

The COVID-19 pandemic has spread across the globe and impacting the population in drastic ways. While all age groups are at risk of contracting this virus, the elderly population is at higher risk. The researcher is not going into intricacies of the causes, symptoms, vaccines, cures and medical terminology of corona virus. In this paper, the researcher will cover the impact of COVID-19 on the elderly persons only with special reference to India. The number of elderly in India increased to 104 million in 2011. Due to the increasing population of elderly, the old-age dependency ratio has also increased from 10.9% in 1961 to 14.2% in 2011 which is projected to touch 194 million in 2034 for the country as a whole (National Statistical Office, Elderly in India Report, 2021). COVID-19 is spreading in India and initially, people above 60 years of age accounted for 63% of deaths that occurred due to COVID-19 (NGO Agewell Foundation Report, 2021). With this view, the research paper focuses on the challenges and concerns faced by the elderly persons during the ongoing pandemic COVID-19. For this researcher has referred the UN Policy Brief 2020 and Advisory 2020 issued by National Human Rights Commission (NHRC) so as to throw some light on the efforts taken at national and international level for the same. The paper attempts to analyze the concerns and challenges of the elderly population in wake of COVID-19. Moreover this paper covers the older persons in all the settings of their life like home, prisons, hospitals etc. The researcher discusses the policies and measures taken at international and national level for the elderly persons and lacuna in practical implementation of the same. In the view of above, this research paper is divided into nine sections were in first section is Abstract followed by Keywords and Introduction. The fourth section deals with Objectives and fifth deals with the Hypothesis. The sixth and seventh section deals with Research Methodology and Discussions and Findings. The seventh section will be consisting the detailed discussion on the topic covering the challenges and concerns faced by the elderly persons during pandemic and measures taken at national and international level for the same. In the eighth section the researcher gives the Conclusion and his Suggestions or Recommendations. The final section of the paper is Bibliography which covers the sources which are referred by the researcher.

Keywords : COVID-19, elderly, impact, policies, corona virus, challenges, pandemic, national, international, older persons, UN policy brief, NHRC, Advisory

Introduction :

According to the United Nations Policy Brief on the “Impact of COVID-19 on Older Persons”, released in April, 2020, the COVID-19 recovery process is an opportunity to set the stage for a more

inclusive, equitable and age-friendly society, anchored in human rights and guided by the 2030 Agenda for Sustainable Development to “Leave No One Behind”. In India, according to the data released by the Ministry of Health

and Family Welfare, about 53% of the COVID-19 victims were aged 60 years and above, reiterating that elderly people and those with co-morbidities are at higher risk of mortality.

According to the Agewell Foundation's Survey Report on the "Impact of Covid-19 lockdown situation on Older Persons" in April, 2020, the lack of treatment of Non-COVID ailments in hospitals has adversely affected the health of elderly persons. There has also been an increase in the cases of discrimination and elder abuse during this time.

Researches state that due to the mandatory self-isolation for the elderly persons to curb the spread of the virus, it has made the elderly more vulnerable to mental health issues such as loneliness, depression and anxiety. The Help-age India conducted a nationwide survey and stated that COVID lockdown has impacted the livelihood of 65% of elderly population and this has increased their dependency on their family members and caregivers. Due to their movement restrictions, elderly persons that live alone are facing difficulties in procuring food and ration.

Rationale :

The human race has faced a serious problem of fighting with an invisible enemy that is COVID 19 or corona virus. The impact of corona virus was huge on domestic as well as international level. The situation created by COVID 19 is often compared to the impact of 'World War III'.

This reality poses a series of direct and indirect challenges for older persons. With this view, the paper is an attempt made to analyze the concerns and challenges of the elderly population in wake of COVID-19. The researcher discusses the various policies and measures taken at international and national level for the elderly persons and lacuna in practical implementation of the same because ageism is the basic reality of life which everyone has to face.

Objectives :

1. To evaluate the policies framed by United Nations for the elderly persons during COVID-19
2. To study the policies and measures adopted at the national level for the betterment of elderly persons during the pandemic
3. To evaluate the impact and efficacy of the measures taken and challenges faced for the implementation

Review of Literature :

In this thesis, the researcher Sandhya Ram has conducted the in depth study of the efforts taken at national and international level for the protection of human rights of elderly persons. The research is restricted only to the states of Goa and Kerala and the work done is before the onset of pandemic so no mention of the same (Protection of rights of older persons - a socio-legal study with reference to the State of Goa and Kerala, Goa University, 2016). This Policy Brief elaborates the impact of COVID-19 on elderly persons by identifying immediate and long term policies and responses. It has set four key priorities for action. They are health care decision making, strengthen the social inclusion during physical distancing, ensure the fully integrated support to the older persons and expand the participation of older persons in civil society (Policy Brief, Impact of COVID-19 on older persons, 2020). The Health Advisory on elderly persons during COVID-19 was issued mentioning the Do's and Don't during the pandemic (Ministry of Health and Family Welfare, Government of India, 2020).

The special Advisory was issued by AIIMS during the pandemic for protection of elder persons (<https://www.aiims.edu>). The study was conducted highlighting the increasing incidences of elderly abuse during pandemic and various psycho-social challenges like anxiety, isolation, neglect, sleeplessness etc. faced by them

(Human rights of elderly are at stake, Agewell Foundation, 2021). The Strategy Preparedness and Response Plan (SPRP) was published about how COVID-19 spreads, the severity of disease it causes, how to treat it, and how to control transmission of the same (www.who.com - COVID-19 strategy update, 2020). This policy brief highlights emerging evidence of the impact of the recent global pandemic of COVID-19 on violence against women and girls. It makes recommendations to be considered by all sectors of society, from governments to international organizations and to civil society organizations, in order to prevent and respond to violence against women and girls, at the onset, during, and after the public health crisis, with examples of actions already taken ([UN Women Policy Brief: COVID-19 and Ending Violence Against Women and Girls, 2020](#)). [This policy paper provides a global overview of policy, trends and social protection provided to the older persons \(https://www.ilo.org\)](#).

Hypothesis :

H_0 - The null hypothesis of the study is that there is no impact of COVID-19 on elderly persons. The null hypothesis is denoted by H_0 .

H_1 - The alternative hypothesis of the study is that there is the significant impact of COVID-19 on elderly persons. The alternative hypothesis is denoted by H_1 .

Research Methodology :

The method adopted by the researcher is the Doctrinal Legal Research. It is also known as Library-based Research. In this, the researcher tries to find out the definite answers to legal questions through thorough investigation from the law books, existing statutes, legislation, commentaries and other legal documents. The Doctrinal Research is carried on by reviewing the above mentioned Secondary Sources. It is a theoretical research which does not

involve any kind of experimentation or field work.

Discussions and Findings :

The COVID-19 pandemic is causing untold fear and suffering for older people across the world. As of 26 April, the virus itself has already taken the lives of some 193,710 people, and fatality rates for those over 80 years of age is five times the global average. As the virus spreads rapidly to developing countries, likely overwhelming health and social protection systems, the mortality rate for older persons could climb even higher. Less visible but no less worrisome are the broader effects of COVID-19.

Challenges and concerns faced by the elderly persons during pandemic as per the UN Policy Brief 2020 are as follows :

In the United States, 80% of deaths were among adults 65 and over. In China, approximately 80% of the deaths occurred among adults aged 60 years or older. This reality poses a series of direct and indirect challenges for older persons.

Access to health care :

In the face of life-threatening pandemic, such as COVID-19, older persons faced challenges in accessing medical treatments and health care. In developing countries, there are weak health-care systems. The budget allocation on health care is not sufficient for the ever increasing population. So the last preferred section for health care services is elderly persons. This has been at the worst during pandemic. There is also a shortage of the efficient and well qualified workforce which creates more difficulties for the older persons with disabilities and chronic illness. The hospitals are overburdened and they have very scarce medical resources at their disposal. So they are forced to take decision on allocation of these resources like ventilators, oxygen cylinders and Remdesivir injections on the basis of age were least priority is

given to the older persons. This has directly affected their overall life expectancy and chances of survival. It is important that medical decisions must be based on medical need, ethical criteria and on the best available scientific evidence. Everyone has the right to consent to, refuse or withdraw medical treatment, and to express their wishes in advance. However, during this pandemic, older persons have not had an opportunity to give consent to medical treatment or have been put under undue pressure to refuse medical treatment in advance, such as being asked to sign do not resuscitate orders even before receiving treatment.

Access to the general care and support:

Older persons are more likely to have ongoing health issues which requires medical assistance like routine check-ups, home-based visits by medical personnel etc. The strict guidelines of social distancing have even worsened this issue as no one can visit them and servants and maids were also not allowed so vulnerability of older women has increased many times.

Older caregivers, health workers and volunteers:

Older persons play multiple roles in society, including as caregivers, volunteers and community leaders. As detailed in the Policy Brief on COVID-19 the older women often provide care for older relatives and raise and care for the children. A midst the COVID-19 crisis, States have called their retired health professionals to return to practice and support the overburdened health facilities. This have exposed them to severe risk were their personal health care is at risk and sometimes they are not even given personal protective equipment (PPE) to protect themselves first and then others.

Violence, neglect and abuse:

The abuse of older persons has been on the rise since the outbreak of COVID-19 pandemic. A Yale University study

found an 83.6% increase in adult abuse from pre-pandemic estimates. There has been increased rates of violence against women, and particularly intimate partner violence, exacerbated by lockdown conditions. There is no proper dis-aggregated data relating to older persons. The measures to restrict the movement has also triggered the greater incidences of violence against older persons and resulted in all types of abuse - physical, emotional, financial, and sexual, as well as neglect.

Older persons in detention and emergency situations:

In humanitarian settings, there is lot of overcrowding in camps and camp-like settings which are set up by the Government. There are limited health-care, water and sanitation facilities available especially food is not of the merchantable quality which may put older persons at particular risk during the COVID-19 pandemic. Moreover, special attention must be given to the number of persons in these camps. There has to be certain limit which needs to be imposed by the Government. Physical distancing is often difficult to achieve in prisons and other places of detention. So the options of release and alternatives for detention must be considered.

Impact of physical distancing :

COVID-19 has aggravated the social exclusion of older persons by restricting their movement and contact by imposing stay-at-home restrictions, quarantine and lockdown. While such measures are crucial for ensuring the safety of all but in reality it has worsen the problems faced by older persons. Many older persons rely on home and community services and support particularly those who are living alone. The efforts by authorities and community volunteers are to be made to reach out to older persons and to deliver the necessary support services at their earliest. The breakdown in the social networks has developed many mental and psychosomatic diseases like

Dementia, Alzheimer which in turn is making them more care dependent.

Impact of the digital divide :

For many, the Internet and other digital technologies have become a window to the world during the lockdown which enables us to connect with family, friends and the community. However, many older persons have limited access to these technologies as they lack necessary skills to fully exploit them. While about one-half of the world's population has Internet access but older persons remain disproportionately offline. They struggle to receive the necessary support to connect with their loved ones. The barriers faced by the older persons are related to literacy, language, visual and hearing impairments. This digital divide also impedes the older persons' access to essential information regarding the pandemic and related health and socioeconomic measures.

Employment and social exclusion :

Many older persons around the world live in poverty and experience social exclusion. The risk of poverty increases with age. The 80% of the older population lives in poverty. Older persons rely upon multiple income sources, including the paid work, savings, financial support from families and pensions, all of which may be in jeopardy as a result of COVID-19. Therefore, the pandemic has significantly lower down the incomes and living standards of older persons' incomes and living standards.

Discrepancy and dis-aggregation in the data of elderly persons during the pandemic :

There is the lack of availability of age-specific data. Data on older persons is dis-aggregated by age groups. But still there is no proper classification such as we have for other age groups like 0 to 5 years, 5 to 8 years, so on and so forth. We have different categories like child, teen, adolescent and adult but there is no such categorical bifurcation for elderly persons. They are classified as a single unit that is senior citizens. Since there is no proper classification so there are the chances of discrepancies in data related to older

persons. There is also a need for dis-aggregation such as 60+, 60 to 69, 70 to 79 and 80+ and then necessary facilities must be provided accordingly as per their requirements.

Measures taken at international level to protect the rights of elderly persons during pandemic :

The COVID-19 pandemic has revealed the human rights violations faced by older persons. This has given a need to support healthy ageing policy as a human rights imperative. The tentative initial steps taken at the regional level are through codifying Inter-sectional rights and obligations through the **Inter-American Convention on Protecting the Human Rights of Older Persons**.

Since the World Assembly in 1982 there has been a long pressed need to adopt the **Vienna International Plan of Action on Ageing**.

In pursuance of this, the Second World Assembly on Ageing adopted the **Madrid International Plan of Action on Ageing (MIPAA)** in 2002 which 'ensures that persons everywhere are able to age with security and dignity and to continue to participate in their societies as citizens with full rights'.

To uphold the rights of older persons, the UN General Assembly established an **Open-Ended Working Group on Ageing (OEWGA)** in 2010 which brings together national, international and non-governmental representatives to examine gaps in international frameworks.

Advancing more explicit obligations, the UN Human Rights Council adopted a **Resolution on the human rights of older persons** in 2013 which directs the States to 'promote and ensure the full realization of all human rights and fundamental freedoms for older persons'.

In 2017 the **Inter-American Convention on Protecting the Human Rights of Older Persons** has been drawn from these regional instruments to establish special

protection for older populations and facilitate supranational accountability for healthy ageing.

Looking for the parallel efforts made by the African Union they have developed a **Protocol on the Rights of Older Persons** in 2016 the committing the States under the Inter-American Convention for designing and implementing inter-sectoral public health policies and to promote enjoyment of the highest level of physical, mental and social well-being.

The **prospective UN Convention on the Rights of Older Persons** provides a crucial opportunity to elaborate comprehensively the health and human rights of older persons, establishing legal authorities to prevent discrimination and facilitate healthy ageing, inter-sectional approaches to the health and dignity of older persons and accountability mechanisms to facilitate monitoring and review.

The UN Secretary General has published a **Policy Brief on the Impact of COVID-19 on older persons** in May 2020. The main aim is to influence the States for implementation of international human rights norms by shifting the domestic perception of human rights and a Committee on the Rights of Older Persons is constituted that will provide an institutional mechanism to translate the rights of older persons from political aspiration to legal reality.

Measures taken at national level to protect the rights of elderly persons during pandemic :

The National Human Rights Commission (NHRC) has been mandated by the Protection of Human Rights Act, 1993 to promote and protect the human rights of all in the country. Towards the fulfillment of its mandate, it has constituted a Committee to assess the impact of COVID-19 on the marginalized or vulnerable sections of the society and to suggest the responses in the form of the Advisory.

In the above context, the following Advisory

is issued by the National Human Rights Commission and some of the highlights of the Advisory are as follows :

Access to the Medical Services:

The door step delivery facilities must be provided to the elderly persons having severe mobility issues. To ensure that treatment of Non-COVID elderly persons must be done in separate section/part of hospitals. The necessary steps must be taken to ensure that all hospitals are adequately staffed and equipped with sufficient stock of medicines and equipments required by elderly persons affected by COVID-19 and who have comorbidities like diabetes, hypertension, heart disease etc. and require immediate medical attention/ treatment.

Legal Mandates related to elderly persons :

The efforts need to be taken for the compliance of Section 18 of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 and designate the District Social Welfare Officer be identified as a Maintenance Officer. To ensure the compliance of Section 20 of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 to adequately provide for medical support for senior citizens. The Counsellor needs to be appointed for handling mental health helplines to help the elderly with gerontological issues like depression, anxiety, etc.

Employment and Elderly Persons:

Elderly Persons who are employed or self-employed may be encouraged to work from home so as to prevent the spread of the virus. They post retirement benefits must be provided. The timely payment of the pension must be made to the eligible elderly persons. The existing financial security schemes must be reviewed keeping in view their survival needs.

Access to the social support:

The Complaint Redressal Mechanism must be exclusively set up at police station specifically for the elderly persons. Special Helpline Nos. must be given only to help the elders and Volunteers from the NGO's must be encouraged to come forward and provide help the elderly persons. Awareness and

sensitization programs must be conducted.

Conclusion and Suggestions :

Conclusion :

In the light of the above discussion and findings the researcher states that since the data is collected only from the Secondary sources and not the Primary sources so there is no point in proving the hypothesis but still the researcher affirms the hypothesis H₁. The researcher has drawn the conclusion that pandemic has acted as catalyst in the movement of protection of human rights of elderly persons not only in India but across the globe. Many countries lack adequate legislation at the national level to protect the rights of older persons and to prevent the discrimination, exclusion, marginalization, violence and abuse. There is the need for a dedicated internationally agreed legal framework specifically directing towards the protection of human rights of the elderly persons in the form of Convention on the Rights of Older Persons.

Suggestions :

The following are the Suggestions given by the researcher in light of COVID-19 and elderly persons :

1. To ensure that all the older persons at the risk of acquiring COVID-19 and those living alone are identified and attended to as early as possible.
2. To ensure that medical decisions are based on individualized clinical assessments, medical need, ethical criteria and on the best available scientific evidence.
3. The urgent action needs to be taken to prioritize the testing of older adults and to ensure the continuity of adequate health care services for them and arrange for the paid care workers who provide home-based care or care in institutional settings.
4. To make sure that health updates are given accurately and regularly to the family members of the COVID-19 elders who are in the Care facilities and also death cases occurring there are reported correctly to the their respective family members.
5. There is a need to protect the elderly women from any form of domestic violence or abuse.

6. We shall have the balanced visitors policies to visit the hospitals and other Care facilities. We must allow the patients to talk to their relatives on the call or make a video call. Once a week patient shall be allowed to meet his immediate family by ensuring all safety standards like PPE kit etc.

7. To ensure that contingency plans and strategies must be planned addressing the older refugees, migrants and displaced persons

8. To take necessary steps in encouraging the community level responses from informal and formal networks of volunteers, showing solidarity and support to ensure the physical and mental well-being of older persons. For instance, In Mumbai, India, a community aid approach has been set up by the “WE Group - Mission Feed Hungry - Mira Bhayandar” which has been distributing 15 days worth of rations to under-privileged persons through an informal group of volunteers. The “Art of Living” an NGO whose presence is there in more than 160 countries across the globe have also come forward to provide direct help to COVID-19 affected people

9. To ensure that community-based services and support to older persons in terms of social and legal services are provided despite of physical distancing measures.

10. To provide for the Yoga and Meditation sessions to the elderly persons which will provide them emotional, mental and psycho-social support.

11. To extend the support to the older persons by helping them to access digital communication so that they keep in contact with their families and social networks when physical movements are restricted.

12. To establish a system where older people can be educated about the restrictions and latest rules and regulations on COVID-19 by various modes such as radio broadcasts, print notifications and text messages to ensure that critical information reaches older persons.

13. To take steps to implement UN System Support, including Shared Responsibility and Global Solidarity approach in India and

so as to contribute to the UN's Global Humanitarian Response Plan.

14. To ensure the income security of older persons, particularly older women, through Universal Pension Coverage and adequate entitlement levels.

15. To adopt immediate socio-economic relief measures and social safety nets, such as guaranteed access to food, water, essential goods and services and basic healthcare during the COVID-19 crisis for older persons affected by economic hardship.

16. To include the older persons in economic recovery initiatives, removing age caps for livelihood and job rehabilitation programmes as well as other income-generating activities or food-for-work initiatives and for obtaining micro credit.

17. To include older persons in life-long learning programmes and enhance their access to information and communication technologies (ICTs).

18. To take the steps to form the National Response Plan and Strategies which explicitly and directly address the high risks and vulnerabilities faced by the older people in emergencies, particularly the most vulnerable, including refugees, migrants and displaced older persons.

The general suggestions given by the researcher for the better protection of human rights of elderly persons :

1. In India, there is only one legislation specifically for elderly persons that is Maintenance and Welfare of Parents and Senior Citizens Act, 2007. There are several ambiguities with respect to the Act including the provision for appeal and bar of legal representation and there are many other loopholes in the implementation of the same.

2. The rights of the older persons are implicit in Fundamental Rights and Directive Principles of State Policy but it needs to be spelt out explicitly and Constitution of India needs to be suitably amended for the same.

3. Article 15(1) and 15(2) must be amended and include the word 'age' as one of the grounds on which a citizen shall not be discriminated against by any State or by the private individuals as far as access to the public places and amenities are concerned.

4. Article 39 in Part IV should be amended to add clause (g) stating "that Senior Citizens are given opportunities to develop their full potential in a healthy manner in conditions of freedom and dignity and participate effectively in the mainstream of national life and that old age should be protected against abuse, discrimination, exploitation and moral and material abandonment."

5. A new clause (l) should be added after Article 51 A (k) in Part IV A, Fundamental Duties, worded, "to respect the parents and elders; to provide for the physical and mental well-being of parents and other elder members in the family; and to have compassion for all senior citizens."

6. The Government of India should adopt a new Policy for Senior Citizens in consonance with the Madrid International Plan of Action on Ageing and the UN Principles for Older Persons. The Policy should take an integrated approach to ageing and should ensure meaningful coordination between the different departments of the government dealing with various aspects relating to senior citizens. Moreover the Policy should consider the fact that „senior citizens“ is not a homogeneous group and all persons in the age group of 60 years and above do not have similar requirements and faculties. Therefore there has to be a further classification of the senior citizens into 70+ and 80+ and their challenges ought to be addressed according to their specific needs.

7. National Commission for Older Persons, having power to conduct suo moto enquiry and investigation into violation of human rights of older persons should be constituted to protect the Senior Citizens from discrimination, abuse, harassment, torture, cruel or inhuman treatment both by individuals and public authorities. Similar mandates of setting up the Commissions must be imposed compulsory on each State also and not at the whims and fancies of each State.

To conclude, though old age brings with it a lot many physical and mental ailments or inabilities; law does not seem to have fully acknowledged the special needs of the older persons.

Setting priorities in society, being the legal frontier, it is much warranted that the States take adequate steps towards ensuring a “Society for All Ages”, considering the fact that the world population is rapidly ageing. The COVID-19 recovery process is an opportunity to set the stage for a more inclusive, equitable and age-friendly society, anchored in human rights and guided by the 2030 Agenda for Sustainable Development to “Leave No One Behind”.

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