

Ageing and Development

News and analysis of issues affecting the lives of older people

Issue 9 October 2001



A grandmother with grandchildren she is trying to support, who have been orphaned by HIV/AIDS.

Governments to act on HIV/AIDS

Governments across the world have committed themselves to tackling the HIV/AIDS crisis, including reviewing its impact on older people.

The Declaration of Commitment on HIV/AIDS was made by 189 government representatives attending the United Nations General Assembly Special Session on HIV/AIDS in New York in June 2001.

The unprecedented meeting was convened in response to the global emergency caused by HIV/AIDS. The declaration of commitment covers areas including leadership, prevention, care, support and treatment, and human rights.

In response to extensive lobbying, the declaration specifically mentions older people, in the context of the social and economic impact of HIV/AIDS. Governments have agreed to 'review the social and economic impact of HIV/AIDS at all levels of society, especially on

women and the elderly, particularly in their role as caregivers, and in families affected by HIV/AIDS, and address their special needs'.

A side event focusing on the need to include older people in AIDS-related research and policy development, organised by HelpAge International, was attended by over 80 delegates from UN agencies, NGOs and governments. An immediate result of the event was a reference to older people in an article about HIV/AIDS in the *New York Times*, picking up the fact that older people are themselves at risk of HIV. A paragraph read:

'People over 50 are not considered sexual beings,' said Godfred Paul, a training adviser from HelpAge International, citing a town in Thailand where 394 people out of 4,000 with HIV, the virus that causes AIDS, are over 60. Mr Paul recalled an education session for older people in India where the group addressed asked for condoms. Confused

but agreeable, the AIDS worker brought a basket the next day, and they immediately disappeared.'

Increased awareness of the impact of HIV/AIDS on older people is supporting advocacy in the lead-up to the Second World Assembly on Ageing in Madrid in 2002, at which UN member states will agree a new International Strategy for Action on Ageing (see page 2).

In July 2001, the UK All-Party Parliamentary Group on AIDS published a report on HIV and human rights, containing specific references to older people.

The report recommends that the UK Department for International Development pays greater attention to the impact of AIDS on older people, and gives more emphasis to data collection on AIDS in the over 50s age group.

More information:

UNAIDS Special Session
<http://www.unaids.org/UNGASS.html>

UK All-Party Parliamentary Group on AIDS: <http://www.appg-aids.org.uk>

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HelpAge International

Leading global action on ageing

News round up

Developments that affect older people's quality of life

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Having a say in the UN ageing strategy

Older people in developing countries are having their say in shaping an International Strategy for Action on Ageing, through a series of consultations.

In May, the first-ever meeting of older people's leaders in Latin America and the Caribbean resulted in the Declaration of Lima. The Declaration urges governments to dedicate sufficient resources to guarantee decent living standards for the continent's growing numbers of older poor, and to promote an International Convention on the Rights of Older People.

'Older people suffer discrimination at local and national decision-making levels; their organisations are not supported; we are displaced by political violence and there is no compliance with national laws and international agreements to protect our rights', they said.

The meeting of 100 older people from nine countries was the first of a series of consultations supported by HelpAge International, with funding from the UK Department for International Development, to gather older people's input into the International Strategy for Action on Ageing. The strategy will be adopted at the Second World Assembly on Ageing in Madrid in April 2002, replacing the International Plan of Action on Ageing which was adopted in Vienna in 1982.

Proposals from the meeting, organised jointly with Tiempos (a regional network of older people's organisations) and a coalition of

Peruvian NGOs, will be put to a heads of government meeting in Santa Cruz, Bolivia in November.

In July, a consultation with disadvantaged older people in Indonesia revealed the harsh realities that older people face. One 80-year-old said she had to beg in order to eat: 'A good life is when I can find food.' Views from the consultation will be used for advocacy with the government.

Further older people's consultations are planned in Africa, Asia, Latin America, the Caribbean and Central and Eastern Europe. Older people have also been invited to take part in a civil society consultation in Chiang Mai, Thailand, in November, organised by the United Nations Programme on Ageing, which is responsible for drafting the new strategy.

More information:
Second World Assembly on Ageing
8-12 April 2002. Madrid, Spain
Alexander Sidorenko,
UN Programme on Ageing
Email: sidorenko@un.org
<http://www.un.org/esa/socdev/ageing>

Research Forum
1-4 April 2002. Valencia, Spain
Email: Valencia@finders.edu.au
<http://www.valenciaforum.com>

NGO Forum
5-10 April 2002. Madrid, Spain
Spanish organising committee
[http://www.madrid2002-
envejecimiento.org](http://www.madrid2002-
envejecimiento.org)



Women in Indonesia speak up about the harsh realities of their lives.

Andrew Humphreys/HelpAge International

Policy update

National policies on ageing and other supportive measures are taking shape in several countries.

In Africa, the Mauritius government approved a national policy on the elderly in April 2001, becoming the first African government to do so. In October, a national policy on ageing is due to be ratified by the Tanzanian government.

National policies for Uganda and South Africa have been drafted, and a consultation process leading to the development of a national policy has begun in Kenya.

Bolivia's national plan on ageing (A&D 8) was launched in May.

And after three years of lobbying, the government has officially reinstated the 'bolivida' yearly payment for people over 65, which was abolished when the government first came to power.

The government of Grenada has established a focal point on ageing in its Ministry of Social Services.

In Pakistan, a senior citizens' task force has been approved by the government as part of a package of support for older people.

Comment

Growing need for home care

Concern for changing age structures is increasingly reflected in the policies and programmes under consideration in developing countries. In response, a few, such

as India, Jamaica and Mauritius, have produced national policies on ageing; others are reviewing key areas of concern, including healthcare and social security.

A priority area for action is that of providing care at home, where overwhelmingly older people choose to remain as long as possible.

The UN's new draft Strategy for Action on Ageing, which is now being circulated for government comment, notes the growing importance of community care and 'ageing in place' as policy objectives over the past two decades.

Home care should not be seen as a cheap option, since the

burden on families and communities could become unsustainable without sufficient public support. Informal care always implies formal support systems to sustain it.

Mark Gorman
Director of Development
HelpAge International

Letters

Older people and sex

The University for Older People is co-sponsored by the University of Havana, the Cuban Teachers' Association and the Cuban Workers' Centre. We are developing an educational project with retired workers.

I recently came across some myths about sexuality and older people by the author José Buendía, as part of the health education programme that we are developing:

■ Older people do not have the physical ability to enable them to have sexual relations.

■ Sexual activity is a danger to health, especially in old age.

■ Sexual deviants are essentially older people.

With scientific analysis these myths are crushed, but it is very important and would be of great credibility to be able to read a clear denial in your publication.

Dra. Antonia Díaz Núñez
Vice President
University for Older People, Cuba
Email: pedago@teleda.get.tur.cu

Editor's reply:

This letter illustrates the alarmingly common practice of denying people's basic rights on grounds of age.

Most older people continue working well into old age – often undertaking physically demanding agricultural or childcare work – and there is no evidence to suggest they are not capable of sexual relations. For example, research in Ghana showed that 90 per cent of older people worked an average of 3.5 hours a day on their farms.

HelpAge International has no evidence to suggest that sexual activity is a danger to health in old age. On the contrary, available

evidence shows that physical exercise promotes healthy ageing.

Clearly, not all sexual deviants are older people. However, there is increasing evidence to show that sexual abuse of older people is a serious and growing problem. For example, the recent nationwide hearings in South Africa heard significant testimonial evidence from older people of this (see below). HelpAge International's work in refugee camps also shows that sexual abuse of older people is a serious problem, which needs wider recognition.

We welcome letters. Please write to the editor or email: ctill@helpage.org

Widespread abuse in South Africa

Nationwide hearings in South Africa reveal how poverty and violence affect the lives of many older people.

Complaints by older people include physical and psychological abuse, appropriation of pensions and property by other family members, witchcraft-related killings and sexual abuse.

The hearings, commissioned by the Department for Social Development, focused on three main issues: pensions, residential homes and care in the community.

South Africa is unusual in providing universal non-contributory social pensions. But obtaining a pension is often a long and difficult procedure. Although the wide disparity between pensions paid to white and black pensioners was eliminated in 1993, black pensioners still face endless bureaucratic hurdles.

The privatised system of pension delivery comes in for severe criticism. Black pensioners complain of long waits at collection points. There are rarely seats, shelters or adequate toilet facilities. Older people are prey to hawkers, theft or intimidation. There is no priority queuing for those who are frail, or

proxy arrangements for those who cannot come in person.

In some families, pensions can result in abuse of older people by their children or grandchildren. One pensioner in Western Cape said: 'Pensioners are loved and cared for only on pay day – children stay away from school hoping for a share'.

With regard to care, the hearings committee endorses the

government's policy, established in 1995, that older people should be able to remain in the community for as long as possible. However, this has become increasingly difficult, due to the limited capacities of community-based services and the poverty of many pensioners.

At the same time, residential care homes are often poorly run and do not cater adequately for the black community.

Department for Social Development, Mothers and Fathers of the Nation: the forgotten people

Report of the Ministerial Committee on the Abuse Neglect and Ill-Treatment of Older Persons 2 vols, February 2001

More information:

Ministry of Welfare, Private Bag X901, Pretoria 0001 RSA
<http://www.welfare.gov.za>



Queuing for pensions in South Africa – a system that comes in for severe criticism.

News round up

Developments that affect older people's quality of life

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Reports highlight poverty in Ethiopia



Older people in Ethiopia receive little attention from voluntary organisations or government policies.

Jenny Matthews/Network

Two reports on poverty in Ethiopia indicate that older people's poverty must be reduced if international development targets are to be met.

Poverty in Ethiopia, a discussion paper prepared for the UK Department for International Development, points out that the most vulnerable groups are those in poor rural communities in food-deficit regions. In urban areas, high unemployment is the main issue. Neither government nor NGOs provides adequate social protection or services.

The report suggests more 'intelligent' ways of identifying the poor would include not only urban/rural distinctions, but also social status criteria for different groups in the community, by age and gender, including older women and men. It considers the international development targets for Ethiopia as 'probably unrealistic'.

Older persons and poverty in Ethiopia is a review of the limited research done so far on older people in Ethiopia, commissioned

by HelpAge International. It finds that older people are worse off than younger generations in terms of nutritional status, ownership of assets and income. Older women are particularly disadvantaged after a lifetime of gender inequalities.

Older people are six times more likely to live in rural areas, where poverty is more widespread. Of a total population of 63 million, 45.5 per cent live below the poverty line. An estimated 4.2 million are aged over 55.

Only 3 per cent of the population over retirement age (55) receive a pension. The majority continue to work until they are physically unable to do so. But older people's reduced physical ability to work – particularly in day-labour or agricultural activities – and institutional barriers in access to credit, restocking schemes, and agricultural inputs limit opportunities to improve their circumstances.

There is little provision for older people either by voluntary organisations such as churches and mosques, or by international development NGOs. They are also ignored in most government policies and in international poverty reduction strategies.

Most older people rely on their families for assistance. Family ties are still strong and those without children are considered to be worst off, but even those with family support are vulnerable in times of hardship or in an emergency situation when this support breaks down. On the other hand, older people contribute to their families, especially through childcare, and caring for those with HIV/AIDS.

Call for more home care in Asia

Societies and governments must prepare now for a dramatic change in population structure, says a new report on home care programmes for older people in Asia.

The older population is growing faster in Asia than in any other part of the world. Within 30 years, one-fifth of the population will be aged 60-plus.

Care for ageing relatives has mostly been left to families. But this is becoming tougher as younger family members move away to find work, and women – who are the traditional family carers – join the labour force. Institutions that provide long-term care are rare and unpopular in Asia. When asked, older people choose to stay in their homes if their quality of life can be maintained.

The study, the first of its kind, surveyed home care programmes for older people in 15 Asian countries, mostly managed by NGOs. What Asian families need are 'safety nets' to help family members care for older relatives who grow more frail and need more medical, social and personal attention, says the report.

A workshop on home care for older people in South Korea in September, supported by ASEAN – the Association of South-east Nations – and the Korean government reflects growing government interest. ASEAN

member states are committed to enhancing the capacity of the family and community to care for older and disabled people, under the Healthy ASEAN 2020 agreement and Hanoi Plan of Action (1999-2004).

Ageing In My Own Place
Susan Mende
HelpAge International, 2001

More information:
Susan Mende
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HelpAge International
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Poverty in Ethiopia: discussion paper prepared for DFID: final draft
Philippa Bevan, November 2000

Older persons and poverty in Ethiopia
Colleen Wainwright, March 2001

Myths and misconceptions

In this column we highlight a popular myth about older people and explain what the situation really is.

Have you heard anything about older people that may be a myth?

If so, write to the editor or email: ctill@helpage.org

'Older people are not organised.'

Older people are often perceived as self-opinionated, uncooperative and dependent. But there is ample evidence to show that, given a chance, they are the opposite.

On the outskirts of Maputo, Mozambique, a group of about sixty older women who had been made homeless by floods, many of whom had lost their husbands or brothers, were allocated scarce farmland by the government, and provide practical support to each

other. One very old woman, asked if she was not lonely living by herself, said: 'How can I be alone when all these people are here to support me, and me to help them?'

This pattern of self-help is repeated across the globe. Older people share their skills and knowledge to reduce their vulnerability, and fight collectively for their rights. In the Philippines and Bolivia, for example, older

people's groups have successfully lobbied for changes in national legislation. In Cambodian villages, older people's associations have set up 'rice banks', using the income from sales of rice to support the poorest members.

Across East and Central Europe, shared experiences of isolation, poor access to health and social care, and income insecurity have brought older people together in an increasing number of voluntary associations to provide social services and, increasingly, to influence government policy.

Serbian refugees are 'ignored'

Older refugees from Bosnia and Croatia who are living in collective centres in Serbia are enduring very poor conditions and feel ignored by the authorities.

Interviews with residents and managers of two collective centres in Belgrade and Smederevo, carried out by HelpAge International in 2001, found that very little is done to meet the particular needs of older people.

Problems include unsuitable food, lack of transport, no heating and poor sanitation. 'Often there are no clothes for older people in the packages we receive', said one older woman.

The refugees' most common concern is insecurity. Many want to move out of the collective centres, but have no money or any prospect of finding housing. The process for claiming pensions from Bosnia or Croatia is daunting, but refugees are afraid to return home because they fear hostility towards Serbs.

Some of the refugees care for grandchildren while their parents work or seek work. One of the centres is managed by an older refugee. He has started a garden and others have followed his example.

Many refugees feel there is no solution to their problem and they have nowhere else to go. Many are afraid of illness and lingering death. Desanka Kunic has been living in a collective centre in Belgrade for five years, after fleeing Croatia on a tractor. Her village was destroyed by bombing. 'It is hard to expect anything or have any vision for the future', she says.

Dragan Andelkovic, vice president of the municipal assembly of Smederevo, is concerned that international organisations ignore older people. 'In one centre, out

of 1,000 residents, 400 are older people and 500 are children, but the Danish and British Red Cross organise activities only for children.'

In June 2001, a seminar organised by HelpAge International in Belgrade was attended by older refugees, Serbian pensioners and NGOs. The seminar recommended practical ways to address older refugees' needs in key areas including accommodation, health, economic and social activities, and awareness-raising.

■ A directory of organisations working with and for older people in East and Central Europe has been published by HelpAge International. *Making our voices heard: Older people and decision-making in East and Central Europe* reviews the situation of older people in eight countries – Bosnia-Herzegovina, Croatia, Federal Republic of Yugoslavia (focusing on Serbia), Estonia, Macedonia, Moldova, Romania and Ukraine – and makes recommendations to local and national government,

More information:
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Involving older parents in AIDS home care

Educational programmes on AIDS home care need to take into account the important role played by parents, says a new report from Thailand.

At the same time, the potential contribution that parents can make to implementing existing programmes should be built on, particularly those promoting palliative care or treatment for HIV-related illness. Parents are motivated to improving the well-being of adult children with HIV, and are often the ones to accompany them to a health facility, administer medicines and provide care.

HIV/AIDS has become the number one cause of death in Thailand,

although AIDS-related deaths are not forecast to peak until 2005. Parents, usually the mother, provide care for almost two-thirds of Thai adults who die of HIV/AIDS, and act as primary carers for half.

Involving parents in care and treatment would also help to ease parents' distress by reducing the suffering of their sick children, says the report, part of a four-year study funded by the US National Institute on Aging.

Parental caregiving to adult children with AIDS: a qualitative analysis of circumstances and consequences in Thailand
Chanpen Saengtienchai and John Knodel, July 2001
PSC Research Report 01-481

More information:
Population Studies Center of the University of Michigan,
PO Box 1248, Ann Arbor,
MI 48106-1248, USA
<http://www.psc.isr.umich.edu/pubs>

Briefing

Analysis of current topics in ageing

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Counting older people in

With increasing emphasis on involving civil society in the development process, A&D looks at why and how to include older people.

Global goals of equity, good governance and people-centred development require 'civil society' to be involved in the development and delivery of social, economic and political programmes.

As a response, many national governments and international institutions have set up opportunities for individuals, families, communities and social groups that make up civil society to become involved in the development process. For example, national poverty reduction strategy papers and the Cotonou Agreement (see box) demand civil society engagement.

Older people are disproportionately represented among the poor, and numbers of older people in developing countries are rising rapidly. In Malaysia, for example, of the 5.6 per cent of people living in chronic poverty, 32 per cent are older people. It is essential that older people's poverty is understood, so that actions towards the development goals can meet their needs. This means involving older people in consultation processes.

So how does it work on the ground? How can donors and policy-makers include the voices of older people, which are numerous and not always united? As a global network of civil society organisations based largely in developing countries, HelpAge International has begun to monitor the issues facing older people and their organisations trying to 'engage'.

Ensuring older people's inclusion is a formidable task. Older people are likely to be at the margin of, or excluded from, development and civil society processes. The poverty of many older people is a barrier – making ends meet leaves little time for participation. Older people are also accustomed to exclusion and therefore hesitant or cynical about involvement.



Older people in Ethiopia assert their right to independence, participation, care, self-fulfilment and dignity.

HelpAge International

Many of the factors that make older people poor, such as lack of income, poor health, discrimination, conflict and violence, restrict their access to basic facilities and limit their ability to participate in civil society (see page 12).

Action requires evidence

For any group to be recognised as one that needs to be consulted, it has to be visible. This requires well-researched data. Very little comprehensive research and data-gathering exists on older people, compared with other vulnerable groups. For example, there is evidence of under-counting older people on census data; statistics

compiled by major United Nations and government agencies is not disaggregated by age; and data from UNAIDS on HIV infection rates stops at age 49.

Lack of research and data marginalises older people further. Social protection programmes cannot target older people properly, because the scale and particular needs of older people are not being assessed.

Social protection programmes that do address ageing issues tend to concentrate on the physical vulnerabilities that many older people experience. In this way, they reinforce stereotypes

that stress older people's welfare above their social and economic contributions to society. As a result, older people's diverse and multiple contributions are failing to be recorded by official statistics, communities, individuals, and older people themselves – in particular, the many household responsibilities undertaken by older people, which release other family members to do paid work outside the house, and the income that older people often bring in through small-scale enterprises or trading.

Recognition of older people's contributions is one of the keys to understanding and planning for the intergenerational impact of social, economic and political programmes. The international development targets (see box) are not obviously geared to older people; however, with broad interpretation the links become clear. Older people, for example, are the primary carers of children orphaned by HIV/AIDS, and therefore have a critical role to play in achieving targets relating to primary education.

In Tanzania and Ethiopia, older people's organisations are building up a picture of older people's poverty and its determinants as a contribution to the development of poverty reduction strategy papers. In Tanzania, poverty reduction strategy actions relating to income include older people, but others, such as those relating to children and education, still sideline older people.

Violence and conflict

Older people are not a heterogeneous group, and differing social and economic circumstances can render particular older people either more or less vulnerable.

For example, evidence is accumulating that abuse and violence, often stoked by

economic and social pressures in families and communities, are major issues for large numbers of older people. Recent research in Brazil illustrates this point. Older people in São Paulo who migrated to the city a thousand miles from the north-east of the country 30-40 years ago own their own homes and are heads of households and active members of civil society. But those who migrated more recently to join their families often have a very low status in the household, and are prone to abuse and rarely leave the house. These older people's voices will not be heard without extensive support.

Natural and human disasters impact disproportionately on older people, typically already the most poor and vulnerable in their communities. Older people who were relatively well off before an emergency may be plunged into poverty, because they are less able to recoup what they have lost and less well supported.

Large numbers of older people are often left behind to look after property when communities move out, and again in refugee camps when families return home. Those who are alone or who have mobility problems are most vulnerable, such as those in Serbia (see page 5).

Internally displaced people, particularly older people who make up 10-30 per cent of all internally displaced people, often have no identity papers. This can restrict their access to aid – assuming that they can reach food or health points and withstand the waiting.

Barriers to citizenship

To be recognised as a citizen you need proof of identity. Many older people, especially women, do not have birth certificates or other proof of identity. Lack of identity papers restricts access to health-care, pensions and the political process. For example, in Ghana and Bolivia, proof of age is needed to access 'free' health-care. Older people, particularly widows without papers, also lose out in disputes around inheritance and property.

Even when entitlements exist and older people have papers, they face particular problems associated with poor mobility and isolation. In India, few of those entitled to claim the state pension do so, because of the bureaucratic barriers put in their way.

Ageing Assembly – an opportunity

'It is with satisfaction that we observe that an active movement of older people is emerging over

the region, promoting proposals which address the ageing issues and claiming a presence in local and national decision making spaces', declared Latin American and Caribbean leaders of older people's organisations in Lima in May 2001 (see page 2).

As the older people's movement is becoming more organised, lobby groups are having some success at moving ageing up local policy agendas. For example, research by older people has been incorporated into Tanzania's national poverty reduction strategy paper.

The Second World Assembly on Ageing in Madrid in 2002, at which UN member states will adopt a new International Strategy for Action on Ageing, offers an opportunity to support this movement and ensure that more older people are involved in civil society processes, so they can better benefit from the fruits of development. HelpAge International is organising a series of consultations with older people. Specific recommendations coming out of these include:

- strengthening older people's organisations
- ensuring that civil society processes underway for debt relief and national policy development clearly and unambiguously include older people

■ getting national governments to specify how older people will be included in these consultations – for example, by guaranteeing a number of places for older people's groups or a section of the consultation, which always looks at ageing issues

■ ensuring that reporting and monitoring mechanisms established for the international development targets demonstrably include older people

■ recommending that the civil society processes that have been initiated to respond to the new International Strategy for Action on Ageing is used as the starting point for establishing liaison and monitoring of the implementation of the strategy.

HelpAge International believes that the new strategy should make a strong commitment not only to the removal of formal barriers to participation such as age limits, but also to encouraging positive efforts to reach out to and involve older people.

This requires not only the active engagement of older people's organisations, but also seeking out and hearing those older individuals and groups who are rarely consulted – above all, the oldest, the poorest and women.

International development targets

These were agreed at the 1995 World Summit for Social Development. By 2015, OECD member states aim to:

- halve the proportion of people living in extreme poverty
- provide universal access to primary education
- provide universal access to reproductive health services
- reduce infant and child mortality by two-thirds
- reduce maternal mortality by three quarters
- reverse the loss of environmental resources.

By 2005 they aim to:

- attain gender equity in primary and secondary education

- implement national strategies for sustainable development.

Further information:

World Bank
<http://www.developmentgoals.org/>

Poverty reduction strategies

Poverty reduction strategies are being developed by national governments. They:

- are nationally-owned, three to five year poverty reduction strategies developed in consultation with civil society
- provide the basis for debt relief, coordinated donor intervention and World Bank/IMF concessional lending
- should use the international development targets as benchmarks for poverty reduction indicators

Issues for older people are:

- to be involved in in-country consultations for design implementation and monitoring poverty reduction strategies
- push for age-sensitive poverty indicators
- push for debt relief moneys to have budget lines for older people's needs and services.

More information:

World Bank: <http://www.worldbank.org/poverty/strategies>

Cotonou Agreement

An agreement in June 2000 between the European Union and 77 African, Caribbean and Pacific Countries covering aid, trade and political cooperation. It includes provision for

capacity-building measures to enable civil society to play a part in the implementation of the deal. 15.2 billion Euros are available in the first five years.

More information:

<http://www.oneworld.org/eurostep/webcot1.htm>

Paris 21

An initiative of the UN, OECD, World Bank, IMF and European Commission to develop national statistical capacity to track the international development targets.

More information:

<http://www.paris21.org/>

Resources

New publications, websites, conferences and courses

8

Articles

A round-up of what is being written on ageing issues. For journal details please write to the editor or email: ctill@helpage.org

Health

The grandmothers' disease – the impact of AIDS on Africa's older women

A O Wilson and D J Adamchak, *Age and Ageing* 30:1 (Jan 2001)

Assessing nutritional status and functional ability of older adults in developing countries

D Chilima, *Dev. in Practice* 10:1 (Feb 2000)

An epidemiological profile of suicides in Beijing, China

P S Yip, *Suicide and Life Threat. Behav.* 31:1 (Spring 2001)

International

DATAWATCH – population aging in developing countries

L B Shrestha, *Hum. Affairs* 19:3

Technical meeting on population ageing and living arrangements of older persons: critical issues and policy responses

UN Pop. Newsletter 69 (June 2000)

Welfare

Hong Kong wants adults to save for their health care in old age

J Parry, *BMJ* 322 (7 April 2001)

Morbidity and health care utilisation among elderly people in Mmankgodi village, Botswana

F Clausen et al, *J. Epid. and Comm. Health* 54:1 (2000)

Public involvement in social policy reforms: lessons from Japan's elderly-care insurance scheme

M Eto, *J. Social Policy* 30:1 (Jan 2001)

A study of China's social security system

Chinese Academy of Social Sciences, Social Sciences in China 21:4 (Winter 2000)

Work, retirement and vulnerability of older persons in Latin America: what are the lessons for pension design?

A Barrientos, *J. Int. Dev.* 12:4 (May 2000)

National aspects

Intergenerational solidarity networks of instrumental and cultural transfers within migrant families in Turkey

S Kalaycioglu et al, *Ageing and Society* 20:5 (Sept 2000)

Anthropometric survey of the elderly in south-western Nigeria

C R B Oguntona, O Kuka, *Annals of Human Biology* 27:3 (May-June 2000)

The impact of co-resident spouses and sons on elderly mortality in rural Bangladesh

M O Rahman, *J. Biosoc. Sci.* 32:1 (Jan 2000)

Trends in, and determinants of, mortality in the elderly population of Matlab, Bangladesh

G Mostafa, J K van Ginneken, *Soc. Sci. Med.* 50:6 (Jan 2000)

Are the elderly a burden? An examination of their conditions in rural Bihar

H Ansari, *Man in India* 80:1-2 (Jan-June 2000)

Age trends in anthropometric characteristics among an elderly population of Bengalee Hindu males in Calcutta, India

A Ghosh et al, *Mankind Quarterly* 41:1 (Autumn 2000)

Women reshape their roles – community development in the Dominican Republic

Ageways 57 (July 2001)

Memory, trauma and embodied distress: the management of disruption in the stories of Cambodians in exile

G Becker et al, *Ethos* 28:3 (Sept 2000)

The residency decision of elderly Indonesians: a nested logit analysis

L Cameron, *Demography* 37:1 (Feb 2000)

Gender and elder care: social change and the role of the caregiver in Japan

S O Long, P B Harris, *Soc. Sci. Japan J.* 3:1 (April 2000)

Japanese and Korean elderly people's evaluation of clothing colours for elderly people

S Shoyama et al, *J. Phys. Anth. Appl. Human Sci.* 20:1 (Jan 2001)

The actual living condition of elderly utilizer's for domiciliary services six months after the Hanshin-Awaji earthquake

S Okuyama, *J. Tokyo Keizai Univ.* 217 (March 2000)

The effects of migration on the population distribution in Hong Kong

P S F Yip, J Lee, *Asian J. Pub. Adm.*, 22:1 (June 2000)

Safeguarding the lives of the elderly and their dependence on the community – results of a survey conducted in the Nankai district of Tianjin

W Laihua, *L Hongguang, Soc. Sci. in China* 21:1 (Spring 2000)

Cross-cultural studies

Cross cultural comparability of the geriatric depression scale: comparison between older Koreans and older Americans

Y Jang et al, *Ageing and Mental Health* 5:1 (Feb 2001)

France, Japan: activity or inactivity at the end of a career? Two contrasting countries with ageing wage earners

A M Guillemard, *Inf. Soc.* 88 (2000)

Population ageing and the need for long term care: a comparison of the United States and the people's Republic of China

P Arnsberger et al, *J. Cross-Cult. Ger.* 15:3 (2000)

A cross-cultural analysis of age identity in Japan and the United States

H Ota et al, *J. Multilingual & Multicultural Dev.* 21:1 (2000)

Status of older people

Guadeloupe: the 'great people': transformation of the status of old people

C AttiasDonfut, *N Lapierre, Inf. Soc.* 88 (2000)

The prestige of age

L B Volynkaia, *Sotsis* 7 (2000). Also in Russian.

Late life immigration, changes in living arrangements and headship status among older Mexican-origin individuals

J L Angel et al, *Soc. Sci. Quart.* 81:1 (March 2000)

Financial aspects

Income transfers to the elderly in Korea and Taiwan

H J Kwon, *J. Soc. Pol.* 30:1 (Jan 2001)

Financial strain and depressive symptoms in Hong Kong elderly Chinese: the moderating or mediating effect of sense of control

K-L Chou, I Chi, *Ageing and Mental Health* 5:1 (Feb 2001)

Household saving in Chile: microeconomic evidence

P A Butelmann, Y F Gallego, *Economia Chilena* 3:1 (April 2000). Also in Spanish

Income of the urban elderly in postreform China: political capital, human capital and the state

J M Raymo, Y Xie, *Soc. Sci. Res.* 29:1 (March 2000)

Rights

Older people's rights, poverty and development

Development and Cooperation 3 (May/June 2001)

Books

Ageing in the Asia-Pacific Region: Issues, Policies and Future Trends

David R Phillips (ed)

Ageing has been identified as a key issue for the Asia-Pacific region, which, as the editor points out, is dynamic not only economically, socially and politically but also in demographic terms. There is also huge diversity in a region which contains Japan, probably the world's 'oldest' country by 2025, and Cambodia, which will still have a predominantly young population.

New and as yet unmet challenges for policy-making across the region are thus appearing, and this book aims to address some of these. It is framed in two main sections: firstly addressing issues of research, demography and care, and then discussing the ageing experience of individual countries across the region. Themes emerging clearly from this comprehensive review include the importance of issues such as gender and poverty in old age, the need to underpin family support of older people by public action at government and community level and the urgent requirement for good quality research to provide a sound evidence base for policy-making. This book is an important contribution to understanding the ageing of this key region in world development.

Routledge (2000) Price: £75

'Agequake'

Paul Wallace and Nicholas Brealey

The subtitle of this book refers to the 'demographic rollercoaster shaking business, finance and our world' and its emphasis is on the 'developed' countries. However, its interest lies in the fact that it ranges beyond a narrow focus in emphasising that 'the agequake is not confined to one country, nor ...one generation'. The power of the agequake, argues Wallace, lies in its international dimension.

Presenting familiar demographic data in a readable way, 'Agequake' emphasises that we are entering an era when the world will no longer be young. Among the resulting shock waves that Wallace expects to see are increasing pressures on Western pension funds and equity markets, and ageing societies which are more stable, complex and diverse, but less dynamic than younger ones. By contrast he foresees the potential for 'generational wars' in societies as diverse as Brazil and Germany, when in the 2020s the tax burden for those of working age to pay for pensions and health services for an ageing population will be double that of today. 'Agequake' is an accessible and thought-provoking look at the future which may be ours in an ageing world.

Published in paperback 2001

Human Rights in Ageing People
(Los Derechos Humanos en la Tercera Edad)

Mexican Human Rights National Commission (1999). Spanish only. Describes cases of discrimination against older people brought to the Mexican Human Rights National Commission. It also includes an analysis of national legislation, references to international resolutions about the rights of older people, and a chapter on how to confront discrimination against older people. Los Derechos Humanos en la Tercera Edad, Comisión Nacional de Derechos Humanos, Periférico Sur 3469, esquina Luis Cabrera, Col. San Jerónimo Lídice, CP 10200, México, DF

Taming oblivion: ageing bodies and the fear of senility in Japan

*J W Traphagan
State University of New York Press (2000)
ISBN 0791 445003*

The poetics and politics of Tuareg ageing: life course and personal destiny in Niger

*S Rasmussen
Northern Illinois University Press (2000)
ISBN 087 580 2206*

'Ageing and health policy: global perspectives'

*Peter Lloyd-Sherlock
In: Health Policy in a Globalising World
K Buse et al (eds)
Cambridge University Press (due 2001)*

Social Security in Africa: New Realities
*International Social Security Association p362 (2000)
ISSN 0379-704X
<http://www.issa.int/eng/publ/secsoc.htm>*

Social Security Issues and Research Capacities in Asia and the Pacific – a Six-country Study
*International Social Security Association (2000) p394
ISSN 1013-4484
<http://www.issa.int/eng/publ/secsoc.htm>*

Caring for the elderly in Japan and the US: practices and policies
*S O Long (ed)
Routledge, New York (2000), p358
ISBN 0-41-522352-0*

Understanding old age: critical and global perspectives
*G Wilson
Sage Publications, London (2000)
ISBN 076 196911 2*



'Household saving in Chile: microeconomic evidence' was the subject of a recent journal article.

Carlos Reyes-Mercuz/Andrés Press Agency

Population ageing: challenges for policies and programmes in developed and developing countries
*R Cluquet and M Nizamuddin (Eds)
British Library of Political and Economic Science (forthcoming)
Includes chapters on economies in transition, Zimbabwe and Namibia, prevention of frailty and dependence among elderly people in developing countries, China, and the ageing problem in sub-Saharan Africa in the context of the HIV/AIDS epidemic.*

Pamphlets

Television and older people
*Produced by the Asia Training Centre on Ageing (ATCOA) for television programmers and media professionals, to raise awareness of ageing and the role they can play.
Contact: ATCOA, Helpage International Regional Development Centre, Faculty of Nursing, Chiang Mai University, Chiang Mai, 50200 Thailand.
Fax: +66 53 225 441
Email: atcoa@helpageasia.com*

Databases

HelpAge International speeches and articles
Email: ahall@helpage.org

PubMed
*Free database of health-related literature, including articles on ageing in developing countries.
<http://www.ncbi.nlm.nih.gov/pubmed>*

Courses

Postgraduate Diploma in Gerontology and Geriatrics
*October 2001 – June 2002
Institute of Gerontology, University of Malta
Contact: Prof Joseph Troise, Institute of Gerontology, University of Malta, Msida MSD 06, Malta.
Email: jtro@um.edu.mt
<http://www.um.edu.mt>*

Demographic Aspects of Population Ageing and Implications on Socio-Economic Development, Policies and Plans
*19-30 November 2001
International Institute on Ageing (INIA), Valletta, Malta
http://www.zorin.com.mt/inia/calendar_of_events.html*

Papers

'Are non-contributory pensions needed for development? The experiences of Brazil and South Africa'
*P Lloyd-Sherlock, A Barrientos
ODI Briefing Paper (due 2001)*

Social Security Reform around the World
*J Turner
AARP (Feb 2001)
Focuses on the issues of extending coverage in low income countries, social security privatisation and reforms to deal with the effects of population ageing.
Email: j.turner@aarp.org*

Health and elderly care expenditure in an ageing world

*L Mayhew
International Institute for Applied Systems Analysis (IIASA)
The IIASA is building an economic-demographic model for exploring the consequences of population ageing on the global economy. This report explores the consequences for health and care services for older people and considers the basic mechanisms fuelling their growth.
<http://nt1.ids.ac.uk/eldis/hexp.htm>*

Organisation

The Oxford Centre on Population Ageing
*The Centre, part of Oxford University, was formally launched in June 2001 with a remit to address issues of ageing in both the 'developed' and 'developing' worlds.
This was reflected in a public lecture to launch the Centre, given by Dr Linda Martin, President of the US-based Population Council.
Dr Martin emphasised the need for research to influence policy-making in both North and South, and this will be one of the Centre's priorities.
A key initiative will be an international conference in 2003, addressing issues of ageing and poverty in the developing world.
Contact: Dr Sarah Harper, Director
Email: sarah.harper@nuffield.oxford.ac.uk*

Research update

Major new projects

10



Carlos Reyes-Manzo/Andes Press Agency

Older people in Asia are the focus of a comparative study being carried out by the University of Michigan.

WHO study of elder abuse

A study aimed at raising awareness among health professionals and the public about the problems of elder abuse worldwide is being coordinated by the World Health Organization (WHO) and the International Network for the Prevention of Elder Abuse. The findings will be used to develop a strategy for the prevention of elder abuse in the context of primary health care.

The study, by WHO's Ageing and Life Course, is in response to the fact that primary health care workers are confronted with signs of elder abuse, but often fail to recognise or act on them. It will be carried out in Brazil, Argentina, India, Lebanon and Kenya. Partners include the HelpAge International office in Kenya and HelpAge India. Other countries, including Canada and Austria, are participating at their own expense.

During 2001, indicators of elder abuse will be defined, based on perceptions of older people themselves and primary healthcare workers gathered through focus groups. A long-term strategy of action will be developed.

The Ageing and Life Course is also working closely with WHO's Violence and Injuries Prevention, which will publish a world report on violence in April 2002, including a chapter on elder abuse.

Contact: Silvia Perel Levin, Ageing and Life Course, NCD Prevention and Health Promotion, WHO, 20 Avenue Appia, CH-1211 Geneva 27, Switzerland. Email: perellevins@who.int

Demography of ageing

One-year pilot projects by the University of Michigan Center on the Demography of Aging (MiCDA), funded by MiCDA and the National Institute on Aging, which are due to be completed in 2001, include:

'Tradeoffs between public and private economic support of the elderly: results from a natural experiment in Taiwan'

Contact: Ann Biddlecom
Email: abiddle@umich.edu

'Impact of economic shocks on the elderly in Brazil'

Contact: David Lam
Email: davidl@umich.edu

'Feasibility study to link health utilization records to a longitudinal survey of older persons in Taiwan'

Contact: Mary Beth Ofstedal
Email: mbo@isr.umich.edu

A number of longer studies of ageing in developing countries, mainly in Asia are also being carried out. 'Comparative study of the elderly in Asia' is a series of research reports, started in 1990, which presents findings of a broad programme funded by the National Institute on Aging, 'Rapid demographic change and the welfare of the elderly'. The programme aims to measure the social, economic and health characteristics of people aged 60 and above; predict changes that may occur over the next few decades; and suggest implications for public policy.

Countries originally involved in the programme are the Philippines, Singapore, Taiwan and Thailand. Reports from other Asian countries, and on methods developed through the project, may also be included in the series. To date 57 reports have been produced. Abstracts are available on the website.

Contact: University of Michigan Center on the Demography of Aging. <http://micda.psc.isr.umich.edu/>

Participatory research in Mozambique

Participatory research into the vulnerability, contributions and coping strategies of older people in Mozambique has been coordinated by HelpAge International. The research involved government and non-governmental organisations, community-based organisations, older people and other individuals. This is the first comprehensive study of the situation of older people in Mozambique.

Contact: Necodemus Chipfupa, Programme Manager, HelpAge International, CP4112, Maputo, Mozambique
Email: haimoz@virconn.com

Health transition in Indonesia

The experiences of chronically ill older people in three urban areas of North Sulawesi, Indonesia, are being compared in a two-year study by the University Sam Ratulangi.

The study, due to be completed in 2002, will consider the interplay of physical, social, economic and psychological factors determining the health of older people. It will look at the social and economic situation of older people with a chronic illness; how and why chronically ill older people use health services; how older people cope with chronic illnesses; how older people perceive and experience 'old age'; and what older people understand by 'health' and how they stay healthy.

Contact: Peter van Eeuwijk, University Sam Ratulangi (UNSRAT), Jl Kampus Unsrat Bahu, Manado 95115, North Sulawesi, Indonesia
Email: pjetve@manado.wasantara.net.id

Intergenerational transfers

Research is being carried out by the University of Bath into transfers from the working generation to the older generation (including pensions) and to the younger generation (including education). The study is relevant to demographic change internationally, as it seeks to analyse the 'burdens' of demographic change on the working generation.

Contact: Prof. David Collard, Centre for Fiscal Studies, Department of Economics and Social Development, University of Bath, UK
Email: D.A.Collard@bath.ac.uk

Second half of life

A large-scale survey of the second half of life, by the Faculty of Social Sciences, University of Nijmegen, will document age-related changes in people's lives and expectations for the future. It includes a comparative project: 'Cross-

cultural comparisons of personal, self and life conceptualisations: a series of cross-cultural studies in Western and non-Western countries, such as Germany, The Netherlands, USA, Spain, Zaire and India'.

Contact: Tildie Stijns, Secretary, Department of Psychogerontology, Faculty of Social Sciences, University of Nijmegen, Spinozagebouw Montessorilaan 3 Nijmegen, The Netherlands.
Tel: +31 24 3612 551
Fax: +31 24 3615 726
Email: geronto@psych.kun.nl

Ageing rates and the oldest old

A study by the Tokyo Metropolitan Institute of Gerontology (TMIG), 'Longitudinal interdisciplinary study on aging', aims to identify factors that accelerate or slow down the ageing process, verify diseases of old age and chronic conditions, and identify ways to successful ageing in three areas of Japan.

Another study, 'Dynamics of health, family and economic wellbeing among the oldest old', by the University of Michigan and TMIG, seeks to contribute to effective social policies for successful ageing. Both studies are due to be completed in 2001.

Contact: Dr Hiroshi Shibata, Principal Investigator, Tokyo Metropolitan Institute of Gerontology <http://www.tmig.org.jp>

Economics in Taiwan and Thailand

The Center on Demographics and Economics of Aging, University of Chicago is carrying out two studies in Taiwan and Thailand. The studies focus on transfers of various types between generations in Taiwan, and the roles of the nuclear and extended family in providing credit and diversifying risk in village economies in Thailand.

Contact: Center on Demographics and Economics of Aging, University of Chicago <http://www.spc.uchicago.edu/coa/projects>

Quality of life in Chile

Research into the health status, nutrition and quality of life of older people in Chile has been carried out by the University of Chile, Institute of Nutrition, sponsored by the World Health Organization. The research, yet to be published, provides a comprehensive and thorough analysis of the problems faced in Chile, where 400,000 of the 1.6 million people aged 65 and over live in extreme poverty and a further 500,000 are considered poor.

Contact: Dr Cecilia Albala, University of Chile, Institute of Nutrition <http://www.uchile.cl>

Widowhood and inheritance

Pilot research projects focusing on the problem of widowhood and inheritance are to be carried out in Ghana and Tanzania by HelpAge Ghana and HelpAge International's Tanzania programme.

Contact: Pension Munyama, Rights Coordinator, HelpAge International Africa Regional Development Centre, PO Box 14888, Westlands, Nairobi, Kenya
Email: helpage@net2000.ke.com

Mailing card reminder

Thank you to everyone who returned the mailing list renewal card that was sent with A&D 8.

If you received a card but have not yet returned it, please do so (or use the form below). The cards were sent in each envelope or package, so if you did not receive a card, it is because you are not the person named on the address label.

The information on these cards helps to ensure that our mailing list is up-to-date, and gives us a clearer picture of who receives A&D.

Ageing and Development mailing list request form

Ageing and Development is free to policy makers, programme planners and researchers concerned with development and poverty eradication. To go on the mailing list, please complete this form using CAPITAL LETTERS and send it to: Publications Orders, HelpAge International, PO Box 32832, London N1 9ZN, UK. Fax +44 20 7843 1840

<p>Title _____</p> <p>First name _____</p> <p>Surname _____</p> <p>Job title _____</p> <p>Organisation name _____</p> <p>_____</p> <p>_____</p> <p>Address _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>City _____</p> <p>Postal code _____</p> <p>Country _____</p> <p>Tel _____</p> <p>Fax _____</p> <p>Email _____</p>	<p>How old are you?</p> <p><input type="checkbox"/> Under 30 <input type="checkbox"/> 30-60</p> <p><input type="checkbox"/> Over 60</p> <p>Do you have access to the web?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>What is your job?</p> <p><input type="checkbox"/> Policy advisor/politician</p> <p><input type="checkbox"/> Campaigner</p> <p><input type="checkbox"/> Researcher</p> <p><input type="checkbox"/> Trainer/tutor</p> <p><input type="checkbox"/> Programme manager</p> <p><input type="checkbox"/> Health professional</p> <p><input type="checkbox"/> Consultant/technical advisor</p> <p><input type="checkbox"/> Other (please specify) _____</p>	<p>What sort of area do you work in?</p> <p><input type="checkbox"/> Urban <input type="checkbox"/> Rural</p> <p>Does your work focus primarily on older people?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you work for an organisation?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, which of the following describe(s) your organisation?</p> <p><input type="checkbox"/> Donor agency</p> <p><input type="checkbox"/> Research institute</p> <p><input type="checkbox"/> Training/educational institution</p> <p><input type="checkbox"/> Professional association</p> <p><input type="checkbox"/> International government or multilateral agency</p> <p><input type="checkbox"/> International NGO/religious organisation</p>	<p><input type="checkbox"/> Government organisation</p> <p><input type="checkbox"/> Local or national NGO/religious organisation</p> <p><input type="checkbox"/> Community-based organisation</p> <p><input type="checkbox"/> Older people's organisation/pensioners' association</p> <p><input type="checkbox"/> Other (please specify) _____</p> <p>How many copies of Ageing and Development do you need?</p> <p><input type="checkbox"/> English</p> <p><input type="checkbox"/> Spanish (Tercera Edad y Desarrollo)</p> <p>If 10 or more please say how you will use them</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Talking point

Understanding older people's experience

12

Why participation matters

Participatory research involving older people is key to developing sustainable policies. Amanda Heslop explains why.

Participatory research is a powerful tool for bringing older people into policy development processes. Focusing on the views of older people provides insights into their situation that could not be gained in other ways. And the process of gathering, sharing and analysing information helps to build the capacity of older people and others to influence policy and practice.

Many older people are prevented from participating fully in the social, economic and political life of their societies, because they are too poor, in ill health, discriminated against or lack confidence. 'Older people tell me that they have been given the worst room in the house and they're not allowed to take part in anything', says one older woman in Peru, who advises others on their rights. Older people's voices are rarely heard in decision-making processes.

If policies aimed at tackling poverty are to succeed, the needs of older people – who are disproportionately represented among the poor – must be recognised and included.

How does it work?

A starting point for participatory research is a concern with power relationships and a commitment to involving poor older people in research in their own communities.

Analysis of research findings by the community itself, rather than in some distant office, is a key part of the process. It enables poor older people to highlight different dimensions of poverty and see how they are linked, and to identify the poorest people within their communities. Analysis by different groups of older people, both women and men, and by people of different backgrounds and ages, produces a range of different perspectives and highlights areas for consensus.

Group analysis helps to build up teams of local people and outsiders, who can relate the findings to policy and practice at all levels.

Face-to-face in Ghana

In northern Ghana, older people who were involved in participatory research were able to talk directly with representatives of the district council, national government and non-government organisations. They explained how the seasonal nature of agricultural work, disease prevalence, food shortage and their ability to pay meant that they could not get medical care at times of the year when they needed it most.

District council representatives recognised that the national policy that exempted older people from paying fees was failing. They

pinpointed inadequate systems for enforcement, such as leaving fee exemption to health workers' discretion.

The benefits of information-sharing among all members of the research team were described by one of the older participants: 'The team were able to find out what older people wanted. Some older people didn't know they were entitled to free medical care – it was the team that told them this. They also told the team what the government and other agencies could do for them... how they could do something for themselves if given the help.'

Wider influence

Participatory research can be an empowering experience – but for long-term improvements, older people need to continue engaging in advocacy, and in monitoring the development and impact of policies that affect them.

There are many examples of positive changes being achieved by older people at community level with the support of intermediary organisations. In South Africa, for example, hundreds of older people won cases against the provincial government for non-payment of pensions, with the support of a local organisation, Elim-Hlanganani Society for the Care of the Aged.

The right of poor, older people to influence national government and international development agendas needs to be recognised, and the means for doing this made possible. The resulting policies are more likely to be sustainable if they are based on the priorities of those they aim to serve.

Amanda Heslop is HelpAge International's training and research manager.

A handbook on participatory research involving older people will shortly be published by HelpAge International. Email: aheslop@helpage.org

HelpAge International is a global network of not-for-profit organisations with a mission to work with and for disadvantaged older people worldwide to achieve a lasting improvement in the quality of their lives.

Ageing and Development aims to raise awareness of the contribution, needs and rights of older people and to promote the development of laws and policies supporting older people. It is published three times a year by HelpAge International, with funding from Help the Aged (UK).

Copies are available in English and Spanish, free of charge on request to policy makers, programme planners and researchers. Please complete and return the form on page 11.

Ageing and Development is also available on the web at: <http://www.helpage.org/publications/index.html>

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Participatory research.

Robert Agyarko/HAI