

## Discrimination against Older Women in Cambodia



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Examination of the combined fourth and fifth Periodic Report of Cambodia  
(CEDAW/C/KHM/4-5)

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# Introduction

The combined fourth and fifth Periodic Report of the Kingdom of Cambodia (CEDAW/K/KHM/4-5) does not sufficiently address the discrimination and violation of rights faced by older women in relation to implementation of the articles of the Convention. Data disaggregated by age is only available for women of reproductive age and this makes it impossible to monitor any discrimination or indeed progress in implementation of the Convention in relation to older women access to social protection and healthcare.

This submission sets out the context in which poor and vulnerable older women live in Cambodia and highlights the discrimination that they experience in the areas of social protection and healthcare. It then focuses on Articles 2, 11, and 12 of the Convention with a response to CEDAW/K/KHM/4-5. Recommendations for Government action are made under each of these articles taking into account General Recommendation No. 27 on older women and protection of their human rights.

## Recommendations

We recommend that the CEDAW Committee:

### **Article 2: All forms of discrimination against women**

Urge the Government to take measures to ensure:

- Age/sex disaggregated data from age 50 years and above is monitored and made available to be used to inform policy measures.
- A life course approach towards addressing discrimination against women beyond reproductive age is taken into account when forming national policies and laws.

### **Article 11: Social security and employment benefits**

Urge the Government to take measures to ensure:

- Targeted social protection benefits to support services to enable independent living, autonomy and participation in the community for older women.
- Universal access to non-contributory pension for all households with older women over the age of 70 years.

### **Article 12: Access to healthcare**

Urge the Government to take measures to ensure:

- Targeted non-contributory insurance for older women to ensure access to affordable, available, acceptable and appropriate health care.
- Public healthcare service providers at the community level have periodic refresher training and provision of equipment to administer geriatric health and care

- Provision of affordable and good quality medicines to treat old age related chronic and non-communicable diseases.
- Provision of monthly home visits to sick and frail older women by local community health workers.

## Older women and discrimination in Cambodia

Older women face economic, social and health challenges in Cambodia and are significantly disadvantaged because of gender norms regulating their education, their caretaker duties, and their participation in the public space. In addition, the absence of formal social protection and the decline of traditional family support have resulted in increased livelihood pressures on older people, which is particularly felt by older women.

The report released by the National Institute of Statistics of the Cambodian Ministry of Planning “Demographics of Population, Ageing in Cambodia 2012”, indicated a steady increase of population ageing and acknowledged that the shift to an older age structure has important implications for Cambodia as the need for socio-economic support increases. The report highlighted some of the areas of vulnerability for older women in Cambodia including the fewer working age persons who will be supporting a larger number of older people and the higher numbers of older women experiencing widowhood.

The report also indicated a growing number of older women as compared to men. The sex ratio shows an increasing trend from 69.1 men per 100 women to 67.0 in 2018 and a projected 76.3 by 2030. Among the oldest range, the sex ratio is expected to be as low as 61.4 men per 100 women by 2030. The paper added that about 42 per cent of older women are widowed against 10 per cent of older men. For 80 years and above, widowhood dominates the status for women. The report further said that not having a spouse is a cause for concern for both older men and women. For Cambodian women who have lost their spouse, financial security poses a problem, since women generally do not own land or other assets and are dependent on their children, particularly sons. Widowhood has been equated with a high level of poverty among older women in Cambodia across a number of reports<sup>1</sup>.

Older members of society have traditionally been supported by their children or by other relatives in the wider family network. With increasing migration of young people to urban areas and to neighbouring countries in search of employment opportunities, older women faced the absence of care traditionally given by young family members and often are left as the primary caretakers for their grandchildren – these households are known as ‘skip’ generations<sup>2</sup>.

Not only the demographic trend will be an important policy concern for the RCG but the situation of older women who are also likely to be widowed have very specific challenges that require attention.

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<sup>1</sup> Report released by the National Institute of Statistics of the Cambodian Ministry of Planning “Demographics of Population, Ageing in Cambodia 2012”

<sup>2</sup> Survey of 67 project beneficiaries, HelpAge Cambodia, 2012, 50% of older women are identified as having no residing children to care of their declining health; “Migration in Cambodia: Report of the Cambodian Rural Urban Migration Project”, Ministry of Planning, Cambodia 2012

# Older women and the implementation of CEDAW

The Convention on Elimination of All Forms of Discrimination against Women, provision 11.1.e, acknowledges the equal right of women to social security including in old age. Provision 25, article 4, paragraph 1, recognizes that age is one of the grounds on which women may suffer multiple forms of discrimination. General Recommendation No. 27, "Older women and protection of their human rights" adopted 28 October 2010 compelled State parties to address multiple discriminations against older women.

Under the section "Implementation of the basic provisions of the Convention" from article 1 to 16, the Royal Government of Cambodia (RGC) failed to report on the situation of older women. Women throughout their life have specific concerns and needs and encounter different challenges. Older women's rights and needs are not expressively acknowledged in the report and the national policies and Cambodian laws do not make references to older women<sup>3</sup>.

## Article 2: All forms of discrimination against women

In paragraphs a) to g) in CEDAW/K/KHM/4-5, the Royal Government of Cambodia (RCG) recognises and respects human rights as articulated in the Charter of the United Nations, the Universal Declaration of Human Rights and the Covenants and Conventions related to human rights, women's and children's rights.

These rights are translated in the country legal frameworks, in the Article 31 of the Constitution, in the Penal Code and in a series of domestic laws cited in the report. The RCG should be commended by its efforts in mainstreaming women's concerns and needs in significant domestic laws.

However, measures encompassing older women's specific concerns and needs for social security in old age are not clearly articulated in the national policies and laws.

### **Current situation**

Women in different stages of life have changing concerns and encounter specific challenges due to the gender norms regulating their education, their caretaker duties, and their participation in the public space. However lack of data renders these specific challenges invisible and policies rarely address women's whole life course or take a life course approach. Greater attention needs to be paid to addressing the reasons for this invisibility of older women in all aspects of rights<sup>4</sup>. Age and sex disaggregated data provides essential information to understand the social and health status of women, and the different forms of discrimination that they experience throughout their lives, including in old age.

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<sup>3</sup> UN CEDAW /C/KHM/4-5 Combined fourth and fifth periodic reports of State parties: Cambodia, 2011

<sup>4</sup> Ministry of Planning presentation "Measuring Women Status And Gender Statistics in Cambodia", 2012

### **Policy recommendations for the Government**

- Age/sex disaggregated data from age 50 years and above should be monitored and made available to be used to inform policy measures.
- A life course approach towards addressing discrimination against women beyond reproductive age should be taken into account when forming national policies and laws.

## **Article 11: Social security and economic benefits**

Article 11.1e of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW, 1979) provides for the equal right of women to social security including in their old age.

Under the section 148 (CEDAW/K/KHM/4-5), the RGC stated that in its political programme, "The Ministries of [Labour and Vocational Training, and Economy and Finance] are responsible for managing the social security fund, [National Security Trust], and ensuring that its benefits reach its members in order to alleviate difficulties relating to old age..." As a result, the government has adopted appropriate measures for women who are currently employed in the formal sector, however excludes older women, especially those currently working in the informal employment sector.

### **Current situation**

Older women are also less literate than older men which limits their employability, participation and voice in community development activities. Older women are more likely to be unable to provide economic, food and material support for themselves, as compared to older men. Many older women lost spouses and children during the Khmer Rouge regime during the late 1970s. Almost half of older women are widowed, a much higher proportion than men, who have a greater chance of remarrying<sup>5</sup>.

Research has shown female widowhood coincides with a high level of poverty.<sup>6</sup> IFAD reported in rural areas, nearly 70 per cent of woman-headed households are poor and vulnerable<sup>7</sup>. WFP, ID Poor Atlas "*Identification of Poor Households in Cambodia*" August 2012 indicated that women 85 years and over who are head of a household are twice as poor than men's household in the same age group<sup>8</sup>. But even older women who are classified as 'ID Poor' are not always able to access the benefits that are involved with the scheme. Older women are lacking the traditional familial social and economic support with the extra burden of raising their grandchildren with little resources, especially in rural areas as a result of migration.

### **Policy recommendations for the Government**

- Targeted social protection benefits to support services to enable independent living, autonomy and participation in the community for older women.

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<sup>5</sup> "Older Persons in Cambodia: A Profile from the 2004 Survey of the Elderly in Cambodia", J. Knodel

<sup>6</sup> Report released by the National Institute of Statistics of the Cambodian Ministry of Planning "Demographics of Population, Ageing in Cambodia 2012"

<sup>7</sup> "Cambodia Country Result Brief", IFAD, June 2011; ID Poor Atlas "Identification of Poor Households in Cambodia" WFP, August 2012

<sup>8</sup> ID Poor Atlas "Identification of Poor Households in Cambodia" WFP, August 2012



- Universal access to non-contributory pension for all households with older women over the age of 70 years.

## Article 12: Access to health services

Under the section number 164 of CEDAW/K/KHM/4-5, the RCG states, “*The political programme of the Royal Government of Cambodia ensures that the Royal Government will provide health services for every Cambodian citizen, every citizen will have access to health services without discrimination and women will have access to the same health services as men.*”

The RCG reported commendable achievements in relation to women’s health and care in sections 165 to 178. However there is no reference about the health concerns and needs of women in old age. Health and care services in Cambodia primarily focus on child and maternal health and infectious diseases; geriatric care is not mentioned<sup>9</sup>.

### Current situation

There is little knowledge about health issues among older women. A 2009 study showed older women report worse self-assessed health and more health symptoms and physical functioning problems than men but have higher survival rates.<sup>10</sup> The study noted that unlike older men who have either an income or a pension, older women in many cases do not have the finances to access health care even when it is available<sup>11</sup>. It further added that in term of care assistance that the absence of a spouse may be a disadvantage. Since women are more likely to be widowed than men, they are disadvantaged in regards to receiving care.

HelpAge International in Cambodia reported that health problems are high amongst older women particularly hypertension, stroke, arthritis, diabetes and other non-communicable diseases. But in most of cases because of the large expense of medical care, older people very often are forced to prioritise the food and livelihood security of their families over their health and medical needs<sup>12</sup>. Older women experiencing early health problems have reduced ability to contribute to the economy and welfare of the household.

Affordable and accessible health care is very limited for older women in Cambodia, most particularly for those in rural areas. Age-related diseases and treatments are often neglected, with focus only on women of reproductive age. There is little availability for on-going support to enable older women to live independently and no capacity for the screening of disease. Information about healthy nutritional practices and an active lifestyle is provided almost exclusively by the NGO sector. There are limited programs tailored for the physical, mental, emotional and health needs of older women.

### Policy recommendations for the Government

- Targeted non-contributory insurance for older women to ensure access to affordable, available, acceptable and appropriate health care.
- Ensure that public healthcare service providers at the community level have periodic refresher training and provision of equipment to administer geriatric health and care

<sup>9</sup> RGC CEDAW report, articles 167 to 173

<sup>10</sup> Gender and Well-Being of Older Persons in Cambodia, by J. Knodel, 2009

<sup>11</sup> Ibid

<sup>12</sup> Internal report “Assessing Older People’s Access to Primary Healthcare in Cambodia”, HelpAge Cambodia, 2007

- Provide affordable and good quality medicines to treat old age related chronic and non-communicable diseases.
- Provide monthly home visits to sick and frail older women by local community health workers.