



Proceedings of the Eighteenth Annual Celebration of the International Day of Older Persons

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A Call for a Convention on the Rights of Older Persons

Thursday, 0ctober 2, 2008 10:00 am – 4:30 pm



Presented by:

The CONGO Committee on Ageing
in collaboration with
The UN Department of Public Information
The UN Department of Economic and Social Affairs
and
The UN Population Fund

MISSION STATEMENT

$18^{\rm TH}$ ANNUAL INTERNATIONAL DAY OF OLDER PERSONS October 2, 2008

In this 60th Anniversary Year of the Universal Declaration of Human Rights, it is the aim of 18th International Day of Older Persons (IDOP) 2008 observance by the NGO Committee on Ageing, in New York, to begin a process that will lead to the development and acceptance of a Convention on the Rights of Older Persons. Despite the fact that older persons comprise 11 percent of the global population, they remain largely marginalized and invisible in society. Thus, we have taken as our theme.

"A Call for a Convention on the Rights of Older Persons"

Such a document should incorporate the United Nations Principles for Older Persons (General Assembly Res 46/91, 1991). This "platform" for protecting and empowering older persons will lead the way for nations to initiate and promote the issues and needs of older persons in their respective societies. The envisioned Convention would protect older persons from abuse and neglect and assure their rights to enjoy, more fully, all social protections within existing universal humanitarian laws and principles. The Convention would assure the implementation of directives in the Madrid International Plan of Action on Ageing, (MIPAA) as set forth at the Second World Assembly on Ageing, (Madrid 2002), making "A Society for All Ages" a reality.

The OBJECTIVES of this 2008 UN IDOP:

- 1. To draw attention to the need for an international Convention to specifically ensure the Human Rights of Older Persons.
- 2. To recognize governments, private enterprises, non-government organizations and members of civil society and international forums, which have helped to construct a foundation for enhancing the Human Rights of Older Persons.
- 3. To create a blueprint for potential legislation, policies and viable practices applicable to global regions, economies and cultures
- 4. To facilitate partnerships of global populations and organizations for recognition and empowerment of older persons to remain independent, interactive, productive, healthy and financially secure, and mainstream the 1991 UN Principles for Older Persons: Independence, Participation, Care, Self fulfillment, and Dignity, toward promoting a positive image of ageing.

INTERNATIONAL DAY of OLDER PERSONS

PROGRAM

October 2, 2008 United Nations Conference Room 2

MORNING PROGRAM

Registration

Opening Montage

Message from the U.N. Secretary General, Ban Ki Moon, on the International Day of Older Persons.

Message of H.E. Father Miguel d'Escoto Brockmann, President of the General Assembly

Message from Jose Miguel Guzman, Chief, Population and Development Branch of UNFPA.

Welcome Message from Florence Denmark, Chair, Congo Committee on Ageing, N.Y.

MUSICAL INTERLUDE

Kaori Kato: Oboe Selections.

KEYNOTE SPEAKERS

Moderator, Mr. Eric Falt, in the Department of Public Information.

Keynote Speakers:

Mr. Sergei Zelenev, Chief, Social Integration Branch, Division for Social Policy and Development, Department of Economic and Social Affairs.

H.E. Minister Paulo de Tarso Vannuchi, Secretario Especial dos Direitos Humanos in Brazil.

Questions and Answers.

MUSICAL INTERLUDE

Terri

(Accompanied by Dennis)

REGIONAL SPEAKERS

Moderator: Dr. Alexandre Sidorenko, Chief, Unit on Ageing, United Nations.

Regional Speakers:

Professor Nana Apt, Ghana. Dr. Lia Daichman, Argentina. Dr. Nabil Kronfol, Lebanon.

H.E. Minister Dzamila Stehlikova, the Czech Republic.

Manohar Upreti, Nepal.

Questions and Answers.

MUSICAL INTERLUDE

Terri

(Accompanied by Dennis)

LUNCH BREAK

AFTERNOON PROGRAM

Introduction: Janet Sigal and Susan Somers, IDOP Co-Chairs.

BREAKOUT SESSIONS WITH THE GLOBAL REGIONAL SPEAKERS

Moderator: Jack Kupferman, IDOP Associate Co-Chair.

Professor Nana Apt, Ghana.

Moderator: Norma Simon, IDOP Associate Co-Chair.

Dr. Lia Daichman, Argentina.

Moderator: Janet Sigal, IDOP Co-Chair.

Dr. Nabil Kronfol, Lebanon. Susan Somers, IDOP Co-Chair.

H.E. Minister Dzamila Stehlikova, the Czech Republic.

Mr. Manohar Upreti, Nepal.

STRATEGIES MOVING TOWARDS A CONVENTION ON THE RIGHTS OF OLDER PERSONS

Introduction: Jack Kupferman, IDOP Associate Co-Chair. Moderator: Susanne Paul, Global Action on Ageing.

Nana Apt, Professor of Gerontology, Ashesi University College, Ghana

Bridget Sleap, HelpAge International

Closing Remarks: Rosa Perla Resnick, International Association of Gerontology and Geriatrics, and International Immigrants Foundation





THE SECRETARY-GENERAL

MESSAGE ON THE INTERNATIONAL DAY OF OLDER PERSONS <u>1 October 2008</u>



The theme of this year's International Day of Older Persons, "Rights of Older Persons", is especially apt in this year in which we mark the 60^{th} anniversary of the Universal Declaration of Human Rights.

Promoting the independence, participation and dignity of older persons has long been on the agenda of the United Nations and is central to implementation of the Madrid International Plan of Action on Ageing. In adopting that Plan six years ago at the Second World Assembly on Ageing, UN Member States committed "to eliminating all forms of discrimination, including age discrimination". They recognized "that persons, as they age, should enjoy a life of fulfillment, health, security and active participation in the economic, social, cultural and political life of their societies". And they determined "to enhance the recognition of the dignity of older persons and to eliminate all forms of

neglect, abuse and violence".

Despite this commitment, in many parts of the world, the rights of older persons are violated every day. Older persons often face age discrimination at a workplace. In social environments, they may experience a lack of recognition and respect. They may be deprived of full inclusion and participation in social, economic, cultural and political affairs. Most disturbingly, in many countries, incidences of neglect, abuse and violence against older persons are not at all rare or isolated events.

Acknowledging the crucial role that older persons play in society is an important pillar of the Madrid Plan of Action. Earlier this year, the first review and appraisal of the Plan made abundantly clear that much more needs to be done at the national level to support older persons, promote their income security and social protection, and ensure quality health care as well as the provision of long-term care services. To make this possible, national ageing-specific policies must be improved substantially and the concerns of older persons mainstreamed into a wider policy framework.

This International Day is an opportunity to stimulate discussion on promoting the rights of older persons and strengthen partnerships aimed at securing their full participation in society. Let us all redouble our efforts to realize the rights of older persons, and make the dream of a society for all ages a reality.

Message of H.E. Father Miguel d'Escoto Brockmann, President of the General Assembly

Delivered by H.E. Norman Miranda, Chef de Cabinet, to the DPI/DESA/NGO event on the International Day of Older Persons

United Nations headquarters, New York 10:00am 2 October 2008

His Excellency Paulo de Tarso Vannuhi, Special Secretary of Human Rights of Brazil, Ms. Florence Denmanrk, Chair of the NGO Committee on Ageing, Panellists, Ladies and Gentlemen,

On behalf of the President of the General Assembly, Father Miguel d'Escoto, I am pleased to convey to you his best wishes. He very much regrets that his official prevent him from being here this morning. As the oldest elected President of the General Assembly you can be assured that he is indeed with you in spirit and conviction. Please allow me to share with you his message:

Over the past 63 years, a number of new and pressing issues have been added to the agenda of the UN General Assembly. Many, like concern for the environment, are a longstanding concern for the United Nations, but it is only more recently as consensus has emerged of the alarming impact of and man-made origins of climate change, that this issue has moved to the forefront of global agenda.

The unprecedented demographic phenomenon of out rapidly ageing population is another important issue affecting societies around the globe. Yet this issue is still not receiving the attention that it deserves. For this reason the International Day of Older Persons constitutes an important opportunity to raise awareness of a range of global issues affecting one of the most rapidly growing sectors of our global population, and in particular human rights dimensions.

At the age of 75, I have grown up and matured in tandem with our dear United Nations. I am honored that I, a fellow senior citizen, have been entrusted with the Presidency of the General Assembly. I hope that you share with me a certain sense of pride as I assume this post.

Like so many of you here today – concerned citizens who wish to share your hard-earned expertise and wisdom in solidarity with the UN and our brothers and sisters around the world- I come to this task with the same passion for justice that has inspired me throughout my life.

Indeed, I believe that this passion to defend the world's vulnerable, and which inspires out involvement here, is what gives meaning to our lives. Our involvement in today's key issues is what enable us keep pace with our world and to enrich the perspectives of our youth in our joint search for solutions.

Each of us here is well aware that our longevity is a mixed blessing. Many of us our living longer, healthier and more productive lives than ever. We are forsaking retreat into retirement to join together in activism and solidarity. But older people are among the poorest in our societies and, all too often, the most neglected. They are especially vulnerable to the food and energy crises that can push older people into extreme poverty.

But we are getting better organized each day. As elders, our social involvement is transforming and revitalizing the neglected role of civic participation for the betterment of our frequently mismanaged communities. As experts, as organizers and as volunteers, we are leading the charge against indifference, against the injustice of economic and social systems that afford the benefits of development to some and deny them to others.

Experience has shown us our interdependence and connectedness with others. We know intuitively and empirically that we must look at the world in terms of "we and ours" rather than "I and mine." And we have the time, the expertise, and resources to make a bid difference.

But social policy has yet to catch up with demographic reality of a rapidly growing population of older persons. After decades of focusing on younger people, their health and education and employment, we must adjust our national priorities to include the many concerns of the elderly. This is only right. Affording human dignity means recognizing

the needs and rights of all persons during each stage of life, and overcoming barriers that discriminate or deny them full participation in our human society.

Rare is the developing country where there are safety nets like social security, not to mention pension plans. We cannot neglect the health, the nutrition and the psychological well-being of our older citizens.

We must push the envelope of human rights to protect them and ensure their well-being and dignity. We must overcome prejudices that prevent them from continuing to participate and contribute to our societies. We must find ways to help families to care for their parents and grandparents.

The United Nations can be mobilized to assist governments and specialized agencies in making this generational change. With our unsurpassed databases and networks of experts, the UN can help identify and share policies and rights that can guide national efforts, and spare governments the painful process of reinventing the wheel.

For these reasons, I would like to recommend to the General Assembly that it consider the call by some member states and you as activists of civil society for a convention on the rights of older persons. I believe the General Assembly, a uniquely representative of virtually all nations, must use its authority to support these types of bold initiatives that continue to expand and strengthen our human rights.

the growing and vibrant constituency around older persons makes it an issue that will soon find its rightful place in our common agendas.

Thank you.

Message of Mr. Jose Miguel Guzman Chief, Population and Development Branch of the UN Population Fund

Mr. Guzman said that his organization was pleased to have made possible the participation of speakers from the developing countries in the IDOP Program. He reiterated the significance of Article 19 of the Political Declaration, adopted at the Second World Assembly, in Madrid, which called on people from all regions of the world to work towards a shared vision of equality for persons of all ages. In that spirit, he expressed his hope that the day's meeting would mark the beginning of a process, which would pave the way for the development and acceptance of a Convention on the Rights of Older Persons.



Dr. Florence L. Denmark, Chair, CONGO Committee on Ageing, UN NY, has represented both the American Psychological Association and the International Council of Psychologists at the United Nations since January 2000. Dr. Denmark received her Ph.D. in Social Psychology from the University of Pennsylvania. She was the Robert Scott Pace Distinguished Professor and Chair of the psychology department at Pace University for 13 years. Prior to that time, Dr. Denmark was the Thomas Hunter Professor of Psychology at Hunter College and the Graduate Center of the City University of New York. She is currently the Robert Scott Pace Distinguished Research Professor at Pace University.

Dr. Denmark has served as President of the American Psychological Association (APA), the International Council of Psychologists, and other regional and national organizations. At this time, she is a liaison to the APA's Committee on Ageing. An internationally recognized scholar, researcher and policy-maker, with a particular expertise on the ageing of women, she is a Fellow of the APA and has received many national and international awards and four honorary doctorates. Dr. Denmark has authored or edited 15 books and over

100 articles and book chapters. She has presented numerous papers and reports on ageing at local, regional, national and international meetings. In 2004, Dr. Denmark received the American Psychological Foundation's Gold Medal for Lifetime Achievement in the Public Interest. In 2005, she received the Ernest Hilgard Award for Distinguished Sustained Contribution to General Psychology and in 2007, the Raymond D. Fowler Award for outstanding

contributions to the APA.

Welcoming Remarks

Good morning. On behalf of the NGO Committee on Ageing, I'd like to welcome you to the 18th annual celebration of International Day of Older Persons. It's wonderful to see all of you here. Today's program, "A Call for a Convention on the Rights of Older Persons" is an important topic that deals with the human rights of older persons and points to the need for a convention to recognize these rights. Having such a convention is in line with the Madrid International Plan of Action on Ageing, the principal outcome document of the Second World Assembly on Ageing. The convention should incorporate the 1991 United Nations Principles for Older Persons.

As Secretary General, Ban Ki-Moon noted in his message: "much more needs to be done at the national level to support older persons, promote their income security and social protection, and ensure quality health care as well as the provision of long-term care services." He also stated that "Let us all redouble our efforts to realize the rights of older persons, and make the dream of a society for all ages a reality."

I want to thank the U.N. Secretary General for recognizing this important day as well as H.E. Norman Miranda, Chef de Cabinet, who has presented a statement on behalf of the President of the 63rd session of the General Assembly. I also want to thank H.E. Minister Paulo de Tarso Vannuchi, Secretario Especial dos Direitos Humanos in Brazil who will be giving a very important address on behalf of older persons and human rights. I also want to express appreciation for the message from Jose Miguel Guzman, Chief, Population and Development Branch of UNFPA. Thank you very much for the generous contribution UNFPA gave in support of this day.

Before we hear from our keynote speakers, one of the interns from the NGO American Psychological Association, Kaori Kato will perform for us on the oboe. Our keynote speakers include Mr. Sergei Zelenev, Chief, Social Integration Branch, Division for Social Policy and Development, Department of Economic and Social Affairs, and H. E. Minister Paulo de Tarso Vannuchi. The keynote speakers will be introduced by the moderator, Mr. Eric Falt, Director of Communication and Public Information of the Department of Public Information. DPI is one of our sponsors for this program. Following the keynote addresses, we will have a musical interlude where Terri will sing accompanied by Dennis.

Following this musical interlude we will hear from our Global NGO panel giving reports from the five UN regions. The Regional Panel consists of experts representing various regions of the world and will be moderated by Dr. Alexandre Sidorenko, Chief, Unit on Ageing, United Nations. The panelists are Professor Nana Apt, Ghana, Dr. Lia Daichman, Argentina, Dr. Nabil Kronfol, Lebanon, H.E. Dzamila Stehlikova, the Czech Republic, and Monohar Upreti, Nepal, Following this panel, we will hear once again from Terri and Dennis before we break for lunch. Those who have signed up for lunch will proceed to the Delegates' Dining Room where we will honor Virginia Hazzard. H.E. Dr. Lewanika, the Zambian Ambassador to the United States will be the keynote luncheon speaker.

Following the lunch break, we will hear once again from the global regional speakers as well as a panel on strategies moving towards a convention on the rights of older persons. This panel will be moderated by Susanne Paul from Global Action on Ageing, and will include one of our regional speakers, Nana Apt from Ghana, and Bridget Sleap from Help-Age International. The Day will conclude with closing remarks by Rosa Perla Resnick, International Association of Gerontology and Geriatrics, and International Immigrants Foundation. I am sure that the afternoon sessions will produce a lively discourse.

Today's International Day of Older Persons could not have occurred without the United Nations Department of Public Information, the Untied Nations Department of Economic and Social Affairs, and the UN Population Fund, who are co-sponsoring this day. The UN NGO Committee on Ageing appreciates the generous grant provided by the UN Population Fund.

Many thanks are also due to this International Day of Older Persons Committee Co-Chairs, Janet Sigal and Susan Somers along with the Associate Co-Chairs, Jack Kupferman and Norma Simon. The list of the IDOP Committee and the Executive Committee of the NGO Committee on Ageing can be found in your program.

Once again, welcome to the United Nations, the eighteenth annual commemoration of the International Day of Older Persons, the first briefing of the season of the Department of Public Information.



Eric Falt is the Director of the Outreach Division in the Department of Public Information. Prior to joining DPI in 2007, Mr. Falt served as Director of the Division of Communications and Public Information of the United Nations Environment Programme (UNEP). Based at UNEP Headquarters in Nairobi, he simultaneously served as Director of the United Nations Information Centre [UNIC]. Mr. Falt also served as Director of the United Nations Information Centre in Islamabad, Pakistan, from 1998 to 2002. He was the Spokesman and Head of Information for the United Nations Office of the Humanitarian Coordinator for Iraq from 1997 to 1998; and prior to that served as Spokesman and Head of the Press and Information Office for the United Nations Mission in Haiti (UNMIH) from 1993 to 1997. and Spokesman for the United Nations Transitional Authority in Cambodia (UNTAC) from 1992 to 1993. Before beginning his service with the United Nations, Mr. Falt worked in New York during 1991 to 1992 as Press Attaché for the

Permanent Mission of France to the United Nations. He was also Press Attaché for the Consulate General of France in Chicago from 1989 to 1991. Eric Falt is a national of France.

For more information on the Outreach Division, please visit http://www.un.org/Depts/index.html.

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In his opening remarks, Mr. Falt emphasized the need to bridge the gap between the philosophy of the Madrid Plan of Action and the real commitment in national plans. He expressed his interest in hearing the exchange of views of the speakers on the need for a new convention on older persons.

Mr. Falt introduced the following Keynote Speakers and moderated the question and answer session.

Keynote Speakers:

Mr. Sergei Zelenev, Chief, Social Integration Branch, Division for Social Policy and Development, Department of Economic cand Social Affairs

H.E. Minister Paulo de Tarso Vannuchi, Secretario Especial dos Direitos Humanos in Brazil



An economist by education, **Dr. Sergei Zelenev** studied in Russia and the US: he received his MA in international economic relations in 1972 and PhD in economics in 1975 from Moscow State Institute of International Affairs (MGIMO-UNIVERSITY). In 1993 he completed the management program--the executive MBA program at New York University (Stern School of Business) earning his MBA. He authored a book on transnational corporations and social policy as well as many articles on economic and social development published in Russian and English.

Upon obtaining his doctorate in 1975 he worked as associate professor of political economy at MGIMO-University in Moscow, serving as well as a Vice-Dean of the Department of International Economic Relations. In 1981 he joined the UN Secretariat in New York as an

Economic Affairs Officer. Since then he has been working at the UN Secretariat in the socio-economic field, performing, as required, analytical, normative and managerial functions. He continuously contributed to such flagship UN publications as Reports on the World Social Situation and World Economic and Social Survey. He also oversaw the preparation of the Comprehensive report on the implementation of the outcome of the World Summit for Social Development submitted to the 24th special Session of the GA and contributed to the preparation of the draft text of the Madrid International Plan of Action on Ageing submitted to the Second World Assembly on Ageing.

Apart from working at the United Nations Headquarters in New York, twice Mr. Zelenev worked in Africa, participating in the peace-keeping missions in Namibia and South Africa in 1989-1990 and 1993-1994 respectively. His current position is **Chief, Social Integration Branch, Division for Social Policy and Development, Department of Economic and Social Affairs**. His responsibilities include managerial functions as well as substantive support to the intergovernmental policy dialogue of the member states at the United Nations, and facilitating international cooperation on social development issues. Specifically, his responsibilities cover conceptualization and overseeing UN/DESA work on ageing, youth, family and inclusive policy issues, including reports which are submitted to such intergovernmental bodies as the Commission for Social Development, the Economic and Social Council and the UN General Assembly.

He participated in numerous international events, symposia and conferences, making keynote presentations on issues of international significance.

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Convention on the Rights of Older Persons: how feasible is the option?

Keynote statement by Sergei Zelenev, Chief, Social Integration Branch, DESA on the occasion of the International Day of Older Persons, 2 October 2008, New York, UN Headquarters

Dear colleagues, ladies and gentlemen,

It is a pleasure and a privilege for me to be at this podium and address such a distinguished audience today when we mark the International Day of Older Persons. This Day is an opportunity to draw attention to a range of issues affecting older persons, but also to celebrate their contribution to society. Today we are paying tribute to older persons around the world. We celebrate their vital role in family and in community, we celebrate their wisdom and experience, we celebrate both men and women – but particularly women – as family caregivers, we celebrate older persons as those who provide emotional support to both the old and very young. There are numerous roles that older persons play in society, in a contemporary world, too numerous even to mention or list. But apart from those contributions, today we are also discussing the issue of rights of older persons – a hugely important issue. And this discussion is particularly significant in this year when we commemorate the 60th anniversary of the Universal Declaration of Human Rights.

I have to say that unfortunately, the rights of older persons are often overlooked on the national and international agenda, and when the situation of older persons is discussed it is considered primarily in light of welfare considerations and social assistance schemes, implicitly depicting them as individuals dependent on society. The UN, however, has a history of addressing this issue from both socio-economic and legal standpoints and exploring various aspects of human rights of older persons. The right to social security, for example, is mentioned in the Universal Declaration of Human Rights (article 22), and respective provisions are contained in the International Covenant of Economic, Social and Cultural Rights (article 9). The UN Secretariat also has been actively involved in shaping the agenda on ageing, and more recently in the review and appraisal as well as the implementation of the Madrid Plan,

thus providing substantive support to the intergovernmental process. The NGO Committee on Ageing asked me to concentrate today on a call for a Convention on the Rights of Older Persons, and I am happy to share my thoughts in this regard but I have to underscore that I am speaking here today in my personal capacity.

When we are discussing such a serious undertaking as the elaboration of a Convention, we are actually thinking about how to translate our caring and compassion for older persons into hard core legal provisions, making dignity not only a moral underpinning but also a legal principal of the Convention. Dignity of course is one of the key principles, although legally speaking it cannot be seen as a panacea for all of the existing shortcomings of laws meant to promote equality. However, dignity is an important core principle in human rights discourse and it is recognized by the UN as such, along with the other 1991 UN Principles for older persons. These guiding principles were adopted by the United Nations General Assembly as an instrument for policymakers to incorporate into national development programmes. Underscoring the contributions that older persons make to society, the 18 principles, quite justifiably, were grouped under five quality of life characteristics, namely, independence; participation; care; self-fulfillment and dignity. Until now, these UN Principles constitute the only internationally agreed human rights instrument that specifically addresses the needs and rights of older persons.

When we are talking about the rights of older persons and a need to buttress them, we cannot but see that in many cases older persons are suffering from structural disadvantages in society, and *ad hoc* solutions cannot always plug the gaps in national legislation regarding such existing negative phenomenon as age discrimination or elder abuse. So developing a Convention on the rights of older persons would clearly signify a leap to an entirely different level of social protection. Admittedly, it is not an easy job to do. It requires a confluence of many efforts by many partners. It requires persuasive arguments that could convince the skeptics. But on top of everything else a clearly expressed political will of the Member States – the State Parties – is required. This is a vital precondition on a road towards any Convention.

In my view there are many solid reasons why the elaboration of such a Convention could and should be considered and explored.

First of all, such a Convention is not something that comes out of a blue sky. A Convention would be a continuation of major efforts already undertaken by the Member States at the national level, and would build upon the rights frameworks already established in the existing international instruments. There are numerous initiatives at the national level where the agenda of older persons' rights has been gaining ground, with respective promulgation of special norms, rules and regulations to protect those rights and subsequent entitlements that may stem from those socio-economic rights. One region where this issue has been tackled with particular vigor is the region of the Economic Commission for Latin America and the Caribbean. Admittedly, it has a long historic tradition – let me remind you that in 1948 Argentina became the first country ever to put forward the idea of a Declaration of old age rights thus putting ageing on the UN agenda. Even though the Declaration was not adopted it provided a positive impetus to the political process at the UN to keep the plight of older persons in focus, even at a time when shifts in the age structure leading to demographic transition with its far- reaching socio-economic consequences was still at its very beginning. In the last five years several countries in the region (let me name Brazil, El Salvador, Mexico, Paraguay and Venezuela as an example) have adopted a wide range of legislation addressing the rights of older persons in institutions.

Some qualitative steps regarding the Convention on the Rights of Older Persons were made in the Brasilia Declaration adopted by the Second Regional Intergovernmental Conference on Ageing in Latin America and the Caribbean on 6 December 2007. The Declaration proposed that "legal frameworks and monitoring mechanisms be created to protect the human rights and fundamental freedoms of older persons, whether they live in long-stay facilities or in their own homes, and to facilitate the formulation and enforcement of laws and programmes for the prevention of abuse, abandonment, neglect, ill-treatment and violence against older persons". The Declaration further pledged to organize the necessary consultations with Governments in the region "to promote the drafting of a convention on the rights of older persons within the framework of the United Nations". One such consultative meeting of great importance, with the participation of interested Governments, civil society organizations and representatives of the academic community, was just completed in mid-September in Rio do Janeiro, where all aspects of the Convention were explored at length. The Distinguished Minister H.E. Paulo de Tarso Vannuchi has just presented the position of the Brazilian Government in this regard.

The reasons why many Governments feel compelled to act, specifically regarding older persons, and to introduce legal provisions to protect their rights reflect the fact that this particular socio-demographic group remains vulnerable and DOES NEED special protection. This vulnerability has many dimensions and income security is often mentioned as a key issue. Yes, poverty is a gross violation of basic human rights, and failure to provide older persons with adequate means to live in dignity impedes their full participation in society. Older persons, however, face risks other than loss of income, including frailty, discrimination, neglect and even harassment. Lack of access to affordable

health care is another crucial dimension of insecurity in old age. While vulnerability of older persons as a group may vary depending on a country's circumstances, it does exist in real life, and is an obvious factor of concern, providing moral, ethical and political grounds for the calls for existence of better legal instruments to protect this particular segment of the population. By the way, while poverty reduction has been a central concern of global development policy over the past decade, in neither of the two key poverty-reduction frameworks – the Millennium Development Goals and the Poverty Reduction Strategy Papers – is the situation of older persons directly addressed. So the Convention may reduce the risk of older persons becoming marginalized – a serious threat that many older persons will continue to face unless specific efforts are made in policy documents at both the national and global levels. Older persons need to become a more visible target of development programming.

Apart from the above, there is another compelling consideration for strong legal protection – the issue of participation and inclusion, the issue of voice. Not everywhere at the national level can the voice of older persons be heard, not everywhere can older persons effectively articulate their concerns and subsequently claim their rights even when formally these rights have been recognized. Without clear legal norms older persons may have difficulties fighting the caricature images that depict them primarily as a burden on society or as predominantly passive and weak individuals. So obviously, existence of an international, legally binding instrument such as a Convention could facilitate realization of their rights in practice, making a 'society for all ages' a reality and not only a noble aspiration.

Let me say a word about the Madrid Plan in this context. As we all know the Madrid Plan of Action is a comprehensive and detailed document regarding ageing-specific policies, but it is not legally binding. Existence of a Convention, legally binding by definition, could give greater leverage to those whom the Convention may serve, and add some "teeth" to the implementation of the Madrid Plan, facilitating social protection schemes, preventing age discrimination and meeting the growing demand for care. From this standpoint, these two documents would naturally complement each other.

One of the arguments used by the skeptics who question the need to elaborate a Convention specifically addressing the rights of older persons is that the International Covenant on civil and political rights together with the International Covenant on economic, social and cultural rights cover the rights of older persons along with the rights of all other people. Yes, in principle, it is a valid argument. But there may be a counterargument to it: existence of such Covenants, however, were NOT considered by the Member States an obstacle for the creating of at least four separate legal instruments, actually, specific human rights instruments for children, women, and most recently, for persons with disabilities and indigenous peoples. So, in this particular juncture older persons could be in many cases considered an equally, if not more vulnerable category, as other groups mentioned. Admittedly, there are cases where some categories of vulnerable populations may overlap – some older persons may belong to the group of persons with disabilities, some may belong to indigenous peoples while a substantial number of older persons are women.

Let me emphasize that empowerment, protecting the rights and ensuring the dignity of older persons are crucial issues in the context of a "society for all ages" – one of the core concepts of the Madrid Plan. An appeal for the effective participation of older persons in the economic, political and social spheres of their societies, along with provision of opportunities for the individual development of people throughout their life course, permeates the Madrid Plan. One example is lifelong learning and possibility to upgrade the skills of older persons through access to education and training that allows such workers not only to stay productive but also improves the chances of intergenerational transmission of experience and knowledge, from older to younger generations, and to the benefit of society at large. It is important to stress that promotion and protection of all human rights and fundamental freedoms are recognized as an essential element of an inclusive society where older persons can participate as equal partners without incurring discrimination and where their dignity is assured. To make it happen the human rights of older persons must be guaranteed by the State through its legal system and subsequent enforcement of laws that specifically protect older persons. Protecting their rights is the prerequisite and the shortest way to the empowerment of older persons.

In this light there is a need to redouble the efforts of society in preventing age discrimination and abuse of older persons as well as their neglect, which often leads to abuse. The need to strengthen national legislative frameworks and enhance abuse awareness efforts is quite apparent when the major challenge of PREVENTING neglect, abuse and violence of older persons is discussed. The existence of an international instrument such as a Convention could give a boost to national efforts.

Promoting inclusion of older persons is vital on numerous grounds, including political grounds. While the classical definition of citizenship relates to the implementation and enforcement of rights and obligations, it is often seen as a set of general concepts that may be subjectively interpreted to benefit select groups in society. A more contemporary understanding of citizenship derives from the principle of inclusiveness and active involvement. In the case of older persons, dynamic citizenship entails full participation in political, social and economic affairs through the mobilization of tangible and intangible resources. In this context, the aim may be to transform informal rights into legitimate rights, and, subsequently, get access to some pertinent entitlements, or transform their potential and

resources into effective action. Awareness of rights enhances the participation of older persons in society, making them active citizens rather than passive objects of top-down policies.

Considering modalities for the elaboration of a new Convention, one can definitely discuss what could be learned from the recently completed process regarding the Convention on the Rights of Persons with Disabilities—the first human rights Convention of the 21 Century. If we hope to create a similar positive momentum and generate political support one has to answer the question 'what was the motivation of the Member States to support the creation of such a Convention and what motivated Member States to act so fast?' (By the way, this particular Convention had the fastest negotiation track for a human rights instrument in the history of the UN.) To make a Convention happen, it is not sufficient simply to come up with some national draft, however good this text may be. There is an obvious need to bridge the different interests of Member States to create a platform of shared interests and to find possible solutions over potential disputes. I dare say that should such consultations on the draft Convention start, any text, even a preliminary one, inevitably will be a result of protracted and difficult intergovernmental negotiations.

Experience gained at the United Nations in the area of ageing as well as elaboration of legal instruments in the area of human rights, gives plenty of food for thought when we try to predict the trajectory of discussions in connection with the initiative regarding the Convention put forward in the Brasilia Declaration of December 2007 as well as in the statements made by some Member States. Of course every initiative has a life and destiny of its own, and in this sense, I cannot predict how the discussions will develop. However, I would like to bring to your consideration some of my personal observations from previous intergovernmental efforts, particularly in connection with the Convention on the Rights of Persons with Disabilities.

Number one, the process of elaboration of the Convention on the Rights of Persons with Disabilities proved its viability and resulted in a desired tangible outcome when it was dynamic from its inception. Dynamic in a sense that a commitment regarding a Convention was clearly expressed by several Member States from the very beginning of the process, and many countries provided active support for such an initiative during the negotiations.

The second point was the very important role of partnerships in the elaboration of the above Convention: partnerships between the Member States to move forward the agenda of negotiations and partnerships between the Member States and civil society. Civil society representatives were vital assets in the process of elaboration of the Convention. Actually, for the first time, they were active participants in the process of the Convention and their voices were heard on par with the voices of representatives of the Member States. Summing up, to move toward a similar Convention on the Rights of Older Persons one needs a constructive dialogue and strategic alliances between Governments, the United Nations system, civil society and the private sector.

One of the important dimensions when the Convention on the Rights of Persons with Disabilities was discussed was that apart from the human rights framework an emphasis on development as its essential pillar was clearly articulated, and disability issues were seen also in the context of the development discourse. This is another lesson learned from elaboration of the Convention on the Rights of Persons with Disabilities. Actually the same is true when we are discussing ageing as well. One of the premises of the Madrid Plan is that demographic shifts in the world cannot be considered without a broader approach and the linking of ageing with the development agenda.

Towards the end of my presentation today, let me refer briefly to the issue of the implementation of the Madrid Plan and some lessons learned. The review and appraisal exercise undertaken 2007-2008 by the Member States and summarized during the February 2008 meeting of the Commission for Social Development clearly demonstrated that there is much more that should be done to implement the Madrid Plan. For instance, there is an obvious need to improve capacity development on ageing at the national level as well as to improve the work of focal points on ageing within national ministries, making their efforts multi-sectoral yet holistic. Let me tell you that the UN Secretariat was guided by some very practical considerations and a desire to assist the Member States in the implementation of the Plan when our office brought together a team of distinguished academics and practitioners to create a *Guide to the National Implementation of the Madrid International Plan of Action on Ageing*. We tried to make the *Guide* a very specific, hands-on document that may facilitate implementation of the objectives of the Madrid Plan. It has just been released and I am very pleased to bring it to your attention, along with another publication "Regional Dimensions of the Ageing Situation" – also just released, actually on 1 October, on the Day of Older Persons.

In my opinion, what is required is much additional focused work at all levels to raise awareness of the Madrid Plan, coupled with some further specific policy measures to translate its provisions into tangible outcomes. There is a need to promote empowerment of older persons and to better use opportunities of an ageing world. Overall, as the review and appraisal exercise has vividly demonstrated, the Madrid Plan still essentially remains a document that is not widely known to the public at large, and it has not trickled down to the national level, to the line ministries and the focal points within ministries who are dealing with ageing issues. In this context while discussing the feasibility of the Convention on the Rights of Older Persons we, as stakeholders, should not forget the need to continue raising awareness of the Plan as well as working towards the implementation of the existing commitments. Talking about some major "macro" issues we should not overlook that all of our efforts should be eventually geared towards one

paramount goal: improving the plight of older persons and making life, for millions of older women and men around the world, better.

Thank you for your attention.



H.E. Minister Paulo de Tarso Vannuchi, is the Minister of the Special Secretariat for Human Rights of the Presidency of Brazil. The Special Secretariat for Human Rights (Portuguese: *Secretaria Especial dos Direitos Humanos*, or "SEDH") is an office attached to the office of the President of the Federative Republic of Brazil. Its purpose is to implement, promote, and protect human rights, civic rights, and the rights of children, adolescents, the elderly, and the disabled. It functions in a manner similar to the offices of human rights attorneys or ombudsmen that exist in other countries. The Special Secretariat was created on 17 April 1997, during the first administration of Fernando Henrique Cardoso. Called the National Human Rights Secretariat (*Secretaria Nacional dos Direitos Humanos*), it was initially attached to the Ministry of Justice. On 1 January 1999, responsibility for the

Secretariat was transferred to the president's office and it assumed its current name. It is headed by the Special Secretary for Human Rights (Secretário Especial dos Direitos Humanos), a ministerial-level position.

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Keynote Speech of the Special Secretary of Human Rights, Minister Paulo Vannuchi

INTERNATIONAL DAY OF OLDER PERSONS

United Nations New York, USA, October 2, 2008

Ladies and gentlemen,

First of all, thank you for the invitation to participate as one of the speakers of the celebration for the International Day of Older Persons. It is the first time that I have participated in an event at the UN Headquarters and I am pleased to talk about a topic of such importance.

Scientific advancement and progress in the social organization of most countries reveals an extremely important human advance: the world population is ageing. For those of us living in Latin America and the Caribbean countries, this achievement has come only recently. According to ECLAC data, in 1950, 10 million people over 60-year were living in this region. In 2007, this number increased to 53 million. By 2025, there will be an additional 48 million people. And, in 2050, the number of elderly people will reach 188 million in our region.

The current discussion about the possibility of a specific convention on elder rights began in 1973, when the UN General Assembly brought to the world's attention the need to protect the rights and well-being of elders. Nine years later, in 1982, the first International Assembly of Ageing took place in Vienna, which approved the Vienna International Action Plan. In 1991, the General Assembly adopted a resolution on the Principles of the United Nations for Older Person, highlighting independence, participation, care, self-realization and dignity. In 2002, governments attending the Second International Assembly on Ageing adopted the Madrid International Plan of Action on Ageing.

In our work within our region, our governments met in the First Regional Intergovernmental Conference on Ageing held in Chile in 2003. In 2007, the Second Regional Intergovernmental Conference of Latin America and the Caribbean (Madrid + 5), drew up and approved the Declaration of Brasilia which urged governments to start working toward a new UN Convention, focused on protecting the rights of older people. In September of this year our government organized a follow up meeting to the Brasilia Declaration in Rio de Janeiro, with the participation of 13 countries. We agreed that the Governments should ask the Commission for Legal Matters of the Organization of American States' Permanent Counsel for an extraordinary session to discuss this subject.

Yesterday in Brazil we celebrated the fifth anniversary of the Elderly Statute, a Federal law that significantly increased the protection of the rights of seniors citizens over 65 years old, assuring them preferential service at the Social Security Agency, the right to free public transportation, discounts in cultural, sports and leisure activities, and to adopt laws with severe penalties for those who disrespect or abandon elder citizens. Of equal importance was the

creation not only of the First National Conference of the Elderly in May 2006, with the participation of the President, Luiz Inácio Lula da Silva, but also the current process of State Conferences that have already been held 27 federal units, in preparation for the Second National Conference of the Elderly..

The deep, general and lasting consequences of population aging opens broad opportunities to all societies, but also brings huge challenges. This great challenge reminds us of the works of the well-known Italian, Norberto Bobbio, one of the major political thinkers of the 20th century, who just before turning 90 years old, wrote a beautiful book about ageing, "De Senectute.," repeating a well-known title of Cicero. Bobbio says in "The Time of Rights" that "the serious problem of today, related to the human rights, is no longer to establish them, but to protect them.," This analysis should illuminate all arguments related to the need of moving forward, at the United Nations, in our conversations about an expected Convention to protect the Elderly People.

The United Nations has already created nine main treaties on Human Rights. The first one, the Elimination of All Forms of Racial Discrimination was approved in 1965, before the two biggest documents that organize the fundamental principles of the Universal Declaration of Human Rights. Almost 50 years later, the United Nations approved the two most recent universal instruments: the rights of people with disabilities and another about forced disappearances.

A couple of years ago, the first initiatives directed toward creating these two most recent instruments faced the same questions that exist today regarding to the creation of a Convention on Elderly Rights on an universal scale. However, the present hesitations will be overcome, certainly, through open dialogue, without prejudices and preestablished requirements, and by the international diplomatic ability already demonstrated at many other times in the human history.

The truth is that this humanity does not stop growing. The community of nations, at the same time, acts as a vector for that evolution and as a concrete result of all progress achieved. Changes provoke reactions. The inertia force always rises as an obstacle to be overcome by those who believe in creating something new. In this context, we will never accept the idea that the list of great treaties on Human Rights is already exhausted. Denying that is denying the historical dynamics of society.

I am not a diplomat, but I know the huge effort that will be employed in negotiations for this convention. I also know the prior work required to win approval of a convention can be long, demand patience and persuasive abilities. I cannot yet speak officially in the name of Brazil, since it is up to the chancellery of our countries to coordinate the decisions regarding UN bodies, and in consultation with other ministries, and, over all, obeying the determination of the President. However, I can predict that Brazil will be very interested to broaden, enrich, and deepen this debate, emphasizing always the need to reach a great consensus.

As Minister of the Special Secretariat of Human Rights of the Republic Presidency, I reaffirm my commitment to keep calling my government colleagues and all friendly nations to address this honored challenge without fear. In March 2009, during the High Level Segment of the UN Human Rights Council, in Geneva, Brazil will include an invitation to the 47 country members from that Council to sponsor this international treaty. In the 14th Meeting of the High Level Authorities in Human Rights and Mercosul Chancelleries and Associated Members, which will take place on November 11-12, 2008, I will suggest we express solidarity with this project, and if possible, we will ask to the Brazilian Mission in Geneva to do the same at Grulac.

What many years ago seemed impossible, today it is seen as a pressing need. I believe that it is time, once again, for the international community to unite to make history. Let's not be discouraged by excuses saying that we do not need one more convention, or that already there are too many monitoring bodies. Monitoring the enforcement of the commitments will never be too numerous when the matter is one of securing human rights.

President Lula once said: "... a country that does not take care of its children and elderly is a country without soul." The Convention on the Rights of the Child will reach its 20th birthday in 2009. So far the rights of older persons cannot count on proper international protection. It is good to take advantage of this year, 2008, as the year we celebrate the 60th Anniversary of the Human Rights Universal Declaration and call on UN Member States to join in working toward a Convention that will finally protect all men and women of the planet who already reached those same 60 years of life.

Thank you very much.

Translation by Fernanda Félix



Alexandre Sidorenko was born in St. Petersburg, Russia. Early education in Ukraine. Graduate studies in medicine. PhD in cellular immunology. Lecturer at the Kiev Medical University (1975-1978). Ten years experience in experimental gerontology at the Kiev Institute of Gerontology (1978-1988).

Dr. Sidorenko joined the United Nations Secretariat in 1988, first in Vienna, Austria, and since 1993, in New York. He was the UN Focal Point on Ageing; Chief of the United Nations Programme on Ageing (1993-2002); Coordinator of the International Year of Older Persons (1999). His major responsibilities have included the coordination of the UN activities in the area of ageing, including promotion and monitoring of international policy and programmes on ageing. In 2000-2002, coordination of substantive preparations for the Second World Assembly on Ageing in Madrid, Spain. Since October 2002 - UN Focal Point on Ageing.

Principal tasks include follow-up to the Second World Assembly on Ageing. Specific areas of professional involvement are the monitoring of the Madrid International Plan of Action on Ageing and the development of evidence based policy on ageing.

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Mr. Sidorenko introduced the five regional speakers and welcomed them to the IDOP 2008. He also moderated the question and answer session with the regional speakers.



Prof. Nana Araba Apt is presently the Dean of Academic Affairs at Ashesi University in Accra, Ghana. She previously taught at the University of Ghana, Legon and chaired the Departments of Sociology and Social Work. At this same University she set up the Centre for Social Policy Studies with UNICEF funding and was its first Director. Her research and publication record bridges disciplinary applications in gerontology, family relations, child development and women's education. Prof. Apt is author of six books including "**Coping with old age in a changing Africa**" and over 80 articles and book chapters on aging in Africa and social development issues. Her latest book chapter titled "Health and Aging in Africa" was published in 2007 by Jossey-Bass in **Global Health and Global Aging**. Prof. Apt has received awards for her work from the UN Secretary General, the British Geriatrics Society and the International Federation on Aging.

Professor Apt is presently the President of HelpAge Ghana and has for many years served on the Board of HelpAge International. Professor Apt was a member of the United Nations technical team for the 2002 Second World Assembly on Ageing.

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1.0. Introduction:

UN Principles of Older Persons

On December 16, 1991, resolution 46/91 of the United Nations General Assembly recognized basic principles of human rights for the increasing older persons around the world: These 18 principles are grouped under sub-headings of: Independence, participation, Care, self—fulfillment, and Dignity.

By and large in Africa, older persons are living in a world that has undergone the fastest and greatest social and economic changes in world history. Social definitions of who should be economically active, politically and socially involved in national affairs are now questionable; social and economic structures that should support this change are unsharpened and unfocussed. Presently in modern Africa, it is the acquisition of resource that achieves the status of the sacred or the valued and with increasing numbers of older persons emerging, great age now is less likely to be valued without resource base.

In so far as old age is increasingly associated with diminishing returns, old age is likely to be viewed as both a societal and familial burden. Not only will there be increasingly larger numbers of older persons in the region but also they have great educational needs that have not yet been fully studied and which require urgent attention if major human resources are not to be wasted. These educational needs range from literacy to technical training, civic and political education to banking and enterprise skills. Women of age are least endowed with modern skills in this region.

2.0. The African Context

It is in this context that I consider two of the United nations principles relating to participation and self fulfillment quoted below, the most basic of the principles and vital to the well being of older persons in Africa. The challenge is to provide conditions that promote quality of life that enhance the ability of older persons who work very hard in Africa to be acknowledged as development partners, to have adequate rewards and to live in an atmosphere of acceptance, respect and dignity. Eliminating poverty is the overriding principle to achieving participation.

Participation

- •Older persons should remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their wellbeing and share their knowledge and skills with younger generations.
- •Older persons should be able to seek and develop opportunities for service to the community and to serve as volunteers in positions appropriate to their interests and capabilities.
 - •Older persons must be able to form movements or associations of older persons.

Self-fulfillment

- Older persons must be able to pursue opportunities for the full development of their potential.
- Older persons should have access to the educational, cultural, spiritual and recreational resources of society.

Well-being must begin with the preservation of older people's economic and social productivity, most especially of older women. In my region, an important indicator of well-being is the poverty status of the population. Poverty in old age usually reflects poor economic and education status earlier in life and women are most affected. Lack of education represents as large if not a larger problem than physiological constraint to the social and economic participation of older persons in Africa. If education is viewed purely as the preserve of youth, an increase in the number of generations in a fast changing world necessarily accentuates the educational distance between the younger and older generations (Apt, 1996). A lifetime approach to education, which equips older generations with new skills minimizes this distance and enables older persons to be recognised respected and be actively engaged in their society. People who are educated, who have modern skills and who are acknowledged as participators in development are self-fulfilled.

Ensuring older persons economic and social productivity will invariably make them full participants in the development processes of African societies and also share in their benefits. The impact of the ageing population on the socio-economic development of society, combined with global social and economic changes, necessitates measures for the continuing integration and empowerment of older persons. Hence, old age and the development of societies imply that the livelihood and living standards of older persons have to be safeguarded by social protection systems, and services should be offered guaranteeing a high degree of self-determination in the case of disability and disorientation in old age.

Empowerment and social inclusion of older persons need to be maintained and promoted, so as to enable equal participation of older people in society.

In Africa, lack of education, lack of technological and financial support for women's entrepreneurship, unequal access to, and control over capital, in particular land and credit and access to labour markets, as well as certain inimical cultural values, have restricted women's economic empowerment and exacerbated their poverty. In many societies, female-headed households are at the particular risk of poverty. Special social protection measures are required to address the feminization of poverty, in particular among older women.

3.0.Awareness of Ageing:

Africa wide interest in ageing as a policy issue has been very challenging if not difficult to manage over the years. This is gradually changing. A lot of groundwork has been done and continue to be done by various organizations both international and regional. Notable among them are UN organizations. The two World Assemblies of Ageing in Vienna in 1982 and in Madrid in 2004 have done much to sensitize African governments on ageing issues. Civil societies and NGOs including Gerontological Associations, most especially International Association of Gerontology

(IAG) have contributed much to the ageing consciousness of academics in the African region. African university research centres are now working hard to highlight ageing issues and powerfully argue for the critical need for African countries to address the welfare and capacity needs of their older populations.

The key role of HelpAge International (HAI) in highlighting ageing issues in Africa through research and political lobbying and thus assisting member affiliates in raising consciousness about ageing and the development of regional programmes need special mention.

4.0. Eliminating Poverty: Self Help and Income-generating Schemes

With support from HAI older people's self help associations are springing up rapidly in the region. A few examples of HAI projects are here listed:

- In Kenya-basket weaving project generate income for older women who are mostly widows;
- A pig farm in Uganda, a project supported by an older people's association, fund local home based care for people living with HIV.
 - A corn mill at Shama in Ghana supports elderly widows and their grandchildren.
 - Business loans support older people's cooperative ventures e.g pineapple co-operative farm in Tanzania.

4.0. Eliminating Poverty: Old Age Policies

In 2001, the African Regional Office of HelpAge International based in Nairobi, Kenya achieved a major breakthrough in introducing ageing issues in the agenda of the African Union. At the end of the meeting, AU accepted the principle that ageing is an issue of concern, which its membership should address. A Draft Policy Framework and Plan of Action on Ageing was formulated.

Academic Institutions in Africa are playing a key role in sensitizing governments through research on ageing issues in the region. Presently in the Africa region most social science and Human Service Departments in the public universities have developed curricula on ageing and now issues on ageing are popular topics for undergraduate projects and graduate dissertations.

- South Africa, a country ahead of other African countries in ageing research has set up an Interdisciplinary Institute of Ageing in Africa based at the University of Cape Town.
 - University of Ghana's Centre for social Policy Studies has a strong lobbying voice from its Unit on Ageing.
- Throughout the Region, national ageing policies are receiving steady progress in their formulation. A number of countries have drafted or formulated National Policy Frameworks or Action Plans on Ageing. Notable among them are: South Africa, Namibia, Zambia, Botswana, Uganda, Mauritius and most recently in Ghana.

5.0. Eliminating Poverty: Social Protection and Social Pensions

HelpAge International

Through political lobbying of HelpAge member states in Africa, the African Union's Ouagadougou plan of Action 2004 commits member states to improving the living conditions of older people through better social protection services. This includes improved pensions, health and other schemes (HAI, 2006). Cash transfers and pensions can serve to meet the basic needs of the poor such as food, health and shelter. The right to social protection is now taking centre stage in Africa's development radar with appropriate legislation and resources as is now being considered in Tanzania, Uganda and Gambia (HAI 2006:6-7) and most recently in Ghana.

South Africa is one country in Africa where social protection is a right that people can claim in court. In South Africa the social pension scheme has reduced the number of people living below the poverty line (HAI 2008). Social pensions enable carers who are mostly older grandparents to better provide for themselves and their dependants.

INPEA (International Network for Elder Abuse and Neglect) Associations with concern for the protection of older persons from social abuse is rapidly gaining grounds in this region. About 12 countries have signed on the lobby on African national governments to see to the elimination of traditions that are abusive to older persons and inimical to the welfare of older persons.

6.0. Conclusion

Africa is gradually awakening to the issues of rapidly ageing populations. Social protection is gradually emerging as one of the main strategies in poverty reduction, but a lot more needs to be done.



Dr. Lia Susana Daichman was born in Argentina and obtained her Medical Degree at the Faculty of Medicine, Cordoba National University in 1970. She continued her Postgraduate training in Geriatrics and Psycho Geriatrics in the United Kingdom, where she stayed until 1977. She had recently re-certified her Specialist Degree in Geriatrics for the second time at the Argentinean Medical Association (year 1996 and 2001) and also at the National Academy of Medicine, Buenos Aires, Argentina.

Dr. Lia Daichman has been a Medical Adviser to the Social Services and to the Coordinating Council of the Jewish Community, Buenos Aires since 1984. She has been Coordinator of the Specialist Postgraduate Course on Geriatric Medicine from the University of Buenos Aires since 1995.

She has written and published several papers in Journals and book chapters on Gerontology and Geriatrics nationally and internationally. Her research and advocacy has been focused on elder abuse and neglect, discrimination and Human rights and Ethical issues and care giving in Geriatric care.

Since July 2001, at the World Congress of Gerontology in Vancouver, Canada, the INPEA International Board and Regional and National Representatives General Assembly unanimously elected her Chair of INPEA (International Network for the Prevention of Elder Abuse), NGO with UN status. During the year 2001 (UN- New York) till April 2002, she devoted her work to advocate into the Plan of Action elaboration and Political Declaration for the Second Assembly on Ageing, Madrid, 2002 as a Chair of INPEA and as an Expert Adviser to the Argentinean Political Delegation. She also enthusiastically worked for and participated in the World UN NGO Forum on Ageing, Madrid, 2002 as INPEA President.

She was elected by the FVSA and INPEA as the "2004 Rosalie Wolf Memorial International Award" recipient in San Diego, USA (September, 2004) and unanimously elected President of ILC- ARGENTINA at the International Longevity Center Alliance annual Meeting at the IAGG Congress (Rio, Brazil, 2005).

* * *

HUMAN RIGHTS - ARGENTINA- United Nations, October 2008

Human rights within the UN conventions and the 1991 UN Principles for Older Persons provided a framework for developing equitable policies and practice. Yet millions of older people mainly in the developing world are still denied their rights. They experience isolation, poverty, violence and abuse and have limited access to health services, education and legal protection. With no regular income older people are even forced to work in low-paid or demeaning jobs to provide for themselves and their dependants.

Today, concern about this important area has driven a worldwide effort to increase awareness of the problem and encourage development of treatment and prevention programs.

It is predicated on the belief that Elders are entitled to live out their advancing years in Peace, Dignity, Good health, and Security.

Regarding gender, older women are also disproportionably represented among the very old and the most disadvantaged as they constitute the "inevitable caregivers". They have more chances of being widowed, to have a poor education, nutritional status, restricted access to services, and the labor market in earlier life often left them with very few resources in their old age.

Ageing affects men and women in different ways, as they have different roles throughout their lives, leading them also to different experiences and needs into old age. Many of these differences are related to unequal power relationships, and gender-related issues may vary between different societies and cultures.

Women may experience a lower status than men leading them not only to a poorer nutrition diet, but also to less access to education, high risk of sexual violence, physical abuse, and exclusion from decision-making (*Ageways 59, 2002*)

Policies and programs that do not address gender issues, the ones relating to the way that society treats people according to whether they are male or females are bound to promote **INEQUALITY**.

Structural inequalities in both, the developed and developing countries that have resulted in low wages, high unemployment, poor health services, gender discrimination, and the lack of educational opportunities have contributed to the vulnerability of older persons.

The majority of Argentinean elders that had been interviewed and so many others, "affirm that societal abuse" is the most frequent type of abuse, at least in most of the Latin Americans developing countries. (WHO-INPEA, 2002). Societal /Structural abuse, defined by the INPEA Latin American Experts is the lack of adequate Health and Social policies, bad practice and nonfullfilment of the existing legislation, presence of social, community and cultural norms which disqualify and give negative images of ageing, causing harm or distress to an older person and expressed as Discrimination, Marginality and Social Exclusion. (Santiago de Chile, CEPAL-CELADE, 2003).

Violations to Human Rights might have serious consequences for Health.

Health policies and programs can either promote or violate human rights in the way that they are designed or implemented.

Vulnerability and impact of ill-health can be reduced by taking steps to Respect, Protection and fulfilling Human Rights.

These are relevant to a great many health issues, including prevention and treatment of multiple diseases, access to clean water and adequate sanitation, education and information regarding health, medical confidentiality ,vital drugs availability and taking care of marginalized and vulnerable groups such as the very old, racial minorities, refugees and people with disabilities.

Going back nearly 60 years ago Mrs. Eva Peròn promoted, produced and launched the first ever "*Rights for the Aged*" in Buenos Aires, Argentina, 1948, fairly incorporated to our National Constitution...

Argentinean concrete actions to ensure elders benefit from the full range of internationally accepted Human Rights. (National Direction of Social Policies for Elders, Ministry of Social Development. Government of the City of Buenos Aires.)

- To guarantee adequate social protection and a decent minimum income to all elders 70+, independently of their formal contribution to the National Retirement Pension scheme throughout their working life. (Since 2005).
 - O This has reduced elders living in situation of poverty from 32.8% (2002) to 17.3%.
- To provide accessible and free health care for all older people. (Since 2005)
- To provide a National Nutrition Program: This includes pregnant females and children in need, as well as older people 60 and over. (Since 2003).
- Try to put an end to Discrimination and Violence against older people, started in 1998.A recent survey from 2007, done by the INADI, (National Institute of Discrimination), showed 84% of discrimination corresponding 62% to elders.
- To support older people in their role as carers.(Since 2001)
- The right to access to safer environments , adequate facilities and habitat. (Formally since 2006)
- Make credit, employment, training and education schemes available to people regardless of their age.(since 2003)
- Empowerment of elders (Since 2002).
 - O And supporting and strengthening Advocacy providers.

Investment in the productive and social capacities of elders is likely to yield far-reaching results for all ages, in terms of community welfare, social cohesion and economic productivity. (*Help Age, 2002*)

Improve and change policies required to unable older people to better assert their Human Rights.

- To inform and educate Elders in a good time about their Rights and let them know about easy ways to access to Services and adequate places in case of need.
- Securing a Right of access to good-quality advocacy and upgrading older people's Information and Services.
- Established the Federal Council of Elders in 2003.
- Argentina as well as other regional developing countries is trying to design an unique public integrated policies by meeting basic needs for food, shelter, economic security and Health Care, and this is NOT EASY!...

- Outlawing abusive customs, initiating community programs to stimulate social interaction, creating new Social Networks and promoting solidarity and social support while working with the elders to create more "self-help" programs.
- Responsible agencies must collaborate and partnership, ensuring no duplication and waste of resources and enhanced trust and promotion of reliable and adequate services.
- Older people's rights can be promoted at different levels, from individual and family to international. However
 national governments have a key responsibility to create an enabling environment for fulfilling Older
 People's Rights. To do this elder's rights need to be embedded into national constitutions and legislations
 and be included and budgeted into national policy frameworks, increasing security and poverty reduction
 plans.

Once again, I believe this is a wonderful opportunity to remember that:

Article number 5, from the Political Declaration, (UN Second Assembly on Ageing, Madrid, 2002)

Reaffirms to spare no effort to promote democracy, the protection of Human Rights and other fundamental freedoms, without any violence, abuse and neglect.

- Older people should enjoy a life of fulfilment, health, security, and with an active participation in the economic, social, cultural, and political life of their societies.
- Government's Representatives committed themselves to eliminate all forms of discrimination, including Age and Gender discrimination, and to create enough support services to face and deal with Elder Abuse and mistreatment's cases.
- Living with dignity should be enhanced in all human beings, without negatives stereotypes.
- Governments are also being encouraged to develop and fund a National comprehensive strategy and Agenda to prevent, detect and intervene in elder abuse.
- The International Plan of Action execution is Government's Primary Responsibility and they should have the effective and efficient collaboration from locals and national governmental dependencies, from International Agencies, elderly people and their Organizations, Civil Society, including NGO and the Private Sector.

The International Plan of Action "firmly expect as well as demand" a change of Attitudes, Policies and Practices in all sectors "CONSIDERING THE FAST AGEING OF THE WORLD not as a great PROBLEM or DISASTER, but as the great CHALLENGE and ACHIEVEMENT OF THE XXI CENTURY" and taking into account the enormous potential which means the ELDERS from the planet...

Dr Lia Susana Daichman ILC-Argentina President <u>liadaichman@fibertel.com.ar</u>



Dr. Nabil Kronfol is the President of the Lebanese HealthCare Management Association, a not-for-profit professional association that focuses on the further development of policies and health systems in Lebanon and the MENA Region. He is also a founding member of the recently established "Center for Research and Policy Development on Ageing" in Lebanon and the MENA Region.

Born in 1944, in Beirut, Lebanon, Dr Kronfol received the medical degree with the Penrose Award from the American University of Beirut (AUB) in 1969. Following residency training at AUB and at the Harvard' Children's Hospital in Boston, United States, Dr Kronfol became a Diplomate of the American Board of Pediatrics in 1972. Dr. Kronfol then joined the Harvard School of Public Health in Boston and was graduated with a Masters in Public

Health and then with a Doctorate in Public Health in Health Services Administration. Dr. Kronfol joined the American University of Beirut in 1974 and moved through the academic ladder to become full Professor, Chairman of the Department of Health Services Administration (now Health Policy and Management), Assistant Dean for Allied

Health and finally Deputy Vice President for External Programs in Health.

While on the professional tenure, Dr Kronfol established the College of Health Sciences in the State of Bahrain, four schools of nursing in the United Arab Emirates and the Planning Unit at Lebanon's Ministry of Health. He also played a key role in the establishment of several faculties of Medicine and Public Health in the MENA Region.

Dr. Kronfol received the International McGaw Award in 1984, the Fullbright International scholar Award in 1985 and lately the Shusha Award from the World Health Organization (2007).

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Population Ageing in the Arab countries: Priority directions and recommendations for action¹

Background

1. The total population of the Arab region was estimated at around 300 million in 2005, or 4.8 per cent of the population of the world. The population of the region has increased by 130 million since 1980, and by 2015, this figure is projected to reach 395 million, or 5.5 per cent of the world population. Population size varies dramatically across countries of the region.

- 2. The Total Fertility Rate (TFR) for the Arab countries declined from 6.2 children per woman in the period 1980-1985 to 4.1 2000-2005; Yet, TFR is expected to remain high in the next two decades, (3.1 children per woman). The pace of decline in TFR has also varied considerably across countries. Explanations include the persistent demand for children as sources of family labor and social security, the low status of women in the region, early and universal marriage, and religious and cultural mores opposing contraception. In order for the Arab region to reach zero population growth, the regional TFR must drop from 4.1 children per woman to 2.1 which is unlikely.
- 3. Except for Iraq, the decline in infant mortality levels has been impressive. IMR dropped significantly from 74.7 per 1,000 live births in the period 1980-1985 to 43.7 per 1,000 in the period 2000-2005.
- 4. Similarly, significant gains in life expectancy were achieved in the Arab region. Currently, the majority of the Arab countries have life expectancies between 70 and 79 years, with wide variations among countries.
- 5. Arab countries have witnessed fundamental changes in the age structure of the population with a rapid increase in the number of people in the age group 25-64 years, and a slow, albeit considerable, increase in the number and proportion of older persons.

In 2000, the percentage of older people aged 65 and above in the Arab region was reported at 3.75 per cent. These proportions are expected to rise to 6.13 per cent by 2025. The fastest growth occurred among the oldest old (aged 80 years and older). Currently, Lebanon has, by far, the highest proportion of older persons aged 65 years and over (7.5%).

6. Compared to the world average, the Arab region currently enjoys one of the lowest old age dependency ratio (estimated at 5%). This ratio is expected to rise to 8% in 2025 and to 13% in 2050. The responsibility of the workforce will shift from the support of children to the support of older persons. Similarly, the ageing index is expected to increase substantially.

The decline in fertility coupled with the simultaneous slow growth of the elderly population will offer a number of countries in the region a demographic window of opportunity.

¹ This brief draws on an extensive review undertaken for the Economic and Social Commission for West Asia (ESCWA) in November 2007 by Dr Abla Mehio Sibai and myself. Both Dr Sibai and Dr Kronfol are founding members of the newly established Center for Studies on Ageing (CSA). This Center has been established to translate research and evidence into policies and practices affecting the older population in Lebanon and the Region.

7. Therefore, population ageing is a relatively recent phenomenon in the region. The unique feature of this ageing process has been its rapid pace, outstripping the skeleton social and welfare support mechanisms that have existed in some of these countries. Given the limited resources and in particular the absence of safety nets, the ageing process in Arab countries is facing far greater demands and challenges than in developed countries²

Challenges facing the older population in the Arab countries

8. There are many internal factors that are impacting on population ageing in the region. These include urbanization, technology transfer, the upsurge in education and various patterns of migration, political instability and globalization.

While the situation and conditions of older persons and the opportunities available to them vary from one Arab country to another, there are some common features. The current generation of older persons in most Arab countries exhibits certain social and economic vulnerabilities that have important implications for their care. These vulnerabilities include, among others, very low levels of schooling attainment, high levels of extended workforce participation into the last years of life, and, among older women, high rates of widowhood and unprivileged living arrangements.3

- 9. Several modalities of health and social insurance systems exist in Arab countries, with wide variations in the level of basic benefits for retirees across countries. The provision of health insurance and pension schemes, as well the reenforcement of legislation that addresses the vulnerability of the impoverished older persons remains a challenge to many Arab countries.
- 10. The social and financial implications of widowhood in old age are far greater for women than for men in Arab countries. Across all countries, older Arab women have significantly higher odds of living alone than do older Arab men.
- 11. Because systems of public support are nascent in many Arab societies, the family not surprisingly continues to be the main source of support for older Arabs. However, decades of migration, urbanization, women employment, political violence and wars, family cohesion have diminished the role of the family in caring for their older persons. This has led to a myriad of problems among older persons, including, inter alia, the loss of social status, psychological and health problems, lack of mutual respect and neglect. Reports indicate that family members are increasingly no longer able to care for their frail elder family members.
- 12. In addition to the above, epidemiologic research reveals high levels of chronic, non-communicable disease (NCD) morbidity, mortality, disability and physical handicaps among older persons, comparable in some countries such as Kuwait, Jordan and Lebanon to those found in developed countries. In many countries, the double burden of infectious and chronic diseases prevails.
- 13. Substantial differences in the health profiles of women and men do exist, with rates of cardiovascular diseases and smoking higher in men, and rates of diabetes, obesity, musculoskeletal disorders, osteoporosis and depression higher in women. Of significance are the alarming levels of obesity (around 40%), most notably among older women in oilrich countries such as Kuwait, Bahrain, and the UAE as well as in Tunisia.
- 14. Nevertheless, the number of institutionalized older persons remains low in most Arab countries. Anecdotal evidence suggests that this ranges between 0.5 and 1% of the total number of older persons. The level and quality of care provided in old-age homes, however, remains unclear.
- 15. Moreover, there is an overall lack of specialization in geriatric care in all Arab countries with an inaccessibility or unavailability of specialized home services and a total lack of social or economic support to the caregivers.
- 16. Finally, reliable and valid statistics are nascent or non-existent in several countries of the region. Yet, valid indicators and estimates are important for evidence-based policy making and practice.

² Statistical information on Arab countries is presented in table 1.

³ Based on Yount K, Sibai AM. (n.d.). "The Demography of Aging in Arab Countries", in preparation for the International Handbook on the Demography of Aging, Uhlenberg P (ed.).

Governmental actions towards the implementation of the Madrid International plan of action on Ageing (MIPAA)

17. A review of the achievements of the Arab countries, show that certain Arab countries have made tangible progress in the field: formulating national work plans, adopting policies and measures and implementing programs of action, providing health, financial, housing, education and other necessary services for older persons and acknowledging the importance of their participation in the community. Shortcomings in implementing the recommendations are attributable to disparities in the economic, demographic situations of various countries, shortage of trained human resources, lack of expertise necessary to implement it, and security and political instability in certain others.

Well-defined priority directions

Pursuant to the principles of the Madrid International Plan of Action on Ageing (MIPAA), and guided by the United Nations fundamental principles, the following priority directions are recommended:

- (a) Development with a focus on economic security and social policies;
- (b) Maintaining and advancing health and well-being in old age;
- (c) Ensuring an enabling and a supportive environment;
- (d) Ageing mainstreaming
- (e) Active participation of older persons.

These are considered essential approaches for optimizing opportunities in development plans and social policies with the objective of enhancing the quality of life of older persons, promoting equity and social inclusion and creating a 'society for all ages'.

A - Goals for Independence

- •Independence for the older population needs to be based on appropriate social policies (*Pierson*, "Beyond the Welfare State, 3rd edition, 2006").
- •Social policies based on equity, solidarity and human-rights approach enhance empowerment and independence of older persons and promote social inclusion.
- Effective social policies are an intrinsic element for social justice and protection of human rights.

Issues related to Independence (Social Policies, Economic development and Pension systems)

1- Social Policies

- •When they exist, social policies have been largely sectoral amounting to a set of uncoordinated programs that do not form a comprehensive, integrated vision within a broader socio-economic framework.
- •Policies have tended to be limited to welfare and (paternalistic) social protection programs whereby old people are merely recipients or beneficiaries of such programs, rather than playing active roles in the development process.
- •Effective social policies for the older population in the Arab countries are hampered by a multitude of internal factors, *inter alia*, lack of transparency in governance and public accountability, corruption in several countries, an ineffective and non-egalitarian fiscal and taxation system, unregulated non-governmental organizations, political instability and civil disturbances.
- •In terms of social policy for the older population, available indicators show that Arab countries to be lagging behind
- •In order to be effective, social policies for the older population have to be articulated in an integrated manner (social contracts) and need to be supported by a coalition of social and political forces, involving governments, the private sector and civil society.
- •The process needs to be legally binding, sustainable and harmonized in order to be successful.
- •The government assumes a leading role in the formulation of these social policies; however, international organizations can play a leading role in advocacy and capacity building in this area at regional and country levels.

•Indicators of social development ought to include, *inter alia*, the extent of resources allocated to social policies as a percentage of the total budget, the extent of social security, access to services, the fairness of income distribution and the interdependence of economic and social development.

2- Economic development

- •The current dependency ratio in the Arab region (71.5 in 2000) and projections to the year 2020 (58.4) offer a number of countries at different points in time, and only for a limited period- a 'demographic window of opportunity'. Productivity growth is important in developing economies to raise living standards and reduce poverty.
- •Yet, economic development has been generally sluggish, with high levels of unemployment estimated at 13.2 per cent, one of the highest in the world, even among the educated (ILO 2006).
- •Policies aiming at improving old-age income security should feature poverty reduction strategies.
- •Governments ought to promote the availability of micro-credit (e.g. Egypt), training and markets for small and medium-sized enterprises (SMEs) as these will contribute to poverty alleviation and the absorption of excess labor.
- •Employment policies ought to raise the participation rates of women and older workers
- •There is a need to alter workplace practices to better accommodate the needs of workers as they age, counter agebased discrimination and promote positive images of older workers.
- •There is also a need for a heavy investment in (re)-education and skills development. Older workers will also be in a better position to extend their working lives if they are given the opportunity to engage in lifelong learning and on-the-job training initiatives.

3- Pension Systems

- •The quality of life of the older population has been adversely affected by *inequitable* systems of pension entitlement and health insurance programs for the majority of Arab countries.
- •In most Arab countries, older persons who have worked in the informal sector often do not qualify for an old-age pension.
- •The traditional economic support system based on the family is fast eroding and cannot be relied upon in the future. The size of families is decreasing, the role of extended families is diminishing, and perceptions in respect of inter-generational support and caring for older persons are rapidly changing.
- •Reliance on family networks may not fully protect older persons against poverty, as these networks are themselves income-constrained.
- •The design of old-age income security systems is country-specific. A multilayered approach to developing pension systems is needed.
- •In order to achieve equity, all pension systems should aim at providing some form of basic income security to all persons in old age. Literature has confirmed that basic non-contributory pension schemes, funded by public revenue, seem affordable even in low-income countries.
- •The social pension scheme could have two components: an essentially non-contributory scheme financed from taxation and an entirely contributory scheme. Intergenerational solidarity and adequacy of benefits with respect to providing sufficient income security for all should be a guiding principle.

4- Public Pressure and Lobbying

- •Public participation and legislative representation are limited to varying degrees, with minimal public debate, restricted checks and balances in governance. The older population has not been successful to have its voice heard nor did it develop enough political power to be reckoned with.
- •The challenge ahead lies in transforming policies for the older population into a series of coordinated actions intended to include the older public in the development process as active participants.

B - Goal for Care

• Health protection for the older population needs to be based on practices that promote health, prevent disease, strengthen medical services, and streamline home and long term care.

1- Issues related to Health Care

- Most countries in the region have made important strides, over the past thirty years, regarding the development of their health care systems for the entire population.
- Resources devoted to the health sector, and the coverage and benefits provided by health-care systems to older persons vary considerably amongst Arab countries.
- Notably, the out-of-pocket health expenditures represent often the most important source of financing care. The poorer the country, the larger the share of out-of-pocket expenses.
- Personal expenditures on health impact negatively on the older retired population, especially women with no social protection. Catastrophic illnesses are known to drive older persons to poverty *in a dramatic and unexpected manner*.
- Wide disparities occur in health coverage of the older population within Arab countries. Public policies and comprehensive approaches to reduce and eliminate health inequity are needed.
- In parallel with the demographic transition, Non-communicable and chronic diseases are looming as the most important causes of morbidity and mortality in most Arab countries, thereby imposing far greater demands on health care systems, already faced with scarce resources.
- There is a high prevalence of risk factors for chronic conditions, such as smoking, obesity and lack of physical activity.
- The development of health services has not been matched with a parallel provision of palliative care services and long-term care facilities.
- Geriatric wards are absent from most public and private hospitals.
- Most Arab countries have implemented awareness-building activities through convening meetings and conferences, and through issuing brochures and other relevant publications.
- The shortage of qualified personnel is one pressing issue in most Arab countries: geriatric care is not included in most medical or nursing curricula and there is a lack of social workers specialized in gerontology.
- The increase in the total number of cases of degenerative chronic diseases and the larger number of persons with disabilities will require new skills from health-care professionals and workers.
- The traditional family structure and the role of women, who provide much of the informal-health care to older disabled family members, are becoming increasingly difficult to maintain.

2- Recommendations related to Health Care

- Government ought to shoulder the financial burden of such conditions as well as the increasing cost of medications.
- Health insurance ought to be regulated by Governments to ensure that there is no discrimination towards the old and the poor, especially as concerns the cost of the premium, the exclusions, the co-payment and the ceiling.
- To meet these challenges, Governments need to pool the financial risks associated with poor health as part of a comprehensive social policy plan.
- To promote active ageing, health systems need to take a life course perspective that focuses on health promotion, disease prevention and equitable access to quality primary health care.
- The WHO efforts to promote the integrated response of health care systems (INTRA Project) to active ageing are worth noting and need to be supported.
- Improvements in health conditions do not depend solely upon the delivery of health or medical services. They are also the result of such factors as improvements in socio-economic conditions, nutrition, environment and healthier lifestyles (WHO Age Friendly Cities Initiative).
- Governments and organizations need to provide free or low cost screening programs.
- Greater emphasis needs to be placed on home-based care service as part of a continuum of different types and levels of care.
- Governments need to adopt, in tandem with civil society organizations, programs for mobile health units serving disabled older persons within their family environment.

- Programs catering for long-term care are required. Guidelines and standards for service provision in nursing homes similar to those instated for hospitals need to be developed and adapted.
- Families should be assisted in the process of care giving through financial incentives and by capacity building and training of 'carers'.
- Using various channels of communication, local authorities in coordination with the civil society should promote community awareness.
- User-friendly directories on services provided by the Government, the various NGOs and centers should be made available to older persons and their caregivers. Older persons and their caregivers need to be empowered to take advantage of all forms of assistance.
- The government and the professional orders need to promote training programs in geriatrics; Health institutions need to introduce geriatrics-related disciplines and specializations.

C - Goals for Participation

- Active participation of older people in all aspects of the development process is essential to the policy making process and to successful ageing.
- It also limits marginalization, promotes empowerment and increases ownership and inclusion in the shaping of practice.
- 'Nothing about us without us' (HelpTheAged, UK) Lebanon: Research and Policies' Conference, September, 2007).

1- Issues related to Participation

- There has been some participation of older persons in affairs directly related to them (e.g. national committees). However, public participation has not been the result of institutionalized policy structures and processes.
- Older persons have the potential to be more influential in society. However, this is challenged by the prevailing negative stereotypes about ageing and older persons as frail dependent members, as well as, by the lack of associations and powerful groups representing the interests of older persons, such as those commonly present in developed countries (e.g. HelpTheAged in the UK, or the Gray Panthers in the USA).
- At the family level, (although with good intentions) relatives tend to adopt a paternalistic approach and replace older persons in assuming responsibility for several familial decisions, including health-related matters concerning the older persons themselves.
- Although difficult to document or measure, neglect and possibly abuse of older persons in community contexts and in centers for institutional care may be reasons for concern.

2- Recommendations related to Participation

- Perhaps the most important activity to promote active participation of older persons is to advocate literacy and continuing education on 'human rights'. These constitute important elements of empowerment and should be coupled within broader programs.
- Associations of older populations, similar to those found for other population groups (e.g. the disabled), need to be established and encouraged. These associations can build "twinning" arrangements with regional and international similar networks, for greater visibility and coordination.
- Through their various activities, such organizations can influence the design and implementation of policies, engage in grass-roots activities and strengthen public-private partnerships.
- Plans and policies must be re-oriented to recognize the fact that older persons are productive elements and valuable social and human capital.
- A culture that takes advantage of the expertise of older persons (especially the retired) needs to be promoted.
- Integration must be assured through the adoption of comprehensive socio-economic and social policies which guarantee the effective participation of older persons in religious, political, economic and social life.
- Ageing must be considered as a type of ongoing investment.
- There is a need to improve the image of older persons by challenging the prevailing stereotypes about ageing (e.g. establish a "positive images gallery" which portrays older persons at work, in volunteer roles and in leisure-time activities. Start with schools and children books).

• Intergenerational cohesion, interdependence and investing in the accumulated stocks of older people capabilities and experience need to be encouraged. (e.g. utilizing the capabilities of the elderly in providing special lessons to students, in teaching and eradication of illiteracy or working as mentors).

The Way Forward

- A multi-sectoral approach of ageing mainstreaming and active participation of older people into all economic, social and health development processes and programmes are essential for a comprehensive and effective ageing policy and practice.
- Awareness raising and advocacy on human rights are needed for political visibility.
- Associations of older populations need to be established and encouraged.
- A 'society for all ages' and 'inter-generational solidarity' ought to be utilized as guiding principles to endorse the
 active participation of older persons and to enhance the quality of life as people age, rather than when they
 age.

Appendix I - Illustrations of Governmental actions towards the implementation of the Madrid International plan of Action on Ageing (MIPAA)

- a) Certain Arab countries had formulated **national plans on ageing**, pursuant to the recommendations of the Vienna Plan. Some countries had begun to incorporate ageing-related issues into their policies and to implement the six priorities identified in the Vienna Plan, namely, social, income and employment security, training, education and media, health, housing, the family and social welfare. However, there has been little progress made in formulating national policy for older people.
 - Five countries (Bahrain, Egypt, Jordan, Qatar and Syria) have drawn policy guidelines aimed at initiating and formulating relevant national plans of action. The Plan of Action on Ageing of Syria tackles mainly health-related issues and is subject to annual modifications according to needs and priorities.
 - •In May 2007, Egypt set guidelines towards the preparation of a national strategy and plan of action on ageing.
 - The National Population Policy of Yemen, 2001-2025, covers provisions regarding strengthening the support to the aged people, including empowerment, health services, and improving the quality of life. Qatar has elaborated its national strategy for ageing and drafted a national plan of action. Morocco and Jordan have elaborated national plans that cover legislation, health and social services. Jordan has additionally prepared a comprehensive strategy for the welfare of the aged.
 - •Lebanon has proposed a 'social plan of action and strategy' that comprise all social segments including the ageing population.
- b) Some member countries are keen to formulate new or upgrade existing relevant **legislation**. Examples include:
 - •Issuing licenses and tax directives regarding the establishment of homes and clubs for older persons (Jordan, Iraq)
 - Initiating health insurance provisions that cover the needy elderly (Egypt, Jordan, Oman, Qatar and Yemen)
 - •Expanding welfare provisions to cover disability caused by ageing (Bahrain and Kuwait)
 - •Issuing directives to financially support the needy elderly including free coverage of health insurance for the very poor. (Jordan, Iraq and Qatar).
 - •Upgrading pension funds, safety nets, and social security schemes (Jordan, Iraq, Lebanon, Oman, Qatar, United Arab Emirates and Yemen)
 - •Formulating projects to implement a new pension law, such as in the case of Lebanon.
 - •Issuing of directives addressing mobility and accessibility within public premises (Egypt, Iraq, and Jordan)
 - •Issuing tax directives towards exemption of transportation fees, tourist visits fees and other financial exemptions (Egypt, Iraq, Lebanon, Oman, and Saudi Arabia).
- c) Available services for the older persons are generally welfare-based. Most countries continue to improve and upgrade both the quality of existing centers and available services, particularly, health services.

- A number of countries have established day centers for the aged and mobile clinics (Bahrain, Egypt, Iraq, Jordan, Lebanon, Palestine and Saudi Arabia). Social workers have thus established direct contact with older persons at their own home or at the community centre.
- d) There has been significant progress in raising public awareness towards addressing ageing issues.
 - Social clubs for older persons are active in many countries (Egypt and Lebanon). Most countries have implemented awareness-building activities through convening meetings and conferences, through conducting awareness sessions, and through issuing brochures and other relevant publications.
 - •Commemorating the annual International Day and/or the National Day of Older Persons has become a major national venue for raising awareness regarding ageing issues. Lebanon has declared an annual 'national day to honor grand-parents'.
 - •In many countries, the Ministry of Information participates in advocacy and public awareness campaigns through media channels: newspaper columns, radio and television programs. In cooperation with the public and private sectors, several countries were carrying out campaigns to raise public awareness and knowledge of ageing-related issues, and some are publishing special magazines for older persons.
- e) Countries have started to realize the importance of surveys.
 - •Jordan, Qatar and Syria prepared relevant surveys and undertook needs assessment studies. Yemen has recently completed its first and preliminary national report on the situation of the older persons (2007).
 - Egypt's general policy covers the preparation of database and reports/studies on ageing. Qatar's national strategy on ageing stipulates establishing an updated database on ageing. Lebanon has updated statistics on ageing, through undertaking relevant several surveys and specialized studies. A survey on the health situation of the family has been completed by the Lebanese Ministry of Social Affairs in 2007. In addition, research centers at universities serve as channels for raising awareness, collecting data and conducting relevant research and conferences. Saudi Arabia's national plan includes establishing a registry/database on older persons.
- f) Arab countries have taken measures to improve the **surrounding environment** and situation of the elderly persons at the physical, social, psychological, family, and economic levels.
 - •Some countries have introduced the 'substitute family program' and other programs in order to bridge the intergenerational gap, such as utilizing the capabilities of the elderly in providing special lessons to students, or teaching in eradication of illiteracy programs.
 - •Directors, and other members, of governmental institutions and civil society organizations are usually selected from older age groups in order to benefit from their experiences. Programs of action are jointly discussed with the leadership of the NGOs/institutions for the aged, before implementation.
 - •Some countries have offered loans to establish small projects. Voluntary work for and by the aged people is promoted at the community level, including participation in community councils.
 - •The housing, urbanization and living environment for older persons is not accorded sufficient attention to meet their needs. Wealthier countries provide older persons with financial assistance to enable them to continue living in their own homes or with relatives and subsidize heads of households who support ageing parents. Qatar and Saudi Arabia have provided special housing units for older persons.
- g) **Empowering aged women**: Member countries have taken measures to empower aged women. In Qatar, the pension law (24/2002) entails eligibility at age 60 for men and 55 for women.
 - A high proportion of households are headed by elderly women who are often poor and widowed.

- Jordan and Yemen have mentioned 'feminization of ageing', and have initiated some programs that specifically target the empowerment of elderly women.
- •Other countries, such as Lebanon, Egypt and the GCC countries have initiated social protection nets. Moreover several women associations provide social and financial support to older women in need.



H.E. Minister Dr. Dzamila Stehlikova was born February 6, in Alma-Ata, in Kazakhstan. She is of Kazakh nationality. On January 9, 1988 she married the citizen of the Czech Republic Miloslav Stehlík, Csc. The marriage was dissolved on June 23, 1997. In June 1988, she moved to the Czech Republic for family reasons.

On February 17, 1992 she was granted the citizenship of the Czech Republic. In 1985 she finished her studies at the 1st Medical University in Moscow, in the branch of general medicine. In 1985–1988 she worked in the position of scientific workman and pedagogue in the Cathedra of psychiatry of Medical University in Moscow. In February 1989–August 1992, she served as expert doctor-psychiatrist in NsP Chomutov, and in 1992–1997 as scientific workman in the National center of health support in Prague and in the State's Health care Institute.

She has been involved in scientific, publication, advisory and pedagogical activities focused on drug problems, prevention of HIV/AIDS and problems of discrimination against minorities exhibiting risk behaviours. In 1998–2006 she was in general practice of a physician in the branch of psychiatry in Chomutov, and devoted herself to pedagogical and scientific activities in the Department of Social Sciences of the Faculty of Environment at the Univerzity of Jan Evangelista Purkyně in Ústí nad Labem.

* * *

Minister Stehlikova highlighted the importance of facilitating dialogue to ensure that issues concerning older persons are adequately addressed. Older persons should be seen as the future, not the past, but she noted this depended on how governments rose to meet the challenge of addressing their needs. She shared with the audience a number of important initiatives that the Czech Republic had taken to establish an ageing management plan. These plans included supporting family and improving social services, creating an age-friendly environment, improving the health and health services for seniors, promoting their participation and protecting the dignity and rights of seniors. These plans, she stressed, outlined national priorities, have provisions for monitoring outcomes and offer strong legal protection.

Minister Stehilova noted that equality of legal rights for older persons was currently inadequate in the European Union (EU) since the EU offered equal legal protection of working rights regardless of age, but did not extend these to the areas of education, social security and healthcare. She noted, however, that there are current proposals to address this inadequacy. Minister Stehlikova announced that Prague would host the 2009 conference on the dignity and endangerment of elderly people, which she hoped would further promote the rights of older persons.



Manohar Upreti, Advocate, from Katmandu, Nepal, has been engaged, since 1989, as a Freelance Advocate, working within the Supreme Court System, in Kathmandu to ensure the Human Rights of all, especially Older Persons in Nepal. Mr. Upreti is currently working with the Nepal Government's panel of Rules Drafting Committee for Elder People, to which he was appointed in 2007. He is currently the Vice President of Nepalese society of Victimology (NESOV) 2007-2010. And, he serves as an International Marketing consultant for Western Nepal Crafts Pvt. ltd (Traditional Hand made paper and paper product company) 1999-present.

He received his Bachelor of Law in 1989 from Tribhuvan University Nepal, having studied:

English, International law, Corporation law, Criminology, International Institution and Human Rights, Air and Space Law, etc.) Additionally, he completed an Asian Post Graduate course on Victimology and Victim Assistance in 1999 at Tokiwa University, Japan, where he has also been a Guest Lecturer. Further, he has studied General Marketing and Export Management in 1998. He speaks, reads and writes fluent Nepali. He also reads and writes Hindi and English.

His other accomplishments and professional responsibilities include the following: Visiting faculty: KSL Kathmandu School of law (since 2005); Volunteer Teacher: Martyrs Law Campus Kathmandu (1995-96); Part time Trainer: Nepal Legal Aid Projects (1995-1997); Field Researcher: Political Parties & the parliamentary Process in Nepal (1992); Adviser: Siddhi Memorial foundation (A non profit charitable institution) working mainly with older people. (2005-present); Adviser: CFVJRADN (Center for Victim Research and Development, Nepal (Presently); and Executive member: Elderly income generating program (2007 March-to present)

He has written various articles and presented several papers in victimology and relevant fields in Nepal . He has numerous memberships and positions in organizations such as the Supreme Court Bar Association, Human Rights Organization of Nepal,(HURON) and National Senior Citizen Organization Network, Nepal (NSCONN) He is a Life Member: SCWAN (Senior Citizen's Welfare Association, Nepal) and the Nepal Red Cross Society. He may be reached at manohar-wsv@hotmail.com.

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A brief overview of the successful pilot project for the elderly in Nepal

Project title: "Improving Health and Economic Status of Poor Elderly People in Nepal"

Status of senior citizens in Nepal: A general overview

- In Nepal people of the age 60 and above are considered the senior citizens according to Senior Citizen Act 2006. They comprise of 5.9% of the total population.
- Due to access to education and increased health care facilities the average longevity and percent of aged persons in Nepal is on the rise.
- Due to factors like migration of rural population to big cities and abroad in search of job, breaking up of extended family systems, lack of caregivers at home many elderly people are deprived of their rights of leading a dignified, safe and qualitative old age.
- Due to social changes and lack of government provisions and self-preparedness, abandoned, destitute population of the elderly is on the rise.
- Family members are the chief caregivers of the elderly in Nepal. Due to changing social needs, the need for old age homes, shelters, geriatric hospitals and rehabilitation centers is on the rise. The present facilities available to the elderly are severely inadequate.

Initiatives taken to help the elderly

- Though inadequate, initiatives are being taken from government, INGO, NGO side to help the senior citizens age gracefully and lead a fulfilling life.
- It is seen that economic independence is the key to betterment of lives of the elderly. Increased income leads to good healthcare opportunities and good food. There is no better way to do this than by helping them to do income generating activities at which they are skilled.
- To help the senior citizens pursue opportunities for the full development of their potential NSCONN (National Senor citizen Organization Network-Nepal launched a pilot project titled "Improving Health and Economic Status of Poor Elderly People in Nepal' with the help of HAI (Help Age International).

Description of the project

- The project focused on bringing improvement in the economic and health conditions of the elderly.
- The project, specially targeted towards brining positive changes in the lives of the elderly <u>is the first of its kind launched in Nepal.</u>
- The project was implemented in Gottatar Village Development committee, Ward No 3, and 4.
- First of all an OPO (Older People's Organization) comprising of 75 elderly was formed out of which 41 members were women.
- The group helped the stakeholders identify their skills and capacities and income generating activities they could take up.
- After their skills and interests were identified, the elderly people were given trainings and logistics required to start the income generating activities like animal husbandry, vegetable farming, small scale poultry farming, small shops and floriculture.

Functioning of the project

- A revolving fund of 4 lakhs 51 thousand (US\$ 6938.45) was opened in their community account. They could loan the money at the interest rate of 6% to 8%.
- After 9 months, the stakeholders were able to pay back the 80% of the loan money.
- After starting to earn, the status of the elderly has changed in the community. They receive more respect and support in their households and in the community.
- The number of participants in the project is one the rise so is the demand for such projects.

Achievements of the project

- Increased income has contributed older people in many respects. It has increased a sense of independence as they are now able to contribute to their family welfare. This has strengthened the familial relationship as well.
- It has increased the saving and credit mobilization in the area.
- The increase in income has led to the improved health status of the elderly in the project area. Health seeking behavior is on rise.
- Recognition of elder people as potential contributor to social development

Summing up

- A lot more has to be done in order to make the results of the pilot project sustainable. The old people have formed a team to manage fund for the first time .Many challenges are ahead but this project has proved that such initiatives can bring positive changes in the lives of the elderly.
- Though done in just two districts of the country, similar projects have to be implemented in other districts as well so that many more elderly can benefit.
- This kind of project is successful at helping the senior citizens maintain their independence by engaging in income generating activities

Overall Challenges of Improving Health and Economic Status of the Elderly

- Lack of regular Volunteers
- Lack of resource persons & research
- Lack of information & training
- Limited skills on working with senior citizens. (E.g. age care/home care, counseling skill and appropriate nutrition education for senior citizens.)
- Government gives less priority to issues of the elderly
- NGO & INGOs rarely have programs tailored to help the elderly
- No networking among the few existing NGOs and INGOs working for the elderly in the Region

Recommendations

- Geriatric Hospitals
- Senior Citizen Clubs
- Availability of income generating activities
- Availability of funds for such activities
- Convention on Elder's Right
- Senior Citizen Desk and rapporteurs in UN office in to ensure the protection of Senior Citizen Rights
- Old Age Preparedness Programs for middle age people to get prepared for dignified aging
- Include aging related texts in school and college curriculum to bridge the generation gap

CLOSING REMARKS Rosa Perla Resnick

"A Call for a Convention on the Rights of Older Persons" was the theme of the 2008 IDOP selected by the NGO Committee on Ageing (COA) because of the urgent need to energize people in the field of Ageing towards that goal.

Unfortunately, the 1948 UN / Universal Declaration of Human Rights does not include any specific provisions concerning older persons. Only chapter 25 places "old age" buried among other marginalized people, even though there are some indirect references to older persons throughout the entire text.

After the First World Assembly on Ageing (Vienna 1982) many U N and NGO conferences were held and important documents were produced such as the UN Principles for Older Persons (1991); General Assembly Proclamation on Ageing (1992); U N International Year of Older Persons (1999) and Second World Assembly on Ageing (Madrid, 2002). Subsequent implementation meetings were held in Spain and Germany, as well as many other parts of the world.

However, no official Convention (1) emerged from these gatherings to protect older people's rights and to prevent discrimination, neglect, abuse and violence. More recently, a number of governments and NGOs active in the Ageing field internationally became deeply concerned, because despite the fact that older persons comprise 11 percent of the global population, they remain largely ignored and invisible in society.

Thus, the theme of the 2008 IDOP came to be, "A Call for a Convention on the Rights of Older Persons" with the expectation that such a treaty could serve as a solid foundation for starting a process. This convention eventually would bring positive change to the world, especially in regions and countries that lack existing legal mechanisms to protect the fundamental human rights of their increasing older populations.

The 2008 IDOP was indeed inspired by the U N / Universal Declaration of Human Rights' hope and promise of "freedom from fear and freedom from want." These freedoms must be realized for older persons so that they can live their lives in dignity, free from hunger, violence, oppression, and injustice. It was actually an appeal for governments to forward planning for good policies and best practices that could help grass roots older people realize their potential and prevent them from being perceived as a burden to their societies. While many governments described their stance to recognize and adopt positive legislation on behalf of their older people, regrettably, even today older persons are not yet appreciated in many countries.

This publication presents excerpts of the various speeches made during the morning and afternoon sessions. In addition, in the course of the fund-raising-luncheon a heartfelt tribute was paid to Virginia Hazzard, a staunch supporter of the COA and the IDOP. Her Excellency, Dr Inonge Mbikusita-Lewanika, Zambian Ambassador to the U.S. and a long time friend of Virginia, delivered a very moving memorial address.

This author (Dr. Rosa Perla Resnick) summarized the proceedings of the day and mentioned that after everything had been discussed at this celebration about the urgent need to develop a Convention for the Rights of Older Persons, a clear message has been advanced to governments, civil society, the business community, social service organizations and individual older persons. There is a need to take immediate action so that the fundamental rights of older people as human beings are honored and respected through the promotion of their "independence, participation, care self-fulfillment and dignity." (U.N. Principles for Older Persons, Resolution 1991).

Ultimately, the 2008 IDOP deliberations and conclusions led to a reaffirmation of the biblical injunctions, already recorded 3500 years ago, which prescribed in Lev (19:32) "You shall rise up before the hoary head and honor the older person" and also the words of the Psalms (7:9) "Cast me not off in the time of old age; forsake me not where my strength fails." It is only a society that respects the rights and contributions of older people that has fulfilled it's promise to be a moral and just polity animated by the highest ideals of today's world.

(1) "Convention and Treaty are used interchangeably and refer to legally binding agreements between Member States" (UN Association in Canada, 2002).

* * * *

NGO Committee on Ageing, UN New York

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LIST OF ORGANIZATIONAL AFFILILATIONS

NGO COMMITTEE ON AGEING, NEW YORK

(As of September 2008)

AARP

Aging in America/IAHSA

Albert Einstein College of Medicine All India Women's Conference

American Association of Family & Consumer

Services

American Ethical Union/National Service

Conference

American Psychological Association

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Gray Panthers

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If your organization is interested in supporting the work of the Committee, we would like to hear from you.

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