

National Report on ageing in Suriname

**Major achievements reached in respect of efforts to
improve the quality of life of older persons and
identification of existing gaps and key actions in
Suriname**

Nancy Gooding

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List of abbreviations

AOV	General Old Age Provision
BBGO	Union for Retired Civil Servants
BOG	Bureau of Public Health
EBS	Energy Company Suriname
LISP	Low Income Shelter Programme
MOH	Ministry of Health
NARB	National Advisory Board for policy of the Senior Citizens
VPSI	Association of Private Social Institutions

Background

Country: Suriname

Persons in Charge :

Drs Nancy Gooding

Sociologist, graduated in 2004 from the University of Suriname. She is a freelance consultant who is currently part of the national statistic committee in Suriname. She holds a position as Program Officer specially assigned to Community projects and research at ProHealth, an independent health development Foundation. She has participated in various research projects.

Contact information

Ms Nancy Gooding,

Tel: (597) 44 12 81

Mob: (597) 86 70 163

Address: Oerdistraat 53 (District Paramaribo)

Email: nancygooding@yahoo.com

Executive Summary

This national report on ageing in Suriname focuses on the period of 2007-2011 and includes:

- Review of legal, administrative programmatic and institutional aspects.
- Identification of best practices
- Key actions to be taken in the next five years to strengthen the protection of the rights of older people

The study shows that:

- Legislations on issues (such as standards for home care for elderly and financial support) have been formulated. However these legislations have not yet been implemented. They are still waiting for approval by the council of ministers.
Positive is that overdue pension payments (as arranged in the civic code) to the elderly will be paid.
- Most programs as described in the report date before 2007, e.g:
 - Monthly financial support to financially weak persons including a small group of senior citizens.
 - The General Old Age Provision (AOV) to senior citizens paid monthly to every Surinamese citizen and non Surinamese national who lived, worked and contributed to the pension fund for at least 10 years
 - A number of community, mostly religious organizations, provide free food packages to vulnerable members including the elderly

New programs are mostly still in the planning phase. Progressive is the awareness that there is need for special attention to the elderly and fulfillment of their rights. In the government planning since 2006 there are a series of priority actions listed. However little achievement was made in the implementation since no structure nor budget was allocated to these activities. There are insufficient mechanisms to guarantee the full implementation of the desires stated in the planning.

Some of the current ongoing initiatives are on very limited scale, only accessible to senior citizens in the urban districts or are financially too challenging for most senior citizens. Positive developments are the steady increase of the AOV and the developments in the pension scheme of civil servants.

- The Ministry of Health and Ministry of Social affairs recognize ageing and the case of senior citizens in their policy vision. Specific actions towards implementation of this policy are mentioned in their current planning, for example:

- Draft regulation and national policy for chronic disease control and the formulation of care protocols in hypertension and diabetes with emphasis on self management by clients.
- Incorporation of homecare policy in the health policy and drafting of a national plan for integration and improvement of the care for elderly
- The proposal of a combination of measures, construction of new houses, (a percentage of social housing will be specifically aimed to senior citizens or families with senior citizens), better land policy, renovation of deteriorating housing, creating of loan facilities all guided by relevant legal framework.

The institutional framework to reach these expected results are however not fully in place.

- Out of the various initiatives that have been mentioned in the report to improve the lives of the elderly in Suriname the potential best practice initiatives that can be identified in the realm of social security and adequate living standards of senior citizens are
 1. Free of charge service for senior home owners by the Energy Company Suriname
 2. The General Old Age Provision

Introduction

The Madrid International Plan of Action on Ageing (MIPAA) was adopted in 2002 by the Second World Assembly on Ageing in Madrid. Suriname was also part of this assembly and also committed to this Plan of Action.

In Latin America and the Caribbean, The Brasilia Declaration was adopted in 2007 reinforcing implementation of the MIPAA. However in the implementation of the government policy on ageing the MIPAA is the starting point and not the Brasilia declaration.

This report focuses on the various efforts that have been undertaken to improve the quality of life of older persons in the past five years, starting from 2007 and onwards. The existing gaps and the key actions to be taken will be listed.

Methodology

This has been a qualitative study. The data collection techniques that were used included literature/desk review and open interviews. Data was also collected from policy documents and discussions with staff from:

- Ministry of Health,
 - Ministry of Education and Development,
 - Ministry of Social Affairs and Housing
 - Ministry of Labor, Technology development and Environment
- Interviews were also held with representatives of:
- Low Income Shelter Programme
 - The Pension Fund Suriname
 - NARB (National Advisory Board for policy of the Senior Citizens)
 - BBGO (Union for Retired Civil Servants)
 - State Energy Company
 - Commercial Banks

1. General information

Demographic situation

The population growth and the ageing process in Suriname is much like in the rest of the Caribbean influenced by a decline in fertility, an increase in life expectancies and high emigration rates. Suriname is a country with moderate to advanced population ageing, where percentages of older persons currently range from 8% to 10% and will rise quickly to reach 25% to 30%, as stated in the report 'Population, Ageing and Development 2004'¹. Given the trends, it is expected that growth among females will remain higher than among males.

Looking at the population developments in terms of age distribution when comparing census V (1980) to census vii (2004), we notice that the 60 plus population increased with 2.3 percentage points to the level of 8.6% (Demographic data 2000-2008)

According to the national legislation, a person is officially entitled to the status of senior citizen and to related benefits at the age of 60. In 2008, the group of 60 years and older comprises of 22.141 men and 25.376 women. In the next table a breakdown of this age group is presented by age and sex.

Table 1: Estimated Mid-year population by age groups 60 and older and sex, 2005-2008

Age group	2005			2006			2007			2008		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
60-64	6763	7361	14124	6992	7583	14575	7236	7817	15053	7505	8076	15581
65-69	5198	5781	10979	5306	5910	11216	5426	6049	11475	5579	6219	11798
70-74	3867	4369	8236	3916	4457	8373	3976	4553	8529	4058	4665	8723
75-79	2746	3102	5848	2732	3147	5879	2727	3195	5922	2740	3257	5997
80+	1995	2816	4811	2100	2937	5037	2185	3046	5231	2259	3159	5418
Total	20569	23429	43998	21046	24034	45080	21550	24660	46210	22141	25376	47517

Statistical Yearbook 2008

More than half (68%) of the total population is concentrated in the urban districts while these cover only 0,4% of the land area. About 50 % of the senior citizens live in the district of Paramaribo (urban area). The population per square km is relatively low. This makes it more

¹ United Nations, ECLAC. Population, Ageing and Development. Thirtieth Session of ECLAC, 28 June – 2 July, Puerto Rico, 2004

difficult for the state and other parties to reach their targeted population with services especially taking into consideration the difficult access to the interior regions. In Suriname the place of residence will for a great part determine the access to services. Most of the available services are concentrated in the urban area of the capital city Paramaribo and the neighboring district Wanica.

Table 2: Head of households (in Paramaribo and Wanica) by age 60 years and older and sex 2005-2008

Age group	2005			2006			2007			2008		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
60-64	4076	2446	6522	4419	1862	6281	4271	2748	7019	5553	2285	7838
65-69	2749	1501	4250	2731	1940	4671	2759	2626	5385	2889	2986	5875
70-74	2394	1559	3953	2508	1827	4335	3042	1960	5002	2483	2008	4491
75-79	1209	1017	2226	1433	1220	2653	1257	1040	2297	2211	1602	3813
80-84	619	585	1204	541	564	1105	586	661	1247	714	882	1596
85 and older	335	309	644	172	221		310	283	593	283	345	
Total	11382	7417	18799	11804	7634	19045	12225	9318	21543	14133	10108	23613

Selected Gender statistics Suriname 2009)

The median age at death for males in 2007 was 63.6 years and for females 69.2 years (Statistical Yearbook 2008). Cardio-vascular diseases (hypertension), malignant neoplasms, and diabetes are main causes of death, in the population group of senior citizens (Mortality trends, Suriname, 2011)

Socio-economic situation

Suriname has emerged from a long period of economic instability through prudent fiscal and monetary management on the part of the Government, and consistent economic growth. Between 2000 and 2005, the economy averaged a real annual growth rate of 4.4 per cent, with inflation rates below 10 per cent. Mining of gold, bauxite and crude oil account for more than 90 per cent of foreign exchange earnings. Suriname has an informal economy estimated to account for at least 20 per cent of the gross domestic product. The public sector employs 40 per cent of the workforce. The majority of the workforce is concentrated in the urban districts of Paramaribo and Wanica. Suriname is ranked 89 out of 177 countries in the UNDP human development index (HDI) 2006. It is ranked 23rd out of 102 developing countries in the human poverty index, placing it in the medium human development category. Qualitative studies show that the most vulnerable populations live in the interior and in high-risk urban neighborhoods, women-headed households being particularly vulnerable (Draft country programme document for the Republic of Suriname (2008 – 2011))

2. Inventory and general evaluation of actions aimed at older persons

This review covers national developments made since the adoption of the Brasilia Declaration from the onset of 2007 till the end of the year 2011. Since this report is the first contribution, a short description of the situation is presented with special references to achievements from 2007 onwards.

a. Legislation and Administration

There are very few or no laws and/or network of regulations with regard to senior citizens in Suriname:

- The Civil Code of Suriname includes provisions on the duty to support the senior citizen by their children. These provisions are not fully practiced.
- Legislation on indexed pensions: The Civic Code dates from 1972 and was modified in 1997. This Civic Code regulates the pensions of retired civil servants. It also regulates the right of the spouse and under aged children to the pension of the deceased civil servant. State decision of 2008 implies that retired senior citizens have the right to a welfare linked social benefit and an identical standard of living as before retirement. By Code from 1 October 2008, the indexed pension paid to retired civil servants or spouse of the deceased civil servant is linked to the civic salary range meaning that with every formal increase the pensions will automatically be adapted.
- Over the years contributions from civil servants to the Pension Fund Suriname were subjected to devaluation. Senior citizens, who contributed good and stable dollars during their active years, were victimized by the inflation and have been negotiating for considerable time with the government for compensation. Eventually in 2008, by state decision these achievements were set out legally. As financial compensation (equal to civil servants) a gross increase of 10 % is to be paid to retired civil servants and those eligible, The amount will be paid only to those living in Suriname to enable them to live on the same level before retiring and inflation.
- The general old age provision (AOV) to senior citizens was officially regulated by law in 1981. Although as stated in the Multi Annual Plan the system must be evaluated and transformed to a financially durable system accompanied by change in structure and legislation, much progress has not been made in this area. A pension reform study has been conducted by the Ministry of Finance in 2010, but the recommendations of this study concerning the restructuring of the AOV have not been approved yet by the council of Ministers.
- There is draft legislation on home care services. This deals with standardization of services to all clients targeted by these services including senior citizens. The standards for shelter for children have already been formulated. At present the quality standards for

shelter for senior citizens are being formulated and are linked to this draft legislation on standards for shelters.

Summary

Draft legislations on issues (such as standards for home care for elderly and financial support) have been formulated. However these legislations have not yet been implemented and are still waiting for approval by the council of ministers.

b. Programmatic development

In the multi-annual development plan of the government, 2006-2011, poverty reduction is identified as one strategy for sustainable human development and achievement of the Millennium Development goals (MDGs). In this development plan the state re-emphasizes the responsibility to senior citizens and stresses their equal right to a life of fulfillment and happiness. The main focus is the drafting of a modern security system, which translates into guarantees for economic security, health, and general well being.

Economic security

The economic situation in Suriname shows a steady increase in prices of services and goods. Although there are no basic data available, it is commonly known that a significant proportion of senior citizens live under challenging circumstances and in poverty having difficulties covering basic living costs. Poverty reduction strategies are carried out by the ministry of Social affairs responsible for the welfare of the total population with special reference to the most vulnerable groups. Targeting the elderly the ministry provides:

- Financial support. This support consists of a monthly allowance to financially weak persons including a small group of senior citizens.
- The general old age provision (AOV) to senior citizens officially regulated by law in 1981 is paid monthly to every Surinamese citizen and non Surinamese national who lived, worked and contributed to the Pension Fund Suriname for at least 10 years. The provision is paid through a system of offices spread throughout the country. Within the interior areas, specific missions for payment are organized.
-
- The general old age pension system is based on a solidarity principle: the financing of the fund comes from a deduction of 4% from the salary of every worker in private or government service while the government covers the deficit between contribution and payments. The total number of senior citizens who receive this provision was 42.818 in the year 2008. There has been a steady increase in the general old age provision amounting: 175,- Surinamese Dollar (SRD) per month since 01-04-'05, raised to SRD 225,- per 01-10-'05 and increased per 2011 to SRD 425,-

- A number of community mostly religious organizations provide free food packages to vulnerable members, including the elderly. This support is more or less irregular, depending on gifts and support from individuals and other parties reaching a peak during the holiday seasons.

Information on additional income sources of senior citizens is not available. There are indications, however, that some older persons work in order to cover their basic costs. In the study conducted by the Ministry of Social Affairs in 2006 on the living and housing conditions of the elderly in two districts of Suriname (Paramaribo and Wanica) 5% of respondents were engaged in economic activities. Income opportunities for senior citizens especially in the older age groups are limited. There are indications that in the younger age groups (60-65 yrs) there are income opportunities for skilled labor in specific sectors (e.g. retired nurses who work in homecare).

Most of this work is informal, since they are not recognized in official labor. Within the Ministry of Labour there is no formal policy aimed at senior citizens nor is there any encouragement to enter the labour process.

For many senior citizens, AOV is the only or main source of income. Indicative are the study results from a survey carried out by the ministry of Social Affairs in 2006 under senior citizens in Paramaribo and Wanica (as mentioned earlier): 99, 6% of respondents received the general old age provision while approximately only 36, 2% a pension, or other kind of support.

There are various pension schemes in the private sector depending on the viability of the company. Civil servants contribute 5% of their monthly salary to the Suriname Pension Fund, while the government contribution is 10%.

Those eligible to receive a pension from either private or government origin are thus in the minority in Suriname.

Elderly women are in an extremely disadvantaged situation, because unlike their male counterpart, very few had a formal job and are entitled to a pension from an employer. Indicative is table 3 (page 12) that shows that within the categories 'unemployed', and 'homemaker' women are predominantly visible. Particular the category 'homemaker' raises the assumption that these women in their old age will have to depend on AOV as a main source of income. Bearing in mind the male/female ratio and the fact that the life expectancy is higher for women the disadvantage in position of elderly women compared to elderly men is strongly indicated by the category retired: the number of elderly men categorized as formally retired is 4 times higher than the number of elderly women.

Table 3: Non institutional population 15 years and older by sex and activity status (in Paramaribo and Wanica, 2007-2008)

	2007		2008	
	Male	Female	Male	Female
Employed	77503	46615	78893	48269
Unemployed	5727	9079	3793	9289
Retired	2398	580	2093	194
Student	16624	19849	17074	19024
Home maker	1153	31684	973	30676
Unable to work				

Statistical Yearbook 2008

Health

Senior citizens experience many problems in the access to adequate healthcare; costs and accessibility are the main challenges.

Provision of healthcare in Suriname is determined by the financing modalities:

- The state health Insurance covers a broad range of medical services (primary and secondary care) to its clients who primarily consists of civil servants, retired civil servants their legal spouses and widowers. Financing comes from a obligatory monthly deduction from the salary of every worker in government service and a government contribution. Approximately 30% of the population is covered by this Insurance. (Meerjaren Sectorplan Gezondheidszorg 2004-2008, 2004)
- For low income population groups the ministry of Social affairs provides a social medical card (an estimated 30 % of the population) which covers primary and secondary care. Senior citizens can also apply for this type of support. Those who are eligible for this type of support could be partly or entirely exempt from medical costs (consultation, costs for hospitalization and medicine)
- For tribal communities in the hinterland the Medical Mission provides primary health care free of charge.
- Workers from companies are covered by private health insurances.

Part of the population has no coverage. When costs are not covered by insurance these have to be paid out of pocket. The realization of a general health insurance therefore remains an important strategy in the realization of healthcare for all. Legislation on and introduction of a General Health Insurance is a priority action in the sector planning document (2009-2011) of the ministry of Health.

The ministry furthermore acknowledges that insufficient attention has been given to care of specific population groups among others senior citizens and recognizes in the planning that

giving the aging trend of the population the need for geriatric care is evident. Recognizing the delay in this field the ministry is committed to further establish collaboration with external partners.

Priority actions in this respect are:

- Draft regulation and national policy for chronic disease control and the formulation of care protocols in hypertension and diabetes with emphasis on self management by clients.
- Incorporation of homecare policy in the health policy and drafting of a national plan for integration and improvement of the care for elderly

A series of preparatory actions (workshops, working group sessions) were implemented by the ministry. These are still in the planning phase. Although not structurally also the information on Alzheimer disease, hypertension, dementia has increased.

The Ministry of Social Affairs also provides limited ambulatory care for senior citizens aged 60 years and older who live under difficult circumstances. These services include bathing, wound care, physical exercise, assistance to visit the physician but are limited to the urban areas. The multi annual plan stresses the need for institutional strengthening and decentralization of the unit responsible for this service by 2007.

Favourable / Enabling and supportive Environment

The housing policy is part of the social policy of the Ministry of Social affairs. As such senior citizens are also identified as one of the priority groups. Currently approximately 40.000 persons are registered to be in need of proper housing. The government aims to completely fulfill this need in the period 2011- 2015.

There is no specific data on the housing situation of the elderly. In the study conducted by the Ministry of Social Affairs in 2004 on the housing and living conditions of elderly in two districts in Suriname (Paramaribo and Wanica), approximately 63% were home owners. Of these about 57% was in reasonable or good state. With the further deteriorating housing situation it could be expected that maintenance is becoming more difficult for most senior citizens. Consequences are deteriorating houses and overcrowding (more than half of respondents in the study lived with offspring, and other family members).

Living conditions in the interior area are completely different and although the results cannot be generalized, a household survey on the living conditions of the elderly in the hinterland of Suriname gives a brief overview of what those conditions are:

- Traditional housing with no pipe water hence difficulty to collect water, unsafe water and lack of sanitary facilities,

- Irregular payment of pensions and general old age provision. (Household survey on the living conditions of the elderly in the hinterland of Suriname, Paramaribo, February 2002)

Although most senior citizens prefer to live in their own environment there is a growing expressed need for alternative living arrangements (home care or permanent residence in senior homes).

The need for alternative living arrangements for senior citizens is partly caused by failing support from the social environment especially in the urban areas (family, neighbors and friends) but also feelings of not being safe and deteriorating housing conditions of senior citizens.

According to the latest UNDP study on Citizen Security in the Caribbean, the fear of becoming a victim of crime is high in Suriname. 25% of the population fears being a victim of a burglary and 17.9 percent a robbery. Although no data is available it is commonly known that elderly persons feel unsafe at home and in the street. These feelings are caused by a series of burglary and robbery incidents reported in the media.

In its policy 2006 -2010 the Ministry of Social affairs proposes a combination of measures for example, the construction of new houses, (a percentage of social housing will be specifically aimed to senior citizens or families with senior citizens), better land policy, renovation of deteriorating housing, and the creation of loan facilities, all guided by relevant legal framework.

As prices of construction increased most house owners are in too weak a financial position to carry out necessary maintenance on their property. This also affects senior citizens who mostly are not eligible for commercial loans. Two commercial banks created opportunities for senior citizens to purchase cash for among others maintenance of their property. However, the repayment scheme proved too challenging for most senior citizens.

A government initiative (Low Income Shelter Programme) funded by the IDB also makes small repairs on homes for the poor possible. Although senior citizens are also eligible, not much use has been made of this facility mostly because of the lack of financial means.

The multi annual plan states that further study on living conditions of elderly and the need for care facilities will be carried out.

In 2006 Suriname counted seventeen (17) permanent residential homes for senior citizens of which 2 are state owned and subsidized by the Ministry of Social affairs which covers all operational costs. The others are mostly related and led by religious institutions. Private homes receive a small subsidy for their operational expenses which continue to be a challenge. There is a greater demand at the state facilities due to the lower fees. Most homes are located in Paramaribo.

Much the same situation exists with regard to home care: about 24 home care organizations are registered. These operate across the country although most serve the urban population. The vast

majority of these home care organizations are privately owned. The costs for these services are relatively high and not covered by health insurance. Most elderly people cannot afford these services. The Ministry of Social Affairs and Housing provides a limited package of home care services, either free or for a relatively low fee.

Specialized day care for demented elderly is scarce. There are 3 private organizations operating in this field and a state home that started an in-home service for this particular group.

As support to the elderly the Energy Company Suriname is maintaining a special fee for elderly homes and free of charge service at low electricity use to every registered senior citizen's homeowner.

The multi annual work plan further promotes the concept of active ageing and states that efforts hereto will be undertaken as part of preventive measures and healthy lifestyle promotion. In collaboration with the ministry of Health and other social partners NGO's tend to celebrate World Diabetics day yearly while there are a variety of private social and recreational activities organized through the year.

The Ministry of Social affairs yearly organizes a senior Citizen Day in which cultural, recreational activities take place. An additional package of basic goods is distributed to every participating senior citizen.

A major challenge with respect to the concept of active ageing is the accessibility of public spaces and transportation. Public transportation, streets and most offices are not elder friendly. The ministry of Social affairs offers on a very limited scale transportation for senior citizens. This service is limited to Paramaribo. A private foundation also offers this service with support from government though this service is in danger of discontinuation since subsidies tend to be very irregular.

Education

The ministry of education is aware of the role of education in the national development and promotes a fair chance for everyone. In Suriname, the overall national Adult literacy rate is 86.2%, though it declines increasingly with age to 62.8% among those over 65 years of age (Suriname (MICS) 2000). Within the ministry a specific unit for adult education exists. However activities are ad-hoc and, mostly limited to the city. In general the need tends to be met by NGOs and voluntary groups. The ministry plans to do an assessment of the need for literacy programs in the population. There is no specific mentioning of education activities aimed at senior citizens in the sector plan 2004-2008 of the ministry.

Small private initiatives in new communication technology towards senior citizens exist. With regard to the training of personnel working in the care there are a number of training organizations which need structuring of the curricula.

The general complaint is that the salaries for workers in this sector of elderly care are low. There needs to be better (financial) recognition for the workers which will ultimately lead to more and better skilled motivated workers in the care for elderly.

Summary:

Most programmes were implemented prior to 2007. New programmes are mostly still in the planning phase. There is evidence of positive developments as witnessed by the growing awareness that there is need for special attention to the elderly and fulfillment of their rights. In the government planning since 2006 there are a series of priority actions listed. However, little achievement was made in the implementation since no structure nor budget was allocated to these activities. There are insufficient mechanisms to guarantee the full implementation of the desires stated in the planning.

Existing initiatives are on very limited scale, accessible only to senior citizens in the urban districts or financially too challenging for most senior citizens. Positive developments are the steady increase of the old age provision and the developments in the pension scheme of civil servants.

c. Institutional development

Both Ministry of Health and Ministry of Social Affairs recognize ageing and the case of senior citizens in their policy vision. Specific actions towards implementation of this policy are mentioned in their current planning. The institutional framework to reach these expected results are however not fully in place:

Ministry of Health

A working group on homecare in general was established. Every member in the working group is dedicated to a specific population group (youth, disabled, elderly). Currently the working group is understaffed and barely functioning. There are no activities planned and the policy to integrate the issue of elderly care in the overall policy of the ministry has not been drafted. It is notable that the working group does not focus on ageing as a normal process but focuses on specific health issues related to ageing.

The Bureau of Public Health, as a division of the MOH, has direct responsibility for public health programs, including the formulation and monitoring of Family Health programs. Within

this program area, the unit Geriatrics is positioned which currently has no staff, no specific budget and no activities planned.

Ministry of Social Affairs

In 1981, a 'National Advisory Board for Policy of the Senior Citizens' was appointed and advises the Ministry on issues of senior citizens. Since its origin the board has been staffed by delegated members associated with care institutions.

There is a unit "Senior Care" within the ministry especially dedicated to the issue of senior citizens and ageing. The unit is staffed and primarily carries out support activities to senior citizens. Limited programming takes place. Evaluation, restructuring and strengthening of the unit is planned.

The General Old age Provision Fund is a foundation under the ministry of Social Affairs. The primary task is the administrative procedures and disbursement of the general old age provision.

As part of government's commitment to senior citizens the ministry of Social Affairs drafted a policy document on senior citizens in 2006 based on international standards and total integration of the senior citizen in society. This document is a guiding principle for a comprehensive policy towards senior citizens and identifies main challenges and priority actions for the future to be carried out with the involvement of all stakeholders.

Private Sector initiatives serving the elderly

Most initiatives are in the area of providing homecare services (bathing, feeding, medicine intake and wound care) to elderly, operation of senior homes and community organizations providing social activities (gymnastics, educational sessions, knitting, music). The senior homes and community initiatives are mostly related and lead by religious institutions Providing home care services to elderly has emerged as a new income opportunity in Suriname and private initiatives have been booming. This growing interest has increased the need for regulation and monitoring, which lead to drafting of legislation by the Ministry of Social Affairs (see page 9).

The Pension Fund Suriname

The Pension Fund Suriname is a legal entity funded in 1973 with strong political ties within the ministry of Home Affairs. The primary task is the administrative procedure and disbursement of pensions to retired civil servants. Every civil servant is contributing an obligatory 5% of their salary to the fund. Over the years however the fund did not function; contributions were transferred and used for overall government spending, putting the fund in danger of operation.

BBGO (Union for Retired Civil Servants)

BBGO is a union serving the interest of retired civil servants. The union has its office in Paramaribo and organizes a number of social and educational activities for both members and non-members. Although the goal is to serve the general interest of its members the main focus in recent years has been the claim for an indexed pension and an additional 10% increase to compensate for the growing costs of living. The union has been negotiating on this issue for years and in 2008 government agreed on payment of this additional increase. Payment however did not take place until 2010 since no government funding was available and the Pension Fund Suriname did not have the financial means to make the payments. Payment was enforced through a number of protest demonstrations organized by the union. However there is still a payment overdue (period 2008-2010) for which the union is lobbying.².

VPSI (Association of Private Social Institutions)

VPSI is an NGO also active in the field of elderly care. The main functions of the bureau are research, networking, project management and knowledge transfer. A national congress of senior citizens was organized in 2002 and studies on the living conditions of elderly in the hinterland of Suriname (2002) and the need for care in the elderly population (2001) were conducted. VPSI is planning to present a vision of the elderly care in the future in Suriname.'

² In February 2012 the government announced payment of these overdue funds by end of this same month

3. Best practices

This assessment indicated that a number of initiatives, which focus on improvement of the lives of elderly people in Suriname, have been undertaken:

- The general old age provision (AOV) to senior citizens
- Senior citizens can apply for a social medical card (provided by the Ministry of Social Affairs) which covers primary and secondary care
- The Ministry of Social Affairs provides limited ambulatory care for senior citizens aged 60 years and older who live under difficult circumstances. These services include bathing, wound care, physical exercise and assistance to visit the physician
- Two commercial banks give the opportunity to senior citizens to place a loan for among others maintenance of their property
- The Low Income Shelter Programme (a government initiative funded by the IDB) makes small repairs on homes for the poor possible including the elderly
- Existence of permanent residential homes for senior citizens and home care
- Specialized day care for demented elderly
- The Energy Company Suriname maintains a special fee for elderly homes and free of charge service at low electricity use to every registered senior citizen homeowner
- Yearly the Ministry of Social affairs organizes a senior Citizen Day in which cultural, recreational activities take place. An additional package of basic goods is distributed to every participating senior citizen
- The Ministry of Social affairs offers transportation for senior citizens. A private foundation with support from government also offers this service
- There are organizations which offer training of personnel to work in the care for the elderly

Taking the indicators for categorizing initiatives as best practices (guia metodologica) into consideration, it can be concluded that of the above mentioned initiatives the following two can be identified as the potential best practice initiatives in Suriname:

- 1. The General Old Age provision (AOV) to senior citizens**
- 2. Free of charge service for senior home owners by the Suriname Energy Company
Free of charge service for senior home owners by the state electricity company**

The Energy Company Suriname provides various services among others electrification to clients, home owners, small and medium companies in the coastal area in the north of Suriname. The more interior and southern populated area are served by a separate unit of the ministry of Natural resources.

The Energy Company Suriname provides a monthly free of charge service to senior citizens. To be eligible senior citizens :

- Must be registered as clients of the company (responsible for the monthly bill) ,
- Legally prove that they are owner of the house and
- have a maximum energy use of 150 kwh (lowest category of energy use). Senior citizens who use more than 150 kwh are not eligible for this initiative.

The initiative is thus a positive support to the financially weaker segments of the older population and caters to basic electricity needs. It does not however specifically support intergenerational solidarity. In fact in cases where senior citizens as homeowner live with other family members (according to the study of the ministry of Social Affairs on living conditions of the elderly in the urban areas that more than half of respondents live with other younger family members) this could lead to reappearing discussions on energy use since younger population tend to have a higher energy use (daily and lengthy use of recreational appliances).

Although a positive response to the need of older persons the decision is basically that of a company wherein no other actors participated. Because of this completely internal decision, the initiative can be implemented without any procedural difficulties in the planning, efficient use of resources and is considerably durable. However the initiative is a passive support to senior citizens and does not create opportunities for discussion, participation or networking with senior citizens in decision making. Concluding the initiative does not meet the content and operational requirements set.

The General Old Age Provision (AOV)

The General Old Age provision (AOV) is a pension paid monthly to:

- **every** senior Surinamese citizen and
- non Surinamese national who lived, worked and contributed to the Pension Fund Suriname for at least 10 years.

For many senior citizens it is the only or main source of income. Therefore there has been a steady increase in the general old age provision for a relatively decent standard of living for senior citizens and a more autonomous position. The system is based on a solidarity principle³: the financing comes from a deduction of 4% from the salary of every worker in private or government service and a government contribution. The system for most part also meets the operational requirements:

³ Although every one receives the AOV, Solidarity in this context means that the contributions of the working force make it possible that also others who have not contributed (in their active years) receive the AOV.

- The Fund is an integral part of the ministry of Social affairs, staffed, with their own budget and offices
- Although there are no direct lines of communication and active participation of senior citizens in decision-making the steady growth of the amount is a result of reoccurring signals in public media and from various organizations on the deteriorating position of senior citizens⁴. In this respect, the reality of the situation of senior citizens has influenced developments occurring.

⁴ The latest increase, from Srd 425,- to Srd 525,- (in februari 2012), was approved within very short period by the Parliament and also the allocation of the necessary budget for imbursement was made very easy.

4. Key Actions for the future

The “Policy document Senior citizens” gives a clear overview with regard to the priority actions which need to be undertaken according to the government:

Guarantees for affordable and adequate healthcare based on specific needs of elderly

- Legislation on and introduction of a General Health Insurance to cover medical costs for the total population
- Introduction of geriatrics as program area in the policy of ministry of Health
- Draft regulation and national policy for chronic disease control and the formulation of care protocols in hypertension and diabetes.
- Promote healthy lifestyle

Drafting of a modern security system

- Definition of a minimum loan based on cost of a basic living package
- Evaluation of current support systems and transformation to a financially durable system
- Ensure that every senior citizen is guaranteed this basic package

Develop standards for care and monitoring mechanisms to ensure quality of service to senior citizens

- Accreditation and upgrading of the workers in the care
- Finalize existing legislation on homecare services and incorporate in a comprehensive legal framework

Further research on living conditions of elderly and the need for care facilities and alternative living modalities

- Promote continuous living in the own environment
- Create support mechanisms and define safety measures for elderly
- Establish alternative living modalities including opportunities for care to demented elderly

Develop a vision on active ageing

- Definition of ageing as a normal process
- Promote and incorporate this vision in national government policy
- Start discussion in society on the welfare of and support to vulnerable groups in general and the position of senior citizens in particular

Institutional strengthening of government agencies concerned with the issue of the elderly

- Discussion on roles, responsibilities and functions of agencies

- Institutional strengthening, staffing and allocation of funds
- Create collaboration between agencies

Further integration of elderly in society

- Create opportunities for senior citizens to stay aware of technological and other developments
- Increase accessibility of public places and realization of adequate public transport
- Create opportunities for education and training for senior citizen

The issue of senior citizens is on the public agenda of various stakeholders, government, private and interest groups, but it is also apparent that there is a strong focus on health and economic security of the elderly. Both government and private planning do not give a full comprehensive overview of activities planned nor is there a well defined budget and funds allocated to the listed activities.

5. Conclusions and Recommendations

This report provides an overview of actions undertaken in Suriname since 2007. In concluding, it can be noted that although there are a number of activities implemented, apart from a steady growth in the economic position (indexed pensions for retired civil servants, increased General Old age Provision) there is still a long way from guaranteeing all rights senior citizens are entitled to.

Remarkable is that apart from the ministry of Health and the Ministry of Social Affairs the elderly are invisible in other sectors of government policy; hence why insufficient attention is given to other aspects of senior citizen's reality. Economic security and health challenges have been the main focus with regard to the elderly in Suriname.

Although these are important basic needs much more attention should be given to other aspects: what protective factors must be put in place to support older persons to live a normal independent and healthy life, how can senior citizens enjoy their right to work, education and culture, most important discussion is how policies and programmes of other ministries and sectors do effect this population group.

Although a number of key actions are listed in government policy it should be noted that the execution power of government is lacking. Much more efforts must be committed to the realization of actions listed in policy planning and necessary staff should be appointed.

The unit "Senior care" within the ministry of Social Affairs currently focused on home care to vulnerable elderly must be transferred to a more policy oriented entity capable of steering necessary developments.

In all this a more comprehensive approach on the older population is necessary since ageing is a natural aspect of life that does not deprive older persons from all human rights they are entitled to. An important action thereto is to develop a vision on aging. As long as ageing is linked to health and survival challenges it will limit the understanding of ageing as a natural wholesome process.

In recent years VPSI as NGO has developed leadership in the issue of the elderly and has identified the need for a vision on elderly. Since then there have been no major developments though tapping into these resources could result in a major breakthrough. Another interesting party in this is BBGO. During the years this union grew to a strong and negotiating partner for government and other stakeholders concerning indexed pensions of members. This potential can be used to lobby for other pressing issues concerning the elderly in Suriname.

Although a leading role is appointed to the ministry of Social Affairs, it remains of importance to forge alliances with other non-government parties. Partnering would result in combined strength and raise opportunities for great developments.

Annex

Table 4: Annual number of persons with old age pension by district, 2003-2008

District	2003	2004	2005	2006	2007	2008
Paramaribo	18995	19628	20439	20851	21344	21774
Wanica	5710	5934	6132	6298	6500	6725
Nickerie	3001	3036	3071	3105	3150	3213
Coronie	360	341	344	312	324	309
Saramacca	1328	1354	1351	1328	1343	1354
Commewijne	2219	2247	2314	2287	2287	2313
Marowijne	1312	1371	1439	1454	1477	1505
Para	1368	1369	1397	1410	1429	1475
Brokopondo	616	640	671	658	654	665
Sipaliwini	3399	3229	3315	3395	3418	3485
Total	38308	39149	40473	41098	41926	42818

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