

Active and healthy ageing: three calls to action



We have a unique window of opportunity now, perhaps 20 years or around one generation, to prepare health and social systems for an ageing world. For any process, action or change to be successful, it has to start with the individual. A realistic and positive attitude towards ageing is of paramount importance to make sure we all age actively and in dignity. This attitude will prepare the ground for promoting and protecting the rights of older women and men. On World Health Day 2012, WHO recommends three calls to action, to add life to years.

1. Promote and live a healthy lifestyle across the life-course

Many of the health problems faced by older persons are the result of risk factors that arise during pregnancy and in childhood, youth and adulthood – such as smoking, sedentary lifestyles and unhealthy diets. This underscores the importance of maintaining a healthy lifestyle. Furthermore, maintaining an active lifestyle is one of the most cost-effective ways to stay healthy and minimize disability. An active lifestyle means older persons continue to participate in social, economic, cultural, spiritual and civic affairs in addition to the ability to be physically active or to work for a living.

Examples of concrete and feasible actions that can be taken include the following.

Factors	What individuals can do	What policy-makers can do
Pregnancy	Ensure balanced nutrition in young girls and pregnant or breast-feeding women Reduce chemical exposure in early pregnancy	Focus health promotion activities on girls and women, in particular target smoking prevention and cessation programmes at women
	Avoid smoking, alcohol consumption and substance use including prescription medicines during pregnancy	Increase awareness about the importance of balanced nutrition for girls and women
		Make adequate screening programmes available for all pregnant women and their families
		Ensure long-term follow-up and genetic counselling for those with congenital disease and their families
Childhood	Breastfeed babies for at least 6 months	Promote breastfeeding, legislate against advertising for milk powder, and fortify foods/water with micronutrients in areas of malnutrition
		Train health workers who take care of women and infants on breastfeeding counselling and lactation management
	Ensure balanced nutrition and adequate psychosocial stimulation and physical exercise for your children	Introduce health promotion activities which encourage physical activity at home and in schools
		Educate clinicians to identify psychosocial and emotional problems, overweight children and advise on weight reduction measures
Smoking	Stop smoking: cessation is beneficial at any age	Ensure access to immunization programmes
		Promote safe water supply, frequent hand washing and good food hygiene to prevent transmission of diarrhoeal disease
	Educate your children about the ill-effects of smoking	Ban tobacco advertising, promotion and sponsorship
		Ban sale of tobacco products to children
Alcohol and substance use	Abstain from alcohol and say “no” to drugs	Enforce tobacco taxes
		Provide health education in schools and at the workplace
		Enforce smoke-free laws and provide smoke-free environments
		Control availability, pricing, taxation and advertising of alcoholic beverages
		<ul style="list-style-type: none"> » Provide access to effective, early treatment for alcohol use disorders and related problems » Provide awareness on hazards of excessive consumption of alcohol » Develop and enforce legislation for driving under the influence of alcohol and drugs
		Teach young people life-skills to build confidence and self-esteem
		Introduce an integrated range of prevention, treatment and rehabilitation approaches to substance use



Physical activity	Exercise regularly from the earliest years through to older ages; walking, climbing stairs, housework or playing with children are effective forms of exercise	<ul style="list-style-type: none"> » Incorporate exercise into school curricula » Create workplaces which provide exercise facilities » Plan urban spaces that include recreational areas, such as parks, to encourage physical activity for all age groups
Diet	Consume a balanced and diverse diet high in fibre and low in animal fat, salt and sugar	Increase consumer awareness about direct links between safe food, good nutrition and health
	Reduce your weight if you are overweight and maintain normal body weight	Encourage schools and workplaces to organize “healthy eating” promotions
Oral health	Practise good oral hygiene and retain your natural teeth for as long as possible	<ul style="list-style-type: none"> » Set policy goals for oral health promotion such as water fluoridation and provide accessible oral health promotion programmes and treatment services during the life-course » Implement evaluated prevention programmes
Adult diseases	Make above-listed lifestyle adjustments	Ensure access to safe maternity services
	Make use of available prevention programmes (e.g. screening and vaccination)	Reduce environmental threats such as exposure to toxic substances
	See your doctor at regular intervals	Provide accessible and affordable health care for all
Social and emotional health	Stay involved in your family, your community, a club, or a religious organization	<ul style="list-style-type: none"> » Promote social cohesion and solidarity among the generations » Provide access to life-long education » Promote the creation of clubs for older people to promote social interaction
	Continue to educate yourself and all your children	Provide opportunities for older people to contribute to their families and societies through their paid and unpaid work and caring activities
	Be aware of and speak out against ageism	<p>Educate the public about negative attitudes and practices resulting in social exclusion for older people</p> <ul style="list-style-type: none"> » Provide support and opportunities for families who care for older persons and those most often excluded (e.g. widows in some societies, disabled older people) » Ensure that social events are organized at time and places convenient for older people (e.g. not at late night, public toilets available)
Gender	Be aware of and speak out against gender discrimination and prejudice	<ul style="list-style-type: none"> » Implement legislation against gender discrimination in education, income/jobs, health care, property rights, marriage, inheritance laws » Promote health education on the dangers of high-risk lifestyles by targeting population groups that are particularly at risk (e.g. adolescent girls and boys)
	Educate boys and girls to avoid gender stereotyping	Enable the full participation of women in political life and decision-making positions as they age
		Promote research into risk factors and causes of disease to gain a clearer understanding of the gender differences
		Promote collection and use of sex-disaggregated data and gender analysis
Income security	Be informed about public and private measures intended to protect your income security over the life-course	<ul style="list-style-type: none"> » Provide income security and access to appropriate health care for older persons » Eliminate age discrimination in the workplace



2. Create age-friendly environments and policies to engage older men and women

This area of intervention is about creating environments and policies that foster active and dignified ageing, allowing older persons to participate actively in family, community and political life – no matter what their level of functional ability.

Examples of concrete and feasible actions that can be taken include the following.

Outdoor spaces and buildings

- » Make public buildings accessible for all people with disabilities (e.g. ramps, railings, elevators).
- » Provide accessible and clean toilets in public places and workplaces.
- » Provide green spaces, somewhere to rest, age-friendly pavements (e.g. non-slip surfaces and sufficient width to accommodate wheelchairs) and services in close proximity to residential areas.

Transportation

- » Prevent injuries by educating people about their causes, providing safe pedestrian crossings, making walking safe, implementing fall prevention programmes and providing safety advice.
- » Make transportation accessible for all people with disabilities (e.g. low steps, clear signage, priority seating, proximity of public transport stops to residential areas, clear information on timetables).
- » Provide accessible and affordable public transportation.
- » Educate transportation personnel, e.g. bus and taxi drivers and staff in airports and train stations about the needs of older people, particularly those with disabilities.

Housing

- » Adapt home environments (e.g. wide entry-ways, wheelchair access, bathroom supports).
- » Initiate programmes to provide housing assistance options for older people and their families.
- » Encourage initiatives by civil society and community-based organizations for assistance in provision of daily needs, e.g. meal preparation, house maintenances and renovations for older people at their homes through well trained informal and formal caregivers

Social participation

- » Reduce risks for loneliness and social isolation by supporting community groups run by older people, traditional societies, self-help and mutual aid groups, peer and professional outreach programmes, neighbourhood visiting, telephone support programmes and family caregivers.
- » Include older adults in the planning, implementation and evaluation of social development initiatives and efforts to reduce poverty.
- » Include older adults in the planning, implementation and

evaluation of locally based health and social service and recreation programmes (e.g. local gathering places, cultural events, community recreation centres).

Respect and social inclusion

- » Provide cross-generational activities in schools and communities, e.g. by facilitating events and meetings for all age groups.
- » Encourage older people to become role models for active ageing and to mentor young people.
- » Support older persons' association, e.g. by providing in-kind and financial support and training for members of these organizations.

Civic participation and employment

- » Encourage programmes that provide opportunities for older people to work after retirement
- » Recognize the value of volunteering and expand opportunities to participate in meaningful volunteer activities as people age (e.g. serving on advisory boards, entrepreneurship opportunities).
- » Address the specific needs of older employees in human resources policies and practices, including enforcing occupational safety standards that protect older workers from injury, and use the experience and skills of older workers to train younger and newer employees.

Communication and information

- » Provide older people with opportunities to develop new skills, particularly in areas such as information and communication technology.
- » Reach older people in their daily lives and activities, through direct personal delivery (e.g. visiting volunteers or social service workers), local notice boards, a live 24-hour telephone information service, email, social media, telephone and distribution in key locations: community centres, libraries, stores, doctors' offices and health clinics.
- » Provide access to newspapers, publications computers and the internet in community centres and libraries in age friendly formats, at no or affordable costs.

Community support and health services

- » Provide policies, programmes and services that enable people to remain in their homes as they grow older, such as low-cost models of home care and other community-based services.
- » Educate and empower older people on how to effectively select and use health and community services.
- » Teach people how to care for themselves and each other as they get older to maintain independence and autonomy for the longest period of time possible.
- » Establish national and local directories for available health and community resources for older people, update regularly and disseminate.

Safety promotion

- » Ensure that injury prevention is taken into consideration in strategies and programmes for the health of older persons.
- » Ensure the development and enforcement of appropriate safety-related legislation and regulations, including environmental requirements to enhance safety and prevent injuries.
- » Improve trauma care services for the population, taking into consideration the needs of specific groups such as older people and people with disabilities.

3. Make primary health care age-friendly

This means minimizing the consequences of noncommunicable, chronic diseases through early detection, prevention and quality care, and providing long-term and palliative care for those with advanced disease.

Examples of concrete and feasible actions that can be taken include the following.

Affordable, equitable access to a full range of care and services

- » Ensure affordable equitable access to quality health care for all.
- » Provide a seamless continuum of care that includes health promotion, disease prevention, the appropriate treatment of chronic diseases, the equitable provision of community support and dignified long-term and palliative care through all stages of life.
- » Provide basic primary care for common health problems in old age.

Prevention and effective treatments

- » Develop specialized gerontological services and improve coordination of their activities with primary health care, social care services and other community resources.
- » Make effective screening services available and affordable to women and men as they age.
- » Make effective, cost-efficient treatments that reduce disabilities (such as cataract removal and hip replacements) more accessible to older persons with low incomes.

Medications

- » Increase affordable access to essential safe medicines among older people.
- » Put practices and policies in place to reduce inappropriate prescribing by health professionals and other health advisers.
- » Inform and educate older persons and their caregivers about the wise use of medicines.

Formal health workforce

- » Provide paid caregivers with adequate working conditions and remuneration with special attention to those who are unskilled and have low social and professional status.
- » Educate health workers in enabling models of age-friendly primary health care.
- » Incorporate modules on active ageing in medical and health curricula at all levels.

- » Provide specialist education in gerontology and geriatrics, such as on the prevention of fractures, for medical, health and social service professionals, irrespective of specialty or profession.
- » Provide incentives and training for health and social service professionals to support self-care and counsel healthy lifestyle practices among men and women as they age.
- » Increase the awareness and sensitivity of all health professionals and community workers of the importance of social networks for well-being in old age.
- » Train health promotion workers to identify older people who are at risk for loneliness and social isolation.
- » Encourage health and social care providers to fully include older persons in decision-making related to their own care.
- » Train caregivers to make older persons fully aware of their medical conditions and to provide all the information they need to understand the options that they have. This includes interaction with older patients in a non-discriminatory manner.
- » Encourage the establishing of formal and informal professional networking among health workers providing care for older people to enhance exchange of resources, knowledge, strengthening referral mechanisms and avoid duplication.

Informal caregivers

- » Support informal caregivers through initiatives such as respite care, pension credits, financial subsidies, training, peer support groups and home care nursing services.
- » Recognize that older caregivers may become socially isolated, financially disadvantaged and sick themselves, and attend to their needs.
- » Facilitate comparative research into care systems in different cultures and settings.
- » Provide family members, peer counsellors and other informal caregivers with information and training on how to care for people as they grow older.
- » Support older healers who are knowledgeable about traditional and complementary medicines while also assessing their training needs.
- » Promote provision of community-based care and support of family care, taking into account equal distribution of caring responsibilities between women and men for better reconciliation of working and family life.

Mental health

- » Provide comprehensive mental health services for men and women as they age, ranging from mental health promotion to treatment services for mental illness, rehabilitation and re-integration into the community.
- » Focus on helping to prevent and treat depression in older persons due to loss, disability and social isolation, such as through supporting community empowerment and mutual aid groups, including peer outreach and neighbourhood visiting programmes, facilitating the active participation of older persons in voluntary activities and providing evidence-based interventions in primary health care.

- » Provide continuous quality care for older people with dementia and other neurological and cognitive problems in their homes and in residential facilities through joint involvement of health care services and the caregivers of older persons.
- » Raise awareness of the community on mental health problems at old age and the available treatments
- » Assess for substance use problems among older people and refer or treat accordingly and do not assume that these problems do not exist among this age group.

Older persons with disabilities

- » Ensure that the agendas of national policy and programme coordination agencies dealing with disabilities include attention to issues concerning older persons with disabilities and are based on international human rights frameworks such as the Convention on the Rights of Persons with Disabilities.
- » Provide physical and mental rehabilitation services for older persons with disabilities.
- » Develop community-based programmes to provide education on causes of disabilities and information on how to prevent or manage them throughout the life-course.
- » Encourage and facilitate the establishment of self-help organizations of older persons with disabilities and their caregivers.
- » Enact policies and programmes that improve quality of life of people with disabilities and chronic illnesses.
- » Increase affordable access to effective assistive devices such as prostheses, sticks, walking frames and wheelchairs to support independence.

Long-term care

Stimulate collaboration between the public and private sectors and involve all levels of government, civil society and the not-for-profit sector.

- » Ensure high quality standards and stimulating environments in residential care facilities for men and women.
- » Provide training opportunities for multidisciplinary teams providing services at the long term care facilities
- » Establish legal frameworks to monitor human rights violations in long-term care facilities.

Palliative care

- » Develop national data sets for palliative care.
- » Invest in high standards palliative care services, including pain and symptom management, communication skills and coordination of care.
- » Promote collaboration in comparing best practices in

various countries.

- » Include prevention, rehabilitation and care of the terminally ill through multidisciplinary teams
- » Assist older persons and terminally ill persons to enter the final stages of life with dignity and with minimal discomfort and pain through palliative and hospice care programmes.

Elder maltreatment

- » Encourage further research into the causes, nature, extent, seriousness and consequences of all forms of maltreatment against older women and men and widely disseminate findings of research and studies.
- » Screen, recognize and document elder abuse and maltreatment and encourage the prosecution of offenders.
- » Train law enforcement officers, health and social service providers, spiritual leaders, advocacy organizations, informal caregivers and groups of older persons to recognize and deal with elder abuse.
- » Increase awareness through public information and awareness campaigns. Involve the media and young people, as well as older people in these efforts.
- » Provide a helpline, legal, psychological and educational support and emergency shelters for victims.

Emergency situations

- » Take concrete measures to protect and assist older persons in emergency situations, including through the provision of mental health and psychosocial support and rehabilitation services for those who are disabled.
- » Train relief agency personnel on the specific health and basic needs of older persons and on how to address them.
- » Raise awareness and protect older persons from abuse in emergency situations.
- » Empower older people to be a source of support to others during emergencies
- » Ensure that the needs of older persons are taken into consideration in the dissemination of information and provision of supplies and services during emergencies and that age friendly approach is considered in all humanitarian settings

Health care financing

- » Ensure that all providers, public and private, operate appropriately and attend to older persons' specific needs cost effectively and efficiently.
- » Introduce prepayment and risk-pooling mechanisms to assure a standard of living adequate for health and well-being, including medical care and social services.
- » Promote universal coverage for health care services for all ages.