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of Action on Ageing (MIPAA)

9-11 October 2007  
Macao, China

**Country Report**

*Sri Lanka\**

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**Sri Lanka Country Report**

**High-level Meeting on the Regional Review of the Implementation of  
the Madrid International Plan of Action on Ageing (MIPAA)  
Macao, China 9-11 October 2007**

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## **Introduction**

In the south Asian context Sri Lanka's demographic experience has been unique. The country is well advanced in its demographic and epidemiological transitions. It is the first country in South Asia to reach replacement level fertility and achieve low levels of infant mortality and high life expectancy. These positive demographic trends have brought about changes in the population age structure where the elderly population over 60 years is growing faster than the child population under five years of age.

During the past four decades there has been a sharp increase in the relative and absolute size of the elderly population. (In 1946, there were 360,000 Sri Lankans over 60 years of age constituting 5.4 percent of the population. By 2001, over 10 percent of the total population or nearly 2 .0 million were over 60 years of age.) By 2031 Sri Lanka is expected to have about 22 percent of its population over 60 years. With rising proportion of the elderly population, the dependency burden on the working age population has also been rising.

The aged dependency ratio, (the number of elderly over 60 years of age per every 100 persons aged 15-59 years) has been increasing from 9 persons in 1946 to 15 in 2001 and is expected to rise further to 36 in 2031. Undoubtedly, the significant decline in mortality and the resulting improved survival chances of older people at advanced ages will continue to contribute to the rise in dependency ratios beyond the first half of this century.

Home care for the elderly is likely to remain as an important source of care in Sri Lanka in the coming decades, despite the ongoing demographic shifts. However, these demographic changes will give rise to increased strains within the existing system of home care. These include the breakdown of extended families, the formation of nuclear families, the decrease number of children per family, the increase labour force participation of women outside the home, and the disintegrative influences related to migration, divorce or separation as well as the ongoing civil war in the country. These

may manifest in the form of tensions within the family such as domestic violence, alcoholism, and elderly abuse.

Significant intergenerational differences in lifestyle and emotional needs are likely to enhance the generational divide in the future. The notable number of elderly couples or single elders living alone may partly reflect this tendency. With expanded duration of life span, the elderly will need specialized quality services in health, housing, transport and communication.

### **Older persons and Development**

The population ageing in Sri Lanka will have a number of economic and social development issues. An important issue is the implication for retirement benefits. Although the country has several social-security systems such as the pension scheme for public servants and their widows and orphans employees Provident Fund (EPF), the Employees Trust Fund(ETF) and private pension schemes, they do not adequately cover the expenditure needs of the elderly at retirement. These retirement benefits cover only about one half of the working population as most employment is in the informal sector.

The already inadequate coverage of pensions under social-security programmes is further aggravated by the fact that these persons would be required to have the means for an extended period of living. According to projections of population, life expectancy is expected to continue to increase in the future. These added years of life will have to be financed from savings made during the working years. Thus it points to the need to revise the employment life span of Sri Lankans. An extension of the retirement age to about 65 years would place less strain on current contributions. It would also increase retirement benefits and reduce the period during which retirement benefits would be needed to support retirees.

The changing demographic scenario also provides opportunities for the country to improve the quality of primary and secondary education, and to build upon basic literacy and school participation rates. Such qualitative improvements are critically essential to transform the labour force into a more productive one for the future.

The lesser strain on the public finances, owing to the smaller increases in school-going children in the next decade, provides the financial capacity to effect educational

improvements. Similarly, the smaller number of births would give the opportunity to the primary health care services, particularly maternal and child health care services to achieve low infant and maternal mortality rates comparable to the developed countries of the world.

The current information on educational attainment of the elderly aged over 65 years show that males are better educated than the females although at younger ages there are no significant differences. As regards economic participation, it is evident at older ages males continue to be economically active with nearly half the number remaining in the labour force in the ages 60 -69 years.

### **Advancing Health and Well-being into Old Age**

Demographic ageing presents challenges to the health care system, both through the mechanism of population ageing as well as through individual ageing. Older people generally need more health care than younger people do, and at older ages the pattern of illness itself differs from that at younger ages, with a greater prevalence of disabling, chronic and degenerative diseases.

Determination of health status of the elderly is vital to assess needs for health care, personal assistance, designing interventions and programs for especially vulnerable groups using resources to satisfy unmet needs. The risk of death and of survival with limitations present challenges to society and individuals.

In Sri Lanka, as in many other developing countries, the main priority for health programmes has been maternal and child health. It is only recently that the growing elderly population has been recognized as a health issue, calling for an appropriate programme which takes into account the health care, psychological and social needs of this age group.

In the prevailing allopathic system, elders have access to health care at Out Patient Departments (OPD) of hospitals and from General Practitioners (GP). Ayurveda and traditional medicine are two other systems of medicine used by them.

Specialist clinics in Out Patient Department (OPD) and wards in Base, Provincial and Teaching Hospitals to cater to health problem needing specialized ambulatory care and admission.

In 1998 the Ministry of Health appointed a Director (Youth Elderly, Disabled & Displaced) for planning, implementing monitoring, and coordinating delivery of health care services to the elders. In the year 2000, a pilot project in active ageing was started in fifty Medical Officer of Health (MOH) areas and was community driven to ensure sustainability.

The strategies adopted include:

- improving the care-giving capacity of the family through trained health volunteers;
- strengthening the inter-sectoral collaboration within each MOH area;
- encouraging and improving community participation,
- conducting research and disseminating results,
- providing appropriate education and training,
- creating awareness on active aging among all members of the community using identified advocacy target groups such as public sector officials, school children, school teachers, formal and informal leaders in the community, elders and their family.

One of the eight Goals of the National Population and Reproductive Health Policy formulated by the Government in 1998 was on elderly care. The policy presented the following strategies for the care of the elderly:

- (a) Encourage the private sector, NGOs, CBOs and the local community to provide community care and services to the elderly,
- (b) Initiate social security schemes for the elderly not already covered by EPF, ETF, etc.
- (c) Provide incentives to families to care for the elderly at home
- (d) Provide appropriate training for out of school youth awaiting employment to enable them to take care of the elderly at home

(e) Provide special care units for the elderly in the State Health Care System

(f) Establish a cadre of Community Health Nurses with responsibility for the care of the elderly.

### **Ensuring Supportive and Enabling Environment**

The concern, care, dignity and respect for elderly is deep rooted in the Sri Lankan culture and its socioeconomic and welfare policies. As far back as 1982, a National Committee of Ageing was formed at the Department of Social Services. In 1992 the National Committee was reconstituted. A National Policy was formulated along with the Plan of Action. However, as it was felt that legislation and an administrative mechanism for implementing policies were needed, the Protection of the Rights of Senior Citizens Act (Act No. 9 of 2000) was enacted in the year 2000 to establish the following:

- a) Creation of a statutory National Council for Elders and Secretariat
- b) Maintenance Board for determination of claims from elders
- c) A National Fund for Elders and
- d) Protection of Rights of Elders.

Under this Act, the National Council of Elders was established in June 2002. The National Council has registered recognized NGO's who work for senior citizens, and established a network of 8000 Village Level Elders Committees throughout the country.

Furthermore, the wider use of Elders Identity Cards was promoted through facilitating the procedures for its issue. A National Charter and National Policy for Senior Citizens has been adopted by the Cabinet of Ministers in 2006.

The National Policy seeks to assure senior citizens that their concerns are national concerns and they will not live unprotected, ignored or marginalized. The goal of the National Policy is the well being of the senior citizen. It aims to strengthen their legitimate place in society and help senior citizens to live the last phase of their life with purpose, dignity and peace.

The government has introduced three contributory social security pension schemes for farmers, fishermen and the self-employed in addition to the already existing pension scheme and the Employees provident Fund. All the three schemes are voluntary and contributory schemes with contributions from the Government. The benefits under the schemes are in the form of a monthly pension for life after reaching the age of 60. Various financial and insurance institutions operate social security schemes on voluntary contributory basis. All the schemes are based on a regular saving plan over a given period of time.

## **Special Programmes Implemented for the Elderly**

### **1. Protection and Promotion of Elders Rights and strengthening of Welfare Services of Elders**

#### **▪ Village Level Committees of Elders**

Arrangements have been made to establish elders committees at village level, Protections of their rights, encouraging the implementation of services for their welfare and getting their participation for the development activities of the area, are among the objectives of these committees.

The secretariat provides an initial capital of Rs. 5000/- (US\$ 50) to active village level committees to create a fund of their own. The committees should organize fund raising programme to strengthen the fund. Up to now 8000 committees have been set up island wide. The village level officers have been instructed to assist elders in establishing such committees. At present there are very active committees. With the support of donors & village level officers they organize medical clinics, field trips, religious programmes for the members. Some committees were able to provide micro credit facilities for their members to engage in income generation activities.

#### **▪ Divisional Level Elders Committees**

In order to expand and make the services of village level committees more meaningful, elders committees are being set up at divisional level, combining all village level elders committees.



To encourage divisional level committees, the National Secretariat for Elders provides an allowance Rs. 7,500/ (US\$ 75) for each committee, after monitoring their activities.

- **Day Centres for Elders**

Day centres for the elders, is a place where elders over the age of 60 years could be engaged in productive activities during day time, with others of the similar age group. Through these centres the elders will get the opportunities to be actively engaged in exchanging views, self employment, lectures and discussions on various subjects, religious activities, exercises and recreational activities. All over the country currently about 200 day centres are in operation & the secretariat has instructed all Divisional level officers to take action to establish day centres in villages for those who need such services. The elders who gather at these centres are encouraged to do self-employment projects & the secretariat provides financial assistance to purchase raw materials & equipment required for such projects. The aim of self-employment project is to encourage elders to earn an income.

The National Secretariat provides an initial capital of Rs. 25,000 (US\$ 250) to start a day centre. Some day centres are run by young volunteers & some are run by the elders themselves.

- **Self-income Generation Programme for members of the Elders Committees**

With the aim of upliftment of the living conditions of elders the National Council for Elders has taken steps to provide financial assistance for self-employment at village level. This scheme was introduced last year and the Secretariat was able to provide grants for 152 projects. Maximum grant is Rs.5000 (US\$ 50). The elders between the ages of 60-65 years are eligible for this assistance.

## **2. Strengthening of Welfare Services**

- **Homes for the Aged**

Homes for the aged are run both by the state & the NGO sector. All over the country there are 200 such homes catering to the needs of 6000 destitute elders. The government pays Rs. 300/- per inmate per month as a maintenance grant.

Financial assistance is also provided for repairing of buildings, construction of new buildings & purchasing of equipment.

- **Monthly Public Assistance Programme**

Public assistance allowances are paid to all vulnerable categories including destitute elders. The amount paid vary from Rs. 100 – 300 (US\$ 1-3) improves based on the number of family members. Although this programme is not targeted exclusively to the elders, about 60% of such assistance goes to the destitute elders.

- **“Wedihiti Awarana” jeäyssÜ wreK Sponsorship Scheme**

This programme has been implemented with the aim of providing an opportunity to philanthropists, government and non-government institutions or organisations to provide financial assistance to look after over 70 years of age destitute elders. Private sector institutions are assisting this scheme under the Social Responsibility Act.

- **Assistive Devices**

The poor elders can get assistive devices such as spectacles, wheel chairs, tricycles, hearing aids, and eye lenses free of charge from the Department of Social Services, by making request to the Divisional level officer along with a medical certificate.

- **Issue of Intra – Ocular Lenses for Elderly cataract Patients.**

Eye lenses are issued for people who are in the low-income group by the National Secretariat for Elders and provincial Social Services Directors.

### **3. Protection and Promotion of Rights of Elders**

- **Special Identity Card**

A special identity card for those over 60 years of age is issued by the Secretariat for Elders. The Identity card holders can get special privileges when obtaining services from Banks, Hospitals & Post offices. In large hospitals there are special counters for special identity card holders. When purchasing drugs from government pharmacies 5% price reduction is given to identity card holders.

- **Maintenance Board for Elders**

A Board has been appointed under the Protection of the Rights of the Elders Act No. 09 of 2000, to look into and determine the claims for maintenance by parents, who have been neglected by their children.

#### **4. Awareness Raising**

- **Pre-retirement preparation Seminars**

Pre-retirement preparation seminars are conducted for the public & private sector officers by the secretariat since 1999. Through these programmes officers are prepared for a contented life after their retirement.

- **Awareness Raising**

Awareness programmes through print & electronic media are implemented to make the people aware of issues on ageing population & remedies to be taken to face the challenges. A magazine called “Elders” is issued annually. A handbook for elders has been published & it is issued to elders free of charge.

- **Review of National Policy**

The National Council decided to hold three seminars at national level, provincial level for the private sector and NGO under the theme ‘Elders & Development’. National level conference has been held last month,

#### **5. Health Services**

- **Health Services**

The Ministry of Health and Nutrition has established a special division for the elderly and disabled persons. With the collaboration of other relevant divisions in the Ministry of Health and other governmental organizations including Ministry of Social Welfare, non-governmental organizations aim to improve the wellbeing

of elders and to prepare the future generation of elders for a more healthy, active and productive life.

The Ministry of Health has taken action to educate and train all health personnel on the subject of ageing. The medical officers have been instructed to establish day centres for elders in their areas in collaboration with government and non-governmental organizations. Medical personnel conduct special medical clinics for the elders and also conduct awareness programmes on promotion of healthy life styles.

#### ▪ **Community Programmes**

To integrate family and community efforts in social welfare and health action has been taken to train volunteer home carers by the National Secretariat for Elders, Ministry of Health and Help Age Sri Lanka Organization. The volunteers selected from the community are trained for a period of 3 months by HelpAge Sri Lanka and are attached to Medical Officers of health and Divisional Secretariats to enable them to provide services for the elders in the community. The trained home carers are expected to train the family members in providing health and other services for the elderly. In the future it is hoped to expand this programme as a major programme.

The village level elders committees established in all villages are expected to identify the sick and disabled elders and then to refer them to medical centres and also to identify the elders who need welfare services and other special care.

The National Secretariat for Elders conduct educational programmes for the members of elders committees to improve their knowledge in various fields such as nutrition, prevention of disabilities, counselling services available for the elderly people etc.

### **6. New Social Security Pension Scheme**

#### ▪ **Widening of Social Security Pension Scheme**

To provide social security to self-employed persons during their old age and on disability the Social Security Board has introduced special social security schemes during the last two years. Apart from these schemes the Board has taken

steps to introduce new schemes for the formal sector employee such as employees in Ministry of Transport, Co-operative Development, Plantation, Women Empowerment & Child Care.

## **7. Provision of Access to Built Environment**

- The Cabinet of Ministers declared year 2007 as 'Accessibility Year'. The objective is to enable all persons in the society to obtain access to all places.