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Promoción y protección de todos los derechos humanos, civiles, políticos, económicos, sociales y culturales, incluido el derecho al desarrollo

Visita a Bangladesh

Informe de la Experta Independiente sobre el disfrute de todos los derechos humanos por las personas de edad, Claudia Mahler*

Resumen

En su informe, la Experta Independiente sobre el disfrute de todos los derechos humanos por las personas de edad, Claudia Mahler, aporta información sobre su visita a Bangladesh, que tuvo lugar del 7 al 17 de noviembre de 2022, y presenta sus recomendaciones al Gobierno de Bangladesh.

* El resumen del presente informe se distribuye en todos los idiomas oficiales. El informe propiamente dicho, que figura en el anexo, se distribuye únicamente en el idioma en que fue presentado.



Annex

Report of the Independent Expert on the enjoyment of all human rights by older persons, Claudia Mahler, on her visit to Bangladesh

I. Introduction

1. Pursuant to Human Rights Council resolution 42/12, the Independent Expert on the enjoyment of all human rights by older persons, Claudia Mahler, conducted an official visit to Bangladesh from 7 to 17 November 2022, at the invitation of the Government. The purpose of the visit was to identify good practices and gaps in the implementation of existing laws and policies relating to the promotion and protection of the human rights of older persons in the country.

2. During her visit, the Independent Expert held meetings with representatives of the Ministry of Foreign Affairs, including the Foreign Secretary, representatives of the Ministry of Women and Children Affairs, the Ministry of Disaster Management and Relief, the Ministry of Law, Justice and Parliamentary Affairs, the Ministry of Social Welfare, including the Minister of Social Welfare, the Ministry of Health and Family Welfare and regional and local authorities, as well as representatives of non-governmental organizations (NGOs), academia and universities, medical professionals and social workers. She visited Dhaka central jail. She held meetings with more than 200 older persons and the organizations representing them in Chattogram, Dhaka and Rangpur and its regions (Chilmari, Kurigram and Ulipur).

3. The Independent Expert expresses her gratitude to the Government for its cooperation prior to and during the visit, to ensure its success. She is grateful to civil society organizations and other interlocutors for their availability and support. She also expresses her appreciation to the United Nations country team, the United Nations Resident Coordinator and the Resident Representative of the United Nations Development Programme, whose assistance in planning and carrying out the mission was indispensable. She also expresses her gratitude to the Office of the United Nations High Commissioner for Human Rights and its Special Procedures Branch for their support.

4. While the Independent Expert received a lot of information during her meetings with government officials, she regrets that some relevant materials with crucial information for a comprehensive understanding of the situation of older persons in the country were not made available at the time of submission of the present report.

II. Background and context

5. With a population of 167,184,465 in 2023, Bangladesh is the eighth most populous country in the world. The country is divided into eight regions, which are comprised of 64 districts, which in turn are subdivided into 544 *upazilas* (subdistricts).¹ Bangladesh is a parliamentary republic with a multiparty system.²

6. Thanks to commendable efforts to reduce mortality and ensure better living conditions for its population, Bangladesh has successfully increased life expectancy by 26 years within 50 years, jumping from 47 in 1972 to 73 in 2020. Combined with a decline in the birth rate, longevity is rapidly increasing in Bangladesh and older persons represent an increasing

¹ Syed Abul Basher, Jobaida Behtarin and Salim Rashid, “Convergence across subnational regions of Bangladesh – what the night lights data say?”, *World Development Sustainability*, vol. 1 (2022), p. 3.

² See <https://freedomhouse.org/country/bangladesh/freedom-world/2022>.

percentage of the population (15.3 million or nearly 10 per cent in 2022).³ This means that older persons, defined by the State as any person over the age of 60, are expected to account for one in five of the population in 2050.⁴

7. Bangladesh is highly vulnerable to the impacts of climate change.⁵ It is regularly affected by extreme weather and natural disasters such as cyclones, floods and heatwaves. Because of climate change, the average temperatures in Bangladesh will rise by 1.4°C by 2050.⁶ In contrast, the Independent Expert was informed by older persons living in the northern part of Bangladesh that there the temperature in winter is falling and that they lack warm clothes. Older persons are the members of a population most likely to be impacted by natural disasters, with those of low socioeconomic status being particularly vulnerable.⁷

III. Administrative, legal, institutional and policy framework

8. Bangladesh is party to most international human rights treaties that are relevant for the human rights of older persons. However, it has yet to ratify the International Convention for the Protection of All Persons from Enforced Disappearance and the Optional Protocols to the International Covenant on Economic, Social and Cultural Right and to the International Covenant on Civil and Political Rights. The Independent Expert regrets that it still holds reservations to articles 2 and 16 (1) (c) of the International Convention on the Elimination of All Forms of Discrimination against Women, which undermine the rights to be free from discrimination and to equal rights in marriage for older women. In terms of International Labour Organization instruments that are relevant to the human rights of older persons, Bangladesh has ratified the Nursing Personnel Convention, 1977 (No. 149).

9. The constitution of Bangladesh came into force in 1972. It guarantees fundamental rights, such as equality before the law, the right to life and personal liberty, freedom of movement, freedom of assembly and freedom of thought, conscience and speech, which apply for all citizens, regardless of age and other grounds. Women have equal rights with men in all spheres of the State and of public life, and discrimination on grounds of religion, race, caste, gender or place of birth is prohibited.⁸ However, age is not mentioned as a specific ground for discrimination. Furthermore, older persons are only explicitly referred to when it comes to the provision of basic necessities in article 15 (d) of the Constitution, which provides that it is the responsibility of the State to secure the right to social security, that is to say, to public assistance in old age.

10. Every five years the Government of Bangladesh adopts a five-year plan for economic growth and reduction of poverty. The current five-year plan for the period 2020–2025, “Promoting prosperity and fostering inclusiveness”, aims to reduce the malnutrition of older persons, increase access to health and palliative care and introduce a universal pension for older persons.⁹

11. Bangladesh has no comprehensive law that specifically addresses the promotion and protection of the human rights of older persons. The sole law that does so is the Maintenance of Parents Act of 2013. The Act places a legal obligation on adult children to provide financial support and care for their parents, who are unable to support themselves. The law therefore

³ Information shared by the Ministry of Social Welfare, see also <https://www.tbsnews.net/bangladesh/number-elderly-people-grows-341-times-faster-population-growth-506314>.

⁴ See <https://www.jyu.fi/hytk/fi/laitokset/yfi/en/research/projects/agecare/ageing-and-elderly-care-in-bangladesh-policy-initiatives-and-challenges>.

⁵ A/HRC/53/34/Add.1, paras. 5–10.

⁶ See Amnesty International, “Bangladesh” (2022), available from <https://www.amnestyusa.org/countries/bangladesh/>.

⁷ Jagnoor Jagnoor and others, “Exploring the impact, response and preparedness to water-related natural disasters in the Barisal division of Bangladesh: a mixed methods study” *BMJ Open*, vol. 9, No. 4 (2020).

⁸ Constitution, part III: Fundamental Rights, articles 27, 28, 32, 36, 37, 39.

⁹ Bangladesh Planning Commission, *8th Five Year Plan July 2020-June 2025. Promoting Prosperity and Fostering Inclusiveness*, pp. 591, 602, 716 and 725.

makes it possible for parents to file a case against their adult children under the Family Courts Ordinance 1985 if they fail to provide them with maintenance and support.

12. The national policy on older persons was adopted by the Government in 2013. Initiated by the Ministry of Social Welfare, the National Committee on Ageing has the responsibility for implementing it. The policy is based on the Madrid International Plan of Action on Ageing and recognizes all persons aged 60 years and above as senior citizens and their contributions within communities, emphasizing the importance of communication and social facilities, as well as their needs in terms of care and health. The main objectives of the policy are to ensure the dignity of older persons in society, identify the problems of older persons, change the attitude of the population towards older persons and create new programmes to address the needs of older persons. The policy covers several key areas, including health care, income security, social protection and social inclusion.¹⁰

13. The Independent Expert was informed that a plan of action had been approved in 2015 to implement the national policy on older persons. However, this action plan seemed to be unknown among stakeholders and there has been no implementation of the national policy, nor has it been allocated appropriate financial and human resources.

14. After the Vienna International Plan of Action on Ageing was adopted by the First World Assembly on Ageing in 1982, the National Committee on Ageing was one of the first commitments made by the Government of Bangladesh to address issues related to ageing. Since the beginning of the coronavirus disease (COVID-19) pandemic, the Committee has been inactive, but during her visit the Independent Expert was reassured that it would soon be reconvened. The authorities also stated that the Committee would work on a renewed action plan for implementing the national policy on older persons.

15. The National Committee on the Welfare of Elderly People was established in 2017 and operates as a coordinating mechanism for various government agencies and NGOs.

16. The National Human Rights Commission of Bangladesh is the national human rights institution.¹¹ It was established to monitor the human rights situation in Bangladesh, to promote and protect human rights and to receive the complaints of individuals. Within the Commission, there is a thematic committee on the rights of older persons. At the time of the visit, the Commission was in a transitional period and no exchange took place. However, the Independent Expert was pleased to learn that a new chairman was appointed by the President of the country in December 2022.¹²

17. NGOs and civil society organizations play a crucial role in providing assistance to older persons. They support older persons in need, for example providing services through welfare work for community development and assistance in national disasters.

IV. Main findings

A. Ageism and age discrimination

18. Ageism is defined as stereotyping, prejudice and/or discriminatory actions or practices against older persons that are based on their chronological age or on a perception that a person is “old”.¹³ Ageism aggravates other forms of discrimination based on gender, disability and health status, ethnic origin, indigenous identity or migrant status, gender identity and sexual orientation, socioeconomic status and other grounds.¹⁴ Inequalities, in particular gender inequality, are aggravated in older age.

¹⁰ See Nahid Ferdousi “Protecting elderly people in Bangladesh: an overview”, *Malaysian Journal of Law and Society*, vol. 24 (2019).

¹¹ Accredited with B Status, that is partially compliant with the principles relating to the status of national institutions for the promotion and protection of human rights (the Paris Principles).

¹² See <http://nhrc.portal.gov.bd/site/biography/74136e36-5c70-4894-bf26-0d939207d928>.

¹³ A/HRC/48/53, para. 21.

¹⁴ *Ibid.*, para. 51.

19. Ageism and age discrimination are generally unknown or misunderstood concepts in Bangladeshi society, from the grassroots to the State level. These concepts seem to be deeply internalized and lead easily to structural ageism, which remains undetected. As old age is currently not recognized as a specific ground for discrimination in Bangladeshi legislation, age discrimination is generally ignored and justified, embedded in societal behaviour. Some interlocutors perpetuated negative stereotypes when discussing the role of older persons in the society, especially after they had left the labour force. Throughout the discussions with older persons and civil society representatives, the Independent Expert learnt that the situation of older persons is not sufficiently prioritized by the Government at the national and local levels.

20. Older persons informed the Independent Expert that they felt discriminated against by younger people because of their age. They were rarely consulted and often excluded from decision-making processes, especially older women. Older persons also informed the Independent Expert that they faced ageist attitudes and barriers to accessing the labour market, being seen as too old to perform certain tasks.

21. The Independent Expert was pleased to learn that a new law on anti-discrimination, recognizing age as a ground for discrimination, was being reviewed by the parliamentary Standing Committee on Law. It is essential that age remains included as a ground for discrimination in the new anti-discrimination law to ensure the prohibition of ageism and age discrimination in Bangladesh. However, the bill does not recognize discrimination as a criminal offence, nor does it identify the practice of “untouchability” as a form of discrimination.¹⁵

B. Violence, abuse, maltreatment and neglect

22. Violence against older persons is rarely acknowledged and remains an unspoken reality in Bangladesh. Civil society organizations that are monitoring the situation shared their findings that cases were increasing. The Independent Expert was informed that older persons were mainly left out of statistics on violence and older women were rarely visible in data collection related to gender-based violence, because there appeared to be an age cap that excludes older women. Older persons with disabilities, older women and older lesbian, gay, bisexual, transgender and intersex persons have a higher risk of experiencing violence, abuse, maltreatment and neglect.

23. Older persons suffer from abuse and neglect, occurring primarily in their families and communities. As most older persons live within their extended family, the Independent Expert was told that they often feared retaliation if they filed a court case about being neglected or abused by their relatives under the Maintenance of Parents Act. They feared that their next of kin would stop providing them with support and care after they reported violence. Furthermore, due to stigma and shame, violence against older persons is underreported. Older persons described how cases of violence and neglect were usually settled within the community, through mediation processes with other older persons and community leaders.

24. While they are protected under the Domestic Violence (Prevention and Protection) Act 2010, violence against older women is a persistent problem in Bangladesh. A study from 2010 examining the situation of women aged 60 and over in the rural Naogaon district found that one third of respondents had been abused, either physically, psychologically or economically.¹⁶ Widows were 2.6 times more likely to be abused than married women.

25. Gender-based violence and discrimination against girls and women remains prevalent in Bangladesh throughout their lives. The result of disadvantages accumulated over the lifespan of a woman, further exacerbated by ageism and age discrimination, puts her at higher

¹⁵ Special Rapporteur on extreme poverty and human rights, [end of mission statement: visit to Bangladesh, 17–29 May 2023](#), p. 5.

¹⁶ Ahmed Mohammad Munsur, Ismail Tareque and K.M. Mustafizur Rahman, “[Determinants of living arrangements, health status and abuse among elderly women: a study of rural Naogaon district](#)”, *Journal of International Women’s Studies*, vol. 11, No. 4, (2010).

risk of inequalities, violence and abuse in later life.¹⁷ For instance, lifetime partner violence is generally more prevalent for older women because of their longer exposure to the risk of violence.

26. During the COVID-19 pandemic, there was a significant increase in physical and psychological abuse of older persons in Bangladesh. Older persons were abandoned by their family members or denied entry into the household.¹⁸ An extensive survey of 17,203 women in 27 districts across the country conducted by the Manusher Jonno Foundation revealed that a significant number of respondents had experienced physical, sexual, psychological and financial abuse during lockdown and the great majority stated that this was not the first time that they had experienced such violence.¹⁹ While the data is not disaggregated by age, it is assumed that it also affected older women.

27. The Independent Expert was also informed about the harassment and intimidation faced by older public figures who are or were engaged in politics or contribute to the social development of the country. Such abuse of older persons causes disproportionate physical and psychological harm or distress.

28. The Independent Expert learned that older transgender women, known as *Hijra*, can to some extent express their gender identity. However, this does not apply for all sexual and gender minorities. Older lesbian, gay, bisexual, transgender and intersex persons generally face discrimination, social rejection, harassment, assault, hate and violence. The lack of family and community support may lead to older such persons becoming depressed. Although the “third gender” is mentioned as a ground for discrimination in the 2022 anti-discrimination law, it does not explicitly mention *Hijra*, nor does it criminalize hate speech directed at *Hijra* and other minority communities.²⁰

C. Social protection, the right to social security and the safety net scheme

29. Social protection and the right to social security were two of the major issues raised in meetings with the Independent Expert. At present, there is no public pension scheme that covers a large part of the population. A public contributory pension is provided by the Government only for civil servants and employees of public corporations and has currently approximately 330,000 recipients (approximately 3.3 per cent of the population aged 60 or above).²¹ The lack of a general pension system is of great concern for the rights of older persons to social protection and social security, leaving them without adequate funds to live in dignity.

30. In the absence of a general pension system, Bangladesh has implemented a social welfare system for older persons in extremely vulnerable situations that provides various allowances to support their basic needs. The main allowances include the old age allowance, the widows and destitute women allowance and the disability allowance, which are key cash transfer programmes administered by the Department of Social Services under the Ministry of Social Welfare. The Independent Expert was concerned to hear that the social welfare system is highly fragmented, resulting in sporadic implementation. Older persons also told the Independent Expert that the amount of the allowances was insufficient and that not all older persons in need were eligible to claim them.

¹⁷ A/76/157, para. 52.

¹⁸ ASEM Global Ageing Center, “*Elder Abuse and the Rights Of Older Persons*”, *Issue Focus*, vol. 2, No. 1 (June 2021), pp. 45–46.

¹⁹ Bangladesh Legal Aid and Service Trust, [submission for the report of the Special Rapporteur on violence against women, its causes and consequences to the General Assembly on COVID-19 and the increase of violence against women, with a focus on domestic violence](#) (30 June 2020).

²⁰ Special Rapporteur on extreme poverty and human rights, [end of mission statement: visit to Bangladesh, 17–29 May 2023](#), p. 5.

²¹ Muhammad Ziaulhaq Mamun and Zahid Hossain, “The Bangladesh pension system”, in *International Comparison of Pension Systems. An Investigation from Consumers’ Viewpoint*, Hongmu Lee, Gianni Nicolini, Man Cho, eds. (Singapore, Springer Singapore, 2022).

31. According to the Population and Housing Census of 2022, the female population aged over 60 numbers 7.09 million.²² However, the number of female beneficiaries in social safety net programmes is generally lower than that of male beneficiaries (except for the allowances for widowed, deserted and destitute women).²³ The Independent Expert met several older women and widows who told her that they did not receive any allowance and were unable to apply for it as they would need support to access the system.

32. The old age allowance is a social welfare programme initiated in 1998 by the Government to provide financial assistance to older citizens living in poverty.²⁴ Those eligible are men aged 65 and above and women aged 62 and above living in vulnerable situations with an annual income of less than Tk10,000 (approximately \$92). Persons who are part of the older age group, unable to work, ill and landless are prioritized.²⁵ The old age allowance aims to improve socioeconomic development, social protection and the nutrition and health care of the older population.²⁶ In the fiscal year 2022–2023 a total of Tk34.5 billion (approximately \$316 million) was allocated for the old age allowance programme, which covers 5.7 million beneficiaries. Every beneficiary receives Tk500 (approximately \$4.50) per month, which is paid every three months.²⁷ For the next fiscal year, the Government is planning to increase both the number of beneficiaries (to 5.8 million) and the amount (to Tk600, approximately \$5.50).

33. While welcoming the existence of the old age allowance, the Independent Expert notes that it provides inadequate protection against poverty in old age. The Independent Expert was informed by older persons that the current allowance of Tk500 is insufficient for them to live a dignified life, as most of the allowance goes on their medical expenses alone, without enough to cover their housing or food expenses. In their view, the old age allowance should be raised to the amount of Tk3,000 (approximately \$27) per month to ensure their basic needs are met. It is of concern that some eligible older persons are still unaware of the allowance programme and that some of them have been waiting for years for their application to be processed due to the limitations of the allocated budget. In addition, not every eligible older person applying for the allowance is granted it because the budget for it only covers a part of the age group of older persons, which means that the number of beneficiaries is limited. In the absence of old age allowance benefits, the Independent Expert was informed that some NGOs provide donor-funded allowances for older persons who do not receive or are not entitled to the allowance. For example, the NGO Young Power in Social Action provides an allowance for older persons in vulnerable situations in Sitakund.²⁸

34. The allowance for widows and women deserted by their husbands, introduced in 1998, is a social welfare programme that provides unconditional financial support to widows who have no income.²⁹ However, the allowance cannot be combined with other social allowances. To receive a monthly allowance of Tk500, applicants should be at least 18 years old, but some of the older widows interviewed did not have access to the allowance. Like the old age allowance, the widows allowance aims to assist socioeconomic development and the social protection of applicants and improve their nutrition and health care, as well as their status in the family and society.³⁰ For the financial year 2022–23, Tk14.9 billion (approximately \$13.6 million) have been allocated for 2.4 m widows and women deserted by their husbands.³¹

35. In 2006, the Government introduced the allowance for financially insolvent persons with disabilities. In the current fiscal year of 2022–2023, this targeted cash transfer for persons with disabilities implemented by the Ministry of Social Welfare benefits 2.36 million

²² Bangladesh Bureau of Statistics, *Population Housing Census 2022*, p. 14.

²³ Bangladesh Ministry of Finance, *Gender Budgeting Report 2017–2018*, ch. 11, pp. 131–132.

²⁴ See <http://www.dss.gov.bd/site/page/7314930b-3f4b-4f90-9605-886c36ff423a/Old-Age-Allowance>.

²⁵ World Bank Group, “Program brief – old age allowance” (2019), pp. 2–4.

²⁶ *Ibid.*, p. 3.

²⁷ See <http://www.dss.gov.bd/site/page/7314930b-3f4b-4f90-9605-886c36ff423a/Old-Age-Allowance>.

²⁸ See <https://ypsa.org/ypsa-elderly-care-and-support-activities-sitakund-model/>.

²⁹ See <http://www.dss.gov.bd/site/page/b7c725f3-ad58-4ca8-811d-236f052bb6b0/Widow-Allowance> and Ministry of Social Welfare, “Madrid International Plan of Action on Ageing” (2022).

³⁰ See World Bank Group, “Program brief - allowances for the widow, deserted and destitute women” (2019).

³¹ See <http://www.dss.gov.bd/site/page/b7c725f3-ad58-4ca8-811d-236f052bb6b0/Widow-Allowance>.

persons, who receive a monthly allowance of Tk850 (approximately \$7.80).³² To be eligible for the allowance a person must be registered as a person with disabilities in the area of his or her residence, be a permanent resident of the area, be over six years old and have an annual income of less than Tk36,000 (approximately \$330). Older eligible applicants and those living in extreme poverty are prioritized. Since the beginning of the programme, the number of beneficiaries has been constantly increasing.³³

36. However, since the identification of persons with disabilities depends on self-reporting, eligible women with disabilities and older persons with disabilities who are more at risk of having poor access to social services offices are often not benefiting from the programme.³⁴ Furthermore, the Independent Expert was informed by several older persons with disabilities that the current amount of the disability allowance was not sufficient and that since 2021, it could no longer be combined with the old age allowance, thus reducing the levels of social protection of thousands of people living in vulnerable situations. The disability allowance does not cover all disability-, age- and health-related costs. For example, older persons with physical disabilities cannot afford prostheses and persons with sensory disabilities cannot afford the surgery that would improve their sight and living conditions. Generally, older persons with disabilities have more expenses than older persons without disabilities, for example for mobility aids, assistive devices and personal assistance.³⁵

37. Formerly, beneficiaries of social safety net programmes had to be physically present at the bank on the withdrawal date to receive the money, which often entailed substantial costs due to long journeys, the cost of transportation and the physical exertion needed for older persons when they had to queue for several hours or return the next day if they had not been served. Furthermore, these capacity constraints and manual processes have sometimes resulted in erroneous payments.³⁶ Older persons also face financial abuse, as they often have to be accompanied to the bank or send a representative to receive the money, risking those persons keeping part of the money for themselves.

38. To respond to these problems, the Independent Expert notes with appreciation that Bangladesh has established an online disbursement of the old age and other allowances to beneficiaries through government-to-person processes.³⁷ Since 2019, all major cash transfer programmes have been effected this way, facilitating the disbursement to older beneficiaries. The old age allowance is distributed four times a year through a mobile financial service, bKash. The new transfer system increases the efficiency of the disbursement process and consolidates social protection programmes operating under different ministries.

39. However, a reliable beneficiary database is still missing, to ensure that all older beneficiaries receive their allowances. Furthermore, while the Independent Expert was informed that older persons usually have access to a mobile phone in order to receive their allowances, a significant number do not. It is crucial that alternative solutions be put in place to bridge the digital divide that some older persons are experiencing, resulting in their exclusion from the new system and not receiving support in using online banking services.³⁸

40. Older persons reportedly experienced financial struggles and abuse during the COVID-19 pandemic. Due to corruption, mismanagement and the lack of digital disbursement procedures for social safety net allowances, the access of older persons to social safety net programmes was disrupted, putting thousands of them at higher risk of impoverishment.³⁹

³² See <https://msw.gov.bd/site/page/0d60b956-e93b-4c5a-8b1e-07689d2dc728/Disabled-Allowances> (in Bangla).

³³ World Bank Group, “Program brief - allowances for the financially insolvent disabled” (2016), pp. 3–4.

³⁴ *Ibid.*, p. 8.

³⁵ A/74/186, para. 39.

³⁶ World Bank Group, “Program brief - allowances for the Financially insolvent disabled”, p. 7.

³⁷ HelpAge International, “The impact of COVID-19 on older persons in Bangladesh: 2020 in review”, p. 4.

³⁸ See <https://www.thedailystar.net/round-tables/news/future-g2p-bangladesh-the-case-social-protection-system-1952557>.

³⁹ ASEM Global Ageing Center, “Elder Abuse and the Rights of Older Persons”, p. 47.

41. Following her visit, the Independent Expert learned that the 2023 Universal Pension Management Act was adopted by the parliament in January 2023. All citizens from the age of 18 to 50 with a national identity card who have contributed to the scheme for at least 10 years will be eligible under the new pension system.⁴⁰ However, this does not apply to civil servants, who are already covered by the public pension scheme. Although persons older than 50 years are taken into account in the bill, they also have to contribute for at least 10 years to the scheme to benefit from it, which might pose challenges for them. The 10-year period of contributing to the system would also imply that the current population of older persons will not benefit from the new system, which is of concern.

D. Right to work

42. Older Bangladeshi persons face extreme age-based discrimination in the labour market. In most of the meetings held by the Independent Expert, older persons described how they suffered from structural ageist assumptions in their search for employment and how that impacted their economic security. They were facing difficulties finding work because employers might think they were too old to work or not able to carry out the tasks required. Several older persons told the Independent Expert that they wanted to work but could not find employment, due to prevalent ageist stereotypes. As a result, most of them relied on their family or relatives for financial support.

43. The Independent Expert met several older persons in both rural and urban areas who had started their own businesses with microgrants from foundations or NGOs. She welcomes the initiatives of these actors in supporting older women and men to produce craft items that are then sold in markets. Thanks to such microgrants, other older persons had been able to establish small shops and remain financially independent in their old age.⁴¹

44. Bangladesh has put in place a number of programmes with the aim of economically empowering women through microcredit and entrepreneurship activities. While such programmes are commendable, including the vulnerable group development programme, the Independent Expert has expressed concern that most of them exclude women aged 50 and above. It is crucial that the newly created vulnerable women benefit programme, which works as a savings management scheme, be extended to benefit widowed or single women aged 50 and above. Such a programme would contribute to empowering thousands of older Bangladeshi women in need of support.

45. While in Chattogram, the Independent Expert also paid attention to the situation of older shipbreaking workers. She was appalled by the working conditions they faced and that they felt they must lie about their age to be able to continue working in the industry, due to the prevalence of ageist stereotypes. In addition to shipbreaking having extremely negative impacts on the environment, older workers are exposed to considerable risks for their health and safety because of the massive presence of toxic and hazardous substances on the ships to be dismantled. While accidents regularly happen, sometimes leading to death, no statistical data on deaths and disabilities caused by accidents is collected.⁴² The absence or lack of proper implementation of safety regulations also puts at considerable risk the enjoyment of all human rights by older workers.

46. The Independent Expert was concerned to hear that older shipbreaking workers are not provided with adequate protection equipment and their access to health-care services is generally limited in case of injuries or accidents. Due to the lack of implementation of social protection and welfare provisions, older workers raised with her their fear of losing their jobs if they could not work for a few days, especially in the event of illness. Permanent contracts and a sufficient wage are rare and the workers do not receive adequate training. Most of the older shipbreaking workers reported suffering from severe illnesses, such as lung cancer and other respiratory problems through inhaling toxic fumes at the scrapyards.

⁴⁰ See <https://www.thedailystar.net/business/economy/news/universal-pension-scheme-what-it-and-how-it-will-work-3234871>.

⁴¹ See <https://ypsa.org/ypsa-elderly-care-and-support-activities-sitakund-model/>.

⁴² A/HRC/12/26, para. 28.

E. Care and health care

47. Bangladesh is a family-oriented society and families play an important role in the lives of most Bangladeshis. They undertake tasks and duties for which the State should usually be responsible. That is also the case for other support networks, such as friends, neighbours, acquaintances and community members. Bangladeshi people have a long-standing tradition of providing care for their relatives, including for older persons. While most older persons continue to live with their children and extended families, the current evolution of the Bangladeshi family structure towards more nuclear families and the phenomenon of rural to urban migration, have considerably impacted the traditional care system.

48. While the Maintenance of Parents Act 2013 is seen as a milestone towards the protection of the rights of older parents in Bangladesh, the Independent Expert has expressed concern that it places an unfair burden on adult children. It forces them to take on tasks that should be primarily the responsibility of the State, such as affordable care, adequate housing and support services. The courts may order children to provide a monthly allowance, food, clothing and shelter or bear the medical expenses of their parents.⁴³ As of 2019, four cases had been brought before the courts.⁴⁴ Ultimately, the Act shows the need for the Government to take greater responsibility for providing affordable care and support services for the population of older persons.

49. Neglect of older persons with dementia within their families is common due to a lack of awareness, preparedness and equipment for relatives to provide them with adequate care and support.

50. The Independent Expert was also informed by several older persons that they felt isolated, socially excluded and lonely. She welcomes the creation of self-help clubs, intergenerational groups and other associations, often founded and facilitated by civil society, where older persons can meet and spend leisure time. These are innovative solutions to combat social exclusion and loneliness in later life.

51. The results of a 2021 study on life expectancy in Bangladesh show that the life expectancy of women was three years higher than men and that women were expected to live alone for 8.8 years. Both disabilities and morbidities were higher among women than men which led them to having a lower healthy life expectancy. Depression and loneliness were also higher among older women than older men. The value of the active ageing index and quality of life were also lower for women than men.⁴⁵

52. Access to appropriate health-care services was of great concern for all the older persons the Independent Expert met with, especially regarding their affordability. Although the public health-care system is decentralized, the Independent Expert was informed that it was overcrowded and underfunded, and medications needed in old age were often unavailable in public and community-based medical centres. As a result, people were relying on private health-care services, which were very expensive and therefore unaffordable for most older persons who were without social protection or dependent on the old age allowance. The Independent Expert was concerned to learn that many shops were selling medications and drugs to people without being regulated or certified to do so and were therefore selling inappropriate medicines to older persons, which could make their situation worse. Many older persons mentioned to the Independent Expert that they were paying for medication out of their own pockets.

53. The 1998 community-based health-care programme in Bangladesh introduced community clinics that are run by the Government or NGOs. The clinics are primary health-care facilities that provide free basic medical services, including maternal and child health-care, reproductive health and family planning services, nutritional education and counselling. They serve communities in both rural and urban areas. As most older persons live in rural

⁴³ See Nahid Ferdousi, “Protecting elderly people in Bangladesh: an overview”.

⁴⁴ See Rezwana Karim, “A critical analysis of Parents’ Maintenance Act, 2013 in Bangladesh”, *Rajshahi University Law Review*, vol. X (2019).

⁴⁵ See Zakiul Alam, “Women outweighed men at life expectancy in Bangladesh: does it mean a better quality of life?”, *Heliyon*, vol. 7, No. 7, (July 2021).

areas,⁴⁶ the clinics are usually the main medical facilities where they can get medical attention. The creation of the clinics has considerably improved access to health-care services in rural areas, however they usually lack specific health-care services for older persons.

54. Since 1998, more than 13,200 community clinics have been established by the Government. Since its introduction, the programme has increased in strength, with a growing number of community health workers, who play a critical role in improving the overall health and socioeconomic status of the population. During the COVID-19 pandemic, the clinics became a prime feature of the Government's strategy of achieving universal health coverage and were crucial in the fight against the virus.⁴⁷

55. As public health insurance covers only certain groups, for example government employees, the cost of out-of-pocket payment for health care is very high and one of the highest globally. Indeed, 74 per cent of health expenditure is paid out of pocket.⁴⁸ That is one of the barriers older persons face when seeking health care, along with access to information.⁴⁹ The Independent Expert was pleased to learn that older persons in certain hospitals and community health centres, such as in Rangpur, were treated as priorities, with specific lines and extra seats reserved for them in waiting areas.

56. The scarcity of facilities and the prevalent poverty in rural areas hinders the access of older persons to health-care services, especially those with disabilities. They usually face several accessibility-related challenges, such as a lack of adequate transportation and poor maintenance of the roads or they live in remote areas.⁵⁰ In some areas there are not enough ambulances to take older persons to hospitals or the ambulances are not accessible. This situation gets worse during natural disasters, when older persons are not treated in their villages or shelters and cannot reach the hospitals.

57. Despite a growing population of older persons, there are very few specialized geriatric care services available in the country. One NGO known for geriatric care is the Bangladesh Association for the Aged and Institute of Geriatric Medicine. Since 1960 and in collaboration with the Government, it has provided some services, (for example, health and geriatric care and recreational and socioeconomic support) for older persons in both rural and urban areas.⁵¹

58. The Independent Expert visited a private geriatric hospital in Dhaka, which was the first one in the capital. Geriatric care is not part of the basic medical or nurse training and there is a lack of doctors specialized in gerontology. Geriatric care is crucial to ensuring that all health-care workers, irrespective of speciality or profession, know how to deal with the particular health issues associated with ageing. The Independent Expert was pleased to hear from official representatives that the Government is considering opening a public geriatric hospital.

59. There is as yet no old age palliative care available but there are, for example, projects and programmes run by NGOs and the International Organization for Migration providing palliative care in Rohingya camps.

60. In meetings with older persons with disabilities and their representative organizations, the Independent Expert learned that the health-care situation for older persons with disabilities in Bangladesh is characterized by various challenges, especially in rural areas. Older persons with visual impairments, or those who have experienced strokes, encounter particularly limited access to medical treatment and health-care services. Assistive devices, such as wheelchairs and mobility aids, may not be available in rural areas.

⁴⁶ HelpAge International and Cordaid, *A study of older people's livelihoods in Bangladesh*, (2011), p. 7.

⁴⁷ See World Health Organization Universal Health Coverage Partnership, "[Bangladesh: community health workers at the heart of a stronger health system and the fight against Covid-19](#)" (October 2021).

⁴⁸ See <https://data.worldbank.org/indicator/SH.XPD.OOPC.CH.ZS?locations=BD>.

⁴⁹ See Abdul Razzaque Sarker and others, "Healthcare-seeking experiences of older citizens in Bangladesh: a qualitative study", *PLOS Global Public Health*, vol. 3, No. 2 (2023).

⁵⁰ World Health Organization & Ministry of Health and Family Welfare, Directorate General of Health Services, *Independent Evaluation of Community-Based Health Services in Bangladesh*, (2019), p. 2.

⁵¹ See Nahid Ferdousi, "[Protecting elderly people in Bangladesh: an overview](#)".

61. Older Bangladeshis were severely affected by the COVID-19 pandemic: as of November 2020 61.3 per cent of all deaths were of persons aged 60 or older.⁵² At the beginning of the pandemic, older persons experienced difficulties in testing for COVID-19 at authorized facility centres due to a lack of institutional and structural support.⁵³ The Ministry of Health facilitated testing by ordering authorities to test older persons where they lived.⁵⁴ Furthermore, older persons had difficulty in accessing medicine and receiving routine medical care during the pandemic.⁵⁵ The Independent Expert was concerned to hear that some older persons living in vulnerable situations, such as in the Geneva camp, the biggest settlement for Biharis in Bangladesh, and who had tested positive for COVID-19 were denied entry to government quarantine centres and hospitals.⁵⁶ Such an attitude would amount to ageism aggravated by discrimination against minority groups.

62. The situation of older Rohingya persons living in refugee camps during the COVID-19 pandemic was particularly precarious, due to the impossibility of practising social distancing and a lack of clear information about the virus.⁵⁷ This resulted in misconceptions about the spread, prevalence and treatment of COVID-19, especially among older Rohingya refugees.⁵⁸

63. The Independent Expert was pleased to learn that Bangladesh has a very high COVID-19 vaccination rate and that older persons and other groups in vulnerable situations have been treated as a priority group for vaccination.

64. Regarding older persons' access to mental health services, the Independent Expert was told that the availability of psychiatric professionals, especially in rural areas, was limited and that mental health cases, including dementia, were increasing. One study shows that in 2019 one in every 12 Bangladeshis aged 60 years or older had dementia.⁵⁹

65. The Independent Expert was informed by lesbian, gay, bisexual, transgender and intersex activists that older transgender and intersex persons were facing difficulties in receiving adequate health care. Staff in health-care settings may not be trained for the special needs of older lesbian, gay, bisexual, transgender and intersex persons. Such persons are not recognized as *Hijra*, intersex or non-binary persons and therefore do not get the health care they need with respect to their gender.

F. Climate change and natural disasters

66. Bangladesh is one of the most vulnerable countries to the impacts of climate change and related disasters.⁶⁰ Such events have disproportionate effects on the human rights of older persons and can be magnified by ageism. The effects are also often aggravated by location, such as remote rural or coastal areas. Factors such as physical disabilities, insufficient financial resources, a lack of support from family and friends and a greater attitude of

⁵² HelpAge International, “The impact of COVID-19 on older persons in Bangladesh: 2020 in review”, p. 1.

⁵³ ASEM Global Ageing Center, “Elder Abuse and the Rights Of Older Persons”, p. 48.

⁵⁴ HelpAge International, “The impact of COVID-19 on older persons in Bangladesh: 2020 in review”, p. 3.

⁵⁵ See Sabu Kanti Mistry and others, “Older adults with non-communicable chronic conditions and their health care access amid COVID-19 pandemic in Bangladesh: findings from a cross-sectional study”, PLOS One (July 2021).

⁵⁶ Institute of Statelessness and Inclusion, “Stateless in a global pandemic” (2020), p. 10.

⁵⁷ HelpAge International, COVID-19 and older people in Asia Pacific: 2020 in review, 2020, p. 9.

⁵⁸ See Sabuj Kanti Mistry and others, “Misconceptions about COVID-19 among older Rohingya (forcefully displaced Myanmar nationals) adults in Bangladesh: findings from a cross-sectional study”, *BMJ Open*, vol. 11, No. 5 (May 2021).

⁵⁹ See <https://unb.com.bd/category/bangladesh/one-in-every-12-bangladeshis-aged-60-years-or-above-may-have-dementia-study/74774>.

⁶⁰ A/HRC/53/34/Add.1, para. 5.

acceptance of disaster as “fate” may affect older persons’ ability and willingness to evacuate prior to natural disasters.⁶¹

67. Local authorities (unions and *upazilas*) often provide some emergency response and assistance to the population in case of climate-related disasters. The Independent Expert was informed by older persons that such assistance remained insufficient in the face of the frequency with which they suffered from such disasters. Older persons often struggled to find evacuation transport, shelter with appropriate sanitary facilities, food, drinking water and medicines. They also mentioned that they relied primarily on their relatives and neighbours for assistance. Many older persons have had to leave their lands and are now living as displaced persons in neighbouring villages, often having lost their livelihoods.

68. In 2020, the Ministry of Disaster Management and Relief issued the Standing Order on Disaster 2019, in which older persons are recognized as a group that needs special consideration prior to, during and after natural disasters. It includes the evacuation of older persons to safe shelters; the provision of separate accommodation and hygienic sanitary facilities for older persons; the participation of older persons in the development and implementation of risk reduction and emergency response and rehabilitation plans; measures to raise awareness of the safety and security issues regarding older persons in training courses related to disaster risk management; and measures to promote inclusive warning messages and awareness programmes.⁶²

69. The implementation of these measures is greatly needed, since disaster mitigation measures are not sufficiently inclusive. For example, the location and design of the approximately 2,500 existing cyclone shelters along the coast of Bangladesh do not reflect widely accepted inclusive design principles and standards. Older persons and persons with disabilities often find it difficult to access cyclone shelters, generally staying behind if there is no one to assist them.⁶³ Features needed by older persons, including those with disabilities, are missing and there was no stakeholder participation in the design process.⁶⁴

70. Several older persons and representatives of civil society organizations told the Independent Expert that most of the shelters, which are in the majority primary schools converted into shelters when climate-related disasters occur, were not old age-friendly nor appropriate for older persons’ specific needs. For example, the sanitary facilities in those shelters might not be accessible and did not meet the needs of older persons, including older persons with disabilities. Shelters might just be an open space, where it gets cold during the night, aggravated by the lack of warm clothes.

71. In some remote areas, the government response to climate-induced disasters might take several days, even weeks, to arrive. Older persons strongly depend on relatives, neighbours, friends and volunteers during the intervening period and a swift evacuation and subsequent return from a shelter depends heavily on the strength of social connections.⁶⁵ The purchase by the Government in 2020 of multipurpose accessible rescue boats suitable for the transport of persons with disabilities or injuries from flood-affected areas to shelters is an important step towards fostering the inclusiveness of disaster mitigation measures.⁶⁶

72. In emergency situations, older persons also face difficulties in receiving adequate health care. They are also more likely to suffer from flood-related diseases such as diarrhoea and typhoid fever, due to the lack of safe drinking water. Most of them do not have access to immediate medical treatment, exacerbating the risks to life.

⁶¹ See Abdul Malak and others, “‘We are feeling older than our age’: vulnerability and adaptive strategies of aging people to cyclones in coastal Bangladesh”, *International Journal of Disaster Risk Reduction*, vol. 48 (September 2020).

⁶² Government of the People’s Republic of Bangladesh, *Standing Orders on Disaster 2019*.

⁶³ A/HRC/53/34/Add.1, para. 60.

⁶⁴ See Mohammad Faruk, Syeda Atia Ashraf and Muhammad Ferdaus, “An analysis of inclusiveness and accessibility of cyclone shelters, Bangladesh”, *Procedia Engineering*, vol. 212 (2018).

⁶⁵ Abdul Malak and others, “We are feeling older than our age: vulnerability and adaptive strategies of aging people to cyclones in coastal Bangladesh”, p. 13.

⁶⁶ See <https://www.ispr.gov.bd/en/dockyard-and-engineering-works-ltd-bangladesh-navy-narayanganj-has-delivered-08x-multipurpose-accessible-rescue-boats-to-department-of-disaster-management/>.

73. Natural disasters exacerbate poverty among older persons, destroying their homes and livelihoods and threatening their lives.⁶⁷ Older persons in rural, coastal and climate change-affected areas who are living off the land suffer severe damages and losses due to climate change. They rely on climate-sensitive livelihoods, such as crop farming, livestock production and fishing. They also live in poor-quality housing.⁶⁸ Natural disasters, such as floods, cyclone and land erosion, are destroying the livelihoods and houses of older persons and leaving them with nothing. Older persons told the Independent Expert that they might not go to the shelters because they did not want to abandon their livelihoods, especially their land and livestock.

74. The Independent Expert visited older persons and their communities in coastal, rural and or low-lying areas regularly affected by the impacts of climate change through flooding, landslides, land erosion and cyclones. She hailed the resilience that older persons showed in the face of recurring natural disasters and the impacts of climate change. Many older persons informed her of their lived realities and on how they prepared for climate-related disasters, including stocking up with dried food and climbing into trees when the floods were washing away their villages – and this sometimes three or four times a year in the Kurigram region. Older persons demonstrated vast knowledge and the experience and skills to respond and adapt to the adversity of natural disasters and those caused by climate change. That also shows the importance of involving older persons in the preparation and implementation of emergency measures and plans.

75. The Independent Expert was informed that governmental rehousing programmes were available for displaced people who had lost their homes during disasters, however older persons were not prioritized in these programmes.

G. Adequate standard of living

76. The Independent Expert reiterates the need to assess human rights from a life-cycle approach. With poor education, people will have a harder time finding employment and earning a living, which will have an impact in later life. This vicious circle was often observed by the Independent Expert in Bangladesh through the stories of older persons. Indeed, several older persons in rural areas and informal urban settlements or so-called slums informed the Independent Expert that they had had no access to proper education in their childhood or youth.

77. Older persons in informal urban settlements are generally living in precarious conditions. In the community of Shahid Nagar, Chattogram, many older persons live under the poverty line and do not have access to the old age allowance. They lack access to safe drinking water, the settlement is overcrowded and sanitation facilities are not accessible for older persons with disabilities. They also face constant harassment from landowners, who regularly threaten them with forced eviction. Forced evictions are a human rights violation⁶⁹ and have a serious impact on the human rights of older persons, their health and well-being.⁷⁰

78. Older women are particularly affected by discriminatory property and inheritance provisions under religious law, which impact severely on their economic and financial security. Such laws also further exacerbate older women's risk of being financially abused by their relatives and of land- and property-grabbing that may leave them without resources.

79. The Independent Expert also visited the Geneva camp, home to over 40,000 Bihari people. Older Biharis described situations of extreme social exclusion and marginalization as an ethnic and linguistic minority, facing discrimination in accessing employment and primary health-care services, as well as the lands that they were forced to abandon without compensation.

⁶⁷ See <https://www.helpage.org/where-we-work/helpage-global-network-members-in-asia/bangladesh/>.

⁶⁸ Special Rapporteur on extreme poverty and human rights, [end of mission statement: visit to Bangladesh, 17–29 May 2023](#), p. 14.

⁶⁹ See Committee on Economic, Social and Cultural Rights, [general comment No. 7](#) (1997).

⁷⁰ [A/77/239](#), para. 23.

H. Deprivation of liberty

80. The Independent Expert visited Dhaka central jail, Keraniganj, to understand the situation of 52 older prisoners. She noted that wards for senior citizens had been created on the lower floors of the prison buildings to facilitate their accessibility. However, the design and arrangements for sanitary facilities, located outside the dormitories and including high steps to get to them, were not taking into consideration the needs of older persons, especially those with disabilities. It is also of concern to know that some of the prisoners in the senior citizens wards had been waiting for trial for more than five years. Older persons in lengthy pretrial detention settings are isolated from family, relatives and friends. Long pretrial periods also lead to overcrowding in prisons, which may heighten the risk of ill-treatment.⁷¹ Staff in pretrial settings who are not trained in ageing-related health are not able to identify the age-related health problems of older persons, which leads to a deterioration in an older person's health status.⁷²

81. The Independent Expert was informed that older prisoners had access to healthy nutrition and regular health check-ups. However, she was concerned to hear from older prisoners that they suffered from scabies, diabetes and allergies, as some of these diseases could have been linked to the overcrowding of the prison, which was at twice capacity. The Independent Expert was also informed that there was a shortage of staff of 100 persons, which could lead to a struggle to identify common age-related health problems and needs, which in turn could result in discrimination and abuse, ill-treatment and violence.⁷³

V. Conclusions and recommendations

A. Conclusions

82. **Despite the challenges it faces, the Independent Expert acknowledges the efforts and commitment of Bangladesh towards the enjoyment of their human rights by older persons. She welcomes the existing dedicated institutional structures and the legal and policy frameworks, including the national policy on older persons and the National Committee on Ageing.**

83. **Ageing is a steadily increasing issue in Bangladesh and important challenges remain to be addressed to ensure the full realization of human rights for all older persons. Ageism and age discrimination are pervasive and the absence of legal safeguards to counter them leaves such behaviour unrecognized and unchallenged. The national policy on older persons needs urgently to be implemented by proactive measures to enforce the principles of equality for and non-discrimination against older persons.**

84. **Poverty in old age remains rampant, exacerbated by ageism and age-based discrimination in employment, as well as the lack of an appropriate social protection system, including pensions. Further urgent efforts need to be made to ensure that everyone has economic security in old age and ensure not only the economic and social rights of older persons, but also their political and civil rights. The implementation of a unified pension system is crucial, along with the allocation of adequate resources for older persons.**

85. **Based on these conclusions and the observations made in the present report, the Independent Expert makes the recommendations set out below.**

⁷¹ See <https://www.penalreform.org/issues/pre-trial-justice/issue/>.

⁷² Penal Reform International, "Older persons in detention. A framework for preventive monitoring" (2021), p. 5.

⁷³ A/HRC/51/27, para. 47.

B. Recommendations

86. The Independent Expert recommends that Bangladesh ratify the international human rights treaties and optional protocols to which it is not yet a party. She recommends that it remove its reservations to articles 2 and 16 (1) (c) of the International Convention on the Elimination of All Forms of Discrimination against Women, which undermine the rights of older women. She further recommends that Bangladesh ratify the conventions of the International Labour Organization relevant to older persons to which it is not yet a party.

87. The Independent Expert recommends that the Government prepare a timebound road map for the implementation of the national policy on older persons and its action plan as soon as possible, with the meaningful and effective participation of older persons and their representative organizations. She also encourages the National Committee on Ageing to restart its work at the earliest possible moment. She recommends the establishment of a specific institutional platform to monitor the implementation of the national policy on older persons. Such a body, which could be the National Committee on Ageing, should also advise the Government on issues related to the well-being and human rights of older persons. Adequate and appropriate human and financial resources should be allocated to ensure effective implementation of the national policy on older persons and the proper functioning of the National Committee on Ageing.

88. The Independent Expert calls on the Government urgently to repeal all laws and provisions that discriminate against older women, including those that hinder their inheritance and property rights.

Ageism and age-discrimination

89. Age must be legally recognized as a ground for discrimination and be prohibited as such. While the Independent Expert welcomes the integration of age as a ground for discrimination in the 2022 anti-discrimination law, it is important that other aspects of the law are revised. Discrimination must be recognized as a criminal offence, the practice of untouchability must be identified as a form of discrimination and hate speech directed at *Hijra* and other minority communities must be criminalized.

90. To halt the spread of ageist stereotypes and misconceptions, the Independent Expert recommends conducting educational programmes and awareness-raising campaigns. Such programmes and campaigns should focus on intergenerational dialogue and inform the population about the positive contributions of older persons to society. That would also contribute to shifting the narrative so that older persons are seen as rights holders instead of beneficiaries.

Violence, abuse, maltreatment and neglect

91. The Independent Expert calls upon the Government to adopt legal protection measures to address and combat violence against older persons. Special attention should be paid to specific groups of older persons that are at greater risk of being abused, maltreated or neglected, such as older persons with disabilities, older women, older persons belonging to ethnic and linguistic minorities, and older lesbian, gay, bisexual, transgender and intersex persons.

92. The Independent Expert recommends that the Government start to establish educational programmes and training on the rights of older persons for health professionals and caregivers. The Government should also conduct awareness-raising campaigns on violence and abuse against older persons, targeting older persons themselves and their informal caregivers, such as family members, including children.

93. Ahead of the general elections in January 2024, the Independent Expert calls on the authorities to uphold the rights of older persons to freedom of expression and of peaceful assembly without violence or harassment.

94. The Independent Expert recommends that the disaggregation of data on violence against women should be extended by several age groups without an age-limit to ensure that the lived experiences of older women are reflected and then addressed through targeted programmes and projects by relevant stakeholders.

Social protection, the right to social security and safety net schemes

95. The Independent Expert recommends considering a change in the budget priorities of Bangladesh to ensure that more older persons in need receive the old age allowance and increase its amount to Tk3,000 per month to ensure a dignified life for older persons, whose cost of living is currently rising strongly due to ongoing international and national crises. The increase in the old age allowance could also contribute to the prevention and reporting of violence because older persons would be less financially dependent on their children.

96. The Independent Expert calls on the Government to amend the 2023 Universal Pension Management Act. All older persons must benefit from the scheme, regardless of their age or their period of contribution.

97. The Government must ensure that older persons are informed about the new pension system and allowances that they are eligible for in an accessible and age-friendly way. Applying for the new pension and allowances must also be ensured in an accessible and age-friendly way.

Right to work

98. The Independent Expert urges the Government to ensure the right of older persons to work and have access to the labour market, to include older workers in vocational training programmes and combat ageist attitudes towards older workers. The Government must work to improve the image of older persons, especially older workers.

99. The Independent Expert urges the Government to include older women in programmes that support women through microcredit and entrepreneurship activities and extend the vulnerable women benefit programme to widowed or single women aged 50 and above. To reduce the poverty of older persons, the Independent Expert recommends that the Government develop microcredits specifically for older persons to help them start their own income-generating activities. It should also conduct training for older persons on how to start their own enterprises.

100. In the light of its international human rights commitments, Bangladesh is obliged to protect the human rights of shipbreaking workers, including older workers. In line with the Guiding Principles on Business and Human Rights, the Independent Expert urges the Government to implement regulations for and policing of the shipbreaking industry, with a particular focus on the environment and the health and safety of workers and their families living next to shipbreaking yards. More must be done to ensure the protection of the human rights of older workers employed in the shipbreaking industry.

Care

101. The Maintenance of Parents Act 2013, which puts an obligation on family members as duty bearers instead of the State, should be assessed and legally revised from a human rights-based perspective, to take into account the needs and rights of older persons. The Government should provide support and assistance to families, including human rights-based and medical-oriented training, counselling and financial, social and psychological support.

102. The Independent Expert recommends that the Government financially support the creation of older persons' associations and intergenerational self-help clubs or specific age-friendly areas to combat loneliness and social exclusion. Such a system would provide a substantial platform for older persons to claim their human rights and empower them within their communities.

103. The Independent Expert urges the Government to ensure there is free medical health care for all older persons.

104. Specific geriatric care is needed for an adequate health-care system for older persons. The Independent Expert therefore recommends developing programmes on geriatric medicine and establishing geriatric units and hospitals all over the country, to ensure better and more tailored health-care services for the ageing population.

105. The Independent Expert strongly encourages the inclusion of older persons in national mental health strategies and programmes, and that the issue of dementia be addressed from a human rights-based perspective. Awareness-raising campaigns and appropriate training for health-care providers and caregivers should be conducted to counter the stigma associated with dementia.

106. The Independent Expert recommends that the State develop national home-care programmes and community-based care services in rural and remote areas to further support families providing care for older persons, including for those with disabilities and dementia.

Climate change and natural disasters

107. While recognizing the magnitude of the climate change-related challenges faced by Bangladesh, the Independent Expert calls upon the Government to take urgent and meaningful action to mitigate the impacts of climate change on older persons. Such measures must be age-responsive and consider the special needs of older persons, including their disabilities and their gender. Enabling older persons to participate in and contribute to decision-making processes about climate change at the local, regional and national level would foster further appropriate age-responsive climate action.

108. The Independent Expert recommends that older persons be meaningfully and effectively consulted on the evaluation, preparation, implementation and monitoring of disaster response plans. In planning such programmes, particular attention should be paid to older persons, including older women and older persons with disabilities.

109. The Independent Expert calls on the Government to provide accessible, age- and gender-sensitive shelters close to where older persons live. For the rescue of older persons living in areas threatened by floods, age-appropriate and accessible boats must be provided and shelters equipped with special and separated areas for farm animals.

Adequate standard of living

110. The Independent Expert calls on the Government to ensure the right of older persons, especially those living in rural areas and urban informal settlements, to have access to sufficient, safe, affordable, accessible and clean drinking water and sanitation.

111. The Independent Expert urges the Government to protect older persons, especially older persons living in informal settlements, from forced evictions and to ensure that evictions as a last resort are always conducted in line with international human rights law, especially with regard to the provisions of the International Covenant on Economic, Social and Cultural Rights and the International Covenant on Civil and Political Rights, to both of which Bangladesh is a State party.

112. The Independent Expert calls on the Government to engage in a housing and land rehabilitation process to ensure the right of older Biharis to an adequate standard of living, including the right to adequate housing.

Deprivation of liberty

113. The Independent Expert urges the Government to take into consideration age, and especially old age, in the context of pretrial settings and to ensure that pretrial detention is as short as possible. She also urges the Government to avoid allowing prisons to become overcrowded.