A MANIFEST FOR THE RIGHTS OF OLD PERSONS TO REMAIN ACTIVE CITIZENS
TAKING PART IN THE SOCIAL AND CULTURAL LIFE AND BUILDING THEIR OWN LIFE

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1) RIGHTS DO NOT CHANGE NEITHER BE LIMITED WITH ADVANCE IN AGE

- Any limitation of Rights and Liberty based on chronological age is contrary to the Principle of Egalité and to Human Rights.

- Older population is diverse. It includes different generations, with different cultures and ways of life. This diversity has to be respected. It includes a growing majority of persons without any major disability, a part of frail persons, and a minority of persons with limited autonomy (ability to decide for themselves) or/and loss of independence (ability to act by themselves). All these different old persons remain adult citizens with their Rights and their Duties.

- Violations of fundamental Rights of Older persons remain a major problem, specially for women. All Traditions, Laws, rules in violations of fundamental Rights have to be declared as anti-constitutional in all the countries adhering to the Declaration of Human Rights of UNO.

2) SOCIAL EXCLUSION IS ONE OF THE MAIN PROBLEMS OF OLD POPULATIONS.

- Old age is not synonymous of disabilities, illness and vulnerability, even if the risk grows with age. This wrong belief remains strongly spread among medias and political managers. It leads to numerous exclusion process – even if decided in a protective purpose. Lack of resources is another major cause excluding from social life broad parts of old populations.

- So access to social life is often limited by systematic exclusion of old populations, whatever are their lucidity, validity, wishes and skills. It is an absurd lag for the society. Disabilities or isolation, concern only diverse minorities, only more numerous with advancing age.

- End of professional life leads often to a « social death », especially for manual and low income jobs. Really, end of professional life may become on an opening to a large panel of new activities following skills and wishes of the person and needs of society. These activities may be voluntary or paid. Affective life also keeps going on.

- The growing enrolment and empowerment of old persons themselves in social life must change this social exclusion. « Participative aging » is an evidence based best key than « active aging » for « well-aging ».

- Old persons have a special responsibility in the transmission of their own knowledge and skills in the different fields: professional, technical, cultural, familial.
3) WHEN THE ACCESS OF OLD PERSONS TO THEIR RIGHTS IS LIMITED BY LAWS and RULES, TRADITIONS OR DISABILITIES, THESE HINDRANCES HAVE TO BE REMOVED Or COMPENSATED

A broad and growing majority of old populations remains independent and autonomous, but have an access to social life and to their Rights limited by Laws (even « protective »), rules, traditions. Some minorities may develop disabilities, illness. This vulnerability makes difficult - as at any ge - the access and exercise of their Rights. These obstacles must be taken in account to preserve access to Rights and Liberty. Disabled old persons must have the same access to adapted compensation systems.

- Ageism remains the most anchored and spread among all racisms. It must be relevant of all anti-discriminative legislations.

4) OLDER PERSONS MUST PARTICIPATE TO DECISIONS IN WHICH THEY ARE INVOLVED

Society decisions concerning older citizens are taken often without consultations on their own interests.

Old persons have also to participate to any individual decision for which they are involved -even if they are under a juridical protection.

“Older people have the Right to participate in the whole process of building a society for all” (Madrid Declaration and Programme, 2002). They are also concerned, and it is their Duty.

5) ACCESS TO PUBLIC AND PRIVATE SERVICES MUST BE AVAILABLE AT ANY AGE

Old age may induce some difficulties to walk, to drive, even to go out of home. Developing easy access to all public or private services is a vital need for all people of any age with walking, seeing, hearing impairments. However exclusion of social life is the main hindrance and the main factor of home confining in old age.

All documents, official as notices for users have to be easily understandable to any citizen.

None public service should be accessible only by Internet. Governments and society in general should not create new social barriers and exclusions as technological gaps like « technopenia ».

6) PRECARITY AND POVERTY MUST BE AVOIDED IN PARTICULAR FOR OLD WOMEN

Retirement leads often to poverty or precarity, specially for old women. In some countries a large majority of old women have not any own resources and are entirely family depending mainly on their descendants and even not consanguineous relatives. Special attention should be paid to elderly women in this regards.

7) ACCESS TO SKILLED CARE MUST BE GUARANTEED TO THE ELDERLY

Geriatrics is a recent, complex branch of medicine. Unskilled helps and care may lead to dramatic effects: disabilities, depressions, bed-ridden status, etc. It is a Right to be cared in trained services skilled in all the geriatric aspects of health conditions and to receive treatments experimented in old patients.

Long term care and helps for persons of any age needing a human assistance for their elementary activities of daily life, are not as simple as a "service for a person" (independent person), but a vital care essential for a life in dignity for these citizens loosing independence or autonomy.
8) ACCESS TO EDUCATION AND CULTURE IS A NECESSITY AT ANY AGE

Level of primary education is evidence based one of the main factors of well-ageing and longevity. Continuous education and training along all life, old age included, is another factor of well-aging and an essential Right.

Cultural differences between generations are often more important than cultural differences following social or ethnical origin. Access to present or past cultures has to be preserved.

9) ACCESS TO JUSTICE IS A NEED AT ANY AGE

Justice remains too often costly, sophisticated, long lasting, and, as result, inaccessible for old citizens. Access to Rights means access to Justice, if necessary.

10) OLD CITIZENS MUST KEEP THEIR STANDARD OF LIFE

To keep the standard of life obtained during the professional life is a main aim of any aging politics.

Too often, old age and retirement are linked with poverty and loss of standard of life obtained during adulthood, especially for old women. An increased level of pension is more important for a well-being old age and a longer life than an earlier retirement, a proved factor of shorter life expectancy.

11) ELDER ABUSE, NEGLECT AND MISTREATMENTS CAN BE AVOIDED

Physical and mainly mental frailty, isolation and loneliness, enhance strongly the risks of elder abuse. Needs for a human help in activities of daily living and for care raise the risks of mistreatment (neglect, malpractice, inappropriate care, no respect of Dignity). Vulnerable old persons must be protected against any abuse of their frailty. This protection is done for respecting their will, wishes and liberty and not to add a supplementary subjection.

Only skilled and trained care by competent teams, sufficient in number and qualifications and aware of personal needs of the cared persons may avoid mistreatments and worthless behaviors.

12) INTERDISCIPLINARY RESEARCH ON OLD AGE MUST BECOME A PRIORITY

« Old Age for all » is a wonderful advance offered progressively to all populations by educational, social and health progress. Mechanisms of ageing, both deleterious and adaptive are not well known. Jointed effects of genetics, primary education, hygiene, economic and social progress, working conditions, physical, mental and social activities at any age, old age included, etc, imply complex inter-actions to determine the intrinsic capacity and functional capacity\(^1\). Only comprehensive researches strongly inter-disciplinary may lead to further advances to understand, and then, prevent or delay adverse effects of ageing.

\(^1\) These are current concepts related to healthy aging. Source: WHO. World Report on Aging and Health, 2015.