



**WHO REGIONAL OFFICE FOR EUROPE
HEALTHY CITIES AND URBAN GOVERNANCE PROGRAMME**

HEALTHY AGEING SUB-NETWORK

SECOND MEETING, VIENNA 12-13 DECEMBER 2005

MEETING REPORT

Attendance:

Anna Ritsatakis (Athens), Dorothy Engmann, Angela Flood (Brighton & Hove), Ivana Draholova (Brno), Ivan Erzen (Celje), Fatih Yilmaz, Halit Halac, (Eskiskhir Tepebasi), Maria Miklosy Bertalanfy (Gyor), Jacqueline Trinon, Christelle Pirard, Gabrielle Houbiers (Liege), Barbara Douglas, Steve Whitley (Newcastle) Ankica Perhat, Tajana Mavrinac (Rijeka) Geoff Green (Adviser), Neil Hamlet (Stirling), Lars Andersson, Lena Kanström, Claes Sjöstedt, (Stockholm) Alan Patchett (Sunderland), Antonio Caiazzo (Torino), Gianna Zamaro (Udine), Ursula Huebel, Hannes Smidel, Erika Balaszti, Elfriede Urbas, Marianne Klicka, Christiane Feurstein, Heidrun Feigelfeld (Vienna).

SESSION 1: Welcome

Marianne Klicka, head of the Vienna City Council Committee for Health and Social Affairs, welcomed sub-network cities to Vienna. Ms Klicka said that the topic, Healthy Ageing, is very important. The Viennese population is becoming much older. Life expectancy is about 84 years for women, and 79 for men. All persons celebrating their 100 year birthday are visited by a politician. Ms Klicka told us that there are many today. She was glad that life for many older people is so good that they have the possibility to dance and live well. However, she said that leisure programs for older people must expand. She ended with the comments that there were a lot of interesting items on the agenda for this Healthy Ageing sub-network meeting. She wished us a good meeting and hoped we could expand the healthy ageing theme.

Greetings from the WHO Regional Adviser

Geoff Green conveyed greetings from Dr. Agis Tsouros, WHO Regional Adviser, Healthy Cities and Urban Governance, who could not be present at the meeting.

Dr. Tsouros had indicated that the Regional Director attached great importance to the work of the Healthy Ageing Sub-Network because cities had many responsibilities for programmes and policies in response to an ageing European population.

Session 1a. Demographic Profiles

Geoff Green chaired this session and introduced the work undertaken by Gianna Zamara on the population profiles of network cities. This work related to **Objective 1** (Raising Awareness) within the Overall Strategy Goals of the sub-network. He was glad that nearly all sub-network cities had responded to her request for city population data in the period since the Bursa Business Meeting in September 2005. (This core data was part of a larger Template of indicators discussed at the previous sub-network meeting in Stockholm in July 2005). This high response rate had allowed Gianna to compare the city population profiles.

Gianna presented the results and compared different cities. *Presentation is available at user protected website Presentazion Vienna 12.* There are many similarities. Most cities had a growing proportion of elderly people. Conventional population profiles, distinguished by age bands and sex, therefore took the form of a 'mushroom' rather than a 'pyramid' which had characterised rapidly developing cities in the past. However, cities could be clustered into four groups, reflecting different proportions of young people and older people in the population as a whole. The four groups were: (a) Italian cities, (b) cities of central Europe, (c) some English cities and (d) Sunderland and Stockholm. Each cluster of cities had a similar combination of young person and older person 'dependency ratio' with the population of working age. Jerusalem was exceptional in having a population profile in the form of a pyramid, reflecting the exceptionally high proportion of children. The different demography of each cluster should feed into different development strategies and we have to concentrate on a series of indicators to back up the work.

Discussion

Initial discussion focused on the definition and value of dependency ratios. Anna R saw a problem in the international definition of dependency ratio which only compared children plus people of retirement age with the working age population. Young people still in higher education were of working age but not working, and sick people were also not working. Geoff mentioned that in the UK 20 years ago there were 1 million people claiming payments from the state because they were incapacitated. In 2005 there are 2.7 million people of working age claiming state incapacity payment, of which a third had poor mental health. These incapacity claimants accounted in part for the relatively low level of official unemployment in the UK revealed in Gianna's presentation.

Some questioned therefore whether dependency is a good word to use? Is it financial dependency? In that case this is a better term. But if you have a good pension you are not dependent: you are a consumer contributing to the economy. Also, as discussed at the previous sub-network meeting in Stockholm, older people may make a voluntary contribution to city life. Childcare of grandchildren

my also help children contribute more efficiently to the formal economy. On the issue of students and ill people of working age, there is sometimes a political imperative to present a low official unemployment rate.

The discussion also focused on immigration. It is difficult forecast the impact of immigration on city demographics. Ursula Huebel, gave the example of Vienna, where the population projections given to the Stockholm sub-network meeting, have already been revised. Immigration is often a big political issue. One the one hand it can be argued that immigration can help 'rejuvenate' a city economy, as claimed by Vienna. On the other hand, if immigrants do not engage with city life, they can easily become unemployed and increase the city's dependency ratio.

Discussion focused on how to use the data. It can address different needs and be used to for policy development. We have to think ahead. Strategically, the mushroom shaped demography of most sub-network cities shows that there are already more older than younger people, and this trend will continue. Is the city government aware of this? This is an important input for the urban planning.

Finally, there was a discussion how to present all these data. Most city representatives suggested that the policy community could more easily understand the pyramids/mushrooms and the spider webs could be used for scientific presentations. However it was also important to put this data in context. It is important to get away from the myth that old people are a burden as they in fact are a resource. Younger must live a healthy life to be healthy when growing old.

Action. Agreed that Gianna and Geoff prepare a fuller paper on dependency ratios for the Brighton sub-net meeting in July 2006.

1b. Presentations on work with the Older Persons City Profiles

Presentation is available at user protected website Profile-HA-Gyor

Gyor : Maria Miklosy Bertalanfy

Maria presented progress with the older person's profile for Gyor. They have included a lot of people in developing the profile. There are several working groups to respond to the questions in the Template with contributions to different elements of the profile. The Profile will be ready during 2006, but as the process is inclusive of a lot of people, some dissemination of knowledge is already done. Maria raised the question of qualitative data and how to compare different cities. It could be good if we could standardize a qualitative questionnaire e.g. do you feel safe at home in the evening.

Vienna: Elfride Urbas and Erica Baldaszi

Presentation is available at user protected website Vienna Healthy Ageing profile

Both Elfride and Erica are social scientists and they have been working with the template. In Vienna health is generally better now than 10 years ago. However chronic diseases and multi-morbidity in older persons is growing. Elfride and Erica had found it difficult to complete all indicators and asked for a uniform definition of each. For example "*What is age discrimination?*" They also asked whether cities should collect standard indicators for health, mortality, hospital care etc. As it is in the Template you can choose what you want to report. They strongly recommended that WHO and the network organizing group produce a technical paragraph explaining each of the recommended indicators.

Stockholm: Lena Kanström and Claes Sjöstedt

Presentation is available at user protected website Stockholm?

The data and information used for the profile was to be found in different national, regional and local registers, and surveys. Some of the questions in the Template was difficult to understand or similar to others. However, most of the information was already known by the County council but some were 'eye openers.' Stockholm is going to do a preliminary profile as the County Council is going to carry out a public health questionnaire during 2006 covering 50 000 persons with in the county. The age group for this is 16-84 years of age.

Discussion

First there was discussion about qualitative data following the presentation from Gyor. Some thought this was best developed at a local level in response to local priorities. Others asked if there was standard questionnaire which could assist each sub-network city with its profile and enable comparisons between them? If WHO does not have such a questionnaire, then it could be developed by the sub-network which includes experts and interested persons. Or maybe we could draw on EU databases. Anna outlined four European studies about Healthy Ageing and retirement. These are referenced at the end of the report.

Population forecasting is also an important issue, helping cities predict future labour resources and demand for services. Healthy city project teams were in a good position to supply data to city mayors and ensure that healthy ageing is high on their agenda. How can cities use population forecasts to influence city development and the pattern of investment between different services and programmes? Is forecasting an item for training within the sub-net work?

An important point was that we need a gender perspective. It is important to have gender divided information as men and women often have different needs with implications for help and caring services.

Following the presentation from Vienna, there was a discussion about which ICD data we want to collect. Should we collect for the main ICD codes or investigate some of the sub-divisions in more depth? It would be an idea to have morbidity data to complement mortality data? Such data would reflect the sub-network's life course approach and show that an older population profile does not always mean higher levels of morbidity and disability.

Finally, to summarize, all agreed that the profile is a help in the coming work of sub-network cities. The template is for guidance only. The profile is a tool not a goal. It can be an eye opener. It raises the awareness and can be a guideline for policies. Both morbidity and mortality data are important and middle-aged groups must be included in the analysis to support a life course perspective.

All sub-network cities committed to producing a profile, but what about timelines and delivery? The deadline for delivery set in Stockholm was the end of 2005. Some cities (e.g. Liege) have delivered early; most others are close to completion. Nearly all are committed to deliver by March 2006, though Celje and Eskiskhir Tepebasi indicated that they expect to deliver later. There was general agreement that all cities should try to deliver by March 2006. It was **agreed** to recommend to WHO that a small sub-network group meet then to compare profiles and produce a comparative report for the next meeting in July in Brighton.

The same group should also consider how to overcome the problems and difficulties encountered in completing the profile and how to roll out the experience of profiles to the other cities in the WHO network. An option was to recommend a core set of indicators, closely related to the four objectives.

Session 2a Creating Enabling Environments

This session related to **Objective 3**.

Securing quality of life for the elderly urban planning and urban development- a case study from Vienna. Short summary of the presentation.

Presentation is available at user protected website ALT_SRZ_pre

Christiane Feuerstein and Heidrun Feigelfeld representing the departments of urban planning and health and social management.

This work started in September 2005 and is about to finish. The aim of the project was “Stat entwicklungs plan STEP05” – “City development plan” and the task was to undertake research to assess the situation in Vienna. The project was commissioned by two different departments of the municipality of Vienna, the department of urban planning and the steering unit for health and social management.

A literature formed the basis of the analysis because there was no time to conduct interviews. As municipal planners, the two authors interpreted the literature in a practical way and made it accessible to the policy community. Ageing is a cross-cutting theme, but the authors found a lack of co-ordination between municipal departments and it was difficult to bring their representatives together. However, they considered their report as a first step in towards greater cooperation and the following suggestions were proposed to strengthen this development.

Suggestions regarding accessibility included:

- *Encouraging pedestrian traffic, by slowing down the traffic in housing areas and forcing short walking distances to the necessary facilities.*
- *Encouraging the use of public transport system, through a more user friendly environment (better orientation, easy to handle schedules and ticket selling) and*
- *Encouraging alternative transport systems and transport organisation, like car sharing, taxi services, and so on*

Suggestions regarding green and free space included:

New approaches to cemeteries. At the moment cemeteries are mainly used by elderly people, visiting the deceased, gardening, and so on. New design approaches could help to make these a place of meditation, attractive not only for other age groups but also for elderly people, who live far away from where their relatives are interred. Also the increasing number of people with a different religious background makes changes necessary.

Mixed use. Competition for space is especially a problem of areas with a high density – in people and buildings. In these areas, it is important that the design allows various activities for all ages, instead of giving segments of place to each age group. This design approach should be assisted by organized activities to stimulate the exchange between the generations and nations.

Sufficient and clean public sanitary equipments help not only elderly, but also children to enjoy outdoor activities.

You have to invest in capacity to get the old empowered and participate and be involved in the process of city development. The young old are more interested in being involved.

Session 2b

Update on research proposal linking healthy urban planning, social capital and mental health of older people.

Geoff Green

The aim of the WHO Healthy Cities Network in phase IV is to link healthy ageing to healthy urban planning (HUP). The context is the WHO Healthy Ageing Strategy which describes the decline of functional physical capacity with age but accepts that for most people mental capacity can be maintained into old age. The question is how cities can maintain the mental capacity amongst the elderly. A research proposal had been developed Geoff and Hugh Barton who advises the HUP sub-network. The research proposal was to investigate the extent to which HUP in a neighbourhood improves levels of older people's social capital (e.g. networks, trust in neighbours) and then the degree to which improved social capital leads to better mental health.

The plan was to investigate the position in selected neighbourhoods in 10 sub-network cities where HUP interventions had taken place. However, the British

research councils had turned down the proposal. It was **agreed** that the proposers should seek alternative funding partners. Meanwhile it was **recommended** that lead cities for the HUP and HA sub-networks should meet to plan for closer collaboration.

Session 3a: Workplanning for the sub-network

Reaching 50

Presentation is available at user protected website Reaching 50

Anna Ritsatakis

Anna's presentation gave an excellent input to what the sub-network could achieve. Some of the points made were: that the sub-network is a nursery for innovation, can act as a resource bank, can test and evaluate projects and plans, see the early wins, identify added value for joint action. We always have to remember the aims and objectives. We have to be practical, effective and produce reproducible products, at least one product for each objective. We also must consider what's happening in all cities, not just in the HA sub-network. The big challenge is to change the perceptions and dispel myths.

Session 3b, Working in groups

The sub-network split into working groups of 3 or 4. Participants were reminded that the function of the sub-net is:

- Check the assets
- Nursery for innovations
- Value-added of joint actions
- Testing & evaluation
- Resource bank
- Early wins

The groups were asked to discuss and present suggestions on what the sub-net should produce by June 2008, the end of Phase IV. Examples given were:

- Healthy Ageing handbook to raise awareness?
- Several case studies (evaluated)?
- Some surveys - what topics?
- Making the template streamlined - on core and optional items - for the wider Network of Cities and National Networks.
- For the sub network and at the local level

What results are realistic?

- At the local level,
- in the sub network
- for the healthy cities network
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Remember the 4 objectives

- One practical item on each goal: e.g.
- 1 from the profile to a common European experience
- 2 Is there is a use for councils of older people

- 3 How to connect Healthy Urban Planning with Healthy Ageing
- 4 Should there be clinics aimed at people with multiple diseases
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Training/briefing on Healthy Ageing

- What topics?
- When?
- Where?
- Together with whom?

The groups reported:

Objective 1: Raising Awareness

- *need a list of core indicators with agreed definitions: standardise core data to enable comparison*
- *prioritise indicators – usefulness and application of data in local situation – how effective are they?*
- *sub- sub-groups could develop ways of addressing broader indicators*
- *-complete as much of template as possible by June – but this is an ongoing process*
- *profiles available at WHO web site from 2006*
- *march of the generations*
- *basic generic draft of handbook available to all co-ordinators – to be adapted locally*
- *handbook (Anna + Stockholm) for politicians, decision makers, media – framework draft by February 2006, with a final draft by the Brighton meeting in July 2006*
- *destroy the myths – network brochure 5 myths, 5 programs (obj 2,3,4), 5 life examples : person, picture story- 10 pages*

Objective 2: Empowering older people

- *Different starting points for different cities*
- *review of direct involvement in decision making (councils; representation in city council, NGOs etc)*
- *labour market participation – review of retirement age linked to profile*
- *a need and sharing of mechanisms by which older people exerted influence*
- *involvement direct & indirect; definitions*
- *review/map organigram of city power structures*
- *review effectiveness of older peoples representation*

Objective 3: Creating enabling environments

- *speak to Urban Planning group and HIA group – focus on one or more issues- report back*
- *communicate useful examples already existing connections between themes e.g. research to feed in to Geoff's research proposal*
- *where mental health strategy exists, relate it to HUP*
- *agree training possibly in Brighton*

Objective 4: Promoting access to services and support

- gather information from our cities and make it available to the network e.g. review of age discrimination in health services and description of intermediate care services (observe there can be positive age discrimination)
- government initiatives to more independent living
- look at age discrimination and circulate among the group
- important of identifying support older peoples need
- important of support for carers
- need to work with/alongside central and local government initiatives
- connection between 2+4- need to involve OP in DM process?

All generations March 2006 – Proposal of joint event of the Healthy Ageing sub-network. *Presentation is available at user protected website*

Ivana Draholova

Ivana encouraged all sub-network cities to hold a similar event on the same day.

Session 4a. Presentation of the Old people's home

After lunch we had an interesting presentation about the older people's home where the meeting was held. The home is owned by a private organisation. The home consists of flats of one or two rooms, a bathroom and a small kitchen. They have a dining room for breakfast and dinner and the evening food is served at the room. If an old person needs hospital care, some of that care can be given at the home. There was one ward for medical care and one for rehabilitation. Because residents wish to meet people from outside and be part of the community, the home hosts meeting from many organizations (like the HA sub-network).

Session 4b: Healthy Ageing Website

Fatih Yilmaz

Fatih presented an out line for a Healthy Ageing sub-network web site. Decisions to made are:

- § *Who is going to host the web site – Fatih said that Eskisehir can do it.*
- § *Who is going to be the editor*
- § *What is going to be published*

Fatih had some suggestions of content of the website. This were as follows:

- § *Very Rich and Useful Content*
- § *A word from*
- § *WHO Strategies/Objectives*
- § *Facts and Graphics*
- § *Profiles*
- § *Innovative Project From Cities*
- § *Forum*

- § *Photos From Cities*
- § *Photo Competition*
- § *News From Cities*
- § *A Word From Mayors*
- § *Meetings of Subnetwork*
- § *Interviews with famous and active old people*

The discussion that followed was how to manage this. It was agreed that an editor and a webmaster were required to update the web site. A system was needed to allocate information either to the WHO Healthy Cities web site or the sub-network website. First, WHO should be consulted.

Session 4c: Place and agenda of the next meeting

Next meeting – Brighton and Hove *Presentation is available at user protected website*

Angela reviewed the timing of the next meeting of the sub-group. In July 2006 there is to be a larger event focusing on *Celebrating Age in Brighton & Hove*. The festival, 10-30 July, is highlighting the creativity and potential of older people and exploding the negative stereotypes that so often define them. The conference, taking place in 25-28 July, is looking at what actions need to be taken to ensure that later life is a time of creativity and opportunity.

It was proposed that the next sub-network meeting be held 24-25 of July in Brighton which allows the participants to join the conference starting on the 25th of July. It was suggested that the program for the meeting should focus on participation and access to services but also to Healthy Urban Planning.

Regarding participation there were several items to discuss such as what is necessary and/or already available? Range of different country approaches, WHO to contribute technical expertise by reviewing a range of models of empowerment, do training programmes already exist, which could be “rolled out”. Regarding Access to services, a wider perspective was suggested, not confined just to health services.

In Brighton the meeting need to have more information about the work of the HUP net work as the two networks are very related to each other in deliverables. It was also suggested that we should follow up the meeting in Stockholm about working with media.

5a. Suggestions and Conclusions from the meeting

This is a flexible sub-network - maintaining the agreed objectives but adapting the program to reflect priorities and innovation. The fact that healthy ageing is good for all in the population has been expressed several times. This has been a meeting for sharing, discussing, and a good social program to improve the informal discussions.

5. Follow-up and deliverables

<i>Objective</i>	<i>Tasks</i>	<i>Responsible</i>	<i>Timeline & Comments</i>
1 Profiles	<ul style="list-style-type: none"> • Complete older peoples profiles • Compare city profiles • Identify core/key indicators • Define each indicator • Identify common European qualitative indicators • Revise 'dependency ratio,' report 	<ul style="list-style-type: none"> • Sub-network cities • Lead city/ advisers • Lead city/ advisers/ WHO • WHO • WHO • GZ & GG 	<ul style="list-style-type: none"> • Draft 03/06. Final 06/06 • Draft 05/06 • For roll-out • ? • ? • Draft 05/06 Final 07/06
1 handbook	<ul style="list-style-type: none"> • Handbook 'Dispelling the myths about older people.' (ref (i) below) 	<ul style="list-style-type: none"> • AR. Lead city. advisers 	<ul style="list-style-type: none"> • Draft 04/06 Final 07/06
2 Empowerment	<ul style="list-style-type: none"> • Review of power structure of cities and role of older people (ref ii) below • Review of Age discrimination (ref (iii) below) • EU Labour market participation rates 	<ul style="list-style-type: none"> • WHO/ advisers. GG? • BD Newcastle • GZ/GG 	<ul style="list-style-type: none"> • 03/06 City organigrams • Draft 05/06 • 02/06 • 02/06
3 Enabling Environments	<ul style="list-style-type: none"> • Resolve mechanism for closer work with HUP sub-net • Seek alternative funding for HA/HUP action-research project 	<ul style="list-style-type: none"> • Lead city • GG 	<ul style="list-style-type: none"> • 02/06
4 Access	<ul style="list-style-type: none"> • Develop perspective 	<ul style="list-style-type: none"> • H O'B (Belfast) 	<ul style="list-style-type: none"> • ?
Organization	<ul style="list-style-type: none"> • Develop and organize the 	<ul style="list-style-type: none"> • Lead city + advisers 	<ul style="list-style-type: none"> • 02/06

	workplan of the sub-network		
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(i) All agreed that a handbook would be a good tool to dispel myths about getting old and that old people are a burden for the community. Anna has already a lot of material for this book and she agreed to be the lead person for this handbook. It was suggested that a draft version should be sent to all cities in the network during spring. All cities should give examples and pictures of old people. The final version would be discussed in Brighton. It is proposed the handbook is in electronic form so it is easy for the different cities to use it and make it local by changing e.g. pictures or myths.

(ii) It was suggested that a review of the power structure of old peoples influence and involvement in the cities should be carried out. However, more input is required on what is meant by power structure and involvement (direct by old people themselves or indirect by different organisations). We also recognized that this is an ambitious work if all sub-network cities are to do it.

(iii) It was suggested that we need more input and experiences of age discrimination. In Newcastle there has been a work done around age discrimination. Barbara agreed to circulate a paper about this work. It also was suggested that age discrimination is going to be on the agenda at the Brighton meeting. (Some pointed out the discrimination can be positive – old people having advantage of the system or negative having disadvantage of the system. Do we mean both?)

Finally Lena thanked Anna and Geoff for their input to the meeting and the city of Vienna for there hospitalities and a great thank to Ursula for all her work here in Vienna to make the meeting possible.

References mentioned at the meeting

EUROFAMCARE (services for supporting Family carers of Elderly People in Europe: Characteristics, coverage, usage) 23 countries

SHARE – survey of Health, Ageing and Retirement in Europe www.share-project.org

PROCARE – Providing Integrated Health and Social Care for Older People: Issues problems and solutions www.euro.centre.org/procare/

OASIS – Old Age and Autonomy: The role of service Systems and Intergenerational family solidarity www.dza.de/english/forsung/forsch - oasis.html e, June 2005