



Social care for
the elderly in the
Middle East

Introduction

The elderly population in the Middle East is seen in high regard in any household, with great care and respect being paid to them by their families and communities. However, as they age, they often require assistance through formal and informal care to enable them to live a dignified life.

As the population continues to grow, more support is required to cater for their growing needs. However, the framework of elderly care in the Middle East has not kept pace with growing demands and is in need of review to better address the challenges impacting elderly care.

The provision of social care varies in the region depending on specific cultural, social, and economic norms in every country. Yet one point is quite common in the Middle East: Ensuring that care provided to the elderly is seen as a way to fulfill one's obligation towards their family and community. This care encompasses day-to-day support, healthcare as well as financial assistance to empower them to live productive lives.

While still limited, we are seeing an increase in the availability of services to the elderly from governments in the Middle East. These services include financial assistance or subsidies to help families care for their elderly relatives, social insurance and protection schemes, as well as various forms of institutional care including nursing homes, assisted living facilities, and home care services. The availability and quality of these services still varies widely with often times significant disparities in access to care between different socio-economic groups and countries.

As the population of the Middle East continues to age, the issue of social care for the elderly is becoming increasingly urgent. It is critical for governments in the region to address this issue and provide adequate social care to support their elderly citizens and residents. Governments need to act now to mitigate significant future burden on families, communities, and the economy.

This article aims to provide guidance to governments in the Middle East on how to address this issue and will cover key challenges and opportunities in social care for the elderly. Through this, we hope to inspire governments to take action and begin implementing policies and programs that will support their elderly population and ensure a brighter future for all.

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Regional social care challenges

The Middle East is facing multiple social care challenges with rapid growth of the ageing population and an increased demand for caretakers. According to the International Journal on Ageing in Developing Countries, by the year 2050, the percentage of older persons will exceed 20% in 6 out of the 22 MENA countries including UAE (28%), Oman (23%), and Lebanon (21%) and will range between 12% and 19% in 9 others.¹ This presents a significant challenge for the region as it struggles to cope with the growing demand for social care services. In Saudi Arabia in particular, the elderly population is expected to rise from 4.4 per 100 citizens to 18 per 100 by 2050², further exacerbating the challenges for the provision of social care in the country.

In addition, the Middle East is characterized by a primarily residual social care system that heavily relies on family and community-based support. According to the Ageing and Elderly Care in the Arab Region Journal study³, in Middle Eastern countries like the UAE, Saudi Arabia, Jordan, Egypt, and Palestine, elderly care is primarily provided by family members. This reliance on kin is a cultural norm in the region, where long-term care needs associated with old age are seen as a familial rather than a societal responsibility, often leading to co-residency or shared households among family members.

Among the challenges impacting the Middle East is the high dependency ratio of elderly on social care. According to a study by the United Nations (UN), the dependency ratio of elderly in Middle Eastern countries is expected to increase from 7.7% in 2020 to 16.5% in 2050, which puts a significant strain on the available facilities and limited number of social care professionals.⁴ One of the main factors increasing dependencies towards facilities and caretakers is the prevalence

of chronic diseases among the elderly. Chronic diseases such as diabetes and cardiovascular disease are among the leading causes of death, which in turn is the result of adopting unhealthy long term lifestyle choices including tobacco consumption, poor nutrition, and stress. These diseases require specialized health and social care, which further increases the demand for caretakers with the necessary expertise.

The shortage of specialized caretakers and nurses that cater for the elderly further compounds the challenges already discussed. GCC countries face a shortage of qualified social care professionals and healthcare professionals, including nurses, nationally trained professionals, and certain specialized medical and social disciplines.⁵ For example, according to the Ministry of Health in the UAE, the country faces a shortage of qualified healthcare professionals, including nurses, and a rise in out migration of health professionals.⁶ This shortage of specialized nurses increases the burden on caregivers and social workers, who may not have the necessary training or expertise to provide the care needed by the elderly. In Saudi Arabia, the government has reduced its subsidies for the healthcare sector⁷ including services for the elderly in recent years in efforts to increase efficiency and fiscal discipline for the public and private healthcare sector. This has led to an increase in healthcare costs for many seniors, making it difficult for many to afford the care they need, further increasing the demand for social services, which in turn has affected the quality of life for the elderly who may be forced to go without necessary medical treatment or care. Additionally, the subsidy reduction has also affected access to affordable prescription drugs, as well as certain medical treatments and procedures.

Finally, the shift in family dynamics in the Middle East has led to little bandwidth for informal care. This stems from multiple factors; having more families with two parents both working full-time jobs, having less children that can potentially look after their elderly family members in the future, and a growing trend among youth to immigrate in pursuit of better career opportunities and lifestyles outside their country of origin. This means that more elderly individuals may be left without the support they need, which can have a negative impact on their quality of life.

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Socio-economic influences

The Middle Eastern culture prioritizes informal care by family and friends over care homes, which often times is done out of respect for the elderly and strong family connections. This is also influenced by the limited availability of essential services and facilities specialized in supporting the elderly across the public, private, and third sector, who do not necessarily have the funding needed to make services accessible and offered with high quality standards applicable to both facilities and professionals.

Additionally, there is a deficiency in housing adjustments and smart technologies to enable independent living for the elderly, as well as a lack of awareness and training programs to prepare for retirement. As of 2020, the UAE provides only a small number of home care programs⁸, which are usually offered by hospitals or private sector providers. While this is a step in the right direction, it is yet to be enough to accommodate the rising demand for home care. This leaves a direct impact on the quality of life for the elderly and the ability of informal caregivers to provide the type of care associated with aging, such as help in daily tasks, errands and complex chronic health issues due to insufficient number of care professionals and training for specialized care.

It is also important to note the high burden of financial dependence for the elderly in the region. This arises from many Middle Eastern countries that lack adequate retirement plans, jobs and volunteering opportunities post-retirement, limiting the contribution of the elderly to society and the economy and impacting their way of living.

How can governments plan social care services for an ageing population?

With the UN projecting that the number of elderly worldwide will double by 2050 to 1.5 billion⁹, and with that number being estimated to rise to 127 million by 2050 in the Middle East alone, almost 1 in every 5 citizens will be above the age of 60¹⁰. This coupled with changes in family dynamics and the limited availability of services requires more attention and support from governments to the elderly.

It is imperative for governments to develop long-term and future-proof strategies for elderly care, and take the necessary actions to support them in the future. Our view is driven by a focus on the five key areas below:

1. Policies supporting elderly care

- a. Implement policies that provide financial and social support for care givers and the elderly. This can include tax breaks for care givers and increased funding for community-based programs that provide non-financial support to the elderly.
- b. Revise policies related to family leave and job flexibility to encourage and incentivize citizens and residents to dedicate time to volunteering and informal caregiving, as well as offer hybrid work arrangements and flexible schedules to allow for family care and volunteering activities with the elderly.

2. Provision of quality social care

- a. Revise services offered by the government to the elderly to ensure their current and future needs are met. This includes expanding the range of services offered, improving the quality and accessibility of existing

services, and engaging with community organizations and stakeholders to ensure that these services meet the unique needs of the elderly population.

- b. Set training and continuous professional development requirements to improve the skillset of social care professionals and enable the delivery of a standard quality of services to the elderly across regions, demographics and types of services.

3. Collaboration with the private and third sector

- a. Incentivize the private and third sector to deliver social care services alongside the government. This can be achieved by providing financial and non-financial incentives for their involvement such as tax breaks, grants, or subsidies, as well as streamlining regulations to make it easier for these organizations to participate in service delivery.
- b. Collaborate with the private and third sector to expand the number of social care professionals and specialized workers in elderly care by establishing new training centers and providing them with assistance for enrollment in programs.

4. Technology and infrastructure

- a. Invest in technology and health monitoring devices to reduce the strain on formal and informal caregivers and including technology-based solutions to increase access to healthcare and social services. This can include remote consultations with professionals, online resources and tools for managing age-related conditions.
- b. Prioritize upgrading infrastructure to enable accessibility for the elderly population. This can include improving sidewalks and footpaths, public transportation, and public buildings to ensure that they are wheelchair accessible. Other examples may also include:
 - Improvements to public transportation, such as low-floor buses and accessible train stations, to make it easier for the elderly to move around.
 - Ramps and elevators in public buildings to facilitate easy access to all floors.

- Accessible parking spaces close to public buildings, with adequate signage and space to maneuver mobility devices.
- Widened doorways and hallways in public buildings to facilitate easy movement for those using mobility devices.
- Text-to-speech and Braille signage in public transportation and buildings to assist those with visual impairments.

5. Enabling the elderly to be active members of society

- a. Implement programs that offer education and training opportunities to the elderly. This can include partnering with community organizations and educational institutions to provide classes and workshops to help them keep up with trends and topics such as technology, skills, and entrepreneurship.

- b. Leverage the knowledge and expertise of the elderly through mentorship and volunteer programs. This can include establishing mentorship programs that connect young people with the elderly who have experience in desired fields, or volunteer programs that enable elderly individuals to use their knowledge and skills to support their communities.

Overall, it is important to create an inclusive and holistic approach to elderly care, addressing both immediate needs and long-term planning to ensure that older adults are able to lead healthy, independent, and productive lives well into their golden years.

Case in Point: The United Arab Emirates

The UAE has already started taking steps in the right direction with the following programs launched in Sharjah and Abu Dhabi:

1. Sharjah launched an age-friendly city, program¹¹, that offers 46 activities for empowerment and inclusion for the elderly. They do so by applying the eight domains of age friendly cities standards, as set by the World Health Organization, in relation to outdoor areas and buildings, transportation, housing, social participation, respect and social integration, civil participation and employment, communications and information and community support and health services.
2. The Abu Dhabi Government Services ecosystem, TAMM¹², launched an awareness campaign targeting senior citizens in Abu Dhabi to highlight and introduce a new generation of digital government services available through its platform to enable them to seamlessly access these services from a single platform without having to leave their homes. The campaign also offers them the opportunity to apply for partial employment and volunteering roles, along with the option to purchase subsidized food products.

Resources

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