

# Women & Ageing:

*Scoping Study on Perceptions of  
Ageing Among Women in Fiji*



**FWRM**  
FIJI WOMEN'S RIGHTS MOVEMENT



Published by the Fiji Women's Rights Movement, February 2017.

This publication has been produced with the assistance of the Australian Government sponsored 3-year programme WE RISE II. The research was led and written by Monica Waqanisau, Research Officer under the Gender & Transitional Justice Programme.

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Cover page photo: Joseph Hing

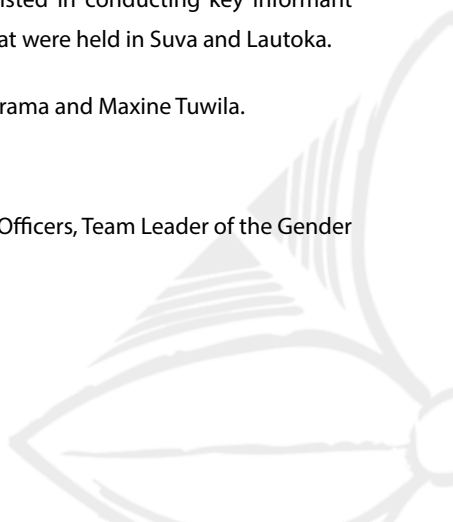
#### Research Team


The scoping research was conducted under FWRM's Gender and Transitional Justice Program (GTJ) team, led by Research Officer, Monica Waqanisau. Other FWRM staff within GTJ such as fellow Research Officer Menka Goundan, GTJ Team Leader Veena Singh, Human Rights Training Officer (HRTTO) Alanieta Velulu and Fiji Women's Forum Coordinator Losana Tuiraviravi assisted in conducting key informant interviews (KIIs). Alanieta Velulu, also assisted in co-facilitating both focus group discussions (FGDs) that were held in Suva and Lautoka.

The KIIs and FGDs were all audio recorded and transcribed by two student research interns, Tamani Rarama and Maxine Tuwila.

#### Review Process

Both the report and final layout of this publication has undergone robust review by FWRM's Research Officers, Team Leader of the Gender Transitional Justice Program, FWRM's Programme Director and Executive Director.





“The issues of ageing must be at the centre of the global development agenda. Today, the elderly are the world’s fastest-growing population group, and among the poorest. **One person in ten is 60 years or older, but by 2050, the rate will be one person in five.** We must meet the needs of the older persons who are alive today and plan ahead to meet the needs of the elderly tomorrow. **In the developing world, there are almost 400 million people over the age 60, the minority of whom are women,** and this figure is expected to rise dramatically in the coming decade.”

*UNFPA Executive Director Ms. Thoraya Obaid’s address to the Second World Assembly on Ageing in Madrid in 2002.*

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# Executive Summary

The scoping study was commissioned under the We Rise II Coalition, an Australian Government three-year funded programme, administered to Fiji feminist CSOs including the Fiji Women's Rights Movement (FWRM), femLINKPACIFIC, Diverse Voices and Action (DIVA) for Equality and Australian-based development feminist partner, the International Women's Development Agency (IWDA).

This was the first ever scoping study in Fiji to explore views about women and ageing more generally. The findings provide a snapshot of attitudes and perspectives surrounding the feminisation of ageing<sup>1</sup>, which is a phenomena that has shown that around the world, older women out number older men<sup>2</sup>, making ageing far more of a female experience. Like women of all ages, older women actively contribute to society and lead diverse vibrant lives. However, many continue to disproportionately face challenges particularly in terms of financial security and accessing healthcare.

The aim of this study is to inform FWRM's future programmes in addressing some of the issues that Fiji's ageing women have identified and recognised as systematic issues they face in country's ever-growing ageing population. Additionally, inform policy reform surrounding Fiji's National Ageing Policy<sup>3</sup>, in consideration with Fiji's National Gender policy<sup>4</sup>. Fiji's National Ageing Policy was introduced and implemented in 2011 as part of a four-year programme, while the National Gender Policy was more recently introduced and implemented in 2014.

The scoping study comprised of 2 focus group discussions (with a total of 17 participants), 17 key informant interviews and an online survey that was completed by 35 people.

## Key Findings

There was an overall consensus by the women that participated in the focus group discussions (FDGs) that the formal retirement age should revert to 60 years from the current 55 years. Participants that had retired at 55 years of age shared that they still had much to offer in terms of contribution to Fiji's labour force but that after retirement, finding work in their respected fields of experience was difficult. Poverty was also identified as directly linked to ageing, with older women not having an income base nor, were many entrepreneurially inclined. Additionally, the concept of support did not have one single interpretation. Women in the FDGs saw it as meaning: physical, emotional, psychological as well as socio-economic. That support declined for people as they aged, especially for women.

All three methods of data collection acknowledged that progression of age had a direct impact on health. There was a huge gap in adequate and accessible healthcare literacy as well as healthcare for ageing women. Furthermore, it was strongly acknowledged that while women are already marginalised in society, this is further exacerbated for openly lesbian women, women who live on the streets and or sex workers as they are often shunned in communities.

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<sup>1</sup> WHO, 2007. Women, Ageing and Health: A Framework for Action. Focus on Gender, Geneva: WHO.

<sup>2</sup> United Nations. (2015). 2015 World Population Ageing [Highlights]. New York: Department of Economic and Social Affairs.

<sup>3</sup> Ministry of Social Welfare, Women and Poverty Alleviation & Fiji: UNFPA (Government of Fiji Gazette) Pacific Sub-Regional Office. (2011, November). Fiji National Policy on Ageing 2011-2015.

<sup>4</sup> Ministry of Social Welfare, Women and Poverty Alleviation: Fiji National Gender Policy (2014). Retrieved August 20, 2016 <http://www.fiji.gov.fj/getattachment/db294b55-f2ca-4d44-bc81-f832e73cab6c/NATIONAL-GENDER-POLICY-AWARENESS.aspx/>

Additionally It was also noted that there was a lack of adequate homes for the elderly, i.e. there were not enough, and the ones in operation struggle with adequate resourcing.

Key challenges and barriers identified in the KII, FGDs discussions, which were amplified in the Online Survey were (1) women play a vital role in society but are often side-lined during decision making; (2) stigma and discrimination by society (including family members) was ongoing due to their progression in age; and (3) the continued responsibility to care and provide for their family whether financially or as 'carers' despite their advanced ageing.

A total of 35 respondents successfully completed the online survey, with a majority of them (Figure. 1-5) being: working *cis* women of iTaukei Fijian descent, between the ages of 34-41, with a tertiary level education. Of this total, 65% identified that growing old in Fiji was difficult.

The survey participants were given a list of issues that were identified in both the KIIs and FGDs, and were asked to rank them by most important- 89% agreed that adequate healthcare to address health concerns that develop with ageing was a growing issue, while only 18% agreed that a sense of isolation was an issue for ageing women. They were also given a list of contributing factors (again identified from both the key informant interviews and focus group discussions), and asked to tick the multiple factors they thought contributed to the issues—29% agreed that no priority was given to resourcing of a growing population. This was identified as the highest agreed contributing factor amongst participants.

Twenty-one percent agreed that equal contributors to issues identified were: (1) women feel an obligation to continue care work as nurturers and supporters to the family unit; (2) that there were no adequate retirement homes, and (3) that women have no or little income opportunities.

Only 6% identified additional contributors that were not raised as priority concerns in the FDGs. These included media; the increasing cost of providing for children and their families future and education (Including tertiary level), medical specialists not always available in Fiji; lack of information on menopause and growing older; and societal norms to look younger.

Moreover, 80% agreed that ageing women did not have the same opportunities as their male counterparts. Of the total number of participants that chose to answer this question— 67% agreed that women who have different sexual orientation, gender identity or gender expression experienced ageing differently. While 88% admitted to no prior knowledge of a National Ageing Policy, 12% answered yes that they knew about Fiji's Ageing Policy.

## Recommendations

In consideration of the existing literature and the recommendations highlighted by participants in this study, it articulates a strong support for further programmes or projects that address this phenomena. A summary of key programmatic and policy reform recommendations is as follows:

1. Data collected from this research should be utilised to inform a call for a review of the existing Ageing Policy. In particular, for Government to:
  - Acknowledge the gender nuance to Fiji's growing ageing population. This calls for a strong incorporation of CEDAW in the review.
  - Reverting the retirement age to 60 years rather than the current 55 years.
  - Streamlining the gender policy with the ageing policy.
2. Use information collected from this scoping research as a baseline for a bigger research that looks deeper into the poverty status of elderly women in Fiji.
3. Future programme design to target the empowerment of older women, with a focus on rural women. This programme design can be built in as a strategic plan phase to an existing programme – The Fiji Women's Forum.



# Introduction

## Context of the Project

FWRM has worked for nearly 30 years to end all forms of discrimination against women (in all their diversities) in Fiji and the Pacific Region. Our work is founded on targeted research to better inform programming, policy and advocacy work on improving women's status in Fiji and the Region.

Over the past four years the Fiji Women's Rights Movement [FWRM] has framed their work in empowering young women in all their diversities. This work builds upon FWRM's core objectives (1) to publicly address all issues affecting women's human rights, status and opportunity within Fiji; (2) to advocate for improved policy and legislation on issues affecting women's rights; (3) to promote equal access to services by women and equal opportunity through appropriate enabling actions; and, (4) to ensure the Movement remains a well-managed and sustainable organisation, giving leadership opportunities to women, networking and sharing experiences with others in the Pacific and internationally.

In terms of work, so much has been done and continues on, around empowering young women. However, FWRM acknowledges that not much has been done in Fiji to address the lack of agency women face as they age in today's society.

## The Status of Ageing Women in Fiji- An Overview

Fiji's population is ageing at a rapid pace, In response to this, a National Policy to address Ageing was developed in 2011 focusing currently on implementing services specifically for older persons within a four year timeframe. In conjunction with the National Ageing Policy, Government in 2012 endorsed the National Council for Older Persons Decree 2012, to enable the Ministry to establish a Council which will serve as an advisory arm to government on all issues related to Fiji's ageing population.<sup>5</sup> These policy pursuits can be seen as Fiji's first initiatives to adhere to the Madrid International Plan of Action on Ageing (MIPAA) there is much more that needs to be done to fulfill the three Priority Directions outlined within the MIPAA.<sup>6</sup>

The MIPAA is a comprehensive action plan for governments, civil society and others to build a society for all ages which was adopted by 159 governments at the Second World Assembly on Ageing in Madrid in 2002. The 3 key priorities of MIPAA are (1) older people and development, (2) advancing health and wellbeing into old age and (3) ensuring enabling and supportive environments.

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<sup>5</sup> Government of Fiji Gazette. (n.d.). National Council for Older Persons Decree 2012.

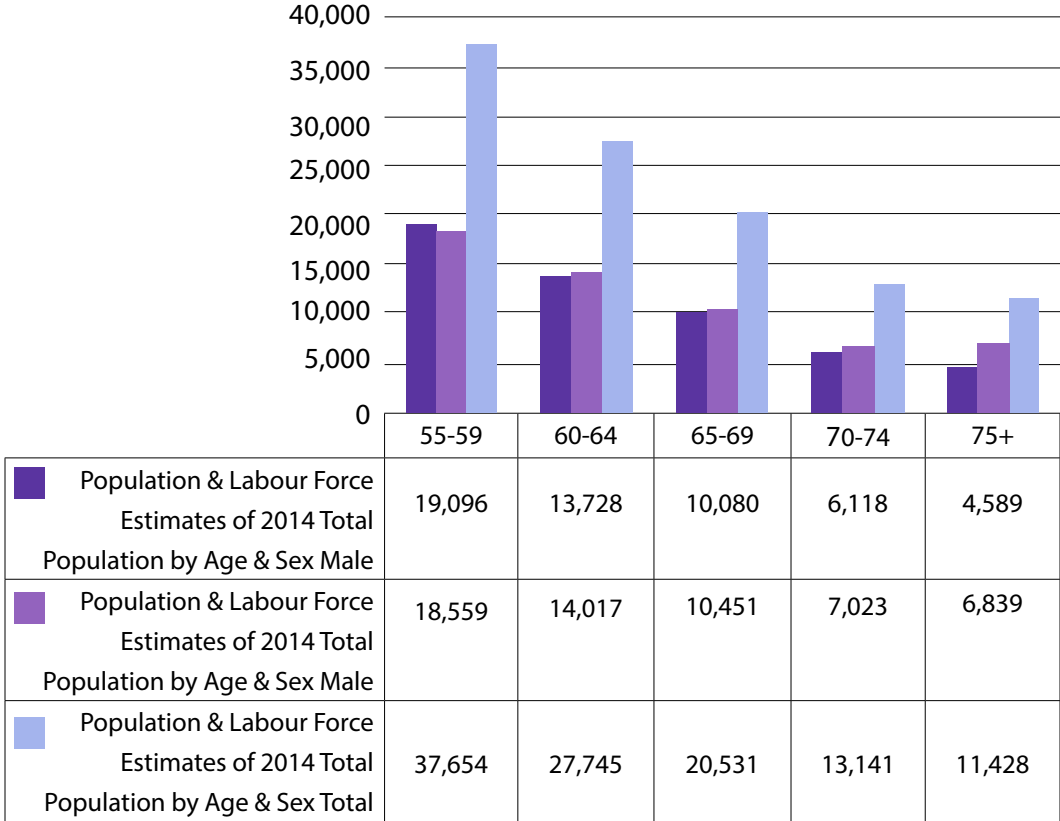
<sup>6</sup> As reported in the Ministry of Social Welfare, Women and Poverty Alleviation Annual Report 2012 and 2013. Neither Annual Report outlines specific services provided.



Despite the policy initiative under the Ministry, there is still no publicly available outline of specific services provided for Older Persons under the proposed Council. The national policy provides no specific age definition for “older person” but prescribes the international definition of 60 years and over, as well 80 years and over to define “oldest old”. In addition, there is no acknowledgment of the feminisation of ageing within the National Ageing Policy and issues specifically pertaining to this phenomena. This is interesting as Analysis pieces on the implementation of the MIPAA reiterate the global feminisation of ageing— providing specific recommendation that Policies and Programmes on Ageing must have a gender-sensitive approach.<sup>7</sup>

Fiji’s most recent census (2014)<sup>8</sup> supports country population projections conducted by the United Nations Population Fund (UNFPA) Pacific Sub-Regional Office, which shows that Fiji’s elderly population will continue to increase, with majority being female.<sup>9</sup>

**Fiji: Population & Labour Force Estimates of 2014**



<sup>7</sup> Professor Alfred Ming Chan, & Ms Phoebe Pui Yee Tang. (2012). Regional Analysis on the implementation of the Madrid International Plan on Ageing. Retrieved April 20, 2016 from [http://commons.in.edu.hk/cgi/viewcontent.cgi?article=1001&context=apias\\_tsao\\_ilc2012](http://commons.in.edu.hk/cgi/viewcontent.cgi?article=1001&context=apias_tsao_ilc2012)

<sup>8</sup> Population Census & Surveys. (2016). Population and Labour Force Estimates of 2014. Retrieved August 25, 2016 from Fiji Bureau of Statistics.

<sup>9</sup> United Nations Populations Fund. (2014). Population and Development Profiles: Pacific Island Countries. Suva.

So far little is available locally to inform policies and programmes on how the feminisation of ageing can and will affect the population impacts on development. Also how it redefines the progressive vision of women's pursuit of empowerment and gender equality for substantive development within a national scale.<sup>10</sup>

The rights and contributions of older women still remain largely invisible in society. This lack of visibility is especially problematic for ageing women who face multiple sources of disadvantages, which can be compounded further by socio-economic factors or intersectional discrimination.

## Fiji National Policy on Ageing 2011-2015- An Overview

The National Policy on Ageing was the first of its kind in the Pacific Island Countries (PICs) and was greatly informed by projections done by UNFPA, which revealed that presently Fiji's ageing population continues to increase rapidly. For an example, from 80 years and over it was estimated to increase from 5,000 in 2010 to 28,500 in 2050.

The policy acknowledging the potential for this exponential growth sought to address emerging needs of Fiji's growing ageing population. The policy also acknowledged that the majority of the growing ageing population comprised mostly of older women.

During the *Ministry for Social Welfare, Women and Poverty Alleviation*<sup>11</sup> extensive national consultations found (similarly to what this scoping study found) that:

- National poverty cannot be reduced unless poverty is alleviated amongst older persons (sic);
- Families and caregivers need support (sic);
- Particular attention needs to be paid to older women because they make up a larger population and are much more likely to be widowed, neglected and poor (sic).

The policy was developed with the technical assistance of UNFPA, particularly through key consultants<sup>12</sup>, and the assistance of Fiji Council of Social Services (FCOSS).

A midpoint report was intended for publication in 2013 to analyse the impact of the policy but none was found online.

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<sup>10</sup> United Nations Population Fund. (1994). International Conference on Population & Development Programme of Action. Retrieved April 20, 2016 from <http://www.unfpa.org/publications/international-conference-population-and-development-programme-action>.

<sup>11</sup> Now the Ministry for Women, Poverty Alleviation and Social Welfare

<sup>12</sup> Mr Geoffrey Hayes, Dr Bhakta Gubhaju and Alastair Wilkinson.

## Fiji National Gender Policy 2014 - An Overview

The policy has four high-level objectives:

- (i) improved development and quality of life for men and women;
- (ii) strengthening of linkages between gender equality and sustainable development;
- (iii) promotion of gender mainstreaming across the whole of government; and
- (iv) removal of all forms of gender inequality and discrimination.

The policy also identifies 19 specific areas of policy work that come under the responsibility of central and sector ministries. The 2010–2019 Women’s Plan of Action (of which the policy works in adherence with) is based on Fiji’s commitments to the Beijing Platform for Action and revised Pacific Platform for Action.

The plan includes a situational analysis, which provides rationales for the five main areas of concern:

- (i) Formal sector employment and livelihood;
- (ii) Equal participation in decision making;
- (iii) Elimination of violence against women and children;
- (iv) Access to basic services; and
- (v) Women and the law. To increase women’s participation in management, leadership, and socio-economic development, the government has supported the construction of 16 women’s centers in all provinces and semi-urban settlements.



# Methodology

The scoping study used a triangulation approach to collecting data on the topic of Women & Ageing in Fiji. The purpose of using this approach was not so much as cross-validation of data but rather to capture different dimensions of the same phenomenon.

## Desk & Literature Review

Before the actual implementation of the scoping research, a desk review was conducted by the lead researcher to find out what local research had been done on ageing and compared that to global research on the *Feminisation of Ageing*<sup>13</sup>. This desk review looked at existing literature as well as gaps in policy development surrounding welfare support towards Fiji's growing Ageing population. The desk review contributed to the framing of the concept paper for the research as well as content for an interview template and where applicable, support validation of the objectives of this scoping research.

A preliminary scan led to the lead researcher noting that Fiji is the only country thus far in the Pacific that has conducted a local research focusing on the growing Ageing population specifically. The Fiji Council of Social Services (FCOSS) conducted their research<sup>14</sup> in 2011, looking into issues the elderly were facing in Fiji in comparison to MIPAA. The methodology of this report was not clearly outlined but briefly it was mentioned that the study was conducted in four selected districts in Fiji. The areas included two classified as rural (Sigatoka and Tavua) and two urban (Lautoka and Suva). A total of 38 elderly people were interviewed, including 21 men and 17 women.

The report looked at the ageing population from a general viewpoint. Despite providing a graph of the 2007 (latest at that time) census, which showed that as the ageing population ascended in age more women were outliving men. The report did not acknowledge the feminisation of ageing phenomenon but rather appeared to seek validation for the newly implemented national ageing policy, which FCOSS helped to develop with the Ministry of Social Welfare, Poverty Alleviation and Department of Women (as it was referred to). The report was still vague on providing recommendations to inform substantive policy reform and implementation of the newly developed policy.

While this was the first local study that attempted a nuanced approach to reviewing the issues faced by Fiji's ageing population, the lead researcher used this as a baseline to gauge whether Fiji was mimicking the global phenomenon of feminised ageing. Furthermore, noting that as yet

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<sup>13</sup>WHO, 2007. Women, Ageing and Health: A Framework for Action. Focus on Gender. , Geneva: WHO.

<sup>14</sup> Fiji Council of Social Services in partnership with HelpAge International. (2011). Madrid International Plan for Action on Ageing (MIPAA) Fiji Report 2011. Fiji Council of Social Services.

no research has been done with a feminist approach to delve into the issues ageing women face.

The UNFPA publication on *Population Ageing in the Pacific Islands: A situation analysis*<sup>15</sup> provided substantial context into the regional dilemma, highlighting comparative similarities and challenges that PICs face in relation to respective growing ageing population. This research highlighted feminisation of ageing, and was used as a key source of information that helped the lead researcher frame the concept note for this scoping study, looking specifically at the social issues women were facing as they age and what the community perceptions were surrounding that.

### Data collection methods

1. Key Informant Interviews (KIIs) were conducted predominantly with stakeholders that worked with women and or around Fiji’s ageing population. Consent forms were administered to seek permission for interviews with key informants - stating that their information would be used anonymously unless explicitly advised to do otherwise. KIIs (as mentioned previously) were audio recorded and transcribed.

### Breakdown of KIIs:

Gender	Age category	
Women	over the age of 55	12
Women	under the age of 55	14
Men	over the age of 55	-
Men	under the age of 55	1
<b>Total</b>		<b>27</b>

2. Focus group discussions (FGDs) were framed as consultations, targeting women over the age of 65 but open to all women over the age of 55, Fiji’s formal retirement age.<sup>16</sup> Individual consent forms were not distributed but the lead researcher advised participants them of the objectives of the consultation and the topics that the program would cover. They were also informed that the sessions would be recorded with identities of all participants anonymised. Participants were encouraged to invoke ‘Chatham house’ rules where applicable.

<sup>15</sup> Hayes, G., 2009. Population Ageing in the Pacific: a situation analysis, Suva, Fiji: UNFPA Sub-Regional Office.

<sup>16</sup> Volau, N. (2009). 'Retirement Age Back at 55'. Retrieved August 23, 2016 from <http://fjijun.com.fj/2009/03/11/retirement-age-back-at-55/>

- Both methods informed the third method, which was the online perception survey. This method looked at open public perceptions around the issues that were identified from the first two methods.

## Study Areas

Two large FGDs were undertaken on the mainland of Viti Levu in the two cities of the Central and Western Division, Suva and Lautoka. Both areas were selected in consideration of its central urban population.

## Key Informant Interviews & Focus Group Discussions

The months of May and June in 2016 were delegated to capturing the experiences of women over the age of 55. This was done through KIIs and FGDs. Most KIIs that were identified and interviewed were women within the target demographic but also included stakeholders that worked with older women or on issues pertaining to Fiji's ageing population.

In May 2016, two FGDs were held in Suva and Lautoka, on the 11th and 23rd with a total of 17 participants. Throughout May and June 17 KIIs were conducted.



## Findings<sup>17</sup>

Below are selected portions from KIIs and FGDs that illustrate and highlight the diverse backgrounds of women within the target demographic (i.e. women 55 and older) and stakeholders (worked with women or on addressing issues of older people) represented. Participants that participate as either a KII or within the FGDs were asked similar questions<sup>18</sup> that were framed from the initial desk review conducted. The social themes identified from both methods contributed to the framing of the online perception survey on women and ageing.

In the FGDs, participants were asked to look at aspects surrounding their sense of agency as they aged, healthcare and socio-economic impacts. A summary of their sharing found:

### In relation to human security<sup>19</sup> participants shared:

- Where women were experiencing problems in villages. There was one incident where a widow was told to leave the house her husband had built for their family by her sons and some of her husband's relatives in the village.
- On a similar thread participants shared on experiences where their children occupy the family house with their own families and put pressure on them as widows to vacate.
- They looked at "support" as physical, emotional, psychological as well as socio-economic and that support declined for people as they aged, especially for women.

### In relation to healthcare participants shared:

- Their acknowledgement of a progression in age having a serious and direct impact to their health i.e. physical mobility, mental decline (Alzheimer's and dementia) as well as lifestyle related illness (diabetes, heart issues, cancer etc.). One participant shared that growing old meant living with disabilities became more of a reality for her as she uses crutches sometimes (due to gout) and she struggled to travel on public transport or access public health facilities as most of the vehicles and structures were not disability accessible.
- They acknowledged a lack of healthcare literacy for women such as knowing what is menopause and how to care for women during this stage in their life cycle.
- Participants also shared on access to adequate healthcare. One women from a rural dwelling shared on how they have to walk half a day to the nearest clinic and sometimes upon reaching it, found it had closed for the day.
- They identified a lack of adequate homes for the elderly- there were not enough and the ones in operation struggled with adequate resourcing.

<sup>17</sup> Case Studies were extracted from KIIs and FGDs

<sup>18</sup> A sample of the Interview questions is attached in 'Appendix.

<sup>19</sup> For the context of this study, 'human security' means freedom from violence and from the fear of violence.

### In relation to socio-economic aspects participants shared:

- Retired women said they felt that 55 was too young to retire and they still had a lot to contribute in terms of being part of the active employment force.
- Financial security was to be in jeopardy as they grew older and financial support from family was not a guarantee.
- Women are already marginalised in society, this is further exacerbated for openly lesbian women, women who live on the streets and or sex workers as they are often shunned in communities.

### Challenges & Barriers:

- They felt left out when it came to learning and using modern technology. Younger people were not willing to teach them.
- Women play a vital role in society but often sidelined during decision making.
- Stigma and discrimination by society (including family members) due to their progression in age.
  - Continued responsibility to care and provide for their family whether financially or as 'carers' despite their advanced ageing.





*Fifty year old indo-Fijian woman, working in an NGO that focuses predominantly with empowering rural women through media, based in Suva. Recounts the volunteer work her elderly mother was doing with another local NGO in collecting and facilitating discussions around the development of the National Ageing Policy as well as reflections of her own work with rural women:*

“ Let me talk about the National Ageing Policy: we were quite lucky that mum was quite involved in the gathering of information and keeping us updated. One of the things she updated us on, which we were also concerned about, was that this national ageing policy was very centric. By the time we started working with the Ba Senior Centre we noticed the need to start amplifying that partnership to highlight the need to do more work with rural women.

The rural women were not receiving any support from Social Welfare and the Department of Women; this was before the new policy was introduced. And when the policy was being created, the coordinating NGO was not that inclusive. In fact we still don't understand how the baseline for that study was done.

I'm still wondering how the ageing policy is going to influence or respond to the needs of those rural elderly. The relevant ministry is not giving any concrete solutions by simply just telling people to “take back their families” when it comes to dealing with the increase in elderly people being abandoned. I think there is a need for a real ageing policy review- taking into particular consideration that we now have CEDAW, General Recommendations 34 on Rural Women, I hope more analysis is done using that.

It's very clear that whether it's the Ageing Policy or the Gender-based Policy the government has not been making connections with CEDAW.

I feel very strongly about the Ba Senior Centre partnership we had because it supported older women by making them feel economically active by providing them with something to do. So when they talked, it was socialising, it was their health, it was their home, it was their well-being. When we go in with information to talk about their rights and what they needed our program was successful because of the way we convene. It enables (1) the older rural women to raise their issues, the younger women to hear what their issues are and that together at a district level, they can come up with the strategies. Like with all the different sub groups that we work with, while they need their space and their support, we still need to build that kind of local level condition, which is our rural women leaders' network. Because then if they have support, then to talk about family violence, they'll know that they're not alone. ”

## Case Study 2

*Sixty-eight year old iTaukei woman, president of local woman's organisation. Recounts her impressions of growing old as an indigenous woman, as well as some of the work that her organisation does with older women.*

"Growing old is a process that many people go through without really taking notice of, for example, you just work, come out of school and continued to work until you're about 50 or 60 and at that point you're not really thinking of your being old. Up till you turn 60, like for me, I know my sisters and family members, nobody discusses that we are old at that stage. It's not until you are looking at your friends and you see the signs of old age, because when I was 30 I started getting grey hair so I didn't think much of it.

In my experience, it's not emphasised that at a certain age we are considered "old", particularly for us living in the urban areas. In the rural areas, I recall from when I was younger that ageing was perceived differently. For example, if by 30 or 40 years you have your first grandchild, you are perceived as old and everyone would treat you as such. They would refer to you as "grandmother of 'so and so' or by the usage of the names that your grandchildren and family would refer to you as. This is the usual custom in iTaukei families and that has been my usual understanding of what it means to become old. So for me now at the age of 68 I have sisters who are much older than I and still think of me as their younger sister so sometimes I'm even told "you the youngest, you don't talk!"

On her thoughts on socio-economic, healthcare and agency implications for women as they age:

For many women in Fiji, if you had formal employment you were secure until you retired. You were able to afford things and life was relatively comfortable. This is different for those with no formal employment. Often they have to depend entirely on their husbands (if married) or other family members, which is very difficult.

There are many women that I have been in contact with who are living in the HART villages, in squatter areas and Housing who are not working and struggle to find money to support themselves. Many of these women resort to craft making to sell. If they are able to get money from Social Welfare, many of them would use that to become middle man sellers at the market and other places they can sell root crops and vegetables. They are often in a continuous state of struggle. They have to be able to feed their family, and if their husbands are not earning that much you can find them along the coast of Suva fishing, gathering sea shells to survive. And then there are the ones who really just don't have anything and they go begging. It's mostly women you find

begging rather than men.”

In terms of healthcare, I think it's good. The real issue is access. Sometimes women are put off by the way nurses treat them, or become embarrassed when neighbours ask them too many questions about why they went to the hospital etc.

As for agency, women often have a lot of responsibility towards their families. To care and support them. There is not much time to think of themselves in these situations.

Women also don't have the same opportunities as men. That's just the reality of things. For iTaukei women when we retire and want to go back to her village it's rarely discussed whether a woman widow or a working woman can come back to their own village to retire. And have a small piece of land that they can farm or have access to because women are often not allocated a piece of land. They have to go and ask their fathers or uncles to use land, as ownership resides with the men only.”



### *sixty year old iTaukei woman, retired nurse and active trade unionist shares on her reflections of ageing including misuse of retirement funds by women before actual retirement*

“I’m a widow right now. There are more women who are left to look after their children after their husband dies or their partner. So the responsibility for women is beyond the retirement age, if we work, that’s fine! At least we get our pension at 55 but what happens to women who are always staying home looking after the family when the husband dies? And if the FNPF is not enough than that’s another issue. Often FNPF is misused- a lot of money has been taken out for housing, for education and health so when we actually retire and get our pension, there’s a lot of deduction. The other thing that we look up to is insurance – life insurance. I’m sharing as an employed woman. From my insurance I took out 3 or 4 policies throughout my working career and I spent each before it matured because I couldn’t pay the bonus or loan that we can take to pay for our children’s education at USP.

So the FNPF pensions are reduced because of other things whereas overseas you absolutely can’t touch it. So one side is good you can have access to it because if you can’t get money from somewhere else you have that as an alternative source but you see how it impacts on our lack of income when we need it in our old age.

#### On Healthcare:

With the increase of diabetes, cancer and especially women related cancer – breast or cervical. Those are areas that really affect women because when you’re in that stage, you need someone that will look after you, will not shun you away because it’s a feminine ailment for us. I’m not too sure if the hospital is providing a lot of good palliative care for you to be looked after in your home rather than staying at the hospital. I think that’s something this government can look at, that’s where retired nurses can come in and assist.”

# Online Perception Survey

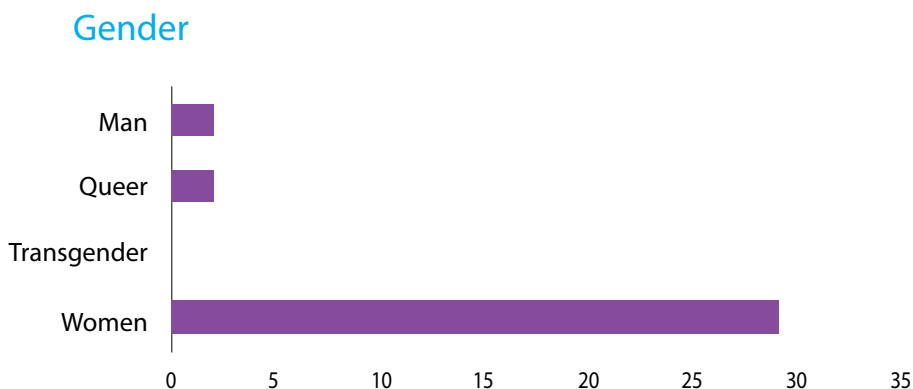
The online survey was designed as a digital questionnaire and was informed from a preliminary interview template used to guide discussions for both the KIIs and FGDs. The recurring issues that were raised from both the KIIs and FGDs further framed the final survey published online on typeform.com after a thorough consultation and feedback process with management and staff of FWRM.

The survey was disseminated to FWRM’s networks through email and social media platforms Facebook and Twitter. The purpose of the online survey was to expand the reach of the study and to gauge perceptions of women and men above the age of 18 on the Agency of Women as they age.

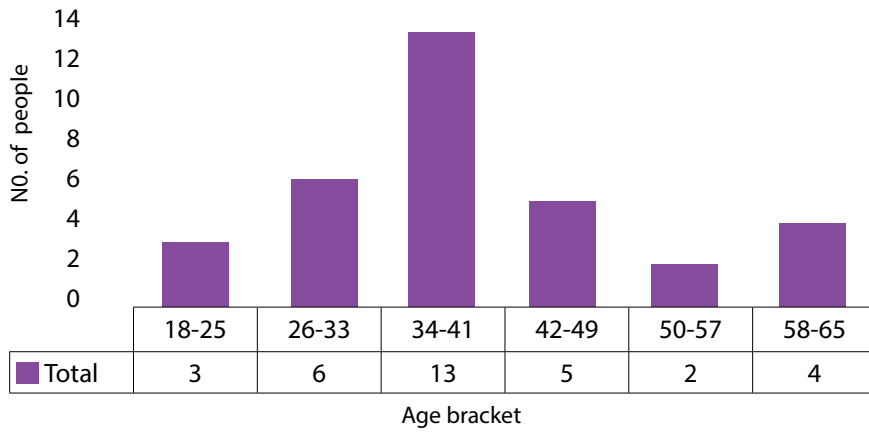
The Online Survey was targeted as an open public perception survey to gauge recurring perceptions in communities surrounding women as they age in Fiji. It was successfully completed by 35 people within the 2 week time frame that it was published on the survey platform. The Survey was launched on 14 July and closed on 1 August.

## Summary findings of Online Perception Survey

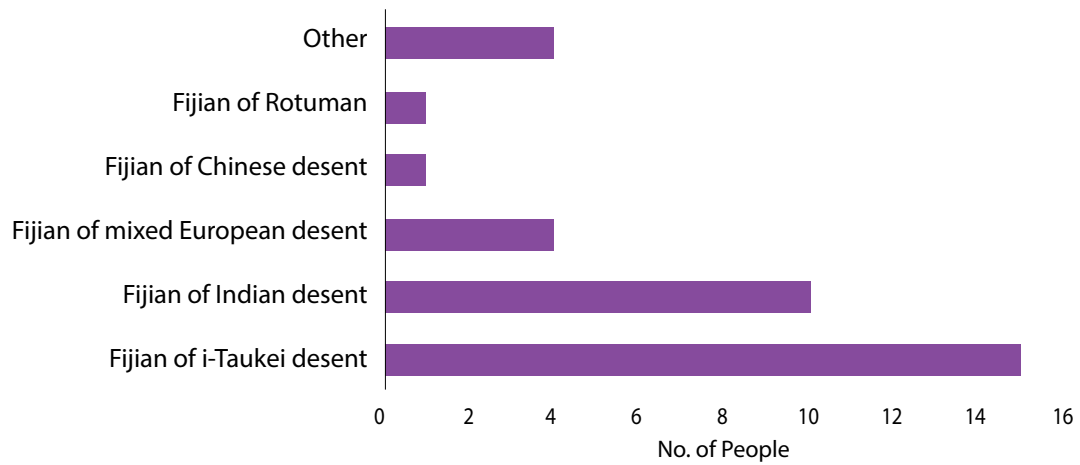
The average time to complete the survey was 14 minutes 39 seconds. A total of 35 respondents successfully completed the online survey with a majority of them (Figure. 1-5) being: working cis women of iTaukei Fijian descent, between the ages of 34-41, with a tertiary level education.



## Age bracket



## Ethnicity

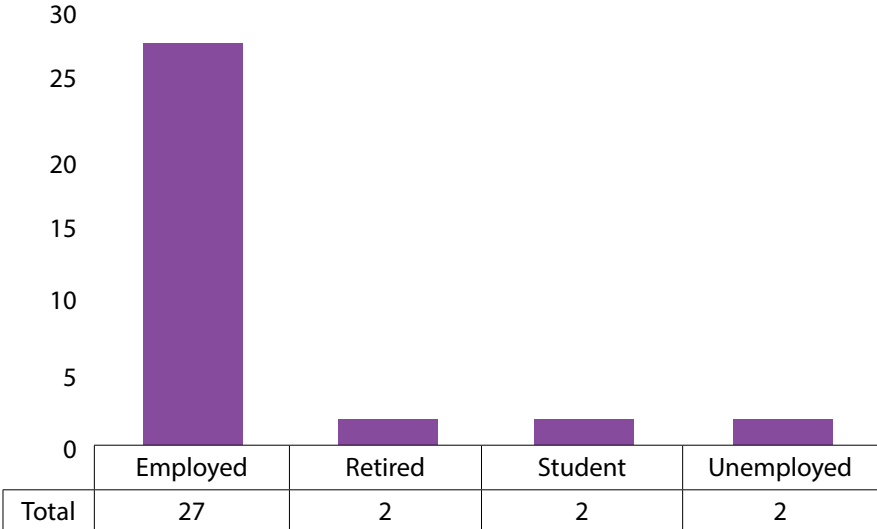


Respondents that identified as 'Other', described themselves as:

- iTaukei and European (Biracial)
- Mixed race
- European
- Fijian of mixed everything descent

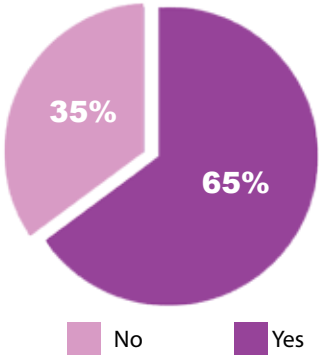
All 35 responded that they had completed tertiary level education. 83% were employed. 6% were retired, the same percentage too for students and unemployed.

### Occupation



Respondents were asked for a YES or NO response to the question: Do you think growing old in Fiji is easy? 34 out of 35 of the participants answered this question, with 65% NO and 35% YES.

### Perception of growing old in Fiji

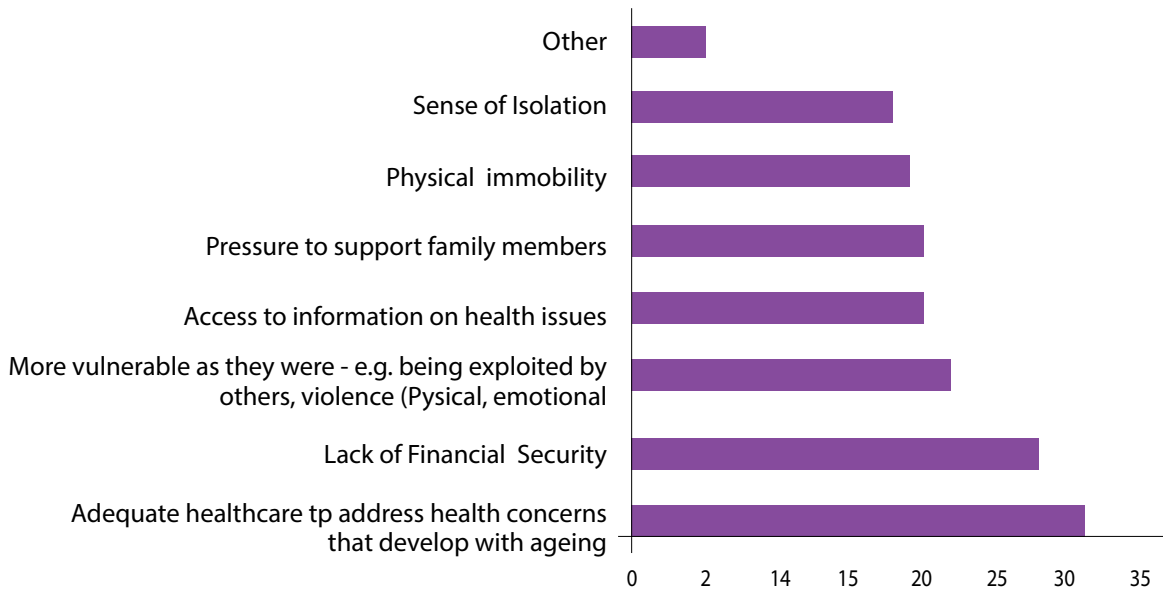


This led to the first of two open ended questions that sought perception on the issues that women faced the most. The issues listed were highlighted from the KIIs and FGDs.

Respondents were asked to tick the multiple issues they thought occurred the most with ageing women.

89% agreed that adequate healthcare to address health concerns that develop with ageing was a growing issue, while only 18% agreed that a sense of isolation was an issue for ageing women.



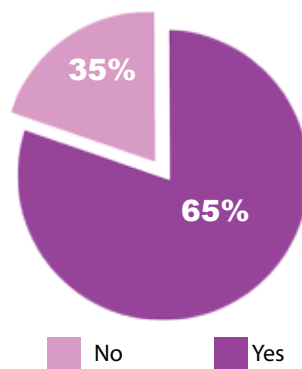


The 14% that identified other issues stated these as:

- To continue looking 'young' and rejected by partners
- That feeling of hopelessness despite having all of life's experiences, you are no longer wanted or respected by younger generation
- Mental health as bodies age and change
- Dementia, immobility, Alzheimer's disease etc.

Similar to the previous question, respondents were asked to tick the multiple factors they thought contributed to the issues they agreed with.

### Perception on Women's Opportunities, as they age



Respondents were also asked to give a brief explanation of why they answered YES or NO. 83% chose to provide an extra brief explanation.

Samples of explanations for respondents that answered NO:

- Women often retain responsibilities as they age- childcare, cooking, cleaning - that men do not have
- It depends on lifestyle. Some older women do have the luxury of enjoying the same, if not more, leisurely activities that men enjoy. In other instances, older women still carry the mentality they had in their youth as nurturers and carers and perhaps spend their time looking after grandchildren or the home whilst their husband spends time enjoying other activities
- Commitment to look after younger children in the family
- Indian widows are treated as outcast in their society and not allowed to participate in many festivals or be a part of wedding ceremonies. Somehow they are labelled 'untouchable'
- Being female and also being an elderly person creates unique challenges. And what makes it worse is the fact that even ageing doesn't stop discrimination or bias from affecting women. The Pacific culture is also a largely patriarchal one and that dictates life as we know it for many Pacific women. With men being given privilege, there exists inequality in everything she does. Her needs are not being met because others override it. Everything is interlinked to our identities as women; health care, resources, educational opportunities, finance etc.
- There is an expectation that women are the 'organizers'
- There aren't any sports or social activities or clubs specifically for women. Most have to rely on religious groups for out of home activities
- There is an assumption when one ages that there is interest in leisure. Women also feel guilty taking time out for their own needs
- Men still hold positions in their community as they age, women however, when they reach a certain age they are automatically seen as unfit to carry out similar roles
- No expectation that older women in may be interested in different activities beyond church, flower arranging, growing pot plants etc.

- Women are culturally viewed as primary caregivers and so are obliged to put others before themselves. With that there hasn't been a whole lot of opportunities to develop organized activities for the ageing female population
- Cultural limitations, safety, and social norms
- Safety concerns for women (young and old) doing outdoor leisure activities day or night. For women in rural and maritime areas, leisure activity options are limited even further. Transportation is also an issue for older citizens in rural and maritime areas for leisure activities
- Women do not have many forums to discuss the difficulties they face in life at an old age

Samples of explanations for respondents that answered YES:

- Women are more active than men on the whole. They continue their roles and devote more time to the community, church, family etc.
- Most of the older women I know are members of senior fellowship at church, bible study groups, women's groups (sewing, handicraft etc.), and card groups. I realised that all these women had social networks or were active in them at a younger age so they continue to do so as they age. They continue to contribute to the communities they are in.
- In some respects ageing women have better networks -either personal, informal, church, craft etc.
- Women have their friends and network and have hobbies-native men do not have these services
- Besides church and community based activities - there were little to no activities designed for the elderly that I am aware of

Respondents were then asked whether they perceived women who have different sexual orientation, gender identity or gender expression experienced ageing differently?

Only 33 of the 35 of respondents chose to answer this question. Of those that answered, 67% answered YES while 33% answered NO. Of the 67% that answered YES, 45.4% provided a brief explanation of their answer. Responses were:

- Lesbian, trans, bi women often face barriers to healthcare (discrimination, stigma) that make it harder to cope with ageing
- Issues around stigma and discrimination for LGBTIQ persons are still prevalent. This may impinge on their access to services based on attitudes of staff in service provider roles
- It would be easier for women in lesbian relationships because it is easier to communicate emotionally
- Every woman has her needs given the fact that no two women are alike. Women will thus experience ageing differently according to their preferences
- Lack of family support and talents are under-utilised
- They perhaps have less financial security as hetero-sexual relationships
- Women are not expected to experience and enjoy sexual desires
- Women face marginalisation in many areas. Having a non-conforming gender or sexual identity has a compounding effect
- There may be discrimination throughout their lives based on sexuality but in terms of the physical and social effects of ageing, I think the differences are probably not as significant as the similarities. Viewing ageing problems particularly from physical changes, the main differences of significance would be income and poverty - and impacts on health care and nutrition. These may add up positively or negatively
- Yes there would be different issues faced by trans women (especially trans men) and lesbians which are different from cis gender women. Their physical and mental issues are not addressed or there are no spaces for discussions of these. They already face so much discrimination and stigma that when they age this becomes worse. Their already vulnerable space in society is further scrutinised and they have little if any social support systems. They face violence as well. And often they are isolated
- Well they will certainly be more adventurous since they are non-conformists they will probably have more fun during their later years than other senior citizens who conform to generalized perceptions

Respondents were asked to answer YES or NO whether they knew if Fiji had a National Ageing Policy. 34 out of 35 answered, with 88% admitting to having no prior knowledge of an Ageing policy while 12% answered yes that they knew that Fiji had an Ageing Policy.

Respondents were asked to answer YES or NO if they thought enough was being done to address the issues that Fiji's older population were experiencing. 34 out of 35 answered, with 100 % responding NO.

Respondents were asked to answer YES or NO if they knew of any community programs that focus on assisting Fiji's ageing population. All 35 respondents answered this question, with 74% NO and 26% YES. Those that answered YES were provided an option for a brief explanation of the community programs. The responses were:

- The Wesley Division of the Methodist Church has a Senior Fellowship program
- Some churches have Welfare programs for senior members and single parent households
- The Ministry of Health provides special care for the elderly through improvised service provisions and alternative health care accessibility provisions
- The Fiji Council for Social Services used to provide a program for older persons
- Aware of nursing homes run by private charities but nothing in the public system. Health information for women is very age specific (not age sensitive) generally
- Limited to religious spheres and social support - such as elderly care homes. Government Ageing Policy that I know of was from 2011-2015- not sure I know if there is a new version of this - but there is limited financial support
- Golden Age home has been a supportive institution in Fiji, however it has always been fighting for resources to sustain its activities
- Reduced bus fares and other financial discounts for the elderly by the Government
- Fiji Disability Campaign for elderly citizens

Respondents were asked whether they thought existing programs were effective. 13 out of the 35 respondents answered this question. 54% answered NO and 46% YES.

The last question asked what type of programs would they like to see that would address the issues that women experience as they age? 27 of the 35 respondents provided the following Recommendations<sup>20</sup>:

- Programs should be targeted at the young, to create a generation that appreciates older people. No use having programs for the aged when they cannot attend because they are busy trying to work for their families.
- A general retirement plan regardless of income.
- Better health information on ageing health issues. Gender and gender information on ageing health issues is needed. Huge reorientation needed to provide programs addressing ageing needs
- Create homes for old women especially those in their 50's
- Walking groups, yoga, volunteer opportunities e.g. at museum, library
- More opportunities given to them as agents of change in our communities such as :
  - 1) Facilitators or Trainers
  - 2) Temporary Special Measures
- Financial literacy or programmes that create financial security for them
- All approaches need to be context specific and rights based with universal access to comprehensive information and quality services. Programmes should address financial support based on needs and so that the elderly lead dignified lives
- Concessions need to be made for public services for the elderly and these need to be universal and of quality. Health needs must be addressed including mental health, sexuality (we need to counter the notion that the elderly are asexual), cancers including reproductive cancers and concessions must be made for services for these expensive treatments. There needs to be awareness programmes for these issues and government policies for the elderly. There should be active removal of discrimination and stigma

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<sup>20</sup> Recurring recommendations have been collated into single entries for the purpose of this report.

- Definitely improved medical services for the elderly
- Proper nursing homes
- Healthcare - access to quality services and medicines
- Sexual and Reproductive health services - access, quality services and support for income generation
- Healthcare programmes targeted at older women 55+ years, with a focus in rural and maritime zones.
- Safe Homes for women whose families cannot care for them, in urban and rural areas.
- Certification in Caregiving for older citizens/disabled to be provided in tertiary institutions (public/private partnership) to build up cadre of qualified caregivers
- More social events to bring together women of the same age group
- Programs that continue to utilise the skills and experiences of retirees etc. :
  - 1) For the wisdom they can impart, and
  - 2) To keep them engaged and feeling worthy.
- Target programs to the families for elderly women to take responsibility for their mothers.

## Limitations

1. The time allocation in implementing the scoping study played a major role in limiting the number of people that the research team potentially hoped to reach. Time was impacted from post Tropical Cyclone Winston recovery. This clearly showed on the numbers that turned up to the consultations. Time was also a factor when it came to scheduling interviews with identified KIIs. Scheduling appointments was hindered by competing work schedules of either interviewer or potential KII.
2. Key Stakeholders that we had hoped to speak to directly to gather insight into the conceptualisation of the Ageing policy such as the Minister for Women, Children and Poverty Alleviation and or her Permanent Secretary proved an ongoing challenge during the timeline of this scoping study. The lead researcher in her reflection and reports highlighted that she had sent emails to the Permanent Secretary requesting a personal meeting (this was followed up with hand delivered letters of the same) but no response was made. Both the emails and hand delivered letters were delivered with an annexure of the concept note of this study. It was interesting to note, that despite no direct response from the Ministry, the lead researcher did find remarks attributed to the Minister speaking at a Regional Expert Forum on Population Ageing in Bangkok, where she acknowledged that ageing is a gender issue.<sup>21</sup>
3. Some of the participants in the FGDs shared with the research team their reluctance and difficulty in making their way to attend the FGDs. Two participants during the Suva FGDs evaluation time shared on their initial reservation in attending but decided to stay throughout the consultation as they found the discussions amongst the participants engaging, compelling them to share their experiences as well.
4. The online survey was also bound by time as the research team had to complete both the KIIs and FGDs beforehand. Both were used to inform the survey, before it could be launched online. As the research was already hindered by late implementation due to Tropical Cyclone Winston, the survey was made available for only two weeks online.

This also impacted on representation from women living with disabilities and transwomen for both the KIIs and FGDs.

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<sup>21</sup> Qalubau, S., 2016. Newswire.. [Online]

Available at: <https://www.newswire.com.fj/focus/women/akbar-population-ageing-is-a-gender-issue/> [Accessed 15 July 2016].



# Conclusion

The key objective of finding out whether Fiji was indeed mirroring global population trends of ageing becoming more a woman's experience was validated through this scoping research. From thereon, FWRM through this scoping research sought to find out more on the perceptions surrounding women and the ageing process. From the findings of this scoping research, FWRM has identified a gap in both policy and services to address the nuanced issues that women experience as they age in Fiji. Especially in consideration of the impacts that ageing has on exacerbating pressures women experience in patriarchal constraints often imposed in society. For example, the continued pressure to remain carers for their families despite their advanced ageing.

The scoping research highlighted concerns surrounding ageing's effects on women's overall sense of agency and self-determination, especially in correlation to health and financial literacy. This scoping study was an opportunity for FWRM to gather insight into women's experience with ageing and the issues encountered surrounding this phenomena, as well as a reflective one. Reflective in the sense that this scoping research was an opportunity for FWRM to gauge what are some programmatic gaps, which FWRM could potentially consider, in addressing some concerns women encounter as they age in today's society.



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## Appendix

### Sample of Interview Template used for KIIs

#### Women and Ageing Scoping Research Interview Questions

1. What are your impressions of growing old in Fiji? [i.e. Experiences or factors that help/ or don't]
2. (a). What are, in your opinion, issues that women face as they age?
  - i. From a Socio-Economic aspect
  - ii. Healthcare
  - iii. Others(b). What are some issues that you face?
3. Do you think that women as they age have the same equal opportunities as their male counterparts?
4. Does your work involve a lot of interaction with older women? Yes/No [\*Allow them to provide details here]
5. What are some of the impressions you've experienced from working with older women?
6. What are your impressions of LBT women as they age? [This Q. applicable specifically to LBT women]
  - i. Do you think they are treated the same as heteronormative women going through the ageing process?
7. Do you know that there's a National Ageing Policy in place by the Ministry of Women, Poverty Alleviation and Department of Social Welfare? Yes/No
8. (a). Do you have any programs that focuses solely on addressing issues that Older Women face? Yes/No  
(b). Do you know of any programs that addresses issues that Older Women Face?
9. Any other thoughts/anecdotes/impressions?

PROGRAM		
Time	Topic	Objectives
9: 00 am – 9: 30 am	Registration	
9: 30 am – 9: 45 am	Welcome	<ul style="list-style-type: none"> <li>• Participants to know each other, comfortable with each other.</li> <li>• Participants come up with their own ground Rules/interactive sessions. FWRM wants to hear from them their lived experiences.</li> </ul>
9: 45 am – 10: 15 am	Presentation	<ul style="list-style-type: none"> <li>• Provide understanding/ information to participants on women and ageing</li> <li>• Discuss on the 3 thematic areas; Health, Socio-Economics and Human Security</li> <li>• Outline the day's discussion, what, who, why and how</li> </ul>
10: 15 am – 10: 30 am	Q&A	<ul style="list-style-type: none"> <li>• Clarify any questions or confusion regarding the thematic areas</li> </ul>
10:30 am – 11: 00 am	MORNING	TEA
11:00 am – 12:00pm	3 Thematic Areas Group Activity Diamond Ranking	<ul style="list-style-type: none"> <li>• Participants rank which of three thematic areas; Health, Socio-Economics and Human Security is important to them and discuss reasoning for their ranking.</li> <li>• To understand women's understanding of these three thematic areas</li> <li>• Analyze women's reasoning of why they give importance to one of the thematic areas</li> </ul>
12:00pm – 12:30pm	LUNCH	TIME
12: 30 pm – 3. 30pm	Energizer Group Presentation and Discussion X 3 Groups	<ul style="list-style-type: none"> <li>• Discuss participants lived experiences and realities</li> <li>• Explore communities expectations and perceptions towards older women</li> </ul>
3:30pm– 4:00pm	AFTERNOON	TEA

# Women & Ageing Perception Survey

The Fiji Women's Rights Movement is conducting a scoping study on women and ageing. Your voluntary and anonymous participation in this online perception survey will be appreciated.

The survey is framed in a multiple choice format. Please tick only one option for questions 1-5.

## 1. Gender

- Woman       Man       Transgender       Queer

## 2. Age bracket

- 18-25       26-33       34-41  
 42-49       50-57       58-65  
 65+

## 3. Ethnicity

- Fijian of i-Taukei       Fijian of Indian decent  
 Fijian of Rotuman       Fijian of Chinese decent  
 Fijian of mixed European       Other. Please briefly specify

4. Educational background

- Primary       Secondary       Tertiary       Other. Please briefly specify:

5. Occupation

- Student       Employed       Unemployed  
 Retired       None       Other. Please briefly specify:

6. Do you think growing old in Fiji is easy?

- Yes       No

Please briefly explain your answer:

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7. Studies show that women around the world are outliving men. This has led to ageing becoming more a women's experience.

Below are thematic areas that women over the age of 55 have identified varying issues under. Tick the issue(s) you think women face the most often as they age in Fiji (you can tick more than one from the options listed):

- Sense of Isolation
- More vulnerable as they age - e.g. being exploited by others, violence (physical, emotional, psychological).

- Lack of Financial Security
- Pressure to support family members.
- Adequate healthcare to relieve health concerns that develop with ageing.
- Access to information on health issues.
- Physical immobility.
- Other. Please briefly explain your answer:

8. Tick the following factors you think contribute to the issues highlighted above (you can tick more than one from the options listed).

- Children and other family members spend very little quality time.
- Access to information on services provided by government and other stakeholders for older women.
- No one to look after ageing women.
- No adequate retirement homes.
- Widows are made to feel as outsiders in the community.
- Women have no or little income opportunities.

Women feel an obligation to act as nurturers and supporters.

No priority given to resourcing of growing ageing population.

Mobility is restricted for ageing women.

Other. Please briefly explain your answer:

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9. Do you think women have the same opportunities as men in terms of leisure activities or participating as active members in their communities, as they age?

Yes  No

Please briefly explain your answer:

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10. Do you think that women who have different sexual orientation, gender identity or gender expression experience ageing differently?

(\*Sexual orientation- an inherent emotional, romantic or sexual attraction to other people.

\*Gender identity- how individuals perceive themselves and what they call themselves. One's gender identity can be the same or different from their sex assigned at birth.

\*Gender expression- External appearance of one's gender identity, usually expressed through behaviour, clothing, haircut or voice, and which may or may not conform to socially defined behaviours and characteristics typically associated with being either masculine or feminine.)



Yes  No

If yes, please briefly explain your answer:

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11. Do you know that Fiji has a National Ageing Policy?

Yes  No

12. Do you think enough is being done to address the issues that Fiji's older population experience?

Yes  No

13. Do you know of any community programs that focus on assisting Fiji's ageing population?

Yes  No

If yes, please briefly describe the programs:

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Disregard the following question and proceed to question 15 if you answered 'No' for question 13.

14. Are these programs effective?

Yes  No

15. What programs would you like to see that would address issues that women experience as they age?

Please briefly explain your answer:

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THANK YOU FOR YOUR PARTICIPATION!  
END.





Australian Government  
Department of Foreign Affairs and Trade

