

# Towards an Age-Friendly Victoria

Kathleen Brasher

McCaughey Centre  
The University of Melbourne



# The Global WHO Age-Friendly Cities Initiative

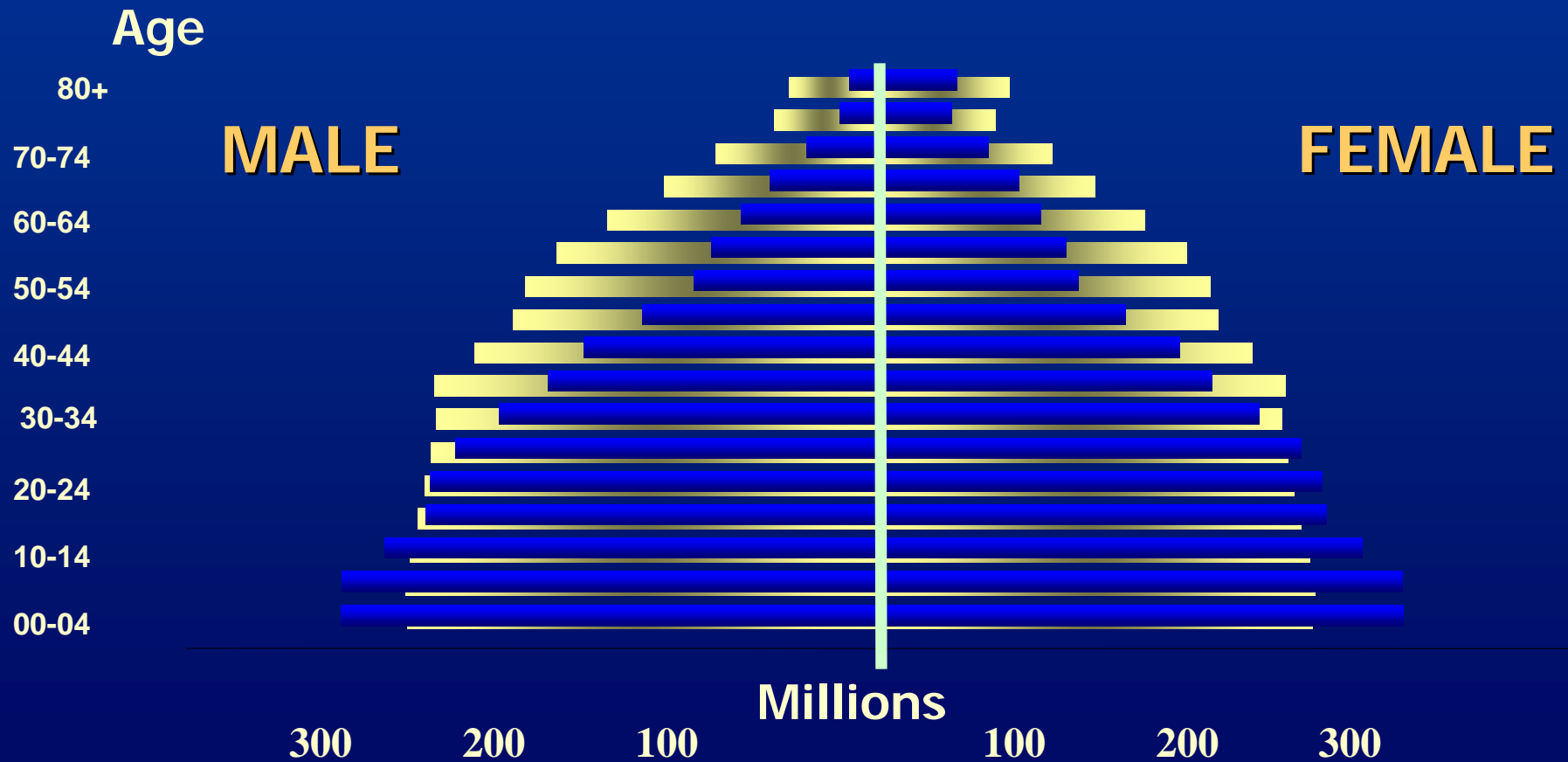
Context for creating Age-Friendly Cities

Implementing the AFC Guide

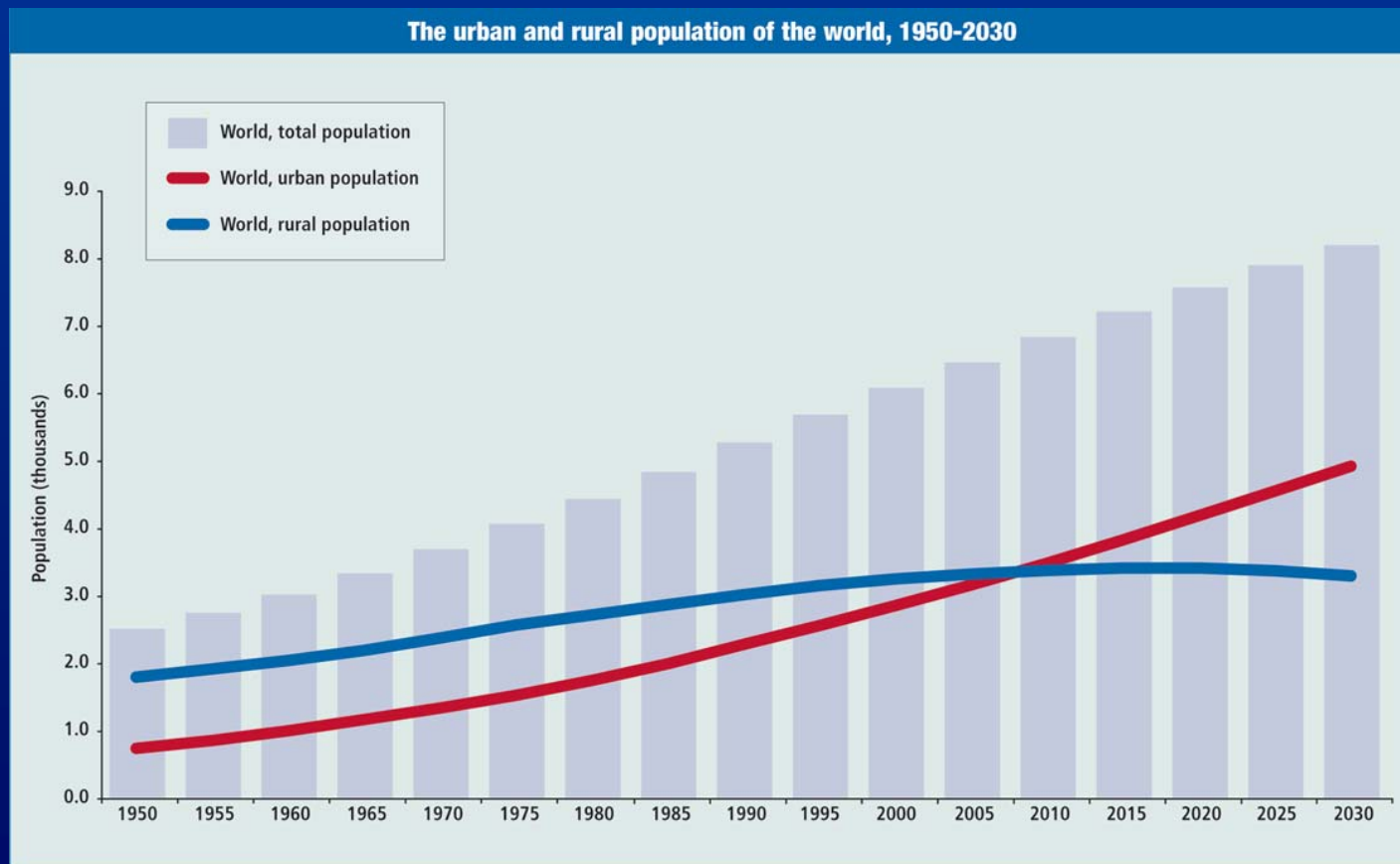


# The world population is ageing

Population Pyramid in 1995 and 2025



# Urbanisation



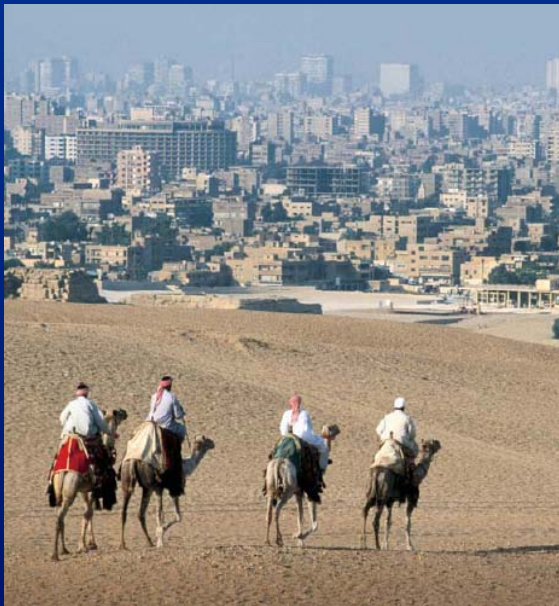
UN Department of Economic and Social Affairs Population Division  
World Urbanisation Prospects 2005

# Urbanisation

- Mega-cities
  - 1950 2 New York & Tokyo
  - 2005 20 incl. Sao Paulo, Bombay, Delhi, Shanghai
- Slums
  - 2005 1 billion people, 1/6th world population 90% developing world
  - Poverty, lack of water, sanitation, housing



# Impact of Urbanisation



# WHO Response: Global Age-Friendly Cities Initiative

- Two main objectives:

## WHO

- to identify concrete indicators of an age-friendly city and produce an 'Age-Friendly City Guide' to stimulate and guide advocacy, community development and policy change to make urban communities age-friendly.

## For participating cities

- to increase awareness of local needs, gaps and good ideas for improvement in order to stimulate development of more age-friendly urban settings.

# WHO Global Age-Friendly Cities Initiative



- Adopts a locally-driven 'bottom-up' approach
- Starts with the experiences of older persons
  - *What is, and what is not, age-friendly?*
  - *What can be done to improve your community's age-friendliness?*
- Adds thoughts of public, voluntary and commercial service providers in the local community

# Age-Friendly Collaborating Cities



## AMERICAS

Argentina, La Plata  
Brazil, Rio de Janeiro  
Canada, Halifax  
Canada, Portage La Prairie  
Canada, Saanich  
Canada, Sherbrooke  
Costa Rica, San Jose  
Jamaica, Kingston  
Jamaica, Montego Bay  
Mexico, Cancun  
Mexico, Mexico City  
Puerto Rico, Mayaguez  
Puerto Rico, Ponce  
USA, New York  
USA, Portland

## EUROPE

Germany, Ruhr  
Ireland, Dundalk  
Italy, Udine  
Russia, Moscow  
Russia, Tuymazy  
Switzerland, Geneva  
Turkey, Istanbul  
UK, Edinburgh  
UK, London



## AFRICA

Kenya, Nairobi

## SOUTH-EAST ASIA

India, New Delhi  
India, Udaipur

## EASTERN MEDITERRANEAN

Jordan, Amman  
Lebanon, Tripoli  
Pakistan, Islamabad

## WESTERN PACIFIC

Australia, Melbourne  
Australia, Melville  
China, Shanghai  
Japan, Himeji  
Japan, Tokyo

Credit: BC Ministry of Health

# Vancouver Protocol

- Focus groups with Older persons
  - 158 Groups with 1485 participants
- Service providers
  - 765 participants



# Global Age-friendly Cities: A Guide



# Eight Key Features



## 1. Outdoor spaces & buildings

Have a major impact on mobility and independence

Quality of life, safety and access improved by:

- Small, quiet, green areas

- Non-slip, cleared pavements

- Safe pedestrian crossings

- Age-friendly buildings

## 2. Transportation

Being able to move about in the community determines social participation and access to services

Available, affordable, reliable and safe transport

# Eight Key Features

## 3. Housing

There is a link between housing and access to services

Affordable, accessible, appropriately located, and secure

## 4. Respect & social inclusion

Treated with respect and included in civic life

## 5. Social participation

Opportunities for leisure, social, cultural and spiritual activities with people of all ages and cultures



# Eight Key Features



## 6. Civic participation & employment

Opportunities cater to older persons' interests and abilities

## 7. Communication & information

Timely, age-friendly information that keeps people connected

# Eight Key Features



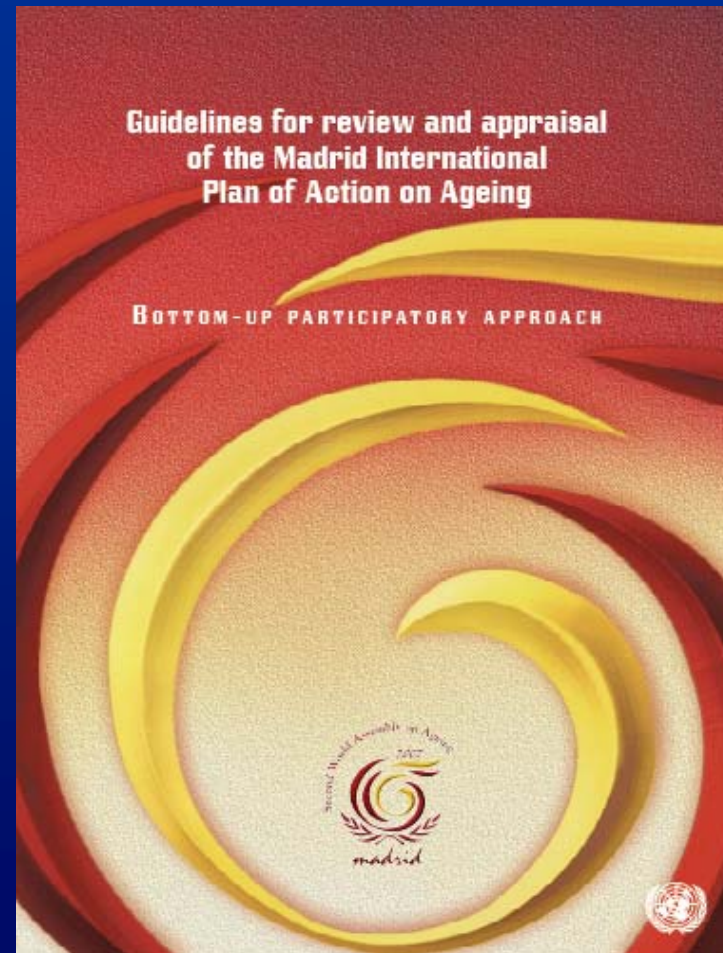
## 8. Community Support and Health services

Vital for health and independence  
Tailored to & informed by the  
needs of older people



# Context for Age-Friendly Initiatives

- Involve older persons as full partners in every stage
- Recognise the diversity among older people
- Instill respect and consideration as universal values
- Foster solidarity between generations and communities



# Community Monitoring

## An example from Tanzania



- HelpAge International support older people monitor their governments' implementation of the Madrid Plan
  - Bangladesh, Bolivia, Jamaica, Kenya & Tanzania
- Tanzania
  - Local decision to monitor health services in two areas
  - Key outcome: % of people charged for consultations dropped from 80% to 13% and for prescribed drugs from 100% to 10%
- See [www.helpage.org](http://www.helpage.org)



# Implementing the Guide: How to get started

1. Define your community on a map. It could be a part of the city, the LGA, your town or a collection of small communities working together.
2. Create a strong vision for an age-friendly city  
*What would our city/town look like if it was age-friendly?*



# Implementing the Guide



3. Obtain copies of the Age-Friendly Cities Guide or Canadian Age-Friendly Rural and Remote Guide
4. Create a project team with people who:
  - Reflect the diversity of your city/town
  - Have skills you need: researchers, COTA, business people, planners, health staff, DPCD.

**Work with your local government**

# Implementing the Guide

5. Appoint an Age-Friendly coordinator to keep the project on track. Could be an employee of local government.
6. Involve others in the community by making presentations to neighbourhood groups



# Implementing the Guide



7. Establish a reasonable deadline
8. Conduct your inventory  
What's already been achieved?  
What other projects are happening?  
What needs to improve?

Use focus groups, surveys, photos, consultations with the **Age-Friendly Guide & Checklist**

# Implementing the Guide

## 9. Prioritize the most important findings:

Present them to the people who can bring about change

Use the information you have to compare your city or town from year to year



# Implementing the Guide



Sometimes, like the experience of others around the globe, change might require more than presentations

# Beyond the Guide



- Ageing in a foreign land
  - With VMC, COTA, MAV, AGWS, and with 50+Hellas in Greek and as part of international group led by New York Academy of Medicine

[www.mccaugheycentre.unimelb.edu.au](http://www.mccaugheycentre.unimelb.edu.au)