Subject: Including people aged 50 and over
Posted by RachelAlbone on Fri, 04 Apr 2014 11:37:33 GMT
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In addition to sections of the core questionnaire that are relevant to people in their 50s and over (see posts under questionnaire design, HIV and nutrition), some of the special topic questionnaires should also be conducted with people in this age group.

The domestic violence module should be asked to women over the age of 49. Women continue to experience different forms of violence in old age. A 2011 five country study showed 28.1 per cent of older women had experienced some kind of violence or abuse in the previous 12 months (see ref). Very limited data is collected on violence and abuse experienced by older women, in large part because of the exclusion of women aged 50 and over from DHS. The critical information gap on this issue has significant implications. It conceals patterns of violence against older women and results in their subsequent exclusion from prevention and rehabilitation policies and programmes. The DHS should be expanded to collect information with women aged 50 and over in line with the CEDAW recommendation for data to be disaggregated by age and sex to provide information on the situation of older women, including in relation to violence.

The female genital cutting module should also be asked to women and men over the age of 49. Older women and men are often supportive of, and have a role in perpetuating the practice of FGM/C. Older women often act as circumcisers/cutters. More information is needed on older women and men's views on the practice in order to be able to address them as part of broader interventions to eradicate FGM/C.

The out of pocket health expenditure module should include women and men aged 50 and over. This is important to understanding the health needs of older people as individuals, and of families/households; older people's health seeking behaviour and access to services; and the economic impacts of paying for health care. Population ageing brings significant challenges for health systems worldwide and these challenges and the needs of older people must be understood to inform appropriate policy and programme responses.

Reference: Luoma, M.-L., Koivusilta, M., Lang, G., Enzenhofer, E., De Donder, L., Verté, D., Reingarde, J., Tamutiene, I., Ferreira-Alves, J., Santos, A. J. & Penhale, B. (2011). Prevalence Study of Abuse and Violence against Older Women. Results of a Multi-cultural Survey in Austria, Belgium, Finland, Lithuania, and Portugal (European Report of the AVOW Project). Finland: National Institute for Health and Welfare (THL).