Department of Economic and Social Affairs

Guidelines for review and appraisal of the Madrid International Plan of Action on Ageing

Bottom-up participatory approach

United Nations
New York, 2006

DESA

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NOTE

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The term "country" as used in the text of this publication also refers, as appropriate, to territories or areas.

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Foreword

The present guidelines have been produced to assist national Governments in carrying out a bottom-up review and appraisal of the implementation of the Madrid International Plan of Action on Ageing, 2002. The intention of this publication is not to offer a set of rigid instructions, but rather to serve as a source of ideas and practical examples that could help Governments design and conduct their own review and appraisal projects.

The participatory approach should not be viewed as a panacea developed to replace all other methods of monitoring, review and appraisal. Instead, it entails a call for their supplementation through a wider use of qualitative participatory methods. While concrete methodology may vary, qualitative and participatory content should be strengthened and more fully utilized. In addition, the quantitative monitoring of social situations, for example, through censuses, surveys and civil registration, can play a highly important role in assessing national ageing situations and in helping to identify local and national priorities on ageing for a more precisely targeted and in-depth participatory inquiry.

The guidelines are primarily intended for use by *national focal points on ageing* – which are very often single-person offices responsible for developing, implementing and monitoring national policy on ageing, including the implementation of Madrid Plan of Action. These guidelines were prepared in order to help national focal points on ageing organize and facilitate the process of review and appraisal of the Madrid Plan of Action.

At the same time, the guidelines could be useful to policy staff in different ministries such as those responsible for health, finance, development and planning.

The guidelines will also be of interest to all **other stakeholders** in this process, namely:

- Older people's organizations
- Cross-government working groups on social and development policy
- Civil society organizations working with disadvantaged older people and other marginalized groups
- Offices, programmes and agencies system of the United Nations system
- Private sector organizations, employers and insurance providers and
- Academic institutions and researchers engaged in social policy research

While a bottom-up participatory approach has been effectively used by Governments and civil society all over the world for diverse research and policy monitoring activities, the adoption of this approach at a global scale for the review of an international framework such as the Madrid Plan of Action is new. This publication offers a clear overview and provides simple and achievable steps for facilitating the process practically and realistically.

How to use this publication

These guidelines will help the user prepare for an in-depth participatory inquiry by reviewing current policy on ageing and offering assistance on deciding where to begin. They also outline how to organize and support a bottom-up process of review and appraisal.

The steps presented in this publication are not intended to be carried out by only one person, namely, the national focal point on ageing. We hope the guidelines will prove helpful to those responsible for organizing the process and supporting others in carrying out the tasks required within the time allotted and with the participants and resources that are available.

Users are encouraged to utilize these guidelines in a flexible way, building on their experience and adapting suggestions to fit the scope and objectives of their own reviews and appraisals. This publication does not offer a set of prescriptive recommendations that government officials and other stakeholders are expected to follow step by step. The steps are presented in logical sequence, but in practice they may run simultaneously and may require different emphases, based on their appropriateness with respect to the national policy environment. For example, some Governments with established policies and programmes on ageing that have a clear idea of the focus (theme) of their review may omit some preparatory steps and proceed immediately to participatory assessment of the impact on older people.

Most users of this publication will have multiple responsibilities and functions, of which review and appraisal of the Madrid Plan of Action will constitute only one aspect. They might find it helpful to integrate the review and appraisal of the Madrid Plan of Action with established monitoring activities of government and civil society groups. This will contribute to awareness-raising and mainstreaming of ageing.

Additional materials and useful websites are highlighted in the Resources section following the annexes.

Executive summary

The present guidelines, produced by the Department of Economic and Social Affairs of the UN Secretariat, constitute a step-by-step guide for a bottom-up participatory review and appraisal of the Madrid International Plan of Action on Ageing, 2002.[1] They are intended to be used in a flexible way, one adapted to appropriate national contexts. The guidelines are primarily intended for use by national focal points on ageing. They will also be of use to policy staff in different ministries (for example, those responsible for health, finance, development and planning) and other stakeholders[2]. The aim of this approach is to discover the impact of the Madrid Plan of Action on the quality of life of older people through involving them in its review. The guidelines set out clearly how to identify the stakeholders with whom one may work and how to review national policies and define priorities for action on ageing. They also explain how to conduct a bottom-up review and appraisal with older people, including guidance on collection, collation, analysis and dissemination of policy-relevant information.

The broad aim of the Madrid Plan of Action is "to ensure that persons everywhere are able to age with security and dignity and to continue to participate in their societies as citizens with full rights" (para. 10). The three priority directions for the Madrid Plan of Action are:

- Older persons and development
- Advancing health and well-being into old age
- Ensuring enabling and supportive environments

Government implementation of policies based on the Madrid Plan of Action varies according to widely differing national contexts. Implementation should be a dynamic process in conjunction with review and appraisal. By promoting this bottom-up participatory and flexible approach to monitoring, reviewing and appraising the Madrid Plan of Action, the Department of Economic and Social Affairs recognizes that empowering older people to participate in mainstream policy development processes requires special efforts. While bottom-up participatory processes are commonly used in many countries for various purposes, the adoption of such an approach on a global scale for review of an international framework such as the Madrid Plan of Action is new. It reflects the need to recognize and build upon the capacity of older persons to contribute to society and to facilitate their participation in decision-making processes at all levels.

The reality of disadvantaged and less powerful older people is often not visible to others. Bottom-up participatory approaches bring together primary and secondary stakeholders in order to make this reality visible, and to promote mutual learning and sharing of information.

This process generates knowledge for policymakers, supports action and promotes public awareness. Policies and programmes are thus improved. Governance is enhanced as

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[1] *Report of the Second World Assembly on Ageing, Madrid, 8-12 April 2002* (UN publication, Sales No. E.02.IV.4), chap. I, resolution 1; annex II.
[2] For instance: older people's organizations; cross-government working groups on social and development policy; civil society organizations working with disadvantaged older people and their marginalized groups; offices, programmes and agencies of the UN system; private sector organizations; employers and insurance providers; and academic institutions and researchers engaged in social policy research.

social capital is developed and people are motivated to organize and advocate for improvements in their own well-being.

Such an approach to the review of the Madrid Plan of Action will enable:

● Broadening of policy- and programme-relevant information sources (in-depth qualitative data to complement quantitative data)
● Priority-setting of policies and programmes that reflect the interests of the primary stakeholders
● Opportunities for marginalized participants to analyse and articulate their situation with other stakeholders. This promotes partnership in working for realistic change

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The guidelines comprise four key sections covering:

- Identification of stakeholders: who to work with and how
- How to review national policies and define priorities for action on ageing
- How to review implementation of the Madrid Plan of Action with older persons through bottom-up participatory assessment
- How to distill and analyse this information at national and regional levels

Case studies from Africa, Asia, South America and New Zealand offer positive examples of the engagement of policymakers with older people and other stakeholders to improve policy and programme design and implementation.

Annex I suggests the quantitative indicators that can be used to help assess implementation of the Madrid Plan of Action combined with findings from bottom-up participatory reviews with older people.

Annex II and the listed resources provide further in-depth advice and discuss tools for conducting participatory research.

Overview of key steps

1.   Identifying stakeholders
Main task: decide who to work with and how

The key focal point person on ageing should be the catalyst for this process, supported where possible by the national coordinating mechanism on ageing (or another stakeholder group if this does not exist). Other stakeholders can play various roles in reviewing policies, assessing impact, facilitating participatory processes, distilling and analysing information and raising the public's awareness of the review. Primary stakeholders are older persons and secondary stakeholders include government ministries and departments, civil society, the private sector, national academic and research institutions and the media. Their various roles should be clarified through a stakeholder analysis including all the important stakeholders.

2. Review national policies in response to ageing

Main tasks: define challenges and priorities for action on ageing and determine what to review using a bottom-up approach

Reviews should identify specific policies on ageing related to the Madrid Plan of Action and examine how ageing issues are addressed through other national policies, programmes and national budgets. (Suggested indicators and assessment tools for this national-level review are included in annex I). This involves assessing to what extent ageing is being mainstreamed and looking at how this could be taken forward. Review of existing sources such as national censuses, household surveys and other research studies can provide additional information (as well as highlight the gaps that exist in information concerning the economic, social and health status of older people in each country).

The focus or the theme(s) for bottom-up review should then be decided upon. However, review and appraisal of the Madrid Plan of Action constitute an ongoing process: it will not be possible to carry out a meaningful bottom-up review of all priority areas simultaneously.

3. Reviewing implementation of the Madrid Plan of Action with older persons

Main task: conduct bottom-up participatory assessment of policy impact on older persons

Facilitators with sufficient experience in participatory research should be identified. Poor and marginalized communities should be purposively selected for research. Appraisal teams and field guides also need to be put together and training needs to be organized to enable team members to successfully engage with older people. Following research focusing on a few broad areas (themes) of enquiry, findings should be shared with the communities to validate the findings and provide additional information. Ultimately, information gathered and analysed at the community level should be synthesized and used by older people themselves in local and national advocacy and policy engagement with other stakeholder groups. This research can therefore encompass in itself an empowering process, as examples from Bangladesh, India and South Africa illustrate.

4. Distillation and analysis of information at national, regional and global levels

Main task: identify policy relevant implications and recommendations

National-level analysis of the implementation of the Madrid Plan of Action should draw on the outcomes of information gained through national policy review and background information sources as well as the results of bottom-up reviews and appraisals with older people. It should be structured around two key questions:

(a)   What has been done in our country since the Second World Assembly on Ageing?

(b)   What was the impact on the quality of life and well-being of older people in our country?

Policy-relevant implications and recommendations should be considered and discussed with policymakers and civil society representatives at local, provincial and national levels with older people present. This will help to determine the more general applicability of the research in the country. A national workshop conducted with the national coordinating body or stakeholder group should present the major findings and proposals, and involve the media in disseminating the findings more widely. These outcomes can then feed into regional- and global-level reviews.

The figure below provides an overview of this process:
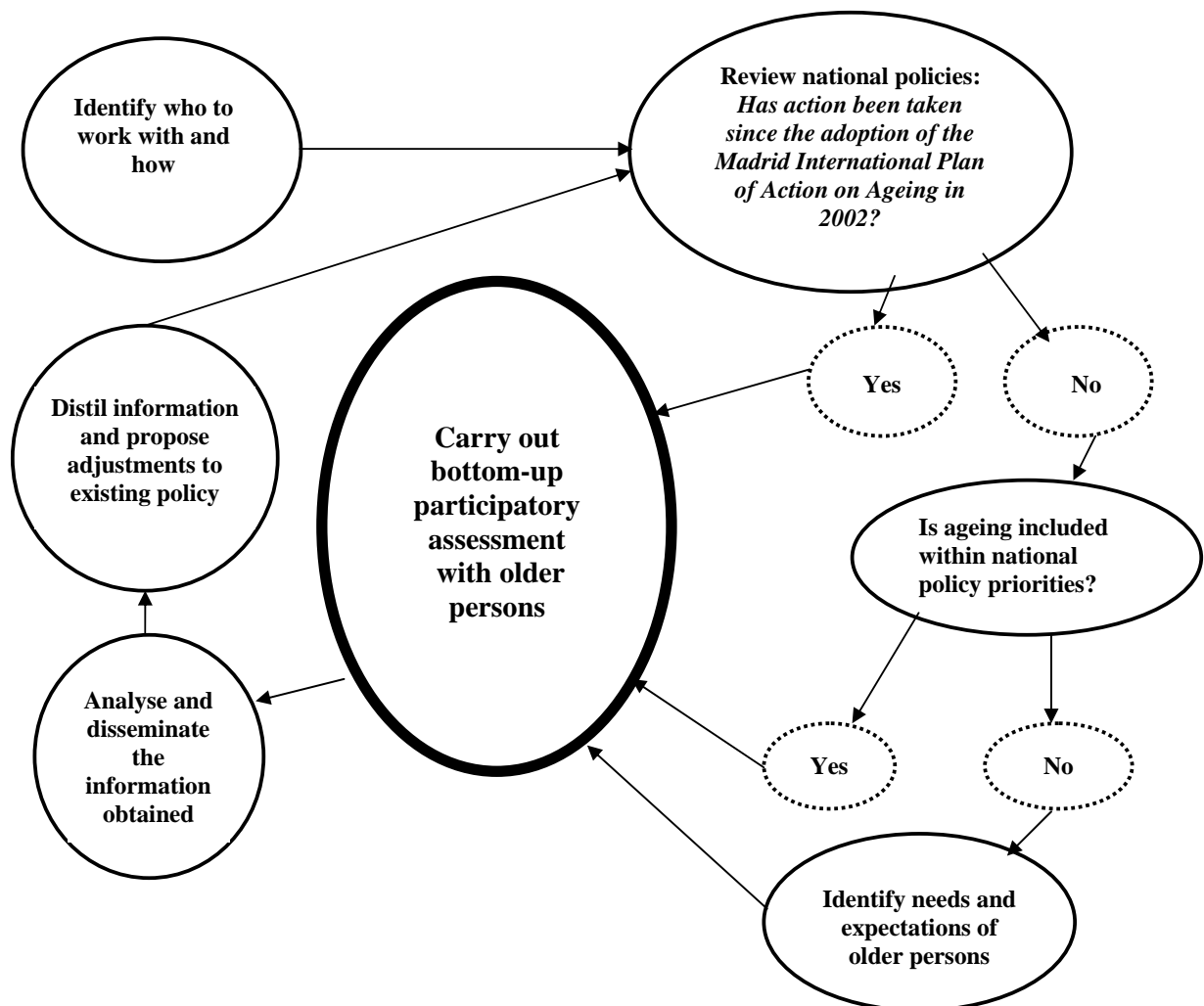
Additional materials and resources are listed in the Resources and References sections and the annexes.

Introduction

1.   The present publication has been prepared to provide support to the process of the monitoring, review and appraisal of the Madrid International Plan of Action on Ageing, 2002,[3] through focusing on the bottom-up participatory approach.

2.   The Madrid Plan of Action was adopted in 2002 by the Second World Assembly, held in Madrid. As stated in article 1 of the Political Declaration,[4] the Madrid Plan of Action was created "to respond to the opportunities and challenges of population ageing in the twenty-first century and to promote the development of a society for all ages"[5]. Since then, the task of national Governments has been to translate the objectives and recommended actions of the Madrid Plan of Action into policies and practices that impact positively on the lives of older people in the local context. The broad aim of the Madrid Plan of Action is "to ensure that persons everywhere are able to age with security and dignity and to continue to participate in their societies as citizens with full rights"[6]. Policy actions taken by Governments to implement this aim are shaped by the widely differing economies, political structures, resource bases, cultural norms and social and demographic conditions that exist among nations and regions. The implementation of the Madrid Plan of Action is a continuous and dynamic process that goes hand in hand with its review and appraisal: these processes are highly interdependent and are continuously evolving.

3.   The three priority directions of the Madrid Plan of Action are designed to guide policy formulation and implementation, and thus provide a broad framework for monitoring, review and appraisal activities. These directions are: older persons and development; advancing health and well-being into old age; and ensuring enabling and supportive environments. In respect of these three directions, three broad areas of inquiry are suggested, within which specific topics (issues, themes) for review and appraisal can be identified (see Table 1).

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[3] *Report of the Second World Assembly on Ageing, Madrid, 8-12 April 2002* (UN publication, Sales No. E.02.IV.4), chap. I, resolution 1, annex II.
[4] Ibid., annex I.
[5] Ibid., annex I.
[6] Ibid., annex II, para. 10.

Table 1.   **Priority directions of the Madrid Plan of Action and areas of inquiry for review and appraisal**

Priority direction of the Madrid Plan of Action	Area of inquiry
1. Older persons and development	Level of integration of ageing in development
2. Advancing health and well-being into old age	Quality of life for older persons
3. Ensuring enabling and supportive environments	State of the environment for promoting individual development into older age

4.   Using this as a broad framework, Governments are encouraged, in cooperation with other stakeholders, to decide on the focus of national review and appraisal and to develop appropriate mechanisms for organizing and supporting this. Within the United Nations, the Commission for Social Development has responsibility for follow up of the Madrid Plan of Action at the global level. At its forty-first session in 2003, the Commission endorsed a **bottom-up participatory approach** for review and appraisal of the Madrid Plan of Action, thus promoting greater participation of older people and other stakeholders in the process.

5.   The endorsement of the bottom-up approach is a significant development. At its heart lies the conviction that all sectors of society must play a role in the implementation of the Madrid Plan of Action if the ideals, objectives and actions set out therein are to be realized. A central theme of the Madrid Plan of Action is the need to recognize and build upon the capacity of older persons to contribute to society and to facilitate their participation in decision-making processes at all levels[7]. The bottom-up approach seeks to include the voices of older people in local and national decision-making processes that affect them. Because the majority of the world's older people are excluded from mainstream policy development processes, special efforts are required to empower older people to participate meaningfully in all stages of policy development, implementation, monitoring, review and appraisal.

6.   In facilitating the review and appraisal, Governments are encouraged to consider all sectors that have a direct or an indirect impact on older persons and to work with colleagues across departments, rather than limit their inquiries to ageing-specific policies.

7.   At the forty-second session of the Commission in 2004, Member States were encouraged to establish or strengthen **national coordinating bodies on ageing,** or similar mechanisms, to facilitate implementation and dissemination of information on the Madrid Plan of Action, including its review and appraisal.

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[7] Ibid., para. 22.

8.   At the global level, the review and appraisal will be undertaken every five years, focusing on priority directions of the Madrid Plan of Action. While review and appraisal constitute an ongoing process at the national level, this process will provide important and regular opportunities to share and consolidate outcomes at the international level. The global theme for the first five-year cycle, "Addressing the challenges and opportunities of ageing", was identified by the Commission for Social Development at its forty-forth session in 2006.[8]

9.   In 2007, five years after the adoption of the Madrid Plan of Action by the representatives of Governments meeting at the Second World Assembly on Ageing, the Commission for Social Development will mark the occasion with an update on the global situation on ageing.[9] This will provide the first opportunity for Member States to share, through the United Nations regional commissions, any progress made on the implementation of the Madrid Plan of Action since 2002. It will also enable Member States and regional commissions to identify the focus of their plans for national and regional review and appraisal during the first cycle beginning in 2007.

10.   The publication of these Guidelines by the Department of Economic and Social Affairs of the United Nations Secretariat, the United Nations entity responsible for promoting the implementation of the Madrid Plan of Action, represents the first step in assisting Member States in their efforts to implement, monitor and evaluate the Madrid Plan of Action at national level. The Department of Economic and Social Affairs would like to invite all interested parties to share their experience during the first cycle of the review and appraisal process, so that good practices, as well as obstacles encountered, can be identified and shared by the international community.

The bottom-up participatory approach

11.   The bottom-up participatory approach has a dual function in the process of implementation of the Madrid Plan of Action. The first is of a "technical" or "methodological" nature, as the participatory approach will be used for in-depth evaluation of national efforts to implement the Madrid Plan of Action.

12.   The aim of the second function of the bottom-up participatory approach is to directly involve older persons in actions on their behalf, thus promoting their participation in the implementation of the Madrid Plan of Action. The immediate purpose of the participatory approach is to ensure that older persons have an opportunity to express their views on the *impact* of national policy actions affecting their lives. However, the overall goal is to ensure that older persons are involved in *all phases* of policy actions on ageing, including policy design, implementation, monitoring and evaluation. Therefore, the participatory approach to review and appraisal of the Madrid Plan of Action could be viewed as providing an *entry point* for the engagement of older persons in all spheres of implementation of the Madrid Plan of Action, not simply as entailing a one-time activity undertaken for the purpose of reporting to national authorities or international bodies. The bottom-up participatory approach should ideally represent an ongoing process of engagement and participation that

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[8] See Official Records of the ECOSOC, 2006, Supplement No. 6 (E/2006/26), chap. I, sect. C, resolution 44/1, para. 3.
[9] See the report of the Secretary-General on the modalities for the review and appraisal of the Madrid International Plan of Action on Ageing (E/CN.5/2006/2).

will be incorporated into the implementation of the Madrid Plan of Action. This would be in full agreement with the participatory context of the Madrid Plan of Action.

13. Thus, the bottom-up approach should be seen as a means of bringing older people's voices into the process of development, implementation and review and appraisal of the Madrid Plan of Action - related policies and programmes on ageing. The inclusion of older people who are disadvantaged and less powerful is particularly important in policy review and appraisal, because their reality is often not visible to others. Bottom-up and participatory approaches attempt to make this reality visible and enable people to act upon it. Findings and learning from community-level appraisal are an important part of the national review process, which feeds into activities of the regional commissions and from there into the global-level review and appraisal of the Madrid Plan of Action. This is an ongoing process, which evolves along with the more general process of implementation of the Madrid Plan of Action, rather than an activity carried out at one specific time.

14. Participatory approaches are based on a mixture of methods and a systematic learning exercise. The use of a combination of methods, rather than a single procedure, requires teamwork and flexibility. Some of the methods are those used in qualitative research such as semi-structured interviewing, focus group discussions and participant observation. Other methods feature diagramming and visual sharing of information, which facilitate build-up and analysis of information by the participants for themselves. The aim common to all these methods is the full participation of people in the process of identifying their needs, learning about opportunities and deciding on the actions required to address those needs.

15. A key feature of this approach is the bringing together of primary and secondary stakeholders to share information and accumulate knowledge. The aim is not purely one of generating knowledge for policymakers, but of supporting action and promoting public awareness. The techniques and methods used encourage community members to analyse their situation and define their priorities and the desired outcomes of development processes. The participation of different stakeholders enables a range of perspectives to be considered and valued.

16. Participatory processes rely not on the representative sampling of participants, but on the deliberate selection of a range of viewpoints. Marginalized groups are purposely included, since their views could not otherwise be heard. It is therefore important to be transparent about who is represented and how.

17. The outcomes of participatory processes are by nature unpredictable, since the focus is on people's views and analysis of key issues in their lives. The findings are also context-specific: they reflect the view of particular groups of people in a particular situation. At the same time, the detailed information revealed can be extremely helpful in shaping implementation and delivery of programmes and services.

18. A bottom-up participatory approach to review and appraisal is expected to offer the following *advantages*:

- Broadening the sources of information available to policymakers by complementing numerical data with qualitative information whose acquisition is not always possible through surveys and other research methods

- Gathering information directly from older persons, the primary stakeholders in the implementation of the Madrid Plan of Action, and providing opportunities for participants, particularly those who are excluded and marginalized, to analyse and articulate their situation, needs and aspirations
- Discovering emerging issues quickly
- Giving regular feedback to stakeholders as a basis for making necessary adjustments to existing policies and programmes

19.   At the same time, a bottom-up participatory approach is neither the ideal nor the only possible way to review and appraise national efforts to implement the Madrid Plan of Action. The *limitations* of participatory assessment include:

- The complexity of the process
- The difficulties in assuring the continuing availability of core stakeholders originating from the same community
- The challenge of ensuring participation of the most vulnerable older persons, such as those with problems of mobility, communication or cognition
- The availability of sufficient expertise to analyse and process information

20.   Other possible challenges include how to assure that the bottom-up review and appraisal process is representative and that its results are informative and valid for policy adjustment. Meanwhile, it is the approach that directly responds to the participatory thrust of the Madrid Plan of Action, which promotes participation of older persons in decision-making processes at all levels.

Reviewing and appraising the Madrid International Plan of Action on Ageing

21.   The overall task of the bottom-up participatory review and appraisal of the Madrid Plan of Action is to determine the impact of Madrid Plan of Action-related policy measures on the quality of life of older persons. The implementation, monitoring and review and appraisal exercises are ideally carried out in parallel, with a bottom-up participatory approach at their core (see figure I).

Figure I.   **Interactions between implementation and review and appraisal of
                of the Madrid Plan of Action**

Implementation process		The Madrid Plan of Action ➔	Regional implementation strategies ➔	National implementation plans ➔	Implementation activities ➔	Outcome and impact
Review and apprai-sal	**Bottom-up participatory assessment**	Assessing awareness of the Madrid Plan of Action	Assessing awareness of regional implementation strategies	Assessing awareness of national actions – *How are older persons involved?*	Assessing participation of older persons in implementation – *How are older persons involved?*	Assessing the impact on older persons – *What do older persons think of the impact?*
	"Instrumental assessment"			What policies have been introduced following the adoption of the Madrid Plan of Action? *Instrumental indicators*		What has been the outcome/impact on older persons? *Outcome indicators*

How to begin[10]

22.   The guidelines provide practical suggestions on how to plan and facilitate the review
and appraisal exercise, and analyse the findings of its bottom-up participatory inquiry. It will
help you to:

- Identify who to work with and how (chap. I)
- Review national policies and define priorities for action on ageing (chap. II)
- Determine what to review and appraise using a bottom-up approach (sect. III.A)
- Carry out a bottom-up review and appraisal with older people (sects. III.B and III.C)
- Put together, analyse and disseminate the information gathered from different sources (sect. III.D)
- Distil gathered information and propose relevant policy adjustments (chap. IV).

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[10] The following text is directed towards the person(s) responsible for organizing and carrying out national
review and appraisal exercises.

23.   The principal stages of your review and appraisal project are presented in fig. II.

Figure II. **Principal stages of the review and appraisal of the Madrid Plan of Action**
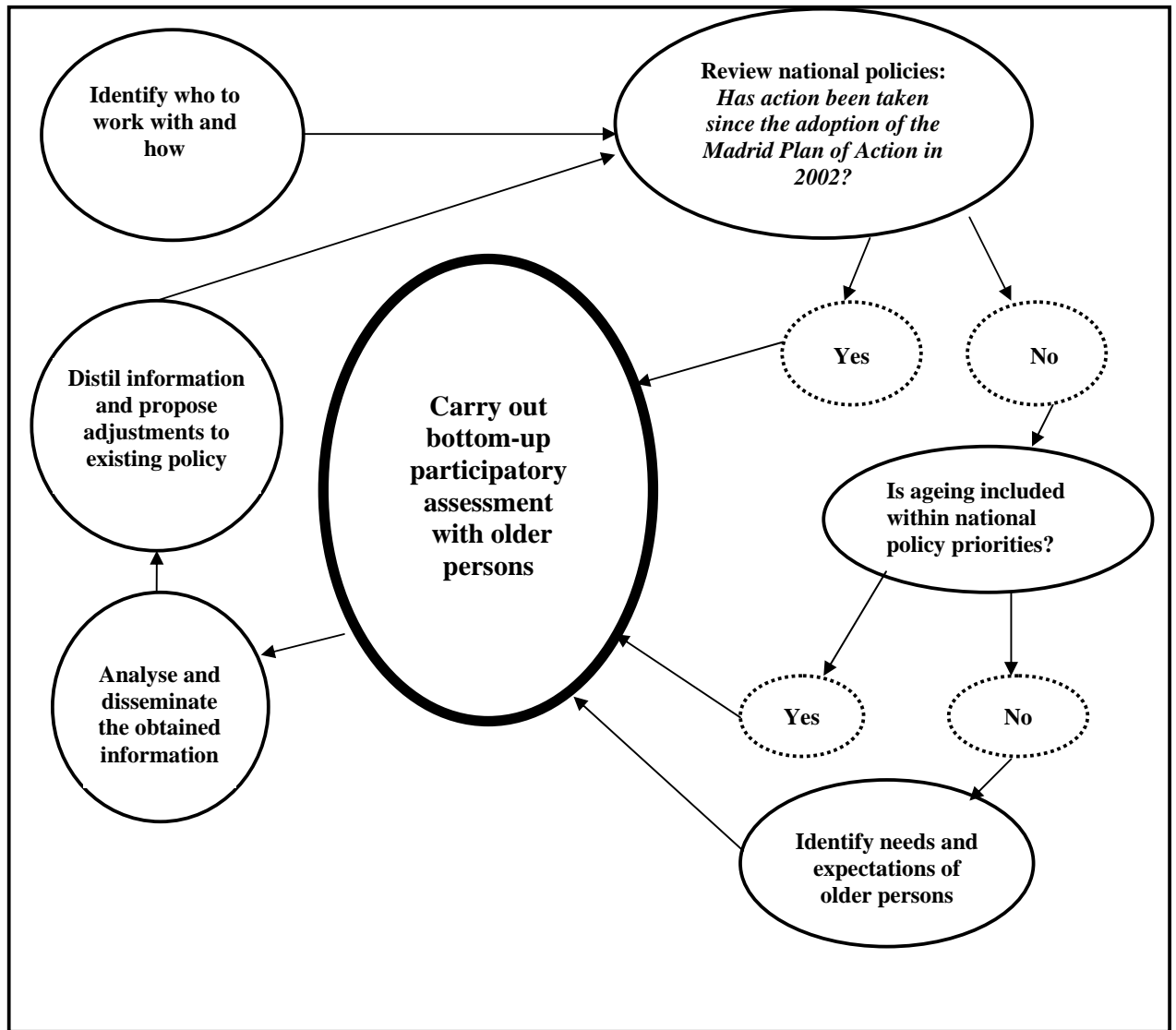
I.   Identifying stakeholders: who to work with and how

24.   The present section will help you to
   • Identify people who will help you to manage the review and appraisal
   • Clarify their roles and raise awareness

The implementation of the International Plan of Action on Ageing, 2002, will require the partnership and involvement of many stakeholders: professional organizations; corporations; workers and workers organizations; cooperatives; research, academic and other educational and religious institutions; and the media.

Article 17 of the Political Declaration adopted at the Second World Assembly on
Ageing, April 2002

A.   Identify people who will help you to manage the review and appraisal

25.   The process of review and appraisal needs a catalyst and a facilitator. As a government focal point on ageing, you should see yourself as a principal **catalyst** and **organizer** of the entire process, involving, as necessary, **facilitators** with sufficient experience in conducting participatory research. In performing your tasks, you may receive essential support from an established national mechanism (coordinating body) on ageing, which would have overall responsibility for implementation, monitoring and appraisal of national action on ageing, including implementation of the Madrid Plan of Action.

26.   The national mechanism on ageing, whether a council, committee or similar body, will have important responsibilities for the review and appraisal exercise. First of all, it has to decide, after consulting with all major stakeholders, what to review and appraise. That involves identifying principal national *priorities* on ageing, relevant *policies* and *programmes* that were adopted on the basis of the recommendations of the Madrid Plan of Action, *goals* and *targets* established and *resources* allocated for their accomplishment by each stakeholder. Available statistical data could allow for a preliminary assessment of the local and national ageing situation and the identification of areas for more specific participatory inquiries. Another important step is to find out what participatory experience and traditional practices of participatory dialogue are available in the country and to decide how they could be adapted to the specific objectives of the review and appraisal exercise. A major partner with experience in participatory research — a non-governmental organization, academia or a consultant group — could be invited to facilitate, but not direct, the participatory exercise, including gathering information, analysing it and presenting it in a policy-relevant format.

27.   Some Governments have already set up national coordinating bodies on ageing**,** which can plan and coordinate the review and appraisal process. If there is no such body, you will need to form a new group of stakeholders. You may wish to include other people in your

existing group once you have carried out a stakeholder analysis as outlined below. Priorities are to include older people and to achieve gender balance.

28.   **Stakeholders** in this review and appraisal exercise are people and groups that are affected by the outcome of a proposed intervention, and those that can influence the outcome.

29.   The **primary stakeholders** are the many groups of older people[11] whose concerns the Madrid Plan of Action aims to address. Secondary stakeholders include all other groups who contribute to developing and implementing policy and programmes that affect the lives of older people. All these categories of stakeholders are potential partners in the process of your review and appraisal.

30.   While older persons are the primary stakeholders in the implementation of the Madrid Plan of Action, including its review and appraisal, the participatory nature of the review and appraisal exercise implies the involvement of members of the family and the community of different ages, including children and youth. This could add an important intergenerational context to the review and appraisal, and build consensus and commitment among community members of all ages.

Government ministries and departments

31.   It is important to build relations between different government departments, so that ageing policy is integrated across all sectors. Ensuring that older people's views and needs are included in national policies – or "mainstreaming ageing" – is the approach recommended in the Madrid Plan of Action. Key ministries to work with include those responsible for health, social development, youth and gender, finance, planning, population and statistics. This will allow you to integrate reporting on the Madrid Plan of Action with already established monitoring frameworks. It is particularly important for you to establish relations with gender focal points across sectors and involve them in the review and appraisal.

32.   For example, most Governments have systems for measuring progress on the Millennium Development Goals (coordinated by the United Nations Development Programme), and for monitoring development or poverty reduction plans (coordinated by ministries of finance). Although these frameworks directly impact the lives of older people, an ageing-related perspective is often missing and older people are invisible in these national reviews. By working with people involved in these processes you can gather important information (for example, on poverty and older people) and raise awareness of the Madrid Plan of Action and ageing issues across sectors.

33.   In most countries, ministries or departments of social welfare or health are responsible for policies and services for older people. However, inasmuch as older people are affected by many government policies and services, you will need to work with stakeholders from a wider range of government departments.

34.   National offices of statistics are key sources of background information, for example, on the demographic, economic and social situation of older people. However, it is sometimes the case that national statistics are not well disaggregated on the basis of age and sex, and your role could be to encourage greater disaggregation in future.

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[11] This publication considers older people or persons to be those aged 60 years or over.

35.   Government authorities at the local level should also be included as essential partners. Local government staff are particularly important stakeholders, especially in countries where responsibilities are decentralized to district and local levels. Initial review and appraisal activities will have to be conducted with older people at community level, and it is therefore vital to ensure that local and municipal authorities support and facilitate this process.

United Nations system

36.   United Nations organizations and funds and the specialized agencies can also contribute at national and global levels. These entities work at different levels on policy, research and action on issues related to ageing. In addition, these entities can offer technical experience and support. For example, the World Health Organization (WHO) can provide information on health, well-being and equity and information on some of the quantitative indicators suggested for the Madrid Plan of Action and the Millennium Development Goals.

Civil society

37.   Community-based organizations, faith-based organizations, national and international non-governmental organizations, trade unions, and older people's groups can contribute to the review and appraisal of the Madrid Plan of Action. These organizations may work with older people directly, or indirectly through their focus on social and economic issues such as poverty, health or rights. They are important partners for understanding the impact of current policies on the lives of different groups of older people in your country. It is likely that some organizations working closely at community level have expertise in using participatory and bottom-up approaches. Such organizations can provide experienced **facilitators** for bottom-up and participatory review and appraisal of the Madrid Plan of Action at local and national levels.

38.   At community level, you will need to identify and work with **indigenous or traditional structures** and organizations, such as burial societies, water associations, shura gatherings in Muslim communities, and credit circles. The existence of such local structures is not always obvious to outsiders but these structures may be crucial vehicles for consulting with groups of local people. You may not be able to identify these local groups until you plan for participatory work at community level and begin to discuss local structures with people who know the community.

Private sector

39.   Private companies also influence and implement social policy, although this is not always apparent at first glance. Many companies deliver basic services such as health care and water although they may not have taken into account the needs of ageing populations. The involvement of private sector firms can help to raise awareness and build a sense of joint responsibility for the health and well-being of older citizens. They may also provide organizational support or financing for local review and appraisal activities.

National academic and research institutions

40.   Universities and research institutions can provide background information for the review and appraisal, and along with other partners, help to determine the focus of your activities. They often possess expertise and experience in conducting qualitative participatory research, and could therefore be involved, along with civil society, in facilitating the review and appraisal exercise. Their involvement in the review of the Madrid Plan of Action can also raise awareness within their institutions of ageing issues and ensure that their future work takes account of ageing issues. They can also help to ensure that existing data are disaggregated by age and sex.

Media

41.   Radio, television and press agencies are vital partners that can help change perceptions of older persons, raise awareness on their issues, inform them of those Government policies and programmes that affect them, and build support for their rights as outlined in the Madrid Plan of Action.

42.   A checklist of stakeholders might include some of the following:

- Older people and their families
- National government officers from ministries and departments, such as those responsible for finance, statistics, health, social welfare, the interior, gender, housing, agriculture, education and legal affairs
- Local government officers, including municipal authorities
- Existing committees on ageing or national networks of older people
- Community members
- Local health workers and other service providers
- Research institutes, universities
- Geriatric and gerontological societies
- Organizations (government, non-government and private) working in the area of prevention of elder abuse
- Local non-government organizations working with older people
- Local non-government organizations working in the area of development and human rights
- Women's or men's organizations
- International non-government organizations
- United Nations organizations and donors
- Private sector organizations, such as business, pension and insurance companies and private utility (power, water) providers
- Labour organizations or trade unions
- Media, such as press, television and radio

43.   As you develop the focus of your review, you may need to identify specific subgroups of stakeholders. For example, if the focus is on the Madrid Plan of Action priority direction II (Advancing health and well-being into old age), you may choose to focus on health services for older people in rural areas, thereby making the members of this subgroup the most important stakeholders. If the eradication of poverty is an important focus of your review and

appraisal (Madrid Plan of Action priority direction I, issue 6), the primary stakeholders will be the poorest and most disadvantaged older people, in both urban and rural areas.

B. Clarify roles

44. By working with your **national coordinating group**, or stakeholder group, you will be able to share responsibilities and function in a team.

45. As a major role of the stakeholders is to raise public awareness regarding the Madrid Plan of Action, you may have to explain to them what the Madrid Plan of Action is and why it is needed. The stakeholders will have ideas about ways in which they and others can contribute to the review and appraisal. You could conduct a stakeholder analysis to identify who should participate, and then organize meetings or workshops that involve all the important stakeholders, including older people (see box I for tips on working with stakeholders). You could use a chart like the one set out below (table 2), which maps out the stages of review and appraisal and the contributions of stakeholders at each stage.

Table 2.
Stakeholders and their roles in the review and appraisal process

Stakeholder*	*Role in reviewing national policies and identifying priorities for bottom-up participatory review of the Madrid Plan of Action*	*Role in assessing policy impact through bottom-up participatory review with older people*	*Role in facilitating older people's continuing engagement in policy review and development*	*Role in the distillation and analysis of information at national and regional levels*
Older people, especially poor older people	Attend planning meetings and provide feedback on your assessment of ageing policy and priorities	Participate in review exercises at local and national levels to generate information and analysis	Engage in national consultation processes on key policies (for example, health, poverty reduction)	Engage in verification and analysis of findings and formulation of policy proposals

Staff of ministries of health, finance and planning, and local government, etc.	Identify older people-focused policies, attend planning meetings and provide feedback on your assessment of ageing policy and priorities	Provide background information, participate in participatory review at local and national levels	Identify gaps and opportunities in service provision, include older people's groups in consultation processes	Engage in verification and analysis of findings. Lead the process of formulation of proposals for policy adjustment
Staff of non-governmental organization working with and for older people	Attend planning meetings and provide feedback on your assessment of ageing policy and priorities	Facilitate or support participatory review exercises with older people at community and national levels, provide information	Work with government to create opportunities for older people to participate in national policy review processes	Engage in verification and analysis of findings. Lead the process of formulation of proposals for policy adjustment
Research groups, academia	Share research findings on existing national policies and programmes on ageing	Facilitate or support participatory review exercises with older people at community and national levels, provide information and methodology	Provide background and justification for continuing involvement of older persons in national policy review process. Assist in analysing past experience of participatory exercises	Lead the process of verification and analysis of findings. Assist in formulation of proposals for policy adjustment

*Note: The table provides examples of stakeholders; each country will identify its own stakeholders.

46.   Think about how to keep stakeholders informed and involved. One way to do this is to organize stakeholder meetings at important stages of the review. If you cannot hold regular meetings, then you need to reach an agreement with stakeholders at the start on how they can best be kept informed and involved. Use, when available, electronic means of communication, such as e-bulletins, to keep an established network of stakeholders functional.

Box I.
Practical tips for working with stakeholders

- Use a stakeholder analysis chart to make sure that all the important stakeholders are included at different stages of the project
- Hold meetings with stakeholders early on in the process, so that they can contribute to defining the tasks of the review and appraisal and carrying them out
- Try to include groups and organizations that normally would not be involved in issues concerning older people, as well as those that would
- Encourage everyone in the group to share contact information
- Plan meetings so that people can learn from the experience and views of others
- Identify facilitator(s) who will work with older persons at local level, assisting -- but not directing -- the review and appraisal

C. Raise awareness

47.   Stakeholders can support your planned review by informing the public about it and about the issues to be addressed therein. This can lead to wider participation in the process. Word of mouth is an important means for disseminating information and raising awareness. One drawback is that information may not always be accurately conveyed. Therefore, more formalized arrangements should also be utilized, and here is where the media can be involved. A press release is an effective way of publicizing key information to the media. Think about how you can use print media such as newspapers and newsletters and find out about opportunities on radio and television. Remember to keep the information you offer clear and simple, summarizing what you are doing, and why, when and with whom, in your first paragraph.

48.   Case studies on working with stakeholders are presented in boxes II and III.

Box II.
Identifying stakeholder groups in Lithuania

During the development of participatory research with older people in Lithuania (2000), a meeting was organized for a group of older people, leaders of older people's organizations, service providers and local government officials. At the meeting, participants drew up a list of the stakeholder groups they wanted to have participate in the research and specified very clearly which categories of older people they needed to involve. They identified the following categories:

- Older men and women aged 80 years or over
- Older people in rural and in urban areas
- Older people living with their families or without them
- Older people in institutions
- Three-generation households
- Older people with or without a good level of education
- Older people with high or low levels of pension
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   Note: This exercise was carried out under the auspices of the Elderly Woman's Activity Centre, Kaunas, Lithuania.

Box III.
Working with stakeholders in New Zealand

New Zealand has a Positive Ageing Strategy,* which aims to build "a society where older persons' contributions are valued, where they can participate in their community, and where people of all ages value older age as positive and empowering". The strategy was drafted using a highly participatory process involving many stakeholders and coordinated by the Ministry for Social Development. This process built on research undertaken and networks developed during the International Year of Older Persons in 1999. Care was taken to integrate policy development with actions being taken ranging across different government departments.

A range of stakeholders continue to be involved in evaluating the strategy in a variety of ways through, for example:

- A yearly action plan, which reports on the previous year's results. This has been developed by the Office of Senior Citizens of the Ministry for Social Development, in collaboration with 34 government departments. It is published and widely disseminated to the public and members of government
- A triennial report on the status of older persons, which identifies achievement and time frames for future monitoring
- Quarterly interdepartmental network meetings, including officials from most other government departments, which are convened to discuss current progress on implementing the action plan and future actions
- The Office of Senior Citizens, which is frequently asked to comment on other policies and programmes using the Positive Ageing Strategy as a guide.

*Note: Information on the Strategy is available from http://www.osc.govt.nz/positive-ageing-strategy/.

II. Reviewing national policies and defining priorities for action on ageing

49. The present chapter will help you to:
    (a) Review national policies in response to ageing;
    (b) Define challenges and priorities for action on ageing;
    (c) Determine what to review using a bottom-up approach.

50. This chapter will help you to make a preliminary review and appraisal of the Madrid Plan of Action in terms of programmes and policies, and to assess the national ageing situation using available existing information.

51. Your task here is to identify policy measure(s) that have an impact on older persons - an impact that you will assess further in depth, using a participatory approach. Start your review by determining whether a specific national policy on ageing (plan, programme, legislation) exists. If so, this will provide your focus for review and appraisal. If not, you can investigate whether ageing is addressed in different areas of other national policies, such as those on education, health care, employment, housing or transport, to name a few.

52.	Policy responses to ageing differ enormously between regions and nations because of differences in demographic, economic and social conditions. Chapter III below may be less relevant to readers and users in countries with a longer history of developing and mainstreaming ageing policy, but should be viewed as encompassing a preliminary stage in bottom-up and participatory review and appraisal exercises involving older people. You may not have the time, participants and resources to make a very detailed policy review. When you have read through this chapter, consider how much you can do and adapt these guidelines, as appropriate, to your situation.

## A.	Review national policies in response to ageing

53.	The first step is to familiarize yourself and your stakeholders with the broad contents of the Madrid Plan of Action.[12] This will enable you to link existing policies with some of the broad objectives of the Madrid Plan of Action.

54.	You will also find it helpful to refer to the set of indicators and assessment tools for national review and appraisal of the Madrid Plan of Action, as presented in annex I to this publication.[13] Suggested instrumental indicators can be used to assess the availability of policies and programmes addressing issues of ageing in relation to the objectives of the Madrid Plan of Action. The outcome indicators are designed to assess how the Madrid Plan of Action-related actions have affected the quality of life of older persons, as they themselves determine it. You will also find instrumental and outcome indicators useful for assessing the national ageing situation using existing statistical and quantitative data that may be available in national surveys. For example, a policy on ageing that promotes free health care for all older persons would demonstrate significant achievement with respect to the Madrid Plan of Action priority direction II, issue 2 (Universal and equal access to health-care services). An instrumental indicator could tell you how many older persons use health services; an outcome indicator could tell you how they feel about the quality of the services they have received.

55.	It would not be practical to try to work on every objective of the Madrid Plan of Action: there are literally hundreds of recommendations in the document. The purpose of this stage of the review and appraisal is to identify which broad areas of policy linked to the Madrid Plan of Action should be focused on for bottom-up review and appraisal with older people.

56.	In reviewing specific policy on ageing, you will:

- Identify what, if any, policies on ageing or plans of action on ageing have been introduced since the Madrid Plan of Action was adopted in 2002
- Identify any national ageing policies or provisions for older people in the constitution that existed prior to 2002
- Identify current priorities of these policies (what issues do they address?)
- Note which broad Madrid Plan of Action objectives these policies address (see suggested instrumental indicators in annex I)
- Note the stage of development of these policies or plans (for example, are they at the planning stage or the legislative stage, or are they already being implemented?)
- Note how these policies are financed, if at all (is there a budget attached?)

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[12] Also available from http://www.un.org/esa/socdev/ageing.
[13] Ibid.

- Finally, identify one or more priorities of the policy on ageing that could be the focus of a bottom-up participatory review and appraisal with older people

57. If there is no specific national policy on ageing, you may wish to consider how ageing issues are addressed through other national policies and programmes and even in national budgets. For instance, if no specific ageing policy exists, but there is a national poverty reduction strategy that includes measures to reduce the poverty of older persons, among others, this would demonstrate significant achievement with respect to Madrid Plan of Action priority direction I, issue 6 (Eradication of poverty), and could be regarded as constituting a contribution to achieving the goals of the Madrid Plan of Action.

Review ageing within national policy priorities

58. Whether or not Governments have developed specific policies on ageing, it is important to look at how ageing is addressed within the broad range of national policies. This activity could be undertaken by stakeholders from government departments and non-governmental organizations, including older people's groups.

59. In some countries, national priorities are expressed through development plans or national poverty reduction strategies. Most developing countries have clear-cut national plans and programmes designed to achieve the Millennium Development Goals, but these rarely address the needs of older populations. One of the key objectives of priority direction I of the Madrid Plan of Action (issue 6, objective 1) is identical to target 1 of Millennium Development Goal 1, namely, to halve global poverty by 2015. Governments are urged, in action (b) under objective 1, to"(I)nclude older persons in policies and programmes to reach the poverty reduction target".

60. National policies on health, education, employment, children, agriculture, HIV/AIDS, and the environment also cover sectors in which older people play a significant role. There may also have been actions on, for example, employment, rural development, decentralization or participatory government that you could assess for their inclusion of older people. There may be policies on social protection that may include provisions for old-age pensions, health insurance, or protection for people who are disabled or unemployed.

61. The following steps will enable you to consider how far ageing is mainstreamed and what opportunities exist for further mainstreaming:

- Identify a current policy priority (priorities) in your country
- Taking these core policies in turn, identify whether they currently address the needs of an ageing population
- Note which broad objectives of the Madrid Plan of Action they address (see suggested instrumental indicators in annex I)
- Finally, for each policy or strategy, note any ways in which ageing issues could be included

62. The examples given below in the checklist are taken from suggested indicators for national review and appraisal of the Madrid Plan of Action (in annex I)

Do these policies or strategies provide:

- Opportunities for older persons to participate in decision-making processes?
  (Madrid Plan of Action priority direction I, issue 1, objective 2: Participation of older persons in decision-making processes at all levels)

- Opportunities for increased labour-market participation of older people?
  (Madrid Plan of Action priority direction I, issue 2, objective 1: Employment opportunities for all older persons who want to work)

- Pensions or cash transfers for older people?
  (Madrid Plan of Action priority direction I, issue 7, objective 1: Promotion of programmes to enable all workers to acquire basic social protection/social security, including, where applicable, pensions, disability insurance and health benefits)

- Educational programmes for older people, such as skills-building to permit them to remain in employment, literacy programmes, information on social issues such as new technology, HIV/AIDS or the environment?
  (Madrid Plan of Action priority direction I, issue 4, objective 1: Equality of opportunity throughout life with respect to continuing education, training and retraining as well as vocational guidance and placement services)

- Recognition of older people as a vulnerable group in emergencies?
  (Madrid Plan of Action priority direction I, issue 8, objective 1: Equal access by older persons to food, shelter and medical care and other services during and after natural disasters and other humanitarian emergencies)

- Measures for disadvantaged groups, such as poor older people caring for spouses, vulnerable children or people living with HIV/AIDS?
  (Madrid Plan of Action priority direction II, issue 3, objectives 2 and 3: Provision of adequate information, training in caregiving skills, treatment, medical care and social support to older persons living with HIV/AIDS and their caregivers; and enhancement and recognition of the contribution of older persons to development in their role as caregivers for children with chronic diseases, including HIV/AIDS, and as surrogate parents)

63.   Conclude your review of national policy priorities vis-à-vis ageing by identifying an ageing-related priority whose impact on older persons you would assess in depth using a bottom-up participatory approach.

Review national budgets from an age perspective

64.   A national budget is a policy statement, since it reflects, in monetary terms, a Government's commitment to specific programmes and policies. Although national budgets may appear to be age-neutral, government expenditure and revenue collection have different impacts on people of different ages. Reviewing what is being spent at a national and at a local level can be a useful part of any policy appraisal of the implementation of the Madrid Plan of Action.

65.   For example, the following budget questions and indicators could be used in measuring progress towards universal and equal access to health-care services:

The Madrid Plan of Action priority direction II, issue 2, objective 2: Development and strengthening of primary healthcare service to meet the needs of older persons and promote their inclusion in the process

Some budget questions:
- How much money has the government allocated and spent to provide free services to older people so that they can avoid having to pay fees?
- How much money has the government allocated and spent to pay community health workers?
- How much money has the government allocated and spent to train primary healthcare workers in basic gerontology and geriatrics?

Some output indicators:
- How many older people received free health services, and how many paid user fees?
- How many village and community health workers did the government employ?
- How many primary healthcare workers were trained in basic gerontology and geriatrics?

See box IV below for practical tips.

Box IV.
Practical tips for reviewing policies

- Carry out the policy review with your coordinating body on ageing or stakeholder group
- Write a short summary of this review

B.   Define challenges and priorities for action on ageing

66.   Your review of current policies and programmes will give you a sense of priority issues that are emerging at the national policy level. You should also find out what information is already available on these themes. This will help you to avoid gathering information that has already been collected and to focus your review and appraisal activities.

67.   A bottom-up participatory approach focuses on the ideas generated by local people themselves (see chap. III). Information gathered from other sources and with different objectives in mind provides contextual material and complements locally derived information. You may find some of these sources of information useful (see table 3).

Table 3.
Complementary information for bottom-up review and appraisal: content and sources*

Type of information	*Source*	*Where to find it*
Demographic and population information (for example, age, sex, ethnicity, births, deaths, marital status)	National census or vital registration systems	Bureau of statistics/government statistical services, Department/ministry of home affairs or other government offices
Broad range of household social and economic issues in a population (for example, geographical location, water source, sanitation, sources of income, consumption patterns, poverty levels, use of services)	Household survey	National (statistics institutes, bureau of statistics, universities, research institutes) International (international organizations, private agencies)
Health status, well-being, economic status, living environment, work, function and disability, quality of life, life satisfaction, community and social supports	Health and living standard survey	International organizations, national statistics offices, universities
Social policy issues (for example, impact of pension and transfers on poor households, inequalities, poverty, social capita, access to services (social and health))	Research studies	National and local government offices, University and research institute libraries
Possible causes and consequences of social, economic, political, environmental change		National and international non-governmental and donor agencies Internet sites

* Compiled with assistance from Paul Kowal, Coordinator, Study on Global Ageing and Adult Health, WHO, November 2005.

68.   You do not have to look at all these sources of information. Select one or two sources that are most relevant to your review. Your **national coordinating body on ageing** or stakeholder group should be able to help you identify and review the most helpful documents. Some of these sources may not have the information you hoped to find. For example, statistics disaggregated by age and sex are absent or incomplete in many countries. Through discussions with the agencies responsible, you may be able to persuade them to disaggregate by age in routine national data-collection processes.

69.   Many national surveys collect more information than is actually analysed and published. Information collected on age during a survey may be excluded from the analysis owing to other priorities, or lack of time or resources. In some countries, it has been possible to revisit existing survey data sets and extract new information on age and sex. If, despite limited resources, a good statistician can be hired, this objective can be achieved very quickly.

70.   Another way of obtaining the information needed to fill the gaps you identify is through encouraging your country's statistics office to include one or two key questions in the national census or regular household surveys so that data thereon are routinely collected.

71.   You may find it useful to include in your review of current national policy and programmes on ageing a clear statement on the existence and availability – or lack thereof – of information about the economic, social and health status of older persons in your country.

72.   Again, you may wish to refer to the important areas for data-gathering highlighted under *instrumental* and *outcome* indicators in annex I[14]. Some examples of the kind of contextual information you may be able to obtain include:

Poverty
        Madrid Plan of Action priority direction I, issue 6, objective 1: Reduction of poverty among older persons

        Indicators:
        • Percentage of older persons living below national poverty line (by age and sex)
        • Percentage of older persons living below international poverty line of US$ 1 per day (by age and sex)

HIV/AIDS
        Madrid Plan of Action priority direction II, issue 3, objectives 1 and 3: Improvement in the assessment of the impact of HIV/AIDS on the health of older persons, both for those who are infected and for those who are caregivers for infected or surviving family members; and enhancement and recognition of the contribution of older persons to development in their role as caregivers for children with chronic diseases, including HIV/AIDS, and as surrogate parents.

        Indicators:
        • Inclusion of data on older persons (both infected and caregivers) in national HIV/AIDS statistics
        • Percentage of older persons caring for orphaned grandchildren/kin
        • Percentage of older persons caring for adult children with HIV/AIDS
        • Percentage of older persons caring for grandchildren with HIV/AIDS

Health services
        Madrid Plan of Action priority direction II, issues 2 and 4: Universal and equal access to health-care services; and training of care providers and health professionals.

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[14] Also available from http://www.un.org/esa/socdev/ageing.

Indicators:
- Percentage of older persons having access to primary health care services
- Proportion of older population with access to affordable essential drugs[15] (see also Millennium Development Goals indicator 46)
- Number of healthcare and social care professionals with training in the care of older clients, per capita

C. Determine what to review using a bottom-up approach

73.   The review described so far is necessarily broad and indicative. Once the policy responses to ageing in your country are mapped out, you will have a good idea of national priorities relating to older people and how these relate to Madrid Plan of Action priority directions or specific Madrid Plan of Action objectives. A more in-depth assessment centred on the views of older people will improve understanding of what is most relevant to them in their own context. The inclusion of older people's forums or groups in this process may have highlighted areas where policies and programmes are making a positive difference to older people, areas where implementation could be improved, and concerns that are currently still to be addressed. This will give you a focus, or a theme, for your bottom-up participatory inquiry.

74.   For example, if a policy or programme has recently been introduced, you may wish to find out how aspects of this have impacted on particular groups of older people. If you have identified clear gaps in policy, you may wish to gather views of different groups of older people on how a particular service could be introduced or improved.

75.   Review and appraisal of the Madrid Plan of Action constitute an ongoing process and it is not possible to carry out a meaningful bottom-up review of all priority areas at the same time. This is perfectly acceptable. Once you have identified priorities, you can cover as many of them as your time and resources permit.

76.   Several case studies on national policy and information on ageing are presented in boxes V - VII.

77.   The next chapter outlines a process for enabling older people and other key stakeholders to review any actions taken and to contribute to the shaping of programmes and policies that could address their concerns.

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[15] Essential drugs are those drugs that satisfy the healthcare needs of the majority of the population (WHO Expert Committee on Essential Drugs, November 1999). Essential drugs are listed by WHO in its Model List of Essential Drugs (1997 version), available from www.who.int.

Box V.
A mainstream approach to policy review in Uganda

The task is to link ageing to other frameworks for social and economic development and human rights - Madrid Plan of Action, para. 15

In 2003, members of the Government of Uganda formed an innovative partnership with community-based older people's organizations and an international non-governmental organization, to promote greater inclusion of ageing in government policy. The programme was launched during a stakeholder meeting in which government and non-governmental organization representatives presented research on the situation of older people and considered ways of integrating ageing issues across all policy areas.

To carry out the work, a 12-member cross-ministerial working group was formed representing the Ministries of Health; Gender, Labour and Social Development; Agriculture; and, critically, Finance and Economic Planning, as well as two non-governmental organizations that work with older people.

An early task was a detailed review of policies and sector plans, identifying opportunities for greater inclusion of older people. A key document was the Uganda Poverty Eradication Action Plan, which outlined the overall policy framework and budget priorities.

The members of the group found that the Poverty Eradication Plan both included older people among the vulnerable groups to be targeted through social protection, and recognised older people's role as carers of people living with HIV/AIDS and of orphans and vulnerable children. However, review of the sector policy documents demonstrated gaps. For example, it was revealed that national HIV/AIDS plans and programmes lacked interventions to support older carers.

For most members of the group, it was the first time they had analysed the national policy response to ageing, and for many, the first time they had considered policies outside the remit of their own departments. The working group member from the Ministry of Finance was simultaneously working on a revision of the Poverty Eradication Plan, and was able to feed the analysis into that process.

The cross-sectoral representation and participation of representatives of older people generated learning within the group and raised awareness of how issues of ageing impact in every sector of policy. In particular, awareness of older people as a vulnerable group was raised within the Ministry of Finance through the presence of a ministry representative in the working group. This is a work in progress. In 2004, the working group had carried out a survey with older people in six provinces of the country, the findings of which were disseminated during a workshop in December 2005. Twenty-five older persons participated in this meeting, presenting their views directly to the Minister for Older People and Disability, who responded to each point made. Recommendations discussed at this meeting would be reflected in the national policy on ageing being prepared by Government at that time.

Key to success was the fact that, inter alia,:
- Time was taken to establish good contacts within several departments
- A cross-section of departments was represented as well as older people's representatives
- The programme was located within the government, and had non-governmental organization support

- The working group had secretarial support and a budget
- Activities were jointly planned and scheduled during times when all members were available to undertake tasks
- A team of champions emerged within Government to continue this mainstreaming work

This example illustrates how a review of policy responses to ageing could be conducted with a multisector stakeholder group. Older people were represented through community-based organizations and many participated in the survey that followed. It was equally important that members of government from a range of sectors were involved, as this would facilitate policy development in response to ageing in future. Priority areas for policy on ageing identified by this review and survey could be the focus of a bottom-up and participatory review and appraisal of the Madrid Plan of Action.

Further information is available from the Ministry of Health, Uganda (www.health.go.ug).

The email address for the Uganda Reach the Aged Association (URAA) is ugreach@africaonline.co.ug.

Box VI.
Mainstreaming ageing in poverty reduction in the United Republic of Tanzania

The Madrid Plan of Action priority direction I, issue 6, objective 1: Reduction of poverty among older persons. Instrumental indicator: Availability, scope and coverage of poverty reduction strategies of the government, such as poverty reduction strategies that include older persons as a target group

The United Republic of Tanzania adopted its second National Strategy for Growth and Reduction of Poverty (NSGRP), or MKUKUTA (the Swahili acronym) in early 2005. It seeks to sharpen the focus on vulnerable groups and clarify measures to address their needs. In 2003, the Vice-President's Office established a "cross-cutting group" representing various sectors of government as well as non-governmental organizations. Vulnerable groups were identified as older persons, children, youth, women, persons living with HIV/AIDS, widows and orphans.

Organizations involved in the work of the cross-cutting group were encouraged to facilitate national consultations with representatives of identified vulnerable groups. Consultations were held at district level and at village level through village assemblies. The Government also requested members of the cross-cutting group to submit clear recommendations to ensure that the new National Strategy accommodated the issues being raised in the consultations.

HelpAge International and its national partners worked with older people and other marginalized groups to provide input to local-level consultations and to develop their submission to the Government. A national workshop with "age care" groups was also held. The fact emerged that lack of income made it difficult for older people to buy even basic necessities, including adequate food, and to access social services. Water shortage caused by droughts in some areas and lack of piped water supply constituted a major issue for many older people unable to buy water or to walk long distances to fetch it. Although health policy provides for free health services for older people, they were still charged levies of 500-1,000 Tanzanian shillings (US$ 0.45 – US$ 0.90). They also needed to purchase medicines in advance, since stocks in the public-health units did not last.*

Provisions of the MKUKUTA respond to older people's voiced concerns about income, health, water, inheritance, identity cards, adult education and abuse. It commits to delivering "adequate social protection and rights of the most vulnerable and needy groups with basic needs and services" and "the reduction of political and social exclusion and intolerance". Operational targets under social protection include reaching 40 per cent of eligible older people with effective social protection measures by 2010, and increasing support to poor households and communities in caring for vulnerable groups targeting older people, orphans, other vulnerable children and persons living with HIV/AIDS. It recognizes the need for a baseline study disaggregated by age, sex and disability and for the development, piloting and monitoring of different social protection schemes, including those developed at community level.

The challenge for government and its non-governmental partners is to ensure that budgetary provision is made available for delivery on these commitments.

Information on the Poverty Monitoring System of the United Republic of Tanzania is available from http://www.povertymonitoring.go.tz/. Information on the poverty eradication action plan is available from http://www.tanzania.go.tz/nsgrf.html.

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* Adapted from the report of consultations with older people on poverty reduction strategies on 11 May 2004.

Box VII.
Filling information gaps: age figures in Bolivia

Although a National Plan on Ageing was formulated in Bolivia in 1998, there was very little specific data on ageing that could inform how this plan could translate into policies and programmes. HelpAge International in Bolivia had qualitative information on older people based on programme experience and work with partners, but it needed quantitative data to confirm certain dimensions of population ageing and local statistics in order to work with local authorities. In 2002, a year after the last 10-year census had been carried out, HelpAge approached the National Institute of Statistics (INE) with a proposal to draw on data collected for a study on ageing. It discovered that the United Nations Population Fund (UNFPA) had supported a number of studies and was interested in a study on older people. A project was quickly created by these three partners and two demographers were hired to analyse the data. The partners met regularly to agree on what information was most needed, and to review first results. The process lasted three months, and findings were published and sent to national agencies and all of Bolivia's 314 municipalities. Further funds were raised to produce leaflets that have been used by local and national organizations in awareness-raising, advocacy and training events.

Some of the key findings, which have highlighted priority areas for policy development, were:
- High level of poverty among older people: 63 per cent (higher than that among the national population at 59 per cent)
- Higher poverty among rural older people: 90 per cent
- Lack of identification documents: 8 per cent without documentation and a high percentage with incorrect documentation
- High level of economic participation: 4 out of 9 older people work for a living, and in rural Areas, more than 4 out of 5 older people are engaged in agriculture

Further information is available from HelpAge International Latin America Regional Development Centre, whose e-mail address is info@helpage.org.

III. Reviewing implementation of the Madrid International Plan of Action on Ageing with older persons: bottom-up participatory assessment

78.   The present chapter considers the core activities of the bottom-up participatory review and appraisal of the Madrid Plan of Action in your country. In undertaking these activities, you will need to work closely with the facilitators who will lead your review and appraisal teams. This chapter helps you to look at the implementation and impact of policies and programmes as perceived by older people, and to enable older people and other stakeholders to participate in ongoing policy formulation.

79.   This chapter will specifically help you to understand how to:

- Plan bottom-up participatory review and appraisal activities
- Carry out participatory review and appraisal with older people
- Share findings with communities
- Put together and analyse information gathered

A.   Plan bottom-up participatory review and appraisal

80.   Many non-governmental and community-based organizations, research institutions and government departments use bottom-up participatory approaches. Your **national coordinating body on ageing** or stakeholder group and your other networks should help you to determine which organizations or individuals have experience in this way of working. The United Nations regional commissions may also provide information on relevant activities in the region. HelpAge International has a network of affiliates in many countries, and you can contact your regional HelpAge office for details on organizations in your country (see the Resources section).

81.   You will need to identify and work with **facilitators** with experience in planning and in leading participatory inquiry activities. The facilitators will need to:

- Contribute to the design and planning of the bottom-up review and appraisal
- Train a team to undertake participatory review and appraisal
- Facilitate and support the participatory review in selected communities, including collating and analysing information, feedback and report-writing

82.   It is important to ensure that your **facilitators** understand participation and how it works bottom-up, as claims are often made about participatory processes that are in fact quite top-down.

83.   You may look for facilitators among community workers or members of non-governmental organizations active at the local level, as well as in academia and research institutions. They often have extensive experience with participatory methodologies. Do not limit your search to people who have previously worked with older persons. Many agencies use bottom-up approaches at community level, although these may not have included older people. Organizations that are working in particular sectors such as agriculture, water or health may not have realized how these issues impact on older people's lives. This offers a good opportunity to raise their awareness and promote the inclusion of older people across all sectors.

84.   Once you have identified experienced facilitators, they can help plan the activities with your **national coordinating body** or stakeholder group. If this group is large, you may wish to form a smaller **advisory group** whose members have time and particular skills to contribute.

85.   Together, they will need to agree and plan for the following:

- The objective of your inquiry and the participatory methods that the review and appraisal teams will use
- The communities where review and appraisal teams will work
- Who will lead and carry out the appraisal exercise

86.   You will already have agreed with stakeholders on the focus, or the theme, of the review. You may wish to examine the impact of a particular policy on older people, or, more generally, what their main concerns are. A participatory approach starts with a broad theme of inquiry which becomes more focused as participants' priorities emerge and knowledge about them deepens. This ensures that you do not miss important aspects of a theme by asking very specific questions at the beginning of the process. You will therefore need to identify some broad objectives and questions. Experienced facilitators will be able to match these questions with tools for generating discussion and analysis. These constitute what is sometimes called a **field guide,** which is usually drawn up by the facilitators and teams that will carry out the appraisal.

87.   You will also need to identify one or more communities in which the assessment will be conducted. It is a good idea, if resources allow, to carry out similar exercises in more than one community, for the sake of comparison. Facilitators should be able to help you choose appropriate communities, so that comparability could be assured. If you are examining access to services, you may wish to compare the situation in a remote rural area with that in a poor part of a town or city.   Communities can be selected to determine whether there are differences between urban and rural areas, between lightly populated and densely populated communities, between communities with different environmental, income and livelihood characteristics, and so on.   This will depend on the objectives of your review and appraisal. One guiding principle of a bottom-up approach is to include people who have typically been excluded from review and appraisal processes; it is therefore a good idea to include communities that are poor and marginalized.

88.   Participatory methods are most effectively applied by a small team. This enables the facilitation of interviews and other approaches and the careful recording of their findings, and makes it possible for team members to work with different groups at the same time. Try to include people with a mix of skills and experience in one team. These can be drawn from your coordinating body, government departments and local communities. If possible, include policymakers who can apply what they learn from communities in future policy formulation, and people who can share findings widely. Many languages may be spoken in your country, and you may choose communities where different languages are used. You will need to ensure that your **appraisal team** includes some people who can speak these languages and some people who are familiar with the community or area.

89.   Your participatory facilitators and review and appraisal teams (those who will carry out the review and appraisal activities) will need to prepare for the review and appraisal

exercises before they visit the communities. Even if teams comprise people with experience, it is still essential to build good working relationships among team members. They will work together very closely over several days, and this requires an appreciation of the skills that each team member brings, as well as a shared understanding of the work. A workshop can be organized to build and practise team member skills and develop a plan for the fieldwork, or **field guide**. Since team members may not have worked with older people before, it will be important for them to understand how older people can be encouraged to participate. Some older people may have problems with eyesight, hearing or mobility, and some may not read or write; therefore, the team members should discuss how they will engage all people and enable them to participate.

B.   Carry out review and appraisal with older people

90.   When you have selected your research sites, your facilitators should visit them and prepare people for the process. At least one member of each review and appraisal team should be from the community. To help develop your understanding, it would be a good idea for you to accompany your facilitators during these visits and during the appraisal exercises. When you visit, explain your plans, seek permission to carry them out, and indicate clearly to people in the communities what you intend to do with the information generated. Talk to traditional and government officials and as many groups as possible. People may be surprised to learn about the Madrid Plan of Action. This is therefore an opportunity to raise awareness about government commitments to older people.

91.   Communities are usually very willing to participate if they are clear about the purpose and outcomes. Once your teams have agreed on review and appraisal activities with the appropriate authorities, your facilitators -- and, if possible, you personally -- should be prepared to spend several days in the community for the conduct of your review and appraisal. People, especially in poor communities, have little time to spare, and your team members can build good relationships by showing a willingness to reciprocate with the investment of their own time.

92.   The appraisal teams may need to organize separate focus groups/meetings for women and men, as women may not feel comfortable expressing their views and needs in public and/or may be likely to censor their thoughts and speak up for their husbands and fathers rather than for themselves.[16]

93.   Participatory methods emphasize joint learning and analysis and rely on strong skills in facilitating interviews and discussions. Sources of more information about these methods can be found in the Resources section and in annex II.

94.   Your appraisal teams can use visual techniques such as maps, diagrams, seasonal calendars and matrices to stimulate analysis with individuals and groups. These modalities enable older people to explain complex relationships and link issues in ways not possible through verbal means alone. They also encourage everyone to participate as equals, regardless of age, status, gender or ability to read and write. The construction of a map or

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[16] See, for example, Jane Parpart, "The participatory empowerment approach to gender and development in Africa: pancea or illusion?" (2000), available from
www.teol.ku.dk/cas/nyhomepage/mapper/Occasional%20Papers/Occ_paper_Parpart%20(Word).doc; and Patricia Maguire, *Doing Participatory Research: A Feminist Approach* (Amherst, Massachusetts, Centre for International Education, 1987).

diagram provides a clear focus for discussion and allows people to represent complex issues in their own way. When using visual tools, your appraisal team, guided by a facilitator, should *support but not direct* the review and appraisal activities, thereby allowing older people to become the investigators.

95.   One of the core methods is semi-structured interviewing. While it can be used alone, all of the methods, in a sense, constitute interviews in which review and appraisal teams listen, record the dynamics of discussions, and probe for further analysis.

96.   Team members, guided by facilitators, work within the framework developed but use their initiative in selecting and sequencing appropriate tools to investigate themes, and to follow up new lines of inquiry as they emerge.

97.   **Triangulation** is a key feature of the methodology. This encompasses the sharing of information from different sources (women, men, health practitioners) and in different ways (ranking exercises, interviews). It encourages analysis of diversity and different perspectives, especially gender analysis and, potentially, also age analysis. It is also a tool for continuous cross-checking of information and it therefore adds rigour and credibility to the findings. Good teamwork is essential, however, for successful facilitation of the methods, encouragement of analysis, and recording and collating of information.

98.   An important outcome of this bottom-up approach to review and appraisal is the generation of the findings by the older people themselves and their ownership of those findings.   If managed well, this can empower older people to engage in further review and appraisal activities and build closer relationships with policymakers. Your appraisal teams should create opportunities for older people and local implementing bodies to continue to work together to find ways of achieving the desired changes highlighted by the review and appraisal.

C.   Share findings with the community

99.   Holding a feedback meeting with community members (not just those who participated) transmits an important message, namely, that your review and appraisal teams have genuinely sought to understand their perspectives. It is also a demonstration of downward accountability: it shows that your teams are willing to be held accountable by older people for having requested their time and input. Feedback meetings also enable older people to verify the findings presented and to provide explanations for any remaining inconsistencies. Review and appraisal teams should include the diagrams or maps constructed by participants during the review. These should be reproduced in poster size to elucidate community analysis. These posters can be left with the community as a public record of the findings and testimony of any commitments made. When revisited in future reviews, these diagrams can be used as a starting point for discussions about what changes have been made.

100.   Feedback meetings should take place at a time when as many people as possible can participate. This constitutes another opportunity to raise awareness and gain local support for implementation of the Madrid Plan of Action.

D. Put together and analyse the information gathered

101.   Your review and appraisal at local level includes feedback of findings and their policy implications with members of the community and local authorities. The team's report of local-level review and appraisal exercises should therefore be finalized only after this feedback process has been completed, and should incorporate any additional information or corrections obtained during the feedback.

102.   Because the findings of bottom-up participatory review and appraisal are cumulative, analysis is continuous and takes place daily. Since each team will generate information fairly rapidly from a wide range of sources and through different methods, the appraisal teams will need to record findings systematically. Notes should be taken during each discussion and interview, and carefully catalogued with date, location, participants and theme of inquiry. At the end of each day, a team should meet to share findings from all records made that day, and plan for the next stage of the review. At the end of the review and appraisal exercise, a facilitator can pull together these notes to produce a **community report**.

103.   The following steps will help a facilitator synthesize information and write up findings:

- Discuss objectives and key themes investigated, including new topics that emerged during the exercise
- Take each theme in turn, and note key points gathered, taking care to note any differences in this regard between different groups and between older women and men
- Write down key points on cards and arrange them under subject headings: these headings can become section headings of the report
- Keep in mind specific underlying questions that clarify the information being obtained, namely:
    - What pieces of information are most important?
    - Which findings are most surprising?
    - What are the main similarities and differences in viewpoints?
    - What are the gender and age differences of respondents? Are there patterns in their responses?
    - What are the key implications for policy and implementation?
- Select diagrams that illustrate the main points and provide comparative perspectives
- Select quotes from older people and other stakeholders that highlight particular viewpoints, taking care to record how common or uncommon each viewpoint was, and whether this reflected the views of a particular group of older people

Facilitators can have team members write up different sections of the report and then lead a team review of the whole report.

104.   If you conduct review and appraisal in more than one community, you will need to draw all these community reports together into a single report. You should do this together with the facilitators of all review and appraisal teams. It is easier to do this if agreement with your facilitators is achieved in advance on how to structure all team reports in a similar manner so that they are centred around the themes of your inquiry. The following steps will help you to synthesize several community reports:

- Take each main theme (or each topic of a single theme) of your review and appraisal in turn
- Look at findings under each theme in each community report, asking:
    - Which findings are the same in all communities?
    - Which findings are different across communities?
    - Which findings highlight age and gender differences?
    - Which similarities and differences are linked to cultural, geographical, economic, social or political environments?
    - Which findings stand out as surprising or as hard to explain?
- Note the key points under each theme
- Select diagrams and quotes of participants to illustrate key points and comparative perspectives

105. As you proceed, you will notice more and more links between themes; the important issues will become clearer and your analysis deeper. This process will provide the structure, examples and key areas of analysis for your report. You and your facilitators should now be able to write the report within a few days. Include a summary of key findings and implications for policy implementation at the beginning of the report, as this is the section that most people will read.

106. By involving older people in analysis at local level, you will have created opportunities for wider dialogue among older people, service providers and responsible officials. The involvement of older people in the review and appraisal project will stimulate civil society participation in the policy development and monitoring cycle. This will help build political support for the Madrid Plan of Action. Information gathered and analysed at community level can be synthesized and used by older people in local and national advocacy and policy engagement with other stakeholder groups.

107. Several case studies related to bottom-up and participatory review and appraisal with older people are presented in boxes VIII through XI.

Box VIII.
Supporting older people's advocacy: the older citizens' monitoring project in Bangladesh

    Government social protection schemes provide vital support for poor older people in Bangladesh, particularly older women. However, many are not receiving their entitlements, a problem identified by the Resource Integration Centre (RIC), one of a small number of non-governmental organizations that target older people in Bangladesh. The project they devised demonstrates that Governments have the potential to work with users to improve services.

    The aim of the older citizens' monitoring (OCM) pilot project in Bangladesh has been to increase older people's access to two government services that are intended to alleviate poverty: the Old Age Allowance and the Vulnerable Group Development Programme. The project covers nearly 6,000 older people in 80 villages in a rural and peri-urban area of Bangladesh. With Resource Integration Centre facilitation, these participants have formed older people's associations (OPAs). At an early stage of the project, the older people had conducted their own census and found significantly higher percentages of older people than those recorded by the last government census. In the rural community for example, they found that 9 per cent of the total population was over age 60, rather than

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6 per cent, as recorded by the official census.

The Resource Integration Centre began by holding village meetings with older people to discuss their priorities. They identified food security as a major problem, together with low income, a lack of assets and the absence of government health services. These meetings initiated a process of forming older people's associations, and electing committees and monitoring groups. The older people involved all received training in leadership and data collection.

The participants reviewed each government policy and then identified relevant indicators for monitoring how the policies were being implemented over time. They established systems to collect, analyse and discuss their findings with local, district and national stakeholders, including government officials, in order to improve implementation. Regular meetings were held with local government officials, providing opportunities to cover a range of issues affecting older people.

For example, older people's associations in each village identified who is eligible for the Old Age Allowance and compared their findings with data on those actually receiving it. In one village in Pubail district, only 85 older people had been receiving the Old Age Allowance, out of 978 who were eligible. The group is petitioning so that an additional 243 persons among those who are eligible – the most vulnerable – can receive the allowance.

During 2005, the monthly Old Age Allowance in Bangladesh increased from US $2.50 to US $2.75 and was extended from 1 million to 1.32 million people. This may in part have been due to national-level advocacy undertaken by the project. Local-level management and administration have also improved. The fact that local banks have streamlined the distribution of the Old Age Allowance and allocated specific times for its collection, makes it easier for older people to collect.

The confidence of older people has increased through their involvement in organizations that promote their interests: "We were sleeping … before this organization we were lambs, now we are lions", says Bhimkanthi, a committee chairman in one project area. The older people's associations have also developed other activities in addition to their monitoring work. A number of committees make regular home visits and offer basic health care. In one case, the committee was involved in relief work following floods. Another committee has developed dispute-resolution techniques and tackled family issues, such as the neglect of frail older people.

Older men and women see potential for the project. One committee member said that it should be developed across the country, as working in only two areas meant that there was not enough negotiating power with the national Government. Other members have talked about using the voting power of older people as a potential incentive to encourage local officials to cooperate with the associations.

The e-mail address of the Resource Integration Centre, Bangladesh, is: ricdirector@yahoo.com.

Box IX.
Accountability to users of services: a bottom-up approach in India

Monitoring and evaluation have become familiar tools for review of service delivery, but normally this entails a "top-down" approach, whereby Governments and official agencies decide to review their own performance or that of their providers such as non-governmental organizations. However, accountability to the users of services is also important, and this can be achieved using very basic tools. HelpAge India has been developing such approaches in its work with coastal communities in the wake of the Asian tsunami.

One method used in working with local communities is social mapping. Social maps, developed as a tool for participatory planning with community groups, can also be an effective means of feeding back information to policymakers. The relief stage of the tsunami operation had inevitably proceeded at a very fast pace, and HelpAge India staff felt the need to enable the communities to "understand, analyse and question what we did and how we did it". The organization and its partner non-governmental organizations had worked with communities to identify priority needs, and the mapping exercise enabled the communities to identify and agree on the households that required these services.

At a meeting convened by village elders, both the community and all project staff were assembled. The agreed inputs (these ranged from replacement fishing boats and nets to ploughs and other agricultural equipment) and the processes required to prioritize households needing support were described.

Households were identified on a map sketched on the ground and, through discussion, a priority list of those needing support was agreed. These households were then marked on the map. Symbols were used to represent the various inputs and provided a simple way of indicating key features of the village so as to enable beneficiary households to be easily identified.

The community discussion also highlighted cases where older people or their households had been inadvertently excluded, identified which households were receiving multiple benefits, provided commentary on the adequacy or inadequacy of the support, and helped to explain the reasons for inclusion or exclusion, from the perspective of service deliverers.

The resulting maps were then reproduced in printed form on large posters and displayed prominently in the villages. This enabled community members to see where services were provided, and helped other non-governmental organizations to identify provisions and gaps in services. A further development has been community auditing of the effectiveness of service provision, again using the map as a reference point.

Participatory methodologies such as social mapping are powerful tools for community inclusion, and older community members in particular were able to participate in the mapping exercise. More information on participatory approaches can be obtained from organizations based in many countries. Particularly useful resources can be found in the Resources section.

Source: Head of Emergencies, HelpAge India, New Delhi 110 061, India, www.helpageindia.org.

Box X.
Impact review of an action research project in South Africa

The benefits of involving all stakeholders in implementation and delivery of the Madrid Plan of Action, in this regard, (see Madrid Plan of Action, para. 22) are illustrated in the present case study. In 2000, a year after completing action research in South Africa, the stakeholder group comprising older people, government representatives, non-governmental organizations and community-based organizations reviewed the impact of the project on policy, practice and the lives of older people. The review consisted of workshops with the research team and partner organizations, and meetings with older people and government representatives.

The main findings were:
- More information had been available to older people at pension pay points and queuing time at pension pay points was reduced
- Older people who had taken part in the research said that they felt that, during the national dissemination workshop, government officials had listened to them and understood. This had given them great hope for change in future

The Government had taken forward some action points agreed to at the dissemination workshop. It had:
- Made a start on undertaking education activities regarding older people's rights
- Begun the networking of social services databases
- Distributed booklets on resources, services and contacts for older people
- Built good public awareness of new national leaflets about services for older people with cancer and diabetes
- Increased numbers of home visits made to older people by health staff in two provinces
- Ensured that family members were included on the health boards of two provinces

Non-governmental and community-based organizations had:
- Initiated education activities centred around older people's rights
- Improved coordination with government on programmes for older people, especially for the purpose of combating abuse
- Increased emphasis on income-generation work with older people

Source: "The contribution of older people to development: South Africa study", (HelpAge International, 1999) (www.helpage.org).

Box XI.
Report of the qualitative assessment of the living conditions, health and nutrition situation of older people in six districts of Uganda

Recognizing that older people were excluded from existing health and nutrition policies, standards and practices, the Ugandan Ministry of Health (www.health.go.ug) set up an inter-ministerial working group with support from HelpAge International and Uganda Reach the Aged Association (e-mail address: ugreach@africaonline.co.ug). It combined a qualitative participatory study with older people to assess their health and nutrition situation and living conditions with a review of existing governmental and non-governmental poverty reduction initiatives. In addition to providing marginalized older people with the opportunity to talk to people with technical expertise who influenced policy processes, the research team took the opportunity to raise awareness among older people of their rights.

The research also highlighted discrepancies between what older people had stated regarding their access to services and what service providers and district planners stated regarding budget allocation.

Recommendations of the report included the following:

- Older peoples' issues needed to be mainstreamed within policies and programmes in all sectors
- Older people needed to be enabled to improve their income security through the provision of grants, loans and social security services
- Concerted effort was needed from health service providers to ensure, increased and improved health care for older people, for example, subsidized/free drugs, mobile clinics, support to older people in home-based care programmes, support to traditional healers, appropriate training on older people's issues in medical institutions and HIV prevention/care work targeted at older people
- Information, education and communication materials on nutrition, voluntary counseling and testing, HIV/AIDS, water and sanitation and older people's rights needed to be developed in an appropriate format for older people
- Support was needed for older people and orphans and vulnerable children to reduce the burden of care for these groups
- Further research was needed to highlight successful programmes alleviating poverty among older people
- Access to retirement benefits for older people should be improved
- Uganda should consider a universal social protection scheme that ensured income for all older people aged 60 years or over

IV. Distillation and analysis of information at national and regional levels

A.   National level

108.   At this stage, you will link all the information derived from your review and appraisal exercises to produce composite national findings. If you have followed the steps outlined in the guidelines above, you should have recorded the following findings:

- Key priority areas for policies and programmes on ageing in your country
- Key outcomes of the preparatory policy review and review of background information (outlined in chap. II of these guidelines)
- Key information obtained through in-depth review and appraisal with older people in selected communities (described in chap. III)

109.   While there may be some non-Madrid Plan of Action-related policy interventions and programme measures that have had an impact on older persons, along with people belonging to age groups under age 60, you may wish to structure your presentation of national findings on the basis of two fundamental questions that were central to the whole exercise:

- What has been done in your country since the Second World Assembly on Ageing?
- What was the impact on the quality of life and well-being of older people in your country?

110.   In answering the first question, you tapped many sources of information and generated different types of knowledge. These included your review of the policy environment and government priorities in relation to ageing and review of any available quantitative and qualitative information at the national level. In analysing the information obtained, you can use instrumental indicators to assess the availability and focus(es) of national policy and programmes on ageing and their relations to the Madrid Plan of Action.

111.   In respect of answering the second question, the findings of bottom-up participatory review and appraisal with older people during community-based exercises will provide the central evidence for determining how well policies have succeeded. In conclusion, and equally important, you should be able to propose adjustments to the ongoing implementation process in order that any shortcomings and obstacles that were revealed might be overcome.

112.   In order for the information that you have obtained through participatory exercises to be useful in drawing conclusions for your review and appraisal, you may, however, need to interpret or "distil" it. You may find that the information you received is very specific or anecdotal, and it may be necessary to extrapolate to the domain of more general lessons, so that issues can be crystallized and patterns can be identified that will guide policy review. The first question to ask is, What do policymakers want to know? Policymakers generally do not want raw information, but an understanding of information in ways that are relevant to policymaking. Therefore, in drawing up your findings, you should always consider the question, What is the policy relevance of the information?

113.   It is also essential to document how conclusions were arrived at, and to record the process in a transparent way. A transparent process should also enable those who participate to determine whether the findings are legitimate, reliable and valid. This will lend credence to your findings. Ultimately, however, it is important to remember that a participatory

bottom-up review and appraisal is not carried out with a representative sample of all older people; rather, participants are purposefully selected.

114.   The findings of participatory bottom-up review and appraisal are context-specific, as they reflect the analysis of particular groups of people in a particular location or situation. The task in distiling the information is to determine what the information tells you about policies in general and whether it is valid across locations and situations. The team members should meet to compare notes and make sense of the vast amount of information that is before them. They will have to look very carefully for any patterns and trends that may be emerging. They should look at findings as measured against key instrumental and outcome indicators of the quality of life of older persons and the success, or the lack thereof, of policies that affect older persons (increase in services for older persons, improvement in social security benefits, as described by participants in participatory exercises). They should examine the information that was gathered with a view to determining whether current laws and policies adequately reflect the concerns of older persons. If not, what did the older persons say with regard to what needed to be done? If any new policies or programmes have been introduced, the team should check to see if older persons reported any benefits accruing from them. After careful analysis, the team should come up with a clearer picture of changes in the quality of life of older persons as well as their concerns, hopes and fears, and whether any progress had been made since implementation of the Madrid Plan of Action began.

115.   It is essential to ensure, to the best of your ability, that the information obtained through participatory exercises is reliable, valid and relevant. The next step would be to share this information with policymakers and civil society representatives at local, provincial and national levels – with older persons present – to determine whether the findings obtained through selected participatory activities can be generalized to apply to larger settings. This is an important step in the distillation process, because it provides an opportunity to discuss and confirm your findings publicly and thereby give them greater validity, and allows for other views to be incorporated. It also sets the stage for larger public discussion of issues of ageing, so that appropriate steps can be taken in areas that call for further action. At this point, it would be advisable to raise the issue of adequate national budgeting for older persons.

116.   It is important to support continued involvement of older people in the various dissemination and analysis activities, including media work. At community level, the review process should create opportunities for older people and local authorities to meet to discuss findings and initial implications for policy. Relationships built up during the initial review process between older people and other stakeholders can be maintained, and this may be achieved with just a little support from you. In this way, review and appraisal can become an ongoing process at this level.

117.   You will conclude your national review and appraisal exercise by discussing its major findings and formulating proposals for policy adjustments. The activities at this stage should be conducted together with your national coordinating body or stakeholder group, and they might be conducted within the format of a national workshop. The media should be encouraged to disseminate the national findings widely. National findings can also feed into the regional-level review and appraisal, at which stage countries will share their experiences and discuss best practices and constraints.

118.	This process should continue. Implementation and monitoring of the Madrid Plan of Action should be ongoing and continue to include older people both in further research and in policy review and development. This includes ensuring that older people are represented in national processes open to civil society engagement such as the review of poverty reduction strategies. Alliances should also be developed with non-age-focused organizations and networks to encourage them to include older people in their development programmes. Older people should also be involved in collaborations with regional bodies and United Nations organizations working on regional implementation strategies.

## B.	Regional level

119.	The regional commissions are responsible for the regional implementation strategies[17] of the Madrid Plan of Action and will coordinate the regional review and appraisal exercises. They will invite Governments to feed the findings of their national review and appraisal activities into a regional assessment exercise, so that Governments may learn from one another. The actual arrangements for these regional exercises have yet to be determined, and they may vary from region to region. You may wish to consult with the focal point on ageing for your region for further information and to consider areas where support and assistance may be forthcoming. Contact details for all the regional commissions are provided in the Resource section of this publication.

120.	The regional commissions might support your national review and appraisal activities by providing advice and technical support. They could assist you in such areas as information-gathering, as well as in the distillation and analysis of that information. At the regional level, the regional commissions will also be engaged in the formulation of regional findings and priorities for future policy action. The technical cooperation activities of the Economic Commission for Latin America and the Caribbean (ECLAC), for example, cover six areas: (a) advocacy; (b) diagnosis of the situation of older persons; (c) assistance in developing national action plans involving various stakeholders; (d) indicators development; (e) promotion of research; and (f) long-term implementation of national policy. The Economic and Social Commission for Asia and the Pacific (ESCAP) responds to requests for national capacity-building services in the areas of data-gathering, indicators development, health and social security.

121.	Regional review and analysis exercises will be based on findings of national review processes, and will consider the following:

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[17] To date, three of the regional commissions have developed regional implementation strategies for the Madrid Plan of Action: the Economic Commission for Europe (ECE) in September 2002, the Economic and Social Commission for Asia and the Pacific (ESCAP) also in September 2002, and the Economic Commission for Latin America and the Caribbean (ECLAC) in November 2003. The specific situations that exist in the remaining two regional commissions, namely, the Economic Commission for Africa (ECA) and the Economic and Social Commission for Western Asia (ESCWA) are the following: While ECA has not elaborated its regional implementation strategy, the Heads of State and Government of the African Union did adopt the African Union Policy Framework and Plan of Action on Ageing, in Durban, South Africa, in July 2002. Similarly, ESCWA does not have a regional implementation strategy; however, it did adopt the Arab Plan of Action on Ageing to the Year 2012 during the Arab Preparatory Meeting for the Second World Assembly on ageing, held in Beirut in February 2002. Both the ECA and ESCWA regional policy documents on ageing are conceptually and operationally closely related to the Madrid Plan of Action. On the other hand, they differ in terms of priorities for action.

1. Ageing situation in the region since the endorsement of the Madrid Plan of Action
2. Policy developments on ageing within the region
3. Inclusion of ageing in regional frameworks and plans
4. Differences between sub-regional and country-level ageing situations
5. Priorities for future action on ageing in the region

C. Global level

122. National and regional findings of review and appraisal will be consolidated at the global level by the Commission for Social Development. The first cycle of the global review and appraisal process was launched by the Commission in February 2006 and will end in February 2008 at the forty-sixth session of the Commission.

123. You may find it useful to consult the calendar for the first cycle of the global review and appraisal[18] in order to better plan your national review and appraisal activities (see box XII).

Box 12.
Calendar for the first cycle of the review and appraisal of the Madrid Plan of Action*

2006

(a)   The Commission for Social Development decides on the timing, the modalities and the theme for the first cycle of the review and appraisal;

(b)   Member States receive practical guidelines for the review and appraisal of the Madrid Plan of Action prepared by the Department of Economic and Social Affairs of the United Nations Secretariat in consultation with the regional commissions and programmes and agencies of the United Nations system. As a first step, Member States will indicate their priorities for review and appraisal and undertake an "instrumental" assessment, including identifying laws and implementing regulations, institutions, policies and programmes introduced or altered since 2002 in response to the Madrid Plan of Action. Countries will also recall national priorities and review the national ageing situation. As a result, each country will have identified for itself specific areas for in-depth participatory inquiries using the bottom-up approach. They would present this information to the Commission for Social Development in 2007;

(c)   The Department of Economic and Social Affairs and the United Nations system work jointly to promote awareness of the bottom-up approach and familiarity with the guidelines, to assist countries in beginning the process;

(d)   Regional commissions, at their governing bodies, undertake an initial regional assessment of the ageing situation based on country reports on the accomplishments of national plans of action on ageing and submit their findings to the Department of Economic and Social Affairs for inclusion in a report of the Secretary-General to the Commission for Social Development;

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[18] Endorsed by the Commission for Social Development at its forty-fourth session on 17 February 2006 (see *Official Records of the Economic and Social Commission, 2006, Supplement No. 6* (E/2006/26), chap. I, sect. C, resolution 44/1, paras. 1 and 2).

2007

(a)   The Commission for Social Development will mark the fifth anniversary of the Second World Assembly on Ageing. The Secretary-General will submit to the Commission a report on major developments in the area of ageing since the Second World Assembly (report on the world ageing situation), which could include short regional contributions (regional ageing situations) from the regional commissions. Member States will inform the Commission about the actions they have taken since the Second World Assembly to implement the Madrid Plan of Action (for example, new laws, policies and programmes, the establishment of coordinating mechanisms and information campaigns) and exchange information on which area each country will determine for itself to evaluate using a bottom-up participatory approach;

(b)   National and regional processes of review and appraisal will begin. Countries will review and appraise the national policies and strategies that they identified. Information on the initial experience and good practices in organizing and conducting bottom-up participatory evaluation at the local and national levels will also be collected, analysed and presented to the regional commissions;

(c)   Upon request, the regional commissions, in cooperation with other entities, will assist countries in conducting their national review and appraisals and encourage participatory approaches to the process;

(d)   Regional commissions will convene regional conferences (pending the availability of sufficient resources) to consider the findings of national reviews, share experiences and good practices and identify priorities for future action. The commissions will submit the conclusions of the meetings and individual national reports to the Commission for Social Development in 2008;

* See the report of the Secretary-General on the modalities for the review and appraisal of the Madrid International Plan of Action on Ageing (E/CN.5/2006/2), submitted to the Commission for Social Development at its forty-fourth session, also available from http://www.un.org/esa/socdev/ageing/.

2008

(a)   The Commission for Social Development, at its forty-sixth session in February 2008, will conduct the global segment of the first cycle of the review and appraisal of the Madrid Plan of Action. The modalities of this segment could include a series of plenary meetings or deliberations of a series of round tables. An outcome document could include the conclusions of the first review and appraisal exercise along with the identification of prevalent and emerging issues and related policy options. A series of parallel events, including panels, workshops and the seminars organized by all major stakeholders, will be conducted, including the presentation of the findings of independent monitoring projects.

124.   The undertaking of the participatory review and appraisal of the implementation of the Madrid International Plan of Action on Ageing marks a watershed in respect of the way that Governments and the international community assess their actions in fulfillment of international commitments and consider the impact of those actions. Yet, participatory methods do not represent something new and extraordinary that has fallen from the sky. They are already being used in countries all over the world. The social perspective they introduce provides essential information to policymaking and increases understanding of actual conditions in a country, as portrayed by the people concerned. Such methods encourage participation and promote the active involvement of older persons who have often been overlooked. They also encourage the development of social capital, as people begin to organize and develop essential networks to promote their interests and well being. A bottom-

up participatory review and appraisal constitute a tool for better decision-making for the purpose of improving not just policies and programmes, but also governance. Although this tool may not always provide the right answers to questions of policy, its use is nevertheless essential if crucial mistakes are to be avoided.

Resources

The following documents are available at the **website of the United Nations programme on ageing** (http://www.un.org/esa/socdev/ageing):

- Political Declaration and Madrid International Plan of Action on Ageing, 2002
- The framework for monitoring, review and appraisal of the Madrid International Plan of Action on Ageing (containing a description of qualitative and quantitative methods that can be used in review and appraisal, and a set of indicators to assess progress made on the implementation of the Madrid Plan of Action)
- United Nations reports and resolutions related to implementation and review and appraisal of the Madrid Plan of Action

The Madrid Plan of Action regional implementation strategies:

- ECE: http://www.monitoringris.org/skel.php?id=27
- ECLAC: http://www.eclac.org/celade/noticias/paginas/1/1361/FINAL-DSC-1-Ingles.pdf
- ESCAP: http://www.unescap.org/esid/psis/ageing/strategy/index.asp

African Union Policy Framework and Plan of Action on Ageing:

- http://www.helpage.org/Resources/Policyreports/main_content/1118337558-0-11/AUFrameworkBook.pdf

The Arab Plan of Action on Ageing to the Year 2012:

- http://www.escwa.org.lb/information/publications/edit/upload/sd-02-01.pdf

Contacts with websites

National focal points on ageing
    In ECE region: http://www.monitoringris.org/skel.php?id=177
    In ESCAP region: http://www.unescap.org/esid/psis/ageing/profile/directory.pdf

Organizations

HelpAge International
    For information on issues affecting older people in developing countries, and for contact details of national affiliates of HelpAge International, visit www.helpage.org.

    E-mail addresses for HelpAge International regional centres:

Africa Regional Development Centre	helpage@helpage.co.ke
Asia Regional Development Centre	hai@helpageasia.org
Brussels Office	helpage.brussels@skynet.be
Caribbean Regional Development Centre	helpage@candw.lc
Eastern Europe and Central Asia	ltemple@helpage.org
Latin America Regional Development Centre	info@helpagela.org

International Federation on Ageing (IFA)   http://www.ifa-fiv.org

AARP   http://www.aarp.org

Fédération Internationale des Associations   http://www.fiapa.org
de Personnes Agées (FIAPA)

International Association of Gerontology   http://iagg.com.br
and Geriatrics (IAGG)

Materials, with websites

"Participatory research with older people: a sourcebook". (London, HelpAge International, March 2002). Available free of charge from HelpAge International and downloadable from website: www.helpage.org/Resources/Manuals

Participatory Learning and Action. A trainer's Guide. (London, International Institute for Environment and Development, 1995). Available by ordering from orders@earthprint.com

http://www.iied.org/NR/agbioliv/pla_notes/index.html
PLA (Participatory Learning and Action) notes by International Institute for Environment and Development. Informal series to enable people using participatory methods from around the world to share practical experiences, reflections and innovations.

http://www.ids.ac.uk/ids/particip/information/recentpubkn.html
The website of the Participation Resource Centre group at the University of Sussex Institute of Development Studies (IDS) has many resources on the theory and practice of participation.

www/worldbank.org/participation
World Bank websites include various manuals and tools on participation.

www.eldis.org
The Eldis website provides a gateway to a wide range of development information, including summaries and texts of the latest development research publications, and lists of books and articles on participation. It also includes useful links to international participation networks and other resource centres. The participation pages can be reached through the alphabetical site map.

http://www.who.int/healthinfo/systems/sage/en/index.html
WHO Study on Global Ageing and Adult Health contains quantitative data on the situation of older persons, including health, well-being, poverty, gender, water and sanitation, and health-care utilization data on older adults in low- and middle-income countries for the Millennium Development Goals and the Madrid Plan of Action. Data are available from 70 countries currently participating in the study and can be downloaded from the website.

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United Nations, Department of Economic and Social Affairs (2003b). Suggestions for participatory assessment tools and indicators for national review and appraisal of the Madrid International Plan of Action on Ageing.

United Nations, Department of Economic and Social Affairs (2005a). Framework for monitoring, review and appraisal of the Madrid International Plan of Action on Ageing. Draft work in progress.

United Nations, Department of Economic and Social Affairs (2005b). Report on the Interregional Consultation on the Review and Appraisal of the Madrid International Plan of Action on Ageing, 26-28 September 2005, Geneva. Available from http://www.un.org/esa/socdev/ageing/documents/.

Villarreal, M. (2005). Project on participatory mechanisms for design, formulation and implementation of legislation, policies and programmes on ageing. Population Division of ECLAC (CELADE) and Country Support Team for Latin America and the Caribbean, United Nations Population Fund

Annex I

Suggestions for participatory assessment tools and indicators for national review and appraisal of the Madrid International Plan of Action on Ageing

      The present table suggests two approaches to monitoring the implementation of the Madrid International Plan of Action on Ageing, 2002. The first approach uses the participatory assessment tools (column three) for gathering qualitative information; the second entails using indicators (column four), along with the possible sources of data (column five) for compiling the indicators. Both the participatory assessment tools and the suggested indicators aim to assist Governments in monitoring the process of reaching the objectives that pertain to the priority issues within the three priority directions of the Madrid Plan of Action.

      The participatory assessment tools are the central and most essential component of the bottom-up approach to national and local review and appraisal exercises. Their use allows a different type of information to emerge – information that may be more qualitative in nature and capable of complementing quantitative monitoring. The bottom-up approach intends to provide direct feedback from individuals and groups concerning the achievement of specific objectives. A wide range of methods can be used to feed into the approach encompassing various indicators, as listed below. These include maps, diagrams, seasonal calendars and matrices, as well as semi-structured interviews and focus groups. Which methods to use will be decided by a review and appraisal team, once the focus of the review and appraisal exercise has been determined. Suggestions for materials for different participatory methods are listed in the Resource section. Annex II contains explanations of some participatory methods of data collection.

      The proposed indicators are formulated on the basis of actions as recommended in the Madrid Plan of Action. Two types of indicators are proposed: instrumental and outcome. The instrumental indicators are suggested for mainly quantitative evaluation of the availability, scope and coverage of programmes and policies that have been adopted to address issues of population ageing and improve the well-being of older persons. This type of indicator could be compiled on the basis of already existing statistical data, as appropriate and available. The principal sources of data are reports of government, non-governmental organizations, the private sector and international organizations. The outcome indicators attempt to identify positive or negative changes in the quality of life as well as in socio-economic conditions and in the health of older persons. Both quantitative and qualitative indicators are suggested.

      It should be emphasized that participatory assessment tools and indicators could be used simultaneously, or in parallel, for monitoring, review and appraisal of the Madrid Plan of Action.

Priority direction/issue	Objective	Participatory assessment tools for bottom-up approach	Suggested indicators	Sources of data for suggested indicators *(collected data should be organized according to gender and five-year age subgroups)*
Priority direction I: Older persons and development				
Issue 1: Active participation in society and development	**Objective 1: Recognition of the social, cultural, economic and political contribution of older persons**	1. *Focus groups [a]* 2. *Institutional diagrams [b]*	**Instrumental** 1. Availability, scope and coverage of programmes promoting and facilitating participation of older persons in social, political, cultural and economic matters	1. Information from Governments, non-governmental organizations, private sector and religious institutions 2. Institutional analysis [c]

[a] Focus groups constitute a research tool that involves intensive discussion and interviewing of small groups of people, on a given focus or issue, and usually on a number of occasions over a period of time (*A Dictionary of Sociology*, (Oxford, United Kingdom, Oxford University Press, 1998)).

[b] Institutional diagrams (or institutional analysis) constitute a visual tool that shows how organizations or individuals influence people's lives, and the relative significance of different institutions within a community. Carried out with older people, this exercise can demonstrate which institutions they engage with and how they integrated within mainstream social, economic and political institutions.

[c] Attempts to describe an institution on the basis of relevant statistics, finances, staff, and other information pertaining to the institution.

			Outcome	
			1. Percentage of older persons among volunteers and/or percentage of volunteers among older persons 2. Percentage of membership of older persons in a club, organization or religious institution [d] 3. Percentage of older persons reporting having voted in last election [e] 4. Percentage of older persons caring for grandchildren	1. Survey [f] 2. Government reports 3. Information from organizations 4. Electoral register
	Objective 2: Participation of older persons in decision-making processes at all levels	1. *Focus groups* 2. *Institutional diagrams*	**Instrumental** 1. Number of decision-making bodies with older persons participating at all levels 2. Number of organizations of older persons representing them in decision-making	1. Government and municipality information 2. Non-governmental organizations' reports 3. Community-based organizations' information 4. Institutional analysis
			Outcome 1. Percentage of older persons in decision-making entities (city councils, chairs held within organizations and institutions)	1. Survey

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[d] HelpAge International, WHO and United States National Institute on Aging, "Indicators for the Minimum Data Set Project on Ageing: a critical review in sub-Saharan Africa", (WHO/EIP/GPE/01.1), Geneva, 2001.

[e] Ibid.

[f] Household surveys are used most often to collect information based on small but representative samples of households. Household surveys can be conducted by contacting respondents in person, by telephone or by mail.

Issue 2: Work and the ageing labour force	Objective 1: Employment opportunities for all older persons who want to work	*1. Time-use surveys* *2. Livelihood analysis [g]* *3. Focus groups*	**Instrumental** 1. Availability, scope and coverage of policies to increase labour-market participation of older persons 2. Unemployment rate of older persons and incidence of long-term unemployment (more than one year) (refer to Millennium Development Goals indicator 45)	1. Government information 2. Trade union information 3. Millennium Development Goals reports if age-disaggregated
			Outcome 1. Employment ratio of older persons compared with that of general population 2. Percentage of older women in wage employment in the non-agricultural sector (refer to Millennium Development Goals indicator 11) 3. Labour-force participation of older persons 4. Ratio of number of older persons in the informal sector to total number of employed older persons 5. Percentage of businesses owned by older persons	1. National census 2. Use of International Labour Organization data 3. Survey 4. Millennium Development Goals reports if age-disaggregated 5. Labour-force surveys

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[g] Involves empirical investigation of combinations of modes of livelihood and, above all, of relationships between them in a particular historical context (http://www.chronicpoverty.org/pdfs/livelihoods.pdf).

Issue 3: Rural development, migration and urbanization	Objective 1: **Improvement of living conditions and infrastructure in rural areas**	1. *Focus groups* 2. *Resource mapping* [h]	**Instrumental** 1. Percentage of national (municipal, local) budget spent on programmes targeted towards older persons residing in rural areas 2. Availability, scope and coverage of credits provided to older persons channelled through microcredit and/or other institutions in rural areas	1. Government information 2. Non-governmental organization information 3. Private sector (banking) information
			Outcome 1. Percentage of rural older persons involved in small-scale enterprises 2. Percentage of rural older persons receiving basic social services (namely, health services, transportation, safe water)	1. National census 2. Survey 3. Agricultural census
	Objective 2: Alleviation of the marginalization of older persons in rural areas	1. *Focus groups*	**Instrumental** 1. Availability, scope and coverage of community care programmes for older persons in rural areas (social, water, health, transport) 2. Availability, scope and coverage of programmes promoting empowerment of older persons in rural areas	1. Government information 2. Civil society information 3. Information from cooperatives

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[h] Resource maps of a given community show such information as location of households, natural resources such as forest and streams, and infrastructure such as roads, water points, clinics and schools.

			Outcome	
			1. Percentage of non-institutionalized older persons receiving formal community support services (health, food, care support) in rural areas[i]	1. Survey 2. Information from religious institutions, non-governmental organizations 3. Information from private sector
	Objective 3: Integration of older migrants within their new communities	1. *Focus groups* 2. *Mobility mapping*	**Instrumental** 1. Percentage of internal and international older migrants with or without working knowledge of local language 2. Availability, scope and coverage of programmes geared to integrating older migrants	1. National census 2. Mobility maps[j] 3. Government information
			Outcome 1. Percentage of older migrants benefiting from migrant-specific government programmes (language classes, cultural and social exchange)	1. Survey
Issue 4: Access to knowledge, education and training	**Objective 1: Equality of opportunity throughout life with respect to continuing education, training and retraining**	1. *Individual interviews* 2. *Oral history* 3. *Focus groups*	**Instrumental** 1. Availability, scope and coverage of programmes focusing on continuing education (training and retraining) for older persons	1. Government information 2. Non-governmental organization information

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[i] HelpAge International, WHO and United States National Institute on Aging, "Indicators for the Minimum Data Set Project on Ageing: a critical review in sub-Saharan Africa, (WHO/EIP/GPE/01.1), Geneva, 2001.

[j] Mobility maps map the internal migration or movement of individuals in communities or provinces or at the national level.

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			Outcome	
	as well as vocational guidance and placement services		1. Highest educational attainment of older persons[k]	1. Survey
			2. Literacy rate of older persons [l] (refer to Millennium Development Goals indicator 8)	2. Millennium Development Goals reports if age-disaggregated
			3. Ratio of literate females to males among older persons (refer to Millennium Development Goals indicator 10)	3. National census
				4. Government information
			4. Percentage of older persons enrolled in educational/training programmes	5. School records
			5. Telephone lines per 1,000 older persons (refer to Millennium Development Goals indicator 47)	
			6. Personal computers per 1,000 older persons (refer to Millennium Development Goals indicator 48)	
	Objective 2: Full utilization of the potential and expertise of persons of all ages, recognizing the benefits of increased expertise with age	*1. Historical profile[m]* *2. Oral history* *3. Focus groups*	**Instrumental** 1. Availability, scope and coverage of programmes geared towards including older persons in mentoring/training for younger generations	1. Government information 2. Non-governmental organization information 3. Information from academia 4. Private sector information 5. United Nations organization reports

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[k] United Nations, *Principles and Recommendations for Population and Housing Censuses, Revision I,* Statistical Papers, No. 67/Rev.1 (United Nations publication, Sales No. E.98.XVII.8).
[l] Ibid.
[m] Description of the evolution of an organization and its activities reflecting changes over time, using visual representation to discuss key events over a period of time, and showing how past conditions have affected the current personal or community situation. Used with individuals to reveal factors that determined choices made in the past.

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			Outcome	
			1. Percentage of older persons participating in mentoring/training programmes	1. Survey 2. School records 3. Non-governmental organization information 4. United Nations organization reports
Issue 5: Intergenerational solidarity	**Objective 1: Strengthening of solidarity through equity and reciprocity between generations**	*1. Interviews with people of different age groups* *2. Focus groups* *3. School competition on perceptions of ageing*	**Instrumental** 1. Availability, scope and coverage of initiatives for strengthening greater intergenerational solidarity	1. Government information 2. Non-governmental organizations' information 3. School curriculum and reports
			Outcome 1. Percentage of older persons with a positive view towards younger/older generation 2. Percentage of older persons providing support (for example, monetary, care, etc.) to younger members of family/community/neighbourhood) 3. Percentage of younger persons having a positive view of older persons	1. Survey 2. Community-based organization information 3. Media survey

Issue 6: Eradication of poverty	**Objective 1: Reduction of poverty among older persons**	*1. Livelihood analysis* *2. Institutional analysis* *3. Focus groups*	**Instrumental** 1. Availability, scope and coverage of poverty reduction strategies of the government, such as Poverty Reduction Strategy Papers (PRSPs), that include older persons as a target group	1. Information from Millennium Development Goals reports 2. Government information on Poverty Reduction Strategy Papers
			Outcome 1. Percentage of older persons living below national poverty line[n] 2. Percentage of older persons living below international poverty line ($1/day)[o] (refer to Millennium Development Goals indicator 1)	1. Survey 2. Millennium Development Goals reports if age-disaggregated
Issue 7: Income security, social protection/social security and poverty prevention	**Objective 1: Promotion of programmes to enable all workers to acquire basic social protection/social security, including, where applicable, pensions, disability**	*1. Livelihood analysis* *2. Focus groups*	**Instrumental** 1. Availability, scope and coverage of legislation ensuring basic social protection for all ages 2. Availability, scope and coverage of programmes of social protection such as non-contributory pensions	1. Government information

[n] World Bank, *World Development Report 2000/2001: Attacking Poverty* (New York, Oxford University Press, 2001).
[o] Ibid.

			Outcome	
	insurance and health benefits		**Outcome** 1. Percentage of older persons benefiting from basic social security/protection programmes 2. Percentage of older persons using various public-health services 3. Worker-to-retiree ratio 4. Percentage of health service users who are satisfied with services received	1. Survey 2. Government information 3. Non-governmental organization information
	Objective 2: Sufficient minimum income for all older persons, paying particular attention to socially and economically disadvantaged groups	*1. Livelihood analysis* *2. Focus groups*	**Instrumental** 1. Availability, scope and coverage of public and private programmes designed to ensure sufficient minimum income for all older persons	1. Government information 2. Private sector information 3. Non-governmental organization information
			Outcome 1. Percentage of older persons receiving minimum income 2. Percentage of older persons able to meet their needs on minimum income provided 3. Sources of income, including labour, pensions and family transfers	1. Survey 2. Government information 3. Private sector information 4. Non-governmental organization information

Issue 8: Emergency situations	Objective 1: Equal access by older persons to food, shelter and medical care and other services during and after natural disasters and other humanitarian emergencies	1. *Focus groups* 2. *Interviews* 3. *Oral history, including history of natural disasters and historical profiles*	**Instrumental** 1. Availability, scope and coverage of government programmes for older persons in emergency situations 2. Availability, scope and coverage of programmes of humanitarian and disaster relief agencies targeting older persons 3. Involvement of older persons in decision-making emergency situations	1. Government information 2. Non-governmental organization information
			Outcome 1. Percentage of older persons who have received appropriate assistance in an emergency situation 2. Percentage of older persons who were targeted in programmes of humanitarian and disaster relief agencies 3. Participation of older persons in decision-making structures on emergency situations	1. Survey 2. Reports of United Nations organizations (for example, the office of the United Nations High Commissioner for Refugees (UNHCR), the World Food Programme (WFP), the Food and Agriculture Organization of the United Nations (FAO) and the World Health Organization (WHO)
	Objective 2: Enhanced contributions of older persons to the re-establishment and reconstruction of communities and the	1. *Focus groups* 2. *Institutional analysis* 3. *Historical profiles*	**Instrumental** 1. Availability, scope and coverage of government programmes that include contributions of older persons to dealing with emergency situations	1. Government information 2. Non-governmental organization information

			Outcome	
	rebuilding of the social fabric following emergencies		1. Percentage of older persons contributing to rebuilding of society (community) after emergency situations	1. Survey 2. Non-governmental organization information
Priority direction II: Advancing health and well-being into old age				
Issue 1: Health promotion and well-being throughout life	**Objective 1: Reduction of the cumulative effects of factors that increase the risk of disease and consequently potential dependence in older age**	*1. Focus groups* *2. Livelihood analysis, flow diagrams[p]*	**Instrumental** 1. Availability, scope and coverage of gender-specific health/active ageing targets 2. Availability, scope and coverage of programmes promoting healthy and active ageing including reduction of behavioural risk factors and environmental risk factors at all ages but with particular attention to persons over age 50 3 Availability of research projects identifying risk factors at different ages 4. Availability, scope and coverage of programmes empowering older persons in promoting health or preventing and managing diseases	1. Government information 2. Non-governmental organization information 3. Research reports

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[p] Flow diagrams can be used to show causes, effects, relationships and impacts of an event, policy or programme on people's lives.

			Outcome	
			1. Reduction of risk factors (prevalence of smoking, physical inactivity, overweight/obesity, alcohol abuse, etc.)	1. Survey 5. Research reports
	Objective 2: **Development of policies to prevent ill health among older persons**	1. *Focus groups* 2. *Ranking and scoring exercises[q]*	**Instrumental** 1. Availability, scope and coverage of non-communicable disease prevention programmes (including mental health, vision, hearing and dental health), particularly at the primary health care level 2. Adoption of safety standards to prevent injuries at all ages 3. Availability, scope and coverage of age-friendly primary health care facilities 4. Availability, scope and coverage of programmes promoting health-related quality of life and general quality of life	1. Government information 2. Trade union information 3. Millennium Development Goals reports 4. WHO reports 5. Non-governmental organization reports 6. Research reports

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[q] Ranking and scoring exercises can be used to understand people's value-rating of materials or services, their preferences and how decisions are made, for example, about uptake of types of health services.

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			Outcome	
			1. Life expectancy	1. National census
			2. Healthy life expectancy	2. Survey
			3. Changes of life quality	3. National human development report
			3. Disability rate	4. Assessment of quality of life[r]
			4. Chronic disease morbidity	5. Epidemiological surveillance, including non-communicable disease surveillance[s]
				6. WHO statistics: healthy life expectancy (HALE)[t]
	Objective 3: Access to food and adequate nutrition for all older persons	1. *Focus groups* 2. *Daily activity diagrams or diaries[u]* 3. *Livelihood analysis*	**Instrumental** 1. Availability of national dietary goals for all ages 2. Availability, scope and coverage of community-based balanced nutritional programmes that include persons of all ages	1. Government information 2. Non-governmental organization information

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[r] For approaches to assessment of quality of life, please consult the WHO website introducing the World Health Organizations quality of life instruments (http://www.who.int/evidence/assessment-instruments/qol/).

[s] http://www.who.int/ncd_surveillance/infobase/en/.

[t] http://www3.who.int/whosis/hale.

[u] Visual representations illustrating a person's daily activities, or a regular record of food intake over a period of time, can generate information about household and individual food intake and analysis of problems.

			Outcome	
			1. Percentage of households with older persons with sustainable and accessible safe water	1. National census 2. Survey 3. Millennium Development Goals reports if age-disaggregated
			2. Proportion of older persons with sustainable access to an improved water source (refer to Millennium Development Goals indicator 30)	
			3. Percentage of older persons having access to community-based balanced nutritional programmes	
			4. Percentage of older persons below minimum level of dietary energy consumption (refer to Millennium Development Goals indicator 5)	
			5. Prevalence of malnutrition among older persons	
Issue 2: Universal and equal access to health-care services	**Objective 1: Elimination of social and economic inequalities based on age, gender or any other ground, including linguistic barriers, to ensure that older persons have universal and equal access to health care**	1. *Focus groups* 2. *Well-being ranking*[v]	**Instrumental** 1. Availability, scope and coverage of community-based programmes for universal and equal access and utilization of health services with particular focus on discriminated groups of older persons	1. Government information 2. Non-governmental organization information
			2. Availability, scope and coverage of programmes facilitating the use by older persons of health-care services	

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[v] Many methods of well-being ranking have been developed to provide an understanding of how different people perceive well-being and poverty. Exercises can be used to identify the most vulnerable groups and generate a better understanding of the nature of social exclusion and discrimination in a particular environment.

			Outcome	
			1. Percentage of older persons having access to health and rehabilitation resources	1. Survey
			2. Proportion of older population with access to affordable essential drugs (refer to Millennium Development Goals indicator 46)	2. Millennium Development Goals reports if age=disaggregated
			3. Availability of assistive devices and home-based services without age limits	
	Objective 2: Development and strengthening of primary healthcare services to meet the needs of older persons and promote their inclusion in the process	1. *Focus groups* 2. *Ranking and scoring exercises*	**Instrumental** 1. Availability, scope and coverage of community-based programmes for universal and equal access to primary health care services	1. Government information 2. Non-governmental organization information
			Outcome 1. Percentage of older persons having access to primary health-care services	1. Survey

	Objective 3: Development of a continuum of health care to meet the needs of older persons	*1. Focus groups*	**Instrumental** 1. Establishment of guidelines, standards and norms of health care and rehabilitation services for older persons 2. Availability, scope and coverage of community-based programmes establishing and coordinating a full range of health-care services 3. Availability, scope and coverage of health-care facilities with specialized care for older clients[w]	1. Government information 2. Non-governmental organization information
			Outcome 1. List of all health-care services ever used by older persons 2. Subjective satisfaction in respect of the fulfilment of older persons' needs	1. Survey 2. Government information 3. Non-governmental organization information
	Objective 4: Involvement of older persons in the development and strengthening of primary and long-term care services	*1. Focus groups*	**Instrumental** 1. Availability, scope and coverage of programmes that were developed with the involvement of older persons	1. Government information 2. Non-governmental organization information
			Outcome 1. Percentage of older persons having participated in the planning, implementation and evaluation of health-care programmes	1. Survey

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[w] HelpAge International, WHO and United States National Institute on Aging, "Indicators for the Minimum Data Set Project on Ageing: a critical review in sub-Saharan Africa" (WHO/EIP/GPE/01.1), Geneva, 2001.

Issue 3: Older persons and HIV/AIDS	Objective 1: Improvement in the assessment of the impact of HIV/AIDS on the health of older persons, both for those who are infected and for those who are caregivers for infected or surviving family members	1. Focus groups	**Instrumental** 1. Inclusion of data on older persons (both infected and caregivers) in national HIV/AIDS statistics	1. Government information 2. Non-governmental organization information
			Outcome 1. HIV prevalence among older persons 2. Percentage of households with older persons affected by HIV/AIDS[x] 3. Contraceptive prevalence rate among older persons (refer to Millennium Development Goals indicator 19)	1. Survey 2. Millennium Development Goals reports if age-disaggregated
	Objective 2: Provision of adequate information, training in caregiving skills, treatment, medical care and social support to older persons living with HIV/AIDS and their caregivers	1. NGO information including faith-based groups 2. Focus groups	**Instrumental** 1. Availability, scope and coverage of information campaigns on HIV/AIDS targeting older persons 2. Availability, scope and coverage of training programmes in caregiving skills and medical care implemented for older caregivers of HIV/AIDS patients 3. Availability, scope and coverage of programmes providing social support for older caregivers of HIV/AIDS patients	1. Government information 2. Non-governmental organization information

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[x] HelpAge International, WHO and United States National Institute on Aging, "Indicators for the Minimum Data Set Project on Ageing: critical review in sub-Saharan Africa" (WHO/EIP/GPE/01.1), Geneva, 2001.

			Outcome	
			1. Percentage of older persons reporting to as having been informed about various aspects of HIV/AIDS	1. Survey
			2. Percentage of older caregivers of HIV/AIDS patients receiving training in caregiving skills and medical care programmes	
			3. Percentage of older caregivers of HIV/AIDS patients benefiting from social support programmes	
	Objective 3: Enhancement and recognition of the contribution of older persons to development in their role as caregivers for children with chronic diseases, including HIV/AIDS, and as surrogate parents	*1. Focus groups*	**Instrumental**	
			1. Availability, scope and coverage of community-based programmes promoting recognition of the contribution of older persons as caregivers for HIV/AIDS patients	1. Government information
			Outcome	
			1. Percentage of older persons caring for orphaned grandchildren/kin[y]	1. Survey
			2. Percentage of older persons caring for adult children with HIV/AIDS[z]	2. Media analysis
			3. Percentage of older persons caring for grandchildren with HIV/AIDS[aa]	3. Non-governmental organization information including from faith-based groups

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[y] HelpAge International, WHO and the United States National Institute on Aging, "Indicators for the Minimum Data Set Project on Ageing: a critical review in sub-Saharan Africa" (WHO/EIP/GPE/01.1), Geneva, 2001.

[z] Ibid.

[aa] Ibid.

Issue 4: Training of care providers and health professionals	Objective 1: Provision of improved information and training for health professionals and para-professionals on the needs of older persons	1. Focus groups	**Instrumental** 1. Number of primary health care workers (doctors, nurses, physical therapists, district health workers, lab technicians, social workers and others) trained in core competencies of geriatrics 2. Number of geriatricians in geriatric care 3. Number of health care and social care professionals with training in the care of older clients, per capita[bb] 4. Number of informal caregivers trained in basic knowledge regarding the special care of older persons	1. Government information 2. Survey
			Outcome 1. Percentage of older persons having received health care administered by specialized geriatric services 2. Percentage of older persons having received informal care from trained people	1. Survey

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[bb] HelpAge International, WHO and United States National Institute on Aging, "Indicators for the Minimum Data Set Project on Ageing: a critical review in sub-Saharan Africa" (WHO/EIP/GPE/01.1), Geneva, 2001.

Issue 5: Mental health needs of older persons	**Objective 1: Development of comprehensive mental healthcare services ranging from prevention to early intervention, the provision of treatment services and the management of mental health problems in older persons**	1. *Focus groups* 2. *Ranking and scoring exercises* 3. *Daily activity diagrams* 4. *Institutional analysis*	**Instrumental** 1. Availability, scope and coverage of programmes and services designed to develop comprehensive mental healthcare services for older persons at all levels, particularly the community level 2. Availability, scope and coverage of prevention programmes devoted to mental health	1. Government information 2. Non-governmental organization information
			Outcome 1. Age-disaggregated prevalence and incidence of mental health problems 2. Percentage of older persons having received mental healthcare services in the last 12 months	1. Government information 2. Survey 3. WHO statistics
Issue 6: Older persons and disabilities	**Objective 1: Maintenance of maximum functional capacity throughout the life course and promotion of the full participation of older persons with disabilities**	1. *Focus groups* 2. *Daily activity diagrams*	**Instrumental** 1. Availability, scope and coverage of programmes aiming at having participants maintain the highest level of functional capacity throughout the life course 2. Availability, scope and coverage of policies and programmes creating an age-friendly environment 3. Availability, scope and coverage of programmes dealing with disabilities at all ages	1. Government information 2. Non-governmental organization information

			Outcome	
			1. Number of older persons covered by programmes aimed at preventing the decline of functional capacities	1. Survey 2. Research findings
			2. Number of dwelling units adapted to the needs of older persons with disabilities	
Priority direction III: Ensuring enabling and supportive environments				
Issue 1: Housing and the living environment	**Objective 1: Promotion of "ageing in place" in the community with due regard to individual preferences and affordable housing options for older persons**	*1. Focus groups* *2. Seminars/conferences and consultation forums*	**Instrumental** 1. Availability, scope and coverage of programmes promoting age-integrated community	1. Government information 2. Non-governmental organization information 3. Survey 4. Private sector information
			Outcome 1. Percentage of older persons reporting on their housing and living conditions as age-adequate 2. Percentage of households with older persons having a toilet, bathing facilities, sewage disposal, solid waste disposal, electric lighting, improved sanitation and safe water	1. National census 2. Survey 3. Millennium Development Goals reports if age-disaggregated

	Objective 2: Improvement in housing and environmental design to promote independent living by taking into account the needs of older persons, in particular those with disabilities	*1. Focus groups* *2. Seminars/conferences and consultation forums*	**Instrumental** 1. Availability, scope and coverage of programmes promoting independent living, mobility and accessibility	1. Government information 2. Non-governmental organization information
			Outcome 1. Percentage of older persons living on their own with needs requiring and receiving support 2. Percentage of older persons with needs requiring but not receiving support 3. Percentage of older persons receiving mobile/extramural services	1. Survey
	Objective 3: Improved availability of accessible and affordable transportation for older persons	*1. Focus groups* *2. Seminars/conferences and consultation forums*	**Instrumental** 1. Availability, scope and coverage of programmes promoting availability of barrier-free and appropriate public and private transportation systems	1. Government information
			Outcome 1. Percentage of older persons expressing their satisfaction with the transportation systems	1. Survey
Issue 2: Care and support for caregivers	**Objective 1: Provision of a continuum of care and services for older persons from various sources and support for caregivers**	*1. Focus groups* *2. Seminars/conferences and consultation forums*	**Instrumental** 1. Availability, scope and coverage of programmes facilitating family and community care for older persons	1. Government information 2. Non-governmental organization information 3. Private sector information

			Outcome	
			1. Percentage of older persons receiving family, community and government support services	1. Survey
			2. Percentage of family and community caregivers receiving government support services	
			3. Percentage of caregivers expressing satisfaction with support received in their role as caregivers	
	Objective 2: Support for the caregiving role of older persons, particularly older women	*1. Focus groups* *2. Seminars/conferences and consultation forums*	**Instrumental** 1. Availability, scope and coverage of support programmes for older caregivers	1. Government information 2. Non-governmental organization information
			Outcome 1. Percentage of older persons providing care	1. Survey

Issue 3: Neglect, abuse and violence	Objective 1: Elimination of all forms of neglect, abuse and violence against older persons	1. Focus groups	**Instrumental**	1. Government information
			1. Availability, scope and coverage of legislation to combat elder neglect, abuse and violence	2. Non-governmental organization information
			2. Availability, scope and coverage of programmes combating neglect, abuse and violence against older persons, including programmes for awareness-building among the general public, and training of health and social services professionals regarding characteristics of neglect, abuse and violence against older persons	3. Police, hospital and social services records
			3. Availability, scope and coverage of programmes facilitating report of neglect, abuse and violence against older persons	
			4. Development of tools detecting neglect, abuse and violence against older persons	
			Outcome	1. Survey
			1. Percentage of older victims reporting neglect and abuse	2. Non-governmental organization information
			2. Incidences of reports by older persons of neglect, abuse and violence	3. Police, social services and hospital records
			3. Incidences of reports by others on neglect, abuse and violence against older persons	

			Instrumental	
	Objective 2: Creation of support services to address elder abuse	*1. Focus groups* *2. Seminars/conferences and consultation forums*	**Instrumental** 1. Availability, scope and coverage of programmes providing support services to older victims of neglect, abuse and violence	1. Government information 2. Non-governmental organization information
			Outcome 1. Percentage of older persons having sought services for victims of abuse 2. Percentage of older persons having sought services for themselves as victims of abuse	1. Survey 2. Non-governmental organization information
Issue 4: Images of ageing	**Objective 1: Enhancement of public recognition of the authority, wisdom, productivity and other important contributions of older persons**	*1. Advocacy and self-help groups, including publications by older persons themselves* *2. Focus groups* *3. Seminars/conferences and consultation forums* *4. Publications by older persons* *5. Media watch programme*	**Instrumental** 1. Availability, scope and coverage of public awareness campaigns on ageing 2. Availability, scope and coverage of programmes in the media to foster and promote positive images of ageing and older persons, starting from primary schools	1. Government information 2. Non-governmental organization information 3. Media analysis

			Outcome	
			1. Percentage of younger persons having positive attitudes towards ageing and older persons	1. Survey
			2. Percentage of older persons having a positive perception of themselves	
			3. Percentage of older persons indicating having perceived a positive attitude of younger persons towards older persons[cc]	

[cc] HelpAge International, WHO and United States National Institute on Aging, "Indicators for the Minimum Data Set Project on Ageing: a critical review in sub-Saharan Africa" (WHO/EIP/GPE/01.1), Geneva, 2001.

Annex II

Participatory methods of data collection[a]

Having addressed the key components of the bottom-up participatory approach, we will focus now on the gathering of information through the various participatory methods of data collection.

Participatory data collection, or research, is generally associated with qualitative methods of information-gathering. Qualitative methods, in comparison with quantitative ones, tend to be more concerned with words than numbers. Qualitative methods are therefore based on data collection and analysis that focus on interpreting the meaning of social phenomena as derived from the views of the participants in a particular social reality (see table).

Participatory approaches encompass a variety of data-collection methods: (a) participatory listening and observation; (b) visual tools such as maps, daily activity diagrams, institutional diagrams and Venn diagrams, flow diagrams and livelihood analysis; (c) semi-structured interviews; and (d) focus group discussions. Among the participatory methods of evaluation, semi-structured interviews and focus groups are the instruments most often used to gather the views of participants on certain topics and issues. Participatory listening and observation and use of various visual tools would normally be undertaken at the initial stages of the evaluation process, as they often provide the basis for the design of in-depth questionnaires for semi-structured interviews and the conduct of focus groups.

While quantitative questionnaires are structured in terms of the variety of answers that a respondent chooses from, qualitative surveys and focus groups allow for more nuanced, semi-structured and open-ended responses. The objective of qualitative designs is to capture values, attitudes and preferences of participants so as to penetrate to the "how" and the "why" underlying a phenomenon. Since data resulting from qualitative research approaches do not lend themselves to numerical coding, evaluation of qualitative findings is more complex compared with that of quantitative research results. Tables, rows of data, and correlations are therefore not generated by qualitative research. Information has to be grouped under topical headings and its diversity is subject to generalization.

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[a] Excerpts from Robert Venne, Social Affairs Officer, Programme on Ageing, Division for Social Policy and Development, Department of Economic and Social Affairs, "The framework for monitoring, review and appraisal of the Madrid International Plan of Action Ageing". Full text available from http://www.un.org/esa/socdev/ageing/documents/MIPAA_frmwrk.pdft.

	Conventional	Participatory
Participatory monitoring, review and appraisal approaches differ from conventional monitoring, review and appraisal in several important ways[b]		
Who plans and manages the process	Senior managers or outside experts	Local people, project staff, managers and other stakeholders, often helped by a facilitator
Role of "primary stakeholders" (intended beneficiaries)	Provide information only	Design and adapt the methodology, collect and analyse data, share findings and link them to action
How success is measured	Externally defined, mainly quantitative indicators	Internally defined indicators, including more qualitative judgements
Approach	Predetermined	Adaptive

[b] Irene Guijt and John Gaventa, "Participatory monitoring, review and appraisal: learning from change", *Institute of Development Studies Policy Briefing* (University of Sussex, Brighton, United Kingdom), issue 12 (November 1998), available from http://www.ids.ac.uk/ids/bookshop/briefs/brief12.html.

Many research designs are based on a combination of quantitative and qualitative methods, so as to capture the full extent of a specific social reality. Data collated by quantitative research methods are rarely sufficient to provide a full explanation of an observable social issue. Based on their experience, researchers have realized the importance of integrating quantitative analysis with qualitative methods while trying to provide policymakers with a comprehensive portrait of the socio-economic situation of various social groups. Such an integrative approach would also be of use in reviewing and appraising the implementation of the Madrid International Plan of Action on Ageing, 2002.

A.   Participatory listening and observation

Listening and observation skills are the basis for attaining a comprehensive understanding of the situation of older persons in a particular community and for viewing social reality through the eyes of older persons. These skills are of great importance for any

participatory research design and should be applied for the duration of any project. Participatory listening and observation assumes that "the participant observer/ethnographer immerses him- or herself in a group for an extended period of time, observing behaviour, listening to what is said in conversations both between others and with the fieldworkers, and asking questions".[c] It is therefore "a major research strategy which aims to gain a close and intimate familiarity with a given area of study through intensive involvement with people in their natural environment."[d]

A bottom-up participatory research project in a particular community may be started by first familiarizing oneself with the environment. This is usually done in the course of a guided walk, or transect walk, which often involves an individual or a group of people who will guide the researcher(s) through a community with a view to pointing out and talking about things of local importance. The organizational set-up of a community, the quality of housing and the availability of social services for older persons can be studied on such a walk. As a result, maps could be drawn reflecting the crucial local institutions that are relevant to older persons.

With regard to participatory listening it is important for the listener to ensure that his/her appearance and manner are appropriate to the research environment and acceptable to the older persons themselves. Every person should be encouraged to speak, and interest in what is said should be demonstrated at all times. Non-verbal communication such as body language should be given due attention as well. The researcher(s) should seek clarification, if needed, so as to understand correctly what an individual tries to express. Expressive or verbal judgements of what older persons have said should be avoided.

Participatory observation complements the listening component. People or events should be observed at different times of the day and on different days of the week to ensure that a balanced impression has been gained. Observations and conversations should be written down in field notes as soon as possible, since human memory can be deceptive. Particular attention should be given to power relationships among older persons, and to what roles various individuals play in the community, what activities and tasks are performed at what frequency, and what issues engender excitement, irritation, agreement or disagreement among older persons.

Participatory observation and listening form the basis of further and more complex inquiries. What has been observed and heard is often the starting point for semi-structured interviews and focus group discussions during which observations can be checked and clarified in interview questions to determine whether the researcher has accurately interpreted what he/she has seen and heard.

B.   Visual tools

"Visual tools – such as maps, diagrams, seasonal calendars and daily activity charts – are important elements of participatory research. They enable older people to explore

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[c] Alan Bryman, *Social Research Methods,* 2nd ed. (New York, Oxford University Press, 2004), p. 292.
[d] *A Dictionary of Sociology* (Oxford, United Kingdom, Oxford University Press, 1998), p. 482.

complex relationships and link issues in ways not possible through verbal methods alone, generating a deeper analysis of local issues."[e]

A common participatory approach in visualizing entails drawing figures, maps and diagrams and/or using tools such as stones, sticks or other objects to demonstrate the layout of a particular community. One of the advantages of using visual tools is that illiterate members of a community will also have the opportunity to participate in the evaluation exercises, so that a balanced representation of older persons within the community may be ensured. This means that older persons from various socio-economic strata and from different geographical areas of the community should have the opportunity to participate. Age and sex distributions should be accurately represented as well.

Maps can be informative tools showing characteristics of a location where the evaluation of the Madrid Plan of Action is being undertaken. HelpAge International distinguishes between resource maps and mobility maps. The former show where (older) people live as well as the general infrastructure of a community, while the latter outline movements within a community. In addition to these two tools, there exist what are known as body maps. By depicting the health status of older persons on a large map of the human body, these can be an important source of information about the health status of those persons. However, body mapping should be approached with the utmost sensitivity. Although there would be a general introduction to the mapping exercise provided by the researcher(s), the mapping itself should be conducted by people living in the location of the evaluation and the evaluation team should not interfere during the mapping activity. Since different groups of older persons would be asked to participate in the mapping exercise, it might be expected that different maps would highlight different perceptions within a community. The mapping exercise should also include an inquiry about historical changes of a community which could be reflected in mapping as well.

To understand how members of a community spend their time, daily activity diagrams are helpful. Daily patterns of work and other activities of older persons could be recorded with the assistance of such a method by using little stones that might symbolize time spent on particular activities. Of special interest would be gender differences with regard to time use as well as how much older persons contribute to household and community activities. In addition, changes of time use can be demonstrated by inviting older persons to reflect on their whole lives and on how much their daily activities have varied over the course of time. Trend lines would be traced and historical profiles created. Caution is in order, however, when asking participants about their (extended) past, since human memory can be very deceptive.

Similarly, institutional diagrams would reveal the presence of key institutions and individuals within the community. By drawing rectangles of different sizes, older persons would demonstrate the influence and power possessed by certain local institutions and individuals. Connections between institutional power and individual power will be of interest to the researcher(s) as well. In this regard, Venn diagrams are used to explain changes in relationships among institutions, groups and individuals (see figure A.1). With

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[e] HelpAge International, "Participatory research with older people: a sourcebook", (London, 2002), p. 53.

regard to Venn diagrams, the same procedure involving rectangles of varying sizes should be utilized. The rectangles would represent different institutions (with the larger rectangles representing institutions that play a more important role in the community). The distances among the rectangles would represent the level of contact among various institutions. Overlapping of rectangles would symbolize the extent to which the various parts of different institutions collaborate on particular issues. The local police force and the local government might constitute one example of two overlapping institutions. Since questions regarding power within a community are often sensitive, it may be prudent to engage in such exercises after a period of trust-building has been passed through.
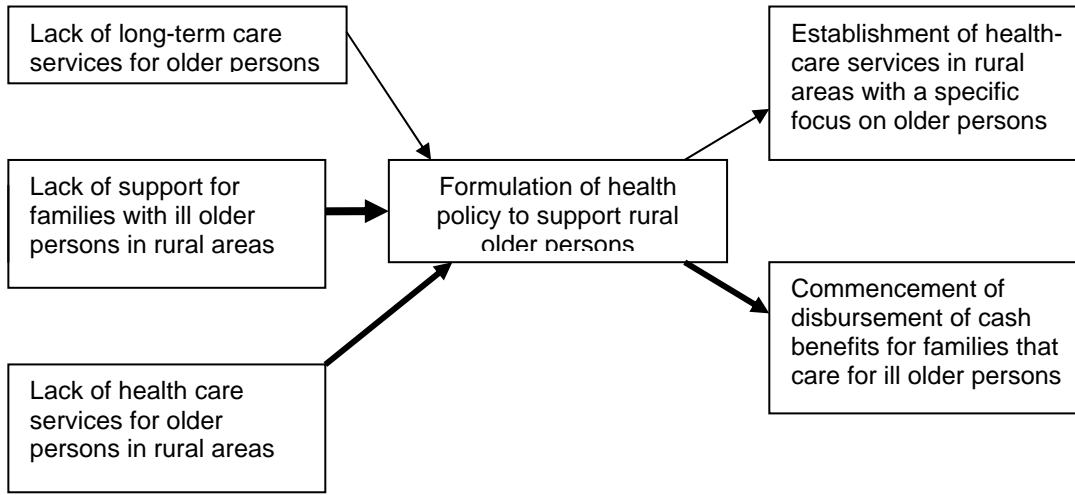
Figure A.1
Four element Venn diagram
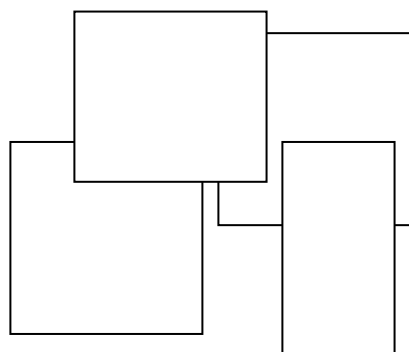
"Flow diagrams show causes, effects, and relationships. For example, a flow diagram could show the relationship between old age, livelihood and security. They can also show the impacts of an event, policy or programme on people's lives, for example, the impact of new health policy on older persons' well-being."[f] Events (problems, issues), their causes and effects can be visualized by lines of varying thickness expressing their significance (see figure A.2). They would also be used to identify the extent to which issues are interrelated. The opinions of participants on effectiveness of policies can be measured by flow diagrams. Similarly, effectiveness of policies affecting the lives of older persons can be ranked and scored on a matrix to establish which policies are viewed as successful or as failing in respect of delivering what was promised to older persons. In that sense, flow diagrams and ranking and scoring matrices would be promising tools for monitoring of existing or future policies and programmes specifically geared towards older persons.

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[f] Ibid., p. 57.

Figure A.2
Example of a flow diagram

Livelihood analysis aims at extracting information about people's income (cash and in kind) and expenditure (see figure A.3). This can also be viewed as a participatory economic household analysis, since older persons would be asked to list the number of household members residing where they live. Participants would draw three circles: the first one would be divided according to sources of income; the second, according to the kinds of expenditures of resources; and the third, according to which household members spend resources and how much they spend.

Figure A.3

Example of a livelihood analysis
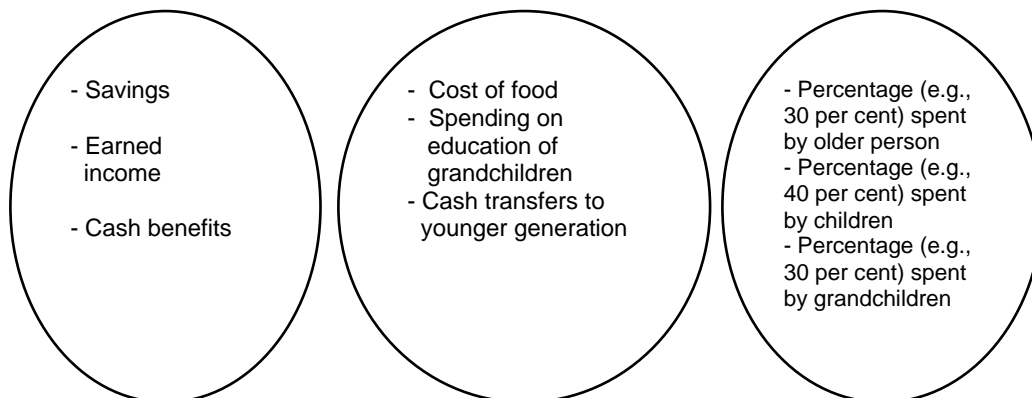
The final maps, daily activity diagrams, institutional diagrams and Venn diagrams, flow diagrams and outcome of the livelihood analysis that have been created by various groups and individuals should be copied or photographed by the evaluation team. The results will be valuable in influencing the design of semi-structured interviews and in

conducting focus group discussions, since a rather diverse body of base information will have been gathered by visual tools. More focused in-depth data collection can follow once the listener has attained a more nuanced understanding of a particular community and its older persons.

C.   Semi-structured interviews

"Semi-structured interviews – conversations based on a set of guideline questions – constitute a key technique in participatory research and a powerful means of learning about the views of older people."[g] Although all the guideline questions will be asked during an interview – albeit with the possibility of varying the order – new questions may arise during each interview. Therefore, the process is *flexible* compared with that of rigidly structured interviews. This kind of flexibility will allow the interviewee to describe events, observations and issues in very personal terms and he/she will thus be less restricted with respect to responding to questions in his/her own words. The set of questions, however, will ensure comparability of data when the interviews are analysed.

The guideline questions of the interview should be organized according to topical areas of inquiry which should succeed each other in a logical fashion. The language used should be comprehensible and jargon-free. It is obvious that the interviewer has to be able to speak the language of the community in which he/she will conduct semi-structured interviews. An ability to (a) ask short, simple and easy questions, (b) listen attentively, (c) steer the interview sensitively in the desired direction and (d) remember what was said earlier and interpret correctly the respondent's statements during the interview is of paramount importance for the interviewer. Questions that would lead the respondent in a particular direction (Do you agree that….?) should be avoided. At the outset of an interview, it is important to select appropriate participants, to explain why the researcher(s) are conducting this interview, to record the interviewee's name, age, and gender and, most importantly, to determine whether the individual belongs to certain community institutions, how large the residential household is and how the interviewee locates him-/herself within the community. Being outfitted with good-quality recording equipment and making sure that the interview location is quiet and private are practical considerations that are important for successful interviewing.

Eight types of questions in qualitative interviewing could be identified: introducing (Please tell me about …!), follow-up (What do you mean by that?), probing (Could you say some more about that?), specifying (What did you do then?), direct (Are you happy with…?), indirect (What do most people here think about…?), structuring (I would like to move on to a different topic!), and interpreting (Do you mean that…?) as well as silence (a pause transmitting a signal to the respondent to reflect or amplify his/her answer).[h] These types of questions suggest that the interviewer(s) should be engaged without being invasive. Besides obtaining answers to the guideline questions, another objective of the semi-structured interview is to acquire a better picture of the values, beliefs, behaviour,

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[g] Ibid., p. 51.
[h] Steinar Kvale, *InterViews: An Introduction to Qualitative Research Interviewing* (Thousand Oaks, California, Sage Publications, 1996).

formal and informal roles, relationships, emotions, stories, encounters, and places and locales of the interviewee.[i]

Notes should be taken during an interview on the non-verbal language of the interviewee as well as on certain specificities (the way responses were phrased) that were notable about the interview. Usually, it is not necessary to transcribe the whole interview from the recording. With a view to saving time and energy, it is often sufficient to transcribe the crucial parts that have been the most illuminating for the evaluation.

In respect of ensuring the validity of data, *representativity* is a major goal in evaluation designs. Representativity is achieved by making certain that a sample exhibits the same key characteristics as does the general population of older persons, that is to say, the same gender and age distributions. In addition, quality of life and the general situation of older persons in *various* communities have to be evaluated to control for differences that would be expected, for example, in rural areas compared with urban centres, or variations in regions of a country.

Probability sampling of potential interviewees entails either (a) random samples of older persons of a particular community or (b) stratified random samples in which a population of older persons has already been divided into subgroups, or strata, for example, older persons in need of care, or ill older persons, etc. In addition, there are *snowball sampling*, in which the researcher is introduced by one interviewee to the next, and *theoretical sampling,* which starts with a particular hypothesis to be tested in the interview survey; as soon as the researcher observes repetitions in the answers of interviewees, he or she becomes aware that "theoretical saturation" has been reached and no new interviews are necessary. Both snowball and theoretical sampling cannot claim statistical representativity and thus have their limitations.

D.   Focus group discussions

Focus group discussions are "a research strategy which involves intensive discussion and interviewing of small groups of people, on a given 'focus' or issue, usually on a number of occasions over a period of time."[j] The difference between individual semi-structured interviews and focus group discussions lies in the fact that the latter offers an opportunity to follow the group dynamic that evolves during the discussion. How interviewees react to each other's responses and form their opinion, often as a reaction to what other participants have expressed, is of core interest during a focus group discussion. Since participants may argue about certain aspects of an issue that is being discussed during a focus group, the reactions expressed and opinions voiced may be more realistic compared with those that emerge in an individual interview. In addition, views of participants can be challenged by others more profoundly than in a semi-structured interview. Thus, focus group discussions ideally complement semi-structured individual interviews.

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[i] See Bryman, op. cit., p. 328.
[j] *A Dictionary of Sociology* (Oxford, United Kingdom, Oxford University Press, 1998), p. 233.

The moderator who facilitates the focus group should try not to be too intrusive and should rely on a rather unstructured setting for the discussions in which to elicit the opinions, views and perspectives of the participants. He/she should have a rather small number of guiding questions through which to stimulate the discussion and should intervene minimally. Only when the discussion clearly veers off track, or when there are unproductive silences, should the moderator become involved. The moderator should record the discussions on audio equipment and make notes on the non-verbal behaviour of the participants. Naturally, of principal interest would be the range of opinions expressed, the identity of the opinion leaders and *how* the participants express their views during a focus group discussion. As with semi-structured interviewing, it is not necessary to transcribe the entire discussion: the focus should be on documenting the most important parts.

Evaluation of living conditions of older persons, for methodological reasons, should be based on numerous focus group discussions.[k] There is no clear guide with respect to determining how many discussions on a particular topic are sufficient. If a starting hypothesis exists (that is to say, the income of older persons has decreased owing to pension scheme reforms), the principle of "theoretical saturation" could be applied here as well: if the evaluation team hears similar or identical responses repeatedly in discussions of focus groups, it will conclude that there is no further need to continue with more discussions.

The size of each focus group should range between 6 and 10 participants so as to allow every speaker enough time to express him-/herself. The participants should be selected randomly on the basis of a variety of characteristics, older age (60 years or over) being the most obvious, including educational attainment, income and occupation, marital status and sex. Since participatory research on views of older persons will be organized within a community or locale, it is evident that many of the participants in focus group discussions will know each other in advance.

It is recommended that the moderator start the discussion in the focus group by thanking the participants for taking part in the discussion, and by explaining the purpose and design of the evaluation, and the reasons for recording the session. In addition, anonymity during evaluation should be assured and certain conventions of focus group discussions (for example, the giving of the floor to only one speaker at a time) should be outlined. Forms could be filled out that would provide the evaluation team with general socio-economic data (educational attainment, occupation) and demographic data (age, sex) on the participants. Thereafter, participants would introduce themselves to the group, bearing name tags. A free flow of discussion topics should be facilitated by the moderator using a set of guided questions. Every participant should have the opportunity to express uninterruptedly his/her opinion and quieter participants should be encouraged to speak as well. As in the semi-structured interviews, the language used by the moderator should be clear and jargon-free. In addition, the guided questions should be relevant to the group assembled. Thoughtful questions will engender a lively debate and eliminate the possibility

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[k] Bryman, for instance, evaluated seven different research designs for the focus groups he studied and noted that the number of focus group discussions held had ranged from 8 to 52. (op. cit., p. 350).

of replies like yes and no from the participants. A successful focus group discussion will allow the moderator to see the issues debated through the eyes of the participants and to attain a much deeper understanding of issues affecting the lives of older persons.

Analysis of qualitative data

Since the results of participatory research are rather unstructured in nature, analysis of qualitative data is not a simple or straightforward process. The recorded outcomes of methods of participatory evaluation as outlined above have to be categorized in order to generate meaning.

The process of coding, through which data are categorized according to topical considerations, is commonly used to make sense of qualitative research findings. Coding breaks an interview transcript or field notes, for example, down into their components. These components are organized according to topics of inquiry that allow the evaluation team to "examine, compare, conceptualize and categorize data"[1]. With regard to analysing qualitative data on older persons, categories could encompass, for instance, health issues, care provided by relatives or institutions, income security in old age, and the household situation in which older persons live. It is helpful to begin the coding process as early as possible, that is to say, after interviews and focus group discussions have been transcribed. Early coding would permit the research team to categorize data and to perceive the social reality of older persons through those categories. Coding would allow patterns to emerge from the field notes and other collected material. Established codes should be reviewed to ensure that changes in coding can be made in cases where it seems prudent to do so. Coding is therefore a highly flexible approach to making sense of collected qualitative data.

Various codified categories could be connected. The evaluation team should explore possible linkages and the ways in which categories could be related to each other. Coding, however, is not a substitute for analysis – it is only a mechanism through which to categorize data. The findings have still to be interpreted.

Content analysis is the coding of documents and transcripts for the purpose of obtaining counts of words and/or phrases for purposes of statistical analysis. The evaluation team creates a dictionary that clusters words and phrases into conceptual categories for purposes of counting. The recurrence of often-used words and phrases can be utilized to inform the team of important topics – those mentioned repeatedly by older persons during interviews and focus group discussions.

Narrative analysis, another method of analysing qualitative research data, attempts to analyse a story told chronologically, with a focus on how elements of the story are sequenced and why some elements are evaluated differently from others. Narrative analysis is seen as an alternative to semi-structured interviews, allowing for the

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[1] Anselm Strauss and Juliet M. Corbin, *Basics of Qualitative Research: Grounded Theory Procedures and Techniques* (Newbury Park, California, Sage Publications, 1990), p. 61.

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uninterrupted flow of information. Some proponents of narrative analysis see it as a truly participatory and empowering research methodology, insofar as it gives respondents the freedom to articulate their own viewpoints without any structure restricting their expressions on a particular subject.

Four models of narrative analysis can be distinguished: *thematic analysis* (emphasizing *what* is said compared with *how* it is said), *structural analysis* (emphasizing the way a story is told), *interactional analysis* (emphasizing the dialogue) and *performative analysis* (emphasizing performance including gestures used).[m] Problems with narrative analysis stem from the fact that the memory can deceive the narrator regarding the accuracy of a story told. Some researchers call for the introduction of questions at the end of a story to clarify any outstanding issues. Another criticism of narrative analysis is that stories told are treated uncritically and are only recorded without any accompanying analysis.

Qualitative data analysis is not governed by the same strict rules as govern quantitative analysis. The nature of qualitative data contributes to the evolving nature of analysis and to a less structured approach. Coding, content analysis and narrative analysis seem to be rather tentative approaches to interpreting collected data and to extracting meaning from the material assembled. Nevertheless, qualitative evaluation should be able to portray a social reality with a greater degree of complexity than that achievable with quantitative methods. Participatory research is capable of generating more nuanced perspectives on the lives of older persons. Such an approach, however, should be complemented and buttressed by quantitative data.

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[m] See Catherine Kohler Riessman, *"Narrative analysis"* in *The Sage Encyclopedia of Social Science Research Methods,* 3 vols., Michael S. Lewis-Beck, Alan E. Bryman and Futing (Tim) Liao, eds. (Thousand Oaks, California, Sage Publications, 2004).