

2008 Senior Officials' Meeting

Summary Report

Convened by

International Federation on Ageing



IFA

“Ageing in Place – The Way Forward”

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Acknowledgement

We wish to thank all government officials for their interest and participation in the Senior Officials Meeting (SOM) held September 4th, 2008 in Montréal, Canada. Designed to bring together senior government officials from developed and developing countries, the meeting provided a platform for many informative presentations, examining current trends in Ageing in Place policy and practice. The meeting attracted over 100 senior officials from governments across the world.

Background

The International Federation on Ageing (IFA) aims to inform, educate and promote policies, programs and leading practices to improve the quality of life of older persons around the world. Government are key stakeholders toward achieving this aim, together with non-government organisations (NGOs), the corporate sector and civil society.

The IFA by way of its position internationally and status with the United Nations and its agencies is uniquely situated to be able to facilitate a meeting of senior government officials in conjunction with its biannual global conferences.

In 1999, the Canadian government together with the IFA hosted a successful Minister's Meeting prior to the IFA 4th Global Conference which resulted in The Montreal Declaration. The tragic events of 9/11 in the United States and the subsequent increase in security concerns prohibited a meeting at the IFA 6th Global Conference in Perth, Western Australia in 2002.

Thereafter the IFA Board of Directors decided that future Ministers' meetings were unlikely in the climate of security concerns and associated protocol. The Board also reassessed the rationale for such meetings and decided that a meeting of senior government officials may provide better opportunities to share policy development and discuss major ageing issues. For this reason in September 2004 the IFA, together with the Singapore Action Group of Elders (SAGE) and in cooperation with the Singapore government hosted its first meeting of senior government officials with the theme being the United Nations Madrid International Plan of Action on Ageing. In Copenhagen in 2006 the senior officials meeting focused on Pension Reform & Pension Design and for 2008, in Montreal the selected theme was Ageing-in-Place.

The 2008 Meeting was designed to provide a forum for officials to examine current trends in policy and practice as they relate to Ageing-in-Place in the face of rapid global population ageing. The programme was developed with a focus on the mutual interests of participants, and designed to promote dialogue and interaction among delegates – some of whom represented countries who are well advanced, while others from countries who have not yet been able to tackle the problem.

Population Ageing

Population ageing is a significant phenomenon of the 21st century which manifest in economic, social and personal challenges and pressures for societies world-wide. Nowhere is this truer than in regard to accommodation for older citizens. No longer just the subject of academic discussions, it is to a growing extent a subject which is

giving rise to strong government and private sector response. Fiscal burden for government and challenges for older persons and their families are requiring serious and urgent attention, and as a result many countries are increasingly adopting policies supporting the notion of Ageing-in-Place. In this context, there are many visions about how homes and the associated financial situations can become more adaptable and flexible to the changing needs of older citizens.

Countries across the world differ significantly in the nature of accommodation for older persons and them becoming older and experience changes in level of function and independence. As such the role of governments varies from country to country. In developed countries, the role of government is increasingly linked to private sector response and to the changing demands and expectations of the older population. Despite this trend, the relationship between national and state policies and the methods of implementing effective programs is a challenge for many countries and communities, but one which needs to be explored with a sense of openness and purpose for solutions.

In contrast, it is too easy to assume in developing countries that the extended family will care for older people as they have done in the past. This is no longer the case. As older people live longer, more women work outside of the home, adult children migrate for work opportunities, and there is the loss of many adult children to HIV/AIDS. We can no longer rely on the extended family. Hence the terms and models of Ageing-in-Place take on new significance in all regions of the world.

Notwithstanding the substantial differences between developed and developing countries and those in transition, there is a common misperception that government and family will remain traditional providers. Rather than being a direct provider, more often than not government will facilitate initiatives in the areas of housing, health and care.

However different or similar the landscape of a country is with its neighbour, governments across the world play an important role in the status of their older populations and each has much to share by way of policy and practice trends. It is both relevant and important for government senior officials to reflect on the subject of housing systems and related financial incentives and the government's role.

Executive Summary

A total of twenty-three (23) presentations were given over the course of the meeting, representing policy and practice views from not only developed countries, but of those countries known as developing and in transition. Presentations ranged from a 'whole' of government perspective which outlined the broad range of policy responses that can be defined as supporting Ageing-in-Place to portfolio specific initiatives, such as pensions and financial protection systems that enable older people to have choice.

There were four (4) key elements underpinning all presentations:

1. The basic right to make choices does not change with age. Older people have the right to choose where and with whom they will make a home

2. Relationships with family, friends and caregivers are a particularly important component of maintaining the health and well being of older people
3. To age in place successfully requires early individualized planning
4. Creating choice for older people to remain in the community requires a 'whole' of government response across portfolios.

Finding a more efficient and cost effective means of service delivery to support our ageing populations is of significant importance to government, however governments are equally weighting the needs and wishes of its older citizens. As a result increasingly the emphasis has leaned towards programs and services that enable people to age in place, despite this not always being the most cost effective. There is also a greater recognition that the health and housing needs of an older individual are often interrelated. Health concerns can create or compound the problems of an ageing housing stock, and housing concerns can create or compound health problems for older individuals.

To develop an efficient method of service delivery, residential and community care systems must reflect the interrelationship between health and housing. Customized models of care avoid the inefficiencies that come from programs that are 'service type' specific by matching services and facilities to an individual's need rather than matching an individual to an existing service or facility.

Ageing-in-place with supportive services is not only the most desirable way of ageing but can also achieve the efficiencies of tailored individual care models. Successful ageing-in-place strategies minimize the provision of inappropriate care, and therefore the overall costs, by offering a range of flexible services and calibrating those services to fit the needs of the individual. Rather than a rigid service-delivery system, ageing-in-place strategies create both health care and housing options that provide support at the margin of need as defined by an individual's personal desire and efforts to live independently. Ageing-in-place works best as part of a comprehensive and holistic approach to the support needs of an individual and community.

For many countries the shifting focus towards ageing-in-place is clearly evident. Countries such as Canada, Australia, United States and many across Europe have embraced the concept for over a decade and the policies and programs are well developed to support older people to remain in their own homes and communities for longer. Countries such as China, where there will be over 200 million older people in the next 5 years are now recognising the need to look for new ways of supporting the ever increasing aged and ageing population. Over the past 18 months, the most senior Chinese government officials have held critical discussion about the welfare of the nation's growing older population. The result of these discussions has been a new nationwide proposal to shift from the past model of family responsibility for eldercare to a newly created community-based ageing-in-place model with the establishment of new community-based elder services.

To introduce comprehensive and effective community-based services China, as well as other countries such as India and Pakistan, face a number of unique challenges,

including identifying and training care workers, establishing a compensation system that is supportable and coordinating funding streams to support the services.

Ageing-in-place is not a new phenomenon for many countries, however for those countries in transition or developing the shift to this model of care and support appears to be an emerging priority.

For the International Federation on Ageing, clear benefits are evident from convening a meeting for senior government officials to present and discuss current and emerging trends in the field of ageing. For delegates to the meeting the outcomes included:

- Meeting colleagues from around the world, exchanging views and experiences in developing policy and programs that support ageing-in-place;
- Gaining a greater awareness and understanding of the key factors that underpin successful models of ageing-in-place;
- Identification of the challenges and obstacles to implementing ageing-in-place strategies from different countries;
- Creation of opportunities for greater transfer of knowledge and expertise through potential partnering relationships;
- Establishing a global network of colleagues and experts from whom to share and obtain advice; and
- Creating knowledge and skills export opportunities across borders.

Program Presentation Summary

1. Dr. Chris Luebkehan Director, Global Foresight & Innovation Initiative, Arup - "A New Paradigm - Drivers of Change – Embracing Ephemerality"

Chris Luebkehan opened the Senior Officials Meeting in Montreal, by introducing the audience to a variety of economical, ecological and demographic changes that affect mankind as a whole and specifically the rapidly growing older population and the effects this will have on urban planning, living and growing older in the future.

Please see Appendix 1 for the full Presentation.

2. Ms. Susan Scotti – Assistant Deputy Minister, Department of Human Resource and Social Development, Canada – "Ageing in Place – A Key Enabler: The Retirement Income System"

Ms. Scotti started the presentation by introducing the audience to Canada's Retirement Income System (RIS), which will play a major role in making Ageing in Place possible for a majority of the seniors. The System has two primary objectives: (1) to alleviate poverty in old age; and (2) to assist in the prevention of substantial declines in standard of living upon retirement from the labour market.

The first tier of the Canadian RIS is the Old Age Security program (OAS). This is a universal program, in that it provides a basic income to every Canadian age 65 and over who meets the residency requirements. In addition, low-income Canadian seniors can apply for the Guaranteed Income Supplement, or GIS, which provides a tax-free benefit to those who have little or no income besides their Old Age Security pension.

The second tier of the Canadian RIS is the Canadian Pension Plan (CCP). The Canada Pension Plan is a mandatory program that depends on contributions from working Canadians. With few exceptions every person over the age of 18 who earns a salary must pay into the Canadian Pension Plan. Along with its sister plan, the Quebec Pension Plan, the CCP provides monthly benefits to Canadians based on contributions made during their years of employment. The Canadian system is predicated on the notion that most Canadians, save for those with low retirement incomes, will need to supplement retirement income with additional savings or pensions.

Financial security is fundamental in enabling seniors to live full and active lives, and to continue to contribute to their communities. Due to the fact that the Chief Actuary must review OAS and the CPP every three years, it is ensured the system can meet the future needs of Canadians. Ms. Scotti closed the presentation by introducing challenges for the future, such as: Helping older Canadians who want to remain in the workforce, changes in the

retirement income system that can provide that incentive and the possibility of an overall more flexible system.

Please see Appendix 2 for the full Presentation.

3. Dr. Erika Winkler – Deputy Director, Ageing Policies, Ministry of Social Affairs and Consumer Protection, Austria - “Pioneering a New Vision of Ageing – Ageing in Place in Austria”

The presentation Pioneering a New Vision of Ageing – Ageing in Place in Austria made by Dr Winkler focused on the demographic changes associated with a growing population of older people and the associated health care needs.

According to the statistics, over 90% of the people aged 60 and over grow older independently or with a small amount of support from mobile services in their surroundings. Ten percent of the people over the age of 60 receive long-term care benefit at stages one and two with a care and support requirement of up to 120 hours per month; while 8% of persons over 60 years of age have a greater care requirement amounting to over 120 hours per month.

The wide range of health care required by the elderly calls for a variety of housing options and means to satisfy the needs of the senior citizens. Examples of different housing types in Austria include: residential homes, supported living, communal housing, active sheltered housing, shared flats and apartments for senior citizens, therapeutic residential communities, villages for the elderly and open homes and nursing homes for the elderly.

Please see Appendix 3 for the full presentation by Dr. Erika Winkler.

4. Ms. Mary Murnane – Deputy Secretary, Department of Health and Ageing, Australia - “Ageing in Place in Australia”

Two of the main challenges the Australian government faces with its ageing population is to have a better understanding of what people want; and second to improve the system capacities for ageing in place. The latter could be achieved through easier navigation of community care, improvements in supporting carers, accessibility of age friendly housing and environments, and the possible introduction of new models for aged care and a smoother inter-sectoral transition. Currently the community care system is difficult to navigate, restricts flexibility in ageing in place and focuses on maintenance and support.

To tackle these problems, Ms. Murnane suggested in her presentation a streamlined approach for clients and carers, consisting of Home and Community Care, Community Care Packages and Respite Care. Improvements in Carer Support will be achieved through the National Respite for Carers Program (NRCP), which provides information and access to emergency respite through 54 National Respite and Carelink Centres.

Ms. Murnane continued the presentation by introducing the National Rental Affordability Scheme. The \$512 million Housing Affordability Fund aims to lower the cost of building new homes by tackling the critical supply issues of the length of time to bring new houses to sale and impact of infrastructure charges. This presents a great opportunity for innovative approaches to combining housing and care services.

Ms. Murnane closed the presentation by pointing out the need to improve the links between primary care, acute care and mental health.

Please see Appendix 4 for the full Presentation.

5. Mr. Edwin Walker - Deputy Assistant Secretary for Ageing, Department of Health and Human Services, United States

30 out of the 52 states of the United States are spending more than 80% of their care budgets on nursing home care, which most of the older people do not want and which is financially unsustainable. Mr. Walker continued to introduce a variety of new tools that will help the elderly to age at home and will help the states and communities advance the goals embedded in the New Freedom Initiative.

These are, for example, *The Own Your Future Campaign*, which is designed to increase awareness about the importance of planning ahead for ones long term care, *The National Clearinghouse for Long- Term Care Information*, which is the first federal website designed to specifically help consumers plan ahead for their long-term care, and lastly Prevention as a key component of the rebalanced long- term care system.

As outlined by Mr. Walker, the U.S. face two unique senior housing challenges: housing seniors of limited means and housing those with some level of accumulated assets. The Federal Department of Housing and Urban Development hence promotes community based living, which makes supportive services available to residents and enables them to live in the most integrated setting. In addition there are programs in place for home modification and repair to help older remain in their homes, and reverse mortgages that permit seniors to tap the equity in their homes and use the cash to provided needed services.

Mr. Walker closed the presentation by pointing out the greatest challenge for the future: Striking the appropriate balance between compassion and responsible cost containment.

Please Appendix 5 for the Full Presentation.

6. Ms. Gwenda Thomas - Deputy Minister for Social Services, Welsh Assembly Government, Wales - "Ageing in Place in Wales"

Ms. Gwenda Thomas of the Welsh Assembly Government opened her address by introducing the aims of the Welsh Executive, which are the provision of

more and better jobs and skills for the people of Wales; the improvement of public health and the delivery of stronger and safer communities. The key strategic document "One Wales" strongly signals the commitment to developing a Wales that offers equity in opportunity and treatment to all Welsh citizens.

The Welsh Government seeks to challenge negative assumptions and expectations about old age through the "Strategy for Older People". It aims to make the prospects of old age be associated with positive expectations, and a vision of good health, vitality, independence and active citizenship. The next phase of the Strategy will concentrate on four key strategic and cross-cutting themes: Engagement with Older People; Economic Status of Older People; Health, Well Being and Independence; and Implementation. Ms. Thomas continued to point out the main challenge in the implementation of the Strategy in the near future, may be such as the evolvement of the approach into the mainstream.

The Strategy for Older People is furthermore underpinned by a number of Wales wide initiatives that support the principle of the Government. These include the free bus travels Scheme, the introduction of free swimming for the over 60`s which had a great impact in encouraging older people to stay active and healthy and the introduction of free prescriptions in 2007. The latter initiative has seen the most dramatic increase in prescriptions being issued for critical health conditions, such as heart and blood pressure medication. Ms. Thomas concluded her speech by pointing out the challenges that still lie ahead, for example poverty amongst pensioners, making life long learning a reality for more older citizens and increasing economic activity.

Please see Appendix 6 for the full presentation.

7. Dr. Vu Thi Hieu - Chief of the Secretariat, National Committee on Ageing, Vietnam "Assistance Policies on Ageing, Take Care Elderly Models in Community in Vietnam"

Future strategies on ageing in Vietnam will have social and economic facets and in that way work to address the demographic and family changes which are gradually being felt across the country today. The strategic direction focuses on the promotion of the roles and experiences of older citizens in the community leading to an improved quality of life for the elderly. Concurrently the government appreciates the importance of developing a social security system, including social insurance and social security support.

Dr. Vu then elaborated on the difficulties older people currently experience in Vietnam, such as financial dependence due to the lack of retirement pensions or social security pension and the lack of regular medical care. As outlined in the presentation, the Vietnamese Government financially supports older persons depending on their financial and social situation. The Government has set itself the objective that by 2010 100% of the elderly will

have access to health care services, and free health insurance should this be seen as necessary.

Dr. Vu concluded the presentation by introducing two pilot models for the elderly in Vietnam.

Please see Appendix 7 for the full presentation.

8. Mr. John Storey – Head, Older People and Age Team, Scottish Government, Scotland - “Older People and Age Team”

The single, overarching purpose of the Scottish Government is to create a more successful country, with opportunities for all of Scotland to flourish, through increasing sustainable economic growth. This purpose is underpinned by five strategic objectives: A wealthier and fairer Scotland, a smarter Scotland, a healthier Scotland, a safer and stronger Scotland and a greener Scotland.

The publication “All our Futures: Planning for a Scotland with an Ageing Population” introduced by Mr Storey responds to the issues and opportunities including active ageing, caring, community safety, housing, health work and transport. Older people were part of the expert group advising on the publication and provided insights into the need for positive attitudes towards older people, the avoidance of the “demographic time bomb” language and the acceptance of the fact that there are issues the government needs to plan for. The consultation process for the publication, which has been one of the most extensive ever undertaken by the Scottish Executive, identified six priority areas for action: Improving opportunities for older people to participate and be involved; forging links between generations; improving health and the quality of life for older people improving care and support ensuring the right infrastructure is in place; and, offering learning opportunities throughout life.

Mr. Storey concluded the presentation by introducing a campaign to combat ageism and promote more positive images of older people, which has been operating in Scotland during the summer.

Please see Appendix 8 for the full Presentation by Mr. Storey.

9. Mr. Wu Yushao – China National Committee on Ageing “Ageing in Place in China – Practices and Experiences”

Mr. Yushao opened the presentation by introducing the challenges of Ageing in Place in China. These included the rapid growth of the elderly population, the unbalanced demographic changes of the elderly population in the eastern and western areas of China, as well as the rural areas and the financial struggle of many ageing Chinese (“getting old before getting rich”). The development of the ageing in place strategy is based on home care services, which are supported by community services, and in turn supplemented by institutional services.

In China ageing in place is viewed as a fundamental solution to the rapidly changing demographics in the country. The increasing high cost of beds in institutional care in cities such as Beijing and Shanghai (300,000 Yuan, with an extra 20,000-30,000 each year) prompted the government to create incentives for people to stay at home ageing in place. The government pays a subsidy of 2000-3000 Yuan for each older person every year. This initiative is expected to lower the cost for both the government and the recipient and early stage evaluation indicate its effectiveness through a saving in resources. Since 2006, the China National Commission on Ageing has encouraged local authorities to conduct home care services programs – this follows evidence from a 6-year pilot program in eastern China. The implementation of the Ageing in Place program will be a joint effort by the government and the Chinese society. The government will offer guidance, support, resource integration, as well supervision and inspection, whereas the society contributes through the involvement of enterprises, the involvement of NGOs, volunteers and assistance from the individual's families.

Mr. Wu concluded the presentation by summarising the problems being faced by older people and service providers in China. These included a lack of effort from some local governments in the project, the inability of some NGOs to provide services in an effective manner, the lack of resources for home care services and the inefficient integration of resources in communities as well as unqualified service providers.

Please see Appendix 9 for the full Presentation.

10. Mr. Marián Hošek – Deputy Minister of Labour and Social Affairs, Czech Republic - “Ageing in Place Policy in the Czech Republic”

“In our approach to ageing and old age we are conservative and short-sighted, similarly as we used to be to our life style and diet some time ago. It is pointless and brings us harm”. Mr. Hošek opened his presentation with these words from foremost Czech gerontologist Zdeněk Kalvach.

He continued to explain that the paternalistic approach during the communist era heavily undermined family solidarity, as it was biased towards institutional care. Although home health care has seen a rapid development in the 1990s, it remains regionally unequally distributed and the acute model of health care prevails and fails to respond to the needs of older persons.

Mr. Hošek then introduced the new Social Services Act which came into force in 2007. The Act introduced a care allowance and medical assessment of self care capabilities. The amount of care allowance is based on the degree of dependency on care and thereafter linked to a system of registration of providers of social services and quality inspection.

In closing Mr Hošek summarized the associated challenges of Ageing in Place in the Czech Republic. These included the need for rehabilitation and geriatric

services, palliative, hospital and social care; the integration of services, the establishment community centres, the geriatric education of carers, the implementation of "lifelong homes" as well as achieving the standards of barrier-free and age friendly housing.

Please see Appendix 10 for the full presentation.

11. Prof. Yitzhak Brick/Mr. Meir Hazan – Israel – Director General Eshel – The Association for the Planning and Development of Services for the Aged in Israel/ Deputy Director of the Ministry for Senior Citizens "Ageing in Place – Policy, Planning and Programs"

Evidence from qualitative and quantitative studies in Israel indicates that positive strategies of health promotion preventive measures and care lighten the burden on the families, communities and governments give rise to a better life for the elderly and in the longer term lower the overall financial expenditure.

The aim of the general policy of Ageing in Place in Israel is that elderly people should continue to live at home for as long as possible and stay in the community as long as possible. The benefits of that are the improvements in the quality of life and the reduced expenditures related to long term care.

Prof. Brick and Mr. Hazan continued the presentation by describing the different community services that are available in Israel. These included Day Care Centers where professional care, transportation and hot meals are offered; Supportive Communities which includes an emergency call system and social Activities; volunteering; and employment which gives seniors the opportunity to work in promotion, social and cultural activities, community TV and education and business and finally the Warm Home program which is a social safety net for isolated elderly where weekly meetings take place.

Please see Appendix 11 for the full Presentation.

12. Mr. André Lépine – Director Senior and Healthy Ageing Secretariat, New Brunswick, Canada - "New Brunswick's 10-year Long Term Care Strategy"

The purpose of the New Brunswick 10-year Long Term Strategy introduced by Mr. Lépine is to address the needs of both current and future seniors, to strengthen New Brunswick's long term care system and to ensure a continuum of care that is fair to taxpayers, equitable in its delivery and sustainable in the future.

Phase 1 of the strategy focussed on the program development including gathering of statistical notes and other associated research to examine the best practices and conduct a consultation process province-wide. Key elements of the strategy are the transformational approach, best practices and

made-in-New Brunswick innovations, a societal shift away from institutional care and a consistent and sustainable mix of programs and services.

The main challenge of phase 2 will be developing an implementation framework that includes a schedule for actions that will commence over the next ten years, detailed plans to guide the implementation of each of the fifty-three actions as well as monitoring and reporting on an annual basis. Another important part of the second phase of the strategy is the development of policies and supports for models of ageing in place, such as a Senior and Healthy Ageing Secretariat, Extra- Mural Programs and Housing Programs.

Mr. Lépinés' concluded by saying the government of New Brunswick aimed to solve some common problems while also embracing innovation and to increase dialogue and collaboration among stakeholders.

Please see Appendix 12 for the full Presentation.

**13. Mr. James MacIsaac –Executive Director People & Communities
Department of Planning and Community Development, Victoria,
Australia
“Ageing in Place – Victoria, Australia”**

Mr. MacIsaac started the presentation by introducing two pilot projects which have been pivotal in better understanding and responding to the needs of seniors in Victoria. Firstly the Mobility Advisor Project was developed to investigate whether personalized advice by trained mobility advisors can improve access and mobility for retired drivers, and whether this will measurably improve their wellbeing and assist them to remain living at home.

The second project, known as Direct2Care is a new service that helps people on the state of Victoria access aged care services. The service aims to help older Victorians locate and access the services they need to live fuller, more independent lives in the familiar surroundings of their own home. Mr. MacIsaac continued to illustrate the purpose and aim of *liveable ageing communities* such as support in housing choices, the accessibility of buildings, public spaces and social infrastructure, and maintaining mobility through walkability, transport options and the connectivity of the infrastructure.

In closing Mr MacIsaac's provided an insight into the future aims for ageing in place in Victoria, specifically in regards to improving and increasing housing options, improvements in the accessibility of public space and developing supportive environments, such as pedestrian friendly neighbourhoods or motorized scooters.

Please see Appendix 13 for the full Presentation.

**14. Prof. Toshihiko Hasegawa – Nippon Medical School, Japan
“Designing Society and the Health System for the Super-Aged Society
in Japan”**

Professor Hasegawa provided a comprehensive outline of the state of ageing in Japan with his presentation focusing on three areas: Politics and Policy of Japan; Position of Japan and the Challenges; and Health and Welfare Care Transition.

Ageing policy, as with other countries across the globe, is mainstreamed within a number of government portfolios. These include transport, Education, Labour, Social Security, Welfare and Health. The sector has undergone significant reform since the 1970’s with a major reform taking place in 1997 with the Hashimoto Health Sector Reform which comprised the health care delivery system, fee schedules for pharma care and the introduction of the elderly health insurance system, covering the Japanese population over the age of 75. Population demographics, now and projections over the next 30 years, indicates significant growth in the number of older people aged 85+. This has led to research in designing a health and welfare system to support a population demographic defined as Super-Aged.

Policy development very much focuses on the principles of ageing in place and the challenges are developing and maintaining systems that will be sustainable for a growing cohort (Super-Aged). Late degenerative disease, an increased prevalence of dementia and increasing levels of frailty means that a greater emphasis also needs to be placed on health prevention and promotion. Professor Hasegawa is currently undertaking a 3 year research project to examine the policy implication and challenges in designing a health care system for Super-Aged Society.

Please see Appendix 14 for the Full Presentation.

15. Ms. Valerie White – CEO Nova Scotia Department of Seniors, Nova Scotia, Canada “Ageing in Place Policies”

The definition for Ageing in Place in Nova Scotia is as follows: “Ageing in Place is the diverse range of programs and housing options needed to ensure seniors maintain personal dignity and functional independence in their homes, neighbourhoods, or communities for as long as possible.” Nova Scotia has implemented a framework for government action called “Strategy for Positive Ageing”. Aims of the Strategy are to celebrate seniors, to ensure financial security, provide health and well-being and, among others, creating supportive communities. Ms. White next introduced the Continuing Care Strategy which is a framework that addresses the need for in-home and community-based services that support ageing in place, as well as addressing the shortage of long-term care beds.

The Presentation was concluded by giving the audience an insight into the wide variety of projects the Department of Senior Citizens is involved with. This includes the WHO Age-Friendly Cities Project, the Age-Friendly Rural and Remote Communities Project (an initiative of the Public Health Agency of Canada), the Positive Ageing Fund, the hosting of annual Spring and Fall Consultations, the organisation of the Silver Economy Conference (April 2009) as well as the development of the Action Plan for Positive Ageing.

Please see Appendix 15 for the full Presentation.

16. Ms. Margrethe Kaehler – DaneAge Association, Denmark – “How will older people live in the future?”

The presentation by Margrethe Kaehler of the DaneAge Association focuses mainly on the creation of new housing opportunities that fit the needs of the elderly. New challenges include the prices of new developments, expensive land for building, the lack of council housing built for families and holes on the country map in regards to care homes.

DaneAge`s vision is that nobody should need to move because their housing is hindering their chance of living life to the fullest, to create good social frameworks in the surrounding environment and that shopping and transport are available nearby. The road forward to achieving this is to create more “great homes”, to create more “intelligent homes”, to build more council homes for families and to legalize the sale of building ground for a reasonable price.

The presentation was closed by a display of outstanding, age-friendly architecture in Scandinavia.

Please see Appendix 16 for the full Presentation.

17. Ms. Terrie Alafat – Director – Housing and Planning Group Department of Communities and Local Governments, United Kingdom – “Lifetime Homes, Lifetime Neighbourhoods”

Poor housing results in poor health, as shown by statistics such as the 26.000 “excess winter deaths” last winter, which were caused mainly by illnesses connected to cold and damp conditions. 28% of older people live in “non-decent” or poor housing and 51% of them enter care homes after hospitalisation, as a return to home is not practical. The Prime Minister outlined three principles that underpin the National Strategy for Housing in an Ageing Society, these are: Prevention, through incentivising individuals and services to behave in long term economic interest for themselves and others; Empowerment, by promoting a genuine involvement in policy, services and communities, and giving older people the information and resources to take control and Personalisation through joining up services around what the persons need and want.

Research showed that early intervention in areas such as housing can be very effective in preventing hospital admissions. Through the "Predictive risk modelling Technology" it is possible to identify people a year before a care crisis. A better deal for older people has been created through improved advice and information, handyman schemes have been expanded and improved, supporting home improvement agencies have been established and the prevention technology has been improved vastly. Ms. Alafat continued to introduce today's palling policy framework which states that housing must be planned for older people and an ageing society, essential services and retail must be well located to housing and accessible, town centres must be accessible and inclusive and housing, shops and services should be accessible by public transport, walking and cycling.

Ms. Alafat concluded the presentation by introducing practical implementations to achieve "Lifetime Neighbourhoods". This includes paving and kerb design, access to public amenities, public toilets, street lighting, accessible public transport, appropriately located bus stops, disabled parking bays and green spaces.

Please see Appendix 17 for the full Presentation.

18. Ms. Jackie Prentice - Manitoba Health/Healthy Living Cross-Department Coordination Initiatives, Manitoba, Canada "Aging in Place – A Long Term Care Strategy in Manitoba"

Manitoba is expecting significant growth in the number of older people in the province over the next several years, especially with the onset of the baby boom generation. Previous policy arrangements had left 'gaps' in the system, with inadequate support for seniors, for social workers or for families, as well as a shortage of affordable housing. The government identified a need for comprehensive and integrated planning aligned with a sustainable health care system. In October 2005, the Central Government endorsed Aging in Place as the central principle guiding provincial housing and Long Term Care initiatives.

Aging in Place addresses the need for affordable housing as an alternative to premature placement in care facilities. Already there has been a number of Aging in Place initiatives put in place since 2006, including the Winnipeg Long Term Care Strategy/Aging in Place 5 year plan, and the rural and northern Long Term Care Strategy/Aging in Place. Manitoba has found a positive 'domino effect' occurring between individuals, communities and the health care system as various Aging in Place initiatives are put in place. However, Manitoba recognizes that there are no cookie cutter models, and more policy changes may be required in the future.

The expected outcomes resulting from the adoption of Aging in Place principles in Manitoba include increased affordable housing, enhanced home care services, improved bed allocation and a containment of costs.

Please see Appendix 18 for the full Presentation.

**Senior Officials Meeting Program
Ageing-in-Place**

Time	Session	Speakers
0800-0815	Registration	
0815-0825	Opening remarks and welcome	Mrs. Irene Hoskins President, International Federation on Ageing
0825-0840	Session 1: A New Global Paradigm Drivers of Change – Embracing Ephemerality	Dr. Chris Luebke Director, Global Foresight & Innovation Initiative, Arup
0840-1040	Session 2: Country Initiatives Hear from speakers that have been involved in the development of policies and programs that support successful ageing-in-place initiatives that improve the quality of life of older people and can reduce the financial burden on families and government.	Panel Presentations Chair and Discussant: Prof. Yitzhak Brick – Israel Ms. Susan Scotti – Canada Assistant Deputy Minister, Department of Human Resource and Social Development Dr. Erika Winkler – Austria Deputy Director Ageing Policies, Ministry of Social Affairs and Consumer Protection Ms. Mary Murnane – Australia Deputy Secretary, Department of Health and Ageing Mr. Edwin L. Walker – United States Deputy Assistant Secretary for Aging, United States Department of Health and Human Services Ms. Terrie Alafat – United Kingdom Director, Department of Communities and Local Government
1040-1100	Health Break	

1100-1300	<p style="text-align: center;">Session 3: Country Initiatives</p> <p>Hear from speakers that have been involved in the development of policies and programs that support successful ageing-in-place initiatives that improve the quality of life of older people and can reduce the financial burden on families and government.</p> <p>Also hear first hand the challenges faced by government from a developing country perspective in implementing effective ageing-in-place policy and practice. What action are being taken now and planned for the future!</p>	<p style="text-align: center;">Panel Presentations</p> <p>Chair and Discussant: Mr. Gordon Lishman – United Kingdom Ms. Gwenda Thomas – Wales Deputy Minister for Social Services Dr. Marián Hošek – Czech Republic Deputy Minister, Ministry of Labour and Social Affairs Prof. Yitzhak Brick - Israel Director General, ESHEL Mr. Meir Hazan – Israel Deputy Director General, Ministry for Pensioners' Affairs Mr. Wu Yushao – China Vice-President, China National Committee on Ageing Dr Jennifer A. Rouse - Republic of Trinidad and Tobago Division on Ageing, Ministry of Social Development</p>
1300 -1350	Lunch Break	
1350 -1530	Concurrent Sessions	
1350 -1530	<p style="text-align: center;">Concurrent Session 4a Ageing-in-place policies What are the key elements in successful policies</p> <p>Speakers will present an overview of the ageing-in-place policies and programs specific to their country and or/State Province. Following delegates will discuss and identify the key elements of successful policies.</p>	<p style="text-align: center;">Presentations</p> <p>Chair: Mr. Robert Reid – Australia Mr. Francesc Aragall i Clavé - Spain Design For All Foundation Mr. André Lépine – New Brunswick, Canada Senior and Healthy Aging Secretariat , Department of Social Development Dr Vu Thi Hieu – Vietnam Chief, Ministry of Labor, War Invalids and Social Affairs, Vietnam Committee on Ageing Mr. John Storey – Scotland Head, Older People and Age Team, Scottish Government</p>

1350 -1530	<p style="text-align: center;">Concurrent Session 4b Ageing-in-place policies What are the key elements in successful policies</p> <p>Speakers will present an overview of the ageing-in-place policies and programs specific to their country and or/State Province. Following delegates will discuss and identify the key elements of successful policies.</p>	<p style="text-align: center;">Presentations</p> <p>Chair: Mr. John Cox - Canada Ms. Jackie Prentice – Manitoba, Canada Team Lead, Manitoba Seniors and Healthy Aging Secretariat</p> <p>Mr. James Maclsaac – Victoria, Australia Executive Director , Department of Planning & Community Development, Seniors, Veterans & People With Disabilities</p> <p>Ms Sylvie Barcelo – Quebec, Canada Deputy Minister, Ministère de la Famille et des Aînés presented by Ms. Francoise Duranleau</p> <p>Prof. Toshihiko Hasegawa Japan Chairman, Department of Health Policy and Management, Nippon Medical School</p>
1350 -1530	<p style="text-align: center;">Concurrent Session 4c Ageing-in-place policies Models that yield success</p> <p>Speakers will present an overview of the ageing-in-place policies and programs specific to their country and or/State Province. Identify models that yield success and discuss strategies to move the ageing-in-place agenda forward in a developed country context.</p>	<p style="text-align: center;">Presentations</p> <p>Chair: Dr Grace Clark – Pakistan Ms. Valerie White – Nova Scotia, Canada Department of Seniors</p> <p>Ms. Lee So Chung – Korea Bureau of Ageing Society and Population Policy, Ministry for Health, Welfare and Family Affairs</p> <p>Ms. Ruth Marks – Wales Commissioner for Older People</p> <p>Ms. Margrethe Kähler – Denmark DaneAge Senior Policy Analyst</p>
1530-1600	<p style="text-align: center;">Session 5 Group reporting and moderated discussion</p>	<p>Moderator: Prof. Yitzhak Brick</p>
1600-1615	<p style="text-align: center;">Closing remarks and future actions</p>	<p>Mrs. Irene Hoskins</p>

Speaker Profiles

Ms. Terrie Alafat

**Director, Housing Strategy and Support Directorate, Housing and Planning Group - Department of Communities and Local Government
United Kingdom**



Terrie Alafat's academic background is in social policy and research. Before moving to the UK 20 years ago, she was involved in educational research and evaluation in Chicago schools.

Ms. Alafat began her career in the UK in social services policy development in a local authority and most recently was Director of Housing and Corporate Strategy in Kensington and Chelsea until 2002. She then moved to the Government Office for London with responsibility for housing and local government. She also had responsibility for a range of government programmes in the Thames Gateway.

Ms. Alafat has been involved in a number of national projects covering housing and community care issues, and has helped develop London-wide homelessness initiatives. She was a member of the Mayor's Housing Commission. She has also had responsibility for Homelessness and Supporting People since 2003. In October 2006, she became Director of Housing Strategy and Support for Communities and Local Government.

Ms Sylvie Barcelo

**Deputy Minister
Ministère de la Famille et des Aînés
Québec, Canada**



Sylvie Barcelo earned a master of business administration degree (MBA) from Université Laval in 1982. In March 2005, after having spent a year as associate secretary responsible for public service personnel at the Secrétariat du Conseil du trésor, she was appointed Deputy Minister of the Ministère de la Famille et des Aînés. Prior to these appointments she served for over ten years as vice-president, organizational services, at the Régie des rentes du Québec.

Mrs. Barcelo has held various positions at the headquarters of the Université du Québec, including those of associate director general of Presses de l'Université du Québec and director of the office of the vice-president, administration. She has also worked for Nortel as a senior financial analyst. From June 2002 to January 2004, she was the president of the Conseil des directrices et directeurs généraux de l'administration du gouvernement du Québec (CDGA).

Professor Yitzhak Brick
Director General
(ESHEL) Association for the Planning and Development of Services for the Aged in Israel, Israel



Prof. Yitzhak Brick has been Director General of JDC-ESHEL, the Association for the Planning and Development of Services for the Aged in Israel, since 1988. JDC-ESHEL was formed by JDC and the government of Israel three decades ago to respond to the critical challenges faced by the nation in meeting the needs of its older citizens. Prof. Brick also serves as President of the Israel Council on Social Welfare and as chairman of the Council of Social Work.

Prof. Brick came to JDC-ESHEL following a decade as Deputy Director-General of Israel's Ministry of Labor & Social Affairs - a position in which he was responsible for all of the Ministry's social welfare functions and determining policy for the country's social services on a national level. Always active in public organizations (he is a former coordinator of Jerusalem's Scout Movement, a former Director of Youth Activities for the Jerusalem Municipality and a former Director of the Elizur Sports Organization), Prof. Brick serves on a large number of national and international boards and committees concerned with social planning and care of the aged.

Born in Jerusalem, Prof. Brick lectures at Haifa University on Social Policy for the Elderly, and has also lectured on Social Service Management at Bar Ilan and Hebrew Universities. He studied Sociology and Education at the Hebrew University of Jerusalem, and has a Doctorate in Social Policy, Planning and Administration from Brandeis University. He lives in Jerusalem, and is married with three children and ten grandchildren.

Mr. Francesc Aragall i Clavé
President
Design for All Foundation, Spain



A graduate in therapeutic pedagogy from the University of Barcelona, Mr. Aragall i Clavé has developed his career in ergonomics, biomechanics, accessibility, and Design for All. Design for All is a concept which has been spread throughout Europe through the European Institute for Design and Disability (EIDD), for which Mr. Aragall i Clavé was President from 1998 to 2001. During the period of construction of the installations destined for the 1992 Olympic Games, he was responsible for urban accessibility, transport, and technical assistance for the Barcelona City Council until 1993, when he assumed the management of the Consorci de Recursos i Documentació per a l'Autonomia Personal (CRID).

Presently, he is a Lecturer for various Master and Doctorate courses at the University of Barcelona and Lisbon, member of the Barcelona City Council

Accessibility Working Group, Patron of the Barcelona Centre de Disseny (BCD), General Director of ProAsolutions and the Founder and the President of the Design for All Foundation.

Professor Toshihiko Hasegawa MD
Chairman
Dept of Health Policy & Management
Nippon Medical School, Japan



Toshihiko Hasegawa, M.D., MPH., Ph.D. is the Director of the Department of Health Policy & Management at Nippon Medical School. He had more than 20 years experience in international, government and academic work, including as technical adviser to WHO, management of Japanese national hospitals, health policy development with the Ministry of Health and Welfare and as visiting lecturer in several medical schools across Japan. He was the director of the Department of Policy Sciences at the National Institute of Public Health just before assuming his current position.

His research work focuses on international health, health policy, health sector reform, planning and evaluation of various health programs, hospital strategic management including marketing, customer satisfaction, quality management and patient safety. The current focus is to design health system for super aged society of Japan. He published many papers and books including *Hospital Strategic Management* that was translated in Korean, Thai, Russian, and Chinese. He holds a PhD in Medicine from the University of Tokyo, an MPH from the Harvard School of Public Health, an MD from Osaka University Medical School and a specialty board certification from the American Board of Surgery.

Mr. Meir Hazan
Deputy Director General
Ministry for Pensioners' Affairs, Israel



Mr. Meir Hazan was appointed the Deputy Director-General of the Ministry of Pensioner's Affairs in Israel in 2007. In this position, he is responsible for developing services for senior citizens. Mr. Hazan played an active role in the establishment of the Ministry as the initiator of the foundation unit of the Ministry in 2006. In 1989, Mr. Hazan opened two private homes for the aged in Nahariya in Northern Israel where he worked as general manager of the homes until 2006. His academic background is in practical engineering, business administration and nursing home management. He has currently finished his first year of studies in Law.

Dr. Marián Hošek
Deputy Minister
Ministry of Labour and Social Affairs, Czech Republic



Marián Hošek was appointed as Deputy Minister of Labour and Social Affairs in February 2005. In March 2006, he was appointed as a vice-chairman of the Government Council for Seniors and Population Ageing. At the Ministry, Mr. Hošek is responsible for social services and public administration. He is interested in social and family policy.

Mr. Hošek was born in 1950 in Bratislava. In 1975, he graduated in stomatology at the Medical Faculty of the Komenský University in Bratislava. In 1990, he obtained medical attestation in health sector managing and organisation. Between 1993 and 1995, Mr. Hošek was a member of the Managing Board of the VZP ČR (the General Health Insurance Company).

During the Velvet Revolution in 1989, Mr. Hošek was a spokesperson for the Civic Forum (OF) in the District National Health Institute in Prague 6. Between 1990 and 2006, he was actively involved in municipal politics as a member of the Assembly of the City of Prague. In December 2007, Mr. Hošek was elected a vice-chairman of the Christian Democrats (KDU-ČSL).

Mr. Hošek's personal credo is decency in politics. His professional goal is a more family-friendly society, professional social services provided with dignity and respect, and equitable financing of social services. Mr. Hošek is married and has 7 children.

Dr. So-Chung Lee
Research fellow, Population Aging Research Team,
Korea Institute for Health and Social Affairs, Republic of Korea



So-Chung Lee has devoted sixteen years of her life to studying social welfare policies. In 1993, she began her academic career at Seoul National University until she received a doctorate degree in February, 2007. While she was still a student, she gained various experiences that helped her build a career as policy researcher. In the year 2000, she worked as a research assistant of the Presidential Committee for Improving Quality of Life; this was during the Kim Dae-Jung government, a period of welfare expansion in Korea. There, she contributed to various projects concerned with "Productive Welfare", a conceptual framework of Kim Dae Jung government welfare policies. In 2001, she worked as a researcher at "Seoul Self-help Agency" where she conducted projects on unemployment and self-help policies.

Since April 2007, she has worked as a research fellow at Korea Institute for Health and Social Affairs. She also gives lectures at many of the acknowledged

universities in Korea, such as Hallym University, Soongsil University, Sejong University and Seoul National University. Her research includes issues such as poverty, ageing, inequality, social inclusion, etc.

Ms. Margrethe Kähler
Senior Policy Analyst
DaneAge, Denmark



Margarethe Kähler is responsible for housing policy at the Dane Age Association, a large member-based organisation with more than 500,000 members across social groups, ages and political attitudes.

Ms. Kähler is responsible for political cooperation with Parliament, government departments, municipalities, local senior councils and other agencies in Denmark. She is also responsible for housing surveys undertaken by DaneAge and cooperates closely with the press.

Ms. Kähler is author of a pamphlet for housing policy that is specially focussed towards politicians in Parliament and municipalities, and she published the handbook "All times housing – prepare your house for a long life" about how you can future-proof your house. Ms. Kähler has also written and contributed to many professional articles about housing, dementia, living arrangements, etc. She has a university degree in Law and Gerontology.

André Lépine
Director, Senior and Healthy Aging Secretariat
Department of Social Development, Province of New Brunswick, Canada



André Lépine is the Director of the newly created Senior and Healthy Aging Secretariat under the Department of Social Development in the Province of New Brunswick. In his role as Director, Mr. Lépine's responsibilities focus on developing strategies to help seniors remain healthy, active, independent and socially engaged for as long as possible and to oversee the coordination of the province's 10-year long term care strategy, Be Independent Longer. He is also responsible for Secretariat functions related to the mandate of the Minister of State for Seniors.

André Lépine previously held positions as a Probation and Parole Officer and as a Family Court Director. He has also held various management positions such as Interdisciplinary Team Director, Regional Director and Program Manager. In 1997, he was appointed to the position of Provincial Director for Adults with Disabilities and Senior Services.

André was a pivotal player in the provincial review of the Level of Care Policy for residents of Special Care Homes in New Brunswick and as a member of the Disability Framework Working Group. He was also involved in the development of New Brunswick's Long-Term Care Strategy which will see government set

priorities in long-term care for the next 10 years. He holds degrees from the University of Montreal (B.A.) and the University of Ottawa (M.A. in Criminology).

Dr Chris Luebke
Director
Arup Foresight Innovation and Incubation
United Kingdom



Chris Luebke refuses to be categorized. He has constantly, and consistently, occupied the 'spaces between' professions. He utilizes his enthusiastic belief in our Zeitgeist in his current position as Director for Global Foresight and Innovation at the Arup headquarters in London.

His experiences have enabled him to specialize in being a generalist with a view to being "in league with the future." He was listed as one of the ten futurist speculators and shapers "who will change the way we live", in Wallpaper Magazine, July/August 2002. As an educator, he taught in the Departments of Architecture at the Swiss Federal Institute of Technology [ETH] in Zurich, the University of Oregon, the Chinese University of Hong Kong, and at the Massachusetts Institute of Technology [MIT].

Since 2003, Chris and his team (Arup Foresight, Innovation + Incubation) have conceptualized and facilitated over 60 workshops worldwide, including Singapore, Australia, Switzerland, Russia, USA, Holland, and the UK, that explore the potential impact of leading drivers of change on the future of business. Over the years, the workshops have involved over 4000 participants, who have contributed to challenging the official futures and how they relate to different areas of business, including the retail and hospitality sectors. As well as assessing emerging trends and technologies, a series of workshops specializing in the future of the hotel explores how foresight by design can lead to enhanced business results. Research results have been visualized in creative outputs, including drivers of change cards and other innovative publications. Building upon insights gained from these events, Chris and his team have created a holistic body of knowledge that aims to inspire the future of business and advance the development of a sustainable built environment.

Mr. James MacIsaac
Executive Director
Department of Planning & Community Development, Victoria, Australia



Mr. James MacIsaac has been the Executive Director, People and Communities, within the Victorian State Government Department of Planning and Community Development since October 2007. This role includes responsibility for the Office of Senior Victorians along with a range of other population policy groups, focusing on youth, disability and women. Mr. MacIsaac has worked in a number of other similar senior roles within the Victorian Government since early 2005.

Prior to this Mr. MacIsaac worked for the Australian Government Department of Veterans' Affairs in a variety of roles for 12 years including senior management roles in the areas of health administration, ageing policy and client service.

Mr. MacIsaac has a Bachelor of Arts from the University of Melbourne (1991) and an Executive Masters in Public Administration from the Australian and New Zealand School of Government (2005).

Ms. Ruth Marks
Commissioner for Older People
Wales



Ruth Marks took up her post as the Older People's Commissioner for Wales on 21st April 2008. She is independent of government and her role is to champion, promote, safeguard and protect older people in Wales. Ruth has legal powers to investigate many public bodies in Wales, offering a scrutiny and challenge function.

Ruth's previous appointments include Director of RNIB Cymru, Royal National Institute of Blind People, 2005-2008 and Chief Executive of Chwarae Teg, a women's economic development agency, 1999-2005. Ruth's professional career includes human resource and change management, equality and diversity management, corporate social responsibility and business development.

Ruth holds a number of voluntary appointments and was awarded the MBE in the Queen's Birthday Honours 2007 for services to welfare to work.

Ms. Mary Murnane
Deputy Secretary
Department of Health and Ageing, Australia



Ms. Murnane has worked as a Primary and High School Teacher, University Tutor and Public Servant in Tasmania. She joined the Commonwealth Department of Social Security in 1984 as head of the Office of Child Care. This was a time of significant structural change in the Public Service. In 1985, the Department of Community Services was created and she had responsibility for Child Care, Supported Accommodation, and Home and Community Care. In 1987 the Government established much larger Departments, one being the Department of Community Services and Health. Over a number of years Ms. Murnane's responsibilities changed and grew and in 1990 she took up responsibility for a new Division that brought Residential and Community Aged Care together. In 1994, she was appointed Deputy Secretary of a further expanded Department and her responsibilities included Housing, Regional Development, Local Government, Disability Services as well as Aged Care.

Her responsibilities currently are Office of Health Protection including Health Emergency; the Regulatory Policy and Governance Division with a special focus on: Therapeutic Goods Administration, Office of Gene Technology Regulator, Food Standards Australia and New Zealand, Food Policy, Medical and Biological Research Policy, National Blood Authority as well as Ageing and Aged Care and Palliative Care.

Ms. Murnane also has responsibility for the policy aspect of medical and biological research. She chairs the Australian Health Protection Committee which advises the Australian Health Ministers Council on emergency preparedness; this Committee also manages the emergency health component of national emergency, interfaces with other Commonwealth and state emergency handling structures, and interfaces with exercises, leadership and co-ordination roles in national emergencies requiring a health response. Ms. Murnane is a member of the National Blood Authority Board.

Ms. Jackie Prentice
Team Leader
Cross Department Coordination Initiatives
Seniors and Healthy Aging Secretariat, Manitoba, Canada



Jackie Prentice is currently Team Lead with the Cross-Department Coordination Initiative (CDCI) with the government of Manitoba. CDCI's mandate is to identify and review housing-related policies, programs and services that lack coordination, and propose enhancements or alternatives to improve policy coordination and service delivery. CDCI's initial focus is on housing and supports for seniors, homeless and individuals with mental health issues. Jackie's primary focus is on implementation of the Long Term Care strategy –

Ageing in Place in Manitoba. Jackie has over twenty years experience in policy planning and program development in the areas of residential and community care.

Dr Jennifer A. Rouse
Director
Division on Ageing, Ministry of Social Development
Republic of Trinidad and Tobago



Dr. Jennifer Rouse was born and grew up in Trinidad. Two weeks after graduating from Bishop Anstey High School in 1971, she began her first job in LIAT as an Accounts clerk. Little did she know that she would spend twenty-seven of her subsequent years working in the field of Accounts, in two other airlines – Trinidad and Tobago Airbridge Service (TTAS), and the national airline, BWIA.

In March 1996, a Trinidadian professor in Washington, D.C. encouraged her to apply to the University of Maryland, Baltimore County (UMBC),

which was a 4-year degree college. Within two years, Dr. Rouse completed a double major in Social Work and Africana Studies, and graduated with a Bachelor's degree (cum laude) in May 1998. In the fall of 1998, Dr. Rouse began her Graduate studies, and while pursuing the Masters programme, she applied to the doctoral programme in the same field. In 2000, she was accepted into the Public Policy in Ageing Programme, and deferred her Masters degree by one year, in order to complete the coursework for both the Masters and doctoral programmes simultaneously.

In August 2003, before completing her doctoral dissertation, Dr. Rouse relocated to Trinidad, to assume duties as the country's first Director of the Division of Ageing, in the Ministry of Social Development. In spite of the ground-breaking exercise and the unforeseen challenges involved in establishing this new Division, Dr. Rouse was able to complete the final two chapters of her thesis and successfully defend it in November 2003 at UMBC.

Dr. Rouse graduated in May 2004, and the following month represented the Government at the UNECLAC Ad-Hoc Committee Conference on "Population, Aging and Development." She presented a country report, which identified specific targets and mechanisms proposed by the Government, to position aging on the national agenda. Dr. Rouse has proposed many new projects, programmes and ageing initiatives, and hopes to see most of them implemented in the coming years.

Ms. Susan Scotti
Senior Assistant Deputy Minister
Income Security and Social Development Branch
Department of Human Resources and Social Development
Canada



Susan Scotti has been Senior Assistant Deputy Minister, Income Security and Social Development Branch, Human Resources and Social Development Canada (HRSDC)/ (SDC) since December 2004 and prior to that she was ADM, Income Security Programs, at Human Resources Development Canada (HRDC) since February 2003. Ms. Scotti was appointed Vice President of the International Social Security Association in November 2004.

Ms. Scotti first joined HRDC as Associate Assistant Deputy Minister, Human Resources Investment Branch, in 1998 and became the Assistant Deputy Minister for Homelessness in March 2000. From 1994 to 1998, Ms. Scotti served as Director General of the Citizens' Participation and Multiculturalism Branch within the Department of Canadian Heritage. She was previously Director General of the Broadcasting Policy Branch of the Department of Communications.

During her career in the federal government, Ms. Scotti has been responsible for the management of a broad range of national social policies and delivery of

national programs relating to broadcasting, Canadian identity, youth participation, aboriginal issues, multiculturalism, human rights, persons with disabilities and the homeless.

Ms. Scotti joined the federal government in 1973. She has held a wide array of positions with the departments of the Secretary of State, Indian Affairs and Northern Development, Canadian Heritage and the Privy Council Office. Prior to joining the public service, Ms. Scotti practiced social work in Toronto. She holds Bachelor of Arts and Master of Social Work degrees from the University of Toronto.

Mr. John Storey
Head Older People and Age Team
Scottish Government, Scotland



Mr. Storey is the Head of the Older People and Age Team for the Scottish Government. Responsible for All Our Futures: Planning for a Scotland with an Ageing Population (March 2007), which is the strategic framework for older people's issues in Scotland, dealing with the issues around the demographic ageing of the population. John also has the policy lead on Age Discrimination issues in Scotland.

John spends a considerable amount of his time engaging with older people and their representative organisations. He also chaired the Range and Capacity Review Group, whose report, The Future Care of Older People in Scotland, was published in May 2006

Ms. Gwenda Thomas
Deputy Minister for Social Services
Department for Health and Social Services
Wales



Born in 1942, Gwenda Thomas was previously a Civil Servant and Chair of Social Services Committees of West Glamorgan CC and Neath Port Talbot CBC, former Community Councillor, Chair of the Governing Body Gwaun Cae Gurwen Primary School. She was also Chair of West Glam Campaign for a Welsh Assembly and Vice Chair "Yes for Wales", Neath. Her interests include health, social services and the rights of carers and children, childcare and the voluntary sector. She is

a fluent Welsh speaker. Gwenda was appointed as a Deputy Minister with special responsibility for social services in May 2007.

Responsibilities in relation to ageing include: Policy on care in the community; Oversight of all other social services activities of local authorities in Wales including the issuing of statutory guidance; Oversight of the Care Council for Wales; Regulation of residential, domiciliary ,adult placements, foster care

,under 8`'s care provision and private healthcare in Wales; Cross cutting responsibility for health improvement and older people and carers; and Older People's Commissioner for Wales.

Mr. Edwin L. Walker
Deputy Assistant Secretary
Administration on Aging (AoA), United States



Edwin L. Walker serves as Deputy Assistant Secretary for Policy and Programs with the Administration on Aging (AoA), and is responsible for cross-cutting policies, programs and initiatives aimed at improving the lives of older people.

Prior to joining AoA, Edwin served as the Director of the Missouri Division of Aging responsible for administering a comprehensive set of human service programs for older persons and adults with disabilities. These included the Older Americans Act; the Alternative Services Program for home and community-based care; the Institutional Services Program for licensing, surveying and certifying long-term care facilities; and the Protective Services Program for the investigation of complaints of abuse, neglect, and exploitation. His experience prior to this time was with the Missouri Department of Social Services and included administrative law and rulemaking, policy development and analysis, legislation, advocacy, planning and evaluation.

He received a J.D. degree from the University of Missouri-Columbia School of Law and a B.A. in Mass Media Arts from Hampton University. He has served on a number of boards, commissions and advisory councils in the human services arena. As a spokesperson and Secretary of the Board of Directors for the National Association of State Units on Aging, he represented the interests of States before Congress during hearings on the reauthorization of the Older Americans Act.

Ms. Valerie White
Chief Executive Officer
Department of Seniors, Nova Scotia, Canada



Ms. White is a native of New Ross, Lunenburg County. She is a Registered Social Worker with more than thirty years of public service in direct social work and social policy and planning.

She was appointed Executive Director of the Seniors' Secretariat in 2000, having served as Coordinator of the Secretariat from 1980-2000. The Seniors' Secretariat develops plans, policies and programs with other levels of government and agencies, and serves as a one door entry to government for seniors, seniors' groups and other provincial bodies concerned with aging issues. She works closely with the provincial government departments, seniors and seniors' organizations and professional organizations concerned with aging. She

represents Nova Scotia on the Federal/Provincial/Territorial Committee of Officials for the Ministers Responsible for Seniors.

She has chaired Provincial and National Conferences on Aging and served on the Canada Coordinating Committee for the International Year of Older Persons. Ms. White has contributed to numerous publications and policy papers and has guest lectured on aging issues at several Nova Scotian universities.

Dr Erika Winkler
Deputy Director, Federal Ministry of Social Affairs and Consumer Protection
Unit for Principles of Ageing, Population and Volunteering Policies, Austria



Erika Winkler completed her university studies on social, economic and modern history at the University of Vienna in 1982 and has worked as a freelance journalist. From 1984, she was employed as Head of the Sub-department of International Family Policies within the Federal Ministry of Environment, Youth and Family Affairs, Department of Family Policy Issues. She became Deputy Director in 1995.

In 1997, Dr. Winkler became Deputy Director of the Centre for Population and Ageing Policies, in charge of international ageing policies such as the International Year of Older Persons, the Madrid International Plan of Action on Ageing and UNECE Regional Implementation Strategy, and Mainstreaming Ageing and Active Ageing. Since 2001, Dr. Winkler has served as Deputy Director of the Centre for Ageing, Population and Volunteering Policies, coordinating the International Year of Volunteers and follow-up activities, Citizen's centres for Young and Old, Corporate Social Responsibility, Pilot project ACTO Active Together, Education and Further Education of Volunteers and Managers of Volunteers, and Austrian Volunteer Pass. She is also Deputy Executive Secretary of the Council on Voluntary Work.

Mr. Wu Yushao
Vice President, China National Committee on Ageing, China



Born in 1962, Mr. Wu is the vice president of China National Committee on Ageing as well as an associate professor.

During 1979 and 1983, Mr. Wu studied at Xiamen University in Fujian Province. From 1983 to 1998, he had his first job in the Ministry of Civil Affairs. He worked as the Vice President of China Civil Affairs College during 1998 and 2005, and now serves as the Vice President of the CNCA.

Mr. Wu's research covers a variety of fields, including civil affairs management, disaster relief, social work, and ageing. He has published over 100 academic

papers, and collaborated on the compilation of the *Dictionary of China's Civil Affairs, Civil Affairs in Contemporary China, and Theory and Practice of Civil Affairs Management*. Altogether, his works has reached over 1 million words.

He is now researching issues related to ageing as part of his Ph.D. at Beijing Normal University.

Participant Confirmations

Name	Title/Position	Department	Country
Ms. Kiesha Gumbs	Social Development Planner	Department of Social Development, Ministry of Social Development	Anguilla
Ms. Mary Murnane	Deputy Secretary	Federal Department of Health and Ageing	Australia
Ms. Melinda Bromley	Assistant Secretary	Office for an Ageing Australia, Department of Health and Ageing	Australia
Ms. Pamela Rutledge	Executive Director	Office for Ageing & Equity, Department of Ageing, Disability & Home Care – New South Wales	Australia
Mr. Telmo Languiller MP	Parliamentary Secretary	Ministry of Human Services and Member for Derrimut	Australia
Mr. James MacIsaac	Executive Director	Department of Planning & Community Development - Seniors, Veterans & People With Disabilities	Australia
Dr. Erika Winkler	Deputy Director	Ageing Policies, Ministry of Social Affairs and Consumer Protection	Austria
Ms. Azemina Vukovic	Assistant Director	Directorate for Economic Planning, Council of Ministers	Bosnia and Herzegovina
Mr. T.Y. Raphaka	Permanent Secretary	Ministry of Local Government	Botswana
Hon. Dr. Margaret Nasha	Minister	Ministry of Local Government	Botswana
Ms. Tshenolo Florence Omphitlhetse	Director	Department of Social Services	Botswana
Ms. Susan Scotti	Assistant Deputy Minister	Department of Human Resource and Social Development	Canada
Mr. John Cox	Manager, Policy Planning & Evaluation	Division of Aging and Seniors, Public Health Agency Canada	Canada
Mr. Ian Melzer	Manager, Housing Needs	Policy & Research, Canada Mortgage and Housing Corporation (CMHC)	Canada
Mr. Ralph Hubele	Manager	Health/Housing Initiatives, Seniors and Community Supports - Alberta	Canada
Mr. Matt Herman	Director	Healthy Aging and Injury Prevention, Ministry of Health – British Columbia	Canada

Ms Jackie Prentice	Team Lead	Manitoba Seniors and Healthy Ageing Secretariat	Canada
Ms. Susan Crichton	Elder Abuse Consultant	Manitoba Seniors and Healthy Ageing Secretariat	Canada
Hon. Eugene McGinley	Minister	Ministry of State for Seniors and Housing - New Brunswick	Canada
Mr. André Lépine	Director	Senior and Healthy Ageing Secretariat, Department of Social Development – New Brunswick	Canada
Ms. Suzanne Brake	Director	Ageing and Seniors Division, Department of Health & Community Services - Newfoundland	Canada
Ms. Valerie White	Chief Executive Officer	Department of Seniors - Nova Scotia	Canada
Hon. Carolyn Bolivar-Getson	Minister/Chair	Ministry of Seniors/Senior Citizens' Secretariat - Nova Scotia	Canada
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Mr. Michael Burgess	Director	New York State Office for the Aging	United States
Mr. Edwin Walker	Deputy Assistant Secretary for Policy and Programs	Department of Health and Human Services – Administration on Aging	United States
Mrs. Vu Thi Hieu	Chief of Secretariat	Vietnam Committee on Ageing	Vietnam
Mr. Nguyen Duc Hoan	Deputy Chief of Secretariat	Vietnam Committee on Ageing	Vietnam
Mr. Nguyen Chi Truong	Administrative Officer	Ministry of Labor, War Invalids and Social Affairs	Vietnam
Mrs. Trinh Thi Thao	Senior Officer	Ministry of Labor, War Invalids and Social Affairs	Vietnam
Ms. Ruth Marks	Commissioner	Commissioner for Older People	Wales
Ms. Gwenda Thomas	Deputy Minister for Social Services	Department of Health and Social Services	Wales
Mr. Leon Rees	Private Secretary	Private Secretary to the Deputy Minister for Social Services	Wales
Ms. Andrea Nicholas-Jones	Head	Older people in Wales Strategy Unit	Wales

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Appendix – Speeches and PowerPoint Presentations

1. [Dr. Chis Luebkehan, ARUP](#)
2. [Ms. Susan Scotti, Canada](#)
3. [Dr. Erica Winkler, Austria](#)
4. [Ms. Mary Murnane, Australia](#)
5. [Mr. Edwin Walker, United States of America](#)
6. [Ms Gwenda Thomas, Wales](#)
7. [Mr. Vu Thi Hieu, Vietnam](#)
8. [Mr. John Storey, Scotland](#)
9. [Mr, Mu Yishao, China](#)
10. [Mr. Marián Hošek, Czech Republic](#)
11. [Dr Yitzhak Brick & Mr. Meir Hazan, Israel](#)
12. [Mr. André Lépine, New Brunswick, Canada](#)
13. [Mr James MacIsaac, Victoria, Australia](#)
14. [Professor Toshihiko Hasegawa, Japan](#)
15. [Ms. Valarie White, Nova Scotia, Canada](#)
16. [Ms. Margrethe Kaehier, Denmark](#)
17. [Ms. Terrie Alafat, United Kingdom](#)
18. [Ms. Jackie Prentice, Manitoba, Canada](#)