

World Health Day 2012 - Ageing and Health

"Good health adds life to years"

Toolkit for event organizers

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I. Introduction

Every year, World Health Day is celebrated on 7 April to mark the anniversary of the founding of the World Health Organization (WHO) in 1948. World Health Day is a global campaign, inviting everyone – from global leaders to the public in all countries – to focus on a single health challenge with global impact. Focusing on new and emerging health issues, World Health Day provides an opportunity to start collective action to protect people's health and well-being. It is an opportunity to engage in finding solutions that benefit us all.

The topic of World Health Day in 2012 is Ageing and Health with the theme "Good health adds life to years". The focus is how good health throughout life can help older men and women lead full and productive lives and be a resource for their families and communities. Ageing concerns each and every one of us – whether young or old, male or female, rich or poor – no matter where we live.

This *Toolkit* will help you plan activities to celebrate World Health Day in 2012. It includes the following materials:

- information on ageing and health, including population trends;
- key messages and calls to action;
- ideas for planning and implementing events and campaigns;
- a list of communications materials you can use;
- tips on how to effectively engage audiences through social and traditional media; and
- contacts for technical and communications support.

Anyone who wishes to organize World Health Day events or activities is welcome to use the *Toolkit* and its materials. Our partners include governments, members of the WHO Global Network of Age-friendly Cities and Communities, and non-member cities and communities who wish to become age-friendly. Individuals, academia, professional and older people's associations, civil society and private sector organizations may also find inspiration for action on ageing and health.

WHO is the directing and coordinating authority for health within the United Nations system. WHO experts produce evidence-based and ethical health guidelines and standards and help countries improve their citizens' health and save lives. WHO also supports and promotes health research and strives to improve health services, in all countries. With the support of WHO, governments tackle global health threats and protect people's health and well-being.

New ways of working and innovative partnerships help us to make a difference and achieve our goals. WHO and its 194 Member States work with many partners, including United Nations agencies, donors, nongovernmental organizations, WHO Collaborating Centres, professional associations and the private sector. WHO is headquartered in Geneva, Switzerland, and has offices in 148 countries, areas and territories, as well as six regional offices to provide proximity support and expertise to countries. The support and participation of WHO's 194 Member States has the potential to make World Health Day a globally-observed event.

II. Are you ready? What you need to know about ageing

Note for layout : this box is for inclusion in section A below

- The number of people today aged 60 and over has doubled since 1980.
- The number of people aged 80 years will almost quadruple to 395 million between now and 2050.
- Within the next five years, the number of adults aged 65 and over will outnumber children under the age of 5.
- By 2050, these older adults will outnumber all children under the age of 14.
- The majority of older people live in low- or middle-income countries. By, 2050, this number will have increased to 80%.

A. Our world is changing

In the 21st century, health is determined by and contributes to broad social trends. Economies are globalizing, more and more people live and work in cities, family patterns are changing and technology is evolving rapidly. One of the biggest social transformations is population ageing. Soon, the world will have more older people than children and more people of very old age than ever before.

1. *The world will have more people who live to see their 80s or 90s than ever before.* The number of people aged 80 years or older, for example, will have almost quadrupled to 395 million between 2000 and 2050. There is no historical precedent for a majority of middle-aged and older adults having living parents, as is already the case today. More children will know their grandparents and even their great-grandparents, especially their great-grandmothers. On average, women live six to eight years longer than men.
2. *The past century has seen remarkable improvements in life expectancy.* In 1910, the life expectancy for a Chilean female was 33 years; today, a mere century later, it is 82 years. This represents a remarkable gain of almost 50 years of life in one century, and is largely due to improvements in public health.
3. *Soon, the world will have more older people than children.* Within the next five years, for the first time in human history, the number of adults aged 65 and over will outnumber children under the age of 5. By 2050, these older adults will outnumber children under the age of 14.
4. *The world population is rapidly ageing.* Between 2000 and 2050, the proportion of the world's population over 60 years will double from about 11% to 22%. The absolute number of people aged 60 years and over is expected to increase from 605 million to 2 billion over the same period.
5. *Low and middle-income countries will experience the most rapid and dramatic demographic change.* For example, it took more than 100 years for the share of France's population aged 65 or older to double from 7 to 14%. In contrast, it will take countries like Brazil and China less than 25 years to reach the same growth.

B. Determinants of healthy ageing

1. *Healthy ageing is linked to health in earlier stages of life.* Undernutrition in the womb, for example, may increase the risk of disease in adult life, such as circulatory diseases and diabetes. Respiratory infections in childhood may increase the risk of chronic bronchitis in adult life. Obese, or overweight, adolescents run the risk of developing chronic diseases, such as diabetes, circulatory disease, cancer, respiratory and musculo-skeletal disorders, in adult life.
2. *Yet, how well we age depends on many factors.* The functional capacity of an individual's biological system increases during the first years of life, reaches its peak in early adulthood and naturally declines thereafter. The rate of decline is determined, at least in part, by our behaviours and exposures across the

whole life course. These include what we eat, how physically active we are and our exposure to health risks such as those caused by smoking, harmful consumption of alcohol, or exposure to toxic substances.

C. Demographic changes are accompanied by new challenges

1. *Even in poor countries, most older people die of noncommunicable diseases* such as heart disease, cancer and diabetes, rather than from infectious and parasitic diseases. In addition, older people often have several health problems at the same time, such as diabetes and heart disease.
2. *The number of people living with disability is increasing due to population ageing and because of the greater risk of chronic health problems in older age.* For example, about 65% of all people who are visually impaired are aged 50 and older, with this age group comprising about 20% of the world's population. With an increasing elderly population in many countries, more people will be at risk of age-related visual impairment.
3. *Globally, many older people are at risk of maltreatment.* Around 4-6% of older people in developed countries have experienced some form of maltreatment at home. Abusive acts in institutions include physically restraining patients, depriving them of dignity (by for instance leaving them in soiled clothes) and intentionally providing insufficient care (such as allowing them to develop pressure sores). The maltreatment of older people can lead to serious physical injuries and long-term psychological consequences.
4. *The need for long-term care is rising.* The number of older people who are no longer able to look after themselves in developing countries is forecast to quadruple by 2050. Many of the very old lose their ability to live independently because of limited mobility, frailty or other physical or mental health problems. Many require some form of long-term care, which can include home nursing, community care and assisted living, residential care and long stays in hospitals.
5. *Worldwide, there will be a dramatic increase in the number of people with dementias such as Alzheimer's disease, as people live longer.* The risk of dementia rises sharply with age with an estimated 25-30% of people aged 85 or older having some degree of cognitive decline. Older people with dementia in low- and middle-income countries generally do not have access to the affordable long-term care their condition may warrant. Often their families do not often have publicly funded support to help with care at home.
6. *In emergency situations, older people can be especially vulnerable.* When communities are displaced by natural disasters or armed conflict, older people may be unable to flee or travel long distances and may be left behind. Yet, in many situations they can also be a valuable resource for their communities as well as for the humanitarian aid process when they are involved as community leaders.

D. Fighting stereotypes

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We all generally value and respect the older people we love or know well. But our attitudes to other older people within the broader community can be different. In many traditional societies, older people are respected as "elders". However, in other societies, older women and men may be less respected. The marginalization can be structural, for example enforced retirement ages, or informal, such as older people being viewed as less energetic and less valuable to a potential employer. These attitudes are examples of "ageism" — the stereotyping of, and discrimination against, individuals or groups because of their age. Ageist attitudes can portray older people as frail, "past their sell-by date", unable to work, physically weak, mentally slow, disabled or helpless. Ageism serves as a social divider between young and old.

These stereotypes can prevent older men and women from fully participating in social, political, economic, cultural, spiritual, civic and other activities. Younger people may also influence these decisions in the attitudes they convey to older people, or even by building barriers to their participation.

We can escape this vicious cycle by breaking down stereotypes and change our attitudes about older people. Here are a few examples.

Stereotype 1: Older people are "past their sell-by date"

While older workers are often presumed to be less productive than younger workers and studies show slight declines in information processing and attention with age, most individuals maintain mental competence and learning abilities well into older age. They also have the advantage of possessing experience and institutional memory. Deterioration in physical abilities may be much less than presumed. On 16 October 2011, British national Fauja Singh became the first 100 year-old to complete a marathon by running the Toronto Waterfront Marathon in Canada.

Stereotype 2: Older people are helpless

The fact that older people are particularly vulnerable in emergencies does not mean that older people in general are helpless. After the 2007 Cyclone Sidr in Bangladesh, older people's committees took an active role, disseminating early warning messages to people and families most at risk, identifying those who were worst hit, compiling beneficiary lists and notifying them when and where to receive relief goods. After the 2011 earthquake and Tsunami in Japan, older people and retirees came forward to volunteer at the nuclear disaster sites, saying they were not afraid of becoming contaminated with radiation. Advanced in years, they were less worried about the long term impacts of the exposure.

Stereotype 3: Older people will eventually become senile

Occasional memory lapses are common at any age. And although the risk of developing dementia symptoms rises steeply with age in people over 60, possible signs of dementia (a loss of intellectual abilities), such as uncertainty about how to perform simple tasks, difficulty in completing sentences and confusion about the month or season, are not normal signs of ageing. Most older people are able to manage their financial affairs and their day-to-day lives. They can give informed consent for treatment or medical interventions they may need. In fact, some types of our memory stay the same or even continue to improve with age, as for example our semantic memory, which is the ability to recall concepts and general facts that are not related to specific experiences.

Stereotype 4: Older women have less value than younger women

People often equate women's worth with beauty, youth and the ability to have children. The role older women play in their families and communities, caring for their partners, parents, children and grandchildren is often overlooked. In most countries, women tend to be the family caregivers. Many take care of more than one generation. These women are often themselves at advanced ages. For example, in sub-Saharan Africa, 20% of rural women aged 60 and older are the main carers for their grandchildren.

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Stereotype 5: Older people don't deserve health care

Treatable conditions and illnesses in older people are often overlooked or dismissed as being a "normal part of ageing". Age does not necessarily cause pain, and only extreme old age is associated with limitation of bodily function. The right to the best possible health does not diminish as we age: It is mainly society that sets age limits for access to complex treatments or proper rehabilitation and secondary prevention of disease and disability.

It is not age that limits the health and participation of older people. Rather, it is individual and societal misconceptions, discrimination and abuse that prevent active and dignified ageing.

III. Your World Health Day campaign

General approach

WHO promotes a healthy lifestyle across the life-course to save lives, protect health and alleviate disability and pain in older age. Age-friendly environments and early detection of disease as well as prevention and care improve the wellbeing of older people. Population ageing will hamper the achievement of socioeconomic and human development goals if action is not taken today. With this year's World Health Day campaign, WHO wants to go beyond awareness-raising to elicit concrete action and positive change. The World Health Day campaign aims to engage all of society – from policy makers and politicians to older people and youth – to:

- take action to create societies which appreciate and acknowledge older people as valued resources and enable them to participate fully; and to
- help protect and improve health as we age.

The day can be used to highlight how this change can be brought about, giving examples of how older people contribute to their families and their communities in different parts of the world. You can set up your own World Health Day 2012 campaign, using the WHO key messages and materials.

A. Target audiences

- Policy-makers in governments and international organizations
- City and municipality leaders
- Health-care providers
- Civil society groups
- Researchers
- Private sector entities
- Older people, their caregivers, service providers and families
- Community leaders
- Youth and youth groups
- General public

B. Key messages

- Older people are a valuable resource for their societies and should feel valued.
- Good health throughout life helps us make the most of the positive aspects of ageing.
- Societies who take care of their older populations and support their active participation in daily life, will be better prepared to cope with the changing world.

C. Calls to action

Good health in older age can be achieved by:

- Promoting health across the life-course.
- Creating age-friendly environments that foster the health and participation of older people.
- Providing access to basic primary health care, long-term care and palliative care.
- Acknowledging the value of older people and help them participate fully in family and community life.

D. Expected results

- Greater appreciation that good health across the life-course contributes to a happy and productive older age

- People become aware of ageist stereotypes and support older people in being active, resourceful and respected members of society.
- Governments implement innovative strategies to ensure good health for the elderly.
- Governments take action now to anticipate and address public health challenges related to population ageing. This is particularly important in low- and middle-income countries, which are experiencing the fastest ageing.

E. Communication material

WHO's materials are aimed at increasing awareness of older people's contributions and the fact that good health is key to a good life during older age.

Communication and technical materials will be posted on the WHO World Health Day 2012 web site <http://www.who.int/world-health-day/2012/> during the weeks leading up to 7 April. WHO's regional and country offices are making communications materials available on their respective web sites. <http://www.who.int/world-health-day/2012/> will link to these sites as well as to partners' sites.

Slogan

The official slogan for World Health Day 2012 is "Good health adds life to years". Ageing is inevitable, but everyone ages differently. Even if we are young at heart, we need to maintain our physical, mental and social well-being to stay healthy and independent well into old age. Beyond our wish to add years to life, we need to add life to years. The Arabic, Chinese, French, Russian and Spanish translations of the slogan are:

صحة أفضل تساوي حياة أفضل وأطول

健康有益长寿

Une bonne santé pour mieux vieillir

Крепкое здоровье делает жизнь полноценной

La buena salud añade vida a los años

Translation into other languages for use on campaign material is encouraged.

Poster series

WHO has designed a series of posters www.who.int/world-health-day/2012/ that challenge the current stereotypes older people have to grapple with. They show older people in positive situations, living to the full and feeling good about their lives. The posters feature a PLAY button as seen on internet videos symbolizing the dynamism and enjoyment that older people can and should have in their lives.

Note for layout: insert small images of posters in English of Mirtha Nordet, Helmut Wirz and Barton and Namale as examples

If you take part in the World Health Day campaign, you can use a poster with an image more suited to your own country or region.

The design and slogan should always be used in conjunction with the official WHO logo. All three are WHO intellectual property and should be used only to identify events and materials related to World Health Day 2012. Whenever the World Health Organization logo is used, please note that it:

- should not be reproduced together with commercial logos;
- should not be used to promote yourself or to obtain any commercial or personal financial gain; and

- should not be utilized in any manner which implies WHO endorsement of activities or products of a commercial enterprise.

Further guidelines on use of the WHO logo are available at:
<http://www.who.int/about/licensing/emblem/en/index.html>

Social Media

In the lead-up to World Health Day, social media will be used to engage people and to challenge some of the stereotypes of ageing. Images and stories of older people and their valuable role in society will be made available through WHO's social media channels.

Facebook <http://www.facebook.com/WorldHealthOrganization?v=wall>
 Twitter <http://twitter.com/#!/whonews>
 YouTube <http://www.youtube.com/user/who>

Media materials

Prior to World Health Day, WHO will make the following materials available for your reference, local adaptation and media outreach.

- Global news release
- Statement from the WHO Director-General and Regional Directors
- Video material
- Fact sheet on ageing and health
- Technical document
- Photos on ageing and health for journalists to download
- Photo stories
- List of communication contacts and experts available for media interviews

Step-by-step planning

A. Take the first steps

- Identify your specific target audiences, possible partners and champions
- Create/adapt relevant key messages for your campaign
- Mobilize your community www.med126.com
- Plan and implement events such as exhibits, panel discussion and photo competitions
- Prepare materials.¹ Use your local language whenever possible.
- Develop a media strategy and prepare media materials
- Develop a plan to monitor and evaluate your activities and media pick-up

¹ You may want to use WHO's policy materials such as:

1. *Active Ageing a Policy framework*, Geneva, World Health Organization (2002)

http://whqlibdoc.who.int/hq/2002/WHO_NMH_NPH_02.8.pdf

2. Stein. C, Moritz. I, *A life course perspective of maintaining independence in older age*, Geneva, World Health Organization (1999)

http://whqlibdoc.who.int/hq/1999/WHO_HSC_AHE_99.2_life.pdf

3. *Global Age-friendly Cities: A Guide*, Geneva, World Health Organization (2007)

http://www.who.int/ageing/publications/Global_age_friendly_cities_Guide_English.pdf

B. Engage the media

Media have a massive influence globally and locally on what the general public or political leaders deem important. Four things are needed for media coverage:

1. understanding what the media want in a story;
2. making sure that the information is provided in a clear and timely manner;
3. connecting the media with spokespersons, subject matter experts and/or high-profile speakers;
4. making use of a broad range of media channels including TV, audio, print and social media to reach different target groups.

Reporters and producers look for audience appeal, issues that stimulate debate, stories that generate increased viewership or readership and sustained public interest through fresh perspectives on an issue. The media will avoid stories that are inaccurate or incomplete, as well as organizations that are overly persistent after a story has been rejected.

It is important to illustrate how global issues such as population ageing impact local communities and, indeed, every citizen. Since ageing concerns all of us,, human interest stories and testimonials from real people are likely to strongly appeal to the media and the public.

C. Find an angle for stories on ageing and health

Ask and answer one or more of these questions to find an "angle" that will interest your community and the media.

- What aspect of population ageing is most relevant to your country?
- What is the role and value of older people in your country?
- Is there any concept or tradition in your culture that can be linked to the appreciation of older people and active ageing?
- What are the biggest risk factors in your country for healthy ageing throughout life (i.e. during pregnancy, childhood, adolescence, adulthood and/or older age)?
- Are there any Age-friendly Cities in your country that you could highlight?
- Could you showcase proven models, policies or programmes for long-term care? For primary health care services?
- Do informal caregivers get any support from the health system in taking care of older people?
- Are health workers adequately trained in your country to address the rights and specific needs of older people?
- What are the biggest challenges in your country with regard to population ageing?
- How are older people contributing to society in your country? To the family? To the workforce? To the city or community?
- Are older people involved and is their voice heard in policy-making, in general, and with regard to the needs and rights of older citizens in particular?
- Are there champions of active and dignified ageing in your country whose story, interview or quote could make the news?

Other topics that could provide an angle for a story on population ageing include mental health, elderly people in rural areas, education of older people, and social protection.

D. Use social media

Social media such as Facebook, Twitter, YouTube and LinkedIn can help engage grassroots communities in both online discussions and offline activities. However, resources to analyse audiences, strategize outreach, engage

audiences and monitor impact should be planned for at the outset. Ideally, contact should be maintained with social media communities beyond World Health Day, for example to strengthen and expand Age-friendly Cities networks.

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For more information

World Health Organization

WHO Global Network of Age-friendly Cities

http://www.who.int/ageing/age_friendly_cities_network/en/index.html

Ageing and Life Course

<http://www.who.int/ageing/en/>

WHO Regional Office for Africa

<http://www.afro.who.int/en/clusters-a-programmes/frh/gender-womens-health-a-ageing/programme-components/healthy-ageing.html>

WHO Regional Office for the Americas

http://new.paho.org/hq/index.php?option=com_joomlabook&Itemid=259&task=display&id=228

WHO Regional Office for the Eastern Mediterranean

<http://www.emro.who.int/whd2012>

WHO Regional Office for Europe

<http://www.euro.who.int/en/what-we-do/health-topics/Life-stages/healthy-ageing>

WHO Regional Office for South-East Asia

URL to be provided by SEARO

WHO Regional Office for the Western Pacific

http://www.wpro.who.int/health_topics/ageing/

List of previous World Health Days

<http://www.who.int/world-health-day/en>

Nongovernmental organizations in official relations with WHO

HelpAge International

<http://www.helpage.org/>

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International Association of Gerontology and Geriatrics

<http://www.iagg.info/>

International Federation on Ageing

<http://www.ifa-fiv.org/>

Other nongovernmental organizations in official relations with WHO

http://www.who.int/civilsociety/documents/NGOs-in-Official-Relations-with-WHO-2011_16-Mar-2011.pdf

United Nations links

Madrid International Plan of Action on Ageing

http://www.un.org/ageing/documents/building_natl_capacity/guiding.pdf

United Nations Economic Commission for Europe
<http://live.unece.org/pau/age/welcome.html>

United Nations Population Division
<http://www.un.org/esa/population/publications/worldageing19502050/>

United Nations Social Policy and Development Division
<http://social.un.org/index/Ageing.aspx>

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Calendar of events for 2012

European year for active ageing and solidarity between generations

2012 is the European Year for Active Ageing and Solidarity between Generations. A chance for all to reflect on how Europeans are living longer and staying healthier than ever before — and to realize the opportunities that this represents. The European Year seeks to encourage policy-makers and stakeholders to improve opportunities for active ageing in general and for living independently.

<http://www.age-platform.eu/en/age-policy-work/solidarity-between-generations/lastest-news/1231-2012-european-year-on-active-ageing-and-intergenerational-solidarity>

First world congress on healthy ageing

19-22 March 2012 -- Kuala Lumpur, Malaysia

The World Congress, co-sponsored by WHO, will focus on "Evolution: holistic ageing in an age of change" and encompass all aspects of ageing and health issues - from conventional and complementary medicine, to societal and policy level approaches to physical, mental and social well-being.

<http://www.healthyageing.org/1st-world-congress-healthy-ageing-2012>

World Health Day

7 April 2012

The theme for World Health Day 2012 is "Ageing and health". Various local, national and international events are arranged to educate the public and policy-makers on the issue of ageing.

<http://www.who.int/world-health-day/2012/>

WHO knowledge transfer tool on ageing

April 2012

Knowledge derived from research and experience is of little value unless it is put into practice and its success is monitored and regularly evaluated. Hence, WHO will issue a tool to assist governments to translate ageing and health knowledge into policy and practice, with a particular emphasis on age-friendly health policies and action plans. The aim is to improve health and health systems policies and outcomes which are sensitive to the needs of older people.

WHO dementia report

April 2012

This WHO report focuses on the health and social aspects of dementia. It proposes policy approaches and best practices to help countries prepare for the challenges, including the costs.

IFA 11th global conference on ageing

28 May-1 June 2012 -- Prague, Czech Republic www.ifa2012.com

This "Ageing Connects" conference hosted by the International Federation on Ageing aims to have a positive impact on age-related policy and practice globally and focuses on older people and development; health and well-being; enabling environments and connected technologies.

http://www.ifa2012.com/ifa_2012-sponsorship_brochure.pdf

Lancet Series

Mid-2012

A *Lancet* series will focus on ageing and health. It will take stock of the evidence on the physical and mental health status of older adults around the world and identify patterns in high-, low- and middle-income countries. It will also identify possible research gaps and point towards evidence-based innovative policy options.

Madrid International Plan of Action on Ageing

18-20 September 2012 -- Vienna

With 2012 marking the 10-year anniversary of the adoption of the Madrid International Plan of Action on Ageing (MIPAA), this Ministerial Conference "Ensuring a society for all ages: promoting quality life and active

ageing" will present an opportunity for Member States of the United Nations Economic Commission for Europe to define the way ahead. The Plan of Action is a resource for policy-makers, suggesting ways for governments, nongovernmental organizations and other stakeholders to reorient the ways in which their societies perceive, interact with and care for their older citizens. The review and appraisal of the Madrid Plan takes place every five years. The second review and appraisal process (Madrid+10) started in 2011.

<http://social.un.org/index/Ageing/Resources/MadridInternationalPlanofActiononAgeing.aspx>

State of the World's Older People, by the United Nations Population Fund

October 2012

WHO Bulletin series on the health of women beyond the years of reproduction

Late 2012

This series will focus on health issues for women that may be overlooked by the traditional focus on their reproductive role. These include cancers such as breast and cervix cancer, and mental health.

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WHO contacts

Headquarters

Technical focal points

Dr John Beard
Director
Department of Ageing and Life Course

Telephone: +41 22 791 3404

Mobile: +41 79 517 3672

E-mail: beardj@who.int

Language: English

Dr Islene Araujo de Carvalho,
Gender, Women and Health
Geneva

Telephone: +41 22 791 2436

Mobile: +41 79 728 6922

E-mail: beardj@who.int

Language: English, Portuguese, Spanish

Media focal point

Mr Gregory Hartl
Telephone: +41 22 791 4458
Mobile: +41 79 203 6715
E-mail: hartlg@who.int
Language: English, French, German, Spanish

Regional Office for Africa

Technical focal point

Professor Davison Munodawafa
Programme Manager
Social and Economic Determinants of Health
Telephone: +47 241 39476 www.med126.com
Mobile: +242 068 280142
Email: munodawafad@afro.who.int
Languages: English

Media focal point

Mr Samuel Ajibola
Telephone: +47 241 39387
Mobile: +242 653 70 22
E-mail: ajibolas@afro.who.int
Languages: English, French

Regional Office for the Americas

Technical focal point

Dr Enrique Vega Garcia
Regional Advisor on Healthy Ageing
Telephone: 1 202 974 3250
Mobile: 1 202 436 5784
E-mail: vegaenri@paho.org
Languages: English, Spanish

Media focal points

Ms Leticica Linn
Telephone: 1 202 974 3440
Mobile: 1 202 701 4005
E-mail: linnl@paho.org
Languages: English, Spanish

Ms Donna Eberwine-Villagran
Telephone: +1 202 974 3122
Mobile: +1 202 316 5469
E-mail: eberwind@paho.org
Languages: English, Spanish

Regional Office for the Eastern Mediterranean

Technical focal point

Dr Said Arnaout
Regional Adviser, Health of Special Groups (Elderly, Workers, School)
Telephone: +202 2276 5380
Mobile: +201 0060 19304
E-mail: arnaouts@emro.who.int
Languages: Arabic, English

Media focal point

Ms Mona Aly Yassin
Telephone: +202 22765020
Mobile: +20 01006019284
E-mail: yassinm@emro.who.int
Languages: English, Arabic

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WHO Regional Office for Europe

Technical focal point

Dr Manfred Huber
Coordinator, Healthy Ageing, Disability and Long-term Care
Telephone: +45 39 17 13 61
Mobile: +45 24 98 40 53
E-mail: mhu@euro.who.int
Languages: English, German

Media focal point

Ms Tina Kiaer
Noncommunicable Diseases and Health Promotion

Telephone: + 45 39 17 12 50
Mobile: +45 519 79246
E-mail: tki@euro.who.int
Languages: Danish, English and French

WHO Regional Office for South-East Asia

Technical focal point

Dr Kunal Bagchi
Medical Officer
Telephone: +91 11 23370804
Mobile: +91 99 58 99 46 65
E-mail: bagchik@searo.who.int
Languages: Bengali, English, Hindi

Media focal point

Ms Vismita Gupta-Smith
Telephone: +91 11 233 70971
Mobile: +91 11 233 70197
E-mail: guptasmithv@searo.who.int
Languages: English, Hindi, Bangla

WHO Regional Office for the Western Pacific

Technical focal point

Dr Anjana Bhushan
Telephone: +63 2 528-9814
Mobile: +63 2 939 939 1686
E-mail: bhushana@wpro.who.int
Languages: English, Hindi

Media focal point

Mr Timothy A. O'Leary
Telephone: +632 528 9992
Mobile: +639 08886 8738 www.med126.com
E-mail: olearyt@wpro.who.int
Languages: English, French, Spanish

Older people's contribution: stories from around the world

The stories below provide examples of individual experiences of ageing. The stories can be used in campaign materials. The source (indicated at the bottom of each section) should be included.

Note for layout: these stories should be interspersed (in boxes) throughout the document rather than as a separate section. Photos to illustrate each will be provided separately.

Dawodati, 73, Uganda

"I live with four grandchildren and one daughter who isn't married. My other daughters also bring their children here for me to look after. They are mainly single mothers and have nobody to look after their children when they have to go and work. I own my house and have one acre of land that we cultivate. I inherited this from my husband. Last year, I went to do a training on how to make a memory book for my grandchildren and how to write my last will. The memory books are very important in teaching children about their clan history and how they can trace other members of their family if something were to happen to me and my daughters. The training on writing a will made me realize that I must write down who owns our property."

Source: HelpAge International

Hosna Abd Elazeem, Egypt

A few years ago, Hosna started to complain about her inability to sort rice for cooking. She was also bothered by something floating in front of her eyes briefly before disappearing. "I didn't think about seeing a doctor because I felt that it was too little to bother my family about." Then one day two health workers passed by Hosna's house on their door-to-door visits to all households in the village. As it turned out, Hosna had cataracts in her eyes as well as diabetes. Cataract is a major cause of preventable blindness which can be treated with simple and very inexpensive surgery. Once her diabetes was under control, Hosna underwent cataract surgery. Today, Hosna's eyes are smiling as she sorts rice again for her family. "My eyesight is back to normal now and I even see colors brighter than before. I urge my relatives and neighbors to seek medical advice when they have any complaint to do with their eyes."

Source: Al Noor Foundation Egypt

Simeon, 80, Moldova

Simeon is a pensioner, volunteer and counselor for the Pensioner and War Veterans of the organization 'Bunătatea' in Moldova. Until he retired, he worked as a science and geography teacher for 50 years. Although Simeon manages to maintain a modest living from his pension, the same cannot be said for other older people in his village. Simeon has been volunteering since 1995, helping older people who are less fortunate. "It is very important to feel you are not a burden on anyone, but rather, that you are a support. I take care of two older people, one of whom cannot walk, and the other cannot see. I visit them regularly and read them the newspaper to keep them informed. I help them write applications for help from government organizations. I am like a legal adviser for them – many older people are not aware that the information could be so useful for them. In fact, many people do not know the rules and what rights they have."

Source: HelpAge International

Emma-Maria, 67, Colombia

Emma-Maria lives with her husband, daughter and two grandchildren, aged 8 and 11. The grandchildren have different fathers who do not live with the family and who rarely visit them. Emma-Maria is the person responsible for supporting the household financially through a business which has two faces: one providing computer and photocopy services; another where she makes garbage bags at the back of her house. "My daily routine is busy. I start working, to do the garbage bags, to clean the house, to mop the floor. I attend the store and work," she says. Emma-Maria acts like a wholesaler. People come to buy the garbage bags from her and then they sell them to businesses or directly to other villagers. A young man that used to sell garbage bags gave her

the idea of the business. "He told me to start this business, but I didn't know how to do this so he taught me. Then I bought the machine."
Source: HelpAge International

Abdul, 82, Bangladesh

"I have been a rickshaw puller since 1971, the time of the Liberation War. Before then, I did casual work for the railway, painting mileage numbers on signs indicating distance, and before that, I worked at home as a farm labourer. Each day I get up early and say my prayers. At 7 a.m. I have a daily job picking up a load of biscuits from a local factory and delivering them. After this, I carry passengers in my rickshaw all day until about 8 pm. I think rickshaw pulling is a good job for me. At 82, I am still strong and fit enough. Many people my age are sick and can't work, so I feel good that I am still able to earn money this way. I don't have any serious health problems either. I use my wages to pay for family expenses such as rice and clothing, but we can't afford to eat meat or chicken. I also pay for one of my grandchildren's education, as her father is dead."

Source: HelpAge International

Van Quang, 70, Viet Nam

Van Quang received training and a micro credit loan from a community organization. "In 2006, I bought a cow for 1.3 million dong (\$78). It was cheap because the cow is very restless and needs to run around in the fields every morning." He managed to keep the cow and also bought pigs and ducks. With the proceeds, he and his wife Thi Thu can earn a living and continue to support their family. Van Quang and Thi Thu had ten children. One died from AIDS. The grandparents were left to bring up their two granddaughters and have looked after them for the past 14 years. The couple is also looking after another son who is HIV-positive because of unsafe intravenous drug use and is living at home. "The most important thing for me now is to have good health for the sake of my son and my family," he says. "You need money to survive but it isn't everything. I hope my children and grandchildren will be good, successful and not face the same problems I did."

Source: HelpAge International