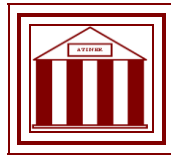


**Athens Institute for Education and Research
ATINER**



**ATINER's Conference Paper Series
SOC2015-1772**

**The Idea of Age-Friendly Cities and
Communities as a Response to the Challenges
of Contemporary Demographic Changes**

**Grzegorz Gawron
Assistant Professor
University of Silesia in Katowice
Poland**

**Paulina Rojek-Adamek
Assistant Professor
Andrzej Frycz Modrzewski Krakow University
Poland**

An Introduction to
ATINER's Conference Paper Series

ATINER started to publish this conference papers series in 2012. It includes only the papers submitted for publication after they were presented at one of the conferences organized by our Institute every year. This paper has been peer reviewed by at least two academic members of ATINER.

Dr. Gregory T. Papanikos
President
Athens Institute for Education and Research

This paper should be cited as follows:

Gawron, G. and Rojek-Adamek, P. (2015). "The Idea of Age-Friendly Cities and Communities as a Response to the Challenges of Contemporary Demographic Changes", Athens: ATINER'S Conference Paper Series, No: SOC2015-1772.

Athens Institute for Education and Research
8 Valaoritou Street, Kolonaki, 10671 Athens, Greece
Tel: + 30 210 3634210 Fax: + 30 210 3634209 Email: info@atiner.gr URL:
www.atiner.gr

URL Conference Papers Series: www.atiner.gr/papers.htm

Printed in Athens, Greece by the Athens Institute for Education and Research. All rights reserved. Reproduction is allowed for non-commercial purposes if the source is fully acknowledged.

ISSN: 2241-2891

5/1/2016

The Idea of Age-Friendly Cities and Communities as a Response to the Challenges of Contemporary Demographic Changes

Grzegorz Gawron
Assistant Professor
University of Silesia in Katowice
Poland

Paulina Rojek-Adamek
Assistant Professor
Andrzej Frycz Modrzewski Krakow University
Poland

Abstract

The aging process is great and unheard of in the past, challenge for governments, economies and societies. This means the need to meet the needs of the growing group of people with specific requirements, with full rights and legitimate aspirations for decent quality of life and be involved in society.

Effective management in this area is primarily a matter of the reform of health insurance, tax and retirement system, or other distribution of funds. Of course, these changes are important, but we should take various measures to create friendly environment for the elderly: social solutions conducive to maintaining an active lifestyle and innovative projects allowing for broad independent.

The answer to this can be the concept of Age-friendly Cities and Communities (AFC) which was conceived in 2005 at the XVIII IAGG World Congress of Gerontology and Geriatrics in Rio de Janeiro.

It immediately attracted enthusiastic interest, and in 2010 has transformed into The WHO Global Network of Age-friendly Cities and Communities to foster the exchange of experience and mutual learning between cities and communities worldwide. The Network has identified eight domains of city life that might influence the health and quality of life of older people: outdoor spaces and buildings; transportation; housing; social participation; respect and social inclusion; civic participation and employment; communication and information; and community support and health services. Members of the network must implement a variety of activities in this area. Currently membership spans across 26 countries with a total of 209 cities and communities.

The proposed speech will be a presentation of the idea of AFC as a response to the needs of life in aging societies. The theoretical analysis will be supplemented with the presentation of examples of implementation of the AFC in selected European cities to show the variety of actions.

Keywords: social inclusion, aging society, mechanisms of urban inclusion.

Introduction

Everyone aspires to live to old age. However, until recent years fewer than half of all people born in the world survive to their 65th birthday. Some hope give us the most recent demographers which reveals that the World recently passed a significant milestone: due to improvements in life-expectancy over the last fifty years, the percentage of deaths occurring in old-age, defined as the number of deaths at age 65 and older per 100 total deaths at all ages, increased 28% age points: from 22% in 1950-55 to 50% in 2005-2010 worldwide (United Nations 2014b: 1).

But that's not all, because we are just before another demographic break. It is truth that for centuries in demographic structure of societies the young children dominated the seniors. However, in the coming years, we expect that the situation will turn around - and seniors (in age of 65 or more) will dominate in number above children (those under the age of five years). All indicators show that aging societies even accelerate. According to the latest projections the number of people aged 65 or older is projected to grow from an estimated 524 million in 2010 to nearly 1.5 billion in 2050, with most of the increase in developing countries (National Institute on Aging, National Institutes of Health, U.S. Department of Health and Human Services 2014: 2).

Although aging is perhaps the most predictable - because we expect and anticipate it for many, at the same time it raises the greatest concern and black scenarios for the future because of its potentially profound economic, social and political implications (Schwab 2012).

Incontestably the world is facing a situation without precedents. Which raises a number of questions: Will population aging be accompanied by a longer period of good health, a sustained sense of well-being, and extended periods of social engagement and productivity, or will it be associated with more illness, disability, and dependency? How will aging affect health care and social costs? Are these futures inevitable, or can we act to establish a physical and social infrastructure that might foster better health and wellbeing in older age? How will population aging play out differently for low-income countries that will age faster than their counterparts have, but before they become industrialized and wealthy? (National Institute on Aging, National Institutes of Health, U.S. Department of Health and Human Services 2014:1).

The Silver World – What Does It Mean?

Demographic Evidence

Statistics show that aging is a global process. Although it has its own individual, local calculates and occurs with different intensity, in the global scale, however, are seen considerable changes in the demographic picture of the population. From the beginning of the 90's XX century, when the global share of older people (aged 60 years or over) was about 9%, till 2013 this proportion grew to 11.7% and according to new predictions will reaching 21.1% by 2050. To show it in numbers we can say that from 841 million

seniors in 2013 we will have more than 2 billion in 2050. But what seems to be the most important - it is projected that in 2047 for the first time in history the global number of old people will exceed the number of children in the world. (United Nations 2013: 14).

As the many other changes, the aging first appeared in developed countries, which first experienced the demographic transition and its consequences. The unique dynamics occurred in the case of Asia and Latin America - have experienced a relatively rapid decline in fertility. But we expect a strong change in these trends (United Nations 2013: 91). It will be the logical outcome of current events. It is also the fact, that in less developed regions, the number of seniors is growing faster than in the more developed regions. Today even two thirds of the world's seniors already live in developing countries, and we can be almost sure that this trend will not change in the future. (United Nations 2013: 14).

In other words, although it is mainly the developed countries have an aging social structure, the future belongs to the less developed countries, where will occur the accumulation of seniors (National Institute on Aging, National Institutes of Health, U.S. Department of Health and Human Services 2014: 4).

It is obvious that demographic changes are directly related to broadly understood changes in social, cultural and economic matters. This was why between 19th and 20th centuries the first region where appeared visible changes in the age structure of the population was Europe. Therefore nowadays Europe is the most aged region in the world where people aged 60 or over cover 23% of its population. The researchers also claim that this situation will not change in the next few years, or even decades. Because until 2050 the share of seniors in Europe will increase to 34% and constantly will be bigger than in others regions of the World (eg. Northern America - 27%; Latin America and the Caribbean - 25%; Asia - 24%; Oceania - 23%) (United Nations 2014a: 1).

This situation forces a change in the current policy priorities on many levels. Seniors issues are becoming more and more important and aging societies are waiting for a new prescription for long, healthy and happy life for their members (United Nations 2013: 91).

"Old" and "Older" - Diversity of Interpretation

Although the literature is rich in a number of different studies and analyzes relating to *old age* and *the aging process*, there is no universal and widely accepted definition of these terms. Most theorists agree that old age is a static concept, and aging (both individuals and communities) is a dynamic phenomenon, which should be considered by taking into account the biological, psychological and social dimensions of human life (Klimczuk 2012: 15). In this approach old age is therefore a set of features, and aging is the process of their formation and dredging (Rembowski 1984: 17). Therefore it can be assumed that old age is the final stage of human life beginning with the achievement of conventionally referred to the *threshold of old age*. Is a dynamic and synergistic relationship of biological and psychological processes, and changes in the social activity of the individual (Szatur-Jaworska 2006: 33-34).

This approach also stresses that old age is the personal experience of the individual, which depends on the experience of the previous phases of their lives. This does not change the fact that, in science and everyday life we are setting the boundaries of symbolic entry into the last period of life. It should be remembered that the old age and aging is a phenomenon occurring in society and their specific structures, because they are not only determined by biological or physiological conditions, but also the social context representing the relative aspect of these processes (Błędowski 2002: 72).

Commonly accepted *threshold of old age* is determined by the legislature retirement age. Imposed by law, different in different countries, raises many objections gerontologists, social politicians, and seniors. Mostly it is because it doesn't coincide with the progression of the aging process, physical fitness and work opportunities in the current occupation of individuals (Katula 2004: 34).

Therefore, taking as a criterion the age of the individual it can be distinguish at least six threshold of old age:

- *biological* (relative to assess the efficiency and viability of the organism);
- *demographic* (calendar, chronological, it is the number of years lived);
- *mental* (psychological, determined by the efficiency of intellectual functions, the senses and the adaptability of the individual);
- *stratification* (determined on the basis of social roles performed - eg. a grandmother or grandfather);
- *economy* (refers to the place in the division of labor);
- *social* (legal, denoted by the term when a person receives the right to social benefits such as pensions) (Klimczuk 2012: 16).

Recognizing cited attempts to categorize and delimitation of old age in both static and dynamic it seems important to look at the collective consequences of this process, because they are very heterogeneous. On the one side, ageing as an extension of human life has to be seen as our greatest triumph, on the other - we are not prepare yet for all possible changes so it is challenge for ass. But there is also the third side-ageing is a great opportunity for modern societies - with all kinds of capitals which are in senior hands and minds (WHO 2002: 6).

Aging-Challenges and Opportunities

Ageing starts to be one of the most popular subject for discussion on social, political and academic level. We start to survey occurring changes; tend to predict their further development and consequences (Bazalgette 2011: 9). Longer life is connected with an increased probability of many diseases characteristic of old age (eg. disability, poverty, social exclusion). But on the positive side, older persons can increasingly live independently and in most countries, they support themselves financially with their own labor earnings, income from their assets, and through public transfers. In most countries with pertinent data, older persons make net financial contributions to younger family members until rather advanced ages (United Nations 2013: 14).

The ageing process has strong impact on society on national, regional and local level. When talking about everyday functioning, one of the most important matter is connected with welfare systems and public finances. For example the EU Member States spend, on average, more than a quarter of their GDP on social protection, most of it for the benefit of older people in the form of pensions, health and long-term care. But we have to remember that the last economic crisis has left most of EU Members with big problems. At the same time the post-war baby-boom were started their retiring. So, now we have to solve the problem of how to maintain previous level of public care in such complicated situation (European Commission 2012: 4).

Meeting these challenges will require on political level a new view on social policy. Many countries must even start working almost from the beginning because they haven't got any elements of ageing policy so far (WHO 2002: 33).

We have to learn how to prepare seniors for their last period of life. How to encourage them to be active as individuals but also as members of society. It is our obligation to prepare and show the variety of ways to maintain their autonomy and independence, the possibilities of being active and interested in social participation. Achieving this will require changes in the perception of the role of seniors in society. We will have to change the whole system to adapt it to the possibility of an aging population. The aim is to maintain a social activity of senior citizens and their participation in everyday activities. This will require the development of methods and simple tools for keeping older people connected with a society. It will require a real commitment to life-long learning, new thinking about the nature of work and volunteering, and pensions and financial services that better match present and future realities (Greengross 2008: 2-3).

But for our luck, ageing is perceived by many not as a threat but as one of our greatest achievements. Seniors are not only seen as a problematic part of society who cause only problems for younger members. We begin to discover that people in age of 65 and more, still can be active and full of vital energy, and what can be the most importance for the future - they have great life experience which cannot be overestimated then thinking about possible source of our social development (European Commission 2012: 4).

We also should consider that ageing is not only political or social issue, but also or most of all, each person's experience with individual perception of their situation. It consists of many elements, such as: health, previous lifestyle, occupational status, financial situation, relations with the social environment. Of course their individual situation and position in society is the consequence of their background - whole previous life. That is why we need to develop actions and methods by which we will be able to avoid or reduce the negative consequences of aging (Bazalgette 2011: 10). One of the possible ways to achieve this is to shape the surrounding reality (in the physical dimension and socially) in accordance with the idea of Age-Friendly Cities (AFE-INNOVNET 2014: 2).

Towards an Age-Friendly World

Developing the Idea of Age-Friendly Cities and Communities

The intensification of the debate on aging launched internationally in the 90s of the twentieth century. Many organizations began when their diagnoses and surveys. The theme of age-friendly communities was launched in global debate by the World Health Organization (WHO). It is also arise from considerations over another nation - "active aging" - developed during the Year of Older People in 1999 and elaborated by the European Union and the WHO (European Union 1999: 5).

The idea of "active ageing" has started to be the most popular conception as a response to the needs and expectations of aging populations. It helps to maintain participation in social, economic, cultural, spiritual and civic affairs, not just the ability to be physically active or to participate in the labor market. This is why, it is often seen as a link between older and younger members of the community because it gives you a chance to achieve mutual benefits.

The important issue here is also to prepare the environment for seniors. As we know the physical environment has a strong influence on our social functioning. The cities are a specific type of environments, and if more and more seniors are choosing to live in cities - we have an important issue to ponder. This theme was conceived by the WHO during the opening session of the XVIII IAGG World Congress of Gerontology and Geriatrics in Rio de Janeiro, Brazil. The issue aroused great interest and further works under the aegis of the WHO arose the idea of an "ideal" city relevant to all age groups. This work concluded that: *"It should be normal in an age-friendly city for the natural and built environment to anticipate users with different capacities instead of designing for the mythical "average" (i.e. young) person. An age-friendly city emphasises enablement rather than disablement; it is friendly for all ages and not just "elder friendly" (WHO 2007: 10).*

According to the WHO, the physical and social environments determine our ability to stay healthy, efficient, active, but only when we are old but throughout our lifetime. So that a city, or any local or regional authority, is age-friendly when it gives everyone an equal chance for live in dignity, respect and individual development. It is a place that helps people to spend the rest of life in peace and contentment with being a member of this community (AFE-INNOVNET 2014: 12).

Constructing Age-Friendly Cities and Communities

Taking into account the claims of activists and research, the first and the most importance step in becoming age-friendly is listening and get know that seniors really want and need. Also helpful can be the guide which was published in 2007 by WHO. There have been identified and described 8 domains which usually have the biggest impact on personal and social quality of life in the city, and here are trade as platforms for actions to prepare cities for old people. These domains are: housing, transportation, urban spaces and built environment, social participation, civic participation and employment, respect and social inclusion, access to community support and health services,

and communication and information. Although the issue of seniors is a priority, it should be remembered that the needs of other residents of the city should be equally important. The idea of age-friendly cities can be consider as one of the opportunities for achieving such a balance (Table 1) (AFE-INNOVNET 2014:14).

Table 1. The Examples of Essential Features of Age-Friendly Cities

Domains	Most important features
Housing	<ul style="list-style-type: none"> • Sufficient, affordable housing is available in areas that are safe and close to services and the rest of the community; • Interior spaces and level surfaces allow freedom of movement in all rooms and passageways; • Sufficient and affordable housing for frail and disabled older people, with appropriate services, is provided locally;
Transportation	<ul style="list-style-type: none"> • All city areas and services are accessible by public transport, with good connections and well-marked routes and vehicles; • Specialized transportation is available for disabled people; • Transport stops and stations are conveniently located, accessible, safe, clean, well-lit and well-marked, with adequate seating and shelter; • Roads are well-maintained, with covered drains and good lighting; • Priority parking and drop-off spots for people with special needs are available and respected;
Urban spaces and built environment	<ul style="list-style-type: none"> • Public areas are clean and pleasant; • Pavements are well-maintained, free of obstructions and reserved for pedestrians; • Pedestrian crossings are sufficient in number and safe for people with different levels and types of disability, with nonslip markings, visual and audio cues and adequate crossing times; • Outdoor safety is promoted by good street lighting, police patrols and community education; • Special customer service arrangements are provided, such as separate queues or service counters for older people; • Buildings are well-signed outside and inside, with sufficient seating and toilets, accessible elevators, ramps, railings and stairs, and non-slip floors
Social participation, civic	<ul style="list-style-type: none"> • A wide variety of activities is offered to appeal to a diverse population of older people; • Events are held at times convenient for older people; • Gatherings including older people are held in various local community spots; • There is consistent outreach to include people at risk of social isolation;
Participation and employment	<ul style="list-style-type: none"> • The qualities of older employees are well promoted; • A range of flexible and appropriately paid opportunities for older people to work is promoted; • Workplaces are adapted to meet the needs of disabled people; • Decision-making bodies in public, private and voluntary sectors encourage and facilitate membership of older people;
Respect and social inclusion	<ul style="list-style-type: none"> • Older people are regularly consulted by public, voluntary and commercial services on how to serve them better; • Service staff are courteous and helpful; • Community-wide settings, activities and events attract all generations by accommodating age-specific needs and preferences; • Older people are recognized by the community for their past as well as their present contributions;
Community support and health	<ul style="list-style-type: none"> • Home care services include health and personal care and housekeeping; • Health and social services are conveniently located and accessible by all

services	means of transport; • Clear and accessible information is provided about health and social services for older people; • Economic barriers impeding access to health and community support services are minimized;
Communication and information	• Communication system reaches community residents of all ages; • Regular information and broadcasts of interest to older people are offered; • Printed information has large lettering and the main ideas are shown by clear headings and bold-face type; • Electronic equipment, such as mobile telephones, radios, televisions, and bank and ticket machines, has large buttons and big lettering;

Source: WHO (n.d.).

Formal participation in networks requires accession to the accession process involving simple application procedures (fill in the online form available on the WHO web site and send the letter containing the declaration accepting the undertaking accession to the Net). Next practical step is to carry out a process of continuous evaluation and improvement based on developed guidelines. According to the assumptions and existing practices, the process involves a period of about five years, during which they are carried out in sequence of four stages:

- *planning* (including the diagnosis and evaluation of the city prior to adapt to the needs of senior citizens, develop a detailed plan of action and a range of indicators of adaptation in specific areas);
- *implementation* (involving the progressive realization of the plan developed, and thus taking concrete actions to maximize diagnosed adapt to the needs of the city and the pre-selected level monitoring indicators);
- *evaluation of progress* (which has a detailed evaluation of completed projects and implemented changes serving the identification of successful projects and items requiring further action);
- *and continuous improvement* (assuming undertake further projects in response to the ongoing changes and demands diagnosed).

Building on this work, in 2010 the WHO launched the "Global Network of Age-friendly Cities". By 2014 there were 135 cities and communities participating across 21 countries (Andorra: 1 city; Argentina: 1; Australia: 6; Belgium: 1; Canada: 14; China: 1; Finland: 1; France: 16; Ireland: 3; Israel: 1; India: 1; Japan: 1; Mexico: 1; Portugal: 22; Russian Federation: 22; Slovenia: 9; Spain: 16; Sri Lanka: 1; Switzerland: 1; United Kingdom: 1; and last but not list United States: 15).

Conclusions

Why we should become more Age-Friendly? As in many other issues, also in case of aging the most actions should be initiated and implemented at

regional and local level. It is because their authorities and societies but also activists and businesses are the ones competent for policy areas related to all importance fields of aging. It is truth that their involvement is the most important for maintaining seniors activity, autonomy and independence, so in others words - their participation in the community's life. Moreover, this kind of environments involving and benefit not only older people but all generations. And finally last but not least, working together in different kind of initiatives is the best way of creating civic attitudes which are the most important for social development. (AFE-INNOVNET 2014: 4).

References

- Afe-Innovnet (2014) *What are Age-Friendly Environments? Why should European Cities and Regions become more Age-Friendly?* Retrieved from <http://goo.gl/5zNv3N>.
- Bazalgette L, Holden J, Tew P, Hubble N, Morrison J (2011) *Coming of Age. DEMOS*. Retrieved from <http://goo.gl/fzDB9E>.
- Błędowski P 2002. *Lokalna polityka społeczna wobec ludzi starych [Local social policy towards the elderly]*. Warsaw: Oficyna Wydawnicza SGH.
- European Commission (2012) *Active Ageing Report. Special Eurobarometr 378*. Retrieved from <http://goo.gl/BI01TG>.
- European Union (1999) *Active Ageing: Pivot of Policies for Older People in the New Millennium*. Brussels: European Commission.
- Greengross S (2008) *Living longer. The new context for design. Design Council*. Retrieved from <http://goo.gl/yqsc9M>.
- Katula S (2004) *Pedagogika społeczna wobec problemów człowieka starego [Social pedagogy to the problems of the old man]* In S Katula (Ed) *Pedagogika społeczna: dokonania-aktualności-perspektywy [Social Pedagogy: make-news-perspective]*. Torun, Poland: Wydawnictwo Adam Marszałek.
- Klimczuk, A (2012) *Kapitał Społeczny Ludzi Starych na Przykładzie Mieszkańców Miasta Białystok [Social Capital of Old People on the Example of Białystok Residents]*. Lublin, Poland: Wiedza i Edukacja.
- National Institute on Aging, National Institutes of Health, U.S. Department of Health and Human Services (2014) *Global Health and Aging. World Health Organization*. Retrieved from <http://goo.gl/gGLNlb>.
- Phillipson C (2012) *Developing Age-Friendly Cities: Policy Challenges & Options. Housing Learning & Improvement Network, Viewpoint 37*. Retrieved from <http://goo.gl/gGLNlb>.
- Rembowski J (1984) *Psychologiczne Problemy Starzenia się Człowieka [Psychological Problems of Human Aging]*. Warsaw-Poznan, Poland: PWN.
- Schwab K (2011) Preface. In JR Beard, S Biggs, DE Bloom, LP Fried, P Hogan, A Kalache, SJ Olshansky,(Eds), *Global Population Ageing: Peril or Promise*. Geneva: World Economic Forum. Retrieved from <http://goo.gl/GXR2M>.
- Szatur-Jaworska B (2006) *Społeczne skutki starzenia się ludności. [Social impact of population aging]*. In B Szatur-Jaworska, PM Dziegielewska (Eds) *Podstawy Gerontologii Społecznej [Fundamentals of Social Gerontology]*. Lodz, Poland: ASPRA-JR.
- United Nations (2013) *World Population Aging 2013. Department of Economic and Social Affairs*. Retrieved from <http://goo.gl/yo6fjh>.

- United Nations (2014a) Population ageing and sustainable development. *Department of Economic and Social Affairs* No 2014/4. Retrieved from <http://goo.gl/VVAqlp>.
- United Nations (2014b) Living to old age: A new world norm. *Department of Economic and Social Affairs*. No 2014/5. Retrieved from <http://goo.gl/13EGPa>.
- World Health Organization (WHO) (2002) *Active Ageing: a Policy Framework*. Retrieved from <http://goo.gl/T9GoLs>.
- World Health Organization (WHO) (2007) *Age-friendly Cities: a Guide*. Retrieve from <http://goo.gl/VUIbgP>.
- World Health Organization (WHO) (n.d.) *Checklist of Essential Features of Age-friendly Cities*. Retrieved from <http://goo.gl/sOUod>.