



IAG Newsletter

Volume 17, No. 5 June, 2005



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ISSN 1683-3171

Message from the President

Four Years of Achievement for IAG

By GLORIA M. GUTMAN



As my four year term as President of IAG comes to an end, it is with a sense of great accomplishment that I write this report of our activities during my term. First among these is facilitation of the active involvement of the Council in the affairs of the Association. In the past, the Council typically met only once every four years – in conjunction with the World Congress. In the period 2001-2005, in contrast, it met every year – in Valencia, Spain in April 2002; in Barcelona in July 2003; and in Vienna in September 2004. On each occasion, a majority of the member societies were represented. On each occasion, Council members engaged in lively debate, demonstrating enthusiasm and a strong commitment to IAG.

History Made in Vienna

On September 18-19, 2004, 65 Council members representing 49 societies and 47 countries assembled in Vienna for what was to be a historic meeting in terms of the future development of IAG. At the meeting Council voted to open membership to both gerontology and geriatrics societies. The criteria for admission remain the same as they have always been: the society wishing to join must have 50 or more members, be national, multi-disciplinary and share the objectives and mission of IAG. What is new is a welcoming of additional societies comprised largely of medical doctors.

Council also endorsed a policy making it possible for all countries to have more than one official member society. Both decisions reflect an appreciation of the changed environment since IAG was established in 1950. Over the past 55 years, ageing has emerged as an important issue worldwide. Countries in all regions of the world are experiencing a growth in their elderly population at the same time that birth rates are declining and in some, the young adult population is being reduced by wars and disease. The resulting population ageing is occurring especially rapidly in the developing world. Personnel with expertise in gerontology and geriatrics are needed throughout the world to attend to the health and social care needs of the burgeoning elderly population, to plan and deliver appropriately designed shelter and transportation, recreational opportunities, religious and spiritual support, as well as to break down the stereotypes and myths that prevent older people from participating fully in their community of choice. To meet the challenge, new gerontology and geriatrics societies have been established. In some cases, these have emerged in countries that have never before had them; in other countries, in addition to the one society that is a member of IAG, others have emerged to meet perceived gaps in services to members and/or the training needs and interests of a particular subset of professionals. For example, in my home country of Canada, a geriatrics society was developed some years after the establishment of the Canadian Association on Gerontology. In other countries, a geriatrics society was formed first with an organiza-



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tion more focused on social gerontology coming later. Rather than keeping some groups on the outside, it is now possible for all who desire to join to do so as long as they meet our criteria and are approved by Council.

As Roger McCarter points out in the article on page 10, multiple society memberships per country raise the question of how Council representatives (votes) should be allocated. There are several possibilities: one is to say that each country regardless of how many societies it has shall have only one vote. Another possibility is for votes to be based (as they now are) on the number of members each society has regardless how many societies a country has. A third possibility would be to base votes on the combined membership of all member societies of a country, with a suggested cap of 10 per country so that no one country could dominate the Council. The votes issue is one that was not finalized in Vienna; it remains to be debated in Rio. (See Secretary-General's report on page 7 for a description of the four societies that have become members of IAG in the past nine months. This brings the total number of IAG member societies to 70, an increase of 7 since I took office in July 2001).

Name Change

A third key change that will result from the Council meeting in Vienna is a change in IAG's name. As soon as the necessary procedures are completed to register the name change in Belgium where IAG was incorporated, we will begin to use our new name of International Association of Gerontology and Geriatrics (IAGG).

Student Section Development

At the beginning of this quadrennium, only seven of our member societies had student sections. As part of our Education Initiative, a Student Section Development Grants Program was instituted following the Council meeting in Barcelona. This on-going program provides grants of \$800 USD to help groups to establish student sections. To date, 10 grants have been awarded. Currently, there are student sections in 16 of our member societies. As well, a student section has been developed by the International Network for Prevention of Elder Abuse (INPEA) with the help of an IAG grant. Representatives of these 17 student sections will take part on June 27, 2005 in Rio in the first ever meeting of the IAG International Council of Gerontology Students' Organizations (ICGSO). The 18th member of ICGSO, the International Students' Network on Ageing and Health, will also be prominently represented in Rio. This group, comprised of medical, pharmacy and nurs-

ing students, has worked with Brazilian students, to develop a strong student program for the Rio Congress. The program will begin with a full day workshop that will take place on June 26, with other special student sessions scheduled throughout the Congress.

Partnership Activities with INPEA

IAG is a charter member of the Steering Committee established by INPEA for World Elder Abuse Awareness Day which will take place June 15, 2006. We are participating actively in a number of activities that will herald this important event including serving on the development committee for INPEA's International Art Competition. The theme of the competition is "My World, Your World, Our World - Free of Elder Abuse". Entries are being solicited from students attending a nationally or internationally recognized art school. This competition, which is currently underway, seeks an appropriate logo for the 2006 event.

IAG is also partnering with INPEA in awarding the 1st Rosalie Wolf Memorial Prize for the best student paper or poster presented in Rio on an elder abuse prevention theme. Funds for the \$500 USD prize come from an endowment fund established by IAG following the Vancouver Congress to commemorate the untimely death of Dr. Wolf, a founder and strong supporter of INPEA.

UN Activities

For the first time in recent history, during 2004 and 2005, the IAG filled its quota of five representatives accredited at the NGO Section of the UN's Department of Economic and Social Affairs (DESA) in New York. We also had two accredited representatives with DESA in Vienna, and one with DESA in Geneva. Additionally, in the Spring of 2005 we took advantage of the opportunity to name a representative and an alternate to the NGO Section of the UN's Division of Public Information in New York. The names of the UN team are shown in the box on page 12. This excellent team, comprised of a mix of working professionals, academics and retired persons, participated as observers in many events at the UN. Examples include the 43rd Session of the Commission for Social Development which took place in New York, February 9-18, 2005, the Informal Interactive Hearings of the General Assembly which took place June 23-24 and the High-Level Segment June 19-July 1, 2005.

Of special note is the statement (see pages 11-12) delivered by Astrid Stuckelberger on behalf of IAG and 19 other NGOs in consultative status with ECOSOC at the 61st Session of the Commission on Human Rights



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held at the UN in Geneva April 14-22, 2005 .

The team also participated in meetings of the NGO Committee on Ageing (COA) at each UN site. The COAs are part of the Council of Non-governmental Organizations in Consultative Status with the UN (CONGO) of which IAG is a long-standing member. In 2005, Astrid became the Chair of the COA in Geneva – another first for IAG.



Gutman and Kalache receive gifts from the Prime Minister of Turkey

In Rio there will be four symposia addressing IAG's role in follow-up to the 2nd UN World Assembly on Ageing. The first is a Presidential Symposium that I have co-convened with Alexandre Sidorenko, the UN Focal Point on Ageing, entitled "Madrid +3: Road to Implementation". The speakers will include Hania Zlotnik, Director, Population Division, UN Dept. of Economic and Social Affairs, with whom I met in February. Other distinguished speakers will include Claude Rocan, Director-General, Centre for Healthy Human Development, a part of the new Public Health Agency of Canada and Vice Minister Jai-Seong Song, Ministry of Health and Welfare, Republic of Korea. Both are important actors in the implementation of the Madrid Plan in their respective countries. Vice-Minister Song brings the perspective of a country that is ageing very rapidly; Dr. Rocan will speak about chronic disease management as a public health issue, expressing the perspective of a developed country that has aged comparatively slowly. Dr. Sidorenko, the 4th speaker, will discuss activities undertaken by the UN in partnership with IAG to identify global and regional research priorities (i.e. The Research Agenda on Ageing for the 21st Century project). I will focus on the IAG's Education Initiative and potential future developments in

education and training, particularly with respect to assisting with capacity building of professionals and researchers in the developing world.

A second Presidential Symposium I have convened is entitled "The Role of International NGOs in Advancing the Global Agenda on Ageing". In it, speakers from AARP, Help the Aged UK, the International Federation on Ageing, and IAG (myself) will focus on follow-up of the NGO Forum held in Madrid in parallel with the UN 2nd World Assembly on Ageing. At the Forum, NGOs were vocal in stressing the importance of input from civil society and the key role that NGOs would play in assisting governments to operationalize the goals and objectives in the Madrid International Plan of Action. Three years have now passed since the Madrid meetings. It will be interesting to hear how each of the participating organizations has played that role.

My third Presidential symposium addresses Issue 8 of Priority 1 in the Madrid Plan – Emergency Situations. Entitled "The 2004 Tsunami and Older People – Reaction to a Disaster: Case Studies and Lessons Learned", speakers will address the special issues of older people identified during the relief operations of the 2004 Tsunami disaster. These data will be compared and contrasted with previous natural and man-made disaster situations that have occurred around the world and from which some long term impact data are available.

The fourth symposium, convened by Astrid Stuckelberger, is entitled "The Role of IAG in Mainstreaming Ageing in the United Nations System Today: What Challenges, Strategies and Actions?" Speakers will include myself, Astrid, as well as UN ageing activists from the COMLAT and Asia/Oceania regions.

Support for Millennium Development Goals

The UN has identified 7 Millennium Development Goals (MDGs):

- Eradication of poverty
- Universal education
- Gender equality
- Reduction of child mortality
- Maternal health
- Conquest of AIDS
- Global partnerships for development

While issues of ageing and older persons are not specifically mentioned in the MDGs, in fact they cross-cut all of these goals. To be sure, many older persons live in



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poverty, many are illiterate, many, especially women, suffer from the effects of gender inequality, and earlier insufficient or inappropriate maternal and child care.

Activities undertaken this past year by IAG in support of the MDGs include participating in a joint WHO/UNFPA workshop on Women Ageing and Health: a Gender Perspective held in New York February 28-March 1, 2005. The workshop was part of a joint WHO/UNFPA project that aims to achieve a better understanding of how gender and related determinants of health (culture, socioeconomic, environmental, behavioural and personal factors) impact on women's health and access to care as they age. Specific objectives of the workshop are to produce a report that will contribute to the implementation of the Madrid International Plan of Action on Ageing and the Beijing +10 review process. There will be another workshop convened by this group immediately following the IAG World Congress in Rio that I shall attend.

It should also be noted that in partnership with the International Institute on Ageing UN-Malta, and Help the Aged UK, IAG has been lobbying Commonwealth governments to raise awareness of issues of ageing and HIV/AIDS. A parallel conference on the topic, to take place when the First Ministers meet in Malta in November, 2005 is currently under development.

World Ageing Survey

As reported at the Council meeting in Vienna, in August 2004, I appointed Jean-Marie Robine and Carol Jagger as co-chairs of a working group to examine the feasibility of undertaking a survey that would examine a number of the research questions identified in the UN-IAG Global Research Agenda on Ageing for the 21st Century. Of particular interest would be to compare and contrast a sample of countries with high, medium and low life expectancy at birth (currently the range is from 42 years in parts of Africa to 82 years in Japan). The first meeting of the Technical Committee for what is being called the World Ageing Survey (WAS) although it will not include all countries, was held in Tokyo in February, 2005. A second meeting is scheduled for Rio. Also scheduled for Rio is the first formal meeting of the WAS Steering Committee. Over the last six months a number of organizations involved in cross-national comparisons of health and ageing and thought to be key to the success of the survey (e.g. UNDP, UNFPA, WHO, UNPD, UN Statistics Division) have been approached to be members of the Steering Committee. Responses to date have been enthusiastic and encouraging. Next steps are to secure funding.

Participation in Conferences and Special Events

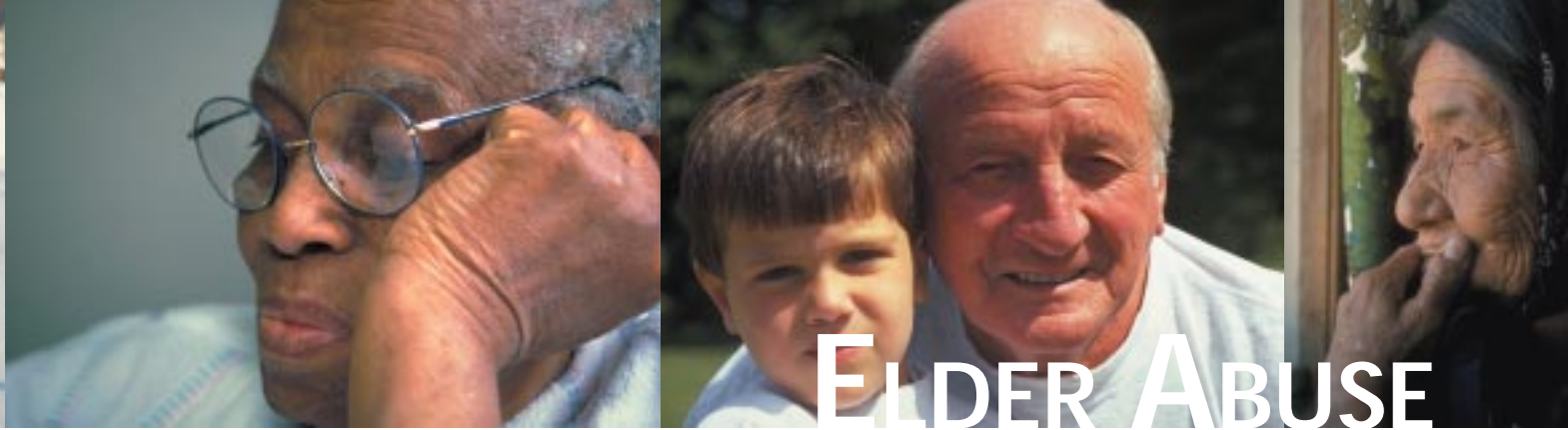
Members of the Executive Committee represented IAG at a number of important conferences organized by our member societies. Examples include the Annual Meeting of the Association of Gerontology (India) which John Gray attended in New Delhi in November, 2004; a special symposium on World Response to Ageing Society convened by the Federation of Korean Gerontological Societies in Seoul, in November in which speakers included Gary Andrews, Renato Maia Guimaraes, Sung-Jae Choi and myself (as well as Mary Gilhooly, then President of the British Gerontology Society); and a Healthy and Active Ageing Symposium, organized by the Indonesia Society of Gerontology which Gary Andrews and myself (and Joseph Troisi - President of the Maltese Gerontology Society) participated in during December, in Jakarta.

Participation in these events gave members of the Executive Committee an opportunity to get to know the leaders and members of IAG's member societies. Through press conferences and meetings with government officials, we aided our member societies in promoting gerontology research and education in their country.

Another major outcome was the signing of an agreement between IAG and the Indonesian Society of Gerontology to organize a special event to be held August 10-13, 2006 in Jakarta - A Collegium Internationale Geronto Pharmacologicum (CIGP). Reflecting a broad approach to medications that may be effective in health care of the elderly, the theme of this congress will be "From traditional through bio-molecular to nano-technology medication". An international advisory committee that will include the IAG Regional chairs, other members of the incoming and outgoing Executive Committees as well as representatives of key UN agencies and other international organizations is currently being developed. More information will be provided in Rio about the CIGP by the Chair of the Organizing Committee, Dr. Tony Setiabuhdi.

Members of the Executive Committee also served on the organizing committee and attended a number of conferences organized by other NGOs. In my case, these included the International Federation on Ageing Congress held in Montreal in October, 2004 and a Nordic Demographers Symposium held in Aalborg, Denmark in April, 2005. A major objective in attending these was to identify common ground and ways that IAG might collaborate and cooperate with these organizations.

continued on page 9...



International Network for the Prevention of Elder Abuse

World Elder Abuse Day Established: June 15, 2006

By ELIZABETH PODNIEKS AND SUSAN B. SOMMERS

The research agenda of INPEA – the International Network for Prevention of Elder Abuse and WorldView on Elder Abuse was launched at New York University in October 2003. The Worldwide Needs Assessment tool has been through many revisions and will soon be ready to administer. International researchers have contributed their expertise to its development.

Interest in the World Elder Abuse Awareness Day on June 15, 2006 continues to grow. A Steering Committee of representatives from IAG, WHO, IFA, AARP, HelpAge International, the Sub-Committee on Elder Abuse of the UN NGO Committee on Ageing and others have been working to ensure that linkages are made with governments, organizations and communities around the world. Everyone is invited to participate in this initiative. A tool kit is being generated for dissemination at the IAG World Congress in Rio in June 2005. In seeking an appropriate logo for the Awareness Day we are conducting a competition among students attending international art schools. A prize will be awarded to the winner and other submissions will be featured in the various materials we hope to produce. For more information, please visit our websites: www.inpea.net and www.sfu.ca/iag.

We congratulate Dr. Lia Daichman who received the Rosalie Wolf Memorial Award at the Family Violence Conference in San Diego, September 2004. A very successful North America Regional Meeting was held in Washington D.C. in conjunction with the Gerontological Society of America (GSA) conference in November 2004. Over fifty members attended and responded enthusiastically to presentations by Dr. Tony Antonucci, University of Michigan, Dr. Ariela Lowenstein, University of Haifa, and Dr. Gloria Gutman, President of IAG and Special Advisor to INPEA.

INPEA is very pleased to announce the establishment of a student membership category. The goal is to encourage students to become part of the elder abuse prevention community. Membership will provide students access to research experts who may serve as mentors and will foster interest in participation in elder abuse activities such as writing for scholarly publications and becoming involved in elder abuse awareness projects. Special sections of the INPEA News-

letter and website will be designated to student membership. A special issue of the Journal of Elder Abuse and Neglect, entitled World Congress on Family Violence: The Prague Papers, in memory of Gerry Bennett, will feature papers that were to be presented by INPEA members in June 2003 in Prague at the World Congress on Family Violence that was cancelled. INPEA representatives - Elizabeth Podnieks (Canada), Jordan Kosberg (United States) and Ariela Lowenstein (Israel) are the guest co-editors.

In Memoriam: Fernando Portocarrero

1954-2005

The Latin American and Caribbean Region (COMLAT) and the IAG Council lost a good friend with the untimely passing of Fernando Portocarrero. Fernando, elected President of the Gerontology and Geriatrics Society of Peru on the 21 of February, 2005 was a founding member who served his Society and Region well for many years as an IAG Council member and as a Director of COMLAT. Fernando graduated as a physician and surgeon in 1981 from the National University of Lima, Peru. In 1981-82 he studied internal medicine at Jackson Memorial Hospital in Miami. He specialized in Geriatrics at the Military Hospital of the Brazilian Army in Rio de Janeiro in 1985-86. In the same city, in 1986-87 he did a post graduate course in internal medicine at the Santa Casa de la Misericordia Hospital. In 1987 he took a course in Social Gerontology in Annecy, France and in 1988 obtained the title of Specialist in Geriatrics from the University Cayetano Heredia in Lima, Peru. He was a university professor; he took part in many courses, seminars and congresses as a speaker; he also was a collaborator of the Program of the Third Age of the Pan American Health Organization, among other institutions dedicated to service to senior citizens. At the time of his passing, he was the Medical Director of the Geriatric Clinic of the Army, an institution that gave him unconditional backing. He will be remembered as an important figure in the development of Gerontology and Geriatrics in his country and Region.



STUDENT ACTIVITIES

Student Section

Canadian Association Awards 20 Student Travel Grants

BY NORAH KEATING

The Canadian Association on Gerontology (CAG) has awarded 20 Legacy Fund grants of \$2000 (CAD) to assist students to attend the 18th IAG World Congress in Rio in June, 2005. The Legacy Trust Fund was endowed by CAG with revenue from the IAG conference held in Vancouver, Canada in 2001, and will continue to support Canadian as well as international students to attend IAG conferences in the future.

Ten awards were to students registered in a Canadian university and 10 to students registered in a non-Canadian university at the time of application. The home university, not citizenship, determined eligibility. In the international competition preference was given to those attending a university in a developing country. Criteria for awards included full-time enrolment in a research-based masters or doctoral degree program or postdoctoral appointment, academic excellence and demonstration that their program and thesis topic are focused on ageing or the aged. Legacy committee members are: Dr. Norah Keating (chair), Dr. Réjean Hébert, Dr. Dorothy Pringle, Ms. Valerie White and Dr. Victor

Marshall.

The 20 students who received awards are listed above. Receipt of the award was contingent on formal notification of acceptance of their abstract by the IAG World Congress Program Committee, and attendance at the meeting.

Student	Country	Degree/Program	University
Soumitra Basu	India	PhD in Anthropology	University of Calcutta
Keith Bellizzi	USA	Postdoctoral Fellow in Cancer Prevention & Control	National Cancer Institute & George Washington University.
Predrag Erceg	Serbia and Montenegro	PhD in Gerontology	University of Belgrade
Challa Geetha	India	PhD in Home Science	Acharya N G Ranga Agricultural University
Madelin Gomez	Cuba	Masters in Population Studies	Havana University
Juan Liu	China	Masters in Gerontology	University of China
Leah Macaden	India	PhD in Nursing	Northumbria University
Lisiane Paskulin	Brazil	PhD in Nursing	University of San Paulo
Nobilla Valentin Yameogo	Burkina Faso	PhD in Medicine	Ouagadougou University
Xiaobo Yuan	China	Masters in Gerontology	University of China
Elizabeth Andersen	Canada	Masters in Nursing	University of Calgary
Claudine Auger	Canada	Masters in Biomedical Sciences, (rehab option)	University of Montreal
Heather A. Cooke	Canada	Masters in Gerontology	Simon Fraser University
Paula Gardner	Canada	PhD in Health & Behavioural Science	University of Toronto
Dawn Gill	Canada	PhD in Epidemiology & Biostatistics	University of Western Ontario
Andrea Gregg	Canada	Masters in Sociology	University of Victoria
Cat Tuong Nguyen	Canada	PhD in Public Health	University of Montreal
Julia Rozanova	Canada	PhD in Sociology	University of Alberta
Kristine Votova	Canada	PhD in Sociology	University of Victoria
Aleksandra Zecevic	Canada	PhD in Kinesiology	University of Western Ontario

www.gerontology2005.org.br





EXECUTIVE COMMITTEE

Secretary General's Report

Representing IAG Around the World

By JOHN GRAY

National Visit

I was privileged to be invited to represent the IAG at the opening ceremonies of the Association of Gerontology (India) Congress held in Delhi, India November 5-7, 2004. Dr A. B. Dey, the President of the Association, chaired the Congress. A highlight of the colourful opening ceremonies was a speech by the Minister of Health for all India in which he discussed issues of older people and made significant program improvement announcements.

I was also privileged to attend the annual meeting of the Association I heard the dynamic planning for the coming year. Dr Dey was thanked for his excellent service as President and as IAG Council member. Prof. M.K. Thakur (e-mail mkt_bhu@yahoo.com) the new President will continue the important involvement of Association of Gerontology (India) with IAG.

By-Laws

Changes to the by-laws made in Vienna in September 2004, but not yet approved by the Belgium Government, included:

(1) Membership in the Association shall be by national gerontology and/or geriatrics organizations (societies) with the exception as provided in Article 7 [up to 49 individual members]. To be eligible for membership an organization (society) must

- a) be national in its scope and multidisciplinary in membership;
- b) have a primary orientation toward research, education and training in gerontology and/or geriatrics;
- c) and be approved by Council. (Thus more than one organization per country can join IAG)

(2) The name of the IAG be changed to the "International Association of Gerontology and Geriatrics". (This must be ratified by Council and then the Belgium Government)

Notice of motion has been sent to Council members for consideration of by-law changes in Rio. In addition, previous votes including the mail vote on the housekeeping by-law changes required by the Belgium government, which was passed, need to be ratified. The Manual of Operating Procedures is being updated in view of changes in by-laws and experience over the past 4 years and will be presented to Council in Rio for approval.

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New Members

The Council, at its Vienna meeting, voted to accept three new member societies. A fourth was accepted by mail ballot in November. New members included:

- The Gerontological Association of Argentina (AGA) which was established in 1974. It has 251 members and the President is Dr Roberto Barca. Email: rebarca@centrodedia.com.
- The Canadian Geriatrics Society which has 203 members, its website is at www.canadiangeriatrics.ca and Email: info@cgs-scg.ca. Dr Chris MacKnight is the President.
- The Spanish Society of Geriatric Medicine (SEMEG) which has 193 members. Its President is Dr Juan Jose Solano Jaurrieta and Email: secretaria@semeg.org
- The Asociacion Mexicana de Gerontologia y Geriatria AMGG. It has 727 members. The President is Dra. Leonor Pedrero Nieto. Email: amggac@prodigy.net.mx

Information about all member societies can be found on the IAG website (www.sfu.ca/iag).





OUR REGIONS

On the World Stage

Asia-Oceania Struggles with December 26 Tsunami

BY SUNG-JAE CHOI, CHAIR, ASIA-OCEANIA REGION

The next venue of the 8th Asia/Oceania Regional Congress of Gerontology is Beijing, China. It will be organized by the Gerontological Society of China and sponsored by the China National Committee on Ageing with the theme of "Health, Participation, Security, and Sharing." The theme will cover biology, medicine, industrial development, sociology, health science, social research and policy, and geriatrics. The scientific sessions will include 12 special topics seminars and round-table meetings. More detailed plans will be reported at the regional council meeting during the Rio Congress.

IAG Council Member for Indonesia Visited Tsunami Disaster Area

During January 2005 Dr. Tony Setiabudhi, an IAG Council member for Indonesia, and his medical school team visited Aceh province, struck by the Tsunami on December 26, 2004. He observed a wide disaster-struck area along the Northwestern coast of Indonesia and visited two places with special support by police aircraft. One was Simeulue, an island located only a few kilometres from the epicenter of the earthquake. This island showed the lowest rate of victims compared to its total area population: only seven including two school children and two older persons from 76,128 inhabitants. This may be due to people's immediate movement toward higher places believing an ancient wisdom that 'if an earthquake would happen one should run directly to the hilly areas'. Dr. Setiabudhi also visited Meulaboh one of the places most severely struck by the tsunami. It was said that 6,200 were buried and still thousands were missing among its population of 178,000. In response to reports that many survivors were suffering from Post Traumatic Stress Disorder, his team brought a Video Compact Disc (VCD) of 'relaxation exercise' which can be disseminated to volunteers who can practice it after a short training course. This VCD was used previously by Dr. Setiabudhi in Holland while treating Concentration Camp Syndrome. A relaxation exercise program was scheduled to begin as soon as the training course was over.

Gerontological Society, Singapore

The main development in 2004 was an approach in January by the Ministry of Community Development, Youth and Sports to Gerontological Society President Henry Lim, to conduct a "Study on the State of Gerontology in Singapore." This research was an opportu-

nity not to be missed as it gave the GS the chance to advocate for the development of education, training and research in the field of Gerontology in Singapore, a rapidly ageing society.

The Vice President of GS, Dr. Kalyani Mehta was chosen to lead a multidisciplinary team, comprised of the President and four other key researchers, that included a geriatrician, a policy expert, academics and practitioners. The final report (189 pages) was accepted by the government in August 2004, and they are now deliberating on the recommendations.

One key recommendation was for establishment of a National Education and Research Institute on Ageing. Other activities of GS in 2004 included a First Annual Seminar. Held in December, the theme was "Caring for the Elderly in a Changing Society." This seminar was well attended (more than 100 participants), indicating that Singaporeans are very keen to gain knowledge on preparation for ageing. The speakers included geriatrician Prof. Ng Tze Pin, academics Professors Victor Goh, Kua Ee Heok, and well-experienced gerontologists Dr. Chow Yeow Leng, Mr. Laurence Wee, and Ms. Diana Koh. The Chairpersons were Mr. Henry Lim and Emeritus Professor Kiang Ai Kim, who is a 90 year-old retired Chancellor of the National University of Singapore! Also noteworthy are two research projects funded by the GS. The first was on Perceptions of Elder Abuse and subsequently published under the banner of GS. The second was on Stress of Home Carers of Elderly with Dementia. Both projects were headed by Dr. Chow Yeow Leng, a Council member of GS. She involved 5 students from the Advanced Nursing Diploma (Gerontology) program in each project. The Society is currently working on establishing a student section and running seminars on financial planning and re-employment of senior Singaporeans.

1st International Centenarian Conference Held in Korea

The Southwestern region of Korea is designated as a longevity belt. One of the counties in the area, Sunchang-Gun, organized the first International Centenarian Conference in October, 2004.

Professor Sang Chul Park introduced Korean longevity and successively Dr. Leonard Poon from Georgia, USA, Drs. Nobuyoshi Hirose, Hiroshi Shimokata, and Yasuyuki Gondo from Japan, and Dr. Gianneta



OUR REGIONS

Murru from Italy presented their respective national studies of centenarians. Drs. Gyung Hae Han, Mee Sook Lee, In Soon Kwon, Jung Je Lee, Sam Ock Park, and Kyung Soo Chun explained the results of Korean centenarian study focused on family relationships, dietary habits and nutritional status, medical characteristics, analysis of regional characteristics, innovational networks of the longevity area, and anthropology, respectively.

Special Symposium on Regional Ecological Factors on Longevity

The Division of Medical Science, Korea Academy of Science and Technology held a special symposium comparing the Southwestern Region, a historic longevity area with Gangwon Province, in the Northeastern region of Korea, where longevity has recently increased rapidly. Drs. Jung Je Lee, Sam Ock Park, Gyung Hae Han, Mee Sook Lee, and In Soon Kwon compared the two regions in terms of ecological characteristics, innovative networks, family system, dietary habits and nutritional status, and medical characteristics. Professor Sang Chul Park proposed a new paradigm, an ideal future plan for longevity community development.

International Conference on Quantitative and Qualitative Perspective of Longevity

This year, for the first time, the The Korean Federation of Science and Technology Societies supported an ageing conference. Organized by the Bioscience and Medicine division, under the title "Quantitative and Qualitative Perspective of Longevity" it was held in Kyeongju one of the oldest historic cities in Korea. The aim of this conference was to foster effective international and interdisciplinary collaboration among leading scientists, and thereby, promote new breakthroughs in the field of ageing research. Starting with Dr. Byung Pal Yu's keynote speech, Drs. Igor B. Robinson, Simon Melov, Jan Vijg, Yousin Suh, Steven K. Juhn, Kiyoshi Hashizume, Bharat Aggarwal, Junji Terao, George Perry, Stephen Spindler, Christiaan Leeuwenburgh and selected Korean scientists met for 3 days of productive discussion.

The 4th Korean-Japan Gerontologists' Joint Meeting

The 2004 Spring Conference of the Korean Society for Gerontology and the 4th Korean-Japan Gerontologist Joint Meeting were held at Hallym University in Chuncheon in June, 2004. This Conference included two special lectures from Dr. Byung Pal Yu and Dr. An Sik Chung and six scientific sessions on Physiology, Oxidative Stress, Genomic Instability & Telomere, Nutritional Intervention, Growth Regulation & Signaling and Neurodegeneration.

continued from page 4...

The agenda was different in the case of the two conferences that I most recently have attended. In these, it was more focused on assisting with national capacity building. Both took place in Turkey. From May 2-8, I participated in the 1st International Care Conference. Held in Istanbul and chaired by Dr. Kemal Aydin, it brought a number of government officials from the Prime Ministry's General Directorate of Social Services and Child Protection Agency and from its Administration on Disabled People together with researchers, practitioners and advocates for ageing persons and persons with disabilities. One important outcome of this conference was the Istanbul Declaration on Active Ageing and Old Age Care. As part of it, conference participants endorsed the call by the World Health Organization, represented by Alex Kalache, and by IAG represented by me, for Turkey to champion 'ageing issues' within the international community. It was felt by the group that Turkey was well suited to play a central role as a champion of population ageing by virtue of its geographic and historic position as a bridge between East and West, rich and poor, the developing and developed world, as well as its culture and traditions.

The second conference, held at Akdeiz University in Antalya, and supported by the Scientific and Technical Research Council of Turkey, was also a first for the country in focusing on social and applied gerontology. Discussions are currently underway concerning ways IAG might assist the conference chair, Dr. Ismail Tufan, in stimulating the establishment of research centres and educational programs in social and applied gerontology within Turkish universities.

Concluding Remarks

As I hope I have conveyed in the above remarks as well as in reports in the four previous issues of the IAG Newsletter produced by the Vancouver Secretariat, this has been an exciting and productive quadrennium for IAG. We have much to feel proud of in terms of accomplishments with respect to the Council, our student program, other aspects of our Education Initiative, our Research Agenda Project and other involvements with the UN. I look forward to assisting with the development of the two recently initiated projects - the World Ageing Survey and the CIGP - and to continuing to foster our UN activities and gerontology component of our Education Initiative. I wish the best to Renato Maia Guimaraes and his team and look forward to working with them over the next four years in my new position of Immediate Past President.



OUR REGIONS

North American Region

Canadian Geriatrics Society joins North American Region

By ROGER McCARTER, CHAIR, NORTH AMERICAN REGION



At the start of 2004 the North American Regional Committee was composed of 3 representatives each from the American Geriatrics Society (AGS), the Gerontological Society of America (GSA) and the Canadian Association on Gerontology (CAG). However this composition has now changed, so as to include a

representative from the Canadian Geriatrics Society (CGS), as outlined below.

There have been three major focuses of committee activity during the past 12 months, as well as several ongoing projects. The primary focus has been on soliciting and judging symposium submissions for presentation at the IAG World Congress in Rio.

A second focus has been on the selection of a site for the 2007 Pan American Congress on Gerontology and Geriatrics, following the highly successful event organized by COMLAT in Argentina in 2003. The appropriate rotation of this event would have placed it in Canada, under CAG direction. However the CAG demurred, following their hosting of the outstanding IAG World Congress in Vancouver, 2001. Other NARC member societies similarly declined to host the event. NARC then solicited bids from northern hemisphere IAG members. At a committee meeting held in San Diego in 2003, members voted to hold the event in Mexico and to appoint Dr. David Espino (AGS representative to NARC) as President of the 2007 Pan American Congress. Dr. Felix Martinez-Arronte, of the Sociedad es Sociedad de Geriatria y Gerontologia de Mexico, will serve as Congress Vice-President and will Chair the Organizing Committee. He will also act as liaison between the Sociedad and NARC. The Organizing Committee plans to include representatives from COMLAT, NARC and the host society, in order to attract participants from throughout the Americas. Further plans for this event will be presented at the World Congress in Rio.

The third focus of NARC has been on the admission of the Canadian Geriatrics Society (CGS) to IAG membership. This occurred at the IAG Council meeting in Vienna, 2004. NARC enthusiastically welcomed the CGS as a new member at the NARC meeting in Wash-

ington, November 2004. Discussions between the CGS President, Dr. Chris MacKnight, and NARC Chair, Dr. Roger McCarter indicated that CGS was not interested in hosting the 2007 Pan American Congress. Dr. MacKnight also suggested that, pending revision of IAG and NARC voting procedures, the CGS might be allocated one of the current 3 CAG representative positions. This suggestion was accepted unanimously by NARC members at the meeting in November, 2004. Thus, until IAG and NARC voting procedures are revised, CGS will have one voting representative and CAG two voting representatives on NARC.

Ongoing activities of NARC are centered on a re-evaluation of the goals of the Pan American Congress and on revision of voting representation of NARC member societies. At the November 2004 meeting members voted unanimously that "chairs of NARC and COMLAT... review the purpose, role and value of the Pan American Congress to members in both Regions..." Accordingly, Drs. Marin and McCarter have ongoing discussions regarding the expectations of IAG member societies in both regions for this Congress. The difficult issue of voting privileges is also under discussion: At the IAG Council Meeting in Vienna (2004), Council members charged the IAG Executive Committee to re-evaluate member voting rights and to present proposals at the World Congress in Rio. The issue centres around whether or not societies with large memberships (say 5,000 members) should have larger or equal numbers of voting (Council) representatives as societies with smaller numbers of members (say 500 members). The IAG Council Meeting was unable to resolve this issue and a similar dilemma faces NARC. At the meeting in Washington (November 2004), NARC members expressed the view that representation on the Committee should be consistent with procedures adopted by the IAG, whatever these may be. Because of this, members voted to delay revision of NARC Bylaws, pending the decision of IAG Council on voting guidelines.

In general, these are times of growth and involvement of NARC members in the affairs of world-wide ageing. There has been good participation of representatives from all member societies in committee activities. We have also enjoyed the participation of COMLAT President, Dr. Pedro Paulo Marin and IAG President, Dr. Gloria Gutman, in our deliberations.



UNITED NATIONS

Statement to the 61st Session of the Commission on Human Rights

Ageing and the Rights of Older Persons

Delivered April 13, 2004 at the United Nations in Geneva by Astrid Stuckelberger, IAG representative to DESA-Geneva; Chair, Committee on Ageing, Geneva; Co-chair, Working Group on Health and Human Rights, Committee on the Status of Women; and representative of the Society for the Psychological Study of Social Issues.

This statement was endorsed by the following 20 non-governmental organizations in consultative status with ECOSOC:

International Association of Gerontology, Society for Psychological Study of Social Issues, International Council of Nurses, International Association for Counselling, Pan Pacific and South East Asia Women's Association International, Worldwide Organization for Women, World Movement of Mothers, International Council of Women, International Council of Jewish Women, World Union for Progressive Judaism, World Union of Catholic Women's Organizations, World Federation of Methodist Women, Women's World Summit Federation, The Federation of American Women's Club's Overseas, Institute for Planetary Synthesis, International Inner Wheel, Brahma Kumaris Work Spiritual University, International and Interreligious Federation for World Peace, International Organization for the Right to Education and Freedom of Education* and International Federation of University Women.

We call the attention of the Commission to the urgent need to recognize the rights of older persons and mainstream ageing issues in the agenda of the Commission.

UN Secretary-General Kofi Annan referred to population ageing as a "silent revolution" and stressed the importance of older persons:

"The world is undergoing an unprecedented demographic transformation. Between now and 2050, the number of older persons will rise from about 600 million to almost two billion. The increase will be greatest in developing countries [...]... where numbers are expected to multiply by four. [...] In less than 50 years from now, for the first time in history, the world will contain more people over 60 years old than under 15 [...]."

Therefore older persons are no longer a minority, they are becoming a growing majority!..Despite these facts and the progress in some UN documents, ageing is still absent on the agenda and priorities of the UN and of the Commission on Human Rights.

We call your attention to the following developments:

Beginning with the Universal Declaration of Human Rights, and encompassing the numerous International Instruments there are many references to the Rights of all. But not until the Declaration on Social Progress and Development in 1969 is there mention specifically of old age (in Article 11).

It took until 1982 for the UN to adopt the 1st International Plan of Action on Ageing in Vienna, and until 1991 for the General Assembly to promulgate the UN

Principles for Older Persons (Resolution 46/91). We saw then in 1995 the Committee on Economic, Social and Cultural Rights finally adopting for the first time the General comment no 6 on the Economic, Social and Cultural Rights of Older Persons

Only a few steps were taken since:

- in 1999, by endorsing the Conceptual Framework during the International Year of Older Persons, (Doc A/50/114)4,
- in 2002 the 2nd World Assembly on Ageing in Madrid (WAA) adopted unanimously a Political Declaration and an International Strategic Plan of Action on Ageing.

Both of those documents include clear objectives and actions to be taken:

- to ensure the Rights of older persons,
- to protect older persons from "neglect, abuse and violence" in all situations addressed by the UN (paragraph 07 and seq.) and,
- to recognize "their role and contribution to society".

For more history about IAG and its work:

 www.sfu.ca/iag



However, It is obvious that these precedents are not enough to give older persons their Rights as well as recognition of their contribution to society.

It is clear that older persons are unrecognized and increasingly excluded and discriminated; just to cite a few examples:

(i) HIV/AIDS pandemic: the contribution of older persons is vital today, their right to care for orphaned grandchildren and children in general – especially older women - is an unestimated contribution benefiting the socio-economic development as well as the human reconstruction of society, restoring an identity, transmitting higher values and life skills.

(ii) Migration: younger generations migrating from developing countries without solid welfare systems leave behind them older women and men with no social, economic and family care support, thus increasing their vulnerability, isolation, poverty, discrimination and lack of health care. On the other hand, serious discussions are going on to delocalize and rationalize older age health care solely for economic gain.

(iii) The Information Society: exponential technological development increases the generational di-

vide: in the 4 to 5 generation society we live in, the 2 older generations are too often excluded and affected by the digital divide, making them “digital homeless”. Older persons are the first victims of a development framework adapted primarily to younger generations and productivity imperatives; In addition, other situations remain unaddressed: older disabled persons, older migrants, older working poor, older refugees or displaced persons, older victims of conflict, war or disasters, older prisoners, older tortured and abused persons, etc., but also key issues such as gender equality in old age, access to health, right to dignity, respect of the cultural and spiritual life until the end of life...and after all, when you think about it, each one of us is concerned or will be one day concerned...

In all issues, the Right to Development must carefully take into account old age and the generation-specificities of development over the life span until the end of life.

What is missing is the recognition that older person have Rights, but also need to be empowered to carry out their important role and contribution to cohesion and peace in society and nations worldwide.

Therefore, we call upon the Commission on Human Rights :

- to appoint a special Rapporteur on the Rights of Older Persons,
- to mainstream ageing in all issues addressed, and
- to specifically mention Older persons in the Agenda of the next Human Rights Commission.

IAG Representatives to NGO Section, UN Department of Economic and Social Affairs (DESA) and Department of Public Information (DPI), 2005		
DESA	New York	Gemma Beckley, DSW
		Juanita Carrillo, PhD
		James Collins, MPA
		Cynthia Cannon Poindexter, MSW, PhD
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DESA	Geneva	Astrid Stüchelberger, PhD
DESA	Vienna	Wolfgang Popp, MD
		Peter Fasching, MD
DPI	New York	Marjorie Cantor, PhD
		Nora O'Brien, MA
Special Advisor	New York	Rosa Perla Resnick, PhD, DSW