

**Workshop on Healthy Ageing**  
**November 28, 2019**  
**Hotel Moxy Tbilisi, Georgia**  
**Meeting Notes**

UNFPA Regional Office for Eastern Europe and Central Asia in collaboration with the Country Offices in BiH and Georgia organized a regional workshop on Healthy Ageing in Tbilisi, Georgia to support the dialogue and exchange of experience among representatives of local governments, Ministries for Social Policy/Welfare and Centres for Social Welfare, NGOs, four UNFPA Country Offices from the Eastern Europe Central Asia Region regarding population changes and present positive practices; learn about the BiH experience on Healthy Ageing Centres (HACs); and find out if this modality can be replicated or adapted to their country's situation. Overall, 9 countries participated in the workshop, including: Armenia, Azerbaijan, Georgia, Moldova, Kazakhstan, Kyrgyzstan, Serbia, Bosnia and Herzegovina, and North Macedonia.



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Ms. Lela Bakradze, Acting Head of Office of UNFPA Georgia Country Office and Mr. Eduard Jongstra, Regional Advisor of UNFPA Eastern Europe and Central Asia Regional Office, opened a workshop on Healthy Ageing, on November 28, 2019. At the outset, Ms. Bakradze emphasized ageing to be an important part of demographics and country development, and accentuated UNFPA's efforts to gather intelligence on this phenomenon, as part of the demographic dynamics and to advocate for relevant policies and services, in order to respond to trends associated with population ageing.

Mr. Jongstra, Regional Advisor, UNFPA Eastern Europe and Central Asia Regional Office, stated that while upstream work at the highest political level is important, it is also critical to support implementation of such initiatives as Healthy Ageing Centers – HACs, which can make subtle differences in people's lives. He mentioned that one of the biggest challenges, apart from economic arguments associated with population ageing, is the quite widespread perception viewing older people as a burden. He added that it is erroneous to assume the expenditures on older generations as wasted financial resources, but they translate into increased employment in the country, motor for "care economy" and new opportunities for markets. He stated that it is important to have such kind of ageing policies, which will allow flexibility in retirement age and career patterns.

### **Session 1. Demographic Changes and Policy Development on Ageing**

Following the opening remarks, **Ms. Rosette Farrugia Bonello, Deputy Director of the International Institute on Ageing, United Nations – Malta (INIA)**, delivered the first presentation of the day on Demographic Changes and Policy Development on Ageing. INIA was established in 1987, which works on providing professional training and research programmes on ageing to persons in the developing countries, or for those, who care for older persons. Similarly, to the previous speaker, Ms. Bonello stressed ageing to offer new opportunities for development, through more research, increased realization of human potential, development of new care models, and creation of new professions, such as gerontology.

#### **The speaker outlined that barriers to healthy ageing include:**

- Ageism and stereotypes against older people, frequently enhanced by media
- Inadequate policies
- Lack of accessibility, where equity is not in the equation

- Inadequate or absent services and no person-centered care
- Lack of consultation and involvement

**As a result, number of priority areas for action were outlined and discussed:**

- Foster positive vision on ageing, look at older people as an asset and resource, instead of a burden
- Transform from passive ageing, to active ageing, and from curing diseases to improved functioning and health promotion
- Improve measurement, monitoring and understanding
- Align health systems to the needs of the older population
- Ensure everyone can grow old in an age-friendly environment
- Develop long-term care systems

The Q&A session focused on professions and qualifications of teams working in ageing centers, types of funding and ownership of centers in Malta, and INIA activities in more detail. Ms. Bonello summarized, that there exist different ownership and management structures, including the government, the church, PPP (Public Private Partnerships) and privately owned homes in Malta. It can also occur that homes belong to the government, but are privately managed, including provision of food, security and other services. However, there are similar quality standards and measurements for all, including necessary infrastructure and/or nutrition, license in order to operate, and regular authority inspector checks for quality control. Professional staff of the center may include formal carers, occupational therapist, speech therapist, physiotherapist, center manager and activity coordinator – who organizes activities throughout the day, encourages old people to engage and works with the rest of the therapists. The team is intergenerational – which implies different generations working together. She also shared information about INIA satellite centers, which are hubs based in different countries covering allocated regions, for example in Argentina satellite center covers South American countries, Dominican Republic covers Caribbean countries, Georgia and Azerbaijan cover the Caucasus, St. Petersburg covers Russia, and etc. These centers help to identify the needs of specific countries and regions, and organize the local capacity building initiatives based on these needs.

**Session 2. Developing Ageing Policies in the EECA Region – What Works for Promoting Healthy Ageing?**

**Mr. Zeljko Blagojevic, Programme Analyst at UNFPA Country Office in Bosnia and Herzegovina,** stated that a problem to attract government’s attention to ageing in Bosnia and Herzegovina was lack of data and evidence. According to Mr. Blagojevic, governments are reluctant to collect data on older persons, but rather, it is targeted on children, youth and the working population, up to the age of 60. However, it is equally important to collect data on 60+ population, to prove that older people can contribute and have capacities for development and change. In his overview of UNFPA’s policy-level efforts, he mentioned establishment of 2 working groups in BiH, consisting of NGO sector representatives, as well as different thematical ministries, including education, health, rural development and finance. These working groups aimed to review the evidence and provide own expertise in what has been done and what should be improved in work and support of older persons. He accentuated that ministries’ involvement is critical, because sufficient funding must be allocated to implement strategies and policies, and ensure sustainability of actions.

During the first phase of the group work, there was push for analysis and data collection. The proposal to conduct multi-level analyses on ageing was accepted by the government but this yielded no result as there had been no statistical data relevant to older persons and ageing. The process was continued by applying personal experiences of members of working groups and adjusting them to MIPAA requirements. He also underlined the importance of the intergenerational support, so that people across several generations cooperate, opening two-way communication and improving sustainability of healthy and active ageing. He

mentioned that the results of ageing policies are not expected to be immediate, but take years to yield outcomes. It is critically important to target young people, so that they start planning ahead and think about their future. He mentioned that one of the two ageing strategies in Bosnia and Herzegovina has been adopted a few weeks ago and is in the process of translation in English, and as soon as it is publicly available, it would be shared with all the interested stakeholders. In the end, he stated that it is important not to fully replicate it, but to see the rationale behind the document, adjust it and apply to the local context. According to analysis done by UNFPA, the cost of the Healthy Ageing Centres in Bosnia and Herzegovina is cca 4 EUR per person per month. This is much more cost effective than providing medication to older persons that are probably less beneficial for treating the symptoms of mental illnesses (such as depression etc).

Following Mr. Blagojevic, **Ms. Ketevan Goginashvili, Chief Specialist at the Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia (MoH)** made an overview of state actions on ageing. According to Ms. Goginashvili, Georgia became a member of the UNECE Working Group on Ageing in 2007 and since then, has been taking the steps to elaborate ageing policies. In 2015, with UNECE and UNFPA assistance, a Roadmap for Mainstreaming Ageing in Georgia was developed and in 2017 the government approved the two-year National Action Plan on the State Policy on Population Ageing, prepared with UNFPA technical assistance, in order to enable the country respond to the challenges related to ageing. While the Action Plan was not accompanied with dedicated budget, the state agencies implemented number of initiatives. Some of the milestones include:

- Introduction of accumulated pension scheme
- Switching from a medical model to disability to social model
- Developed concept and standard for “long-term care” and “home care”
- Further strengthened the State Universal Health Program
- Launched the Chronic diseases drugs program
- Refined the Rural doctor/ambulance care program
- Expanded the Referral programs and screening programs
- Compulsory module of social gerontology and geriatrics was integrated into the curricula of physicians and midwives

According to the speaker, next year Georgia will join the list of countries, which have a robust and concrete national action plan in the direction of ageing, as the second wave of the 3-year National Action Plan on Ageing will be developed. In recent years, community-based services have been developed in 11 cities across Georgia. This year, with UNFPA support, the new model of a municipal service - 60+ Clubs has been introduced. The importance of intergenerational links and inclusion of youth in initiatives on ageing was also underlined. She stated that there is a law on Volunteering and young volunteers held information meetings with older persons to raise their awareness on different ways for social engagement. The speaker also made an overview of legislation and activities on prevention and response to violence against older persons.

**Ms. Aliona Cretu, Head of Demographic Policy Unit within the Ministry of Health, Labour and Social Protection in Moldova**, continued the workshop overviewing the demographic trends and policies in Moldova. According to her, Moldova has an ageing population, while demographic structure is rapidly changing due to out-migration of young people. In 2017, for the first time, Moldovan government allocated domestic resources for demographic and ageing policies. In 2018, the government allocated 500,000 USD to UNFPA to implement the Generations and Gender programme, aimed at developing rights-based demographic policies, based on the results of the Generations and Gender Survey. She also added that domestic budget is financing implementation of the Roadmap on Ageing and its Action Plan. Number of piloted set of concepts to promote active ageing include:

- Adult Skills Guarantee Program
- Integration of ageing in local policies (250 representatives trained)
- Friendly workplaces for older persons

- Community Mobilizers
- Volunteer Program for Older People (with UNDESA support)

Demographic barometers and policy papers are updated and developed on economic implications of population changes, ageing and low fertility. There are government grants programs on active ageing for grassroots organizations to implement projects on integration and participation of older persons. Mr. Eduard Jongstra praised Moldova's efforts to revise and update demographic data and numbers of the population, and realign its policies and all the indicators, accordingly.

Next, **Ms. Anna Grigoryan, Head of Social Programs Development, Mission Armenia NGO**, discussed policies and challenges of ageing in Armenia. She accentuated that with the ageing population, it is important to support functional capabilities of older people, help them be more valuable members of society and make their contribution to societal development. She also made an overview of the national strategy 2020-2024, which is oriented on shifting from social protection, to healthy and active lifestyle, which implies de-institutionalization and creation of new services in local communities. She discussed the work of Mission Armenia in more detail, stating that its activities are based on the idea of active ageing and creation of community services for older persons. This model enables beneficiaries to get different medical and social services in accordance to their capacities. The NGO operates in 8 Armenian regions, targeting older persons, persons with disabilities, refugees, and those in need of social protection. Overall, Mission Armenia provides: socio-psychological services; medical services; legislative services; hot food care; consultations; and supports daytime care centers.

Afterwards, **Ms. Narmin Ganiyeva, Co-founder of Uchuncu Bahar**, an NGO in Azerbaijan, reviewed work of the organization, which was established as a social project in 2017 targeting senior citizens from all regions of Azerbaijan. Currently, the organization unites more than 1100 retirees. The mission is to unite senior citizens to connect with each other, as well as to efficiently organize social projects for them. Main directions of the organization are: education; healthcare; creativity; social entrepreneurship. Uchuncu Bahar partners with UNFPA in organizing awareness campaigns to encourage active participation and engagement of older persons in different activities. Regular informational meetings are organized in the Azerbaijan capital and other regions.

**Number of important projects include:**

- Establishment of the "Living Center" and a theater
- Organizing "Intellectual Games" for older persons
- Entertainment projects
- Planning National Festival for Older Persons, which incorporates masterclasses, games and exhibitions
- Partners include the Ministry of Labour and Social Protection, UNFPA, Capital Bank, Alpha Coaching and etc.

Following Ms. Ganiyeva, **Mr. Sahil Mammadli – Head of Volunteer Management Division at the State Agency for Public Service and Social Innovations (ASAN) under the President of the Republic of Azerbaijan** presented ASAN's initiatives on ageing. The agency is assessed as a success story of public service modernization. It is a one stop shop system, which offers all public services in one space. Its key principles are efficiency, transparency and comfort for people. ASAN incorporates Volunteers Management Division, which integrates senior volunteers in the context of active ageing; provides space for socializing among older persons and supports intergenerational communication. Various events and activities help older persons learn new skills, gain knowledge together with youth and reduce senior isolation.

Responding to questions regarding sustainability of projects and partnership with private Banks, Ms. Ganiyeva mentioned that three years ago, in partnership with the Capital Bank under its Corporate Social

Responsibility, a project on increasing financial literacy of older persons was launched. The training sessions were organized in different venues, however older people wanted a stable meeting point, so the City Bank advocated with the Ministry of Labour and Social Protection which resulted in provision of a space, that gradually turned into a day center for older persons. Centers are run by the NGO Uchuncu Bahar, which provides funding for all the activities now. The premises for this center have been provided by the Ministry of Labour, while the Capital Bank provided furniture and other necessary equipment. In regards to sustainability, Ms. Naila Jafarova, Project Officer at UNFPA Azerbaijan CO stated that UNFPA supports launch of two centers and tries to ensure sustainability by cooperating with the Ministry of Labour, which will provide premises. After the project funding is finished, the centers will be supported by the government.

Mr. Jongstra asked to which degree there has been change in the government's approach to ageing, and to which extent this change (if any) can be attributed to launching the population projections for Azerbaijan, with the support of the Charles University (Czech Republic) in 2018. Ms. Ganiyeva assured that the government now prioritizes ageing and that there definitely is difference in its attitude and approach since the 2018. Mr. Blagojevic accentuated the significance of raising government's awareness on healthy and active ageing, because frequently, the decision-makers have limited knowledge of population trends. Often, central governments are supportive of the idea, but do not support funding of centers in local communities. So, increased engagement of local governments is the only way for centers to become sustainable, while central governments are preoccupied with pensions for instance, and with broader policy issues.

### **Session 3. The Neuroscience of Healthy Ageing: Quantifying the Effects of Healthy Ageing Centers on Mental Health**

**Ms. Tara Keck, UCL Professor of Neuroscience at University College London (UCL)** presented the work undertaken in collaboration with the UNFPA Bosnia and Herzegovina, and discussed ageing from neuroscience point of view. While the learning capacities and plasticity of brain decline with age, it does not mean we cannot learn when we are old. The speaker debunked popular myths of eating fish oil, or blueberries and doing sudoku to be efficient tools for maintaining brain functionality, and outlined the following risk factors for its decline: 65% is out of human control; and, 35% are largely controllable risks, such as hearing loss, social isolation, education (people who have high level of education, tend to keep engaging in active learning), depression, physical inactivity, diabetes, obesity and etc. Studies showed that social interaction increases brain plasticity; furthermore, with higher physical exercise level, there was increase in memory, so one of the ways to reduce memory loss is by doing cardio-vascular exercises.

With the purpose to keep brains healthy, in the healthy ageing centers in Sarajevo and in Banja Luka older people undertake the following social activities:

- Social interactions – parties, choirs, social rooms
- Classes for arts, languages, computers, crafts, library, lectures
- physical exercise classes are most popular (With moderate exercise, there is 30% less likelihood to develop dementia in next six years)
- Cooking sessions

The UCL has developed a cost-effective, quick approach to get first approximations for benefits of Healthy Ageing Centres. The UCL has already completed data collection and the results of the survey will be available in the first half of 2020. Presentation of survey results will be organized in first week of June in Sarajevo and hopefully representatives from all countries present at the workshop will be able to join and learn. Surveys can be used to help optimize resource allocation and project economic benefits when developing Healthy Ageing Centres in new locations.

Responding to questions, Ms. Keck stated that physical exercise, even walking on a regular basis is the key. There are on-line forums of support for caring family members of patients with dementia and it is advisable to seek some form of support, from this online communities for family members.

#### **Session 4. Healthy Ageing Centers (HAC) in Bosnia and Herzegovina**

**Ms. Aleksandra Hasecic, Head of Department for Information, Public Relations and Protocol of the Municipality of Novo Sarajevo** stated that the aim of the first Healthy Ageing Center in Novo Sarajevo was to improve quality of life of third-age persons, and establish community teams and self-sustaining healthy ageing centers. The first step was a study tour to visit a Healthy Ageing Center in the Netherlands and share their practices. After opening the first center in Novo Sarajevo in 2011, it had 550 members, so the second center was opened, and now, there are ongoing works to open the third one in this municipality. Activities for older persons in the Centers include: physical exercises, table tennis, computer courses, art, music and language courses, decoupage, knitting, recycling, cooking and etc. The speaker mentioned that, now it is relatively easier to allocate municipality funds to finance work of centers and build new ones, than it was ten years ago.

Further, **Ms. Sanja Mijic, Coordinator for Partner Cooperation and Public Relations of the Centre for Social Welfare of the City of Banja Luka** shared that in 2018, with support of UNFPA in BiH, three small centers were developed in Banja Luka, in coordination with partners from the NGO sector, including Red Cross and Youth Communicational Center. The aim was to get youth and older persons to work together in an intergenerational system. The basic activities in 3 centers include coffee and tea sessions, preventive corrective gymnastics, board games, medical lectures, psychological lectures, sewing, painting, creative activities etc. From time to time, musical evenings and excursions are also organized. Besides the main coordinator, every Healthy Ageing Center has its own coordinator, because its success relies on dedication and talent of a coordinator to keep things scheduled and ongoing. Success of the centers also depends on availability of premises to beneficiaries, which should be comfortable. Currently, there are overall 300-400 beneficiaries engaged.

**Ms. Sejdefa Basic Catic, Executive Manager of the NGO Partnership for Public Health** informed that there are more centers in BiH, with different capacities, in accordance with the size and demands of the municipality or the city. There are basic standards in place for centers, however a lot depends on local communities, how they want it to be organized, as well as number and type of activities and workshops. All of them should be smoke-free places – right now indoor smoking prevails in Bosnia, however HAC by default is a non-smoking space. From day one, the center employees must make sure that there is lots of respect and communication, and the rest is creativity – once people feel comfortable, anyone can come up with a workshop idea, engage in theatre plays, get involved in street actions, or humanitarian initiatives, and be useful to their communities. HAC can be seen as a self-sustainable institution, which makes the best use of human resources.

In terms of center operation, at the beginning the only limitation was age of participants: the participant should have been 60+ from any social background, however soon, due to the increased demand and limited capacity of the space, a new criterion - geographical limitation was added and it was mandatory for new members to be from that specific municipality area. The centers work every day except the weekends and holidays, from 8 AM to 4 PM, but most people come from 9-3. The center is working to extend working hours. It does not provide food, however, it offers cooking sessions occasionally. In the beginning, there was no membership fee, but after the first SWOT analysis with the center members, they offered to introduce modest membership fees, not to rely on municipality or any other external funding. The membership fee – which is 2.5 Euros a month, is enough to cover mostly all HAC costs, without the need for additional resources. Some centers also do outreach activities for those older persons, who are not mobile. Center volunteers visit their homes and do socializing, so that they keep track of their needs.

Attendees also asked to share BiH experience on the medical services, procedures or medications provided by the centers. The presenters stated that, only senior nurses operate in the centers, who are able to do basic medical checks-ups, such as blood sugar and blood pressure checks on demand. HACs have good referral connections with primary health care as well as with the mental healthcare center, which could be involved as needed. Ms. Catic added that they established Members' Council in each center, consisting of 7-9 people including members of the center and their family members, who communicate with the management, discuss issues, and provide feedback on activities. Analysis and regular evaluations come from the members, which serve as the basis to plan future activities. There is no mental screening before selecting the center members. Everybody is seen as equal. If center employees notice some alarming signs, they talk to the family members first. There have been cases when center handled critical situations and everything was done not to isolate the person. However, it may be critical to ask that person to stop being a member. There are other cases when people quit centers themselves.

### **Session 5. Discussion on Initial Steps for Expanding the Network of Healthy Ageing Centres in the Countries of the Region with the UNPFA support**

Mr. Jongstra summarized that:

- The research in measuring the impact of HACs is important. It is planned to organize a similar meeting in June 2020, in Sarajevo, to discuss the UCL research findings and implications in more detail. It was advised to get data from other countries as well, to compare the studies to see what is working in other countries and discuss different aspects for healthy aging centers.
- It is important to develop minimum standards for HACs, which will provide a foundation for quality assurance for centers, in order to deserve the label of "HAC".

Ms. Lela Bakradze added, that minimum standards could be a shared document for those, who are interested to open such centers, but the issue of certification and licensing will fall under the competence of national governments. On behalf of INIA, Ms. Bonello endorsed that INIA would be pleased to embark on the initiative of developing minimum quality standards. The Red Cross Society – Georgia's representative welcomed this initiative and expressed readiness to further enhance cooperation to maintain healthy ageing centers.

Mr. Jongstra proposed establishing a multi country-level network, consisting of members working on HACs, which will be a fairly informal network to exchange experiences and learn from each other.

A representative of Kazakh delegation praised the initiative and mentioned that this informal network will help governments to understand the importance of ageing, increasingly value potential of older persons and can be used as a tool for advocacy. The speaker underlined the importance of developing positive connotations with ageing and altering negative perception associated with getting older. She mentioned that the network will be a useful instrument to collectively find solutions to the issues of common interest.

Red Cross Serbia representative also welcomed the initiative and stated that network of practitioners would be a very good advocacy tool to push governments as a network, rather than as separate, independent organizations.

A representative of a Kyrgyz NGO – Resource Center for Older Persons recommended to develop a roadmap, which will present what is being done in different countries in terms of ageing. The speaker shared the experience of establishing self-help groups in Kyrgyzstan, which were created prior to day care centers and were self-governing groups for older persons. She also informed about creating a network of organizations working on ageing, which currently unites representatives from 10 countries and 54 organizations. Kyrgyz delegate expressed readiness and strong support for establishing another ageing

network with UNFPA support, which will allow collaboration and exchange of best practices, knowledge and experiences among countries. The speaker recurrently stressed the importance of reinforcing the role of older persons as active members of society, and providing them with necessary tools to engage in public life. She mentioned recently organizing a 60+ fashion show, which turned out to be a life-changing experience to many 60+ citizens, so it is crucial to focus on creating positive experiences to increase quality of life for older people.

At the end of the workshop, Ms. Lela Bakradze thanked all the participants for fruitful discussion and the regional office for being the locomotive of the ageing workshop, and declared the meeting closed.