Statement GA – Older persons in armed conflict and peacekeeping

Mr. Chairperson,
Distinguished delegates,
Ladies and gentlemen,

It is an honor to present my report on older persons in armed conflict and peacebuilding to you today – unfortunately it is more than timely to speak on the topic. I extend my gratitude to all stakeholders who have engaged with me and to those who have shared their written contributions to the call for input.

Dear Excellencies, colleagues and friends,

In today's armed conflicts, civilians are not only caught in the crossfire. They are increasingly at the center of the battlefield. Wars unfold in cities, towns and villages, disrupting every aspect of daily life. Among those most profoundly affected, yet rarely seen, are older persons. They are too often left behind, overlooked in evacuation plans, and excluded from emergency communication. Shelters are inaccessible. Medical care is unavailable because hospitals and care structures are destroyed. Family support systems collapse. Malnutrition and disease take a rapid toll, and famine is used as a weapon. Trauma and isolation have a huge impact on older persons. As a result, this struggle accelerates the process of ageing and compounds their vulnerability.

This is the reality for millions of older persons caught in today's armed conflicts.

In Ukraine, one in four people affected by the war is over 60 years old. Almost half of the civilian deaths are persons over 60. During the first 19 days of the conflict in Gaza in 2023, older people made up 8.6 per cent of fatalities, despite comprising only 5 per cent of the population. In Myanmar, older persons have reportedly been burned alive in their houses after refusing to flee or being unable to leave.

Many remain in war-affected areas, even when others flee, bound by strong ties to their homes and territories, physical limitations, or fear of never returning. For some, self-ageism also influences decisions: Believing it is not worth fleeing, that they cannot rebuild, or that they would only become a burden for their families. Too often, information about evacuations is disseminated online only, leaving those without access or digital literacy uninformed.

Excellencies, colleagues and friends,

Displacement brings new hardships. In camps or new areas, older persons often lose livelihoods, self-sufficiency, and support networks. Aid distribution systems are rarely designed with them in mind. Difficult terrain, long distances and lack of mobility prevent their access to essentials, such as food, water and healthcare. One particularly troubling response to their displacement is institutionalization. Institutions can become highly dangerous in armed conflicts, as they may be targeted in attacks or even used as human shields.

Healthcare, a cornerstone of human dignity, becomes increasingly inaccessible in armed conflicts. Older persons, who are more likely to require ongoing treatment for chronic illnesses, face destroyed hospitals and pharmacies, displaced health workers, and cut supply chains. In May 2025, 18 of the 36 existing hospitals in Gaza were functioning only partially. In Ukraine, many older persons were forced to go without essential medications or sell part of their food supplies to afford them. In besieged cities, older persons with chronic health conditions endured weeks in freezing basements without electricity, running water or medical care. Across conflicts, triage practices and unconscious bias often deprioritize older persons for treatment, denying them equal access to life-saving interventions. Assistive devices for mobility, hearing or vision are scarce, ill-fitting, or lost during displacement.

The intersection of age with disability, gender, ethnicity or minority status compounds vulnerability. Older women face heightened risks of sexual and gender-based violence and are often excluded from decision-making and aid distribution. Older Indigenous persons and those from marginalized groups bear additional burdens, including systemic discrimination and the destruction of cultural heritage.

Despite these challenges, I must emphasize that older persons are not only victims. They play essential roles in their families and communities during and after conflict. Many provide care for children and other older persons. They volunteer in relief distribution, participate in community committees, and serve as trusted sources of guidance and cultural knowledge. Their wisdom and lived experience are invaluable for reconciliation, peacebuilding and the prevention of radicalization. In many societies, older persons are custodians of traditions and histories that can foster resilience and social cohesion in times of crisis.

However, peacebuilding and recovery efforts too often overlook older persons. They are portrayed as passive recipients of aid, rather than recognized as active participants. This exclusion undermines not only their rights, but also the sustainability of peace. I urge stakeholders to engage older persons, so that they can contribute significantly to rebuilding households, supporting livelihoods, and fostering intergenerational solidarity.

Mr. Chairperson,

Our legal and policy frameworks remain inadequate. International humanitarian law recognizes the special protection due to older persons, but implementation is weak. The ongoing work towards a new, legally binding instrument on the rights of older persons presents a vital opportunity to address their protection, dignity and safety during armed conflicts.

Excellencies,

Less than 1 per cent of humanitarian aid is explicitly allocated to the needs of older persons and persons with disabilities. Humanitarian assessments fail to address the diverse needs of different age groups of older persons.

Evacuation plans must be inclusive and accessible and communication strategies must reach older persons with clear, timely and accessible information. In displacement settings, older persons must be provided with dignified living conditions and accessible infrastructure. Moreover, I urge stakeholders to include older persons in health response plans and triage protocols.

The measure of our commitment to human rights is tested in times of conflict.

We must ensure that older persons are no longer overlooked in armed fighting, displacement, or recovery. To do so is not only to uphold human rights, but also to build the foundation for just and lasting peace.

To ensure that we mandate holders can speak up for our constituency and we also need protection – there for let me reiterate - I stand in solidarity with my colleague Special Rapporteur on OPT.

I unconditionally denounce the US Government’s sanctions on the Special Rapporteur on the occupied Palestinian territory. I express my full solidarity with Francesca Albanese. Sanctioning a Special Rapporteur appointed by the Human Rights Council violates international law and is a direct attack on the integrity of the UN human rights system, including special procedures as a whole. I call on all States to act decisively to denounce

these sanctions and refuse to carry them out. I also call on the United States to immediately withdraw these illegal sanctions.

Thank you for your attention and I look forward to a fruitful interactive dialogue.