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MS-603: Rabbi Marc H. Tanenbaum Collection, 1945-1992.

Series E: General Alphabetical Files. 1960-1992

Box 77, Folder 3, Aging, 1979-1981.

the
White House
Conference
on
Aging

330
Independence
Avenue
S.W.
Washington,
D.C.
20201

August 20, 1980

Rabbi Marc H. Tanenbaum
National Director
Interreligious Affairs
The American Jewish Committee
Institute of Human Relations
165 East 56 Street
New York, N.Y. 10022

Dear Marc:

I was quite impressed with your letter of August 1 and the suggestion that we bring together a group of major thinkers and personalities who could help establish a broader context of issues within which the aging issues should be considered. It startles me to read your letter as you have outlined that thought and to note the parallels between my own thinking and actions within that letter.

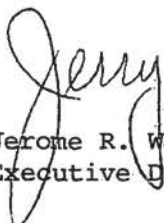
I am enclosing a copy of the letter I have written Dr. Butler who intends to contact on our behalf, Norman Cousins in that very regard.

You will note the language of my letter to Dr. Butler is almost identical to the language you have used in your letter.

If we are able to encourage Norman Cousins to do the initial work on such a paper it is our further intention to convene a group of thinkers to respond to his paper sometime in May or June of '81 as a major media kick-off event to the national phase of the Conference.

When you have returned from your vacation I would hope that we could get together to discuss this project further. I personally consider it one of the major endeavors of this Conference.

Sincerely,


Jerome R. Waldie
Executive Director

August 5, 1980

Dr. Robert N. Butler
Director
National Institute of Aging
9000 Rockville Pike
Bethesda, Maryland 20014

Dear Bob:

While the agenda of the White House Conference necessarily will focus on the problems and needs of older people, we would like to see these matters related to the broad picture of evolving world conditions and their possible implications for American life. We think that the development of such perspectives is sound, because both governmental and private sector decision-makers in their respective roles necessarily must understand and weigh a wide variety of current and evolving factors that bear on determinations of priorities, resource allocations, and other questions in arriving at future social and economic policies.

Specifically, we are interested in helping the Conference participants, policy-makers, and the public secure more understanding and perhaps new perspectives relative to opportunities and problems potential in the developing economic and social environment of the U.S. and the world in the next decade or so. The on-coming developments need clearer identification and definition, and we must learn more of their implications and interactions. I am referring here to such factors as demographic changes, changing roles of the sexes, greater longevity, improved health and education, causes of world tensions, international immigration, the claims of security budgets on national resources, changing concepts of work life and retirement, international markets and prospects in relation to long-term U.S. and world labor market shifts. To cope with this array of developments and factors, we will need to reappraise and perhaps develop new divisions of labor among governmental institutions, private institutions, and individuals.

My purpose in writing to you is to enlist your help in finding an author/commentator who can develop these themes and draw out of them ideas, conclusions, and assessments that would have great value in helping to focus Conference and public attention on the backdrop of evolving world conditions that will profoundly affect our society in the next decade.

Dr. Robert N. Butler
August 5, 1980
Page 2

I might say that the central concern of the commentary should not be the aged population. Rather, it should describe a broader context in which the subject of aging and the aged is an important component. We start from the assumption that the older population in all of its variety will be impacted in many ways by evolving world conditions.

If the commentary is to have its intended value it should be in my hands by May 15, 1981. I want to use it to set a broad foundation for the delegates to the White House Conference on Aging and their work. We will give the commentary broad media attention as well as provide copies of it to all delegates, observers, and other Conference participants.

We are prepared to compensate the author and to provide funds for consultant and other help, as needed.

I would appreciate very much your views on the assignment and any suggestions for enlisting the interest and support of people you believe are well qualified to develop the desired commentary. I think you can see we are not seeking to develop new knowledge here so much as synthesis and assessment of available and emerging knowledge.

With all best wishes,

Sincerely,

Jerome R. Waldie
Executive Director

JRW:mc

FIFTY PLUS
Jeff Gorkin, Editor
850 Third Ave. (13th floor)
New York, N. Y. 10022

"CAST ME NOT OFF IN MY OLD AGE..."

by Marc H. Tanenbaum

(Rabbi Tanenbaum, national interreligious affairs director of the American Jewish Committee, served as vice-chairman of the White House Conference on Aging in 1961 and is a member of the planning committee for the 1981 White House Conference on Aging.)

"Old age is not a defeat but a victory, not a punishment but a privilege, In education we stress the importance of the adjustment of the young to society. Our task is to call for the adjustment of society to the old."

Those penetrating words were spoken by my late blessed teacher and friend, Rabbi Abraham Joshua Heschel, the great Jewish theologian, (To Grow in Wisdom) during a memorable address/he delivered before the 1961 White House Conference on Aging.

What Rabbi Heschel said then in his paper on the convictions of Judaism toward the aging is as relevant today as it was then, only more so. For America is quickly becoming an "aging" society - today, the nation's elderly population exceeds 24 million; by the year 2030, the Census Bureau estimates that the elderly population will total 55 million, more than twice the number of senior citizens in ~~in~~ 1977. The aging of America thus presents our society with problems it has never before encountered on such a compelling level of magnitude.

Both as Americans and as Jews, we face a twin problem: the attitude of society to the old and old age, as well as the attitude of

the ~~old~~ to being old.

America is a youth and achievement oriented society, dominated by competitiveness and production of material goods. Judaism (and Christianity) need to help all Americans realize that the worth of a person is not to be measured by his or her usefulness to society, but rather that a human being is valuable in himself or herself. As Rabbi Heschel put it, "Just as the grandeur of the sun or an oak tree is not reducible to the functions it fulfills, so is the grandeur of human life not reducible to the needs it is capable of satisfying."

The Talmud proclaims, "Dear to God is the honoring of father and mother, for Scripture employs the same expressions about honoring and revering parents as about honoring and revering Himself." There is no reverence for God without reverence for father and mother.

To this dignity of human life, Jewish tradition calls for special honor to be accorded to our senior citizens: "You must rise up in the presence of the hoary-headed, and defer to the aged..." (Leviticus 19:32).

Thus, the most profound contribution Judaism and Christianity have to make is to help bring about a fundamental revision of basic attitudes of our society to the aged. Care for the ~~old~~ old is still regarded as an act of charity; it must rather become an act of reverence, of The Rabbis declared that a society should be ready to sell, if need be, supreme privilege. the sacred objects from its houses of worship in order to help one sick person, the old, the incurable, the helpless. The test of a civilization is how it behaves toward its senior citizens.

But if honor attaches to old age, Sacred Scriptures also recognizes that length of days may bring moments of doubt and anguish. "Do not cast me off in my old age," the Psalmist cried, "when my strength fails do not forsake me." For too many, old age often is an age of anguish, of inner emptiness, loneliness, and boredom. The fear of being considered old, of

Thus, the most profound contribution Judaism and Christianity have to make is to help bring about a fundamental revision of the basic attitudes of our society to the aged. Care for the old is still regarded as an act of charity; it must rather become an act of reverence, of supreme privilege as it has been in most ancient high civilizations. The Rabbis declared that a society should be ready to sell, if need be, the sacred objects from its houses of worship in order to help one sick person, the old, the incurable, the helpless. Reverence for our senior citizens must in fact become an essential part of elementary education at school and, above all, in every home. In the last analysis, the test of a civilization is how it reverences the grandeur of human life and ^{especially} how it behaves toward its senior citizens.



being useless and rejected by family and society, is a traumatic obsession.

The only answer to such anguish is a sense of significant aging. Old age, as Rabbi Heschel wrote, involves what to do with privacy. Authentic human existence for the aging - as for all the ages of man - includes both work and worship, utilization and celebration.

Recreation, ~~is not~~ the mere killing of time, is no substitute for celebration, and hobbies are no exchange for ritual. It should be a matter of common concern to all religious congregations that older members be brought into the fullest possible participation in religious services and liturgy. Ritual is not only the vehicle of individual or group worship, but also an expression of the meaning of life, of the religious interpretation and celebration of life that enables the senior citizen to cope with disappointment and failure, with evil, and with death itself.

Religion can also strengthen the older person's awareness of community in a caring congregation - of sharing friendship and affection and experiences in common. Above all, religious community can help deepen the spiritual growth of the aging. For ritual and prayer enable human beings to remain open to the wonder and mystery of existence, to lend a touch of glory to daily deeds.

Old age must not be regarded as the age of stagnation intellectually, but as the age of opportunity for inner growth. One ought to enter old age the way one enters the senior year at a university, in exciting anticipation of consummation.

Where the older members of a congregation can still assist in the congregation's religious rites or services, it should be a matter of common concern that they be brought into the fullest possible participation in any service of liturgy. Ritual is not only the vehicle of individual ~~and~~ ^{or} group worship, but also a profound meaning as an expression of a religious interpretation of life that enables the senior citizen to cope with failure, evil, and death itself.

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At every home for the aged there is a director of recreation in charge of physical activities; there ought to be also a director of learning in charge of intellectual activities. We insist upon minimum standards for physical well-being, what about minimum standards for intellectual well-being? Being old is not the same as being stale

What the nation needs is senior universities, universities for the advanced in years where wise men should teach the potentially wise, where the purpose of learning is not a career, but where the purpose of learning is learning itself. Wisdom is the substance upon which the inner security of the old will forever depend. But the attainment of

It is in the days of our youth that we prepare ourselves for

of a lifetime age. Education for retirement is a life long process.

Wisdom is
the work
of a lifetime

1981 WHITE HOUSE CONFERENCE ON AGING

Technical Committee on the Media

Rabbi Marc H. Tanenbaum, Chairman

I. Introduction

A. KEY AREAS TO BE ADDRESSED BY THE MEDIA COMMITTEE

As indicated in the minutes of the July 28, 1980 meeting of the Media Committee, we ~~EXERCISE~~ seek to examine the following themes:

- A. The media as a central and decisive instrument for forming and establishing cultural values and role models.
- B. The role of older people as consumers of the content of the media.
- C. The role of older people as participants in producing the education, information, and entertainment content in the media.
- D. The possible ^{meanings} meanings of new media technologies for the lives of older people.

B. The Committee is charged with ~~the~~ responsibility to prepare a final report to the White House Conference on Aging by Feb. 1, 1981. The report is expected to include the following elements:

- a) 1. A summary of research findings on the present state of the portrayal of elderly people in the media, as well as of efforts being undertaken to improve that presentation in terms that the elderly define as authentic and representative.
- b) 2. A detailing of unmet needs as defined by representative elderly groups as well as by representatives of the media, including advertising marketing research specialists.
- c) 3. A prospective look into the 1980s with a view toward anticipating how changing political, social, and cultural forces might affect progress in the field of media and aging.

2. Identify and offer specific recommendations regarding alternative courses of action available to our society - both public and private - for dealing constructively with the issues and defined needs.

II. PHASES OF THE WORK PLAN

Phase One (Sept. 1-Nov. 15)

The goal of this phase would be to prepare an interim report for the Committee ~~presenting~~ outlining some future directions and programs in the area of media and the aging.

Task 1. Defining needs in gathering essential data and information - this would involve identification of key agencies, resource people, and research banks as repositories of vital information.

Task 2: Assemble, Summarize, and Evaluate data and information - this task would consist mainly of relying on specialists in the fields to gather relevant information, summarize consensus findings, and identify unmet research needs.

Task 3: Preparation of Phase One report - this task would involve the summarizing of relevant findings and conclusions gathered in Task 2 into a report as the basis for further Committee deliberations.

Option 1: A one-day meeting of the ~~xxxx~~ Media Committee would be held to review the Phase I report and to provide directions to staff and consultant for further policy options for program.

Task ~~3~~ (p. 1) - Convene a ~~two-day~~ one-day meeting of media specialists - TV, print media, advertising, market research with a view toward gathering an overview of the best available information and insight about media and the aging

Task ~~4~~. A similar conference on new technologies and the aging
Option 2: To mail out a copy of the Phase I report to committee members for review, comments, and further recommendations.

PHASE TWO (Nov 15-Dec 30)

In this phase the Media Committee might want to explore basic policy alternatives relating to the problems and issues growing out of Phase I.

Task 5: Based on fresh needs and issues ~~and~~ identified by this time, Consultant and staff may wish to recommend further studies or working papers in key areas that might contribute innovative approaches to compelling needs that are identified in this process.

Option: Committee meeting week of Nov 17.

Phase Three: (Dec. 30 - Jan 30) Preparation of Final report

This phase would be devoted to the preparation of the Media Committee's final report which would summarize conclusions/emerging out of Phases I and II ^{or insights}

Task 6: Preparation of Draft Final report - based on materials and reflections emerging from the last two meetings, the staff/consultant would prepare a draft final report for review by the Committee. A draft final report ~~should~~ would be provided to each member of the committee at least one week prior to the formal Committee review meeting (week of Jan 5, 1981)

Task 7: Prepare Final Report - This final task would be devoted to incorporating revisions of the draft report as agreed upon by the committee members.



THE SECRETARY OF HEALTH AND HUMAN SERVICES
WASHINGTON, D.C. 20201

AUG 1 1980

Rabbi Marc Tannenbaum
Director of National Inter-
Religious Affairs
165 E. 56th Street
New York, New York 10022

Dear Rabbi Tannenbaum:

I am delighted to invite you to serve on the 1981 White House Conference on Aging Technical Committee, Office of Human Development Services for a term beginning immediately and ending when the Conference is terminated, subject to prescribed appointment procedures and to periodic review of the Committee's function.

Enclosed is a copy of the charter which describes the structure and functions for this Committee.

I hope you will find it possible to accept this invitation and give us the benefit of your valued counsel. You may indicate your acceptance or declination by signing and returning the enclosed Acknowledgement of Invitation.

Upon learning of your acceptance, I shall ask the Office of Human Development Services to supply you with further information relating to your appointment.

Sincerely yours,

Patricia Roberts Harris

Enclosures

CHARTER

1981 WHITE HOUSE CONFERENCE ON AGING
TECHNICAL COMMITTEEPurpose

The Secretary of the Department of Health, Education and Welfare is responsible for planning and conducting the White House Conference on Aging in cooperation with the Commissioner on Aging and the Director of the National Institute on Aging and the heads of such other Federal Departments and agencies as appropriate. The Secretary is required to establish an Advisory Committee (which will be called the 1981 White House Conference on Aging National Advisory Committee), and such other committees, including technical committees, as required to provide scientific and technical advice and recommendations for planning and implementing the Conference. The 1981 White House Conference on Aging Technical Committee, hereinafter referred to as "the Technical Committee," will be convened in order to provide expert guidance in development of issues to be considered and technical documents to be used by the Conference.

AUTHORITY

The Comprehensive Older Americans Act Amendments of 1978 (P.L. 95-478), Section 205 of title II (also referred to as the 1981 White House Conference on Aging Act), mandates the establishment by the Secretary of the Advisory Committee to the White House Conference on Aging. This committee is also governed by the provisions of the Federal Advisory Committee Act, P.L. 92-463, 5 U.S.C. Appendix I, as amended, which sets forth standards for the formation and use of Advisory Committees.

FUNCTION

The Technical Committee and its subcommittees shall assist in the definition of issues to be discussed at the Conference, and shall assist in the development of scientific and technical documents related to issues under consideration by the Conference by providing advice and recommendations to the 1981 White House Conference on Aging.

Structure

The Technical Committee shall consist of 96 members. It shall be composed of professional and lay members and shall include individuals from low-income families and from minority groups. A majority of the lay members shall be 55 years of age or older. Members will be appointed by the Secretary or her designee.

The Technical Committee may be divided into such subcommittees as are needed. Subcommittees shall be appointed by the Secretary or her designee. Such subcommittees shall be composed of individuals selected from the parent Technical Committee.

The Technical Committee subcommittees will be chaired by persons designated by the Secretary or her designee. Final recommendations of each subcommittee shall be presented to the full Technical Committee for its consideration.

The Technical Committee and its subcommittees will comply with the applicable requirements of the Federal Advisory Committee Act. The Department Committee Management Officer will be notified upon establishment of each such subcommittee, and will be provided information on its name, membership, functions, and estimated frequency of meetings.

Management and support services shall be provided by the White House Conference on Aging staff within the Office of Human Development Services, who shall provide an Executive Director.

Members shall serve for the duration of the Technical Committee or Subcommittee.

MEETINGS

Full Technical Committee meetings shall be held a minimum of two times for the duration of the Conference activities and its subcommittees shall meet as required. All meetings of the Technical Committee or any of its subcommittees shall be held at the call of the Conference Chairperson with the advance approval of the Government Official who shall also approve the agenda, and be present at all meetings.

Meetings are open to the public except as determined otherwise by the Secretary. Public notification will be given in advance of each committee and subcommittee meeting. Meetings are conducted and records of the proceedings kept as required by applicable laws and department regulations.

A majority of the Technical Committee members shall constitute a quorum for the transaction of official business. A majority of the membership shall constitute a quorum for each of the subcommittees.

COMPENSATION

Members who are not full-time Federal employees are paid at the rate of up to \$100 per day for the time spent at meetings, plus per diem and travel expenses in accordance with Federal Travel Regulations.

TOTAL COST ESTIMATE

Estimated total costs for operating the Technical Committee and its subcommittees, including compensation and travel expenses for members, but excluding staff support, are \$710,000. Estimated total person-years of staff support required is 7.5, at an estimated total cost of \$246,000.

REPORTS

An annual report shall be submitted to the Secretary not later than the 30th of January, which shall contain, as a minimum, the Committee's functions, a list of members and their business address, the dates and places of meetings, and a summary of the Committee's activities and recommendations during the fiscal year.

Copies of all reports shall be provided to the Department Committee Management Officer.

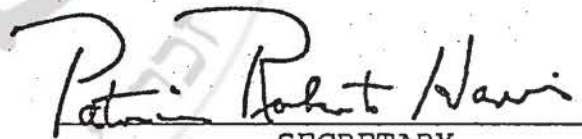
TERMINATION DATE

The Technical Committee will terminate no later than 180 days following the date of adjournment of the Conference or when its work has been completed, whichever is sooner. The Charter of the Committee shall terminate when the Committee has completed its work, or two years from the date of signature by the Secretary, whichever comes first, unless renewed by appropriate action prior to the end of that two-year period.

APPROVED

APR 18 1980

DATE


SECRETARY

Charter Filing Date

4-20-80



ACKNOWLEDGMENT OF INVITATION

Office of the Secretary
Department Committee Management Officer
Department of Health and Human Services
330 Independence Avenue, S.W.
Washington, D.C. 20201

Subject Committee: 1981 White House Conference on Aging
Technical Committee, OHDS

Gentlemen:

- I am pleased to accept your invitation to serve on the committee named above, and await further instructions regarding the committee's agenda and schedule.
- I regret that I am unable to accept your invitation to serve on the committee named above.

Sincerely yours,

Signature

MAILING ADDRESS:

Rabbi Marc Tannenbaum
Director of National Inter-
Religious Affairs
165 E. 56th Street
New York, New York 10022

Date

ATTITUDE TO OLD AGE

Old age is something we are all anxious to attain. However once attained we consider it a defeat, or form of capital punishment. Medical science & blessing, we are prone to act as if it were a disease.

- Being old is a defeat, something to be ashamed of.
- The fear of being considered old has become a traumatic obsession.
- OLD AGE INVOLVES THE PROBLEM OF WHAT TO DO WITH REMAINING.

12th CREATOR - The Mythology of Existence

ritual & prayer staved off great danger. Through prayer & ritual man was able to remain open to the wonder & mystery of existence, to lend a huge of play to daily deeds.

Rituals have become a substitute for ritual, whereby work impressed in search for success; excitement of success took the place of aspiration.

- distinction between recreation as a substitution & recreation as solution

→ AUTHENTIC HUMAN EXISTENCE INCLUDES BOTH WORK & WORSHIP, UTILIZATION & COORDINATION, ENTERTAINMENT IS NO SUBST. FOR COORDINATION.
SPIRITUAL ILLS OF OLD AGE -

- 1) Sense of being useless to & rejected by family & society
- 2) Sense of inner emptiness & boredom
- 3) Loneliness & fear of time

- WORTH OF PERSON IS NOT USEFULNESS TO SOCIETY, A BEING STAFFED AVAILABLE IN MARKET. Just as lumber of sun or an oak tree is not reducible to function of fuel fire, so a founder of human life with reducible needs & is capable of fulfilling satisfaction.

- NOW DO OLD & SICK EXPECT HELP BECAUSE OF WHAT THEY MAY GIVE US IN RETURN.

76

- IT IS A PROFITABLE STATE WHICH, TRYING TO EXPLOIT THE INDIVIDUAL ASKS ALL OF MAN FOR ITSELF.

- Human existence cannot derive its ultimate meaning from society because society itself is in need of meaning. We do not think that a human being is valuable.

because he is a member of the race, it is rather the opposite, the human race is valuable because it is composed of human beings.

77
- old age often is an age of anguish & boredom. THE ONLY ANSWER TO SUCH ANGUISH IS A SENSE OF SIGNIFICANCE ~~BEING~~ LEADING TO EXERCISE OF FACULTIES IS THE ANSWER, NOT ENTERTAINMENT BUT EDUCATION.

78
- old age be regarded not as the age of stagnation but as the AGE OF OPPORTUNITY FOR INDEPENDENT

Division of learning in charge of intellectual activities, like wise also maintain high standards for physical well-being, what about minimum standards for intellectual well-being

- Senior institutions

79
- Ancient equation of old age & wisdom (age is no guarantee of wisdom)
Hilberth proverb: "A WISE OLD MAN THE OLDER HE GETS THE WISER HE BECOMES, A FOOLISH OLD MAN THE OLDER HE GETS THE LESS WISE HE BECOMES."

- prepare a specific response for old age.

- wisdom, maturity, tranquility -

- Education for old age is a life-long process

those whose health failed were likely to be "a burden on their children or on the community at large. For many Jewish citizens this was - literally a fate worse than death. So too was the route of public support, "over the hill to the poor farm" (as the saying went)

Today, through federal, state and municipal taxes, support of the elderly has become largely cost-free: SS, Medicare, & pension are viewed as "earned" (even though to some degree financed now from current - not past revenues.)

The scope of the problem has been magnified. In its place have come other problems - the psychological side, what to do with retirement, esp. for those elderly who don't know what to do with their time after they have been pushed out of the job market by mandatory retirement & by anti-elderly employment policies!

In addition to the problems of material security, we must face the problems of psychological & spiritual security. How do we save the old from despondency, despair? How to bend beauty to being old? How to regain the authenticity of old age?

J

In Thy God dost all proclaim: Thou thy leave Me.
We proclaimed instead: Thou for Father & your
brother. There is no reverence for God without reverence
for father & brother. — privilege of devotion

- mentioned for object of the proceedings per se. In law
- a action should be ready to sell, if nec. the terms
permits but collection of the several objects from the House
of worship in order to help one side man



- Ours is a true problem: the attitude of Society to the old & the old age / as well as the attitude of the old to being old. A revision of attitudes & concepts is necessary.

SOCIETY
To Old

What we owe the old is reverence, but all they ask for is consideration, attention, not to be discarded and forgotten. What they deserve is preference, yet we do not even grant them Equality. This is the most distressing aspect of the situation: The care for the old is regarded as an act of charity rather than as a Supreme Privilege. A vast amount of human misery, as well as immense cultural

J In TC God did not proclaim of Spiritual damage is due to these five phenomena of an ~~old~~ ^{early} aging. The contempt for the old & the traumatic fear of getting old. Prostitution has become

A now marriage: The one & only thing that counts is being young.

There is a marvelous thing, but the cult of youth is voluntary.

- The true standard by which to judge a culture is the extent to which reverence, compassion, justice are to be found in the daily lives of a whole people, not only in the acts of isolated individuals. Civilization

is a state of living compatible with the standard of being human, other obligations in which the competence of the old is essential.

"Old age is not a defeat but a victory, not a punishment but a privilege. In education we stress the importance of the adjustment of the young to society. Our task is to call for the adjustment of society to the old."

Those penetrating words were spoken by my late blessed father and friend, Rabbi Abraham (Alvan) Haskel, in a memorable address ^{written by Grand Rabbi Wise} ~~delivered~~ before

the 1961 White House Conference on Aging. As the Jewish no-discrimination of that position about those Conference, I would like to address himself to the theme of "Jewishness and the Ages." What he said then is as relevant today as

it was then, perhaps even more so.

Rabbi Haskel felt that, as I do today, that Substantive programs

have been made over the past quarter century in meeting the material needs of our senior citizens, That is Ben S. Whiteberg's advice in her study,

"In Search of the Road Ahead," (cquipped in Book by E. P. Gutman's Study, 1976),

in 1950, among men over the age of 65, almost half were still in the labor force. By 1960, the rate had fallen to 33%. And in 1974, it was down to 25%.

American men spend fewer years in a lifetime working than they do in ^{the} ~~the~~ ~~past~~ ~~years~~ ~~in~~ ~~the~~ ~~United~~ ~~States~~. ^{the} ~~the~~ ~~past~~ ~~years~~ ~~in~~ ~~the~~ ~~United~~ ~~States~~. ^{the} ~~the~~ ~~past~~ ~~years~~ ~~in~~ ~~the~~ ~~United~~ ~~States~~.

Longer a matter of being withdrawn in the sleep sleep.

The percentage of American over 65 who live in poverty has also gone down sharply. In 1959, more than a third (35%) of the elderly were in poverty, and by 1974, the rate had dropped to 22%. So by 1974 down to 16%. Still, the fact some of our elderly are better off in poverty, but

shrinking rapidly. The retired elderly are increasingly being not defined, not with priority. This has happened as large increases due to truly dramatic increases in SS payments since 1960. With the passage of a major act in 1973, the decrease of the number of elderly poor will continue.

Before the advent of SS, before the larger scale growth of pension and private Co. pension plans, just Americans, simply put, what would even lead. Before the advent of Medicare in 1966,

Our nation is quickly becoming an "aging" society. In 1940, about 7% of the population were over the age of 65; today, the ^{substantive} percentage is over 11%. By the year 2025, the Census Bureau estimates that 20% of the population - 1 out every 5 Americans - will be 65 years of age or older. By 2030, the elderly pop. will total 55 million - more than twice the number of Seniors in 1977! There is an average increase each year of over a half million persons who reach age 65.

In 1970, there were approximately 19 million Americans over 65 years of age. By March 1977, the figures had risen to over 22 million, an increase of nearly 15%. Today, the nation's elderly population exceeds 24 million, an increase during the past 2 years by 9 percent.

(During these same periods, nation's total population grew by only 6.4% and 3.5% respectively.)

- gradual increase in life expectancy, sharp decline in nation's birthrate
- Americans are living longer - today's men can expect to live to an average age of 69 years, women to age 77. Persons who reach age of 65 survive on an average to age 81.

- Economic & political implications just beg to be discussed
- Aging of America programs society w. problems it has never before encountered. - implications of growing elderly pop. on future of nation's

Social Security, Health Care, & Public Assistance Programs

- Since 1960, nation has spent an increasing proportion of its GNP on health services to elderly. In 1960, these services amounted to 2.5% of GNP. Today \$124 billion is being spent, represents 5% of GNP & 24% of entire federal budget. By year 2025, just spending on elderly could reach \$635 billion - almost 46% of projected total spending.

- Social Security program in serious trouble

- National Health Care bill was once introduced in 10 yrs., rising from \$80 B. in 1968 to just under \$183 B. during 1977 fiscal yr. Hence care costs rising by 12 to 14% annually; cost predicts

ADDITIONAL DOUBLING OF HEALTH EXPENDITURES IN LESS THAN 5 YRS.

- TOTAL SPENDING ON HEALTH CARE IN 1983 IS EXPECTED TO EXCEED \$320b.

> CURB RISING HOSPITAL COSTS, DRASTICALLY ALTER ENTIRE HEALTH

DELIVERY SYSTEM - INCREASING OUTLAYS REQ. of FED GOVT TO KEEP PACE

W. GROWING MEDICAL NEEDS OF ELDERLY

✓ [While total number of popl persons has decreased in recent years, number of elderly popl has remained relatively unchanged. CHARACTER 33 m PERSONS OVER AGE 65 - 15% of TOTAL. SUBSET OF INCOMES BELOW POVERTY LEVEL. An additional 5 m. (23%) live just ABOVE POVERTY LINE, BUT ONLY BECAUSE OF FEDERAL AND STATE ASSISTANCE PROGRAMS.

- In 1980, elderly will require increasing number of housing, nutrition, home care, transportation & other assistance programs.

If current programs are not expanded to meet these needs, levels of poverty & despair among certain elderly will rise sharply.

- Design of Govt programs to aid elderly will be one of major challenges facing NAT'L LEADERS BOTH NOW & DURING NEXT 20 or more years

- Goe to grips with Ageing - TEST of a society's humanity & ability to ^{survive} when elderly retire, they are "thrown on the scrap heap"

W. H. H. H. H.

8.43

117

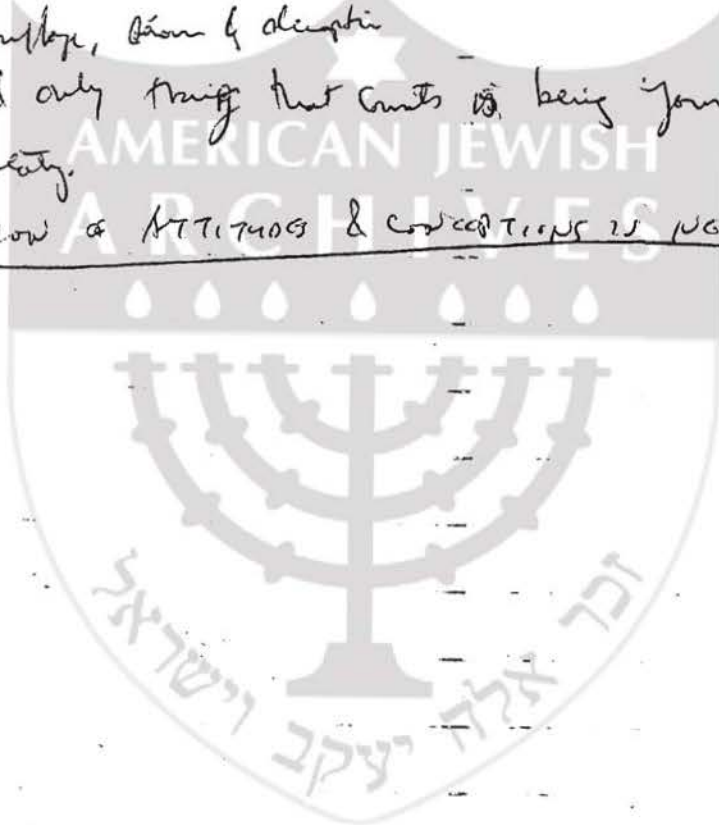
143

large proportion of elderly Jews are still in poverty - despite generally acknowledged success story that has characterized generally successful story of American Jews.

OURS IS A TWIN PROBLEM:

- The attitude of society to the old (old age) - outlets for old
- attitude of old to being old - characterized by fear, confusion, ambiguity, self-deception, & dishonesty / transition from old to young
- ^{we} time & energy spent on out of creating hopes of old age than on dealing w. least disease or cancer
- authenticity & honesty of existence are exchanged for false hopes, camouflage, illusion of deception
- one & only thing that counts is being young - cult of youth is ideology.
- Narrowness of ATTITUDES & CONCEPTIONS IS NECESSARY

72



- What we value the Old is Reverence, but all they ask for is cursatorial attention, not to be discarded and forgotten. What they desire is preference, yet we do not even grant them equality.

- Most distressing - Care for the old is regarded as an act of charity rather than as a prerogative.

In TC, God of Israel did not proclaim: HONOR ME, REVERE ME.

He proclaimed instead: REVERE your FATHER, & your MOTHER

THERE IS NO REVERENCE FOR GOD W.O. REVERENCE FOR FATHER & MOTHER

In



Monday 2-4:30

The Ethnic Family and The Aged

Chair: Richard Kolm, Ph.D. National School of Social Service, Catholic University.

Outstanding work in Ethnicity and Social Work Education.

11:30 Marjorie Cantor

New York City Office of Aging was given a grant for cross cultural look at Black, White, Hispanic

- need for service
- kinship structure
- role of kinship structure

Findings:

- 1) New York City aged not estranged, tremendous interaction between friends, neighbors (on an inter-age basis, housing is inter-age.
- 2) City is positive influence because density provided social support and interaction, cultural transportation opportunities.

Topic Today - Extent and involvement of the informal support system among

inner city elderly in NYC - Is Ethnicity a Factor?

Hypothesis among elderly and the inner city:

- 1) Blacks and Spanish-speaking elderly (because of effects of disassociation and minority-group status) enter old age with greater social and economic deficits than white elderly, therefore needs for community services, health and housing will be greater.
- 2) However, cultural patterns of these communities - particularly extended family structures, tend to mitigate against role loss and social isolation. Would have a greater magnitude of support systems offering greater concrete support.

Income, housing and health are deficits among Blacks and Spanish-speaking.

Marjorie Cantor papers

207 Is there a greater viability of support networks for Black and Spanish-speaking elderly? White elderly have not been broken down by ethnicity.

- 1) Study sample, 60 and over in inner city.
- 2) 26 neighborhoods having highest incidence of deterioration and where almost all Black and Spanish-speaking elderly live.

267 91% lived in own households

39% living alone

Vast majority were in 2 lowest social classes and had worked in skilled or semi-skilled occupations. Most were retired; income below an adequate level.

Have primary support system made up of family and neighbors, frequent face-to-face and telephone contact with children, receive and give assistance. Young and old neighbors act as substitutes for primary supports.

8% (86,000 people) have no personal support system, no close "others".

Differences between the 3 groups

- Hispanics are youngest, whites - most are elderly.

Religion - Hispanics - most are Catholic

Blacks - Protestant

White - 43% Catholic (Italian & Irish)

29% Jewish

Protestants

Handwritten notes:

53	1
29	100
24	72
	28

Only 1/2 of white sample are foreign, most Blacks are native born, whites are not an immigration generation.

Higher % - 47%

33% Blacks

26% Hispanics

} living alone

Trend - more Hispanics and elderly will resemble white peers.

371

Income and Health

Blacks and Hispanics poorer and not as healthy.

- 1) Are Black and Hispanic elderly by virtue of their ethnicity alone more likely than white elderly to have a support system?
- 2) Are there differences in the nature and level of interaction between elderly and their support network (especially children) and can this be ascribed to ethnicity?
- 3) Is social class an overriding determinant?

Findings indicate that ethnicity and social class are the two principal differentials in determinants of social support systems.

6 independent variables

- | | |
|------------------|-------------------|
| 2 - ethnicity | 1 - sex |
| 2 - social class | 1 - health status |

Findings

Support system involves:

- 1) An amalgam of informal support services (family, friends and neighbors)
- 2) Formal services offered by large-scale formal organizations, government and voluntary.

Litwak Kinship structures - extended family - to modified extended family (separately housed, semi-autonomous nuclear families) partial dependency, sharing family functions.

- 1) U.S. government supplies income maintenance, housing, health, safety, transportation
- 2) Family significant others supply significant idiosyncratic social support needs.

Definition - Social support system - encompassing those informal and formal activities and personal support services required by elderly to remain within the community (independently).

435

The support system provides these 3 major needs of the elderly:

- 1) opportunities for socialization
- 2) carrying out tasks of daily living
- 3) provisions for assistance during times of illness or crisis.

454 Informal support system is distinguished from formal organizational system
by being:

- 1) individualistic, non-bureaucratic
- 2) selected by elderly from kin, friends, neighbors

463 Informal support system

477 Types of relationships between elderly and kin

- 1) availability
- 2) proximity
- 3) frequency of contact
- 4) functionality of kin

Unless support element is readily available, it is not functional - it must be an ongoing relationship, heard from and seen regularly and help out frequently.

523 - 1/3 of elderly have a living spouse

- greatest among Spanish-speaking group (but are youngest group)

- ethnicity is not important factor in whether spouse is alive, Age, sex and social class, current income and level of functional ability are more important factors.

556 Children are viewed by elderly as most important after spouses in support system. - psychological - concrete support.

✓ Findings: Spanish-speaking most likely to have ongoing contact with children.

73% have at least one functional child. 51% Black and white have at least one functional child. (This, despite other factors previously mentioned.)

- 1) Seem to substantiate the hypothesis of positive effects of extended family on supportive relationships.

2) Black Family- No substantial difference with number, likelihood of functional, frequency of contact amount of help, feeling of closeness - same as in white - but not as much as Hispanic.

618

3) Both Black and white have large amount of contact with children (though less than Hispanics).

4) Blacks and Hispanics both give more help to children than white (poverty, unemployment)

5) Social Class

✓ - lower the income and social class, the greater extent of supportive relationships between parents and children.

- as the parents in higher class, fewer supportive contacts of less daily involvement with children.

6) Parents' desire to see children is unrelated to class or income or ethnicity.

✓7) Higher socio-economic parents- help given in time of crisis, peer relationships fill void of lack of children:

665

Relatives and siblings - less source of concrete support (elderly too)

- psychologically supportive

- 2/3 have one or more living siblings

✓ Ethnicity not significant.

Only 37% of sample of siblings are not accessible. Fewer Hispanics have siblings accessible than 2 other groups.

682

The higher the income, greater likelihood that there is functional sibling.

- Women more likely to maintain relationships. Only 42% sample have other functional relatives.

✓ Neighbors and friends are more likely to be in a support system than siblings and other relatives.

707 Ethnicity and Social Class are not stable predictors of the social support systems of the older population.

- Negative relationship between class and functional children.

721 Upper income - elderly, more different types of support - can this compensate for smaller role functioning of children?

Social class of elderly is over and above ethnicity as predictors of existence of support systems.

Patterns of assistance to and from children.

- 738
- crisis intervention
 - chores of daily living
 - gift giving - monetary and actual
 - advice-giving

Reciprocal relationships between elderly and younger. 3/4 report helping children - gifts, crisis, chores, advice-giving (much less) across the 3 groups.

776 ✓ What does ethnicity contribute to this pattern? It contributes to amount of help given by parents - Black and Hispanic more likely to be more involved in children's lives.

Income and functional ability are determinant in giving help. Higher income--more gift-giving. Ethnicity determines the amount of advice-giving, more in Black and Hispanic - fewer gifts (lower income)

Ethnicity doesn't affect amount of crisis intervention involvement.

806 Role of Ethnicity in Amount Done by Children

87% get help

82%- gift giving

66% health in crisis (same outside city)

chores of daily living - 50% shopping, 20% housekeeping

Do Hispanic elderly and Black children give more help than white? Hispanics do; not significant for Black and white elderly.

Meaning:

- ✓ 1) Cannot assume that minority elderly are in a better position for supportive assistance from kin.

Hispanics are in a stronger position. (Not expected to continue for too long.)

✓ Not true for Blacks.

- 839
- 1) Socio-economic status and health seem to be overriding determinants in ✓ kind and amount of interaction between parents and children.
 - 2) White elderly (majority of elderly in New York) have not been forsaken feel as close and get as much help in crisis as Blacks, although later children are more likely to live closer.

Class role

- ✓ - Lower socio-economic children more present and involved.

862 How supportive and for how long can this be sustained?

- given the economic pressures they're facing?

863 ✓ To what extent should society assist such families to maintain the viable networks of mutual assistance?

✓ Middle and upper strata of elderly - interaction decreases with kin - have greater pressure to obtain other means of daily support systems - friends and group activities.

✓ The more isolated (socially) and those not able to get around easily - have a serious problem, (middle and upper strata) in doing daily chores.

880 ✓ Those who were middle class (income - values) at 50, still have those values - but their incomes are just slightly above subsistence level. Community must compensate this group for lack of accessible supports with daily living chores.

Variety of data suggest no pat generalizations apply to entire group of older people.

the
White House
Conference
on
Aging

330
Independence
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S.W.
Washington,
D.C.
20201

August 11, 1980

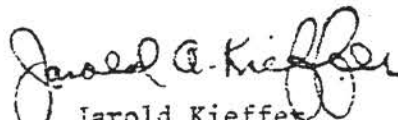
TRANSMITTAL TO ALL TECHNICAL COMMITTEES' MEMBERS *

Staff have prepared for your use a briefing sheet to assist you in answering questions or making speeches regarding the delegate selection process, Phase I.

Enclosed are the following items:

- 1) A six-page Briefing Sheet. (Probably more suited for your own use rather than for general public distribution)
- 2) A typical Governor's letter which was sent in June to each Governor informing him or her of the specifics regarding delegates in Phase I.
- 3) A table reflecting the distribution of the Phase I 1,000 delegates by states and territories, with each state's criteria applied. (The appropriate numbers in the table were included in the respective Governor's letter.)
- 4) A shorter version of the Briefing sheet which covers the essential information items. This was prepared for general public distribution. You may want to make copies for distribution yourself or use as an example for developing your own fact sheet for the public. (I have enclosed five of these.)

I hope you find these helpful. Please call the Operations Office (202) 245-1918 should you need more clarification.


Jarold Kieffer
Staff Director

* Advisory Committee members received materials in separate distribution.

EXPLANATION OF PHASE I, DELEGATE SELECTION PROCESS
WHITE HOUSE CONFERENCE ON AGING

Briefing Sheet Prepared For State White House Conference Coordinators
and Advisory Committee Members

Question: How many delegates will there be?

The White House Conference on Aging budget reflects plans for 1800 delegates for the National Conference meeting and the delegate regional hearings. Phase I is the allocation plan for 1000 of these 1800 delegates.

Question: Who gets to select the delegates in Phase I?

The Governors of each state will be able to decide within their state how to go about identifying that state's delegates for Phase I. Not all states will do the same thing. Some may have elections, some may have nominations from Area Agencies on Aging, some may have the State Conference decide, some may have gubernatorial appointments, or combinations of these and other approaches.

The method by which a State/Governor chooses to do this does not have to be approved by the National Conference Office.

Question: Is there a difference between "select", "nominate", and "appoint" delegates (in Phase I)?

If a Governor "selects" or "nominates" the appropriate number of individuals and complies with the mandatory criteria set forth in the 6/13/80 correspondence, automatic "appointment" by Mr. Waldie of those persons as voting delegates is assured.

If a Governor does not comply to the entire mandatory criteria, none of his/her nominations will be appointed until the state's nominated slate is amended to be in compliance.

Question: Can the Governor delegate the authority?

Governors may delegate the authority of selecting nominees to any individual or group they desire, such as the State W.H.C. Coordinator, the Steering Committee, the delegates (attendees) at the State White House Conference.

However, when the names are submitted to the National Conference Office, each nominee's personal profile form must have an original signature of either the Governor or the State White House Conference Coordinator. This responsibility can not be delegated unless the Governor informs the Conference Office in writing of such delegation of authority?

Question: Who pays for the delegates to come to the National Meeting and to attend the Regional Hearings?

The National Office is responsible for the costs (transportation and cost up to the per diem rate) incurred by the delegates in attending the official Conference activities of the Regional Hearings and

National Meeting. If a delegate has a means of providing for such expenditures, this would be helpful to the Conference Office.

Question: How were the criteria and distribution formula chosen? (See criteria and formula in Governor's typical letter, page 2, attached)

Because of the desire of the Secretary's Office, and the Chair and Deputy Chairs that the Conference reflect the intent and desires of Congress and the President in calling for the White House Conference, the criteria were established by Mr. Waldie after seeking consultation and advice from a variety of groups and individuals.

1. Age For Allocation Formula: The legislation stresses 55+ in a couple of places (Section 205 (a) and Section 202 (a)1.

The Older Americans Act uses the state's % of 60+ population in a formula for allocating funds to the states. Allocation formulae similar in nature are frequently used by the Federal government in determining state distributions.

Very little difference occurs in using 55+ vs. 60+ in the number of slots a given state would have. 55+ was chosen as the base because of the two references to 55+ in the White House Conference legislation.

2. Age For Mandatory Criteria: The desire is to have the majority of delegates 55 years of age or older, due to the emphasis of the Conference on Aging. The legislation requires "a majority of the public members of each such committee (Advisory and others) shall be 55 years of age or older."
3. Gender For Mandatory Criteria: Females constitute the greater percentage of the elderly population and the greater percentage of the U.S. total population.
4. Urban/Rural For Mandatory Criteria: Because this Conference will emphasize a broad sector involvement in establishing the recommendations for national policy, the desire is to have a representative delegation without imposing a large number of criteria which may be difficult to monitor. The Urban/Rural factor will serve this purpose generally.

In addition, the concerns of the Rural and Urban populations, both the elderly and the non-elderly, can be assured of the appropriate representation by this criteria.

Note: This is not a minimum Rural or minimum Urban criteria. It is a fair representation for both, as reflected in each state's Urban/Rural population.

Be aware also that this factor is not based upon the state's elderly rural and elderly urban population but the state's entire rural and entire urban population.

5. Minority Representation For Mandatory Criteria: The legislation requires minority representation on any committees (Section 205(a)). Many of the "findings" reflected in Section 202(a) of the legislation but the state's entire rural and entire urban population are experienced in particular by the minority elderly.

Members of minority groups tend not to live to reach the older age cohorts that majority groups do.

Note: This factor is based upon the minority representation in the state's total population, not only the elderly. Rationale is because minority groups have tended to be under counted in census counts and do not live to reach the elderly age cohorts that majorities do, thus by using the factor of representation in the state's total population, some adjustments are made for greater minority representation that would otherwise occur if only elderly minority representation was used as the factor.

The four minority groups (Black, Hispanic, American Indian or Native Alaskan or Native American, and Pacific Asian) will each have as a minimum at least one representative on each of the six major issue area committees of the Conference.

Note: On the Table attached, "A.I." column (American Indian and Native Alaskan) reflects a total of 4, one each for Alaska, Hawaii, Arizona, and Oklahoma). Keep in mind this Table is only Phase I. There will definitely be additional slots provided to American Indians in Phase II. Also, this column reflects the minimum required for each state and, most likely some states will choose to have American Indian delegates, even though they are not required to do such through Phase I.

More on this under Sources Used.

Question: How will compliance with the criteria be monitored?

Each State Coordinator will be provided with nominee forms which will call for personal data on each nominee that covers the above criteria (as well as the suggested additional factors found at the bottom of page 3 of typical Governor's letter). The signature of the Governor or State Coordinator on each form will be the evidence required by the Conference Office that a given individual is as stated on the form (such as over 55, Black, and residing in a rural area). No proof of evidence like a birth certificate will be required.

The Conference Office will establish a delegate data information bank (computerized) to allow us to know quickly where we stand regarding any state's compliance and/or compliance for the 1800 delegates.

Question: What data sources were used?

1. For the 55+ data For the Formula Allocation: U.S. Bureau of Census "Resident Population July 1, 1979 (provisional), "Unpublished data; May 12, 1980.
2. For the Gender and Age Factors: The criteria calls for a 50% minimum of delegates to be women and a 50% minimum of delegates to be 55 yrs. of age or older. Do not confuse this with the urban/rural factor and the minority factor which calls for representation of these factors as reflected in a given state's population. We did not use a given state's male/female representation or a given state's percentage of elderly population.

Earlier in our thinking we had said "a majority of each state's delegation would be women and a majority of each state's delegation would be 55+". You will note the language in the Governor's letter says "at least 50%" for these two factors. This means that when doing the calculations for a state that had an even number of delegate slots, 1/2 of those had to be female and 1/2 had to be 55+. When doing the calculations for a state that had an odd number of delegate slots, the number of delegates needing to be female or needing to be 55+ was rounded off upward to the whole number rather than downward to the whole number. In this manner, the states having even numbers of delegate slots did not have to add another slot for the gender and age factors but in the total of 1000 and/or 1800 delegation, we will be able to reflect "a majority of delegates being women and a majority of delegates being 55+."

Thus, no census source was used to determine the number of each state's delegation which had to be female and which had to be 55+. This was determined by a statistical calculation as explained above.

3. For the Urban/Rural Factors: Definition: The definition used is reflected in the Governor's letter, bottom of page 2. Repeated here for convenience - "Urban population comprises all persons living in urbanized areas and in places of 2,500 inhabitants or more outside urbanized areas. The population not classified as urban constitutes the rural population."

You may receive a lot of questions on this definition. The Census Bureau publishes data on urban/rural populations corresponding to a variety of definitions. The data source we used to calculate the number of delegates that had to reside in a rural area and the number that had to reside in an urban area corresponds to the above stated definition.

This definition differs from the rural definition found in the Regulations for the 1978 Amendments to The Older Americans Act. That definition is as follows: "Rural area is any area outside a Standard Metropolitan Statistical Area (SMSA) as defined by the Department of Commerce."

While the definitions are different and the corresponding factors per state may differ (to a large degree in some states), the resulting U.S. average for these two definitions is extremely close; i.e. AoA's chosen U.S. Census definition giving a rural factor U.S. average of .263 compared to the Conference's chosen U.S. Census definition giving a rural factor U.S. average of .265.

Source: U.S. Bureau of Census, 1970 Census of Population, Supplementary Report, Series PC (S1)-108, "Population and Land Area of Urbanized Areas For the United States: 1970 and 1960," U.S. Government Printing per state would differ (to a large degree in some states), the resulting U.S. average for these two definitions is extremely close; i.e. AoA's chosen U.S. Census definition giving a rural factor U.S. definition giving a rural factor U.S. average of .265. Office, Washington, D.C. 1979.

This source would provide the State Coordinators with maps and listings of the urbanized areas for their state if a particular nominee's urban/rural residence was not clear.

Calculations: The factor for each state's rural population was provided by the Census Bureau to the third decimal point. This factor was multiplied by the number of delegate slots for a given state. The resulting statistic was rounded off to a whole number using the principles as follows:

1. If the numerical is less than one but equal to or greater than .5, it was rounded to one. (The hundredths numerical was not taken into consideration here.) If less than .5, the factor was dropped to zero.
2. For numericals of one or greater, rounding occurred through the 2nd decimal point (hundredths).
3. Once the number of rural residing delegates was calculated, that figure was subtracted from the total number of delegate slots to determine each state's respective number of urban residing delegates.

4. For the Minority Factors:

Sources: The Census Bureau has no data by state for the Native American/American Indian or Pacific Asian more recent than 1970. Thus, the following sources were used to obtain the respective factors: "Subject Reports: Japanese, Chinese, and Filipinos in the U.S. P.C.(2) 1G, 1970 Census." (U.S. average is .007) "Subject Reports; American Indians P.C (2), 1970 Census." (U.S. average is .005.) It is recognized by Mr. Waldie that the used factors are most likely understated for both of these groups. Adjustments are planned in Phase II if 1980 Census data is available when Phase II selections are finalized. (A special request will be made to the Census Bureau to run this count for us early on.) Adjustments will also be made to increase these two minority groups' representation in Phase II through receiving nominations from the mini-conference convenors should the Governors not choose through Phase I to voluntarily select such delegates. It is also probable that some Congressional appointments would include these two minority groups.

The source for Blacks is U.S. Bureau of the Census: "Illustrative Projections of State Populations by Age, Race, and Sex: 1975 to 2000 Series II-A." 1980 Base (average U.S. factor is .118 while if used 1970 data would have been .111).

The source for Hispanics (Spanish origin) is U.S. Bureau of the Census "Demographic, Social and Economic Profile of States: Spring 1976, Series P-20, Issued January 1979. (average U.S. factor is .053 while if used 1970 data would have been .046). The same plans for upward adjustments hold for the Blacks and Hispanics as were stated for the American Indians and Pacific Asians.

Calculations: The same principles of rounding as were stated for urban/rural were applied in doing the calculations for the minority factors.

General Comment: Keep in mind that the factors were provided to the third decimal point and rounding did not occur at that point but only after the factor was multiplied by the number of delegate slots. This gave a more true numerical.

Question: How will the delegates be chosen for Phase II?

While plans are not finalized for Phase II, the remaining 800 delegates will be distributed by state residence, where feasible, using the same allocation formula as was used for the 1000 in Phase I. These 800 delegate slots will be filled by Congressional appointments, representatives of national organizations, and other groups not otherwise provided for. Each state will be allocated one delegate slot for the State Coordinator; this slot does not count against the state's number of slots granted in Phase I.

The specific national organizations that will be given delegate slots and the corresponding number of slots per organization will be decided upon at a later date.

Mr. Waldie had previously been considering the Congressional Senior Intern Program as the only means through which Congressional appointments for delegates would be made. That proposal has now been dropped and the specifics regarding the Congressional appointments will be finalized late December, 1980.

the
White House
Conference
on
Aging

330
Independence
Avenue
S.W.
Washington,
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20201

June 13, 1980

Dear Governor

Since I communicated with you last, plans have been completed for providing funds to states to assist with the cost incurred through the conduct of State White House Conferences on Aging. The director of your state unit on aging should have received the information from the Administration on Aging on the amount of funds available to your state and the instructions by which the state can apply for the funds.

Since the funds are from the Older Americans Act Fiscal Year 1980 appropriations, Commissioner Benedict has agreed to provide to your state unit on aging a supplemental grant through the Title IVa award process. These funds for State White House Conference activities must be obligated by May 31, 1981. In considering possible uses of these funds, please understand that the states will not be responsible for providing financial assistance to the delegates to the National Conference meeting nor to the delegate regional hearings. These expenses will be covered out of other funds available to the Conference.

I know you are interested in learning about the process through which delegates will be chosen for the National Conference meeting scheduled for November 30 - December 4, 1981. We have not made a final decision on the entire process by which delegates will be chosen, but I want to share with you now the specifics on Phase I of the delegate selection process so that you can proceed with your planning in the selection within your state.

You will be responsible for choosing the method of selecting the individuals for the delegate slate in Phase I. You may want to have an election, gubernatorial appointments, or a combination of

both. If your Conference Coordinator would like to discuss some possible methods by which you might arrive at the nominee slate, Ms. Jo Harris of my staff is available to provide some suggestions.

The Conference budget is based upon a total of 1800 voting delegates whose travel and per diem expenses will be provided with other funds available as I mentioned above. The first 1000 of these delegates have been allocated to the states according to the percentage of elderly population (55+) each state has to the Nation's 55+ population with a minimum factor of 6 delegates per state, the District of Columbia, and Puerto Rico and a minimum of 1 delegate each to the Trust Territories and Virgin Islands. The minimum of six delegates per state assures each state of having at least one delegate assigned to each of the six major issue area committees of the Conference.

The remaining 800 delegates, through Phase II, will be distributed among the states using the same allocation formula as was used for the 1000 in Phase I, where feasible. These 800 delegate slots will be filled by Congressional appointments, representatives of national organizations, and other groups not otherwise provided for. Each state will be automatically allocated one delegate slot for the State Coordinator; this slot does not count against your number of slots granted in Phase I.

In addition to delegates, each state will be allowed to have observers at the National Meeting. The process by which you can nominate individuals to be observers is explained later in this letter. The following criteria are mandatory and are to be used in preparing your slate of delegates:

- 1) At least 50% of your delegates must be 55 years or older.
- 2) At least 50% of your delegates must be female.
- 3) In the composition of your delegate group, minority groups must have approximately the same proportion of representation as these minority groups constitute in your state's total population. The minority groups which are applicable are Blacks, Hispanics, American Indians, and Pacific Asians.
- 4) In the composition of your delegate group, urban/rural representation must reflect approximately the same proportion of representation of urban/rural residents as those groups constitute in your total state population. Urban population comprises all persons living in urbanized areas and in places of 2,500 inhabitants or more outside urbanized areas. The population not classified as urban constitutes the rural population. Maps and listings of the nation's 275 urbanized areas are published in U.S.

Bureau of the Census, 1970 Census of Population, Supplementary Report, Series PC(S1)-108, "Population and Land Area of Urbanized Areas, for the United States: 1970 and 1960," U.S. Government Printing Office, Washington, D.C. 1979.

Your state grid has been developed according to the most recent U.S. Census data available. Your respective number of delegates is ___ out of the 1000 delegates in Phase I. You may nominate an equal number of individuals as observer-alternates to the National Meeting. The above criteria applied to your state require you to have the following type of slate for delegates:

- 1) _____ must be over 55 years of age
- 2) _____ must be female
- 3) _____ must be residing in an urban area and
_____ must be residing in a rural area (as defined above)
- 4) _____ must be Black
- 5) _____ must be Hispanic
- 6) _____ must be American Indian
- 7) _____ must be Pacific Asian

It is obvious that in order for the overall criteria to be met, individual delegates in some cases will have to meet two or more of the above characteristics. Your State Coordinator will receive a delegate nominee form which is to be completed on each nominated delegate and a form for completing on each nominated observer-alternate. Once complete, that form will reflect the nominee's personal profile in accordance with the criteria. All nominee forms are to be submitted, with your signature or your State Coordinator's signature, to the National Conference Office no later than May 1, 1981.

In addition to the above required criteria, I am asking that you give special consideration to some additional factors in making your selection of delegates. These factors are as follows:

- o Low income representation
- o Handicapped representation
- o National organizations representation
- o A balance of professional, lay and private sector representation

Your consideration of these factors along with the required criteria should result in a well-balanced and representative delegation for the 1981 White House Conference on Aging. Provided that your nominees for delegates comply to the criteria set forth in this correspondence, your nominees will be assured of receiving voting delegate status.

In addition to the 1800 voting delegates, plans are to have up to 2000 observers who will attend the national meeting with official observer credentials. Thus, you should be prepared to submit to the Conference Office a slate of names for the observer group at the same time you submit the nominees for the delegates. The guidelines applicable to delegates need not be applied to your observer-alternates. To the extent that they meet the same criteria, your observer slate will be drawn upon to fill vacancies in the delegate slate should such vacancies occur. In addition, it is also possible that an observer nominated by you might also be given delegate status as the 800 delegate appointments are made in Phase II. Official observers, as distinguished from delegates or visitors, will be given the following privileges: An observer's wordbook and official name care, preferential seating at hearings and plenary sessions, invitations to participate in delegate social events, and an opportunity to participate in special sessions through which their views can be expressed. The National Conference Office will not be able to pay for any of the expenses incurred by observers attending the regional hearings and/or the national meeting, however.

The objective is that, at the conclusion of the appointment of all 1800 delegates, the final delegation for each state will comply with the same criteria set forth for Phase I delegates. This implies that each state will receive some additional delegates in Phase II.

I appreciate your cooperation in identifying the delegates for Phase I.

Sincerely,

Jerome R. Waldie
Executive Director

cc: State Coordinator

Apportionment of Delegates Among States for
White House Conference on Aging: 1000 (Phase I)

State	Phase I Delegates	# of Women	# Over 55	# Urban	# Rural	# Black	# Hisp.	# A. I.	# P.A.
Alabama	16	8	8	9	7	4	0	0	0
Alaska	6	3	3	3	3	0	0	1	0
Arizona	11	6	6	9	2	0	2	1	0
Arkansas	11	6	6	5	6	2	0	0	0
California	92	46	46	84	8	7	15	0	2
Colorado	10	5	5	8	2	0	1	0	0
Connecticut	14	7	7	11	3	1	0	0	0
Delaware	6	3	3	4	2	1	0	0	0
District of Col.	6	3	3	6	0	4	0	0	0
Florida	52	26	26	42	10	7	4	0	0
Georgia	19	10	10	11	8	5	0	0	0
Hawaii	6	3	3	5	1	0	0	1	3
Idaho	6	3	3	3	3	0	0	0	0
Illinois	47	24	24	39	8	7	2	0	0
Indiana	22	11	11	14	8	2	0	0	0
Iowa	14	7	7	8	6	0	0	0	0
Kansas	11	6	6	7	4	1	0	0	0
Kentucky	15	8	8	8	7	1	0	0	0
Louisiana	15	8	8	10	5	4	0	0	0
Maine	6	3	3	3	3	0	0	0	0
Maryland	16	8	8	12	4	4	0	0	0
Massachusetts	27	14	14	23	4	1	0	0	0
Michigan	35	18	18	26	9	4	0	0	0
Minnesota	17	9	9	11	6	0	0	0	0
Mississippi	10	5	5	4	6	4	0	0	0
Missouri	23	12	12	16	7	3	0	0	0
Montana	6	3	3	3	3	0	0	0	0
Nebraska	7	4	4	4	3	0	0	0	0
Nevada	6	3	3	5	1	0	0	0	0
New Hampshire	6	3	3	3	3	0	0	0	0
New Jersey	33	17	17	29	4	4	2	0	0
New Mexico	6	3	3	4	2	0	2	0	0
New York	81	41	41	69	12	12	7	0	1
North Carolina	23	12	12	10	13	5	0	0	0
North Dakota	6	3	3	3	3	0	0	0	0
Ohio	44	22	22	33	11	4	0	0	0
Oklahoma	13	7	7	9	4	1	0	1	0
Oregon	11	6	6	7	4	0	0	0	0
Pennsylvania	58	29	29	41	17	5	1	0	0
Rhode Island	6	3	3	5	1	0	0	0	0
South Carolina	11	6	6	5	6	3	0	0	0
South Dakota	6	3	3	3	3	0	0	0	0
Tennessee	19	10	10	11	8	3	0	0	0
Texas	50	25	25	40	10	6	10	0	0
Utah	6	3	3	5	1	0	0	0	0
Vermont	6	3	3	2	4	0	0	0	0
Virginia	20	10	10	13	7	4	0	0	0
Washington	16	8	8	12	4	0	0	0	0
West Virginia	9	5	5	4	5	0	0	0	0
Wisconsin	21	11	11	14	7	1	0	0	0
Wyoming	6	3	3	4	2	0	0	0	0
Puerto Rico	6	3	3	0	0	0	0	0	0

the
White House
Conference
on
Aging
330
Independence
Avenue
S.W.
Washington,
D.C.
20201

FACT SHEET

DELEGATE SELECTION

Approximately 1800 voting delegates will attend the national meeting of the 1981 White House Conference on Aging (WHCoA) in Washington, D. C., Nov. 30 - Dec. 3, 1981. The delegate selection process has been designed to ensure that these delegates are truly representative of the American population.

A total of 1000 delegates has been divided among the states, based on each state's percentage of elderly people (55 years or older) compared to the nation's total elderly population.

No state will have fewer than six delegates, including the District of Columbia and Puerto Rico. The U.S. Trust Territories will have one delegate each.

The Governors will decide how to select delegates within their state. Some may have elections, some may call for nominations, some may have gubernatorial appointments, and some may have combinations of these approaches. In some states, delegate selection may be keyed to the State WHCoA Conference.

Each state must ensure that its slate of delegates complies with the following mandatory criteria:

- At least 50 percent of the delegates must be 55 years or older.
- At least 50 percent of the delegates must be female.
- Delegates must reflect, at a minimum, the percentage of minority residents (not just minority elderly) in the state. Blacks, Hispanics, American Indians, and Pacific Asians are the minority categories used.

- Delegates must reflect the proportion of urban/rural residents in the state. Urban population comprises all persons living in urbanized areas or in places with 2,500 inhabitants or more outside urban areas. The population not classified as urban constitutes the rural population.

States will also be asked to give special consideration to the following factors in selecting delegates: low income representation; handicapped representation; national organizations representation; and a balance of professional, lay and private sector representation.

In addition, each Governor has appointed a State Coordinator to serve as a liaison with the WHCoA national staff. These State Coordinators will attend the 1981 National Conference as voting delegates. Thus, each state automatically gets one extra delegate slot.

Governors will also be allowed to nominate official observers to the conference, equal to the number of state delegates. The mandatory criteria applied to voting delegates will not be applied to observers.

The remaining 800 delegates will be filled by Congressional appointments, representatives of national organizations, and other groups. Specifics on the way these delegates will be selected will be decided at a later date.

All of the delegates will be credentialed by June, 1981. The White House Conference on Aging will pay for travel and per diem expenses of the 1800 voting delegates to regional hearings in the fall of 1981 and to the National Conference. However, the budget will not cover expenses incurred by official observers.

#

1981 WHITE HOUSE CONFERENCE ON AGING

Technical Committee on the Media

Rabbi Marc H. Tanenbaum, Chairman

I. Introduction

A. KEY AREAS TO BE ADDRESSED BY THE MEDIA COMMITTEE

As indicated in the minutes of the July 28, 1980 meeting of the Media Committee, we ~~XXXXXXXXXXXX~~ seek to examine the following themes:

- A. The media as a central and decisive instrument for forming and establishing cultural values and role models.
- B. The role of older people as consumers of the content of the media.
- C. The role of older people as participants in producing the education, information, and entertainment content in the media.
- D. The possible meanings of new media technologies for the lives of older people.

B. The Committee is charged with ~~xxx~~ responsibility to prepare a final report to the White House Conference on Aging by Feb. 1, 1981. The report is expected to include the following elements:

- a) 1. A summary of research findings on the present state of the portrayal of elderly people in the media, as well as of efforts being undertaken to improve that presentation in terms that the elderly define as authentic and representative.
- b) 2. A detailing of unmet needs as defined by representative elderly groups as well as by representatives of the media, including advertising marketing research specialists.
- c) 3. A prospective look into the 1980s with a view toward anticipating how changing political, social, and cultural forces might affect progress in the field of media and aging.

2. Identify and offer specific recommendations regarding alternative courses of action available to our society - both public and private - for dealing constructively with the issues and defined needs.

II. PHASES OF THE WORK PLAN

Phase One (Sept. 1-Nov. 15)

The goal of this phase would be to prepare an interim report for the Committee ~~presenting~~ outlining some future directions and programs in the area of media and the aging.

Task 1. Defining needs in gathering essential data and information - this would involve identification of key agencies, resource people, and research banks as repositories of vital information.

Task 2: Assemble, Summarize, and Evaluate data and information - this task would consist mainly of relying on specialists in the fields to gather relevant information, summarize consensus findings, and identify unmet research needs.

Task 3: Preparation of Phase One report - this task would involve the summarizing of relevant findings and conclusions gathered in Task 2 into a report as the basis for further Committee deliberations.

Option 1: A one-day meeting of the ~~Faxx~~ Media Committee would be held to review the Phase I report and to provide directions to staff and consultant for further policy options for program.

Task 3. (p. 1) - Convene a ~~xxxxxxx~~ one-day meeting of media specialists - TV, print media, advertising, market research with a view toward gathering an overview of the best available information and insight about media and the aging

Task 4. A similar conference on new technologies and the aging
Option 2: To mail out a copy of the Phase I report to committee members for review, comments, and further recommendations.

PHASE TWO (Nov 15-Dec 30)

In this phase the Media Committee might want to explore basic policy alternatives relating to the problems and issues growing out of Phase I.

Task 5: Based on fresh needs and issues ~~xxxx~~ identified by this time, Consultant and staff may wish to recommend further studies or working papers in key areas that might contribute innovative approaches to compelling needs that are identified in this process.

Option: Committee meeting week of Nov 17.

Phase Three: (Dec. 30 - Jan 30) Preparation of Final report

This phase would be devoted to the preparation of the Media Committee's final report which would summarize conclusions/emerging out of Phases I and II ~~or insights~~

Task 6: Preparation of Draft Final report - based on materials and reflections emerging from the last two meetings, the staff/consultant would prepare a draft final report for review by the Committee. A draft final report ~~xxxxxxx~~ would be provided to each member of the committee at least one week prior to the formal Committee review meeting (week of Jan 5, 1981)

Task 7: Prepare Final Report - This final task would be devoted to incorporating revisions of the draft report as agreed upon by the committee members.

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF THE SECRETARY

TO : Dr. Marc Tannenbaum, Chairman
Technical Committee on Media

DATE: July 28, 1980

FROM : *Jerry*
Jarold A. Kieffer, Staff Director
White House Conference on Aging

SUBJECT: Substitutes and Representatives at Meetings

A number of people have asked whether we will allow substitutes and/or representatives of technical and advisory committee members at meetings. Our goal is to maximize participation by the principals themselves. Therefore, we have decided not to pay honoraria, travel or other expenses for substitutes or representatives. Participation by the individuals at their own expense in the activities of the committee is left to your discretion as chairperson. If you have any questions, please call me. (202) 245-1914.



THE AMERICAN JEWISH COMMITTEE

date August 6, 1980

to Bert Gold

from Mort Yarmon

subject

Reading the attached issue of Journal, with its six articles on Jewish community services to the aged, prompts me to write to you that we ought to think how we as an agency should be getting involved in the issue of the elderly. I have no doubt at all that this is the next big issue to surface -- for the Jewish community and the rest of the community. You know, of course, that there's a new White House conference in this area set for late in 1981 -- Marc is already centrally involved -- along with mini-conferences between now and then.

Marc has a number of ideas, I know, for AJC's involvement, as do I, and we suggest this be put on the agenda at an early SAC meeting.

✓ cc: Marc Tanenbaum

Mort

RECEIVED

the
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Conference
on
Aging

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Washington,
D.C.
20201

August 15, 1980

Dr. Marc Tannenbaum
Director of National Interreligious Affairs
165 East 56th Street
New York, New York

Dear ~~Dr. Tannenbaum~~: Marc

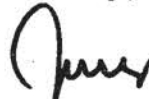
I think the first round of Technical Committee meetings went reasonably well. Though we confronted in our role of staff support, some initial and early confusion, I believe our staff overcame those problems quickly and responsively. We hope to do even better in future meetings.

But what really impressed me and our staff was the intense commitment of the committee Members to the responsibilities of their committee. We know severe limitations have been imposed on both time and resources due to budgetary constraints. Your acceptance of those constraints as a Chairperson and your willingness to work and lead within them is deeply appreciated by all of us.

We will do our utmost to facilitate your efforts and the efforts of your committee Members as you continue your important task.

I personally consider the output of the Technical Committees to represent the essence of the White House Conference on Aging 1981. I am confident that our Conference will be judged as having made a substantial contribution to the national effort to improve policy responses to aging issues. To the extent that optimism is warranted, most of the credit will properly be extended to your committees.

Sincerely,



Jerome R. Waldie
Executive Director

THE AMERICAN JEWISH COMMITTEE

date August 21, 1980
to Marc Tanenbaum
from Evan Bayer *Evan*
subject White House Conference on Aging

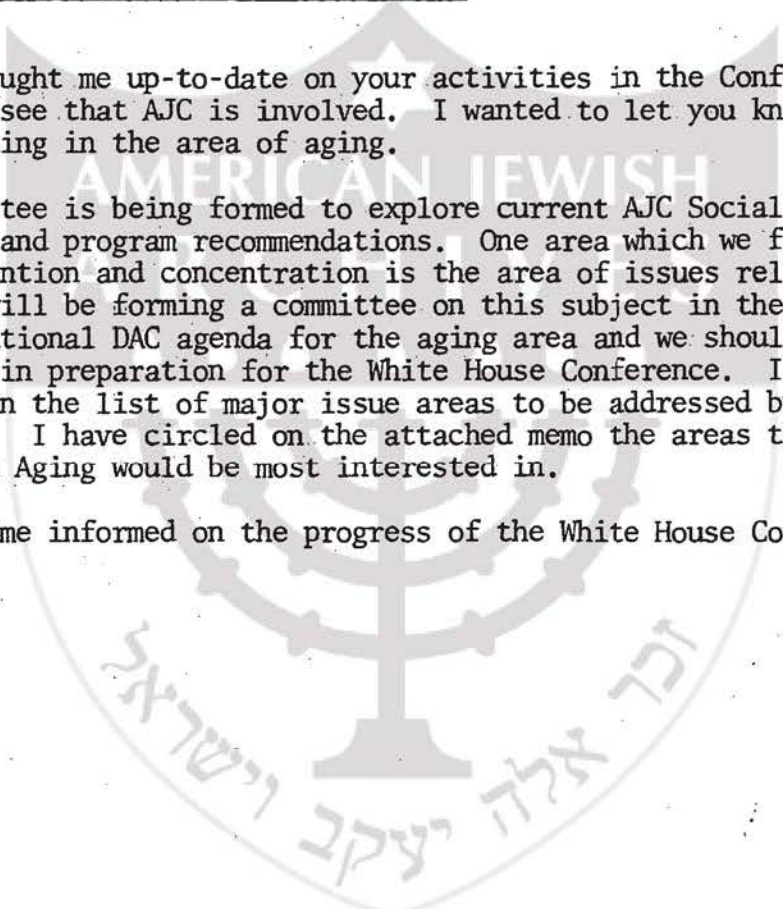
Bob Wolf brought me up-to-date on your activities in the Conference and I'm glad to see that AJC is involved. I wanted to let you know what the DAD is planning in the area of aging.

A DAC Committee is being formed to explore current AJC Social Policy and make policy and program recommendations. One area which we feel requires special attention and concentration is the area of issues related to aging. We will be forming a committee on this subject in the fall to develop a national DAC agenda for the aging area and we should coordinate our efforts in preparation for the White House Conference. I was especially interested in the list of major issue areas to be addressed by the technical committees. I have circled on the attached memo the areas that the Committee on Aging would be most interested in.

Please keep me informed on the progress of the White House Conference.

EB/ea
encl.

cc: Bob Wolf
Seymour Samet
Ira Silverman
Reading file



MAJOR ISSUE AREAS

TO BE ADDRESSED BY THE TECHNICAL COMMITTEES

A. ECONOMIC SECURITY

1. Retirement Income

B. PHYSICAL AND MENTAL HEALTH

2. Health Services
3. Health Maintenance and Health Promotion
4. Social and Health Aspects of Long Term Care

C. SOCIAL WELL-BEING

5. Family, Social Services and Other Support Systems
6. The Physical and Social Environment and Quality of Life

D. OLDER AMERICANS AS A GROWING NATIONAL RESOURCE

7. Older Americans as a Growing National Resource
8. Employment

E. CREATING AN AGE INTEGRATED SOCIETY

9. Creating an Age Integrated Society - - - Implications for Societal Institutions

ILLUSTRATIVE AREAS:

10. Creating an Age Integrated Society - - - Implications for the Economy
11. Creating an Age Integrated Society - - - Implications for the Educational Systems
12. Creating an Age Integrated Society - - - Implications for Spiritual Well-Being
13. Creating an Age Integrated Society - - - Implications for the Family
14. Creating an Age Integrated Society - - - Implications for the Media
15. Creating an Age Integrated Society - - - Implications for Governmental Structures

F. RESEARCH

16. Research in Aging

NOTE:

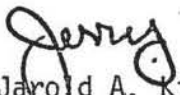
1. A Technical Committee has been established for each sub-head under the main headings.
2. The Executive Director plans to commission the preparation of a paper on social, economic and demographic trends which will be available to all Technical Committees.

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF THE SECRETARY

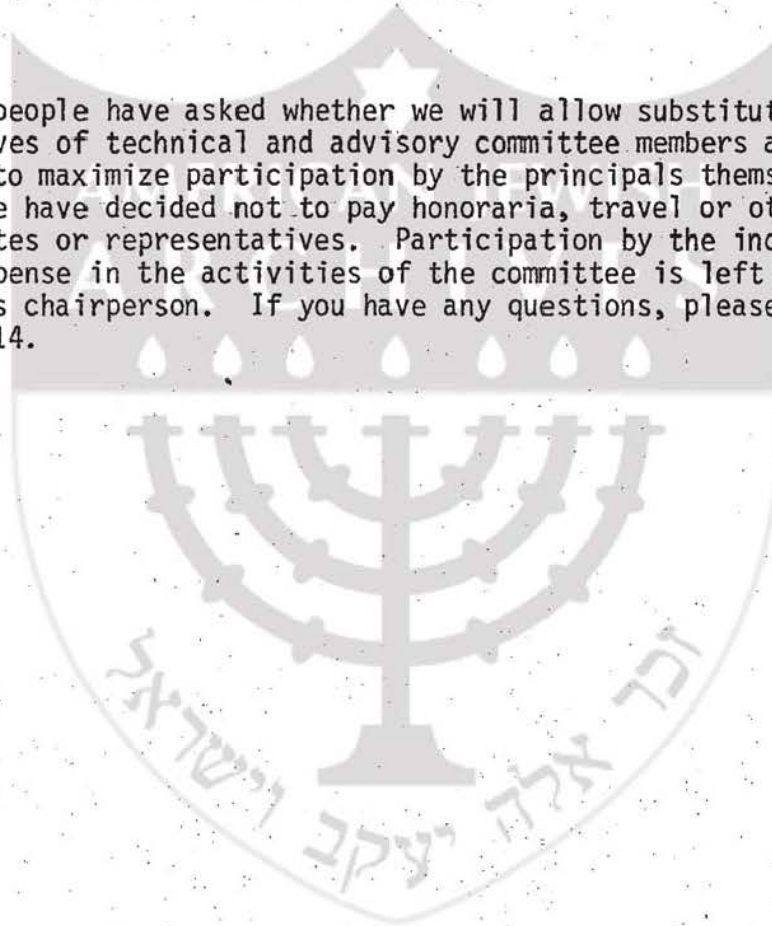
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Technical Committee on Media

DATE: July 28, 1980

FROM : 
Jarold A. Kieffer, Staff Director
White House Conference on Aging

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NEWS COMMITTEE

FROM THE

THE AMERICAN JEWISH COMMITTEE Institute of Human Relations, 165 E. 56 St., New York, N.Y. 10022, (212) 751-4000

The American Jewish Committee, founded in 1906, is the pioneer human-relations agency in the United States. It protects the civil and religious rights of Jews here and abroad, and advances the cause of improved human relations for all people.

MORTON YARMON, Director of Public Relations

FOR IMMEDIATE RELEASE

NEW YORK, March 15....Charging that the needy elderly make up an "historically disadvantaged and discriminated against" group, the American Jewish Committee today urged the Federal government to institute special efforts to bring into various governmental aid programs the large number of aged who are eligible but do not now participate in them.

The agency, a leading human rights organization, asked the U.S. Health, Education and Welfare Department to go beyond its present non-discriminatory implementation of its programs and to institute special "outreach" efforts toward older people in need.

The American Jewish Committee suggestions were made as part of a series of comments on proposed HEW regulations implementing the Age Discrimination Act. The law, passed in 1975, forbids discrimination because of age in the implementation of programs receiving Federal financial aid.

In its comments, the American Jewish Committee urged HEW to institute an "affirmative action" program of sensitizing the needy elderly to the availability of programs to assist them. Such a program, the Committee declared, should include these major components:

1. Special efforts to include the aged in Federal programs or activities. This means going beyond the referral resources traditionally used, and specifically employing all those community resources that reach out to senior citizens who have been previously excluded.
2. Programs to help the potentially eligible, including educational programs and other special efforts.
3. Continued review of all test and eligibility criteria to make sure they are as free as possible from bias, while at the same time maintaining and strengthening objective selection standards and criteria.
4. Within the context of the affirmative action principle, the granting of special consideration to these applicants from among those discriminated against or disadvantaged who are substantially equal in qualifications to others being considered.

- more -

The American Jewish Committee's comments were filed with the Health, Education and Welfare Department by its Legal Advocacy Program for the Aged. The program, which was established in 1976 under a grant from the Brookdale Foundation, grew out of AJC's long history of actions to protect the rights of all segments of society under law. A program of AJC's New York Chapter, the Legal Advocacy Program has participated successfully in many court cases challenging discriminatory and inequitable governmental actions affecting the elderly.

Samuel Sadin is chairperson of the Legal Advocacy Program for the Aged. Robert J. Wolf is its Director.

Founded in 1906, the American Jewish Committee is this country's pioneer human relations organization. It combats bigotry, protects the civil and religious rights of Jews at home and abroad, and seeks improved human relations for all people everywhere.

3/14/79
79-960-39
A,EJP,NYL



THE NATIONAL COUNCIL ON THE AGING, INC.

Since 1950 working to improve the lives of older Americans



1828 L STREET, N.W., WASHINGTON, D.C. 20036

TELEPHONE (202) 223-6250

April 16, 1981

Rabbi Marc Tannenbaum
National Director
Interreligious Affairs
American Jewish Conference
165 East 56th Street
New York, New York 10022

Re: North American Regional Technical Meeting on Aging
In preparation for the 1982 World Assembly on Aging,
Sponsored by the National Council on the Aging
in cooperation with the United Nations Centre for
Social Development and Humanitarian Affairs and the
United States Department of State

Dear Rabbi Tannenbaum:

The National Council on the Aging (NCOA) cordially invites you to be a participant in the open sessions (June 15, 16 through noon of the 17th) of the North American Regional Technical Meeting on Aging to be held June 15-19, 1981 at the United States Department of State, 2201 C Street N.W., Washington, D.C.

On the recommendation of the North American Advisory Committee, you have been selected for participation in this meeting. Participants have been chosen to cover a wide range of professional disciplines that relate to the ten specific subject areas selected by the United Nations. To insure a comprehensive view, a team effort has been designed for generating a group report, in each area, that will be integrated to form a North American document.

The following information is provided to acquaint you with the nature and scope of the project. NCOA was selected by the United Nations Secretariat to host the Regional Technical Meeting on Aging for North America (U.S. and Canada) in preparation for the 1982 World Assembly on Aging. The meeting will be held in cooperation with the United Nations Centre for Social Development and Humanitarian Affairs and the United States Department of State. Other regional meetings have been, or will be, held in Malta (Middle East and Mediterranean Area), Costa Rica (Latin America), Thailand (Asia and the Pacific), Nigeria (Africa), Russia (Eastern Europe) and Germany (Western Europe). The main categories of issues to be examined at each regional meeting are humanitarian issues, relating to distinct needs of older adults, and developmental issues, including political, economic and social factors that impact on older persons.

The invitational regional meeting will bring together a selected number of U.S. and Canadian experts and Participants from a wide range of academic disciplines and professions. Their mission will be to assist the World Assembly in achieving its main objective "...to launch an international action program aimed at guaranteeing economic and social security to older persons, as well as opportunities to contribute to national development." The regional meeting will consider three papers prepared by the United Nations entitled: "Demographic Profile," "Aging and Development: The Developmental Issues," and "Aging and Development: the Humanitarian Issues." The regional meeting will result in a North American report written by the experts and based on a dialogue with Participants on the papers prepared by the United Nations. The report will be submitted to the European/American Regional Intergovernmental meeting prior to submission to the World Assembly on Aging.

A program for the June 15-17 open meeting is attached. The following discussion will give a more in-depth view of the proceedings. A Plenary Session will be conducted the first day (June 15th). It will include an introduction to the 1982 World Assembly on Aging, presentation of three United Nations documents, and brief (no more than ten minutes) oral testimony by selected Participants. Testimony will conclude on the first day.

As an invited Participant, you have the opportunity to represent your organization in responding to the basic premises and data in the U.N. documents and to the specific issues which arise from the North American perspective. Your response should be in the form of a paper submitted to NCOA by May 18, 1981. Papers are to be no more than five pages (single spaced) and must be organized in the following order of contents: 1) identification of the responding organization; 2) a general introduction; and 3) the specific subject areas (each clearly identified by a heading) you choose to address (see page 2 of the conference program for the subjects). Copies of all papers will be distributed to the appropriate experts. A review process will determine which papers are selected for oral presentation at the Plenary Session. You will be notified if yours is selected.

Panel Sessions will begin on June 16th and close at noon on June 17th, 1981. There will be ten Panel Sessions, one on each subject area. Each will be led by selected experts. Advisory Committee members and Participants may provide oral input to these discussions. Five sessions will run concurrently, thereby allowing Participants to attend more than one (see attached Program).

Plenary luncheons will be held on June 15 and 16 with presentations by U.S. and Canadian representatives from both the private and public sectors. There will be a registration fee of \$100 to cover the luncheons and conference materials.

A block of rooms at the Capital Hilton Hotel, 16th and K Streets N.W., Washington, D.C., has been reserved at special rates. A reservation card is enclosed for your convenience.

We hope that your schedule will permit you to participate in this exciting North American meeting. Because of necessary U.S. State Department security procedures and requirements, it is requested that your reply be as prompt as possible. The enclosed registration form (pages 1 & 2), along with your payment, is to be returned to the NCOA Conference Department, no later than May 18, 1981. No reservations can be accepted after this date. Also, for security reasons, no substitutions can be accepted.

Enclosed is an Advisory Committee Roster, a United Nations General Assembly draft: "Programs and Arrangements for the World Assembly on Aging", and the United Nations' papers. I look forward to meeting with you in June.

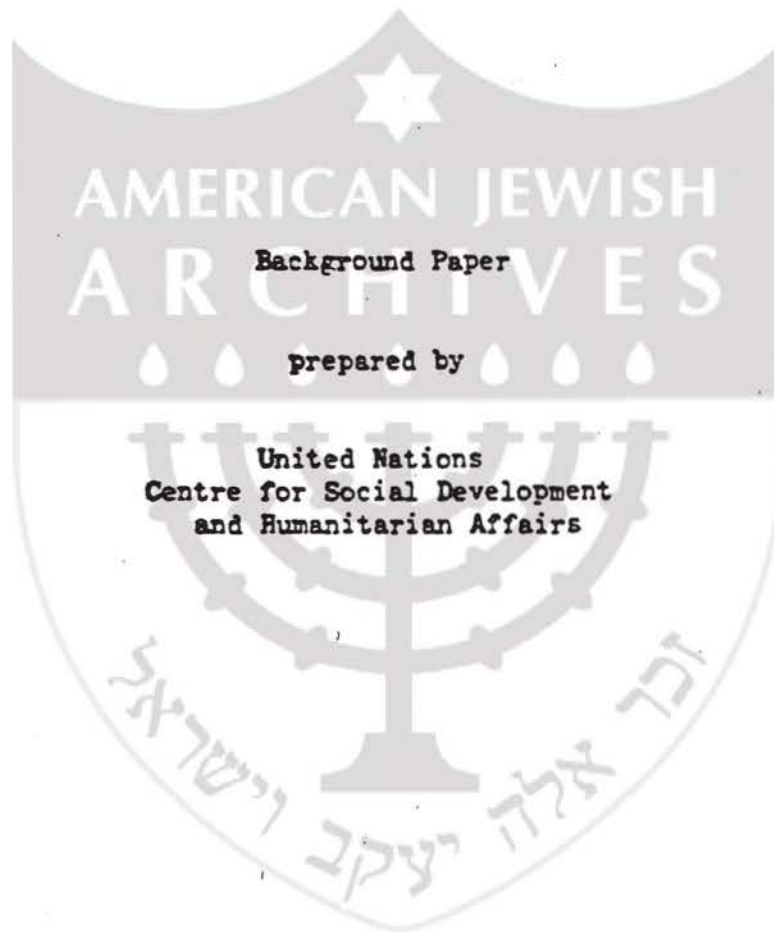
Sincerely,

Ellen Winston
Ellen Winston
President

Enclosures



AGING AND DEVELOPMENT: THE DEVELOPMENTAL ISSUES



(This paper has been prepared to serve as the basis for discussions at the regional technical meetings in preparation for the World Assembly on the Elderly, 1982)

I. INTRODUCTION

In the preparatory work of the World Assembly on the Elderly, the question of the aging is being considered within the broader context of the world's social and economic trends so as to appreciate its complexity and to understand the interrelatedness of aging issues with those of the society at large. This background paper on "Aging and Development" is intended to serve as a basis of discussion at the four regional meetings preparatory to the World Assembly on the Elderly. Considering its aim, the paper must necessarily be general in content and broad in scope; only some of the major issues involved may be touched upon - each in a rather schematic fashion - and only those traits common to most countries or regions at a given stage of development may be considered. Needless to add, the complex relationships between aging and development may and should be approached from a variety of perspectives, with differing emphases and perhaps with differing results as well.

The uneven pattern of growth among countries and the existing trends of economic progress very often tend to bypass the majority of the population. A more human-centered perspective therefore should be considered and increasingly organized around the human factor as both its agent and beneficiary. Thus, development policies should aim at bringing development to the people and making it more responsive to their needs while allowing for and relying on the fullest possible mobilization and utilization of all available resources, including those of the aging.

In light of the above, it has been suggested that the various issues related to the aging should be grouped under two major topics: humanitarian and developmental, taking into account the fact that these

two spheres are interdependent and interrelated; humanitarian variables influence development variables and are also influenced by them. This paper is concerned solely with developmental issues.

Special interest groups and persons responsible for sectoral policies often tend to overlook or, at least, to underemphasize the role of the country's overall economic, social and political situation when addressing specific phenomena such as aging population structures. This is unfortunate because full awareness of the context makes for a more realistic assessment of restrictions as much as for a wider perception of opportunities, an enlarged audience, a better fit to national conditions and, no less, for more exciting challenges to the imagination. Moreover, meeting the needs of the elderly, as with any other group in a society, is an important variable in that society's development. The fact remains, however, that these needs cannot be fully assessed and, in turn, addressed unless, and until there is some recognition that the proportion and numbers of this cohort is steadily increasing resulting in an overall aging population structure. Only when policymakers recognize this fact can they effectively and efficiently design policies which will, in due course, give rise to a more effective distribution of the needed programmes and services. Herein lies the focal point of this paper, the aim of which is to highlight the economic impact of aging population structures which must, in the long run, shape and be reflected in national development plans and their composite policies.

Keeping in mind that all aging issues are interrelated and interdependent, the developmental issues should not be considered in isolation, but should comprise those cross-sectional issues which consider the aging within the context of society at large. They are

concerned with the role of the aging in the developmental process, particularly in such crucial areas as the relationship between the aging of population and social and economic development. Action on these issues are primarily the responsibility of national Governments and should be integrated in overall national development policies.

The aging of the population coupled with urbanization and industrialization are leading to critical issues with regard to human resources and social and economic development. Although issues relating to the aging in some developing countries have not as yet arisen to a significant degree within the socio-economic context, with increased industrialization, urbanization and other related social and economic changes, as well as increases in the numbers of the aging and their proportion in the total population, these countries will increasingly face such issues. These phenomena have numerous and wide-ranging economic and social implications that must be understood and taken into account by planners and policymakers.

The world and all its regions are witnessing an aging of their population, and this has serious implications, inter alia, on production, consumption and savings which in turn affect overall economic conditions and policies especially at times when aging dependency rate is increasing. In addition, the increasing numbers of older people are often adversely affecting the development process because, in many countries, they have not been integrated in this process but have remained marginal to the mainstream, at best.

The skills of the aging population represent economic and social resources that should not be dispensed with lightly. Many Member States emphasized that the aim of aging policy should be to offer the aging options for retirement from active work or for continuation of work on

a full or restricted basis. The value of these options is that of contributing to economic development by allowing the continued use of skills that would be expensive and often difficult to duplicate and of reducing the economic, social and psychological burdens that an idle aging population might place on society.

The aging of population also has serious implications with regard to social development. The countries of the developing world are undergoing changes in the social sphere more rapidly and in a shorter space of time than was the case with the more developed world. Rural development, new political systems, changes in education, technical and employment needs, advances in communications, medical and nutritional sciences and a wide variety of other changes are underway in the more traditional societies of the developing world in an unprecedented manner. The more developed countries have had many decades and, in some cases, centuries, to adapt to such changes; many developing countries are having to cope with them in relatively few years. In both developed and developing regions, however, these changes have had striking effects on the society as a whole as well as on aging persons themselves.

In many countries, developing countries in particular, rapid social change occurring alongside economic development has resulted in problems, at times severe, in the situation of major population groups, including the aging. Ways and means to minimize or eliminate the negative implications of social change on society have become matters of primary concern.

Another area, within this broad developmental context, which has been emphasized as deserving priority attention, is the effect of the aging of populations on integrated rural development. Consistently over the last decade, in international forums and meetings, Member States have stressed the need for rural development. y rural areas of heavy

migration in both developed and developing countries are being depleted of their younger populations and are being left with populations whose age distribution could be unfavourable to economic development. Thus, in many countries the revitalization of the countryside is a priority goal. Accordingly, possible action programmes which could serve to promote integrated rural development, by retraining the older population and using their skills and resources, are being sought.

II. BASIC DEFINITIONS

A. Aging - A United Nations expert group on aging recognized that aging, from a biological viewpoint, began at conception and continued until death of the biological organism, and that growth and maturation of the organism were related to the early and middle stages of human development. The aging are those in the one third to one fourth of the life span when loss and decline - physiological, psychosocial, economical and social - are greater. Such losses are not always due to biological factors but might also be due to social, economic, environmental and cultural factors. The "aging" provides a more adequate description than the terms "elderly" or "aged". It suggests continuing development and change during the later stages of the life span, rather than a fixed or static period of life. The "aging", therefore, would best describe those segments of the population beyond the middle years of life, encompassing several stages of the life span with a vast range of differences. However, for practical reasons, a statistical definition of old age has been used in demographic studies and analysis and social policies relating to aging. For the purpose of the World Assembly the aging is defined as those who are 60 years of age and over.

B. Population aging is generally understood as an increase in the proportion of the population in the older age groups. The term "older age groups" means either those in the final stages of the life cycle in each society, or those over a certain specified age, when cross-societal comparisons are intended.

It is important to note that population aging does not always imply that more individuals are surviving to old age, since any of a number of changes in the overall age structure may result in a relatively higher proportion of aged persons; for instance, a decline in fertility, the mass out-migration of young people or gains in life expectancy may each determine population aging. Further, the proportion of aging individuals may be determined with reference to the total population, or only to the number of "young" adults (e.g. those in the 15-59 age interval) hence providing different measurements of population aging. Finally, it should be realized that population aging and individual aging, although closely related, are different phenomena with different implications for society and for the elderly themselves. Summarily then, population aging or the aging of population may be defined as an increase in the ratio of older adults to younger adults and the focal point of this paper is the effect of this phenomena on the overall development of society.

C. Development must encompass a full range of socio-economic factors rather than focus on economic growth alone, as has been the general tendency in the past, if it is to result in meaningful structural changes within a society. Furthermore, any definition of development must be unique for the country to which it pertains since it must reflect that nation's goals, priorities, interests and requirements which, in turn,

will be determined by its values (social, cultural, economic and political). Accordingly, development must take into account economic growth, productive capacity plus overall output as well as structural changes which increase the equity of distribution of a nation's assets such as wealth, income, production and political power. In short, development is an integrated process of economic growth and structural change within the parameters of a given country's socio-cultural peculiarities and experiences. That is to say that any future development strategy should have a more human-centered perspective and should be organized increasingly around the human factor as both its agent and beneficiary.

D. Economic growth is the most widely utilized indicator of development. It refers to the total availability of goods and services to satisfy, eventually, the "material" needs of the population. This measurement is usually determined by the level of per capita income reached (as a stage) or by the rate of growth in per capita GNP (as a process). Currently, however, much effort is being devoted to the development of alternative indicators such as "quality of life" units so that national variations in buying capacity of income, perception of in-kind income and life styles may be brought into the picture and assessed. Most observers agree that economic growth is a function of the quantity and quality of the productive factors (namely, natural resources, physical and financial capital, pure manpower and human capital) and of their combination and efficient use which are determined by both "hard" and "soft" technology.

The income generated from productive activities and the resulting fund of available goods and services may be distributed in different proportions to the several groups and individuals in society. There is

increasing recognition that economic growth systematically affects the structure of income distribution (both functional and personal) and that a point is reached where failure to redistribute hinders further growth. Most importantly, however, it is recognized that a more egalitarian distribution is not an automatic or natural outcome of development. At a formal level of analysis, income distribution may be viewed as resulting from three elements: the differential endowments of productive factors between social groups; the differential rates of return for such productive factors (which, together with the first element, determine the social allocation of "earned" income); and the pattern of uncompensated transferences, of governmental or private origin, which constitute "unearned" income for the recipient group.

E. Economic growth and structural transformation in the distribution of income are accompanied by a set of processes generally known as social modernization. Briefly put, modernity means the rationalization and specialization of human relations and social institutions which facilitate the mobilization of individual energies towards specific, usually secular, and impersonal goals. As a wide ranging phenomenon, modernization alters the individual's values and attitudes, his patterns of interaction, the major institutional spheres, and the prevailing cultural arrangements. Inasmuch as "de-freezing" and mobility of resources are necessary requirements for development, modernization begins with more or less pronounced and accelerated breakdowns of the traditional social order. Family, religion, tribal or ethnic solidarities, locally closed communities, non-market forms of economic production, "patrimonialistic" types of political expression, "pre-rational" legal systems and ideologies, stratification arrangements sanctified by tradition, tend all to be undermined in their ability to support,

integrate and provide meaning to life and become confined to a narrower set of functions, often implying a neat distinction between the "private" and the "public" spheres of everyday life.

F. The nuclear family is defined as the conjugal pair with or without children. This term may also refer to one of the conjugal pair with children.

G. The extended family refers to a consanguine family network which is comprised of two or more generations (vertical linkage) and/or two or more nuclear units of the same generation (horizontal linkage).

H. Dependency is the status of having to depend or rely on others for one's welfare and livelihood.

I. Developing countries will include the non-industrial countries of the developing regions of Africa, Asia, Latin America and West Asia. A more meaningful discussion and report will be forthcoming if these countries are sub-classified on the basis of their economic foundations as has been done by Okita. ^{1/} Accordingly, there are four types of developing countries as follows:

- (i) oil-exporting countries with surplus current accounts:
- (ii) countries which are presently in the throes of accelerated industrialization such as the Republic of Korea, Singapore, Hong Kong and the Province of Taiwan for Asia; Greece, Portugal, Spain, Turkey and Yugoslavia for Europe; and Brazil and Mexico for Latin America;

^{1/} Saburo Okita, "Current Thinking About Development", Working Paper, 79-01 (Nagoya, Japan, United Nations Centre for Regional Development, February 1979).

- (iii) countries whose economies are based on primary exports and whose per capita GDP exceeds US\$ 200;
- (iv) the least developed countries which are identified by a per capita GDP of US\$ 200 or less.

J. The developed countries, includes those which the World Bank identifies as industrialized such as the European countries, South Africa, New Zealand, Japan, Australia, the United States and Canada, as well as the Soviet Union and its bloc which fall under the centrally-planned economies classification. 2/

III. POPULATION AGING AND DEVELOPMENT

A. Demographic Trends

Population aging, the process whereby the proportion of the aging in a given population steadily increases, is a universal phenomenon, the implications of which are far-reaching and perhaps not totally estimable at this point in time. The relative newness of this phenomenon, particularly in developing regions, is reflected in a concomitant lack of research studies which address it directly. In recent years, however, it has become starkly apparent that population aging is an important variable in the development processes of all nations which affects, not only their social and economic spheres, but others as well. As such, this phenomenon presents itself as a very real force which must be treated more directly and efficiently than has heretofore been the case. It should be noted at this juncture that, while population aging is universal, it is by no means uniform. In this vein, Cowgill observes

2/ World Development Indicators, (World Bank, Washington, D.C., 1978).

that "Countries in different stages of economic and social development, i.e. modernization, manifest radically different degrees of demographic aging". 3/ Furthermore, and generally speaking, the aged populations tend to be concentrated in the more developed regions - those countries that are highly modernized and industrialized - whereas the less developed regions are characterized by younger population structures. Implicit in these observations is the fact that the impact of this phenomenon will differ from country to country and thus precludes all-embracing generalizations or standardized methods of treatment.

While it is generally accepted that population or demographic aging is a consequence of a wide range of demographic factors such as fertility, longevity/mortality, fecundity and migration, the polemic as to which trends take priority continues, although it is widely acknowledged that fertility and mortality are, perhaps, the most important factors in this process. 4/ Briefly summarized, there have been significant declines in fertility rates around the world over the past few decades, particularly in the more developed regions which logically means that increasing proportions of these populations fall into the older age groups. There has, moreover, been an equally dramatic decline in mortality with a concomitant increase in longevity which has also had its impact upon population aging. There are those, however, who

3/ Donald O. Cowgill, "Demographic Aging and Economic Dependency", in Recent Advances in Gerontology, Hajime Orimo, et al. (eds.). (Amsterdam, Netherlands: Excerpta Medica, 1979) p. 303.

4/ P.C. Mathiessen, "Demographic Aspects of Life Extension" and Bernice L. Neugarten, "Social Implications of Life Extension" in Recent Advances in Gerontology, op.cit.: "Demographic Overview of the Aging Populations" in Report of the United Nations Interregional Seminar on Aging, Kiev, USSR, 14-25 May 1979 (Unpublished U.N. report).

dismiss mortality as a determining factor in population aging, arguing that decreasing mortality rates result in greater longevity for all age groups thus maintaining their respective proportions. 5/

The relationships between development, on one hand, and fertility and mortality, on the other, are best seen in the context of the "demographic transition theory". According to this influential and controversial theory, population variables undergo a three-phase change during the course of development. Phase I is characterized by high fertility and high mortality rates with slow population growth; during Phase II, fertility remains high whereas mortality experiences sharp drops and, consequently, a "population explosion" is registered; during Phase III, mortality continues to fall slowly but fertility rates are reduced faster until a situation of "low level" equilibrium is approached. It follows from the theory that the number of persons reaching older ages grows constantly and that their proportion over the total population diminishes during Phase II but steadily picks up during Phase III.

As noted previously, the degree or rate of population aging differs between developing and developed nations. More specifically, "owing to radically different population trends, particularly with respect to birth rates, the age structure of the most developed regions differs markedly from that of the less developed regions." 6/ It has been projected that, between 1970 and 2000, there will have been a 100% increase in the population of less developed regions while the more developed regions will, during the same period of time, experience only a 26% rise in population. 7/ Furthermore, it is important to note that

5/ Mathiessen, op.cit.

6/ "Demographic Overview of the Aging of Populations", op.cit. p. 39.

7/ "World and Regional Population Prospects" in The Population Debate: Dimensions and Perspectives, Papers of the World Population Conference, Bucharest, 1974, Vol.1 (United Nations publication, sales no. E/F/S.75. XIII.4).

"Both in fertility and in mortality major changes are anticipated only in the less developed regions. In these regions, taken as a whole, fertility decline is expected to begin by the middle or end of the decade of the 1970s and to be such that the general level would be reduced by about 30% in 25 years. There will naturally be considerable variation among the major areas, with the anticipated decline being faster in East Asia while in Africa the decline would begin a decade later" ^{8/} There will be a simultaneous reduction in the mortality rates of these regions all of which adds up to an increasingly aging population structure. In the meantime, the more developed regions will have experienced a steady rise in the proportion of their aging populations.

A look at the figures presented in Tables 1 and 2 adequately documents, in general terms, the inverse relationship between development (per capita GNP) and mortality (as measured by crude death rates) and between development and fertility (as measured by crude birth rates), respectively. These observations are in accordance with the demographic transition theory which predicts decreasing mortality and fertility rates as development proceeds.

It becomes immediately apparent, then, that aging populations are indeed a reality for both the developing and developed regions. The novelty and relative celerity of this phenomenon dictate the necessity of certain adjustments and modifications in the life styles of given populations, as well as in the policies and planning of the relevant official governmental bodies, if a smooth adaptation is to be made. In short, population aging, as stated previously, affects the social and economic functioning of a society and must be dealt with accordingly.

^{8/} Ibid. p.189

Table 1

Per Capita GNP (1978) and Crude Death Rates, Both Sexes
By Regions, 1970 - 2000

	Per Capita GNP 1978 (US dollars)	Crude death rate (per 1000 population)		
		1970-1975	1980-1985	1995-2000
World Total	1,650	12.8	11.0	8.9
More developed regions		9.2	9.6	9.9
Less developed regions		14.3	11.5	8.6
Africa	440	19.8	16.2	11.4
Eastern Africa	210	20.7	17.1	12.1
Middle Africa	230	21.7	18.1	13.0
Northern Africa	650	15.2	11.8	8.0
Southern Africa	1,240	16.2	12.8	9.0
Western Africa	350	23.0	19.2	13.5
Latin America	1,100	9.2	7.5	5.7
Caribbean	1,060	9.1	8.0	6.4
Middle America	1,000	9.4	7.4	5.4
Temperate South America	1,400	8.9	8.9	8.9
Tropical South America	1,090	9.2	7.2	5.2
Northern America	7,850	9.3	9.6	9.8
East Asia	900	9.8	8.6	7.9
South Asia		16.7	12.8	8.9
Eastern South Asia	330	15.4	11.9	8.3
Middle South Asia	220	17.0	13.0	9.0
Western South Asia	1,730	14.3	11.5	7.7
Europe	4,420	10.4	10.7	10.4
Eastern Europe	2,820	10.2	10.7	10.1
Northern Europe	4,910	11.2	11.5	11.1
Southern Europe	2,620	9.2	9.8	10.2
Western Europe	6,900	11.1	11.2	10.6
Oceania	4,730	9.3	8.7	8.0
USSR	2,760	8.5	9.0	9.6

Source: World Bank, Basic Data Sheet, 1978, and UN, CSDHA, "Demographic Overview of the Aging of Populations", UN Interregional Seminar on Aging.

Table 2

1965 and 1975 Crude Birth Rates, 1965-75 Crude Birth
Rate Declines, 94 Developing Countries

Country	Per Capita GNP 1978 (US\$)	Crude birth rate		1965 - 75 Crude birth rate decline (in percents)
		1965	1975	
Afghanistan	160	49	49	-2
Algeria	990	50	48	4
Angola	330	49	47	4
Bangladesh	110	50	49	2
Barbados	1,550	27	19	31
Bhutan	70	45	43	3
Bolivia	390	44	44	1
Brazil	1,140	42	38	10
Burma	120	41	40	3
Burundi	120	48	48	1
Cameroon	290	42	41	3
Cen. African Rep.	230	45	43	5
Chad	120	45	44	2
Chile	1,050	33	23	29
China	410	34	26	24
Colombia	630	44	33	25
Congo	520	44	45	-2
Costa Rica	1,040	41	29	29
Cuba	860	34	21	40
Dahomey/Benin	130	51	49	3
Dominican Rep.	780	47	38	21
Ecuador	640	45	45	0
Egypt	280	42	35	17
El Salvador	490	46	40	13
Ethiopia	100	50	49	2
Fiji	1,150	36	28	22
Ghana	580	50	49	2
Guatemala	630	45	43	4
Guinea	150	47	46	2
Haiti	200	45	45	0
Honduras	390	51	48	7
Hong Kong	2,110	28	18	36
India	150	43	36	16
Indonesia	240	46	40	13
Iran	1,930	46	45	2
Iraq	1,390	48	48	0
Ivory Coast	610	46	45	1
Jamaica	1,070	38	30	21
Jordan	610	48	47	1
Kenya	240	50	50	0
Khmer/Kampuchea	-	47	47	2
Korea North	670	39	37	5
Korea South	470	35	24	32
Kuwait	15,480	46	44	5

Table 2 (cont'd)

Country	Per Capita GNP 1978 (US\$)	Crude birth rate		1965 - 75 Crude birth rate decline (in percents)
		1965	1975	
Laos	90	44	42	5
Lebanon	-	41	40	2
Lesotho	170	38	40	-4
Liberia	450	50	50	0
Libyan Arab.Rep.	6,310	47	47	-1
Madagascar	200	50	50	0
Malawi	140	49	47	5
Malaysia	860	42	31	26
Mali	100	50	50	-1
Mauritania	340	45	45	0
Mauritius	680	36	26	29
Mexico	1,090	44	40	9
Mongolia	860	42	38	9
Morocco	540	49	48	2
Mozambique	170	43	43	2
Nepal	120	45	45	-1
Nicaragua	750	49	46	7
Niger	160	52	52	1
Nigeria	380	50	49	1
Pakistan	170	48	47	1
Panama	1,310	40	31	22
Papua New Guinea	490	43	41	5
Paraguay	640	42	39	6
Peru	800	43	42	2
Philippines	410	44	36	19
Rwanda	110	51	51	0
Saudi Arabia	4,480	50	50	0
Senegal	390	48	47	0
Sierra Leone	200	45	45	0
Singapore	2,700	29	18	40
Somalia	110	48	48	0
Sri Lanka	200	33	27	18
Sudan	290	49	49	0
Syrian Arab.Rep.	780	48	46	4
Taiwan	1,070	33	23	30
Tanzania	180	51	48	5
Thailand	380	44	34	23
Togo	260	51	50	2
Trinidad and Tobago	2,240	33	23	29
Tunisia	840	45	34	24
Turkey	990	41	34	16
Uganda	240	46	47	-4
Upper Volta	110	50	49	1
Venezuela	2,570	42	37	11
Vietnam, North	-	42	32	23
Vietnam, South	-	42	41	0

Table 2 (cont'd)

Country	Per Capita GNP 1978 (US\$)	Crude birth rate		1965 - 75 Crude birth rate decline (in percents)
		1965	1975	
Yemen	250	51	50	1
Yemen, P.D.R. of	280	50	49	3
Zaire	140	47	44	6
Zambia	440	50	50	-2
Total				
Total weighted by				
Unity ^a		44	41	9
Population ^b		41	36	13

a Each country is given a weight of one

b Each country is weighted by the population of that country

Source: Mauldin, Berelson and Sykes, "Conditions of Fertility Decline in Developing Countries", Studies in Family Planning, 9, 5, 1978 (May). And World Bank, Basic Data Sheet, 1978.

If current trends prevail, by the year 2000, 9.3 per cent of the world's total population will fall into 60 years and over age group. In absolute numbers, this translates into 581 million people which is almost twice as many as comprised this group in 1970 (348 million) which then accounted for 8.4 per cent of the total population. Furthermore, "It is significant to note that for the more developed regions the increase in the population as a whole will be 25 per cent from 1970 to 2000, while those aged 60 years and over will increase by 52 per cent. For the less developed regions, the proportionate increase is even more pronounced; while a 94 per cent increase is anticipated for the total population over the same time period, the increase of those 60 years and over will be approximately 130 per cent. Therefore, the less developed regions of the world can anticipate a higher proportionate increase in their elderly population than the more developed regions. The total number of persons 60 and over in East Asia, for example, will increase more than 100 per cent during this 30-year period. For Latin America, the increase in this segment of the population is most significant, with an increase of 151 per cent in contrast to an increase of 119 per cent for all ages". 9/

Perhaps, these trends are depicted more dramatically in Table 3 which illustrates the projected increases in the world's total population (proportionate) and the population 60 years and over (absolute and proportionate), between 1970 and the year 2000, for the major areas, wherein the percentage increases for developing regions are particularly striking. What this means is that aging population structures may well

9/ "Demographic Overview of the Aging of Populations", op.cit. p.40.

Table 3

Estimated and projected distribution of the total population of the major areas in the age group
60 and over

(percents, number and percent increase); percent increase of population of all ages
1970 - 2000

	Population age 60 and Over							
					Number (in thousands)			
	1970	Percentage		Estimated	Projected	Per cent	Total	
	1980	1990	2000	1970	2000	increase	Population	
							Per cent	
							increase	
World Total	8.4	8.5	8.9	9.3	304 341	581 431	91	73
More developed regions	14.2	14.8	16.2	17.2	153 424	233 851	52	25
Less developed regions	6.0	6.1	6.5	7.1	150 917	347 579	130	94
Africa	4.7	4.7	4.9	5.2	16 704	42 135	152	131
Latin America	5.8	6.1	6.4	6.7	16 483	41 528	151	119
Northern America	13.8	14.9	15.2	14.5	31 276	42 965	37	31
East Asia	8.5	9.1	10.2	11.5	78 333	157 770	101	48
South Asia	4.9	5.0	5.4	6.1	53 997	137 443	154	106
Europe	16.7	16.7	17.8	18.5	76 450	99 947	30	18
Oceania	10.8	11.1	11.5	11.1	2 081	3 631	74	69
USSR	12.0	13.1	15.6	17.8	29 018	56 007	93	30

Source: United Nations Centre for Social Development and Humanitarian Affairs, "Demographic Overview of the Aging of Populations", UN Interregional Seminar on Aging, tables 2, 3 and 4.

represent one of the most challenging factors for social and economic development over the ensuing decades.

In conclusion, then, aging population structures are not peculiar to developed regions; countries at all stages of development are facing it now. The challenge of aging population structures demands more exacting efforts on the part of developing regions, not only because the current situation of their elderly is more precarious, but also because the number and relative proportion of this group in the population are to increase faster.

B. Aging and Economic Growth

The aging as a group usually become more and more dependent upon others for their sustenance and wellbeing. This is due largely to the fact that aging brings with it increased susceptibility to the loss of financial independence, housing independence, mobility and health. 10/ Traditionally, the needs of the elderly were met within the boundaries of the extended family and this is still the case, to some extent, in many developing and non-western societies. Even in developing and non-western countries, however, there has been a noticeable modification to this tradition in the direction of less family care for the aged and more governmental or organisational care. In Japan, for instance, a country where the tradition of the extended family and care for the aged is extremely strong, there have been forwarnings of the weakening and eventual loss of this tradition. 11/ Similarly, this trend has been

10/ Robert C. Atchley, The Social Forces in Later Life, (Belmont, California: Wadsworth Publishing Co., 1972).

11/ Daisaku Maeda, "Aging in Eastern Society" in The Social Challenge of Aging, David Hobman (ed.) (London: Croom Helm Ltd., 1978).

attributed to African societies which had previously adhered to the tradition of caring for the aged within the family network. "There is an increasing trend towards individualism and concern for the welfare of the immediate of (SIC) nuclear family at the expense of the obligations to the lineage. This is more pronounced in some localities than others, but generally the pattern is the same". 12/

The elderly tend to become dependent largely because they are legally required to retire from the work force. To a lesser extent, this move may be dictated by failing health. Whatever the circumstances, the fact of the matter remains that, at this point, the aged, in many countries, must assume a status of dependency because they no longer have the financial means whereby to maintain a home or see to their welfare needs. In many more developed countries there has been an attempt to offset this forced dependency by providing the retired person with pensions and social security benefits. Even these measures have proven inadequate in that these benefits seldom keep abreast of the rise in the cost of living and inflationary trends. 13/

As a dependent group, the aging are assumed to be economically non-active and, consequently non-productive. Additionally, this group is seen as contributing little or nothing to capital formation since their savings rates is just about nil based on their economic roles as solely consumers. While these assumptions may hold true in general terms, to accept them as constants would be to oversimplify

12/ Nana Araba Apt, "Social Change and Its Effect on the Aging", in Report of the United Nations Interregional Seminar on Aging, op.cit. p.52.

13/ Juanita M. Kreps, "The Economy and the Aged" and Harold L. Sheppard, "Work and Retirement", in Handbook of Aging and the Social Sciences, Binstock and Shanas (eds.) (New York: Van Nostrand Reinhold Co., 1976)

the reality of the situation in many cases. First of all, we must take into account the fact that, in many developing countries, widespread poverty and the existence of a large "informal" labour market dictate and facilitate, respectively, the participation of the elderly in economic pursuits to a larger extent than is the case for their counterparts in developed regions.

In more developed regions, on the other hand, one must take into consideration the fact that there are factors which actively work to keep the elderly out of the labour force. First and perhaps most important, there are retirement pensions and other social security arrangements which induce or enable the aging person to withdraw from the market. Second, and of comparable significance, the health factor may impede, to a greater or lesser extent, the elderly's participation in the occupational world. Third, the overall rate of unemployment prevalent at a given time may have a profound effect upon the elderly's presence in the labour force. As members of the "secondary" labour force, the aging may be easiest to discourage from the market when job opportunities are scarce or, on the contrary, they may be pushed into the market when other breadwinners in the family loose their jobs (the first hypothesis, "discouraged worker" has marshalled somewhat more evidence than the second, "additional worker"). Finally, urban residence appears to be less conducive to occupational engagement than does rural residence.

In either case (developing or developed regions) the elderly, for the most part, comprise a non-productive, dependent group in a society whose contribution to capital formation is negligible at best. Considering the implications of aging population structures for capital formation, it seems obvious that a larger proportion of elderly individuals, ceteris paribus, dampens the savings rate and, consequently,

slows down economic growth. ¹⁴ / This is so because the percentage of economically unproductive individuals ("refined dependency rate") is higher among older than among younger cohorts. Once again, however, such a generalization should be qualified in several ways.

The common-sense notion that labour inactivity on the part of larger segments of the population usually implies reduced production per head, turns out to be solidly rooted in economic theory, or at least in the mainstream tradition within the field. Beginning with a full employment assumption, it seems logical that a raise in the number or the proportion of people disengaged from labour activities automatically leads to reduction in output or to a sub-optimum equilibrium position, but already in the factor-supply line of analysis, some theorists willingly admit one remarkable exception from the increased dependency-reduced output generalization. The argument here is that, when diminishing marginal returns to labour prevail in the economy, additional workers bring about lesser and lesser gains to total and per capita output. Hence, if technological changes and/or relative factor prices fail to shift the labour productivity curve upwards, the advantages of lowering the number of unoccupied individuals are progressively lost. In short, once the marginal productivity of labour has reached the zero limit, further enlargements of the manpower stock actually reduce total output. This observation is especially relevant for developing countries: a typically slow rhythm of technological change and a fairly rigid structure of factor prices operate to keep the "law of diminishing returns" in action.

¹⁴/ Hernando Gomez Buendia, "Economic Implications of Aging of Populations", in Report of the United Nations Interregional Seminar on Aging, op.cit.

Inasmuch as dependency is seen largely as a function of productivity and consumption, the implications of aging population structures for these two processes will now be touched upon briefly with a view to elucidating further their interrelationships and consequences for development.

The effect of aging population structures on productivity has yet to be adequately gauged and assessed even though much research on productivity, job performance and work capacity among the elderly has been conducted in recent years. ^{15/} The results of these studies are not always easy to interpret and sometimes even point in opposite directions; they seem to boil down to four basic conclusions. however: (1) physiological (and, perhaps, psychological) changes associated with aging generally tend to diminish productivity; (2) individual and job-content characteristics are often so matched that productivity remains stable or may even grow with age; (3) there are other structural and attitudinal factors compensatory of physiological-psychological decline in productivity; and (4) it is possible to re-define work content and to reshift occupational structures so that the elderly's productivity is enhanced.

The foregoing would suggest that aging population structures need not be inimical to national or overall productivity and development. On the contrary, given the proper adjustments, aging population structures may even enhance productivity, but in the absence of hard data, this presently stands as a moot question.

The level as well as the composition of aggregate consumption appear to be affected in rather complex ways by the proportion of people in non-working ages and by their split between pre-labour and post-labour years.

^{15/} The agings' labour productivity is discussed at length in Wilma Donalme (ed.) Earning Opportunities for Older Workers, (Ann Arbor: University of Michigan, 1965) and in the relevant papers included in Reports from the 9th International Congress of Gerontology, Kiev, USSR, 1972, V. 2.

Keynes', the best established theory of aggregate consumption, may be summarized in two basic propositions: (1) income is by far the main determinant of consumption; and (2) the proportion of consumed income is higher, the lower the income level of the population. As it stands, the Keynesian model would predict relatively more consumption when dependency rates are high. Complications to the simple income-consumption model emerge, however, when the consuming unit or the concept of "income" are elaborated upon.

First, in practice, it is not the isolated individual who carries out consumption activities but, more commonly, the entire household. Accordingly, larger families spend proportionately more of their income, making for a positive association between infant dependency and consumption expenditures which means that small-sized families, characteristic of an aging population, ought to consume less, assuming relative income remains the same throughout.

Second, it has convincingly been argued that it is not current income which accounts for consumption habits but rather the expected lifetime income stream. Put another way, if an individual plans rationally to maximise his utility over his life-span, his consumption in any given year will depend, not on his income for that year, but on the total resources of which he expects to dispose during his lifetime. Compared to the household-as-consumer unit perspective, this "normal" or "permanent" income hypothesis has the opposite implication for the age-consumption relationship. That is to say, early in their life-cycles, when their children are being raised, families tend to consume less with a view to accumulating savings for the future. The elderly, on the other hand, would likely spend more on consumption than predicted from their current incomes, according to this theory.

On balance, the overall dependency rate seems to have a positive effect on the consumption to income ratio. The differential impact of aged and infant populations seemingly depends on how people weigh the satisfaction of current family needs against providing for the future and such weighing might well differ from developed to developing nations.

In conclusion, economic growth tends, as stated before, to accelerate population aging. Taken in isolation, and under the work arrangements currently prevailing in most countries, population aging can have detrimental effects on economic growth. As a general rule, the elderly participate less in labour market activities, their productivity at work is below that of younger workers, and their savings to income ratio is likewise under that of younger adults. Yet, the detrimental effect of aging on economic growth is not as serious as many seem to believe. A fairly large percentage of the elderly, especially in developing countries, is actually engaged in occupational activities; their performance and productivity at a significant number of jobs are not impaired by age, their level of consumption is lower than among young adults; and population aging is primarily due to decreasing fertility, thus occurring simultaneously with an overall decline in dependency, as measured by the number of dependent children and youth.

Perhaps the major policy implication of the preceding analysis would be the need to bring the aging into economic growth in a fuller fashion. To be specific, the trend toward lowering the retirement age registered in many countries should be carefully considered: a functional rather than a chronological definition of aging could be introduced in labour and social security legislation; effective action against discriminatory practices in the job market should be undertaken; wages and pensions need to be balanced so that incentives to work are

preserved; the effort to create jobs matching the elderly's capability should be set as one social priority. Indeed, from an economic point of view, it must be realized that the failure to commit the manpower and the valuable human capital invested in the aging to fully productive activities is but a growing waste of resources.

C. Aging and the Distribution of Income

There seem to be no obvious and significant linkages between population aging and the relative income distribution unless, of course, the elderly are disproportionately concentrated in a given economic stratum. The little international evidence which has been collected on age specific income distribution patterns suggests that such is indeed the case; the aging are usually found to be poorer than younger adults of similar backgrounds. Hence population aging, in itself, would have some deteriorating impact on the overall distribution of income. Once again, the foregoing statement should be qualified in several respects. For one thing, cross-national data show that income inequality first increases and then decreases with development; at a minimum, this would imply that the effect of aging population on distribution is weak enough to be counteracted by other factors. Then fertility decline, the major determinant of population aging, has also been shown to lessen economic inequality. Third, income distribution is more meaningful when referred to families rather than to individuals so that only those elderly who head households or live by themselves would negatively influence the overall distribution of income. Fourth, income differentials within the aging population are larger than those between age groups making the net contribution of aging to inequality rather negligible.

Structural trends and current policy efforts to overcome or reduce economic inequality in many developing countries are, unfortunately, not

totally successful because they are likely to bypass the elderly. Four factors stand out from empirical research as major contributors to equality: land reform and asset redistribution, rural out-migration, expanded coverage of the educational system, and public programmes aimed at satisfaction of the "basic needs" (food and nutrition, basic health and education, drinkable water, and the like) of the poor. ^{16/} More often than not, land and other types of ownership are redistributed among the working population, with little benefit for the many aging outside the labour force. Concerning the second point, because average income tends to be higher in urban than in rural areas, migration ameliorates the overall distribution: but, as will be documented below, the aging are everywhere less likely to leave the countryside for the city. As for education, school enrollment is, of course, less frequent among the elderly than among younger generations, not to mention that the upwards historical trend in schooling adversely affects the relative educational status of the aging. Lastly, government expenditure in social programmes, effective as it may be, tends to be curtailed when inflationary pressures mount and, what comes more to the point, often responds to organized political pressures or to the interest of preventing social unrest and, for the most part, the elderly are an unorganized minority with little political power or voice to impress the public opinion.

Logically, then, aging population structures means that larger and larger proportions of a given country's population will remain beyond the boundaries of these structural changes which are designed to equalize economic distribution, thus negating their intended impact.

^{16/} These four generalizations emerge from the several works in Hollis B. Chenery *et al*, Redistribution With Growth, Oxford University, 1974. See, for instance, M.S. Ahluxalia, "Income Inequality: Some Dimensions of the Problem", pp. 3-37.

In conclusion, aging of population tends to have negative implications for the country's distribution of income. Improvements in economic equality tend to reach the elderly later and to a lesser extent than other demographic groups. Left to themselves, the forces of the market tend to harm the aging in their relative economic position, especially during the early and intermediate stages of modernization. Thus, if from the standpoint of economic growth the aging's ability to work should be fully utilized, from the distributional perspective, better social security benefits and specific programmes to assist the elderly are necessary. In both cases, the relative standing of the aging in society would be improved, as would the standing of the contemporary aging on the whole.

D. Migration, Aging and Rural Development

Out of the several processes which together constitute development, massive migration from the rural areas to the cities is one with some of the most far-reaching implications. In this vein, many UN Member States have voiced their concern over the detrimental effect that migration and population aging may have for the economic and social development of the rural areas. Since an analysis of the multiple complexities of rural development, as a general issue, would go beyond the scope of this paper, the brief remarks that follow are intended merely to introduce the matter from the specific perspective of population aging.

To begin with, rural-to-urban migration is age selective: the proportion of elderly residents who leave the countryside is far smaller than the respective proportions of children and of younger adults. It is well known that rural fertility rates surpass those in the city, and that mortality is less prevalent in urban than in rural areas. In spite of this, however, the percentage of rural residents aged 60 and over, in developing countries, was 5.5 in 1960 (latest available figures) compared with 4.7 in the city (see Table 4). In more developed regions, the excess of rural aging (12.7%) over urban aging (12.4%) was considerably

less, seemingly because rural urban migration is

Table 4

Population over 60 as Percentage of Total Population,
by Rural Urban Residence, by Sex and by Regions, 1960

	Urban			Rural		
	Male	Female	Both	Male	Female	Both
World	3.8	5.3	9.1	3.2	3.8	7.0
More developed regions	5.0	7.4	12.4	5.5	7.2	12.7
Less developed regions	2.2	2.5	4.7	2.6	2.9	5.5
East Asia	2.3	2.9	5.2	3.0	3.6	6.6
South Asia	2.1	2.3	4.4	2.5	2.5	5.0
Europe	5.9	8.8	14.7	6.2	7.8	14.0
USSR	2.6	5.8	8.4	3.9	7.8	11.7
Africa	1.8	2.1	3.9	2.3	2.6	4.9
North America	5.6	7.2	12.8	6.6	6.4	13.0
Latin America	2.9	3.4	6.3	2.5	2.3	4.8
Oceania	5.5	7.3	12.8	3.7	3.2	6.9

Source: UN, Department of Economic and Social Affairs, The Aging in Slums and Uncontrolled Settlements, New York, 1977, Tables 3 and 4

fertility are not as pronounced here and because migratory currents have generally stabilized in developed countries.

Among developing regions, Latin America is the only one where aging is more pronounced for urban than for rural populations. On the other hand and somewhat surprisingly, the rural age structure is older than the urban one in the USSR as well as in North America. It is also interesting to note that females everywhere contribute more to aging than do males and that there exist significant differences between regions in the sex and age structures of both migrant and resident populations.

Depletion on the younger population from rural areas, raised and trained at the expense of the residents, is in itself a major economic drain from the countryside. In addition, this induced aging of rural populations has unfavourable effects on rural economic growth and overall income distribution. If there is a different economic implication of aging for rural areas as opposed to global societies, it has to do with the fact that age-specific labour activity rates are usually higher in rural than in urban regions, but urban productivity of manpower is generally above that of agricultural workers. Under such circumstances, some aging individuals, who would have retired, were they migrants, remain at work in agriculture, but their total contribution to output may well be less than that of their peers who chose to migrate.

The depressing effect of migration on rural development serves to reinforce a series of structural obstacles to economic growth and social modernization in the countryside. Mostly because the income-elasticities (proportional increase in consumption as income grows) of food and raw materials are below those of services or manufactured goods and because

the speed and possibilities for technological improvement in agriculture are below those of the industrial sector, economic growth cannot proceed in rural activities beyond a certain point. Prospects for modernization are likewise limited for a number of reasons such as geographical isolation, the lack of social density and the incipient division of labour.

The preceding comments hold for both "commercial" and "subsistence" agriculture (the labels are not quite accurate), and large percentages of the rural population in developing countries are engaged in subsistence or traditional agriculture, where structural obstacles to growth and modernization are even more complex and the negative effect of population aging is more serious.

To the long-term restrictions arising from demand (income elasticities) and from supply (technological frontier) there should be added, in the case of subsistence agriculture, other and more immediate factors limitative of economic growth. To list just a few of them: overfragmentation of land; sheer inability to save, to accumulate capital and to introduce even simple technological innovations; unqualified manpower; little access to credit; lack of facilities for transportation, storage, processing and marketing of products; frequent underpricing of products and overpricing of inputs. In such an environment, aging of population may be the more detrimental to economic growth, since production relies heavily upon physically demanding activities

Equally important, it must be noted that the disproportionate number of the aging population in rural areas will serve to keep these areas relatively underdeveloped not only because they lack the requisite manpower and other resources essential for development, but because

developing regions are notorious for the overdevelopment of urban areas (primate cities) at the expense of rural areas, making for an ever-widening gap between the two.^{17/} In this vein, Hauser notes, "These cities tend to be 'parasitic' in the sense that they tend to obstruct economic growth in their country of location by retarding the development of other cities in the nation, by contributing little to the development of their own hinterland, by being oriented primarily toward the contribution of services to the colonial power abroad or the colonial or indigenous élite in the great city itself".^{18/} An increasingly aging population in rural areas can only exacerbate the problem of rural underdevelopment. This is a luxury which few, if any, developing nation can afford.

The facts, being such as they are, dictate that major modifications must be made, if the increasing proportion of aging population is to be adequately accommodated and integrated in the development process. It has been argued, for instance, that the tradition of caring for the aged within the context of the extended family, which is still prevalent in many developing countries, should be encouraged and enhanced by having the respective governments subsidize or provide some sort of support

^{17/} Bert F. Hoselitz, Sociological Aspects of Economic Growth (Glencoe, Illinois: Free Press, 1960); Arnold S. Linsky, "Some Generalizations Concerning Primate Cities" in The City in Newly Developing Countries, Gerald Breese (ed.) (Englewood Cliffs, New Jersey: Prentice Hall, Inc., 1969); Eric E. Lampard, "The History of Cities in Economically Advanced Areas", and Wolfgang Stolper, "Spatial Order and the Economic Growth of Cities: A Comment on Eric Lampard's Paper". Economic Development and Cultural Change, 3 (January, 1955).

^{18/} Philip M. Hauser, "World and Asian Urbanization in Relation to Economic Development and Social Change", Urbanization in Asia and the Far East, Philip M. Hauser (ed.) (Calcutta: UNESCO Press, 1957), P.297.

system for those younger persons who undertake this task.^{19/} In the more developed regions, where this tradition has given way to the pressures of modernization, urbanization, etc., it has been suggested that the aged should not be forced to retire but should be kept within the work force, perhaps on a reduced basis, for as long as possible and, where necessary, should be retrained for active and meaningful participation in economic and social activities.^{20/} This necessarily entails a restructuring of development programmes and policies so as to utilize more fully the potential manpower and resources which the elderly represent, particularly now that their numbers are growing at a steady pace. In short, any adaptation to an aging population structure will have numerous and profound social and economic implications not only because of the novelty of this phenomenon, but also because of the relatively fast pace at which it is proceeding.

Further research on the roles of the aging in rural areas, their adaptative processes to migration by the young, and on the functions of the extended family in supporting the rural elderly, is, of course, called for. At the level of policies, care should be taken, in the passing of subsistence agriculture, not to tamper with those factors which may serve to perpetuate the economic and social engagement of the

^{19/} Dr. John Keet (ed.), "Role of the Aging in the Family, Local Community and Voluntary Agencies, and the Role of these Groups in Providing Support Services to Older People", and Hernando Gómez Buendía, "Economic Implications of Aging of Populations", in Report of the United Nations Interregional Seminar on Aging, op.cit.

^{20/} Robert Havighurst, "Aging in Western Society", in Hobman (ed.) op.cit.

aging, and measures should be designed to stimulate the beneficial functions of the extended family and similar institutions. Beyond the actions specifically intended for the rural aging, it seems fitting to conclude this paper with a plea for the well-known strategy of integrated rural development. This "package" approach recommends itself as a means to serve the aging by serving the entire rural community, an alternative which is both effective and politically feasible, and which brings rural development to the people while simultaneously involving the rural people in the development process.



AGING AND DEVELOPMENT: THE HUMANITARIAN ISSUES



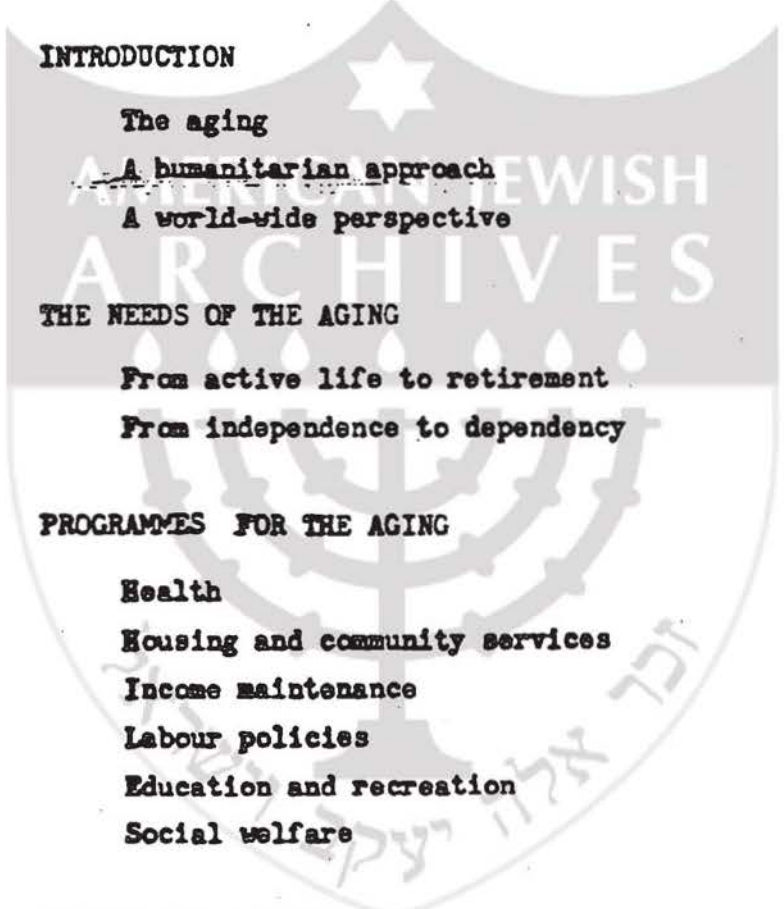
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AGING AND DEVELOPMENT: THE HUMANITARIAN ISSUES

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I. INTRODUCTION

This paper is concerned with the needs of the aging and the response of society to those needs. It focusses on the humanitarian issues involved and considers the matter in a world-wide perspective. After some introductory remarks aimed at clarifying the main terms that have just been used, needs, programmes and, finally, opportunities for international co-operation will be discussed.

The aging

The aging are those individuals who have entered the period of life - following the period of growth and that of maturity - that the French-speaking world calls the "third age". Whenever it is necessary to deal with the aging as a definite segment of the population, for such purposes as statistics or legislation, reference to the age group 60 and over is commonly made.

This or any other chronological definition is obviously an over-simplification which may be harmful for the individuals concerned when used without qualification - for instance, in legislating on the age of mandatory retirement from work. As is well known, there are wide individual variations in the way one ages. Moreover many aspects of the aging process need to be taken into consideration by policy-makers well before people have reached the age of 60: discriminatory practices in employment on account of age against workers aged only 45 or even 40 are an important example. And policies related to aging include a number of preventive measures in the areas of health or education which, to be effective, must be applied early.

Aged people themselves are far from constituting a homogeneous group, all the more so because of the world-wide trend towards increased longevity. In some of the industrialized countries, it is currently estimated that more than half of the new-born males will reach 70 years and more than half of the new-born females 80 years. There are such marked differences in conditions and needs according to age that, in formulating social policies for the aging, a sharp distinction must be made at the very least between the "60 and over" and the "75 and over" age groups. Those in the latter group differ from their juniors, not only with respect to individual characteristics (in particular, they are much more liable to becoming incapacitated), but also because, from a demographic point of view, they are part of a population stratum with a distinct majority of women and, from a sociological point of view, they are apt to belong to multi-generational families - a novel family form brought about by the progress in longevity.

The lack of emphasis on early preventive action, on the one hand, and the inadequate attention given to the changing needs of the individual at the advanced stages of the life cycle, on the other, actually explain many of the deficiencies that may be observed in the existing policies and programmes for the aging.

A humanitarian approach

The humanitarian approach adopted for this paper lays emphasis on the needs of the aging rather than, more positively, on the role of the aging in society; and on the content of programmes aimed at meeting the needs of the aging rather than on the place of such programmes in national strategies for development and social progress. No attempt is made here at demonstrating that society's contribution to the welfare of the aging is justified by the past and present contributions of the senior generations to national development, and by the enhanced contributions that might be expected in return for effective social programmes.

This is not to say, however, that humanitarian issues related to the aging can be considered in isolation: in several respects, they come close to developmental concerns. Firstly, a better life for all is the central objective of development; for the aging, just as for children and youth, it is for social policies to provide the channels through which they can share in the benefits of the developmental effort. Secondly, it is now much more widely accepted than some years ago that meeting basic needs should become an integral part of the development strategies themselves. It is often stated that, according to the newer concepts of development, priority attention should be given to the basic needs of the poor - a category in which the aging, in countries at all levels of development, are largely represented.

Unfortunately, the assertion that both the objectives and strategies of development should be conducive to a higher state of welfare for the aging is still far from being substantiated by actual experience. Up to now, the situation of millions of old people caught up in the processes of industrialization, urbanization and agricultural modernization has, in fact, been deteriorating. As a rule, developing countries legitimately take pride in the status traditionally enjoyed by their elders; they cannot but critically assess styles of development which run counter to such a positive element in their way of life. As for a study on the aging, even if it concentrates on humanitarian rather than on developmental issues, it cannot ignore the fact that the needs of the aging are deeply affected, in one way or another, by the development process.

A world-wide perspective

Demographic aging, namely the increase in the size of the aging population, both in absolute and in relative terms, has become a quasi-universal phenomenon. No less general a development is the increasing proportion of those, within the aging population, who can no longer rely on their own resources or find support in their natural environment and are therefore in need of outside help. This provides some justification for the attempt made in this paper at considering the problems of the aging and the corresponding policy requirements in a world-wide perspective.

There are, of course, wide national and regional variations in the nature and intensity of the needs, the policy approaches, the content and scope of the programmes in relation to the aging. Considerable differences in the situation of the aging also obtain within the same country, depending on the level of development, the degree of urbanization and other varying characteristics of the environment. Because of that, however, the differences revealed by inter-country comparisons will tend to be less pronounced when comparisons are made at sub-national levels, between areas with roughly comparable developmental profiles. Such comparisons may significantly enhance the usefulness of a global analysis of the situation of the aging.

For rural areas, categorizations to be made for comparative purposes would cover, at the one end, zones which have been left relatively untouched by the developmental process and where the traditional features of economic and social organization are still predominant; at the other end, zones having reached advanced levels of development; and, in between, zones at various stages of modernization. Also to be included are those rural zones which seem to have been affected by the negative aspects only of socio-economic change and which, with depleted human resources and a declining economy, have become marginalized. A parallel categorization could be applied to the urban areas, with reference, here also, to the shanty towns or other zones similarly placed, in a physical and socio-economic sense, on the fringe of the modern urban sectors. Analysing the situation of the aging according to the types of environment in which they live is one way of verifying what was said above of the sensitivity of that situation to developmental trends.

II. THE NEEDS OF THE AGING

Characteristic of the period of life with which this paper is concerned is the passage from active life to retirement. Another main event - although it take place much earlier or, on the contrary, not occur at all - is usually associated with the same period: this is, as the result of disabling circum-

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These should be seen as normal developments. For centuries, few were those who lived long enough to experience them; but those who did had probably no reason to feel that their longevity was less a blessing than a misfortune. Today, they are many and, as a rule, they are physiologically younger than their predecessors at the same age. Unfortunately, it seems that the health of the aging and their welfare have evolved in opposite directions.

It goes without saying that the individual who enters a stage in life where he is no longer self-sufficient is in need of help. In traditional societies, such help was normally expected and it was normally forthcoming. Depending on the type of social organization, and particularly on the forms of ownership, the aging could continue to be economically self-sufficient even when physically or mentally incapacitated; or they could be in need of assistance on both accounts. In any case, they had a well-established place and role in the framework of the extended family or other primary group, and the needy aged were practically unknown except in quite unusual circumstances. This is not to say that the old people in traditional societies were not experiencing grave difficulties or suffering from persistent poverty and natural or man-made disasters: those hardships were all too real, but they afflicted the whole group of which the aging were members, and remedies, if available, were for the benefit of all and did not have to be designed specifically in favour of the aging alone.

Today, millions of old people are still living in communities where the time-honoured forms of kinship support have not disappeared. However, the picture offered by traditional societies started to change, practically everywhere, as soon as some progress in the area of health resulted in increasing life expectancy and, alongside other far-reaching demographic transformations, in a higher proportion of aged individuals to take care of. Further steps along the road to modernisation entailed, whether deliberately or not, the weakening of traditional patterns of solidarity. Hence the intensifying requirements for outside help of the kind that is provided by the institutions of the modern State and that is of concern to social policy-makers and planners.

These modern forms of help take shape at a time when the needs of the aging and those of the natural groups to which they belong are not inseparable any more. Assistance to the aging individuals themselves in response to their specific needs then becomes necessary. At the same time, the continuing role and responsibilities of the family and, to some extent, other natural groups should not be overlooked: the most effective outside assistance may well consist in helping the family to help its members, the aging in particular. This is why,

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in many developing countries, emerging programmes of assistance to the aging are relying largely on the natural support still available to them through measures aimed at encouraging, reinforcing or supplementing such support. Also in industrialized countries with advanced systems of social protection, it is apparent that the needs of the aging are not considered in isolation and that the opportunities of family support remain a major focus of attention.

Moreover, it has been discovered that the network of informal relationships which - broader in scope than the kinship ties - played such an important role in traditional societies had far from disappeared from the neighbourhood or village life in economically developed countries, and that latent sources of informal help could be revived and significantly contribute to the welfare of the aging. This might encourage those, in developing countries, who are looking for alternative patterns of development, less harmful to certain features of traditional social organization which, it is now better understood, are worth being preserved.

From active life to retirement

The income of the aging. Retiring from work, a most important event in the life of the aging, brings with it a host of problems that must be solved by the individuals concerned and by society. The key issue is that of allowing the retired persons to maintain a decent level of living through continuing income or alternative means of existence.

Traditional models of social organization made possible for the aging a smooth transition from full activity to various degrees of inactivity. Because the family functioned as a unit of production as well as a unit of consumption, its livelihood depended on the performance of all its members, and individual roles were distributed flexibly. Those whose physical strength was declining had other ways of making a contribution - often an important one in the area of management or education - to the family undertaking. Mutual support was equally effective in producing goods and in consuming them, and the lot of even the least productive member was normally as adequate as that of the group as a whole.

That the old and inactive are supported by the work of the younger ones expresses a concept of inter-generational solidarity which, actually, has in many parts of the world outlived the traditional social structures. The family system remains such that, so long as the head of the family is able to earn, his relatives will depend on him to the fullest extent that he can afford. When he grows old and becomes incapable of earning any more, it is the duty of one or more of his relatives to support him.

This system may not completely disappear even in those segments of the population where, under the impact of industrialization, families are no longer units of production and depend for their livelihood on the wage-earning activities of their breadwinners. Modernization, however, brings with it such features as the growing proportion of old people, increasing labour mobility and family dispersion, the spread of urban ways of living - all of which make it more and more difficult for the active individuals to fulfil their responsibilities towards their elders. What the latter typically require, then, is a direct entitlement to some continuing income as a substitute, upon retirement, for the income they formerly derived from work.

One might submit here that, with the growth of the economy and larger incomes, it should be possible for the workers to save and provide for their old days themselves. This is true in a sense, just as it was always true that raising children was a way of investing for some future returns. The family had nevertheless an essential role to play, and, to the extent to which it can no longer do so, the larger community must replace it. In modern times, income protection in old age has become a nation-wide instead of a family-wide responsibility.

Early governmental action in that area was prompted a century ago in the now industrialized countries - and more recently in a number of developing countries - by the impossibility for most workers to save for an uncertain future and by the need, therefore, for specially-conceived and compulsory schemes. In the world of today, widespread and persistent inflation has made voluntary savings on an individual basis even less feasible. Hence an even broader role for the State and the preference now given to financial mechanisms according to which the income of the aged is derived, not from accumulated savings, but from the immediate use of the contributions made to the schemes by the active workers.

These latest developments seem to give a new meaning to the concept of inter-generational solidarity, although they express the perennial reality that the inactive members of society depend for their support on the active ones. The unfavourable demographic trends in the highly-industrialised, low-fertility countries, and the legitimate concern to which they give rise as to the future welfare of the aging in those countries, demonstrate that truth more eloquently than ever.

Retirement as a matter of choice. Income maintenance provision should allow today's workers, like their forefathers, to retire from work at the time when declining strength or the occurrence of physical or mental disabilities bears out such a decision. The advent of industrial society has also brought with it the belief that, after a number of productive years, rest is a well-earned right.

There are, of course, the individuals who are much younger than indicated by their chronological age and who are spared the physiological decline afflicting many of their contemporaries; those who are not prepared yet to accept the different living conditions that would result from their withdrawal from the labour force; those who feel that only work gives a full meaning to their life. Those should be given the right not to retire.

Unfortunately, in the formative years of modern systems of social protection the prevailing view was that to take account of widely varying individual circumstances would make any legislative progress impracticable. For that reason, provision for retirement has tended to be interpreted as expressing both a right and an obligation, regarding especially age limits, with little room left for the exercise of individual choice. Recent legislation in a number of developing countries reveals a similarly rigid approach to the designing of retirement policies.

In industrial countries, new societal pressures have developed which could hardly be reconciled with the concept of retirement as a matter of individual choice. It so happens that their thrust is in opposite directions. On the one hand, the current demographic trends, already mentioned, would seem to justify workers staying longer in their jobs - which would positively affect the inactive to active population ratios. On the other hand, the employment situation has become a matter of widespread concern and it is felt that, should the elderly workers, on the average, retire earlier, this would help to reduce the number of the unemployed.

Proponents of one course of action or the other have often succeeded in promoting new devices, through labour legislation (or collective bargaining) and social security legislation, aimed at encouraging early or deferred retirement, or at discouraging it. Such incentives or disincentives have been instrumental in making retirement policies more flexible. Further progress, for which a few countries have already taken the lead, would consist in using the same increased flexibility for the purpose, not of influencing individual decisions about retirement, but, quite to the contrary, of establishing those decisions - health and other circumstances permitting - on a genuinely free choice.

Achieving the objective of free choice actually means more than adjusting the provisions for retirement to the wishes of the elderly worker. The worker and the work itself also need to be mutually adjusted.

With the accelerating pace of technological progress, the obsolescence of skills seems to be accelerating too and retraining tends to become a recurrent need throughout the active life of the workers. That need might be more pronounced for the older workers, but these are less likely to be retrained for new jobs. Hence the risk for them of premature retirement - premature in the sense that, with their experience and knowledge, retraining would have been in many cases a sound investment for their employers and themselves.

Equally important is the need to adjust the jobs to the workers. The physiological consequences of aging might result in a sharp drop in productivity among older workers, which, however, could be avoided to the extent to which changes are introduced in the job profiles, working environment and organization of work, taking account of the changing characteristics of the workers and apt to constitute, here again, a valid investment for the parties concerned.

Those adjustments which have a bearing on the duration of work may be, in fact, a component of broad employment policies with far-reaching implications for workers of all ages. For the older workers, such measures as the reduction of hours of work or the extension of vacation periods may be used for different purposes: as a way of adjusting the jobs to the workers, and also as an element of programmes aimed at preparing the older workers for retirement. Transitional arrangements instead of the abrupt cessation of work, together with educational activities and encouragements to individual planning for retirement represent significant contributions - as shown by a growing body of experience - to a more satisfactory old age.

A meaningful life in old age. To prepare for retirement is, for more and more people, to be about to enter a period of life which will possibly compare in length to the previous one, during which the individual has been economically active. The life expectancy of the aging has been extended and better provision now exists for their material and biological needs, but this will not, by itself, make their "third age" a happier one. It is necessary to provide also for their continuing social and cultural integration, as an essential condition for their general well-being.

This can more or less be taken for granted in pre-industrial societies, where old people still command special respect by virtue of their age and experience. In industrialized countries, as exemplified by the high suicide rate observed amongst the aging in the most affluent societies, this requires a sustained effort on the part of the community.

Because the loss of a work role too often creates in the aging persons and around them a feeling of uselessness, it is important, first, that the aging should be given opportunities of continuing to play a useful role. There are many activities which, performed on a voluntary basis and adapted to the abilities of the aging, would represent a genuine and welcomed contribution to the improvement of community life.

It must also be recognized that the disposition to keep learning, developing and adapting to change is, for all human beings including the aging, largely synonymous with life itself. Experience shows that, provided they are brought - physically and economically - within the reach of the aging, opportunities for cultural improvement will be eagerly seized. Opportunities of keeping physically fit will be equally well accepted.

Finally, the aging must be enabled to remain open to the outside world in various ways. Programmes aimed at stimulating neighbourly contacts, at encouraging participation in club-like or other leisure-time activities, at facilitating access to organized travel arrangements, these are but a few examples of what should be done to ward off the danger for the aging of finding themselves increasingly isolated, seemingly rejected by a complex and hostile world.

From independence to dependency

Keeping fit. Parallel to the passage from active life to retirement, the other main event characteristic of aging as a period of life is the loss of the capacity to live independently and the passage into a state of dependency. Progress in the field of health increases the chances for the individual to reach an age where the loss of independence is a more frequent occurrence; at the same time, it offers the aging more effective ways of keeping fit longer.

The physical and mental disorders affecting old people are no different from those of the middle aged, although - especially after the age of 75 years - they are more likely to suffer from several conditions at the same time; a complex relation is also being observed between their physical state and mental condition; and they are slower to recover from illnesses and operations. It has been estimated in one Western European country that, although only about 2½ per cent of old people are in hospital at any one time, they occupy more than half of all the beds - those over 75 taking up nearly a third. There are thus qualitative and quantitative aspects of health needs in old age which must be taken into account in the development of national health policies.

Paramount among the health requirements of the aging are the means of retaining as long as possible their ability to live independently. Enhancing their functional capacities should be, therefore, a central objective of health programmes for the aging. The degree of fitness rather than the extent of pathology would be the appropriate yardstick for assessing the results achieved.

In that perspective, preventive action takes on particular importance. Nutrition should be seen as one of the basic preventive measures, and the determination of nutritional requirements for different categories of the aging should be both a subject for continuing scientific study and a basis for assisting old people in securing an adequate diet. Screening, a preventive device now widely available to the "first" and "second" population age groups through the schools, factories or other means, should be extended to the "third" age as well.

There is, as usual, a broader dimension to the concept of prevention: the earlier preventive measures are applied, the more effective they will be. Prevention as a way of preparing for a healthy old age should be a component of health services throughout the life span.

Living independently. Good health in old age, important as it is, is not always synonymous with the ability to live independently. Aging persons might find themselves, for reasons other than health, forced to leave their homes and to become inmates of institutions for old people or for the poor. Conversely, ailing individuals might, with proper assistance, continue to live independently in their own homes. If this is not possible, some family arrangement would provide the next best solution. Deteriorating health might narrow the range of available options for the individuals concerned, but institutionalization should be considered the solution of last resort and programmes for the accommodation and care of the aging developed accordingly.

There may be really no need for outside intervention as long as the extended family system remains unperturbed by changes in the social and economic environment and, normally, could take care of the aging members of the group whether in good or poor health. The situation may alter significantly, however, even at early stages in the development process. The mobilization of manpower for the emerging industrial sector of the national economy often results in creating an unbalanced demographic situation in some of the rural areas, where the elderly and the incapacitated are left behind. These cannot count on the assistance of either the informal support network, which is rapidly disappearing, or the essential social services, yet to be established. Some room might be available in institutions for the needy and provide in the most distressing cases the only solution.

In the cities, migratory movements of the younger people (for instance, from the inner city to the suburbs) could have similarly adverse consequences - with a predominantly aging population obliged to live in the substandard conditions of a dilapidated environment or, alternatively, being uprooted as the result of redevelopment schemes.

Changes in the environment are among the numerous reasons why the aging might be compelled to move out of their home and familiar neighbourhood, however painful the decision. The move could also be due to changing economic circumstances (for instance, after retiring from active life) or to changing family circumstances (the death of the spouse or the departure of children, for instance, making the dwelling harder to maintain). Declining health is only one of many explanatory factors.

While modern social policies should have as a primary aim to help the aging to remain in their own homes, they should also, therefore, make provision for suitable alternative accommodation. Housing arrangements conceived especially for the aging should be, of course, within their means, and at the same time should place them in a friendly and helpful environment. A friendly environment should qualify as such in both human and material terms, offering opportunities of striking up new friendships with peers while avoiding a ghetto-like atmosphere removing obstacles to the free movement of those with declining abilities while protecting them from the traffic and other hazards of modern life. A helpful environment is that where the variety of services needed by the aging in relation to daily living, health and security would be within easy reach and prolong the possibility of an independent life.

Even in the large cities of the most industrialized countries, where the ways of living of the traditional extended family seem to belong to a remote past, family ties may still be strong. The complexity of modern life may impede the effectiveness of inter-generational solidarity, but appropriate assistance could help to overcome some of the obstacles. This might consist, for instance, in helping the aging to move closer to their younger relatives, or to live with them by compensating the latter for the extra burden - so that, once again, institutionalization of the aging would remain the solution of last resort.

Institutionalization. Providing shelter in institutions with specialized purposes or designed for the poor and the sick generally is among the oldest forms of assistance to the aged. Whether under public, religious or voluntary auspices, such institutions have long existed in most developing countries. In earlier times, their small number was adequate for taking care of the few individuals who had reached old age and found themselves lives without any family or

tribal support. The trend recently observed in some countries towards an increasing recourse to institutionalization, in response to rapidly growing needs, will hopefully appear as an intermediate stage leading to the diversification of programmes of care for the aged.

The experience of most industrialized countries shows a steady decrease in the proportion of the aging requiring institutional care - nowhere more than 8 per cent of the total number of persons aged 65 years or more. For them, there are now different forms of care for different needs - from the residential homes for the elderly people no longer able to manage on their own in private accommodation, to hospital-like establishments for the chronically sick and bed-ridden. Because of the efforts towards avoiding the institutionalization of the aging whenever possible, the population found in institutions tends to be older and more disabled.

In spite of that, the role of residential homes in the more progressive programmes is not necessarily limited to long-term care. They may receive aging people for short stays, largely to relieve the families looking after them. Furthermore, there have been successful attempts at rehabilitating those committed to institutional care, thus enabling them to return to a more independent life in the community.

A review of the needs of the aging must also refer to the situation of the few individuals who, because of advanced age and senility, cannot responsibly protect their income, property or themselves against exploitation and abuse. In those circumstances, guardianship arrangements and specially-adapted social service intervention are required.

But what is valid for that small group would not be so for the aging as a whole, and it would be unfortunate for the development of policies for the aging to be guided by the idea that their authors, not the intended beneficiaries, know best what has to be done. It is true that the careful analysis of the needs to be met leads to somewhat conflicting requirements, and that it might be hard to reconcile the all-important objective of social integration with the advantages of segregative arrangements for more efficient care. Compromises may have to be made to take account of limited resources. Progress, however, clearly lies in the direction of widening the range of options available to the aging and thus allowing them, to the largest possible extent, to decide for themselves according to their own views.

The itinerary of the aging from active life to retirement, from independence to dependency, is normally characterized, in its successive stages, by diminishing autonomy and increasing recourse to outside help. The latter should be extended in such a manner as to maximize whatever autonomy is left and to safeguard for the aging individual, as for any other responsible and participating citizen, the right to choose - a right which becomes even more important as it is threatened in so many ways with advancing age.

III. PROGRAMMES FOR THE AGING

It may be derived from the above analysis of the needs of the aging that all sectors of social policy have a contribution to make to a happier old age. If such is the goal, it has implications for the development of health, housing, social security, labour, education, social welfare and other programmes. The necessary quantitative and qualitative improvements may call for the reorientation of existing programmes, for the reordering of priorities as applied to further programme developments, or for the launching of specialized services, with corresponding new requirements in terms of manpower training and research. The various programme elements should be mutually supportive: for instance, adequate financial resources and the availability of the necessary health and social services are inseparable requirements, just as housing provision and that for hospital care are, of necessity, complementary. And it should be recognized that the aging, more than others, require an inter-sectoral and inter-disciplinary approach to meeting their needs.

For two or three decades now, industrialized, low-fertility countries have made intensified efforts towards improving the quality of life of their growing aging population, with interesting variations and also many common features in the programmes of countries with different socio-economic systems. The developments below refer to their experience and to the steps taken in similar directions by developing countries. The formulation of well-integrated, comprehensive national policies for the aging is a newer development, which has, however, taken on a new urgency at a time of shrinking resources for social purposes and may prove a most important means for further progress.

Health

Some facilities for in-patient care in generally unsuitable hospital buildings with only geriatric beds have been for many years, together with a network of old people's homes, the bulk of existing national programmes for the care of the aged.

Most of the improvements observed in the last decades stem from a reaction against such age-segregated programmes and involve the use of various integrative approaches. Thus, the reckoning that many ailing elderly could be rehabilitated and need not end up in old people's homes has encouraged the inclusion of acute geriatric units in general hospitals where the full range of facilities for diagnostic, cure and rehabilitation is available.

More broadly, the advantages of considering the care of the aging as an integral part of the general health services for the entire population have been brought to light. The whole population, for instance, is interested in the preventive programmes - e.g. education in hygiene and nutrition - which are among the most effective ways of promoting health and checking chronic diseases in old age.

Another advantage of integration is the possibility of extending care to the aging through the decentralized network of basic health services. The lesser mobility of the aging and the demonstrated reluctance of many to seek medical advice show the importance of encouraging and facilitating the access of the aging to health services. Progress in that direction has encompassed in-patient care, with the inclusion of broadly-based small hospitals - at the local community level - among the components of the hospital system.

Better access to health care has a special and crucial meaning for the aging: it allows them to remain in their own homes or in the care of relatives. The design of still another component of the hospital system - the day hospital, for care during day-time only - well illustrates the genuine interest of policy-makers and health specialists in widening the scope of alternatives to institutional care

The development of home care programmes represents one more step in the direction of decentralization and better access, with a range of domiciliary services based in the local community or in specially-conceived housing projects. The services provided by physicians might be supplemented by those of dentists, chiropodists, advisers on technical aids, occupational therapists ... Teamwork is the rule and involves the staff of other categories of domiciliary services in the areas of homemaking and security. Actually, this is but one illustration of a broadening interpretation of the concept of integration which encourages close co-operation between health services and a variety of social services, as a concrete expression of the recognized need for a multi-disciplinary approach to improving the condition of the aging.

With the emphasis on integration and the trend away from age-segregated and over-specialized programmes for the aging, the experience of industrialized countries is becoming increasingly relevant to the situation in developing

countries. Strengthening the basic health services for the general population is not only a most appropriate response to the needs of the existing aging population; it also allows for intensified preventive action for the benefit of the aging population of tomorrow.

The integrative approaches as they have been described in the previous paragraphs cannot be successful unless opportunities for orientation and training in the care of the aging, as well as competent consultative services or supervision, are available to health personnel at all levels. The situation in that respect remains inadequate in most countries. This is due in large part to the uneven development of research on aging and to the relatively low standing of geriatrics as a medical discipline. Nevertheless, the status of research and teaching in that field is gradually improving, which should enhance the quality of care delivered to the aging through general practitioners and even make possible the use of less qualified personnel, particularly in less-developed rural areas.

According to the experience of some countries, the solution called for at the present stage in the development of scientific disciplines concerned with the aging and in the evolution of medical training and practice would lie in the organization of a comprehensive geriatric service. Whether in the provision of long-term care, acute hospital care or domiciliary care, the components of such a service should reinforce each other through co-ordinating arrangements and ensure that adequate diagnostic, treatment and rehabilitation facilities are brought within the reach of the aging population as a whole.

Housing and community services

A major objective of progressive policies for the aging is to widen the range of options available to them as to the place where they will live during a period of their life which is most often characterized by abruptly changing circumstances - retirement, illnesses, loss of a spouse - and diminishing means.

For the many who want to continue to live in the same place after they have retired, the main obstacle may be that, at their new income level, they can no longer afford it. In that case, some countries provide specific help in the form of housing allowances. In one Nordic country, for instance, the allowance covers the part of the rent which is in excess of 15 per cent of the household income, with a ceiling, and is paid to approximately 20 per cent of the pensioner.

Because a high proportion of the aging live in substandard accommodation, their well-being may be significantly enhanced if they are entitled to improvement grants for the purpose of making the dwellings either more comfortable (with thermal insulation, for instance) or better suited for everyday living

where the occupant suffers from some disability (removal of doorsteps, installation of guard-rails, etc.). Financial assistance of that kind is more effective when supplemented with practical help, which is often arranged by voluntary organizations largely relying on the assistance of volunteers.

Also relevant to the situation of those who want to remain where they have lived for long is legislative provision aimed at making the eviction of aging tenants more difficult.

Those aging who decide to move are prompted to do so by a variety of reasons, to which corresponds a variety of solutions ranging from normal dwelling units in age-integrated neighbourhoods to housing arrangements offering specially-protected living conditions in age-segregated environments.

When limited income is the main problem, it will be eased by legislative requirements according to which a given proportion (usually in the order of 5 per cent) of the dwellings in new low-cost public housing projects should be set aside for elderly tenants. The only particular features of those reserved dwellings might be their small size and their location on the ground floor. Or they might also give access to some of the services and facilities which have been identified as necessary to meet the particular needs of the aging.

Services relating to health needs have been described in the previous section. Other services are aimed at alleviating the tasks of daily living: home help, escort services, home meal delivery or canteen-like facilities. The many internal and external dangers to which the aging are exposed also call for security arrangements such as resident wardens, telephone answering services or emergency stations.

With the growing proportion of the aging in the total population, a corresponding trend is for the services needed by the aging in the areas of health, daily living and security to become part and parcel of community services in every neighbourhood, all the more so since services for the aging - e.g. health centres, home help services - may serve other population groups as well.

Nevertheless, for those aging who cannot live in complete independence, the availability of special types of housing could spare them the complete dependence of institutional life. The so-called service apartments have common facilities mainly for homemaking and cooking, with health assistance within easy reach. Sheltered housing refers to living arrangements for persons with permanent disability or poor health and implies more intensive assistance in

the areas of health and security (medical and nursing staff on permanent duty, watch rooms ...). Such arrangements necessarily result in the concentration of elderly people in specially-designed housing units, but these units may be part of larger developments with residents of all ages. However, there also exist communities, most of them newly-built and intended for the retired with sizeable incomes, which are inhabited by old people only. Segregative arrangements have therefore proved to be the preferred option, if available, for some of the aging.

Still another possible development in the life of old people is for them to go and live with relatives. Families might be encouraged to accept that responsibility by various means, and it seems justified that society shares with them in the task. The inclusion of the aged members of the household in the computation of family benefits or in that of income tax could be a powerful incentive. Instrumental too would be the existence of community services ready to assist when needed, for instance in the form of day-care, temporary full-time care in a health unit or temporary admission in an institution to facilitate family plans for a vacation.

Consideration for the needs of the aging in the design of housing projects and community services is also making itself felt in urban planning generally, because of the multiplying hazards of city life. The case for removing architectural barriers and improving traffic planning with the mobility and safety of the elderly and the handicapped in mind is now well documented and in the process of being translated into national legislations.

Planning and legislating for strengthening the human dimension of urban development seems actually a good example of the kind of forward-looking action which deserves the early attention of developing countries. In Latin America, there are already encouraging examples of housing projects - some of them financed by social security reserves - where the needs peculiar to each generation as well as the need for harmonious inter-generational relationships have not been overlooked. On their part, modernization efforts which encompass the development of healthy communities with a network of basic social services cannot ignore the needs of the present and future aging population.

Most developing countries are also faced with the immediate task resulting from the concentration of elderly people, living in marginal conditions, on the fringe of cities or in deteriorating rural environments. While some programmes of home and neighbourhood improvement have been launched, the transfer to institutions often appears, as already mentioned, as the only feasible alternative

Income maintenance

Social security institutions come into being at the time when the traditional duties of the community towards those of its members who have fallen into hardship, and the corresponding duties of all members of society to act as responsible and provident citizens, are converted into legal obligations. These are usually complemented, when industrialization brings about a growing number of wage-earners, by obligations imposed on employers and representing their duties towards the workers in their service.

In providing for income maintenance in old age, which is an important social security concern, there are differences in approach and methods depending on whether the obligations of the community or those of the individual are emphasized. When the emphasis is on the obligations of the community, benefits are paid out of general revenue, and, as an expression of national solidarity, they are not conditional on previous efforts on the part of the beneficiaries. Public assistance schemes are the oldest example; universal in nature, their actual scope is much narrowed by the dual requirement of demonstrated need and availability of resources. Modern applications of the same principle consist in universal, flat-rate benefits granted as a matter of right.

The schemes based on obligations imposed on individuals to save for their old days are contributory schemes, covering the members of the community who have a regular income or the wage-earners only; in the latter case, employers too contribute to the financing. Contributions are computed in proportion to the earnings, and so are the benefits. Most contributory schemes also make reference to the principle of solidarity: part of the financing comes out of general revenue, and, because of lower and upper limits for the computation of benefits, individuals with low incomes are more generously treated.

Generally, national social security programmes include contributory or non-contributory schemes which have as their main objective to guarantee a minimum income in old age. These schemes are, most often, only a part of a two-tier system: the other tier is made up of complementary schemes, the purpose of which is to bring the level of income after retirement more in line with previous earnings. Occupational schemes, established and financed by both employers and employees, are the most common arrangement. Some national plans include still another tier: the encouragement to voluntary savings, through various measures (fiscal exemptions, protection of deposits ...) aimed at making them more attractive and safer.

Since the beginning of the sixties, there have been in the industrialized countries steady improvements in the situation of pensioners. Particularly in socialist countries, minimum pensions have markedly progressed in relation to minimum wages. Retirement incomes averaging 80 per cent of previous earnings for low-income jobs and 50 to 60 per cent for middle-income jobs are not uncommon in all industrialized countries. There has also been significant progress in population coverage, with new or improved schemes for rural workers and the self-employed especially. Since the mid seventies, however, the changing economic and demographic circumstances have created a different mood, bringing the fear that, in the long run, old age entitlements would have to be reduced, and calling for urgent action in order to counteract the adverse effects of persistent inflation on the real purchasing power of pensions.

It has been generally agreed, therefore, that pensions had to be periodically readjusted, which could be done either by ad hoc governmental decisions or, more often, automatically in response to variations in the cost of living or (more equitably, but more expensively) in the level of wages. Until very recently, interest rates were not keeping up with inflation, so that the return of the investment of reserves accumulated in the pension funds was not enough to finance increases in pension levels; as a result, most pension funds in market economy countries have had to switch to "pay-as-you-go" systems, which have little or no reserves and make immediate use of the contributions from the active population for payment of pensions to the retired. Obviously, such systems are very sensitive to changes in the proportion of inactive persons in the population. Moreover, it is difficult to apply them to occupational schemes, since the existing entitlements should be protected against the possible disappearance of the sponsoring firm. To solve the problem, it may be necessary to broaden the base of the schemes, so as to encompass industrial sectors rather than individual firms, and to introduce some State commitment to the continued payment of benefits if so warranted.

In spite of pension adjustments, the very old are certainly worse off than the younger pensioners and much progress remains to be made to improve their lot. Some Eastern European countries have recognized that need and entitled pensioners to a supplementary benefit starting at the age of eighty. Women form the majority of the very old, and especially worthy of attention is the situation of those who must live, as widows, on inadequate survivors' benefits.

The most important changes in income maintenance policies that have occurred in recent years are related to the age of retirement. As a rule, old age benefits are payable at the normal rate at a given age, which varies from one country or scheme to another: the more usual ages are 60 for men and 55 for women in socialist countries, 65 for men and 60 or 62 for women in other industrialized countries. In many schemes, the payment of pensions is conditional upon actual retirement from the work force; even when such a condition does not exist, the "normal" retirement age has a powerful influence on the decisions of the individuals concerned or their employers. Early retirement benefits may be available at reduced rates (in a typical example, a pension amounting to one half of the normal rate may be claimed at the age of 60 instead of 65); only a limited number of schemes allow for deferred retirement benefits at increased rates.

Recently, early retirement benefits at advantageous rates have been offered in a number of countries - particularly in Western Europe - to workers with a long service record or suffering from partial disabilities, and have been subsequently extended to the unemployed. Conversely, there are several examples of adjustments in the rates of deferred retirement benefits. In Eastern European countries and the USSR, workers in a growing range of occupations have been allowed to remain active while in receipt of full or partial retirement benefits. Nordic countries have been experimenting with partial pension schemes to give elderly workers the chance to scale down their activities before retiring: the partial pensions may be obtained between the ages of 60 and 65, provided that the insured person transfers to part-time work, and are computed in such a way as to maintain the total income at between 85 and 90 per cent of the earlier full-time earnings. While arrangements for flexible retirement have been sometimes introduced with a view to influencing individual decisions in accordance with economic or demographic objectives, enhancing the freedom of choice is more and more clearly becoming the paramount consideration. Available statistics indicate, in fact, a definite and general trend towards earlier retirement.

With the exception of several Latin American countries, which embarked on social security in the twenties, most of the action towards establishing income maintenance schemes in developing countries has taken place during the last two decades. Income maintenance schemes comparable, as to their structure and level of benefits, to those of industrialized countries are still very limited. On the other hand, there has been in Africa and Asia a rapid expansion of the provident funds, a system of compulsory savings with contributions from both employees and employers which allows for the payment of a lump sum in the event of retirement,

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death or other determined contingency. There are also numerous, but often rudimentary, occupational schemes. Apart from the inadequacy of benefits, a main shortcoming of existing schemes is that they cover only the segment of the active population working in the modern sectors of the economy and in government service - that is, in many national situations, a very small percentage of the total population.

For the vast majority, made up of those who earn their livelihood from agriculture or fishing, handicrafts, small trades or domestic work, the benefit of modern social security remains out of reach. Public assistance programmes providing cash, food, clothing or shelter may bring relief to the most acute cases of need only. The search for alternative forms of social protection has been, up to now, largely unsuccessful and may prove one of the most challenging tasks facing development planners.

Labour policies

Legislation concerning labour relations and conditions of work also contributes to comprehensive policies for the aging. Such is the case of legislative provision aimed at discouraging practices which are considered inimical or unfair to the elderly workers. Discriminatory practices on account of age (in recruitment, promotion or dismissal) belong in that category. Another example is provided by the recent laws forbidding the setting-up by the employers or through collective negotiations of a mandatory retirement age, at least (as in American legislation) not before 70.

Labour legislation may also aim at encouraging (through tax exemptions or other incentives) the more positive treatment of the aging in their working environment. These workers could largely benefit from adjustments in working conditions and retraining opportunities which would make it possible for them to maintain their productivity and earning capacity during the last period of their active life. The same period is the appropriate time for various initiatives having another purpose, that of preparing the older workers for retirement.

Started in the United Kingdom in the fifties, programmes of preparation for retirement have demonstrated their high preventive value and rapidly spread throughout the industrialized world. The main programme element usually consists in courses or seminars for workers nearing retirement age (or younger workers anxious to plan well ahead for their "third" age), organized most often at the place of work. Participants will be better informed of the health, income, housing and other problems in old age; better equipped to plan for their life after retirement; and psychologically better prepared. Course attendance is

supplemented with individual counselling in the most elaborate programmes. Specialized agencies with trained personnel are often entrusted with the organization of the programmes, which are financed by the employers and, in some countries, by public subsidies.

Adjustments in the duration of work are another way of preparing the older workers for retirement and a reduced level of activity. In some countries, major firms are allowing their elderly workers to work shorter weeks or to enjoy longer vacations without any reduction in pay; in the course of the five years or so preceding retirement, the entitlements become progressively more generous. Arrangements of that kind have not yet been translated into legal provision, with the significant exception of the partial retirement schemes mentioned in the previous section.

Education and recreation

The expansion of programmes applying the concept of lifelong education is, or should be, specially beneficial to the aging. Some governments that are subsidizing such programmes have removed the original requirements that they should be somewhat connected with work, thus acknowledging that the need to continue to develop is no less important for the retired than for the economically active population.

That truth has been eloquently confirmed by the success of the "Universities of the Third Age", the first of which came into ^{being} in France in 1974. That novel venture has for its goals to broaden the cultural horizon of retired persons, to renew their knowledge and to enable them to widen their human contacts. It makes use of the facilities, training aids and some of the teaching staff of regular universities, so that the costs are minimal and modest fees from the students are enough to ensure a balanced budget for these activities. It goes without saying that there are no age limits, no compulsory attendance, no diplomas. The curriculum is made up of lectures, discussions or practical work on a wide variety of subjects, selected in accordance with the concerns expressed by the students themselves. Emphasis is usually laid on health and nutritional education; gymnastics and sport are sometimes included. There are now more than a hundred Universities of the Third Age (including several in Latin America).

These universities remain, nevertheless, but a small component of a proliferating array of cultural and recreational activities for the aging: leisure clubs offering opportunities to learn handicrafts, practise sports, attend lectures, or simply meet other people and chat or play games; informal courses on an unlimited variety of subjects, ranging from arts and literature to letters

of direct interest to the aging (pre-retirement courses, traffic safety courses . book lending (with home delivery) services; organized excursions or vacations; and many others. Both local government authorities and voluntary organisations have become very active in that field. While they play an indispensable role in promoting local projects and financing them (including the services of trained animateurs for some types of activity), it is essential that the beneficiaries themselves participate fully in the development of activities on their behalf. Whatever the specific purpose of an activity, fighting any tendency in the aging to grow passive and dependent should be the greater objective.

No less important is the need to avoid segregation. Due account being taken of the happiness and comfort that may be derived from finding oneself among peers cultural and recreational programmes for the aging are so organized in many cases as to improve inter-generational relations. Opportunities for the aging of mixing with the younger generations are among the most beneficial effects of the Universities of the Third Age. Other activities may be equally effective in dissipating feelings of ignorance, if not hostility, between generations and thus contributing to the development of healthier communities.

In many areas of the developing countries, the main problem may be, not to strengthen, but rather to maintain the strong links which still exist between generations and the ways of living which keep the older members of the community active and useful. In other areas and particularly in the cities, where elderly people are growing in numbers and experiencing increasingly difficult living conditions, their cultural and recreational needs should not be overlooked when community services to meet the basic needs of the population are being designed.

Social welfare

Within the framework of community services, social welfare services are assigned a central role in helping to solve the problems of the aging; health-related problems as much as others usually call for social welfare intervention, particularly as a means of avoiding institutionalization. Such is the aim of the various services that have been established to assist the aging individuals at home in their daily household tasks. It is also the role of social welfare workers to stimulate the informal help of all kinds which could be so effective in meeting the psychological as well as the material needs of the elderly.

Facilitating access to existing services or benefits is a social welfare task which takes on special importance as regards the aging, for many of whom physiological limitations or reluctance to ask for help must be overcome. Whereas this is a function of the general social welfare services, it has been considered useful, in places where sizeable numbers of elderly people are

concentrated and where sources of assistance are varied, to establish specialized information and co-ordination services. In addition to ensuring that people know what services are available and that they get what they are entitled to, these services are instrumental in keeping the authorities concerned abreast of the evolving conditions and requirements of the population group they serve and in bringing about the desirable programme improvements. In many instances, the solution of individual problems primarily depends on decisions to be taken by the aging themselves or their families: skilled counselling is then essential, but requires highly-trained social workers, knowledgeable about the aging process and the socio-psychological circumstances of the aging, and these are in short supply.

The aging, for their part, constitute a largely untapped reservoir of efficient manpower for a variety of social welfare tasks. Some social welfare agencies have been successfully experimenting with the use of elderly volunteers in such programmes as day-care for children or activities on behalf of disturbed youth, or with the use of the "young elderly" for the care of their incapacitated elders. It may also be a social welfare task to explain how meaningful for the aging, and how useful for society, non-income-producing activities could be. To have obsolete regulations removed will be part of the task sometimes.

Because this heterogeneous segment of the population which is called "the aging" also includes a small proportion of feeble-minded individuals, unable to defend themselves against exploitation and abuse, the need has been recognized - if rarely translated into practice up to now - for protective services requiring specialized legal and social welfare skills. This last example would confirm, if need be, that social welfare services and personnel have indeed a special responsibility for accompanying and helping the aging individual in his or her itinerary from active life to retirement and from autonomy to dependency.

IV. CONCLUDING REMARKS

The needs of the aging and the corresponding policy requirements have not been the subject of intensive research - as compared with earlier periods of the life cycle - until the recent acknowledgement of demographic aging as a major phenomenon in modern societies. Gerontology (the study of the biological and psychological processes of the individual's aging), geriatrics (the clinical application of scientific knowledge to the medical needs of the aging) and social gerontology (the study of the interaction of the aging individual and society) are among the youngest scientific disciplines. Despite their rapid growth in recent years, they are still suffering from a relatively low status in the university and professional circles. Variations in needs and circumstances

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in different socio-economic environments, particularly in relation to the situation in developing countries, have hardly been investigated yet. There is room for much further progress in the standardization of concepts and terminology, in the launching of action-oriented research projects, in the determination of evaluation techniques.

The improvement of research would facilitate the development of much needed training programmes. Specialized programmes should be available at all levels of practice, from the geriatricians to para-professionals (e.g. home help, institutional staff) and to volunteers. Training programmes should also be arranged for the orientation of professionals and auxiliaries in general practice towards the particular requirements of the aging. Finally, there is a case for changes in the curriculum of schools and colleges in order to give all students a better understanding of the aging process and the place of the elderly in society.

The further development of training and research, as well as the formulation of effective policies and programmes, would benefit from intensified international co-operation in the field of aging. Because the situation varies considerably from one part of the world to another, many activities aimed at fostering the exchange of information and the common study of problems would take place most fruitfully at the regional level. But it is true, too, that the experience of industrialized countries, whether positively or negatively assessed, in dealing with the problems of the aging is of interest to the developing countries; and that, conversely, the industrialized countries might have much to learn from the ways in which developing societies are taking care of their elderly members. There is a world-wide dimension to the exchange of experience required for further progress in that policy area of universal concern.

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NORTH AMERICAN REGIONAL TECHNICAL
MEETING ON THE AGING

PROGRAM FOR OPEN SESSIONS

In preparation for the 1982 World Assembly on Aging
Sponsored by the National Council on the Aging, Inc.

In cooperation with the
United Nations Centre for
Social Development and Humanitarian Affairs
and the
United States Department of State

Washington, D.C.
June 15-19, 1981
Loy Henderson Conference Room
U.S. Department of State
2201 C Street, N.W.



<u>1981</u>	<u>Event</u>	<u>Content</u>	<u>Speakers to be Selected</u>	<u>Location</u>
<u>MONDAY, 15 JUNE</u>				
8:45 - 9:45 a.m.	Registration			Outside Loy Henderson Room
9:45 - 10:30 a.m.	Plenary Session	Call to Order, Introduction of Head Table	Ellen Winston, Chair Betty Havens, Vice Chair	Loy Henderson Room
10:30 a.m. - 12:00 Noon	Plenary Session	Welcoming Statements - United States and Canada		Loy Henderson Room
	Plenary Session	Introduction to the 1982 World Assembly on Aging		Loy Henderson Room
		Presentation of United Nations Documents and Questions		
12:15 - 1:45 p.m.	Plenary Luncheon	Speakers to be Selected		Benjamin Franklin Room
2:00 - 5:00 p.m.	Plenary Session	Presentation of Organizational Testimony - Ten-minute summaries of Papers Submitted Prior to May 18, 1981		Loy Henderson Room

<u>1981</u>	<u>Event</u>	<u>Content</u>	<u>Speakers to be Selected</u>	<u>Location</u>
<u>TUESDAY, 16 JUNE</u>				
9:00 a.m. - 12:00 Noon	Panel Sessions	Breakout into Expert Panels - Economic ** - Social Welfare * - Education/Culture/ Leisure/Recreation * - Political ** - Income Security *		
12:00 Noon - 2:00 p.m.	Plenary Luncheon	Presentation of U.S./Canadian Demographic Profiles		Loy Henderson Room and Benjamin Franklin Room
2:00 - 3:15 p.m.	Panel Sessions	Breakout into Expert Panels - Economic ** - Social Welfare * - Education/Culture/ Leisure/Recreation - Political ** - Income Security *		
3:30 - 5:00 p.m.	Panel Sessions	Breakout into Expert Panels - Employment/Labor * - Health * - Family * - Social ** - Housing *		

* Humanitarian Issues

** Developmental Issues

<u>1981</u>	<u>Event</u>	<u>Content</u>	<u>Speakers to be Selected</u>	<u>Location</u>
<u>TUESDAY, 17 JUNE</u>				
9:00 - 11:30 a.m.	Panel Sessions	Breakout into Expert Panels <ul style="list-style-type: none"> - Employment/Labor * - Health * - Family * - Social ** - Housing * 		
11:30 a.m.	Open Session Ends			



**NORTH AMERICAN REGIONAL TECHNICAL
MEETING ON AGING**

In preparation for

AMERICAN JEWISH

THE 1982 WORLD ASSEMBLY ON AGING

SPONSORED BY THE NATIONAL COUNCIL ON THE AGING

In cooperation with the

**United Nations Centre for
Social Development and Humanitarian Affairs
and the
United States
Department of State**

ADVISORY COMMITTEE ROSTER

June 15-19, 1981

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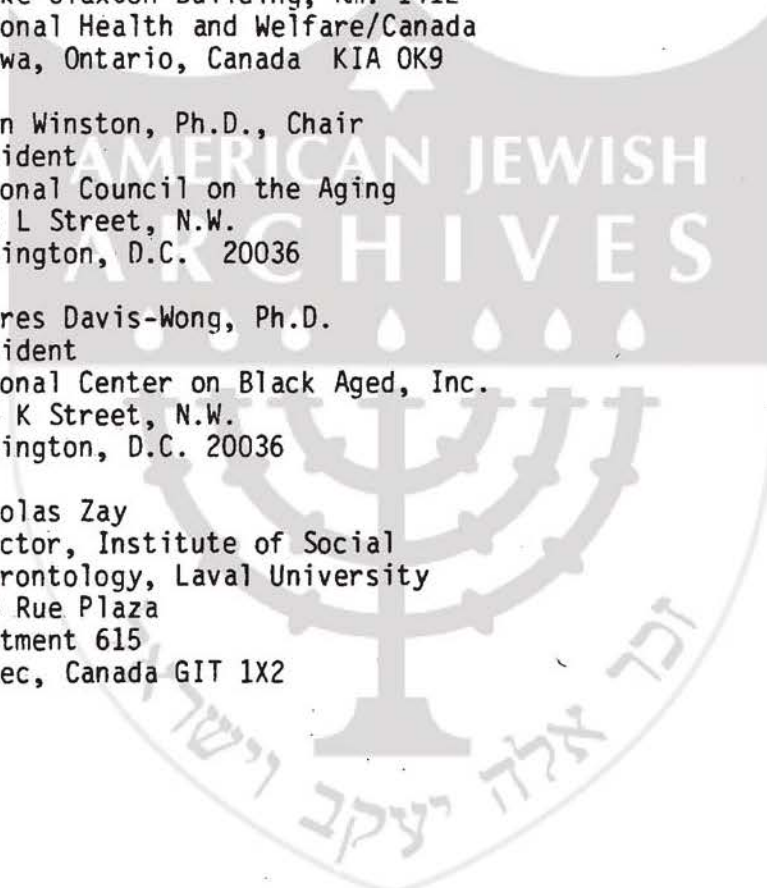
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UNITED NATIONS
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Thirty-fifth session
Item 71 of the preliminary list*

PROBLEMS OF THE ELDERLY AND THE AGED

Draft programme and arrangements for the World Assembly
on the Elderly

Report of the Secretary-General**

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* A/35/50.

** A statement on the administrative and financial implications of the draft programme and arrangements will be issued under the symbol A/35/130/Add.1.

I. INTRODUCTION

1. During the discussions held by the General Assembly at its thirty-third session it was emphasized that all the regions of the world were witnessing an increase in the absolute and relative size of their aging population. This phenomenon, coupled with the increased emphasis on development, has serious social, health and economic implications for societies as a whole and for the aging in particular. It is a topic of growing concern to many developed and developing countries. For this reason, the General Assembly decided to convene a World Assembly on the Elderly in 1982.

2. The draft programme contained in the present report has been prepared in response to paragraph 3 of General Assembly resolution 33/52 of 14 December 1978, concerning the World Assembly on the Elderly in which the Secretary-General was requested

"to elaborate, in consultation with Member States, the specialized agencies and organizations concerned, and to submit to the General Assembly at its thirty-fifth session, through the Economic and Social Council, a draft programme for the World Assembly on the Elderly and to make recommendations on the organization and objectives of the World Assembly .

3. The Secretary-General has obtained the views of Member States as well as those of the relevant intergovernmental and non-governmental organizations. Close consultations have taken place with organizations of the United Nations system and several specialized agencies have provided ideas for the draft programme.

4. There has been a high degree of unanimity in the views expressed by Governments, as well as by agencies and non-governmental organizations, regarding the importance of issues related to aging and about the general features of the World Assembly to be convened in 1982. The present draft programme makes recommendations on the scope of and the preparatory arrangements for the Assembly, which, it is believed, will fulfil the objectives of the resolution and be in line with the views of Governments, agencies and other bodies concerned. It should be emphasized, however, that in a field so wide-ranging and complex, a great deal more consideration will need to be given to the details of the World Assembly before the arrangements for it can be finalized.

II. BACKGROUND

A. Definition

5. It is widely recognized that the process of aging begins at conception and continues until the death of the biological organism, and that growth and maturation of the organism are related to the early and middle stages of human development. The aging are those in that one third or one fourth of the life-span during which loss and decline - psychological, - economical and social - are greatest. Such loss is not always owing to biological forces: it may also be a result of

social, economic, environmental and cultural factors. The word "aging" provides a more adequate description than the terms "elderly" or "aged". It suggests continuing development and change during the later stages of the life-span, rather than a fixed or static period of life. "The aging", therefore, is a term that could best be used to define those sections of the population that have left the middle years of life behind them; the word encompasses several stages of the life-span and a vast range of differences. For practical reasons, however, a statistical definition of old age has been used in demographic studies and analysis and social policies relating to aging. For the purposes of the World Assembly "the aging" are defined as those who are 60 years of age and over.

B. General considerations

6. From a demographic point of view, there will continue to be an increase over the next two decades in the absolute and relative size of the aging population in all regions and most countries of the world. This trend will accelerate in the majority of the less developed countries. If the trend towards lowered birth rates continues, the more developed countries will have even greater proportions of their populations in the old-age category.

7. In 1950, there were approximately 200 million persons 60 years of age and over throughout the world. By 1970, this figure had increased to 307 million. Projections to the year 2000 indicate that this number will increase to nearly 500 million, or by nearly 90 per cent, while the world's population as a whole will increase from 3.7 to 6.2 billion, or by approximately 70 per cent. It is significant to note that, for the more developed regions, the increase in the population as a whole will be 21 per cent from 1970 to 2000, while those aged 60 years and over will increase by 54 per cent. In the developing regions, the proportionate increase of the older population is even more pronounced; while an 88 per cent increase is anticipated for the total population over the same period, the increase of those 60 years and over will be approximately 123 per cent. Furthermore, it should be noted that, in 1970, slightly over half of all persons 60 and over lived in the developing nations, while by 2000, about two thirds of all older persons will live in those countries.

8. The increase in the numbers and proportions of the aging is accompanied by a change in the population's age structure. Declining fertility, for example, is the main factor underlying the declining proportion of children in a population and, by the same token, it increases the proportion of older persons. Thus, according to the medium projections of the United Nations, the population aged less than 15 years in the developing countries is expected to decline from an average of about 42 per cent of the total population in 1970 to an average of about 34 per cent in 2000. At the same time the old-age group will have the highest percentage increase of all the main functional groups within the world's population between 1970 and 2000 and within both the more developed and the less developed regions. The working-age group (15-59 years), represents an increase of 83 per cent for the world as a whole and only 24 per cent for the more developed regions. In the less developed regions, it is 110 per cent. The old-age group 60 years and over represents an increase of 89 per cent for the world

as a whole, 54 per cent for the developed regions and 123 per cent for the developing regions. The school-age group (5-14 years) represents an increase of 46 per cent for the world, a 4 per cent decrease for the developed regions and a 60 per cent increase for the developing world. Finally, for the pre-school group (0-4 years) the projected increase is 36 per cent for the world, 4 per cent for the developed regions and 43 per cent for the developing regions.

9. Among the many implications of these figures for policy makers is the fact that falling birth rates in particular and also rising life expectancy have combined to push up the average age of the world's population. By 2000 there will be about twice as many people over 60 and over 80 years old as there were in 1970. The rise in life expectancy is mainly the result of very large declines in mortality, particularly in the developing countries. Thus, in the year 2000 the average expectation of life at birth for the world will be 64.4, with 73.6 for the developed countries and 63.0 for the developing countries.

10. It is also important to consider the population 45 years of age and over and its implications for the development of social policies and practices as this age group will represent an increasing proportion of the world's population for the remainder of the twentieth century.

11. There is evidence that, throughout human existence, few individuals have achieved longevity. The attainment of advanced age by the majority of individuals in some countries is, however, an achievement of the twentieth century. The increasing expectation of longevity implies living into stages of life where, under changing world social, economic and value systems, there will be new and as yet unstructured social roles and identities. For the female there is the increased prospect of widowhood and, in many countries of the world, reduced income and greater economic deprivation. Longevity also has implications for the structure of the family. With increased mobility of populations throughout the world, the family is increasingly separated in space as well as in time. In addition, the extension of the family into four and five generations is a twentieth century phenomenon and has implications not only for family roles and responsibilities as related to the aging, but also for social policies in supporting the family to carry out some of its more traditional roles in relation to older family members.

12. In developing regions of the world, the social implications of aging go beyond those of the numbers and proportions of older persons in society. Increasingly urbanization and industrialization are being accompanied by a mass migration of the younger and better educated segments of the rural populations to larger cities. Large numbers of the aging are left in rural areas, increasing their numbers disproportionately and depriving them of traditional resources and social support, particularly from younger family members. Furthermore, such rural areas face difficulties in providing the needed capital and manpower to respond to the social and health requirements of the older population which remains.

13. The above statements indicate that, when trends of population growth, distribution and structure are out of balance with social, economic and environmental factors, the imbalance can, at certain stages of development create additional difficulties for the achievement of sustained development. It is

necessary, therefore, for countries expecting future demographic trends and changes in population structure to take appropriate decisions and measures to minimize or eliminate the negative implications of this phenomenon for development.

14. These examples of demographic inertia, emphasizing the growing aging population, demonstrate that, whatever policies may be formulated, socio-economic development must be accelerated in order to provide for a significant increase in levels of living. Efforts made by developing countries to speed up economic growth must be viewed by the entire international community as a global endeavour to improve the quality of life for all people of the world, supported by a just use of the world's wealth, resources and technology in the spirit of the new economic order.

15. Thus, the proposed 1982 World Assembly on the Elderly is expected to provide a focus for world-wide activities that would reflect the reciprocal rights and obligations of society and of the aging.

C. Identification of the main issues

16. Many Member States suggested in their responses to the Secretary-General's inquiry, that the World Assembly on the Elderly should consider the question of the aging within the broader context of the world's social and economic trends so as to appreciate the complexity of the question and to understand the interrelatedness of aging with the issues of society at large. It was emphasized that the current development efforts of most of the developing countries had only achieved partial success. More emphasis should be given to the provision of "increasing opportunities to all people for a better life", as was indicated in the International Development Strategy for the Second United Nations Development Decade.

17. It was noted that uneven distribution of growth among countries and the existing pattern of economic progress very often tended to bypass the majority of the population. A more human-centred perspective should therefore be considered and increasingly organized around the human factor as both its agent and its beneficiary. Thus, development policies should aim at bringing development to the people and making it more responsive to their needs and should allow for and rely on the fullest possible mobilization and utilization of all available resources, including those of the aging.

18. In addition, many Member States emphasized the humanitarian approach to the question of the aging, thus implying that policy makers, in designing their plans for social and economic development, should consider the preventive measures that would eliminate or at least minimize the undesirable negative implications and consequences of development. The aging affect the developmental process and are affected by it: they are affected socially by significant changes in the family structure, the environment, habits, mores and traditions, among other things. Economically they are affected by urbanization, industrialization,

modernization and mobility. At the same time, as mentioned earlier, their increase in numbers and proportion leads to a greater demand on service delivery systems as well as changes in dependency ratio, savings, investment and consumption patterns among others.

19. Some Member States noted that true development and the participation of the aging, like other population groups in this process, cannot take place in the absence of national independence and liberation. Colonialism, racism, racial discrimination, apartheid, foreign aggression and occupation and all forms of foreign domination continue to be among the greatest obstacles to the full emancipation and progress of the developing countries and all the people involved.

20. National policies for the aging within the context of social progress and economic development must, of course, be defined by each country within the framework of its own priorities, objectives and plans in accordance with its stage of development. Taking into account the various responses of Member States with regard to the improvement of the well-being of the aging within the context of the entire population, it has seemed advisable to group related issues at the World Assembly under two major topics: humanitarian and developmental. It should be noted however, that these two groups are interdependent and interrelated; humanitarian variables influence development variables and are also influenced by them.

1. Humanitarian issues

21. The humanitarian issues are those related to the specific needs of the aging. Although there are many matters that older persons share in common with all members of the population, certain issues affect their individual characteristics and requirements, and these are the ones it is proposed to group for substantive examination and for the formulation of action programmes at the national, local and city levels, as well as internationally.

22. The humanitarian issues proposed by the majority of Member States in their response to the Secretary-General's inquiry relate to a number of subtopics, such as (a) health, (b) housing and environment, (c) social welfare, (d) income security, (e) education and (f) the family. In order to ensure the optimum design provision and utilization of policies and programmes in these areas, Member States stressed that research and training needs with respect to the above-mentioned topics should be systematically considered.

(a) Health. The aging require a variety of remedial and preventive health and social measures. The enhancement of their functional capacities must be one of the main goals of health care for the aging, and prevention must be considered as an important component of health services throughout the life span.

(b) Housing and environment. In designing housing for the aging, Member States recognized that it must be viewed as more than mere shelter. In addition to its physical component, it has psychological and social significance, which

should be duly taken into account. Particular attention should be given to maintaining, wherever possible, the cohesion of the family unit.

(c) Social welfare. Community-based services - preventive, remedial and developmental - for the aging in both developed and developing countries were emphasized by Member States. They further suggested that such services should support the aging in their usual environments. Certain Member States noted that in some rural areas there was a scarcity of resources and organized social welfare services for all ages. At the same time there were concentrations of the aging in many such areas. They therefore urged that existing formal and informal organizations in those rural areas should consider the special needs of the aging and include them in their present programmes.

(d) Income security. Income security implies an adequate minimum income for the aging, a reasonable replacement of previous earnings and an adjustment of benefit levels that will assure the aging of a share in increasing national productivity and in rising levels of living. Social security schemes have been established in developed countries and in most of the developing countries. Recent attempts have been made in both the developed and the developing countries to strengthen existing systems in order to ensure an adequate minimum income for the aging. Certain Member States emphasized in their replies the importance of establishing national comprehensive social security schemes to cover all sectors of the population, including, in particular, agricultural workers and the self-employed. The financing of social security schemes, however, particularly in the developing countries, deserves careful consideration, since, depending on its design and use, it could either hinder or assist development. An important factor that must be considered is the age structure of the population particularly the size and composition of the inactive population.

(e) Education. The increasing rate of social and technological change and the explosion of knowledge throughout the world have resulted in the need for continuing education of people in their middle and later years and for the retraining of those workers whose skills have become obsolete in their middle years. A number of Member States, specialized agencies and non-governmental organizations emphasized that education for people in their later years increased their knowledge and skills and enabled them to participate more fully in the life of their community and society. In addition they emphasized the importance of educating the general population about aging and recommended that such teaching should form part of the national and local educational programmes.

(f) The family. Ways and means of strengthening the role of the aging within the family were consistently emphasized by Member States. There is ample evidence of the high esteem in which older people are held in developing countries. However, increasing trends of industrialization and urbanization and the mobility of the labour force indicate that the traditional concept of the place and relationship of the elderly in the family is undergoing major change. Ways to ensure the vital role of the family and the dignity, status and security of the aging are issues that deserve careful consideration.

23. Action to meet these humanitarian needs are primarily the responsibility of national Governments, city and local authorities and the family. However, action at

the international level is also warranted particularly the sharing of information and technology. The exchange of information and experience at the international level is an effective means of stimulating progress and encouraging the adoption of measures to improve the conditions of the aging. Countries with different political, economic and social systems and cultures and at differing stages of development have benefited from a common knowledge of problems, difficulties and achievements and from solutions worked out jointly. Regional and international research activities, data collection and analysis of all aspects of the conditions of the aging are essential in formulating policies and evaluating progress in this field.

24. Effective programming and project formulation will require an adequate flow of factual information and of relevant experience among and between nations both developed and developing and their international assistance collaborators. A major difficulty in assessing the conditions of the aging at the present time, particularly in the developing countries, is the lack or deficiency of data and indicators to measure their situation as it affects the process of development and is in turn affected by it. The United Nations system, particularly in its technical co-operation programmes, could be instrumental in surmounting this difficulty. Moreover, meetings, seminars and training undertaken by the United Nations system have proved to be most valuable in providing a regional and international exchange of information and experience. Future endeavours could relate to such areas as social security, manpower-training, health-care delivery, etc.

2. Developmental issues

25. Keeping in mind the fact that all aging issues are interrelated and interdependent, the developmental issues should not be considered in isolation and may therefore be defined as those cross-sectional issues which consider the aging within the context of society at large. They are concerned with the role of the aging in the developmental process, particularly in such crucial areas as the relationship between the aging of populations and social and economic development. Action on these issues is primarily the responsibility of national Governments and should be integrated into over-all national development policies. However, as mentioned previously, action at the international level is also warranted to support existing programmes and expand their scope in areas such as research, data collection and analysis, technical co-operation, training and advisory services, including co-ordination with national and regional activities of organizations within the United Nations system, the dissemination and exchange of information and liaison with non-governmental organizations and other groups committed to international assistance in the field of aging. In this respect, activities concerning the aging, particularly at the operational level, could be strengthened, paying special attention to any technical co-operation activities extended within the framework of the United Nations Development Programme (UNDP) under the country programming system, and through the regional commissions.

26. The aging of the population, coupled with urbanization and industrialization, is giving rise to critical issues with regard to human resources and social and economic development. Although in some developing countries issues relating to the aging have not as yet arisen to a significant degree within the socio-economic context, with increased industrialization, urbanization and other related social

and economic change, as well as increases in the numbers of the aging and their proportion in the total population, these countries would increasingly face such issues. These situations have numerous and wide-ranging economic and social implications that must be understood and taken into account by planners and policy-makers.

27. The aging of a population may be defined as an increase in the ratio of older adults to younger adults. The world and all its regions are witnessing an aging of their population, and this has serious implications for, inter alia, production, consumption and savings, which in turn affect general economic conditions and policies, especially at times when the aging dependency rate is increasing. In addition, the increasing numbers of older people often have an adverse effect on the development process because, in many countries, they have not been brought into the mainstream of development.

28. The skills of the aging population represent economic and social resources that should not be dispensed with lightly. Many Member States emphasized that the aim of aging policy should be to offer the aging options for retirement from active work or for continuation of work on a full or restricted basis. That would have the added value of contributing to economic development by allowing the continued use of skills that would be expensive and often difficult to duplicate and of reducing the economic, social and psychological burdens that an idle aging population might place on society.

29. The aging of the population also has serious implications with regard to social development. The countries of the developing world are undergoing changes in the social sphere more rapidly and in a shorter space of time than was the case with the more developed world. Rural development, new political systems, changes in education, technical and employment needs, advances in communication, medical and nutritional sciences and a wide variety of other changes are under way in the more traditional societies of the developing world in an unprecedented manner. The more developed countries have had many decades and, in some cases, centuries to adapt to such changes; many developing countries have had to cope with them in a relatively few years. In both the developed and the developing world, however, these changes have had striking effects on society as a whole as well as on aging persons themselves.

30. In many countries, including developing countries in particular, rapid social change occurring alongside economic development has resulted in problems, at times severe, in the situation of the major population groups, including the aging. Ways and means of minimizing or negating the negative implications of social change on society were stressed as an important topic of discussion for the World Assembly.

31. Another area within this broad developmental context, which was emphasized by Member States as deserving of priority attention, was the effect of aging populations on integrated rural development. Consistently over the last decade, in international forums and meetings, Member States have stressed the need for rural development. Many rural areas of heavy migration in both developed and developing countries are being depleted of their younger populations and are being left with

populations whose age distribution could be unfavourable to economic development. Thus, in many countries the revitalization of the countryside is a priority goal. Taking this into account, many Member States and non-governmental organizations emphasized the need to investigate possible action programmes that could serve to promote integrated rural development by retraining the older population and using their skills and resources.

32. Finally, Member States and international organizations that responded to the Secretary-General's inquiry suggested that special consideration should be given at the World Assembly on the Elderly to international action and programmes in the field of the aging. Ways should be explored in which the international organizations might render assistance to national programmes which incorporated the aging in the development process. Attention should be given to the types of assistance available from the organizations in the United Nations system, including the training of national personnel, the provision of advisory services upon request, the carrying out of research and technical assistance, the provision of technical information and the direct support of national programmes in that field. The programmes of governmental and non-governmental international organizations should also be examined, as well as bilateral aid programmes and those of foundations and other private agencies, in an effort to develop an understanding of the size and types of technical co-operation resources available.



III. ORGANIZATION AND OBJECTIVES

A. Purposes and objectives

33. The basic purposes to be served by the convening of a World Assembly on the Elderly are set out in general terms in General Assembly resolution 33/52 of 14 December 1978, particularly where the Assembly recognizes:

"The need to call world-wide attention to the serious problems besetting a growing portion of the populations of the world"

and decides to organize a World Assembly in 1982

"as a forum to launch an international action programme aimed at guaranteeing economic and social security to older persons, as well as opportunities to contribute to national development".

34. The brief analysis of the major issues of the aging within the context of development attempted in the preceding section suggests lines along which the purposes and objectives of the proposed World Assembly can be further defined.

35. Although there have always been aged segments of the population, only in the last few decades has the attention of individual nations and the world community been drawn to the social, economic, political and scientific questions raised by the phenomenon of aging. This growing awareness has led to a wealth of scientific knowledge and technological skill that has been analysed, discussed and reviewed in many scientific and technical meetings and congresses sponsored by national Governments and international agencies.

36. The universality of the aging phenomenon and the related serious issues that have been raised in developed and developing countries alike call for governmental and intergovernmental action everywhere. The General Assembly, however, clearly did not wish the 1982 World Assembly to be conceived of as a gathering of scientists for detailed discussions of specialized problems pertaining to the improvement of the physio-biological and socio-cultural aspects of the aging, nor did it suggest the initiation by the United Nations of new research projects on these issues. The World Assembly should rather be conceived of as an important means of stimulating and providing guidelines for action by national Governments and international organizations in their attempts to achieve concrete solutions to the various issues related to aging.

* 37. The main objective of the World Assembly, as indicated in General Assembly resolution 33/52, would be to launch an international action programme aimed at guaranteeing economic and social security to older persons, as well as opportunities to contribute to national development.

38. With this object in mind, the purposes of the World Assembly could be described as follows:

(a) To focus the attention of Governments on the various issues of aging in designing policies and programmes for economic and social development in both developed and developing countries;

(b) To provide an international forum for an exchange of views among Governments on the ways and means of dealing with issues of the aging, including the machinery required for administrative and legislative actions;

(c) To identify aspects of various issues and consider methods to meet the need for action at the national, regional and international level and to consider, in particular, how countries can, through increased international co-operation, derive benefit from the knowledge and experience already acquired regarding the various issues of the aging;

(d) To focus attention on and encourage wider participation in and support for present and future activities and programmes of United Nations organizations and other international organizations related to aging and to give them guidelines and directions.

39. A number of additional objectives might be included in the World Assembly's programme, among which could be mentioned the adoption of certain basic premises and considerations to guide the action of Governments and intergovernmental organizations, as well as non-governmental organizations, institutions and individuals, with regard to the question of aging. Such premises could include the recognition that policies on aging are essential in order to assure the increasing numbers and proportions of older persons of their basic human rights - full participation in and contribution to, as well as protection in, the society of which they are a part. In this connexion, the World Assembly may wish to consider including in the international action programme measures to strengthen the implementation of existing instruments and programmes and to broaden and place them in a more timely context. This would help to stimulate national and international action to meet the needs and resolve the issues relating to aging, particularly the two major groups of issues - humanitarian and developmental - dealt with in section I.C above. Furthermore, policies on the aging are essential to ensure that the international action programme is optimally responsive and effective and is used to the maximum extent possible. In the light of the consultations with Member States, it is suggested that the World Assembly on the Elderly may wish to consider a declaration on the rights of the elderly, which could be advantageously used as a common basis and a frame of reference for the development of national policies.

40. Although the primary emphasis of the World Assembly will be on action, importance must be given to the provision of information regarding the significance of the issues of aging, since on this will depend the support needed for effective action. The necessary steps should therefore be taken before, during and after the World Assembly to bring to public attention the issues, deliberations and recommendations of the World Assembly.

B. Scope

41. With the above purposes and objectives in mind, the World Assembly should not be involved in narrow technical discussions, but should address itself to broad topics of general human concern. In other words, it should principally consider the effects of the aging on economic, social and cultural development and how this development in its turn affects the aging. The concentration of the World Assembly on issues leading to action will automatically leave aside those aspects of the problems which do not call for or are not amenable to such action. Topics of interest, no matter how great their theoretical importance, should not be considered unless they can conceivably lead to an action programme.

C. Participation

42. To secure the objectives of the World Assembly, it is important that delegations should be at the policy-making level and be representative of a wide range of disciplines, such as statistics, health, welfare, education, economics, population, planning, housing, public administration, urbanization and rural development and that this should include experts in the biological and social sciences, economics, education, information, health, population, welfare, housing and planning. The major emphasis, however, should be placed on the interdisciplinary aspects of the issues, and areas of broad concern should be underlined.

43. The specialized agencies, which will be closely associated with all stages of the preparation of the World Assembly, will be represented.

44. In addition, appropriate intergovernmental and non-governmental organizations will be invited to assist in the preparation and to participate in the Assembly.

D. Duration and timing

45. In accordance with General Assembly resolution 33/52, the World Assembly is to be held in 1982. Unless decided otherwise by the General Assembly, a special conference is normally held where the substantive department or office responsible for servicing the conference is located. Therefore, and without prejudice to any invitation which may be extended by a Member State to act as host to the World Assembly, the Secretary-General proposes that it be held in the latter half of 1982, for a duration of two weeks, at Vienna, where the Centre for Social Development and Humanitarian Affairs is located.

E. Documentation

46. A basic principle deriving from the above general approach is that the World Assembly will have a limited number of working documents prepared for it in advance, relating to the various issues and types of action included in its programme. In addition, the World Assembly will have before it material prepared

by the specialized agencies and other international organizations. The documentation envisaged for the World Assembly will thus include:

(a) Working documents. In order to set the framework of the World Assembly in the first plenary session, two introductory papers will be prepared. These introductory papers will, in particular, take into account the main conclusions deriving from national reports and reports of regional meetings (see para. 48 below). A number of discussion papers will be prepared for each of the main topics selected for the programme.

(b) Reports contributed by interested specialized agencies and international organizations

47. In addition, each country will be invited to prepare a national report which will analyse, preferably in accordance with a uniform general outline, the main issues, both humanitarian and developmental with which it has to deal, the ways in which they are handled and the experience acquired in this respect. Copies of national reports could be made available to the Secretariat well in advance so that their content could be analysed and used in the preparation of the working documents. These national reports will not be translated or published, but could be distributed by the delegations at the time of the Assembly or made available to other countries beforehand.

F. Official languages

48. It is suggested that the official languages of the World Assembly should be those of the General Assembly (Arabic, Chinese, English, French, Russian and Spanish).

G. Preparatory work

49. Preparations must begin as early as possible in order to ensure full participation in and preparation for the Assembly by Member States.

50. In the preparations for and the organization of the World Assembly, the Secretary-General would welcome the assistance of an advisory intergovernmental body. He would therefore like to suggest that an advisory committee be established by the General Assembly to assist in the formulation of a draft international action programme for the elderly. The committee would also advise on such matters as the provisional agenda, programme and organization of the World Assembly, the preparation of working documents, on the draft rules of procedure and on the outcome of the work of the panel of experts on development and aging (see para. 48 below). The committee should have a limited membership (23 Member States) composed of representatives and experts familiar with the subject and appointed on the basis of equitable geographical distribution. A membership of 23 States would be in line with the composition of the Advisory Committee on the International Year of Disabled Persons and of the Advisory Committee on the International Youth Year.

51. The Secretary-General would like to propose that a panel of experts be convened in order to provide an opportunity to consider the question of the aging in the context of development needs. A report on development and aging would be prepared by the Secretariat for submission to the panel of experts. That report, after review by the panel, is expected to offer a basis for discussion at a series of regional meetings on aging and development which the Secretary-General proposes to convene in collaboration with the regional commissions. The regional meetings would also afford an opportunity to obtain regional inputs to other preparatory work for the Assembly, with the result that thematic substantive discussions might be held during the Assembly, as regional variations would already have been taken into account in the preparatory work.

52. The Secretary-General would designate the Assistant Secretary-General for Social Development and Humanitarian Activities as the Special Representative of the Secretary-General to be in charge of the organization of the World Assembly. The Centre for Social Development and Humanitarian Activities would have the substantive responsibility for the World Assembly and would function as its secretariat. In order for the Centre to discharge its responsibilities, the resources of the Centre would need to be strengthened.

53. Many specialized agencies are directly involved in major sectors of the issues to be discussed at the World Assembly. Their full participation will be essential at all stages of preparation of the Assembly, including participation in the meetings of the Advisory Committee. Consideration should be given to establishing an ad hoc interagency task force to ensure the co-ordination of inputs of the agencies to the preparations for the World Assembly. It is hoped that some of the agencies which are particularly concerned with a broad area of the subject-matter of the World Assembly will be able to assign staff members to serve as focal points to ensure full co-operation and co-ordination with the United Nations Secretariat.

54. Preparations for the World Assembly in the countries themselves should also begin immediately. For this purpose, it is suggested, as a first step, that countries should be invited to establish ad hoc committees or similar focal points in the governmental machinery to ensure appropriate liaison within the country and to facilitate contacts with the secretariat.

55. The detailed financial implications of the proposals outlined above will be submitted as an addendum to the present report.

56. The Secretary-General will submit to the General Assembly at its thirty-sixth session a report on the work of the proposed advisory committee, together with the draft provisional agenda, the draft rules of procedure and the proposed organization of the World Assembly on the Elderly, as well as on other matters relating to the preparations for the World Assembly.

[end]

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