United Nations Economic Commission for Europe Ministerial Conference on Ageing Opening and Closing Remarks: Panel on Joining Forces for Solidarity Debra B. Whitman, AARP Chief Public Policy Officer Friday, June 17, 2022 | 9:40-11:00 am CEST

Opening Remarks

Good morning, everyone. My name is **<u>Debra Whitman</u>** and I serve as the Chief Public Policy Officer at AARP.

For over 60 years, we have been the voice of our 38 million members. We are the world's largest nonprofit organization dedicated to empowering people over age 50 to choose how we live as we age.

I want to thank the United Nations Economic Commission for Europe, and the Italian Government, for co-organizing this Ministerial Conference on Aging.

I particularly want to thank colleagues <u>Vitalija</u> and <u>Valeria</u> from the United Nations for organizing this high-level panel discussion on the impact of the COVID-19 pandemic.

And I am **grateful** for the distinguished representatives from international organizations, the Honorable Ministers from Italy and Germany, and the esteemed NGO representatives who are here today. Like you, I am excited to hear what they have to say.

To begin, I'd like to offer an over-arching point: The COVID-19 pandemic has unmasked **longstanding** problems for older adults around the world. These were not new, but often were unseen.

Let me give you an analogy.

When police investigators examine a crime scene, they use special powder to identify fingerprints that are hidden to the naked eye. The powder sticks to oils created by our hands, and only then do the ridges and swirls of fingerprints become visible.

The pandemic has done the same for many of the problems older adults have faced **for years**.

And the facts have been horrific.

Out of almost <u>15 million COVID-19 deaths globally</u>, the vast majority have been **older adults**.

So far this year alone, <u>three-quarters of COVID deaths in America</u> have been people over age 65 and <u>more than 9 in 10</u> have been in people 50 and older.

Global data also highlight the lack of safety in nursing homes. According to the WHO, in too many countries more than <u>40 percent</u> of COVID-related deaths have occurred in long-term care facilities even though they contain only a tiny share of the population.

Dedicated family members play an even larger role than nursing homes in our system of care and many of these informal carers have paid a personal price for their efforts whether it is financially or even with their own health.

The pandemic <u>added</u> clarity to this challenge, which is faced by adults of <u>all</u> ages. Due to COVID, family caregivers are spending more time and more money on caregiving and facing a growing strain for their efforts.

COVID-19 also laid bare the chronic problem of age discrimination. Which harms adults all over the world.

Yet, age bias remains pervasive. According to the WHO Global Report on Ageism, one in two people hold ageist attitudes – and we know this information is probably an undercount.

And ageism combined with sexism, racism, and ableism multiplying discrimination that many older adults have faced their entire lives.

This leads to a fundamental point: The challenges **to** healthy aging that COVID unmasked **are not spread evenly across society**.

Too often and for too many, the goal of healthy and secure old age is just a fantasy. When you look at populations by income level, educational attainment, employment, race and ethnicity, **inequalities** scream out.

Too often, disadvantaged socioeconomic groups lack sufficient access to:

- health care
- education
- · economic opportunity
- housing choices
- · healthy food
- recreation
- public services
- and a fair system of justice.

These supports are vital throughout the course of our lives because starting in childhood they influence how we age – both for better or for worse.

The other morning Amal shared with us the differences in life expectancy of **16 years** between high income and low income countries. Even within my own country you have those same differences even within a city.

These social inequities are nothing new. But the pandemic put them in a harsh spotlight.

Privileged sectors of society were spared economic disruption – and greater exposure to COVID – while many low-wage workers were deemed essential.

Individuals with broadband access, technology, and access to health care had better chances of consulting with doctors via telehealth.

For all these reasons, a meaningful investment in healthy longevity will require many steps. Many more than I can describe today. But I'd like to have a few strategic priorities to guide all our efforts in today's conversation.

 As I've tried to stress, we have to combat inequities to achieve healthy aging for <u>all</u>. If we really want to leave <u>no one</u> behind, this must be a priority.

- We need to reimagine long-term services and supports. Nursing homes, which have suffered devastating losses, need reform and oversight. Consumers should have more choices especially to age in their homes. And care workers need better training, pay and career opportunities.
- Yet, this is not just about institutions. Family **caregivers** hold up the entire system and they need more support, including financial and respite, to help their loved ones stay independent.
- And ageism underlies many of the worst choices that were made on who to protect from COVID and where to place resources.

So these are a few things that I hope are on the agenda and I was really pleased to see the declarations by both the ministerial and civil society address so many of them.

But goals and actions are two different things.

Because as a society and region, we <u>can</u> do better. In fact, as a society, <u>we</u> <u>must</u> do better because we can do more.

I believe that by joining forces and pursuing these goals together, we can meet this critical moment.

And as a long standing advocate on the rights of older people, we look forward to working with all of you in civil society and government to realize the potential for action that a convention on the rights of older people would provide.

I now have the honor of introducing our first speaker to begin what I believe will be a fascinating conversation...

Closing Remarks

I want to thank my panelists for an incredible discussion. I think all of you heard a lot of themes were consistent across the speakers.

We need equity. We need to address issues around caregiving and home care.

We need to expand health spans. We need intergenerational solidarity.

We need to address loneliness and mental health issues. And we need to eliminate ageism, both against youth and older adults.

And more importantly we need stronger protections for the human rights of older people.

I wish we had more time, we were going to have a great discussion, but I hope you will come up to each of us at the coffee and ask us our two or three things that we will do. And now I will turn it over to Lisa to keep us back on schedule.