

## POLICY BRIEF

# SAFEGUARDING THE RIGHTS AND WELFARE OF SENIOR CITIZENS THROUGH SOCIAL PROTECTION



## SUMMARY

The Philippine government has put in place key legislations to safeguard the welfare of its people and ensure the quality of their lives, even in old age. For instance, laws have been passed granting discounts to senior citizens whenever they purchase medicines and basic commodities. They will also become mandatory members of the country's national health insurance program the moment they reach the age of 60. Indigent senior citizens, meanwhile, also receive additional assistance in the form of social pension.

Still, members of the sector saw several gaps in the implementation of these programs. For example, they pointed out that the amount they are receiving under the Social Pension Program is already insufficient to pay for their maintenance medicines and daily subsistence, especially given the recent increases in the prices of goods and services. The discounts were neither helpful: small grocery stores and pharmacies in poor municipalities refuse to slash prices, saying only the big ones and more affluent cities can offer the discounts. Lastly, lack of awareness on the government's programs and services remain to be a problem for members of the sector, especially for those who live in far-flung areas where access to information remain elusive.

These gaps, along with several policy recommendations that cover both local and national level, are presented in this Policy Brief.

## SOCIAL PENSION

The government's Social Pension Program provides additional cash assistance to indigent senior citizens in the amount of P500 per month to augment their daily subsistence and other medical needs. The program is part of Republic Act 9994 or the Expanded Senior Citizens Act of 2010. It is subject to a review every two years by Congress, in consultation with the DSWD.

**17 of the 20 municipalities reported that many indigent senior citizens in their areas are not yet part of the Social Pension Program**

This is attributed to several factors, including: 1) the limited slots and budget provided by the regions to the municipalities to fund the program; 2) non-functional OSCA; and 3) lack of comprehensive data on qualified individuals. Meanwhile, senior citizens in some areas also noted that they were given no updates regarding the status of their application.

Given these, the LGU and MSWDO should conduct a

barangay profiling survey/mapping and enlist the help of senior citizen groups (BASCA) to explain the program and identify the qualified members of the sector. This activity should cover even those who live in far-flung areas. The list of beneficiaries should also be updated and revalidated regularly to make sure that only the indigent senior citizens are included.

Furthermore, those who already applied should be kept posted on the status of their application. The P/MSWDO should also ensure that all documents submitted during the application are complete.

**Respondents from 11 municipalities said the P1,500 social pension that senior citizens receive quarterly is not enough to pay for their basic needs such as food and medicine**

They are suggesting to increase the amount to P1,000 per month. In the meantime, municipalities such as Maydolong have increased their budget allocation for the Assistance in Crisis Situation (AICS) program.

**11 municipalities also reported that there have been delays in the payout of social pension**

Respondents attribute this to different factors, including: 1) DSWD officials are late in giving their go signal for the release of social pension; 2) some beneficiaries either submit incomplete documents during their application (ID and birth certificate) or do not claim their pension immediately, thereby affecting the liquidation. In Dolores, instances when DSWD officials did not show up during the payout release were also noted. Additionally, some members of the sector also reported having logistical difficulties in going to the venue of the payout.

The CBAMG suggest that there should be close coordination among the OSCA, MSWDO and the Municipal Accounting Office to hasten the release of social pension. The release of the cash grant should also follow a regular schedule. The MSWDO/ BASCA should inform the senior citizens should there be any delay and/or if the payout will be rescheduled so that it can be claimed and liquidated on time. Furthermore, the sector should also be informed of the guidelines and protocols observed during payout. A focal person at the MSWDO should be appointed to help in the implementation of the program.

At the national level, a Congressional Review of RA 9994 is proposed. The Congress should be able to conduct a review on the following design and schemes of the Social Pension Program:

- **Benefit level:** Increase the amount of payout that is being released quarterly;

- **Targeting System:** Revise the definition of "indigent" to include a broader set of vulnerable older persons while also considering the feasibility of more universal approaches to a social pension;
- Given the major issues identified in the accuracy of the NHTS- PR, the government should continue to use it primarily as a reference point rather than a pre-requisite for eligibility to the social pension; and
- While processes of local validation are inherently subjective, the process can be better systematized through clearer guidance on how to interpret the definition of "indigent."

Moreover, the **strengthening of accountability model/scheme** is also recommended.

- Efforts should be devoted toward increasing awareness of the scheme among potential recipients, including a comprehensive communication plan targeting different audiences;
- Clear mechanisms for submitting grievances and complaints should be strengthened and publicized;
- Validation processes should include a process of documentation that allows potential recipients to query decision-making processes regarding eligibility; and
- DSWD should work to explore improved mechanisms for delivery of social pension, including the provision of alternative mechanisms. These should aim to limit security risks both to implementers and pensioners as well as a substantial deduction from the benefit level incurred from local transportation. Senior citizens should be given a space for participation through bi-annual consultations.

## DISCOUNT PRIVILEGES

RA 9994 also entitles senior citizens to a 20% discount and an exemption from the value-added tax, if applicable, on the sale of goods and services such as medicines, transportation fares and consumable items bought from hotels and restaurants.

### *17 of the 20 municipalities, however, reported instances when senior citizens were unable to claim their discount*

Based on the monitoring results, store owners assert that only the more affluent LGUs implement the 20% discount. Officials from the LGU also stated that only the big establishments and pharmacies can afford to give the discount. Other establishments provide discount but only 10%. These cases go unreported because the members of the sector do not file a case.

Apart from this, some senior citizens also said they were not given orientations regarding this benefit, particularly those in far-flung areas. Others do not have a purchase booklet.

To address these, it has been recommended for the LGU and DTI to conduct an orientation and consultation with all establishment owners about the provision and ensure its proper implementation. There should be a common understanding between the LGU and the establishments on how to properly implement the law without aggravating the senior citizens nor the establishments. The LGU should also pass a local ordinance to ensure strict compliance of the law.

Likewise, the LGU should also provide orientations to the sector and fast-track the printing of purchase booklets.

## HEALTH BENEFITS

Several medical and health privileges for senior citizens have already been provided for by RA 9994. Additionally, Republic Act 10645 also mandates the mandatory PhilHealth coverage of all members of the sector.

Still, some senior citizens remain unaware of their rights and privileges due to inadequate knowledge about the programs and services already installed. For instance, they don't know the registration process and benefits provided by PhilHealth. To address this, the PhilHealth focal person or Rural Health Unit should conduct information dissemination activities about the program in every barangay and municipality. Orientations should also be held and IEC materials should be distributed especially in Barangay Health Centers.

The CBAMG also recommends that the national government launch other health programs and services for senior citizens, including free vaccination for pneumonia and flu. Moreover, it should also ensure the adequate supply of free medicines. Additional national standardized and monthly medical assistance should be provided to the sector on top of their PhilHealth coverage. Regular consultations with the sector should be held, too, to determine their other medical needs and design appropriate programs.

## ORGANIZING AND CITIZEN PARTICIPATION

### *3 municipalities said senior citizen associations are not organized at the barangay level*

Some Barangay Senior Citizens Association (BASCA) were reportedly inactive and non-functional. This has several implications for the sector, including: 1) they may not be informed and updated about the programs available for them; 2) they may not have a representative and may not be consulted during the barangay planning; and 3) they may have difficulties accessing and utilizing their share in the LGU's IRA.

Senior citizen associations should be created, registered and accredited in every barangay. Existing federations in the municipality should also be examined and, if necessary, re-organized. BASCA representatives should also attend and participate in the meetings organized by DSWD and re-echo the results of the discussion in their respective barangays. Senior citizens should be consulted to identify the services that they need and gather suggestions on how these can be properly implemented. SC organizations should also be encouraged to draft project proposals and access their share of the IRA. Lastly, the LGU and MSWDO should ensure that correct and adequate information about the government's programs and services reaches senior citizens, even to those who live in far-flung areas.

Other gaps that have been cited during the monitoring activity that are related to the implementation of the aforementioned laws were: 1) the absence of OSCA in the municipality and of focal persons to man the office; 2) some senior citizens remain unregistered due to lack of awareness in the process and their privileges; 3) delays in distribution and errors in the information printed on the PhilHealth ID cards; and 4) the provision of livelihood support to senior citizens who are not beneficiaries of social pension and do not have alternative sources of income.



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