

## Joint Programme Document

- Template (final) -

## A. COVER PAGE

- 1. Fund Name: Joint SDG Fund
- 2. MPTFO Project Reference Number:

**3. Joint programme title**: Nodo Platform: Improving social protection and inclusion of the elderly through ICT.

- 4. Short title: NODO Platform
- 5. Country and region: Chile Latin America and the Caribbean
- 6. Resident Coordinator: Silvia Rucks; silvia.rucks@one.un.org

#### 7. UN Joint programme focal point:

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#### 8. Government Joint Programme focal point:

- SENAMA (National Office for the Elderly): Bernardita Bulnes, Cabinet Advisor, National Management Division, <u>bbulnes@senama.gov.cl</u>

#### 9. Short description:

The general objective of this project is to increase social inclusion and protections for the elderly, through strengthening community networks and improving access to the various programmes, services and social benefits available to them.

Social protection programs have so far focused on material, physical and emotional aspects of well-being. However, less emphasis has been placed on the role that interpersonal relations, social connections and community participation play in the integral well-being of the elderly. This project, then, aims at filling that gap, adding community and social networks to programming for this group. Since all these dimensions are mutually reinforcing, it is expected that adding the community aspect will contribute to a more robust social protection system, that will positively impact both the elderly's actual well-being and their perception of their guality of life.

Specifically, the objective is to promote and strengthen the elderly's social connections though community support and involvement and digital-based networks, as a means to reducing the barriers that prevent them from fully participating in society and exercising all their rights. In addition, the project will have a particular emphasis on women within this age group, and on rural sectors. Ultimately, it is expected that this approach will become integrated in future policy making and government programming.



This is particularly relevant in the current context of social mobilization in the country, triggered by demands to improve social protection mechanisms, with a special emphasis in pensions and health systems. It is thus essencial and timely to address these problems offering innovative solutions from a sustainable development approach.

In representation of the Government of Chile, the Social Development and Family Ministry's National Office for the Elderly (SENAMA) will co-lead the process of designing, implementing, monitoring and evaluating the joint programme, ensuring the participation of the various Ministries that provide social protection services. It is expected that after two years this initiative will be incorporated into the State's social protection system.

#### 10. Keywords:

- Social protection
- Inclusion
- Elderly people
- Support network
- ICT
- Focus on women
- Accompaniment

## **11. Overview of budget**

Joint SDG Fund contribution	USD 1,550,000
Co-funding UNDP	USD 230.136
Co-funding FAO	USD 205.600
Co-funding ILO	USD 223.200
TOTAL	USD 2,208,936

#### 12. Timeframe:

Start date	End date	<b>Duration</b> (in months)
2 January 2020	31 December 2021	24 months

#### **13. Gender Marker**: (see annex)

Total scoring 2.6

#### **14. Target groups** (including groups left behind or at risk of being left behind)

List of marginalized and vulnerable groups	Direct influence	Indirect influence
Women	х	
Children		Х
Youth	х	
Persons with disabilities	х	
Older persons	х	
Minorities (incl. ethnic, religious, linguistic)		Х
Indigenous peoples		Х
Rural population		Х
Human rights defenders (incl. NGOs, journalists, union leaders, whistleblowers)		x
Migrants		Х
Internally displaced persons		х

Senior caregivers X

#### **15. Human Rights Mechanisms related to the Joint Programme**

- UPR 2019: 125.90 Streamline efforts and include the participation of relevant stakeholders, including civil society, <u>to reduce marginalization of older persons and</u> <u>increase their inclusion in society</u> (Malaysia);
- UPR 2019: 125.124 Provide medical services at low prices, particularly to assist persons with disabilities and <u>older persons</u> (Saudi Arabia);
- CEDAW Committee 2018: 41. The Committee recommends that the State party: (a) <u>Strengthen its national poverty reduction strategy to focus on the most disadvantaged</u> <u>and marginalized groups of women, in particular indigenous women and rural women,</u> ensure that the Sustainable Development Goals are implemented in a fully inclusive manner and encourage the active participation of women in decision-making processes that affect their lives;
- CEDAW Committee 2018: 15. [...] the Committee recommends that the State party:

   (b) Ensure that information on legal remedies is available to women who are victims of gender-based violence, including in indigenous languages and in formats accessible to women with disabilities, and introduce a system of mobile courts and free legal aid to facilitate access to justice for women living in rural and remote areas;
- CEDAW Committee 2018: 41. The Committee recommends that the State party: (b) <u>Further review the pension system so as to eliminate all provisions that discriminate</u> <u>against women</u>, including the gaps preventing women from receiving the same pension as men;
- **CEDAW Committee 2018:** 43. <u>The Committee recommends that the State party</u> intensify its support programmes for rural women, in particular through the State Bank programme to support women entrepreneurs and its corresponding training initiatives. It further recommends that the State party <u>guarantee access to adequate health care</u> <u>and education for rural women</u>, in particular seasonal workers, and provide a detailed analysis of the situation of rural women in its eighth periodic report. The Committee also recommends that the State party expand its national strategic plan for disaster risk management to the areas that are most vulnerable to climate change, in particular Patagonia, and ensure the active participation of women in decision-making at all levels in that regard.
- **CRPD Committee 2016:** 40. The Committee recommends that the State party <u>include</u> women, children and <u>older persons with disabilities in policies to protect against</u> <u>violence that take into account gender, disability and age</u>. It also requests the State party to set up an independent oversight mechanism to register reported cases and monitor service providers.
- Special Rapporteur on extreme poverty and human rights 2016 (mission to Chile in 2015): 69. [...] In addition to programmes designed to encourage the male population to take greater responsibility for caring, the Special Rapporteur recommends that there be greater investment in community care facilities and measures to give economic recognition to the work done by unpaid care workers be considered.
- ESCR Committee 2015: 20. [...] the Committee urges the State party to: (a) Intensify its efforts to establish a social security system that will ensure broad social coverage and sufficient benefits to all workers and all individuals, including the most disadvantaged and marginalized groups, so that they may enjoy decent living conditions; (b) <u>Redouble its efforts to establish social protection floors that include</u> <u>basic social security entitlements</u>; (c) Take the necessary measures to ensure that the



social security system functions effectively, even where the responsibility to fulfil this right, particularly in the case of the pension system, has been delegated to non-State entities.

• **ESCR Committee 2015:** 21. [...] The Committee recommends that the State party should adopt measures to strengthen programmes for preventing and eliminating the economic exploitation of children and for providing support to poor families.

## 16. PUNO and Partners:

## 16.1 PUNO

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## 16.2 Partners

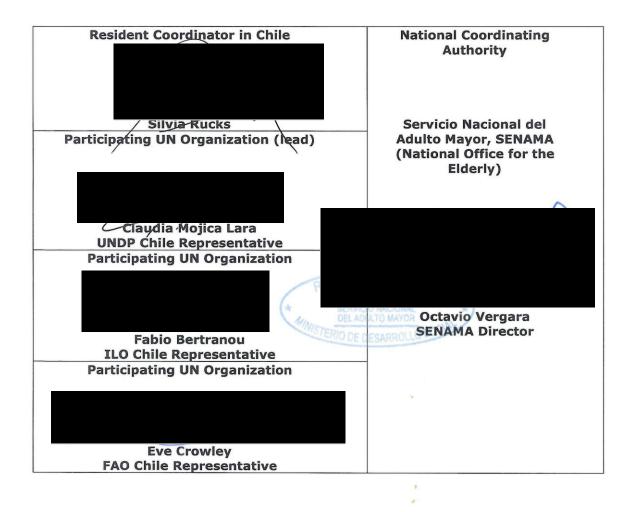
- National authorities:
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  - MINISTERIO DESARROLLO SOCIAL Y FAMILIA (Equipo Programa 'Compromiso País'/ 'Commitment to the Country' Programme Team), Lucía Armanet, larmanet@desarrollosocial.cl, 56227635504
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## **SIGNATURE PAGE**





## **B. STRATEGIC FRAMEWORK**

1. Call for Concept Notes: 1/2019

#### 2. Relevant Joint SDG Fund Outcomes

- Outcome 1: Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

## **3. Overview of the Joint Programme Results**

- 3.1 Outcomes
  - Effect 1: In 2022, institutions and social entities work in an intersectoral manner to develop and implement policies to address inequality, vulnerability and social exclusion (Direct effect N° 5 Cooperation Framework for Development in Chile, 2019-2022).
  - Effect 2: The elderly have access support networks created at a community level and available social benefits, in an articulated manner.

3.2 Outputs

- 1.1 Community networks, designed participatively, to provide services to the elderly.
- 1.2 National and regional public institutions, and other social organizations, use data and knowledge created through the support networks.
- 2.1 Community networks implemented and evaluated at the municipal level.
- 2.2 Consolidated caregivers support system aimed at redistributing these tasks and improving the quality of caregivers.

#### 4. SDG Targets directly addressed by the Joint Programme

4.1 List of targets

- SDG 1
- Target 1.3: Implement country-wide policies and social protection systems for all, including setting minimum standards, and by 2030 achieve substantial coverage of the poor and the vulnerable.

SDG 5

- Target 5.2: Eliminate all forms of violence against all women in the public and private spheres

Target 5.4: Acknowledge and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family.

- SDG 10

Target 10.2: By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.



#### 4.2 Expected SDG impact

The program will accelerate progress towards SDGs 1, 5 and 10 focusing on advancing social inclusion of the elderly, through strengthening community organization networks and improving access to public and private services available to older adults.

By supporting the community to play a greater role in caring for the elderly, the program will strengthen social protections. Likewise, connecting private and public services to the elderly and their caregivers will improve senior citizens' access to a wide range of benefits. All this will ultimately contribute to reducing poverty among this group.

The program will also accelerate SDG 10, as dependent older adults and their caregivers are subject to specific vulnerabilities related to their condition, which are even greater after the age of 60. Also, by paying special attention to the specific needs of elderly women, the program will accelerate SDG 5.

#### 5. Relevant objective/s from the national SDG framework

- Aligned with the 2030 Agenda, the government plan set the objective of "changing the concept of old age from dependence and burden to the acknowledgement of the contribution the elderly can make to society and their right to remain active" (Government Programme p.16). Two public policies have been created for this goal: the "National Agreement for Integral Development" and "Compromiso País". The government has reported on them in the Second National Volunteer report, which was presented in the High-Level Political Forum on Sustainable Development.

- Through these measures, direct and indirect contributions are expected to be made to the 2030 Agenda targets, with reference to poverty (SDG N° 1), health and wellbeing (SDG N° 3), access to clean water and sanitation (SDG N° 6), access to energy (SDG N° 7), decent work and economic growth (SDG N° 8), reduced inequalities (SDG N° 10), sustainable cities and communities (SDG N° 11), sustainable production and consumption (SDG N° 12) and climate action (SDG N° 13).

- Also, in the framework of target 10.2 is the offer of State social protection. An example is the "Seguridades y Oportunidades" Social Protection and Promotion Subsystem of the Ministry for Social Development and the Family, whose objective is to promote families and individuals' access to better living conditions by overcoming extreme poverty and/or social vulnerability, guaranteeing the exercise of their rights through their whole lives. Vínculos Programme (access to social benefits for the population of older adults).

- Regarding targets 8.3, 8.5 and 8.8, the Government is committed to the promotion of public policies aiming at creating quality jobs. In particular, generating more employment opportunities for groups traditionally marginalized from the job market such as women, young people, the disabled and the elderly. This is complemented by the government regulatory role of the labor legislation regulator, doing it in an opportune and efficient manner. (National Volunteer Report 2019, Government of Chile).

#### 6. Brief overview of the Theory of Change of the Joint program

#### 6.1 Summary:

The social protection system for the elderly has made important progresses through various challenges remain, including little regard for this group and their contribution to society, negative stereotypes, limited participation in public activities, weak social



connections, higher rates of aging in rural areas, great levels of isolation and a lack of social networks. As a result, elderly population present higher rates of depression and suicide when compared to other groups. Most caregiver are women, which makes them an important target group, as they themselves require support to effectively perform their role and improve their quality o life.

If a community support network were to be created that provided information, better access to public and private benefits, and physical and emotional support, it would contribute to reducing or eliminating the barriers that prevent the elderly from fully participating in society and would improve their social connections. This would enable them to exercise their rights. If this network had a special focus on helping caregivers, mostly women, by generating community support networks and helping them identify all the public and private women's empowerment programs, it would also contribute towards changing cultural patterns that expect women to take on exclusively caregiving roles. This, in turn, would improve their quality of life and would reduce the likelihood for this group of women -close to old age themselves— to be excluded in the future. This programme will work with State institutions, civil society, academia, the private sector and the community. If this project gathered and processed information on the situation of the elderly and their needs, and if this information is appropriately systematized, useful data and knowledge would be created to improve public social protection policies and other services.

6.2 List of main ToC assumptions to be monitored:

The main assumptions of the theory of change are:

- That there is interest and commitment from the relevant players to contribute to the design and contents of the platform.
- Socialization of the platform, before its launch, to ensure minimum levels of usability and adherence by the community (creation of support networks).
- The content and design of the support network is intended to address the needs and interests of the elderly population, incorporating their points of view, and taking into account the needs and interests of their surrounding community, their caregivers or family members.
- The platform captures the views and interests of the State at its different levels, as well as those of society and experts in the field, bringing together customs, needs and the potential that exists in society.
- Older people tend to view the network system as useful and something that addresses their interests.
- The platform is designed to support this network is used by the different participants to whom it is addressed, including social and community networks, public and private institutions and the elderly.
- The State, in all of its different levels, supports this program and actively participates in ensuring its proper implementation.
- The network system manages to reach into the neighborhoods to get the expected levels of coverage.
- The information and content that generated by the platform is effective and used by the different national and subnational services and programs.
- Using technology helps reduce transaction costs facilitating the emergence and consolidation of support networks around the elderly.

## 7. Trans-boundary and/or regional issues

The Plataforma NODO JP develops a pilot programme that by the end of the project, set the basis for a national project implemented by the Chilean national authority. As a pilot



programme, it will be evaluated and adapted with the necessary improvements for a national implementation. This evaluation will also consider the conditions for the expansion of the programme to a regional level, considering that other countries in the Latin American and Caribbean region share similar challenges for the inclusion of the elderly.



## **C. JOINT PROGRAMME DESCRIPTION**

## **1. Baseline and Situation Analysis**

#### **1.1 Problem statement**

#### Socio-demographic changes in Chile

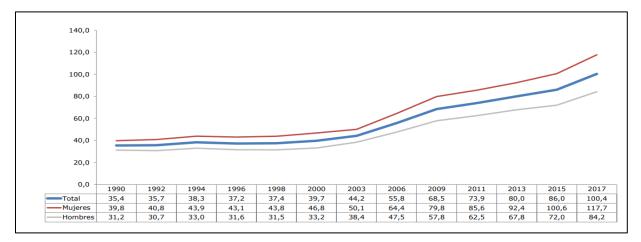
The Common Country Assessment (CCA) showed that Chile's population is ageing; if this trend continues then people over the age of 60, who currently corresponds to 17% of the population (3 million people), will account for 33% in 2050 and those over the age of 79 who are 2.6% of the population today will reach 8.7%.

Charts N°1 and N°2 show relevant data. On the one hand, the majority of the elderly population are women -especially over 80 years-old. This has increased in recent decades. Different studies show that the ageing experience is different for men and women. Although some of these differences are explained by biological reasons, the sociocultural context plays an important role in creating gender inequalities associated with the ageing process (because of factors related to employment, domestic activities, and the care of dependent people, etc.).

On the other hand, vulnerability is greater in rural than urban areas. Rural areas have higher percentage of homes with elderly people (47.9% vs 41% in urban areas), there are higher illiteracy rates (18.8% vs 6.4% in urban areas) and there is less access to services (such as health, markets, educational centers, transport etc.) (CASEN Survey 2017). The situation is more pronounced among women and indigenous groups.

## <u>Chart N° 1</u> Ageing index by gender\* (1990-2017)

(Population by gender, proportion of people 60 years and over for every 100 people under 15)



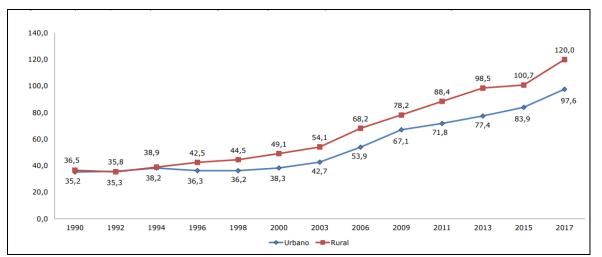
\*Corresponds to the quotient of people 60 years and over and the population under 15, multiplied by 100 Source: CASEN Survey 2017



Population ageing is closely related to better living conditions; however, accelerated demographical changes have risks, especially when they happen in social contexts with gaps in basic social provision (Thumala, D. et al 2017). These risks are more noticeable when there both negative attitudes towards the elderly (such as stereotypes or social exclusion) and negative perceptions or the group are added to socio-structural problems such as discrimination, inequality, poverty and others.

#### Chart N°2

Ageing index\* by area (1990-2017)



(Population by gender, proportion of people 60 years and over for every 100 people under 15)

\*Corresponds to the quotient of people 60 years and over and the population under 15, multiplied by 100 Source: CASEN Survey 2017

Social exclusion experienced by some elderly people is multidimensional, and consequently implies "the denial of basic human rights and limits the options and opportunities of the elderly to live a tolerable life" (Independent Expert on the elderly's use of all human rights, 2018:20).

To prevent the social exclusion of the elderly, the effective use of the right to an adequate life is related to subsistence rights, including appropriate food availability, adequate nutrition levels, housing, and assistance when required.

As the Independent Expert has indicated, the aim is for all people to be able to live in dignified conditions, so they can satisfy their needs and interact with others. For that, elderly should have adequate income, support from family and community, self-sufficiency and access to health services. In turn, this is linked to decent employment, health care, long-term care and the development of an integrated life in the community.

#### Progress of the Social Protection System in old age

In Chile, the Social Protection System is an articulated net of social interventions with the objective of supporting individuals and families throughout their lives to better face risks they are exposed to (Social Development Report 2014, MDS). In order to achieve this, the State has prevention policies to avoid the occurrence of risk; mitigation policies, to reduce the negative impact of risk; and recovery policies, to address the negative impacts caused



by the risk. These policies are carried out by different state actors in different levels of government (national, regional, provincial, municipal).

This System includes universal health, education and social security policies, as well as policies and programs focused on assistance, and social services aimed at the poorest and most vulnerable sectors of the population. In the design and implementation of social protection policies, plans and programs, the Chilean State acknowledges that people's age affects welfare levels, and of their capacity to actively participate in society. Provision of goods, services and support by these governmental programs are then linked to the vulnerabilities and discriminations people experience throughout their lives. The goal is to support human development and participation, regardless of their age.

Population ageing imposes threats and challenges to the Social Protection System, particularly regarding barriers to elderly's quality of life and the full exercise of their rights. Living standards in old age are determined by i) general well-being, especially absence of chronic diseases and the capacity to be physically self-sufficient ii) economic conditions that allow for a dignified life, and iii) the consistency of social connections. To achieve dignified ageing the community and society should support families in creating kind and respectful environments for the elderly.

States have, therefore, the responsibility to put in place social protection systems to guarantee their rights to an adequate life, to social security and other social and economic rights recognized in various legally binding treaties on human rights (Independent Expert on the elderly's use of all human rights, 2018).

Through both social programs and institutional arrangements, Chile has made progress in public policies that improve the quality of life for this group.

Main social programs for the elderly are:

- *Vínculos* Programme: aims to increase the connection of vulnerable elderly people with their social, family and community surroundings, thus allowing for an active old age. Number of beneficiaries: 26,000 people.
- Home Care: aims to facilitating daily activities of men and women over 60 years old, socioeconomically vulnerable, with moderate and severe dependence and who do not have a main caregiver. Number of beneficiaries: 745 people.
- National Council for the Protection of Old Age (Conapran): its objective is that elderly people in vulnerable and dependent situations receive specialized care during their stay in long-term homes. Number of beneficiaries: 469 people.
- Protected Residences and Homes Program: aims to enable people with severe psychiatric disabilities to take part in community life. Number of beneficiaries: 1,985 people.
- Long-Stay Establishments for the Elderly Subsidy Fund (ELEAM): seeks to improve living conditions for dependent and vulnerable elderly people who reside in non-profit ELEAM establishments. Number of beneficiaries: 7,500 people.
- Long-Stay Establishments for the Elderly: its objective is that elderly people in vulnerable situations receive support services and long-term quality care according to their level of dependence. Number of beneficiaries: 868 people.
- Home Care for People with Severe Dependence: aims to give people with severe dependence, their caregivers and family integral home care covering physical, emotional and social aspects, improving their quality of life and strengthening their recovery and autonomy. Number of beneficiaries: 51,420 people.



- Day Care Centers for the Elderly: are aimed at elderly people with light and moderate dependence who face social vulnerability, in order to keep and improve their level of self-sufficiency while maintaining their family and social surroundings. Number of beneficiaries: 2,200 people.
- Local Support and Care Network SNAC: proposes that homes with dependent people and their caregivers can access a range of social services and benefits in support and care in an organized manner in accordance with needs. Number of beneficiaries: 1,333 homes and/or families.
- National Fund for the Elderly: seeks to increase social participation or protection to increase their autonomy and improve quality of life. Number of beneficiaries: 4,326 organizations.
- Basic Solidarity Pension (PBS):a cash assistance program available to those people who do not have the right to any pension, who are 65 years old or more, who belong to the poorest 60% of the population according to the Pension Focusing Score, that have resided in Chile for 20, either continuously or not, and that been in the country at least four of the five years previous to the application. Number of beneficiaries: 399,820 people.

At an institutional level, in 2002, the National Office for the Elderly (SENAMA) was created by Law 19,828. Its main objective, as detailed in Article 1, is to promoting "the full integration of the elderly person into society, his/her protection against abandonment and destitution, and the exercise of the rights that the Constitution of the Republic and laws afford him/her". In this way, legislation aims for active ageing and the development of social services for the elderly, in order to encourage greater participation and value in society, promoting their autonomy and self-care, and favoring the acknowledgement and exercise of their rights. This is achieved through intersectoral coordination, and the design, implementation and evaluation of policies, plans and programmes.

At a normative level, subsequent legislation has focused on the prohibition of and sanctions against violence towards the elderly. Examples of these laws are Law 20,066 (2005) on intrafamilial violence, which protects the elderly when they are in the care of or dependent on whichever of their family members, Law 20,968 (2016), which defines the crimes of torture and cruel, inhumane and degrading treatment, establishing that such behavior can be carried out because of discriminatory considerations based on different reasons, including age, and Law 21,013 (2017) which classifies a new crime of abuse of people in special situations, including old age, with the intention of protecting life, integrity and security beyond domestic contexts.

Progress in public policies and legal frameworks described shows significant effort by the State to improve the quality of life of the elderly. However, the challenge remains of improving the public's perception and expectations of old age. 70% of the population consider that the institutional conditions to face the country's ageing population are insufficient. (Fifth National Survey on Social Inclusion and Exclusion of the Elderly in Chile), while half of Chileans fear getting old.

#### **Challenges to the Social Protection System in Chile**

Despite the enormous progress made, big challenges remain for strengthening the Social Protection System in old age: strengthening social connections and promoting the corresponsibility of all entities in assuring the welfare of the elderly.



The need to **strengthen social connections** is a dimension of ageing that significantly impacts quality of life in old age and which has been underexplored in public policy design.

The absence or weakness of elderly people's social relations with their families and communities, is a social disadvantage that affects their welfare. Evidence indicates that the lack of social participation is associated with higher levels of anxiety, low self-esteem and depression, which can lead those affected to more serious situations such as suicide. Data available for Chile shows that 35.3% of elderly people have felt lonely, 50% feel excluded from others and 44% prefer to stay at home instead of going out to do new things. Meanwhile, suicide rates among the elderly are the highest in the country, at 14 per 100,000 inhabitants for those over 60, above the national average of 10.2. However, this figure increases to 17.7 for the over-80s, and is 15.4 for those between 70 and 79 years old (INE, MINSAL).

At present, 73% of the budget for social programmes for elderly people is made up of money transfer initiatives (43% by Pension System pensions, 18% by Solidarity Pension Support and 12% by Basic Solidarity Pensions), which has contributed to this age group having the lowest poverty rate in terms of income. However, the coverage of policies and programmes that aim to improve the multidimensional welfare of the elderly is low, mainly because of its high cost. For example, the "Vínculos" programme that benefits 26,000 elderly people and whose goal is to increase the connection of vulnerable elderly persons with their social, family and community surroundings, costs 300,000CLP per capita a year. This is 30% more than the per capita budget of the "Familias" programme, whose goal is for people and families to overcome heir situation of extreme poverty in a sustainable way, and which each year serves close to 100,000 families (source: Banco Integrado de Programas Sociales / Integrated Social Programmes Bank, Ministry of Social Development).

Secondly, **co-responsibility** must be multisectoral, including State, family and community. It should also bring together social inclusion policies for the elderly, and complement existing Social Protection System. It is a priority, for example, to work in delaying and reducing the dependence of the elderly on social protection services such as health and income security in old age.

Available evidence shows that in Chile there is little co-responsibility in Chilean society to jointly tackle the problems associated with old age (SENAMA 2017, Fifth National Survey on Social Inclusion and Exclusion of the Elderly in Chile 2017). Disregarding the community dimension of the person has contributed to many elderly people living in poor material conditions, in isolation and socially marginalized.

Social programmes aimed at building support networks such as the "Vínculos" programme, detailed above, are based on the notion that strengthening social connections and participation in networks are elements that favour people's social integration. Support networks fulfil different roles, including emotional support, the provision of information and material support and reducing the social isolation in which the elderly often find themselves.

However, the reach of the "Vínculos" programme is still limited. According to estimates made by the MDSF, the coverage of this programme reaches 2.3% of the population that could potentially be served. It is also worth highlighting that the National Human Rights Institute (INDH) (2018:197) has recommended to the State that "through the National Office for the Elderly, it increases the quality coverage of the "Cuidados Domiciliarios"



programme, in order to encourage the elderly to stay as long as possible in their own homes, with their families and networks".

#### The challenge of promoting social inclusion of the elderly

Despite the sustained increase of the elderly population in recent years and the systematic increase in their participation in different areas of society, there is still much prejudice and exclusion. In Chile, the elderly has been treated as irrelevant for development and have not benefitted from the social progress of recent decades to the same degree as other age groups.

The integration of the elderly population is a complex social phenomenon that can be seen from four perspectives: i) Access to programmes, plans and institutionalized benefits such as health, the economy, politics, justice, knowledge, technology, art, recreation, formal education, religion and other specialized and formal instances; ii) availability of social networks and support through addressing their socio-affective needs and/or compensating socio-structural conditions and insufficient materials; iii) images and stereotypes, which include opinions on the extent of their social integration, expectations on their levels of self-sufficiency and personal satisfaction with life; and iv) personal proactivity, derived from the psychological capital that each person has, develops and accumulates throughout their lives.

Available information shows that in Chile there is a social image of old age that creates a hostile environment for the elderly and that builds multiple barriers to integration, in the workplace, in productivity, education and health. Most of the population has the perception that old age goes hand in hand with greater dissatisfaction with life: for 54% of the population it means less satisfaction, 28% think that satisfaction remains the same and only 12% believe that satisfaction could increase. Meanwhile, 73% of the public think that the elderly is socially excluded and 68% think they cannot look after themselves. Moreover, it is not thought that the elderly has a responsibility for their own welfare. The majority attribute the prime responsibility for their welfare to the government (57%), then family networks (34%), and to a much smaller degree to the elderly themselves (6%) (SENAMA 2017, Fifth National Survey on Social Inclusion and Exclusion of the Elderly in Chile 2017).

Moreover, important challenges remain in terms of inequality, discrimination and social exclusion for the elderly in Chile. In fact, one of the crudest manifestations of social exclusion in old age has to do with the treatment the elderly receive from entities and institutions. A recent study in Chile (Ortega González, Diosnara, 2018. Ageing and treatment of the elderly in Chile: a persistent course of inequality) shows different kinds of abuse, fundamentally psychological, where gender and age together with other conditions such as living with family, socioeconomic and educational levels enhance persistent inequalities. According to the study "10 Years of the Quality of Life in Old Age Survey UC – Caja Los Andes" (2017), the family is where the elderly least perceives unfair treatment because of their age (10.6%), however this percentage increases when it relates to health institutions (23.2%) or public services (20.9%).

In this context there are also situations of intrafamilial violence. According to data from the Department for the Prevention of Crime, 5.9% of complaints of intrafamilial violence are made by people aged 65 and over. This percentage may be misleading, as the various abovementioned factors regarding the exclusion of the elderly can make it difficult for them to make a complaint. Of this percentage, 70% are women and 30% men. The percentage of men is almost 10 percentage points more than women in the number of all



complaints, which can be attributed to this age group being subjected not only to intrafamilial violence from the partner, but also from children to parents. 83% of the aggressors against this age group are men.

#### 1.2 Target groups

The objective of the NODO platform is to activate and/or strengthen community support networks for the elderly that help to reduce or eliminate the barriers that prevent them from participating fully in society and exercising all their rights. In this context, the specific focus of the programme is put on those who have fallen behind: in particular the elderly (in rural and urban areas) who do not have (family or community) support networks, because they live alone or with other elderly people, because they have some kind of functional difficulty that prevents them from participating actively in society, or because they have had limited access to social programmes available from the State to improve their quality of life.

The proposal also significantly benefits, albeit indirectly, formal and informal senior caregivers, who are mostly women. It will therefore indirectly benefit all the elderly in the country, as well as the networks of people close to them, through the creation and sharing of information about available public and private sector support, and the availability of information on key aspects of the welfare of the elderly.

#### General background

In Chile one in five people is over 60, of which 57% are women. There are elderly people in 42% of homes in Chile, a figure that rises to 48% in rural areas.

Figures from the 2017 CASEN survey show that poverty -measured by income- of the elderly is low, mainly because of the monetary transfer effect of the "Basic Solidarity Pension" on the incomes of this age group. However, the elderly has a higher rate of multidimensional poverty than the average of the total population (22% versus 20%), and those that live in the regions of Ñuble (29.3% multidimensional poverty), Araucanía (29.5%), Los Lagos (28.3%), Atacama (26.7%) and Coquimbo (26.6%) live in particularly dire circumstances. It is also noteworthy that homes in which at least one elderly person resides have eight percentage points more in multidimensional poverty indices than homes that do not have resident elderly people. Another statistic is that the multidimensional poverty rate in homes in which only elderly people reside is 27.1%.

The elderly spent an average of 8.3 years in school education. This figure is however only 5.9 years for the lowest income quintile and increases to 12.9 years for those in the highest income quintile.

One in three elderly people participates in the labour market, a figure that is highest (60%) for those between 60 and 64 years old and falls to 21% for those who are 65 years old and over. However, on disaggregating by gender the figure corresponds to 47.9% for men and only 19.6% for women. The results are similar when disaggregating by socio-economic level.

According to the 2017 Quality of Life in Old Age Survey by Universidad Católica, 85% of the elderly in Chile live with other people. Of those, 65% live with their spouse or partner, 60% with their children and 38% with their grandchildren. Despite that fact, 35.3% of those surveyed said that they often feel lonely. The 2017 CASEN Survey shows that there are close to 1 million homes made up only of elderly people.



#### **Direct target group: elderly people without social support networks**

As indicated above, as well as financial and health considerations, social connections are essential to maintain an adequate level of welfare. Although people have their own individualities, they also form interpersonal relations that lead to social connections; links that can be of different kinds (between colleagues at work, between neighbours, etc.), and that impacts on their mental, emotional and even physical welfare. These interpersonal relationships are felt through social support networks, which are made up of a restricted combination of family and non-family relationships that offer one or more forms of support. Such support can be material (money, food, others); emotional (affection, company, listening, others); instrumental (care, transport, others); and cognitive (sharing experiences, information, others). The multidimensionality of this support is robust, and it is therefore expected to have an impact on elderly people's perception regards their quality of life.

In this context, elderly people's family or community support networks become more important, as they become the principal support structure and contribute to improving quality of life. Statistics show that 25% of adults and the elderly in Chile say they have no support networks available in the event of the unexpected happening. However, on disaggregating by income levels this figure has some important differences. For those with low incomes (less than 100,000CLP/month) the figure is 32.2%, while for those with the highest incomes (over 750,000CLP/month) the percentage without networks falls to 11.9%. A relevant factor to consider is that among the elderly that do not have support networks, 57% are women (Social Prevision Department, 2018. Quality of Life in Old Age Survey).

The availability of support networks is a determining factor not only because they are key for coordinating emotional care and giving them a sense of purpose, but also as functional operators providing resources and aid for everyday life. Therefore, the availability and effective access to them can be expected to have an impact on elderly people's perception of their quality of life. In fact, in Chile 38% of elderly people who do not have support networks considers that their quality of life is excellent. This figure increases to 51% in the group that has support. The perception of satisfaction with life also shows large differences depending on whether the elderly person has support. 84% of those who have support said they were satisfied with their life, while the figure falls to 72% for those without support. In this variable, women are less satisfied than men, by 4 percentage points (Social Prevision Department, 2018. Quality of Life in Old Age Survey).

#### Indirect target group: caregivers to the elderly

Progressive ageing of the population brings with it an increase in the proportion of elderly people who require the assistance of a third party in the home to carry out daily tasks. The caregiver is usually a woman, (partner, daughter, granddaughter). This has happened because the increase in longevity has not necessarily been accompanied by more years of good health. 20% of the elderly say they have great difficulty carrying out basic chores - or cannot do them at all- because of their state of health, while 25% say they have some difficulty. Predictably, in older age groups the percentage of the elderly who have some form of health difficulty is higher.

14% of elderly persons have some level of functional dependence (close to 500,000 elderly people). This means: a) they experience extreme difficulty or find it impossible to carry out basic or instrumental activities in everyday life, b) they receive help frequently (are



helped often or always to carry out a basic task) or c) they experience moderate or severe difficulties in carrying out at least one basic task in everyday life or two instrumental activities. In the lowest income quintile this figure is twice as high (28%), while in the highest income quintile it falls to 8.4% (CASEN 2017).

In situations of fragility and dependence there is a tendency for the elderly to prefer to be helped mainly by their children. Nonetheless, 47.3% are prepared to seek formal help. There is also a high willingness to attend day care centers for the elderly; 75% of the elderly are prepared to use these kinds of services.

Data shows that there is a gap between elderly people experiencing some type of difficulty in doing basic everyday chores, and the availability of help to do them. For example, 11.3% of people aged 60 and over have difficulty in walking from one side of a room to the other, and only 4.1% say that they have help to do so. On the other hand, just under 11% indicate having difficulty in washing themselves, and 50% say they have assistance to doing so. Smaller numbers indicate having difficulties in eating (5.7%), or in using the toilet (8.9%). Going to bed and getting up presents greater difficulty (13.9%), as does getting dressed and putting their shoes and socks on (14.9%). In all cases, only one third say they receive help in doing such activities (Social Prevision Department, 2018. Quality of Life in Old Age Survey).

With regards to the profile of senior caregivers, in cases in which permanent care is necessary, evidence in Chile shows that caregivers are mainly women -daughters- with an average age of around 55. Two thirds of them are from the 40% of lowest incomes, most do not have a job, have been caregivers for 1-5 years, provide care for 21-24 hours a day, do not have free time activities and acknowledge the support of Community Health Centers (CASEN 2017). More than half of caregivers are intensely overworked. Likewise, studies show that there is room for the community and social organizations to cushion the workload of the family caregiver and that this requires social development initiatives and projects that increase support networks, as well as improvements to Chile's support studies on Old Age and Ageing, 2015. Systemization and Description of Profiles of Caregivers to Dependent People Study).

The consequences of caregiving are multiple and have more profound and negative effects on informal caregivers: their physical and psychological health (stress, depression) and subjective welfare both get worse, they become more socially isolated and they lose social connections. Undermined social connections are directly linked to caregivers stopping participating in paid and leisure activities; that is, activities that facilitate social connections. Not having a salary, moreover, has direct effects on the caregiver's financial situation. In this way, the caregiver is not only in a position of psychological, emotional, social and physical vulnerability, but also in a precarious material and financial position.

## 1.3 SDG targets

Elderly people's quality of life is a multidimensional phenomenon (that depends on factors including health, socio-economic conditions and social connections), and it would be very difficult for just one entity to remove all the obstacles and barriers that elderly people face.

In line with international recommendations, the project seeks to share the social protection of elderly people more equally between different social entities. The difference with this project is that it puts the focus on social inclusion of elderly people from different



geographical backgrounds and realities and helps them become a protagonist in his/her own welfare. At the same time, it highlights the shared responsibility of the person's family, the community where he/she lives and the State in their care. This shared responsibility is crucial and has been largely absent from discussion about the Chilean social protection system.

The following diagram shows a map of existing determinants and interconnections of welfare in old age, and their connection to SDGs. This map suggests that coordination and mobilization of various entities is required in order to improve the quality of life of the elderly. It also shows that many determinants of a good quality of life are connected to strengthening the social protection system, which is at the core of this proposal.

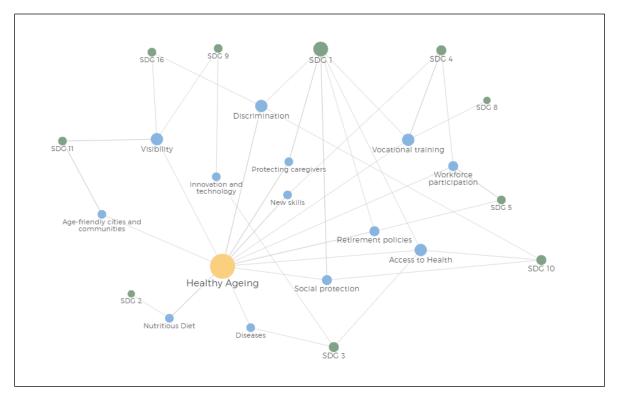


FIGURE 1. Existing determinants and interconnections regarding welfare in old age

Source: Prepared by the authors

Coordinated action through the NODO PLATFORM will accelerate contributions to the following SDGs:

- SDG 1, target 1.3: Implement country-wide policies and social protection systems for all, including the setting of minimum standards, and by 2030, achieve substantial coverage of the poor and vulnerable.
- SDG 5, target 5.2: Eliminate all forms of violence against women in the public and private spheres; and target 5.4: Acknowledge and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and promote shared responsibility in the household and family.



 SDG 10, target 10.2: By 2030, empower and promote social, economic and political inclusion, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.

Regarding target 1.3, the goal of the project is for elderly people to have a support network to fall back on that helps reduce or eliminate the barriers that prevent them from fully participating in society and exercising all their rights. In Chile, 25% of the elderly say they do not have support networks. The objective of NODO Platform is to strengthen and complement social policies currently in place. The project will furthermore strengthen the connection between what the State is offering (monetary subsidies and social programmes) and the creation of public-private initiatives that alleviate poverty in old age, in particular the effects of social exclusion and subjective welfare. For example, according to statistics from the 2017 CASEN Survey, almost 18% of the elderly (65 and over) have not been able to access the Basic Solidarity Pension in Chile, even though they meet the requirements. The JP will improve the percentage of elderly people who receiving services and benefits through the network in each municipality. The baseline and goals, in each municipality, will be defined at the beginning of the implementation of the impact evaluation.

Regarding SDG 5 targets, the project seeks to eliminate all forms of violence against elderly women. The as NODO Platform outlines what relevant information on living conditions of the elderly needs be identified and collected. Support networks report complaints of bad treatment, discrimination and abuse of the elderly. This can be managed directly by the elderly person or by his/her support and can help put them in touch with legal advice in the municipalities and other institutions in the neighborhood. Presently, 5.9% of reports of intrafamilial violence concern the elderly. This percentage may be misleading, as the social exclusion elderly people suffer makes it hard for them to report such instances. At the end of the JP, 70% of key actors will perceive the information generated by the platform and the network, useful for taking decision that will improve the quality of life of elderly people.

Regarding SDG 10, through the creation and strengthening of support networks the project is expected to contribute to reducing or eliminating barriers that prevent the elderly from exercising all their rights, and to offer help and relief to caregivers for dependent elderly people. In this way, the project aims to promote social, political and economic inclusion of the elderly. In Chile, 35.3% of elderly people have felt lonely, 50% feel excluded from others and 44% prefer to stay at home instead of going out to do new things. The JP will improve the quality of life of elderly people. The baseline and goals, in each municipality, will be defined at the beginning of the implementation of the impact evaluation.

Indirectly, it is expected that the NODO PLATFORM will also affect the following SDGs:

• SDGs 2 and 3: contributes to combatting malnutrition in old age, allowing this problem to be seen at a national level and connecting people to available solutions and/or coming up with other solutions to the problem. It furthermore promotes healthy lifestyles in all age groups, especially the elderly and those approaching old age.

• SDG 8: helps eliminate break down barriers to the elderly finding employment, if that is what they are looking for.

• SDG 11: helps ensure inclusion of the elderly, through heightened social interaction, increasing access to social services and connecting the elderly with safe and accessible environments.



• SDG 16: facilitates access of the elderly to the justice system and their ability to report bad treatment, discrimination and abuse.

• SDG 17: increases access to better information about the elderly, which will lead to better decision making and positively affect elderly people's quality of life. It moreover promotes partnerships and the commitment of all of society to providing better welfare for the elderly.



### 1.4 Stakeholder mapping

#### <u>Government</u>

Developing the proposal and project design has been done with the pertinent government counterparts. State involvement has been key in improving the proposal, in unifying criteria and forming partnerships to guarantee its implementation and sustainability over time.

The main public institutions and ministries involved are:

- The National Office for the Elderly (SENAMA): co-leads the project along with the Office of the Resident Coordinator and have worked together with a common focus.
- SENAMA is a public office dependent on the Ministry of Social Development and the Family which falls under the corresponding minister, who is dependent on the President of the Republic. It started in January 2003 and its mission is to "encourage active ageing and the development of social services for the elderly, whatever their situation may be. It also aims to boost their participation and perceived value in society, as well as promote autonomy and their ability to provide selfcare and exercise their rights. This is done coordinating with different sectors the design, implementation and evaluation of policies, plans and programmes.<sup>1</sup>
- Ministry of Social Development and the Family (MDSF): The ministry oversees social development in Chile. Its mission is to "Contribute to the design and application of social development policies, plans and programmes, especially those that seek to eliminate poverty and provide social protection to vulnerable people or groups, and promoting mobility and social integration". In 2018 the MDSF launched the 'Compromiso País' programme to tackle the principal challenges facing the most vulnerable groups of the Chilean population. Sixteen groups were identified and working groups were created in which the government, academia, civil society, the private sector and ordinary people work together to find wide reaching, collaborative and effective solutions for each group. Many of these priorities were related to the elderly, and the Compromiso País programme and the United Nations have committed to working together to develop the project.
- Office of the First Lady: led by First Lady, Cecilia Morel, this office has prioritized matters concerning the elderly, promoting initiatives for positive ageing. The Office recently launched a programme called 'Adulto Mejor', which seeks a friendly environment for the elderly, based on four pillars: i) friendly cities, ii) protection, iii) healthy living, and iv) the creation of opportunities.
- These three institutions work together, creating synergies and establishing baselines and strategies focused on achieving greater impact on social protection and inclusion of the elderly in Chile.
- Ministry of Women and Gender Equality: its mission is to `create policies, plans and programmes that benefit women and work toward eliminating any kind of gender discrimination, making Chile a more equal society.'2 The ministry will participate at different stages of the project, in order to ensure the gender equality focus is prioritized.
- Municipalities: the project will be implemented in 10 pilot districts, (5 urban and 5 rural). Given the proposal's objectives, these districts will play an essential and active role. As part of the support network for the elderly, they are key in handling of information and guaranteeing its operation, as well as coordinating and improving existing instances of referral and support.

<sup>&</sup>lt;sup>1</sup> www.senama.gob.cl/servicio-nacional-del-adulto-mayor

<sup>&</sup>lt;sup>2</sup> <u>https://www.minmujeryeg.gob.cl/ministerio/</u>



Civil Society

Civil society has participated in every stage of the creation and design process and will also be key in the implementation and success of the proposal. Its experience and valuable knowledge of the population are vitally important to the project.

The principal civil society organizations that are involved are:

- Geriatric and Gerontology Society. It works in age-related initiatives to attain maximum welfare in society.
- National Geriatrics Institute INGER. This institute seeks to promote the autonomy of the elderly.
- Oportunidad Mayor Foundation. Coordinates different initiatives for the elderly that civil society has started.
- National Association of Banking Sector Pensioners AG. Offers different activities to pensioners, with a focus on integration and social commitment.
- Council of Social Leaders for the Elderly CODISAM. The Council Works to give a voice to all social players who actively participate and work in positive ageing programmes.
- National Association for the Elderly. Its work supports active ageing and the development of social services for the elderly, regardless of the conditions they are in.
- Caritas Chile. Encourages coordination of different ecclesiastical initiatives for the elderly, facilitating the sharing of experiences and also collaborating in non-ecclesiastical environments.
- Vicaría Pastoral Social Caritas. Lines of work are focused on the integration of and providing services to vulnerable groups.
- United Centre of Retirees, Pensioners and Survivor Pension Beneficiaries (CUPEMCHI). Works for the integration and direct participation of pensioners in society.
- Míranos Foundation. A foundation that works for greater awareness of the elderly through greater understanding, and training.
- Amanoz Foundation. A foundation that contributes to greater welfare of the elderly, keeping them company, providing training and opportunities for volunteers.
- La Morada Corporation. 'A civil society feminist corporation that takes a critical stance on power relationships in a patriarchal system to overcome discrimination, question discursive hegemonies, modify political practices and sexist cultures and improve women's quality of life'.
- Domestic Service Workers' Union (SINTRACAP): 'A place for meeting, learning, enjoying, accompanying and defending the rights of domestic service workers in Chile'.

## <u>Academia</u>

The United Nations in Chile has had the support and participation of academics and experts in ageing in the drawing up and validation of the project. These players maintain an active involvement in the remaining phases of the programme. The main Universities that have participated are:

- Universidad de Chile
- Universidad Los Andes
- Universidad de Talca
- Universidad de Valparaíso
- Pontificia Universidad Católica

#### Private Sector

The Global Pact is the biggest corporate sustainability initiative in the world and works to align strategies and operations with Ten Universal Principles on human rights, labor



relations, the environment and anticorruption. In Chile, more than 80 companies and organizations participate in this network and have committed to implementing the Ten Principles in their organizations and to work together to create partnerships that contribute to the fulfilment of the United Nations Global Goals. Based on this, certain companies from the private sector have been invited to see the project with a view to the possible creation of future partnerships.

#### International Organizations

The Office of the Resident Coordinator will be responsible for ensuring the overall implementation of the project and will be the main interlocutor with the Government, the Agencies involved and counterparts in civil society, academia and the private sector.

The PUNOs will provide the project with experience on the implementation of programmes in which civil society is the receiver/beneficiary and key actor in the whole process. They moreover have expert human capital in gender mainstreaming and Human Rights in any project. Key agencies: ITO, UN WOMEN, OHCHR, PAHO, ECLAC, WB.

## 2. Programme Strategy

#### 2.1. Overall strategy

The results of the proposal are closely linked to United Nations Sustainable Development Cooperation Framework 2019-2022 through Strategy Priority 3 / Direct Effect 6: "In 2022, access to public services and quality social protection mechanisms is expanded and consolidated, which favors integral development of people, with an emphasis on children, the elderly and indigenous people".

It is also linked to the national priorities expressed in the Government Program of President Piñera 2018-2022, in its chapter on "positive aging and decent pensions. The government plan promotes positive aging, that is, healthy, safe, participatory and institutional; as with the "Country Commitment Program".

The PLATAFORMA NODO Project aims to activate and/ or strengthen support networks around elderly people, that help reduce or eliminate obstacles that prevent them from fully participating in society and exercising all of their rights. It proposes to create a community platform to achieve the integral well-being of the elderly, through the use of Information Technology (ICT). The platform, which puts the integral well-being of the elderly at the center of its actions, is intended as a complement to the work carried out by the State and civil society, and incorporates a community dimension as a central part of the social protection system for the elderly, not leaving anyone behind.

It aims to create as many support networks as there are elderly people, with different formats and levels of digital and physical communication, but where they all contribute to the integration, social participation and integral well-being of the elderly. The main challenge of the project is to properly design the process through which support networks will be established in the territories where the project is implemented. Therefore, a process of joint creation or co-creation amongst multiple stakeholders is proposed, for example among the elderly and their associations, NGOs, government institutions, United Nations agencies, to name a few. The idea is that this co-construction process motivates and involves all parties to create the best possible design, which will then be made operational through the use of ICT.





## FIGURE 2. Nodo Platform: support networks for elderly people Source: Prepared by the authors

The PLATAFORMA NODO, will have three components: i) the creation, strengthening and interaction of support networks for elderly people; ii) linking and interaction of the elderly and / or their support network with the public or private benefits available in their community; and iii) the generation of information that allows the elderly to be taken care of in a timely and appropriate way.

This project promotes contact and social ties through the use of information technologies but in turn encourages face-to-face interactions between elderly people, their support networks and the community. The use of ICT will accelerate the creation of support networks: material support such as money, food, clothing, payment of services and other things; instrumental support such as care, transport, and help with domestic chores; emotional support, such as affection, keeping them company, lending an ear; or cognitive support, that may include sharing information, experiences, etc.

Given that in situations of dependency, the social responsibility for elderly people often falls upon their families, and principally on women, measures and networking will be promoted to strengthen support networks in the subgroup of female caregivers.

The originality of the project lies in the fact that it focusses on the social inclusion and wellbeing of adults and the elderly as a shared responsibility within the family, the community



and the State. At the same time, the project will strengthen the community factor of the Chilean social system, promoting the creation of an intersectoral place for the articulation of public and/or private initiatives aimed at improving the well-being of the elderly.

The project seeks to implement a platform that, through the use of easily accessible technology, promotes building support networks that speeds up finding solutions to problems of social inclusion and participation that elderly people face. To achieve that, the project will empower both elderly people and their support networks.

The technological solutions proposed by the project are: i) the development and implementation of a **web platform**, which will concentrate in one place the different support networks and make available to the general public information about the public and private help that is available to this segment of the population. In addition, this platform will become a channel for the different services that both the government and civil society are designing or implementing (for example, the Country Commitment); and ii) the development of an **Application (App)** for mobile devices, computers and tablets as a kind of voice for support networks for the elderly. To achieve that, the App will facilitate communication and interaction of different actors at the same time (neighbors, family caregivers, elderly people and others), in a way that these networks for adults or the elderly can connect with each other, and responding immediately to their needs and requirements. Both solutions, the web platform and the App, will be synchronized in a such a way as to maximize the support for these networks for the elderly .

In addition, the platform could take on a physical format and/or complement other measures directed toward adults and the elderly being implemented at a community level, either by the municipality or another institution (academia, social organizations, etc). The digital platform will leverage the benefits of connectivity and geolocation to build and promote support networks, in addition to connecting with public services and other users nearby. The content and best format for implementing this platform can be tested during the dry run of the pilot project.

The design of the project has considered the digital divide amongst the elderly population, of which only 31.5% claim to be internet users (Survey CASEN 2017). On the one hand, statistics show that the levels of internet access and the use of digital devices among the elderly population have experienced a sustained increase in recent years. On the other, the success of this project does not hinge on the number of elderly people that use the internet or the App but rather their support networks. In that regard, Chile has one of highest levels of internet penetration in Latin America. However, the aim of the initiative is not digital literacy, but rather connecting elderly people to a support network. Therefore, what is important is that the support network has access to the internet and mobile/fixed devices, which in a country like Chile is feasible (in 2017 the number of internet connections surpassed the number of inhabitants reaching 102 accesses for every 100 people).

In summary, what this project is aiming to achieve is that, based on international guidelines, the responsibility for social protection among the elderly should be shared amongst the different social stakeholders. At the same, it must be the community that comes to recognize the issue of dependence, in a society that tends to see this phenomenon through an individualistic lens. Therefore, strengthening communities, their access to public and private services, to their families and social networks in general, is fundamental to mitigate the feeling of loneliness amongst the elderly.

By the end of the first two years, pilots are expected to be carried out in at least 10 neighborhoods throughout the country. The project will also undergo an ex-ante evaluation



of social initiatives in order to finance and scale it up using state support and/ or through public-private partnerships. The choice of communities for the pilot projects will be determined according to the density of elderly people in each community (high), by the availability of public services directed at elderly people (high/low) and the level of access to devices connected to the internet (high/low), as well as other criteria to be determined at the design stage.

#### 2.2 Theory of Change

#### a) Summary

Chile is facing an important process of aging in its population, particularly an increasing number of elderly women. In the current context of social protest, structural inequalities that affect the elderly in particular are at the forefront of social demands, asking for better living standards and a decrease in social inequality. The elderly must be a priority group to advance towards inclusive sustainable development and human rights for all, particularly because they have been historically left out, not considered as agents of development.

Although the social protection system has made important progress, challenges remain. These include: the low social valuation of old age and persisting stereotypes towards this group; low levels of participation and social ties of the elderly; low levels of access to services, benefits and social programs; and higher incidences of old age in rural areas, where people are more isolated and removed from social networks. In that context, the elderly suffer from higher levels of depression and experience higher incidences of suicide compared to other groups.

The problem with inclusion of the elderly is also closely linked to the group of caregivers who are mostly women - and who will form an integral part of any program design. The caregivers are those that help older people get access to social benefits and who accompany them to recreational activities or help them to get around.

By setting up community support networks that provides information, improves access to public and private benefits, offering physical and emotional support and helping to address other identified needs, this will reduce or eliminate obstacles that otherwise prevent the elderly from fully participating in society, improving their social ties and benefiting fully from what they are entitled to.

If this network has a special focus on supporting the caregivers, who are largely women, more progress would be made in terms of changing the cultural patterns that thrust most of this responsibility onto women. This would help improve the quality of life of this group and help prevent their future exclusion when they themselves are close to old age.

If the program works across different sectors, incorporating the input of state, social, academic, private and community organisms about the elderly and their needs and processes that information in the correct way, this would help generate the appropriate knowledge and resources to improve public policies on social protection and other services.

#### b) Explanation of theory of change

Today Chile faces the dilemma of an aging population, which has accelerated over the last decade. According to current demographical projections, the number of people over 60 years of age, who today represent 17% of the population, will double by 2050 to 33% and the number of people over 79 who currently represent 2.6% will reach 8.7% over the same period. The majority of elderly people are women, especially in the group over 80 years old. (CASEN SURVEY 2017).



The country is going through a period of great social and political upheaval where the people have taken to the streets to protest for better living standards and for an end to social inequalities. One of their demands is for a more dignified old age, which requires higher pensions, better health care, affordable medicine, housing and public transportation in order to be better positioned to face their twilight years. In Chile, elderly people have tended to be treated as irrelevant for development and have not benefitted from the social progress the country has experienced. A recent study shows that 73% of the population considers that elderly people are socially excluded (SENAMA, 2017).

While the quality of life for the elderly has improved in recent decades thanks to advances in things like technology and medicine, many great challenges still lie ahead to guarantee the well-being of people in the later stages of their lives. Next, we illustrate five pending challenges for this social group.

First of all, there are a number of common stereotypes and very negative perceptions about old age that contribute to their being excluded and impede their integration as people that enjoy the equal rights as others. This social image of old age works to create a hostile environment against this group and builds barriers to integration on multiple levels, such as in the job market. Likewise, these stereotypes contribute to making this group invisible and limit the scope of public policies.

Second, elderly people face considerable isolation and loneliness. Some 35.3% of elderly people have experienced feelings of loneliness, while 50% say they feel excluded. These feelings of isolation are linked to higher levels of depression and greater rates of suicide amongst older people than in the rest of the population (INE, MINSAL).

Third, there is a low level of access to services, benefits and social programs. That means that the social protection systems in Chile struggles to attend to the needs of elderly people in a balanced way. For example, there are access barriers to social programs and benefits due to a lack of awareness, lack of information and other impediments. For example, the program "Vínculos" is available to only 2.3% of the people that could potentially qualify to benefit from it.

Fourth, the way that people experience old age differs depending on whether they live in urban or rural areas. Elderly people are much more vulnerable in rural areas due to greater isolation, greater difficulty in accessing services and higher levels of illiteracy. The urban rural divide particularly impacts on women in rural areas that have to assume most of domestic work and have fewer networks of support.

Fifth, the socio-economic and cultural context has an impact on the way in which women and men experience old age, which creates significant gender inequalities. In that regard, it is also necessary to consider the social role that caregivers of the elderly play, who are by and large women. These caregivers have to carry out this role with limited support from networks or institutions. With that in mind, this group also has few opportunities for social participation and economic development. In addition, in less than a decade these people will themselves be elderly people, meaning that their current living conditions will determine their quality of life when they reach that stage.

Although, in recent decades we have seen the strengthening of both institutions and the social benefits and programs aimed at improving the quality of life of elderly people, it is necessary to continue to strengthen the social security system, putting special emphasis on creating and developing local community networks to improve social bonding between older people and in turn to promote a support system for senior caregivers.

Therefore, four lines of work are proposed:

- i) Creating and strengthening community support networks for elderly people;
- ii) Creating a digital system for articulating support networks;



- iii) Developing capabilities, instruments and networks to support caregivers.
- iv) Generating data and information to provide feedback on the design of public policies directed at older people.

We will see increased participation of older persons in society and their social ties and therefore their general well-being on a physical, emotional and mental level, and the exercise of their social, economic and cultural rights if the following conditions are met: If a community network design is carried out in a participatory way that takes into consideration their needs, the obstacles and interests of older persons; if this community support network promotes a working model, that contributes to meeting information needs, access to public and private benefits, physical help, emotional support or other identified needs; if the network generates knowledge and inputs to improve design of the social protection system and other social services and programs; and if through the network and complementary actions, senior caregivers improve their abilities to carry out these tasks.

#### c) Assumptions

- The support network, in its design and content, responds to the needs and interests of older persons, their senior caregivers or families, the State at its different levels, civil society and experts in the field.
- The platform designed to support this network is used by the different participants for whom it is aimed.
- The State, at its different levels, supports and actively participate in this program to guarantee its implementation.
- The network system manages to reach communities and achieve the expected coverage.
- Older persons perceive that the network system is useful and addresses their interests and that they use it.
- If meaningful social relationships are enhanced, the well-being and other related indicators of older persons will improve.
- There is interest and commitment of relevant players to participate in the design and content of the platform.
- SENAMA gives priority to the management of this process.
- The platform adequately incorporates the perception of older persons and their nearby community, so that it adequately reflects the practices, potential and the needs in those areas.
- Instances of socialization on the platform can take place before its launch to ensure minimum levels of usability and adoptability by the community (setting up of support networks).
- The use of technology reduces transaction costs for building and consolidating support networks for older persons.
- The platform allows a virtuous link between older people and/or their support network and public and/or private benefits that are available at the community level.
- The implementation and management of content, information and interactions generated through the platform is carried out effectively.
- The information and content generated by the platform are used by the different services and programs at a national and subnational level.

## 2.3 Expected results and impact

The long-term objective of this project is to improve the levels of inclusion and the rights of older persons. To reach this goal, 2 specific effects are proposed:

- Effect 1: In 2022, social institutions and players will work in an intersectoral manner for the development and implementation of policies that respond to instances of inequality,



vulnerability and social exclusion (Direct effect n° 5 UNITED NATIONS SUSTAINABLE DEVELOPMENT COOPERATION FRAMEWORK2019-2022).

- Effect 2: Older persons access support networks created at the community level and available social benefits.

Effect 1 aims to strengthen articulation of institutional and social players to improve the access of older persons to social benefits and programs, thus helping them to establish and consolidate social ties. With that in mind, activities will begin on a community support network model that generates key information that will help in the drawing up of policies at different State levels, including the social protection system.

#### Products:

1.1 Community networks, designed collaboratively to provide services to the elderly

Using this product, a diagnosis will be made of the needs and obstacles faced by the target population in accessing benefits and establishing social ties. This will take into account the different needs of men and women, in urban and rural areas, and include reviews of the pertinent literature and data available on the subject. In addition, the diagnosis will include inputs from key sources for the initial information gathering, including public officials from different State bodies, from academia, NGOs, etc.

In addition, mapping will be carried out of the different social benefits available to men and women in this group, both from public services and private players. Likewise, the conditions and needs of senior caregivers will form a fundamental part of the survey.

Based on the inputs generated, and within the framework of collaborative work of different players, a work plan will be designed for generating and creating community support networks. This network design will be composed of an interactive online platform, using elements that have been identified in the initial diagnosis.

The work plan of the networks should consider different strategies for building networks and the involvement of male and female community actors based on international experience, which can contribute to the design and benefit from lessons learned in other contexts. Applying different strategies and lessons learned from different models that have been implemented is a possibility.

For the initial survey it will be important to include key network design actions or elements before addressing the perceptions or negative stereotypes of old age.

#### 1.2 Systematized information on the situation with the elderly

This product will include the systematization and analysis

of information generated by the design, implementation and evaluation of the pilots.

A system with information and indicators will be created to provide feedback on the design and the drawing up of policies and programs focused on the population group of older persons and their senior caregivers.

Effect 2 will aim to implement the model of community networks and evaluate them with the purpose of establishing the effectiveness of the system and the possibility of scaling the initiative.

#### 2.1 Community networks implemented and evaluated at the municipal level

In collaboration with participating institutions and using previously collected information, work will begin to identify the neighborhoods that should take part in the pilot, taking into



consideration urban and rural neighborhoods, from the Metropolitan Region and other regions in the country.

Seeing as the diagnosis generated in the first product will have a general view of the population of older persons in the country, in this phase it will be necessary to concentrate the diagnosis in 10 municipalities that will form part of the pilot (this activity could form part of the first product in the event that the municipalities for the pilot have already been chosen).

As part of this product, a map of the target population in the pilot neighborhoods will be carried out, both for the elderly and senior caregivers. In this map, the particular needs of the different older persons will be identified.

Another key plan of action is the design and implementation of a dissemination and socialization strategy regarding the network and its platform with the aim of involving key players and guaranteeing that its use by the participants in the network. The communication strategy will accompany the entire implementation of the project seeking to: i) ensure usability of the digital platform by its intended users, ii) reaching out to people and organizations to participate and expand the initiative and iii) advocating for its replicability and incorporation into policy making.

#### 2.2 Support system for senior caregivers

Among the activities planned within the framework of this product are tools for senior caregivers to facilitate the tasks they carry out. These include the creation of places where caregivers can meet and interact, where they can receive guidance, containment and support, as well as the articulation of a network of caregivers who organize and help raise awareness in the community about the importance of co-responsibility when caring for the elderly. The creation of a working group is also contemplated to articulate the public proposal about caregiving and to generate comprehensive policies to support this task.

The Social Development and Family Ministry's National Elderly Service (SENAMA) will spearhead the design, implementation, monitoring, and evaluation on behalf of the Chilean government, ensuring that all ministries providing social protection services take part. After the joint programme is completed, PLATAFORMA NODO should become part of the regular offer of government services after two years, so it can be funded and scaled up to the entire country with public money. It also has a lot of potential to be exported to other countries like Chile via South-South cooperation.

The general objective of this project is to increase social inclusion and protection for the elderly, through strengthening community networks and improving access to the various programmes, services and social benefits available to them.

The NODO Platform proposes, through a community system of support networks that is based on a digital platform, to activate and/or strengthen elderly people's social connections, addressing the barriers that prevent them from fully participating in society and exercising all their rights.

At the end of the two year, the JP will improve the quality of life of elderly people. The baseline and specific indicators of quality of life to use, will be defined at the beginning of implementation of the impact evaluation. To generate this change the JP expects that at least two policies, programs or other national or subnational initiatives will include recommendations, findings or inputs generated through the networks/platform. Likewise, JP expects that elderly people will improve the receiving of services and benefits through his support network. It's expected that the constitution of the support network and its interaction



with the elderly will contribute, in itself, to its integration, social participation and integral well-being.

#### 2.4 Financing

The estimated cost of the project is USD 2.208.936 for the two years during which the program will be implemented, 61% for the first year and 39% for the second. Regarding the **activities to be developed**, the budget will be divided up in the following way:

- <u>OUTCOME 1</u>: By 2022, the social institutions and actors will work in an intersectoral manner for the development and implementation of policies that address instances of social inequality, vulnerability and exclusion: USD 783.713.

- a) Community networks designed in a participatory manner to provide services to older persons: USD 687.669
- b) Information systems available for local and centralized decision making: USD 96.046

- <u>OUTCOME 2</u>: By 2022, Chile will expand and consolidate the access to quality and protection services, which favor integral development of people, with an emphasis on children and older persons: USD 1.242.238

a) Community networks tested and evaluated: USD 1.131.677

b) Consolidated support system for caregivers in order to contribute to the redistribution of these tasks and the improvement in quality of caregivers: USD 110.560

- COMMUNICATION <u>PLAN</u>: USD 85.600
- MONITORING AND EVALUATION: USD 42.800

With regards to **achieving the proposed SDGs**, the budget is divided as follows:

- <u>TARGET 1.3</u>: 45% of the budget will be used to implement minimum levels of social protection systems and measures at a national level, and, by 2030, achieve widespread coverage of the poor and vulnerable (USD 994.021)
- <u>TARGET 5.2</u>: 20% of the budget will be aimed at eliminating all forms of violence against women in the public and private spheres; and recognizing and valuing unpaid care and unpaid domestic work through the provision of public services, infrastructure and social protection policies, as well as through the promotion of shared responsibility in the home and in the family (USD 441.787)
- <u>TARGET 10.2</u>: 35% of the budget will be aimed at bolstering and promoting the social, economic and political inclusion of all people, regardless of their age, sex, disability, race, ethnicity, origin, religion or economic situation or other condition (USD 773.128)

The PUNO involved in this project, will actively work in the search and mobilization of funds that complete the JP. The implementing agencies will contribute in kind a total of USD 658,936 (FAO: USD 205,600; ILO: USD 223,200; UNDP: 230,136).

Likewise, the Government is expected to contribute USD 500,000 to the project. This will be based on the meetings held, on the joint work that is being carried out and, on the partnerships, and synergies created with Chilean public institutions and with the Programs that are already being carried out to improve the lives of the Elderly.

Regarding the long-term financial sustainability of the program, work is being done from the outset with the co-leadership of the National Service for the Elderly and the active



collaboration of other public institutions and public programs. By working together this in turn encourages that the progress made through the implementation of this project to improve the quality of life of the Elderly serves as a model for future actions taken in the same field.

### 2.5 Partnerships and stakeholder engagement

#### Co-leadership and government participation

As already mentioned, this program is led by the Office of the Resident Coordinator and the National Service for the Elderly, under the Ministry of Social Development and Family.

For that reason, mechanisms and models will be jointly established for the implementation of the project so that their design complements moves to strengthen institutional and community network services. An increase in coordination is expected at the three political administrative levels of the country (national, regional and local). Continuous meetings will be held between both actors to draw up the development and action plans.

In 2018, the Ministry of Social Development and Family launched the 'Country Commitment' program as part of its strategy to address the main challenges facing the most vulnerable populations in Chile. This included establishing working groups representing the public and private sectors that will seek to find and implement broad-based, but collaborative and effective solutions, where ideas, projects and resources come together. Since these challenges align with those of the Node Platform and vice versa, both parties have committed to work together in the development of the project. Operational synergies have been reached that add value to both programs and favor the sustainability of the project.

The participation of the municipalities, as we have already established, is key to the implementation of the project since they are part of the support network for the elderly and are the first level of institutional contact available to them. In the development of the project, workshops have been carried out with those in charge to include their contributions and reach what could be executive coordination.

#### Participation of other stakeholders

In parallel to the meetings that are held periodically with the Government, workshops have been held with civil society, with academic experts in the area of aging and social sciences, with workers associations and businesses organizations and with geriatric associations and foundations that work directly with the people that directly benefit from this program, the elderly. They have contributed valuable input to the project that adds value to the proposal and the program. The participation of these stakeholders will continue in the following phases of the project.

This work has generated a very positive social response and led to very active and valuable participation, thus confirming the desire of both parties to work together to promote inclusion and an improvement in the quality of life of the elderly, ensuring their social integration and respect for their rights. This is essential to validate the project and learn first-hand about the needs of the target population to which the project is aimed, thus framing all social progress made in Chilean society. The willingness of both parties to work towards the achievement of common objectives has resulted in a mutual commitment to collaborate.

# Participating United Nations Organizations (PUNO) and United Nations Country Team (UNCT) expertise



In Chile, the United Nations System is highly valued by both the State and Chilean society. It articulates and creates neutral spaces for dialogue, as well as providing specialized technical assistance, including the mainstreaming of rights, gender, interculturality and territoriality approaches. Since the early development of the proposal, synergies with different partners have been created, meanwhile in the development of the project, these relationships have been deepened and the partners have participated in all phases of the process.

The PUNO have been supporting the national social protection system, as well as initiatives for legislative advocacy, program design and evaluation, information and statistics systems, gender mainstreaming and human rights, in addition to monitoring the implementation of recommendations of international human rights treaty bodies.

The three leading agencies of the UNDP, ILO and FAO project, have demonstrated national and international experience, knowledge and capabilities to implement this initiative in a comprehensive, innovative and sustainable manner, involving key players, such as central and local governments, civil society, communities, the private sector, academia and parliamentarians.

In addition to the work they have coordinated, support and technical assistance has been provided since the birth of the proposal from other United Nations System agencies in Chile, such as the ITU, UNWOMEN, OHCHR, PAH / WHO, UNESCO and ECLAC. Likewise, a proposal has been made to have two male or female expert professionals to ensure that the project meets Chile's international human rights obligations at all times.

## **3. Programme implementation**

## **3.1 Governance and implementation arrangements**

The programme's governance mechanisms include:

#### **Program Coordinator**

This person will oversee the general coordination of the project and will share information amongst the different committees that will be created. In addition, it will manage risks and possible conflicts that may arise during the process and inform the corresponding committee.

## **Steering Committee**

It will consist of:

- National Service for the Elderly (SENAMA)
- United Nations Resident Coordinator in Chile
- Representatives of each of the executing agencies
  - i. UNDP
  - ii. ILO
  - iii. FAO

This Committee will meet at least once a year. It will be responsible for ensuring general implementation and accountability, as well as dialogue with the Government, with the Agencies involved, civil society counterparts and the private sector. It will be also responsible for approving the annual report issued by the Technical Committee, reviewing



implementation strategies and proposing necessary adjustments. It will ensure the appropriate resolution of possible conflicts that could arise during the articulation of work between the different Agencies and / or institutional counterparts.

#### **Technical Committee**

It will be made up of:

- UNDP technical expert. Leading Agency
- ILO technical expert.
- FAO technical expert.
- Program coordinator
- Resident Coordination Office

This Committee will meet as often as the different stages of the project require and at least once a month. It will be responsible for managing the program, both in its technical and executive aspects; It will be in charge of coordinating and designing the methodology and strategy for executing the project; at the design stage, it will coordinate activities with civil society and the necessary government institutions, both nationally, regionally and locally; it will help at the implementation phase of the program, which will require coordination with 10 pilot municipalities in which the *Node Platform* will be implemented.

#### **Advisory Committee**

This group will have a flexible role, both in terms of its members and the periodicity of its meetings. It will meet the immediate needs of the project, being both the Technical Committee and implementer in charge of it. The members of this group may include:

- ITU technical expert
- UNWOMEN technical expert
- OHCHR technical expert
- PAHO / WHO technical expert
- UNESCO technical expert
- ECLAC technical expert
- Technical experts of the other agencies whose participation is considered relevant

In addition, there may be the support and participation of:

- A representative of Civil Society
- A representative from Academia
- A representative of Workers' and Employers' Organizations

This group, under the Implementation Committee, will be responsible for providing support in all activities that require it. Likewise, it will participate in the design of the Platform and implementation activities; it will make strategic recommendations and serve as an open group for dialogue and proposals for implementation and / or improvement; it will serve as an interlocutor between the agencies they represent and the Implementation Committee in everything related to the project, both in the design and implementation; it will be in charge of keeping direct and ongoing contact with civil society and other required governmental and / or non-governmental stakeholders to provide external inputs to the Technical Committee. The PUNO will lead implementation of activities based on the agreements reached by the Steering Committee, and will be responsible for programmatic and financial matters.

**The Resident Coordinator**, with the support of the Coordination Office, will provide leadership to the JP from the United Nations System and interact with the government at its highest level. It will ensure inter-agency participation and support the lead Agency in coordination.



**The lead Agency** implementing the project will be responsible for coordinating the program in all its technical and executive aspects and will articulate relations with the other agencies involved with which it will work closely to achieve the intended objectives. Likewise, it will lead the group implementing the project and be accountable to the Project Coordinator for programmatic aspects and possible conflicts.

**The PUNO** will lead implementation of activities in line with agreements reached by the Steering Committee, taking on responsibility for programmatic and financial aspects of the programme. It will actively collaborate to achieve strategic results and provide advice, as required.

**Civil society** will participate in the final design of the initiative, including the platform and its components, in particular those linked to the issues of aging and volunteering. Academia will collaborate on the design and evaluation of the pilots.

**The Office of the Resident Coordinator** will promote good communication between agencies and coordinate the thematic interagency groups that may be created during the different stages of the project.

### 3.2 Monitoring, reporting, and evaluation

Reporting on the Joint SDG Fund will be results-oriented, and evidence based. Each PUNO will provide the Convening/Lead Agent with the following narrative reports prepared in accordance with instructions and templates developed by the Joint SDG Fund Secretariat:

- Annual narrative progress reports, to be provided no later than one (1) month (31 January) after the end of the calendar year, and must include the result matrix, updated risk log, and anticipated expenditures and results for the next 12-month funding period;
- *Mid-term progress review report* to be submitted halfway through the implementation of Joint Program<sup>3</sup>; and
- *Final consolidated narrative report*, after the completion of the joint program, to be provided no later than two (2) months after the operational closure of the activities.

The Convening/Lead Agent will compile the narrative reports of PUNOs and submit a consolidated report to the Joint SDG Fund Secretariat, through the Resident Coordinator.

The Resident Coordinator will monitor the implementation of the joint program, with the involvement of Joint SDG Fund Secretariat to which it must submit data and information when requested. As a minimum, joint program will prepare, and submit to the Joint SDG Fund Secretariat, 6-month monitoring updates. Additional insights (such as policy papers, value for money analysis, case studies, infographics, blogs) might need to be provided, per request of the Joint SDG Fund Secretariat. Joint program will allocate resources for monitoring and evaluation in the budget.

Data for all indicators of the results framework will be shared with the Fund Secretariat on a regular basis, in order to allow them to aggregate results at the global level and integrate findings into reporting on progress of the Joint SDG Fund.

<sup>&</sup>lt;sup>3</sup> This will be the basis for release of funding for the second year of implementation.



PUNOs will be required to include information on complementary funding received from other sources (both UN cost sharing, and external sources of funding) for the activities supported by the Fund, including in kind contributions and/or South-South Cooperation initiatives, in the reporting done throughout the year.

PUNOs at Headquarters level shall provide the Administrative Agent with the following statements and reports prepared in accordance with its accounting and reporting procedures, consolidate the financial reports, as follows:

- Annual financial reports as of 31st December each year with respect to the funds disbursed to it from the Joint SDG Fund Account, to be provided no later than four months after the end of the applicable reporting period; and
- A final financial report, after the completion of the activities financed by the Joint SDG Fund and including the final year of the activities, to be provided no later than 30 April of the year following the operational closing of the project activities.

In addition, regular updates on financial delivery might need to be provided, per request of the Fund Secretariat.

After competition of a joint program, a final, *independent and gender-responsive*<sup>4</sup> *evaluation* will be organized by the Resident Coordinator. The cost needs to be budgeted, and in case there are no remaining funds at the end of the joint program, it will be the responsibility of PUNOs to pay for the final, independent evaluation from their own resources.

The joint programme will be subjected to a joint final independent evaluation. It will be managed jointly by PUNOs as per established process for independent evaluations, including the use of a joint evaluation steering group and dedicated evaluation managers not involved in the implementation of the joint programme. The evaluations will follow the United Nations Evaluation Group's (UNEG) Norms and Standards for Evaluation in the UN System, using the guidance on Joint Evaluation and relevant UNDG guidance on evaluations. The management and implementation of the joint evaluation will have due regard to the evaluation policies of PUNOs to ensure the requirements of those policies are met and the evaluation process will be participative and will involve all relevant programme's stakeholders and partners. Evaluation results will be disseminated amongst government, development partners, civil society, and other stakeholders. A joint management response will be produced upon completion of the evaluation process and made publicly available on the evaluation platforms or similar of PUNOs.

### 3.3 Accountability, financial management, and public disclosure

The Joint Program will be using a pass-through fund management modality where UNDP Multi-Partner Trust Fund Office will act as the Administrative Agent (AA) under which the funds will be channeled for the Joint Program through the AA. Each Participating UN Organization receiving funds through the pass-through has signed a standard Memorandum of Understanding with the AA.

<sup>&</sup>lt;sup>4</sup> How to manage a gender responsive evaluation, Evaluation handbook, UN Women, 2015



Each Participating UN Organization (PUNO) shall assume full programmatic and financial accountability for the funds disbursed to it by the Administrative Agent of the Joint SDG Fund (Multi-Partner Trust Fund Office). Such funds will be administered by each UN Agency, Fund, and Program in accordance with its own regulations, rules, directives and procedures. Each PUNO shall establish a separate ledger account for the receipt and administration of the funds disbursed to it by the Administrative Agent.

Indirect costs of the Participating Organizations recovered through program support costs will be 7%. All other costs incurred by each PUNO in carrying out the activities for which it is responsible under the Fund will be recovered as direct costs.

Funding by the Joint SDG Fund will be provided on annual basis, upon successful performance of the joint program.

Procedures on financial transfers, extensions, financial and operational closure, and related administrative issues are stipulated in the Operational Guidance of the Joint SDG Fund.

PUNOs and partners must comply with Joint SDG Fund brand guidelines, which includes information on donor visibility requirements.

Each PUNO will take appropriate measures to publicize the Joint SDG Fund and give due credit to the other PUNOs. All related publicity material, official notices, reports and publications, provided to the press or Fund beneficiaries, will acknowledge the role of the host Government, donors, PUNOs, the Administrative Agent, and any other relevant entities. In particular, the Administrative Agent will include and ensure due recognition of the role of each Participating Organization and partners in all external communications related to the Joint SDG Fund.

### 3.4 Legal context

The United Nations Cooperation Framework for Sustainable Development in Chile (2019-2022) was signed by the Government of Chile and the United Nations System in Chile on the 1<sup>st</sup> of August 2019. Said instrument includes the Rules of the relation between the Republic of Chile and the United Nations System, which are detailed hereafter:

Agency name: United Nations Development Programme (UNDP)

Agreement title: Agreement between the Government of Chile and the United Nations Special Fund on Special Fund Assistance (the Standard Basic Assistance Agreement (SBAA))

Agreement date: 22nd January 1960

Agency name: International Labour Organization (ILO) Agreement title: Basic Agreement on concerted Technical Assistance between the Government, the United Nations and Specialized Agencies, including the ILO Agreement date: 15th January 1957

Agency name: International Labour Organization (ILO) Agreement title: Agreement on the Opening of a Regional Office for South America in Chile Agreement date: 23rd September 2009

Agency name: Food and Agriculture Organization (FAO)



Agreement title: Agreement to regulate the working conditions in the Chilean premises of the Organization Agreement date: 14th June 1952



# **D. ANNEXES**

## **Annex 1. List of related initiatives**

The table below presents national government-sponsored initiatives that promote inclusion of the elderly and caregivers of older persons with dependency. There is no systematization of municipal, civil society or private sector initiatives; that is why including this as part of the activities (Output 2.1) will make a relevant contribution.

Name of initiative/proj ect	Key expected results	Links to the joint program	Lead organiz ation	Other partner s	Budget and funding source	Contract person
Volunteer country of elders	Contribute to social integration and the strengthening of a positive image of the elderly, through the exercise of new roles, promoting respect for their rights.	Refere nce progra m	SEN AMA	FOS IS	223,978 USD funded by SENAMA	Sofia Tronco so, strono coso@ senam a.cl
Volunteer projects "self – managed fund"	Promotes autonomy and independence of older persons members of elderly organizations.	Refere nce progra m	Olde r Pers ons Org aniz atio ns	SEN AMA	99,092 USD (averag e funding of 2,571 USD per project) funded by SENAMA	Sofia Tronco so, strono coso@ senam a.cl
Strengtheni ng Older Adults of the Pumanque Commune	Support an older person's volunteer organization that provides home care to other vulnerable older persons of the community	Refere nce progra m	Heal th Frie nds Club of Pum anq ue Muni cipal ity	SEN AMA	Not defined yet	María Liliana Cornej o, Lcorne jo@m unipu manqu e.cl



Name of initiative/proj ect	Key expected results	Links to the joint program	Lead organiz ation	Other partner s	Budget and funding source	Contract person
Voluntary support for elderly people in a situation of social isolation	Provide support, accompaniment and emotional/affective care to 20 older persons in rural sector through volunteer home visits	Refere nce progra m	AMA NOZ	SEN AMA	38,545 USD (30,000 USD funded by SENAMA )	Alejan dra Valdes , avalde s@am anoz.cl
Daycare and home care for the elderly	Building a multipurpose room (for gatherings, recreation and education) for self-sufficient elderly people, as well as socio- health care for dependent people	Refere nce progra m	Frat erni dad las Viña s	SEN AMA	58,571 USD (35,714 USD funded by SENAMA )	Sergio Morag a, somor aga@g mail.c om
Sheltered Housing and Daycare Centers	ViviFrail workshops in daycare centers and sheltered housing to keep functionality to maintain maximum levels of autonomy in the elderly, with a community approach.	Refere nce progra m	SEN AMA	Pont ificia Univ ersi dad Cató lica de Chil e	21,428 USD (6,000 USD funded by SENAMA )	Isabel Infant e, iinfant e@sen ama.cl
Take control of your health	Promote healthy communities. People with chronic conditions are better informed about their health, play an active role in managing their health, and are change agents in their community	Refere nce progra m	PAH O and San Seb astia n Univ ersit y	SEN AMA	428,571 USD funded by SENAMA	Pablo Pizarro , ppizarr o@sen ama.cl
REVELO	Contribute to the improvement of the quality of life (autonomy and independence) of people with functional dependence who live alone, creating links with existing services and	Refere nce progra m	SEN ADI S	SEN AMA Com pro miso País	85,714 USD funded by SENADI S	Gloria Cerón, gceron @sena dis.cl



Name of initiative/proj ect	Key expected results	Links to the joint program	Lead organiz ation	Other partner s	Budget and funding source	Contract person
	benefits. Ultimately it aims at avoiding forced institutionalization.					

# Annex 2. Overall Results Framework

## 2.1. Targets for Joint SDG Fund Results Framework

**Joint SDG Fund Outcome 1:** Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

Indicators		ets
Indicators	2020	2021
1.1: integrated multi-sectoral policies have accelerated SDG progress in terms of scope <sup>5</sup>	1	2
1.2: integrated multi-sectoral policies have accelerated SDG progress in terms of scale $^{6}$	0	1

Joint SDG Fund Output 3: Integrated policy solutions for accelerating SDG progress implemented

Indicators	Targets		
Indicators	2020	2021	
3.1: # of innovative solutions that were tested <sup>7</sup> (disaggregated by % successful-unsuccessful)	1	1	
3.2: # of integrated policy solutions that have been implemented with the national partners in lead	3	3	
3.3: # and share of countries where national capacities to implement integrated, cross-sectoral SDG accelerators has been strengthened	0	1	

#### Joint SDG Fund Operational Performance Indicators

- Level of coherence of UN in implementing program country<sup>8</sup>
- Reduced transaction costs for the participating UN agencies in interaction with national/regional and local authorities and/or public entities compared to other joint program in the country
- Annual % of financial delivery
- Joint program operationally closed within original end date
- Joint program financially closed 18 months after their operational closure

<sup>&</sup>lt;sup>5</sup>Scope=substantive expansion: additional thematic areas/components added or mechanisms/systems replicated.

<sup>&</sup>lt;sup>6</sup>Scale=geographical expansion: local solutions adopted at the regional and national level or a national solution adopted in one or more countries.

<sup>&</sup>lt;sup>7</sup>Each Joint program in the Implementation phase will test at least 2 approaches.

<sup>&</sup>lt;sup>8</sup> Annual survey will provide qualitative information towards this indicator.



- Joint program facilitated engagement with diverse stakeholders (e.g. parliamentarians, civil society, IFIs, bilateral/multilateral actor, private sector)
- Joint program included addressing inequalities (QCPR) and the principle of "Leaving No One Behind"
- Joint program featured gender results at the outcome level
- Joint program undertook or draw upon relevant human rights analysis, and have developed or implemented a strategy to address human rights issues
- Joint program planned for and can demonstrate positive results/effects for youth
- Joint program considered the needs of persons with disabilities
- Joint program made use of risk analysis in program planning
- Joint program conducted do-no-harm / due diligence and were designed to take into consideration opportunities in the areas of the environment and climate change

### 2.2. Joint programme Results framework

Result / Indicators	Baseli ne	2020 Target	2021 Target	Means of Verification	Responsib le partner		
<i>Effect 1: In 2022, social institutions and players will work in an intersectoral manner for the development and implementation of policies that address situations of inequality, vulnerability and social exclusion.</i>							
Number of policies, programs or other national or subnational initiatives that include recommendation s, findings or inputs generated through the networks / platform and other things adopted by the participating institutions and organizations	NA	NA	2	Institutional web pages	UNDP, ILO, FAO		



Result / Indicators	Baseli ne	2020 Target	2021 Target	Means of Verification	Responsib le partner
Number of initiatives aimed at reducing gender inequality amongst the elderly adopted by the participating organizations and institutions	NA	NA	1	Institutional web pages	UNDP, ILO, FAO
Product 1.1 Comm services to the elde	-	vorks, de	esigned p	participatively, to	provide
Percentage of key institutions / actors involved in the design of the network out of the total number of key stakeholder institutions	NA	50 %	50%	<i>Mapping report of players</i> <i>Project coordinator report</i>	ILO, UNDP
Percentage of key institutions / players promote gender equality that participate in the design of the network out of the total number of those that participate in the network design	NA	20 %	20%	<i>Mapping report of players</i> <i>Project coordinator report</i>	ILO, UNDP



Result / Indicators	Baseli ne	2020 Target	2021 Target	Means of Verification	Responsib le partner
Number of work strategies / approaches to ensure the inclusion of players in the network, with a tested and / or validated gender approach	The baseling be define beginning implementa	ed at	als will the of	Project coordinator report document that identifies barriers and facilitators	FAO, UNDP
Percentage of key themes / aspects according to women's and men's needs, identified in the diagnosis that are integrated into the design of the network / platform	The baseling be defing beginning implementa	ed at	als will the of	Project coordinator report document that identifies barriers and facilitators	FAO, UNDP
Percentage of key gender issues / issues identified in the diagnosis that are integrated into the network / platform design	The baseling be defing beginning implementa	ed at	als will the of	Project coordinator report document that identifies barriers and facilitators	FAO, UNDP

**Product 1.2** National and regional public institutions, and other social organizations, use data and knowledge created through the support networks



Result / Indicators	Baseli ne	2020 Target	2021 Target	Means of Verification	Responsib le partner
Percentage of platform players that perceive the inputs / recommendation s from the network as useful	NA	60 %	70%	Satisfaction survey of relevant users and players	FAO
Percentage of inputs generated on the network and the platform that incorporates information disaggregated by sex and with gender analysis	NA	0	70%	Document with information systematizati on	ILO
Effect 2: The elderly level and available					ommunity
Percentage of elderly people receiving services / benefits through the network in each municipality, disaggregated by sex and age groups (60 - 70 years and 70 years and over)	The baselin be defin beginning implementa	ed at	als will the of	Impact evaluation report	UNDP



Result / Indicators	Baseli ne	2020 Target	2021 Target	Means of Verification	Responsib le partner
Percentage of older people who perceive the interactions made through the network as significant, disaggregated by sex and age groups.	The baseling be define beginning implementa	ed at	als will the of	Impact evaluation report	UNDP
Perception index on old age in the municipalities involved, disaggregated by sex and age groups <b>Product 2.1 Comm</b>	The baseling be define beginning implementa	ed at ation.	the of	Impact evaluation report ed and evaluate	UNDP
municipal level					
Percentage of key local individual / institutional stakeholders participating in the network, in each municipality, disaggregated by sex	The baseling be define beginning implementa	ed at	als will the of	<i>Mapping of stakeholders report</i>	ILO
<i>Number of pilot projects implemented and evaluated at the municipal level</i>	NA	0	10	Impact evaluation report	UNDP



Result / Indicators	Baseli ne	2020 Target	2021 Target	Means of Verification	Responsib le partner		
<i>Percentage of municipal gender-equality focused pilots implemented and evaluated out of the total number of pilots</i>	NA	0	100 %	Impact evaluation report	UNDP		
<i>Number of interactions completed through the network / platform</i>	The baselin be define beginning implementa	ed at	als will the of	<i>Platform Report Project Coordinator Report</i>	ILO, UNDP		
Percentage of satisfaction of people that benefited from the platform, disaggregated by sex	NA	0	80%	User satisfaction of survey of relevant players	FAO		
<i>Level of satisfaction of individual / institutional partners that provide services to the network / platform, disaggregated by sex</i>	<i>The baseline and goals will be defined at the beginning of implementation.</i>			User satisfaction of survey of relevant stakeholders	FAO		
<b>Product 2.2 Consolidated caregivers support system aimed at redistributing these tasks and improving the quality of caregivers</b>							
Percentage of tools / inputs according to gender that provide care and that are a part of the network design	The baselin be defin beginning implementa	ed at	als will the of	Project Coordinator Report	ILO, UNDP		



Result /	Baseli	2020	2021	Means of	Responsib
Indicators	ne	Target	Target	Verification	le partner
Percentage of people providing care and that are highly satisfied with the network/platfor m's response to their problems or needs, disaggregated by age and gender	NA	0	80%	Satisfaction survey of users and relevant actors	ILO, FAO

# Annex 3. Theory of Change graphic

# Support network for the elderly (NODO platform)





Indica	itor	Score	Findings and	Evidence or		
N°	Formulation		Explanation	Means of Verification		
1.1	Context analysis integrate gender analysis	3	The context analysis incorporates information disaggregated by sex of the elderly population in Chile. Identify the gender differences in this population: women live longer, have lower incomes and receive lower pensions, are more vulnerable Identify gender- specific situations, such as gender violence that affects older adult women Is considered as a specific work group for caregivers, who are mostly women, and are also getting closer to old age	See section C, number 1. Baseline and situation analysis 2.2 Theory of change		
1.2	Gender Equality mainstreamed in proposed outputs	3	Gender equality is considered in the various outputs of the project, because they are not only aimed at improving the quality of life of the elderly population that is mostly made up of women, but because it is considered the response to differentiated needs of men and women, in line with SDG 5	See section C 2.2 Theory of change number 2.3 Expected Results and Impacts Section D Annexes 2.2 Joint Program Results Framework		

# Annex 4. Gender marker matrix EG/MS



Indica	tor	Score	Findings and	Evidence or		
N٥	Formulation		Explanation	Means of Verification		
			Output 1.4 is specifically aimed at gender equality and is in line with goal 5.4 of SDG 5			
1.3	Program output indicators measure changes in gender equality	3	75% of the indicators allow monitoring of the project's contribution to gender equality.	See Section D Annexes 2.2 Joint Program Results Framework		
2.1	PUNO collaborates and engages with Government on gender equality and empowering women	2	The Ministry of Women and Gender Equality participated in the drawing up the proposal. The proposal is aligned with the priorities of the Ministry The Women's Minister expressed her commitment to its implementation. Neighborhoods where pilot is being implemented will participate in activities both at a national and regional level. Both the national and regional levels correspond to These actors will form part of the Advisory Group, in order to monitor the implementation of the program.	See Section C Joint Program Description 1.4 Stakeholder mapping		
2.2	PUNO collaborate and engages with women's/gender equality CSOs	3	Project design included consultations with various civil society organizations working with the elderly,	See Section C Joint Program Description 1.4 Stakeholder mapping		



Indicat	Indicator		Findings and	Evidence or
N°	Formulation		Explanation	Means of Verification
			including gender rights' organizations Both the Corporación La Morada and the Home Help Workers Union contributed to the design of the proposal. They shared their gender expertise and on-the-ground experience and committed to assist in implementing a pilot project Both organizations	3.1 Governance and implementation arrangements E-mails to support the proposal.
			were asked to join the Technical and Advisory Committees governing this project.	
3.1	Program proposes a gender- responsive budget	2	20% of the budget is directly linked to achieving ODS5. Due to its integrated gender approach, however, more than 50% of the budget will indirectly contribute to this end.	See Section D Annexes Sub section 7 Annex 7. Budget and Work Plan 7.2 Budget per SDG Targets 7.3 Work Plan
Total se	coring	2.6		



# Annex 5. Communication plan

#### 1) Overall narrative of the joint program

The general objective of this project is to increase social inclusion and protection for the elderly, through strengthening community networks and improving access to the various programmes, services and social benefits available to them.

Social protection programs have so far focused on material (money, food, others); physical (health, nutrition); emotional (affection, company, listening, others); instrumental (care, transport, others); and cognitive (sharing experiences, information, others) aspects of well-being. However, less emphasis has been placed on the role that interpersonal relations, social connections and community participation play in the integral well-being of the elderly. This project, then, aims at filling that gap, adding the community and social networks as an essential component of social programmes for this group. All of these dimensions are important and are mutually reinforcing, so that this project expects that adding the community aspect will contribute to a more robust social protection system and will positively impact both the elderly's actual well-being and their perception of their quality of life.

Specifically, the objective is to promote and strengthen the elderly's social connections and community involvement through digital-based support networks, as a means to reducing the barriers that prevent them from fully participating in society and exercising all their rights. To achieve it, this project will create a digital-based community focused on the elderly and their specific needs, which will have a particular emphasis on women within this age group, and on rural sectors. The strategy is to incorporate a community component into social programs; that is, integrating the idea that support networks around the elderly are critical to an effective social protection system. Ultimately, it is expected that this approach will become integrated in future policy making and government programming.

#### 2) Strategic approach to key audiences

Communications are an integral part of the project and critical to its success. Therefore, communications are embedded in the very design of the project and will accompany its implementation. Communication actions will remain flexible to meet the dynamic and changing needs of this type of programmes. The project will have a part-time communication advisor to assist in the design and implementation of this strategy. This person will also monitor effectiveness of the plan and will lead the necessary adjustments to the plan, as needed.

Audiences of this strategy can be organized as concentric circles. At the very center is the elderly, which are the final beneficiaries of this initiative.

The second circle, the core audience for this communication plan, are communities around the elderly that are in direct contact with them, either because they are family members, reside in the same home, are formal or informal caregivers or are organized groups providing assistance. These are the groups that will utilize the digital tools the project will create and that will form and shape the support networks that will ultimately benefit the elderly.

The following circle, the third, is composed of services and benefits providers, such as municipalities, specific government programmes, government authorities and offices, civil



society organizations that work around these issues but not in direct contact with beneficiaries, the private sector, unions and other UN Agencies.

The fourth and last are relevant players in social program design as well as policy- makers. Reaching these audiences will occur in a later phase of the programme, as it develops and starts to show results. Communication strategy for this audience will be advocacy-oriented and will be tailored to the specific stakeholders.

#### 3) Objectives of strategic communication plan

The objectives of the strategy are three-fold: i) ensuring usability of the digital platform by its intended users, ii) reaching out people and organizations to participate and expand the initiative and iii) advocating for its replicability and incorporation into policy making. In order to achieve the first objective –ensuring effective use of the technological resources by its intended users—communication experts advising the project will take part in the design of the pilots. They will accompany on-the-ground missions to assess beneficiaries' communication needs. This process will also allow to craft appropriate messages and use effective means to distribute the information. Communication will be focused on information about the platforms, including troubleshooting and creating enthusiasm around the initiative.

For the second objective, the project will reach out to those audiences indirectly working on these issues. The objective is to inform about the initiative and invite them to become involved and/or develop their own networks in their communities, so to expand the reach of the programme.

As it seeks to promote incorporation of good practices and lessons from this project into policy making, the third objective will take place at a more advanced stage of programme implementation. Communication actions here will have an advocacy approach, will be based on data generated throughout the project and will strategically target decisionmakers.

#### 4) Main activities

The communication strategy will start in the very design of the project and will accompany every stage. Thus, communication experts will be a part of the design of the pilots and will participate in on-the-ground assessment activities to identify the specific needs of each of the audiences.

The assessment stage might include one-on-one interviews or group meetings to get firsthand information about communication needs.

Once assessment is completed for the first three target audiences, the programme will finalize a communication plan. Specific messaging and channels will be decided.

Implementation of the plan will include creating the materials, whether printed, audiovisual or digital and securing the appropriate distribution channels, which may include digital platforms, civil society organizations, government institutions, media, etc.

The project will develop a monitoring plan and will regularly assess communication effectiveness to recalibrate, as needed. The communication plan will be headed by FAO.



# Annex 6. Learning and Sharing Plan

#### 1) Strategic approach to learn and share

Strategic learning involves a continuum whose extreme limits are the formal strategic planning of the NODO project, on the one hand, and emerging strategies and knowledge, on the other. The core of this learning and sharing plan is to add flexibly to this continuum, ensuring ongoing information exchange and links between design and implementation.

NODO will use the design and implementation stages of the project as learning opportunities. They will include, among others, the process of co-designing the project with partners; best strategies to overcoming on-the-ground implementation challenges or ways to ensure effective community engagement.

The NODO project aims to: i) maximize the capacity of government initiatives or civil society organizations working with the elderly; ii) acquire and / or create new knowledge that will strengthen the implementation of the project at its different stages; and iii) accumulate and take advantage of existing knowledge in the field, emphasizing those where older people and their closest groups can contribute.

Although knowledge-creation strategies are well-known, this project will focus on tacit knowledge, a less formal and systematic aspect of knowledge generation. This information emerges from on-the-ground project stakeholders, partners or beneficiaries who interact regularly with the elderly, and that can draw on those direct experiences to inform the project.

One of the main challenges for social policies is how to best include experiences, expectations, and opinions of beneficiary groups into project design. Incorporating the elderly's perspective will improve the quality of design and implementation, will allow the project to gain more traction and will facilitate its sustainability.

#### 2. Objectives of learning and sharing:

In order to systematize tacit knowledge, the project will use a combination of 4 strategies: socialization, outsourcing, combination and internalization. The implementation of both the communication strategy and the monitoring and evaluation plan will constantly feed this strategy to learn and share.

- a. **Socialization:** the project includes a series of instances in which the tacit knowledge that exists in the field will be systematized and shared. That will focus on collecting data on experiences of the elderly and organizations that work with this population group (be that the government or civil society).
  - Implementation of conversation workshops with older people and unions
  - Implementation of workshops and / or interviews with women senior caregivers
  - Personal interviews with older people and key representatives of society organizations that work with older people, ensuring adequate representation by sex.



- b. **Outsourcing:** consists of the process of converting tacit into explicit knowledge. This will be done in ways that preserve the meaning and richness of the information gathered on the ground.
  - Workshops: with government authorities, municipal and healthcare workers, neighborhood councils, and other actors that will be involved in the project with the aim of building capacity and raising awareness about experiences of the elderly in the field. Workshop participants are critical for the quality of life of the elderly and impact the elderly's well-being, as well as in actions for developing programs or policy. They are also key players to ensure the sustainability of the project.
  - Population awareness campaign: new information that is collected will also be key to developing or complementing mass awareness campaigns about the conditions and factors affecting elderly population. The idea is to share and increase awareness among the population about those aspects of the lives of older people that could be favorably impacted with changes in behavior by the public at large. These campaigns will pay special attention to gender differences that affect the situation and potential of the elderly.
  - Creation of a document that incorporates the lessons learned about how to include the voices, opinions and perceptions of the beneficiaries in the design of social programs and initiatives and on how to approach work with multiple stakeholders. Lessons learned will be systematizes in order to identify channels and methodologies to ensure that both older men and women can express their opinions and represent their interests.
- c. **Combination:** process in which the formal and tacit knowledge gathered from the project is coherently linked, articulated and communicated.
  - Preparation of documents: considers the hiring of a consultant who, together with the project coordinator, systematizes the information generated by the project (both academic and tacit). Emphasis will be placed on the simplification of language to facilitate communication of the messages, as well as the use of an inclusive and non-sexist language that reflects reality and increases the visibility of the elderly population as a whole
  - Awareness of women caregivers of elderly people: as noted, it is women who
    mostly care for elderly people. The idea is to increase awareness of the
    physical and emotional conditions of these women, based on stories of their
    experiences. This will help gather information that can be used in the design
    of programs or initiatives outside the project.
  - Use of the platform: in order to inform the public and to spread and share the knowledge and content produced by the program, NODO platform will be used as an repository and digital archive of relevant information, produced both outside and within the project. For example, tools to improve the quality of life of this population group, knowledge products, best practices, information about public and private initiatives aimed at adults and the elderly, important information to improve the quality of life of senior caregivers, promotion materials and campaigns, videos, etc.



- d. **Internalization:** process in which feedback is given on the knowledge and lessons learned during the project to important stakeholders and the elderly people that helped generate it, so that it can be incorporated into the decision-making processes.
  - Submitting the impact assessment document with the main findings and takeaways from the project to government authorities.
  - Seminar with key stakeholders at both a central and local levels, to inform others about the project experiences and main results
  - Training government teams in charge of the design of social programs on how to incorporate opinions and perceptions of the beneficiaries into program design and initiatives on how to mainstream a gender equality approach in these initiatives
  - Proposal for the final design of the project, in the format used by the Ministry
    of Social Development, so that the initiative can be submitted to the ex-ante
    evaluation process of social programs and receive financing from the regular
    government budget for implementation,
  - Workshops and meetings with organized groups of elderly people who participated in the project.



# Annex 7. Budget and Work Plan

### 7.1 Budget per UNSDG categories

The total cost of the program is \$1.550.000 USD, with additional \$658.936 USD in the form of in-kind contributions from implementing agencies.

The budget is distributed amongst agencies according to the activities each will implement, including the staffing of technical teams that will implement the programme in the field, the generation of knowledge and the collection of information that will be used for designing and implementing networks, as well as for additional activities such as the communications plan, follow up and monitoring and evaluation.

Therefore, UNDP will receive \$985.635 USD (64%), ILO \$204.375 USD (13%) and FAO \$359.990 USD (23%) of the total budget. As the project design is finalized and specific activities are shaped, participating UN Agencies of this proposal, including OPS/WHO, UN WOMEN and OHCHR, will determine their specific participation in project activities, including technical advice, accompaniment, research and others. These proposals will be then budgeted and reviewed following the governance structure of the programme. Once approved, funding will be drawn from the portion of the budget allocated to UNDP.

61% of the Budget will be used in year #1 and the remaining 39% will be used for activities in year #2. Note that the design work of the networks and the hiring of specialized services to create the platform and the App are included in year #1. Year #2 activities are linked to the implementation of the networks in the field, as well as their evaluation and impact.

	UN	IDP	FA	0	1	LO	TOTAL	
UNDG BUDGET CATEGORIES	Joint SDG Fund (USD)	PUNO Contribution (USD)						
1. Staff and other personnel	637.671		18.849		69.500		726.021	
2. Supplies, Commodities, Materials	4.110		98.548		60.472		163.130	
<ol> <li>Equipment, Vehicles, and Furniture (including Depreciation)</li> </ol>	16.764		12.000		0		28.764	
4. Contractual services	234.437		55.151		20.000		309.587	
5.Travel	6.849	230.136	130.301	205.600	29.800	223.200	166.951	658.936
6. Transfers and Grants to Counterparts	0		0		0		0	
7. General Operating and other Direct Costs	21.324		21.589		11.233		54.146	
Total Direct Costs	921.154		336.438		191.005		1.448.598	
8. Indirect Support Costs (Max. 7%)	64.481		23.551		13.370		101.402	
TOTAL Costs	985.635	230.136	359.990	205.600	204.375	223.200	1.550.000	658.936
1st year	592.531	138.350	251.474	143.624	100.166	109.392	944.171	401.386
2nd year	393.104	91.786	108.515	61.976	104.209	113.808	605.828	257.550



### 7.2 Budget per SDG targets

With regard to accelerating SDGs, the budget will have the following breakdown:

- SDG 1, target 1.3: 45% (\$994.021 of the total program budget):

The main activities of Target 1.3 have to do with the design of community networks through participation and collaboration of key stakeholders. This involves creating the platform and the App and the information system that will facilitate centralized decision making.

### - SDG 5, targets 5.2 and 5.4: 20% (\$441.787 of the total program budget)

Activities that mainstream the gender approach are distributed among three project outcomes. These include aspects related to the differences in ageing between men and women and the role of senior caregivers -who are mostly women-. In addition, the networks will require technological support for implementation and the collection of information.

#### - SDG 10, target 10.2: 35% (\$773.128 of the total program budget)

Target 10.2 include launching community networks and evaluating them. These activities are aimed at removing the barriers that presently prevent older adults from fully integrating themselves into society, and value the role of the community in strengthening the social protection network.

SDG TARGETS	%	USD
SDG 1, target 1.3: implement minimal social protection systems and measures for all nationwide and reach broad coverage of the poor and vulnerable population by 2030.	45%	994,021
SDG 5, goal 5.2: eliminate all forms of violence against women in the public and private spheres; and goal 5.4: recognize and value unpaid care and unpaid domestic work through the provision of public services, the provision of infrastructure and the formulation of social protection policies, as well as through the promotion of shared responsibility at home and in the family.	20%	441,787
SDG 10, goal 10.2: by 2030, promote and strengthen social, economic and political inclusion of all people, regardless of their age, sex, disability, race, ethnicity, origin, religion or economic or other circumstances	35%	773,128
TOTAL	100%	2,208,936



### 7.3 Work plan

The work plan will be jointly implemented by three Agencies: UNDP, ILO and FAO. However, through the UNDP budget it will be possible to leverage experience, networks and qualified human capital from other UNS agencies such as OPS/WHO, UN WOMEN and OHCHR, mainly in matters of health, gender mainstreaming and human rights.

This workplan takes an integral approach to achieving its goals, drawing on the sum of actions and experiences of each Agency involved.

Year 1 activities concentrate on designing the support networks in the areas where the project will be implemented. The budget incorporates a co-construction process for designing networks with the various stakeholders involved in the programme, such as the elderly, caregiver associations, civil society, the government, United Nations agencies, and others. Therefore, by the end of Year 1 the digital-based support networks should be completed.

Additionally, an in-depth assessment will be carried out to identify factors that may facilitate or hinder the implementation of the networks. In addition, workshops will be held with main stakeholders in the field to secure their participation in the program activities. The workshops will take a gender equality approach.

By the end of the first year, technical teams in charge on implementation on the ground will be assembled. This stage will also include designing impact assessment tools.

Year 2 activities will focus of the operational kick-off of the networks in different districts. The agencies will implement the networks in the field, deploying technical teams and training stakeholders on how to use the platform and the App.

During this stage, the impact of the initiative will be assessed, collecting information on the quality of life of the elderly people before and after network is operating. That data will be shared. Year 2 activities will also focus strongly on caregivers, who are mainly women, and start to systematize learning and information which will then be made available to local and national decision makers.



Outco	me 1		By 2022, social institutions and participants will work across di	ffere	nt sect	ors in	draw	ing up	o and i	mplementig policies that see	k to address inequality, vulner	ability and social e	xclusion		
	Annual target/s					Time					PLANNED BUDGET			PUNO/s	Implementing
Output	2020	2021	List of activities	?	9			0		Overall budget description	Joint SDG Fund (USD)	PUNO Contributions (USD)	Total Cost (USD)	involved	partner/s involved
	* 50% of key institutions / actors involved		Hiring of technical support team to design support networks and implement the project	×	x	x x	*					(030)			
	in the design of the network out of the total		Mapping and coordination of relevant actors at a national and local level	×	×	t	H	1	+	1					
	number of key		Conversation workshops and interviews with elderly people, i Santiago and regions about gender equality	n x	×				+						
	institutions * 20% of key institutions /		Conversation workshops and interviews with caregivers in Santiago and in the regions	x	×					The agencies will work on the design of the					
	players promote gender		Conversation workshops with society at large, community groups, municipalities and government representatives in	×	×	+		+	+	support networks in the areas where the project is being					
	equality that participate in the design of the network		Santiago and the regions Preparation of a document that identifies barriers and facilitators for building networks for the elderly in urban and		×				+	project is being implemented. To achieve this, a process of joint creation or co-					
	the network out of the total number of those that		rural areas Pre-testing / design check of support networks in the field and with specific groups of elderly people, identifying their	1		×			+	construction / co- creation between multiple actors is					
	those that participate in the network design		different gender needs Socialization and validation of support network design		$\left  \right $	~		+	+	planned, including older persons, elderly people associations ,					
	* Number (to		Technical assistance for the design of Platform TDR and APP		$\square$			-	+	civil society, government, and United Nations					
Output 1.1 Participative design of community	strategies / approaches to ensure the inclusion of		Tender and development of Platform and APP						-	agencies. The idea is that this co-					OPS/OMS, UN WOMEN, OHCHR, ITU. National
networks to provide services to the elderly	players in the	NA	Hiring of Hosting services and payment for domain		$\square$	<u> </u>		-	+	encourages and involves all parties to	469,593	169,337	638,930	UNDP, ILO, FAO	Service for the Elderly (SENAMA). Civil Society. Municipalities. Academy
	tested and / or validated gender approach		Hiring of services for technical support, maintenance and			×				create the best possible design, which will then leverage ICT					
	* Percentage (to define) of		continual improvement		$\left  \right $	×	×	*	× ×	to put it into operation. This					
	key themes / aspects according to		Purchase of equipment	×	$\square$		×	_	_	network will help reduce or eliminate barriers that prevent					
	women's and men's needs, identified in									older people from exercising all their rights and offer					
	identified in the diagnosis that are integrated into									support and respite to caregivers of dependent older					
	the design of the network / platform		Socialization and training in the use of the Platform and APP t key support network teams			×				adults					
	platform * Percentage (to define) of key gender issues / issues		key support network teams												
	identified in the diagnosis														
	that are integrated into the network /														
	niatform		Technical assistance for participatory design of the information system	T		x x	Π	T	1	Work will be done to					
	* 60% of * 70 platform plat		Technical assistance for constant systematization of the information that is being generated	T		×				promote among decision makers the use of an information			<b>105,698</b> IL		
Output 1.2 Information		platform players that perceive the inputs /	Socializing and informative activities with community network to speed up plans of action	5			×	×		system that improves the timely and pertinent care of the		77,685 28,013			OPS/OMS_UN_WOMEN
system generated and made available for decision	platform players that perceive the inputs /		Document with lessons learned on how to incorporate the voice, opinions and perceptions of the beneficiaries in the	t		+		×	×	elderly. Information gathered through the platform and the APP	77,685			ILO	OHCHR, ITU. National Service for the Elderly
making at a local and centralized level	recommendatio ns from the network as	recommendations from the network as	design of social programs and initiatives Workshops and training for municipal teams on the use of information and effectiveness in decision making					×	x x	will be used, as well as qualitative					(SENAMA). Civil Society. Municipalities
	useful	useful	Training of government teams in charge of designing the social programs	T					××	information collected in the field, on best practices and lessons					
			social programs Public policy methodological model for decision makers on the systematization of information produced through the platform		$\left  \right $	+		+		learned in the process of creating support networks.					
Outco	me 2					-									
outto			By 2022, Chile will expand and consolidate access to quality pro Hiring of technical support team to design support networks	tecti	on ser	/ices t	hat fa	vor th	ne inte	gral development of people a	nd with a specific emphasis or	n children and the el	ideriy.		
			and implement the project Technical assistance for identiying neighborhoods for pilot			+		-	-						
			programs Formation of technical teams in charge of implementing pilot projects in their neighborhoods	*	^			-	+						
			Mapping out of supply and demand for public and private	-	$\left  \right $	*		-	+	_					
	* Percentage	* 10 pilots implemented	services for elderly people in pilot neighborhoods Share the project with municipalities, the Federation of Older			××		_	-	The agencies will					
	(to define) of key local	and evaluated at the	Persons, civil society, volunteer groups, the private sector etc.	-	$\square$	××		_	_	implement networks in the field, deploying					
	individual / institutional	* 100% of				×		_	+	technical teams that kickstart the networks					
Output 2.1 Community	players that in the network in	municipal gender-equality	Awareness campaign about gender equality in pilot districts, and project outreach materials			××		_	_	and train users of the platform and the APP.					OPS/OMS, UN WOMEN,
networks tested and evaluated	each municipality	focused pilots implemented	Opening ceremony and project awareness	×			×	_	_	The impact evaluation of the initiative will	806,897	290,970	1,097,868	UNDP, ILO, FAO	OHCHR, ITU. National Service for the Elderly
	* Number (to define) of	and evaluated out of the total	District implementation of pilot projects	L		+	×	×	×	also be carried out, gathering information					(SENAMA). Civil Society. Municipalities. Academy
	interactions	number of pilots	Technical assistance for the design, follow-up and impact assessment	×	$\square$	××	×		××	on the quality of life of the elderly before and					
	through the network /	* 80% of satisfaction of	Technical assistance for creating tools for impact assessment	L		××	Ц	4	$\perp$	after being introduced to the support					
	platform	people that benefited from	Baseline Information Survey	L		×	Ц	4	$\perp$	networks. It will also share the results.					
		the platform	Gathering of results		$\square$	1			×						
			Technical assistance for ex-post qualitative evaluation of olde persons, caregivers and the community on gender equality	1	$\square$	1	Ц		×						
			Sharing of results and takeaways		$\square$				×						
			Report with results, lessons learned and best practices		$\square$				×						
		* 80% of people,	Provision of tools to caregivers to facilitate their task.	L	$\square$		x	x		Given the social role					
Output 2.2 Consolidated	* Percentage (to define) of	according to	Creation of meeting places where caregivers can interact, receive guidance, containment and support	Γ		××	×	×		played by senior caregivers , who are also mostly women,					OPS/OMS, UN WOMEN.
caregivers support system aimed at redistributing	(to define) of tools / inputs according to gender that	that provide care and that show high levels of	Coordination of a network of caregivers that organizes and values them		×	××	×	×	×	special initiatives will be set up to provide	67,425	24,314	91,738	ILO	OHCHR, ITU. National Service for the Elderly
these tasks and improving the quality of caregivers	provide care	satisfaction	Community awareness about co-responsibility in caregiving	T		x x	×	×	1	opportunities of participating in social		24,314	91,738		(SENAMA). Civil Society. Municipalities
	part of the network design	art of the work design their problems on the network	Working group to coordinate the available public caregiving services and which proposes comprehensive policies	l	Ħ	××	×	×	1	activities and of personal development.					
	-			1	1	П^	1^1	~ I	1	1	1			1	1
		on the network / platform	proposals to that end			_	-								
Joint programm		/ platform	Proposals to that end			Time	<u> </u>				PLANNED E			PUNO/s	Implementing
Joint programm		/ platform	proposals to that end	Q 1	Q 2	Time Q Q 3 4	П		Q 3 Q4	• •	PLANNED E Joint SDG Fund (USD)	BUDGET PUNO Contributions (USD)	Total Cost (USD)	PUNO/s involved	Implementing partner/s involved
Joint programm Communications plan		/ platform	proposals to that end	Q 1 ×	Q 2 x	-	<u> </u>		93 Q4 x x	·		PUNO Contributions	Total Cost (USD) 116,468		Implementing partner/s involved



# Annex 8. Risk Management Plan

**Contextual Risks**: The current government already has an ambitious social policy agenda which could make initiatives like the NODO Platform less of a priority. For now, the main threat comes from the Tax Reform, Labor Modernization, Pension Reform and other programs such as Protection of Middle Classes or initiatives to promote the inclusion of older people at work, which could reduce the amount of time and resources government agencies like the Ministry of Social Development (SENAMA) can dedicate to other projects.

Although this is often to be expected, the NODO Platform collaborates with agencies that are not directly involved in the legislative agenda. Moreover, the needs of the elderly already have a broader political support base that goes beyond that of SENAMA and the Ministry of Social Development, aligning with the priorities of the Office of the First Lady.

These risks can be mitigated by strengthening ties with technical offices and demonstrating effectiveness at a local level. But perhaps more importantly is the risk of political turnover, since the project will coincide with municipal elections in 2020) and a change of government in March 2022, just when the project is scheduled to end.

Priorities frequently change from one government to the next and municipal pilot projects could be interrupted and the chance of the platform being adopted at the end of the pilot phase be compromised.

To mitigate that risk in the municipalities, emphasis could be made on adoption of the platform with the central government and implemented nationwide. However, a more significant threat is the worsening social crisis in the country, which could push the elderly and caregivers down as a priority on the public agenda.

To counter that threat, advocacy groups could work to keep the importance of the elderly top of mind through periodic meetings with governments counterparts and appoint representatives to continually evaluate contextual risks.

**Programmatic Risks**: Through products 1 and 3 people in risk of social exclusion, - typically elderly people and their caregivers, have the opportunity to connect with the State or civil society via primary health care centers, the civil registry, etc.

For product 2, making contact with these people depends a lot more on municipalities, local community associations and the elderly people themselves taking the initiative and becoming actively involved in pilots.

The pilot project explores different mechanisms to encourage adoption in different neighborhoods in addition to carrying out training and other activities aimed at raising the awareness of the program.



The program will seek, from the outset, to mitigate the risk of low adoption by developing tools that ensure the program addresses the needs of its potential users. Participating agencies will systematically evaluate these mitigation measures through constant meetings with counterparts in the municipalities and community associations.

**Institutional Risks**: Success of the project relies on the consistency of its stakeholders, or institutional counterparts, collaborating on an ongoing basis.

To mitigate the risk of this not happening, the project will strengthen its coordination team to lift some of the burden for developing and implementing the project from its institutional counterparts.

Maintaining interest in the project also hinges on institutions taking advantage of the information generated by the NODO Platform for decision-making. To that end, the program will implement measures that continually highlight the importance of the project.



Risks	<b>Risk</b> Level: (Likelihood x Impact)	Likelihood: Certain - 5 Likely - 4 Possible - 3 Unlikely - 2 Rare - 1	Impact: Essential – 5 Major - 4 Moderate - 3 Minor - 2 Insignificant - 1	Mitigating measures	Responsible Org./Person
<b>Contextual risks</b> Excess of political priorities in the government program may affect how the government prioritizes the agenda and their commitment to the project	8	4	2	Strengthening work with technical government agencies and with local governments	UN Agencies
Worsening of the social crisis could lead to the de- prioritization of elderly people on the political agenda.	9	3	3	Development of advocacy activities with governments to prioritize the elderly and caregivers in their political agendas	UN Agencies
A change in government in 2022 could damage the potential of adoption of the Plataforma NODO at the end of the project	12	3	4	Strengthening work with technical government agencies and with local governments	UN Agencies
Changes in municipal governments in 2021 could lead to the loss of local support in implementing the pilot and a change in local y associations	9	3	3	Development of advocacy activities with local governments to continue programs they have already committed to; development of more than one pilot.	UN Agencies
Lack of political will to prioritize care for segments of the population that face discrimination on multiple fronts (e.g. senior caregivers)	9	3	3	Inclusion of communication, and awareness activities from the beginning of the project with a focus on the use of evidence.	UN Agencies



Risks	<b>Risk</b> Level: (Likelihood x Impact)	Likelihood: Certain - 5 Likely - 4 Possible - 3 Unlikely - 2 Rare - 1	Impact: Essential – 5 Major - 4 Moderate - 3 Minor - 2 Insignificant - 1	Mitigating measures	Responsible Org./Person
Programmatic risks					
Lack of interest at the municipal level to support and follow-up on pilots	6	2	3	Replacement by another municipality with similar characteristics	UN Agencies
Insufficient local interest from organizations and elderly people and their caregivers in in participating in the initiative	9	3	3	Increased investment in dissemination and inclusion work with clear learning guidelines once the pilot is finished	UN Agencies
Difficulty in getting access to excluded elderly people and their caregivers	9	3	3	Strengthen the program's inclusion strategy through partnerships with other relevant actors (e.g. primary health services)	UN Agencies
Institutional risks		·			
Poor capacity of municipalities and civil organizations to participate in and develop the program and adopt the tool	8	4	2	Inclusion of technical support to municipal teams and local civil associations in the program; specific consideration of these risks in the tender for the technological tool	UN Agencies
Low willingness of decision makers to use the information generated for (re) designing policies	4	2	2	Inclusion of communication and awareness activities from the beginning of the project, with a focus on the use of evidence. The same goes for the design and implementation phases of the project.	UN Agencies



Risks	<b>Risk Level:</b> (Likelihood x Impact)	Likelihood: Certain - 5 Likely - 4 Possible - 3 Unlikely - 2 Rare - 1	Impact: Essential – 5 Major - 4 Moderate - 3 Minor - 2 Insignificant - 1	Mitigating measures	Responsible Org./Person
Changes in project-related officials in implementing agencies and government agencies	3	3	1	Strengthen the coordination and executive teams and maintain written documentation to ensure that the continued history and culture of the project is always present	UN Agencies and coordination team