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The year 2013 was one of unique opportunities for the International Federation on Ageing (IFA) to connect and strengthen its relationships and networks with experts and expertise from various sectors and disciplines, in an effort to influence and shape effective age-related policies on a global scale. A shining example of IFA’s reach was the International Istanbul Initiative on Ageing (IIIA), one of the most innovative and landmark events in its forty year history.

As the first of its kind, the IIIA advanced the discussion of population ageing within the emerging regions of the Middle East, Northern Africa, and Eastern Europe; regions recognized for their tremendous opportunities for growth, sustainability, and prosperity. Taking place in Istanbul - the megacity that connects the East and the West, the North and the South, a city that has embraced culture and life – this is the start of something truly remarkable for IFA and its partners, including TURYAK the co-host of IIIA.

It is certain that population ageing – the most predictable of global challenges – will have an enduring and profound impact on government agendas, the sustainability of the global economy, and most of all, the quality of life of older adults. In the last decade, radical new thinking about global issues such as globalization, urbanization, the market economy, labor force and migration, and consequences of demographic changes has emerged.

The consequences of unprecedented demographic changes, which have never been experienced before, demand comprehensive responses – shifting the focus away from the challenges of an ageing society to the measurable benefits of an ageing world. To achieve social and economic cohesion and sustainable development, proactive policies and programs promoting intergenerational solidarity will be a “growth enabler” to any region – resulting in greater prosperity and growth. The ageing population is a knowledge repository and a resource for families and communities that continuously contributes to the economy through the paid and unpaid workforce.

The “one-size fits all” policy development is no longer valid globally. A transformative conversation on the way we conduct business in the field of ageing is required urgently – to discard the stereotypes, to positively discriminate, and to reinvent what it means to age. In the Middle East, Northern Africa and Eastern Europe where family is very much central to the community and the nations’ values, the potential positive as well as negative consequences of demographic changes have not been fully realized until now.

This issue of Global Ageing pays tribute first and foremost to Mr. Mete Bora, President and Founder of TURYAK and IFA Directors whose inspiration and leadership created the opportunity for the first International Istanbul Initiative on Ageing. This proactive endeavor highlighted the synergies between youth and the ageing population, and worked to recognize the extensive social capital older people achieve through intergenerational solidarity. IIIA was a catalyst, bringing together truly remarkable human beings and it is fitting to open this issue with the speech from the then Secretary General, Professor Ekmeleddin Ihsanoğlu, of the Organization of Islamic Cooperation.

Dr. Sandra P. Hirst
“Today’s 20-35 age group has the chance of living to 100 years through the advancements of technology; and those being born today will be able to live to 120 years.”

Opening Message from TÜRYAK

Global Ageing is prepared from the perspective that there never was a time in human history when mankind had to design and plan for longer lives – until now.

The 21st century will be known as an era of ageing. Today’s 20-35 age group has the chance of living to 100 years through the advancements of technology; and those being born today will be able to live to 120 years.

 Longer lives and older people yield greater value and new benefits to our societies. Older adults need love, affection and certainly deserve to be respected senior citizens of the world.

With the help of the Information Age, there is no reason why this century should not be known as the era of building a new world order; that includes intergenerational solidarity where older people remain active for longer periods than currently.

With this vision, the “International Istanbul Initiative on Ageing” and “EXPO 50+” in partnership with the IFA (International Federation on Ageing) and TÜRYAK (Turkey Seniors Council Association) took place 4-6 October 2013.

The conference was held in Istanbul, with more than 400 delegates from 52 countries, covering mainly the Middle East, Africa, Eastern Europe, and Middle Asian regions. Joined by an international gathering of countries, numerous NGOs from around the world, and industry – the conference encompassed the widest spectrum of expertise and knowledge on ageing ever to have assembled in the region.

Over a hundred papers on various policies, programs, and models on ageing were submitted to the conference. The first Best Papers Competition and the Age-Friendly Innovation Competition were held to recognize the important work and innovations from around the world.

A further highlight was the announcement of the Istanbul International Center of Excellence on Ageing (ISEA), a joint project of IFA and TÜRYAK, anticipated to be launched in a year. The Center will focus on establishing mobility of knowledge and experience on ageing globally. It will work in collaboration with the United Nations and its agencies, the World Health Organization (WHO), governments, non-governmental organizations, age-friendly cities and communities, leading universities, innovators, and industries serving older adults.

The conference opening speech of Professor Ekmeleddin İhsanoğlu, the then Secretary-General of the Organization of Islamic Cooperation (OIC), on the importance of addressing the global issues of ageing, was a great indication of the commitment in the region.

The delegates of the International Istanbul Initiative on Ageing called upon governments, non-governmental organizations, industry, private and volunteer sectors to join forces to advocate for improved quality of life, by an attitude of inclusion, for older adults, and called upon older adults to raise their voices to enable all to know their valuable views.

Dr. Ilhan Dülger
Board Member of TÜRYAK
Let me, first and foremost, thank the organizers of this Congress for inviting me to address the panel on the very topical issue of intergenerational solidarity. For us in the Organization of Islamic Cooperation (OIC), the question of forging solidarity among the one billion people living in our 57 member states is at the core of the mandate of the OIC. However, a new approach to the concept of solidarity has since emerged with the adoption of the Ten Year Programme of Action at the 3rd Extraordinary Summit held in Makkah, Saudi Arabia in 2005.

Solidarity is given an all-embracing connotation to describe the existing cultural affinities among the peoples of the OIC and the need to translate this cultural solidarity into a more pragmatic interaction at the socio-economic and political levels. Consequently, the slogan of “Solidarity in Action” has become a common phrase within the OIC. This is in view of the need to mobilize and direct the enormous developmental potentials in OIC member states towards ensuring the development of active socio-economic relations among OIC member

Opening speech at the International Istanbul Initiative on Ageing

By Professor Ekmeleddin Ihsanoğlu
states. Plus the promotion of well-being of its populations, with special focus on the many vulnerable groups, including older people, youth and children. A number of special issues have to be addressed with respect to these groups. In addition to the need to increase their economic well-being, an important concern is to protect their status in society. Older people should not be subject to neglect or negative discrimination because they are no longer economically active. Ideally, the strength of this sincere concern of ours for older people must lead us to consider developing social policies specially geared to providing employment for older people in our countries. Such policies can enable us to benefit from the knowledge and experience older people have gained working in different sectors, thus avoiding duplications wherever possible. Indeed, constant effort must be made to develop inclusive social policies. The OIC Member States have generally achieved steady progress in improving their social security systems over the past decades, taking into account internationally set norms. Health care after retirement is covered in most national systems. However, issues needing to be dealt with regards to older people reach far beyond this. Issues concerning this group must be dealt with in the framework of a separate, composite and inter-sectorial policy.

The tradition of permanent family ties and emphasis given to intergenerational solidarity characteristic to Muslim society can be of support in concretising this policy. Efforts must be made to preserve these values so that they remain effective among coming generations as well. The values of family attachment and respect for older people are shared by all faiths of the world; they show humankind the right behaviour towards parents and older people. I will quote from the Holy Qur’an: “And your Lord has commanded that you shall not worship (any) but Him, and that you be kind to your parents. If either or both of them reach old age with you, say not to them (so much as) uff! nor repel them, and speak to them a generous word. And make yourself submissively gentle to them with compassion, and say: O my Lord! Have mercy on them, as they did cherish and rear me (when I was) little.” (Qur’an:17/23-24).

Various international and regional organizations are addressing issues relating to older people in the context of their programs aiming to contribute to raising the well-being of people in their member countries. As to the OIC, development of the well-being of our people in all areas is the raison d’être of this inter-governmental organization. A paradigm shift has been established to ensure that issues of poverty alleviation, human capital development and social protection remain prominent in the realm of the OIC contemporary agenda.

Finally, I wish to reiterate my appreciation to the organizers of this event, IFA/Turyak Istanbul International Initiative on Ageing Congress, while expressing the readiness of OIC to continue to identify with their laudable initiatives towards ensuring that we bequeath to the coming generations a society that is socially cohesive, politically stable and economically prosperous.

For a full transcript of Professor Ekmeleddin İhsanoğlu’s opening speech please visit www.ifa-fiv.org.

Professor Ekmeleddin İhsanoğlu
Former Secretary General
Organization of Islamic Cooperation
The International Istanbul Initiative on Ageing (IIIA) was a milestone event – the first of its kind to advance the discussion of population ageing in the regions of the Middle East, Northern Africa, and Eastern Europe.

IIIA called for the submission of full papers from delegates around the world to inform and contribute to the congress. The highest scoring paper would be awarded and recognized. In addition, a unique component of the conference was the “Age-Friendly Innovation Competition” which was created to recognize the Best Existing Age-Friendly Initiative and the Best Future Vision of an Age-Friendly City or Community.

The International Federation on Ageing and TURYAK Seniors Council Association would like to pay tribute to the winner of the best full paper and the Top applications to the Age-Friendly Innovation Competition.

Moreover, we would like to recognize and sincerely express our appreciation to our International Jury and Age-Friendly Innovation Competition Jury. Each member played a significant role in ensuring a fair and representative evaluation of all applications. Their contribution and commitment was invaluable to the success of this conference.
International Jury Best Paper Competition

Dr. Abdulrzak Abyad  
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Abyad Medical Center and Middle East Longevity Institute  
Lebanon

Dr. Emine Özmete  
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Center on Ageing Studies  
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Dr. Ilhan Dülger  
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Israel

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International Consultant  
Austria

Age-Friendly Innovation Competition Jury

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Mr. Gregor Rae  
Founder and CEO  
BusinessLab and ActiveAge  
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Mr. Murat Tabanlioğlu  
Founder and Architect  
Tabanlioğlu Architects  
Turkey

Bosphorus Bridge, Istanbul, Turkey.
A construct, measurement and performance model to increase client focus in nursing homes

Introduction

The motivation for this study is the major concerns about the quality of care in residential care homes for older people throughout the Western world. This is an important subject in a world that is confronted with ageing societies that leads to an increase in the need for nursing home care. We live in an ageing world. Worldwide, societies are ageing and the proportion of people over 60 in the world population will increase from 10.8% in 2009 to 21.9% in 2050 (United Nations, 2009). The increase in developed countries is less, but the proportion of people over 60 in these countries is much higher: 21.4% in 2009 to 32.6% in 2050. These ageing societies will be accompanied by an increase in the need for long term care. The aim of this study is to provide a validated service quality
construct for nursing-home managers to improve resident focus and to increase resident and family satisfaction with the delivery of services in nursing homes. The latter is under discussion in many countries. So the objectives are:

- To establish the dimensionality and develop scale items for service quality in nursing homes.
- To explore disconfirmation as the foundation for perceived service quality.
- To understand the role of perceived service quality as a predictor for resident satisfaction.

With the results we were able to construct an instrument that nursing-home managers can use to measure the level of client focus in their nursing homes and give them insights into how they can improve the level of client focus and thus improve their service quality.

The quality construct
The quality construct is based on the SERVQUAL model (Zeithaml et al., 1993, Parasuraman et al., 1988). Every conceptualization of service quality and its measurement scale in research should be validated in each service business sector (Brady and Cronin, 2001). This is not always properly done, and though research in different sectors has led to modifications in measurement tools, this should be more in-depth, which is done in this study. The debates about disconfirmation versus attitude-based models, relevance of quality dimensions, and qualitative vs. quantitative research methods should be considered for each service sector. But despite all the debates and developments, the SERVQUAL construct is still the most influential and recognised service quality conceptualization.

Research design
This research comprised qualitative and quantitative phases. In phase 1, the SERVQUAL construct was explored through 13 face-to-face semi-structured, in-depth interviews based on the critical incident technique with nursing-home residents with physical limitations, and family members of residents with dementia. The results from the interviews were used to construct a service quality scale for implementation in phase 2, a survey of residents, and family members (n=263) of residents with dementia.

Results
The nature of service quality in nursing homes
From the interviews, we constructed a conceptualization of services quality. Expectations were inappropriate in this context because of the negative nature of going to a nursing home. The different paths that lead to a nursing home (from home or elsewhere), not knowing what a nursing home is, and sometimes the speed of moving from home into a nursing home, make it difficult to develop expectations. Residents and family members focus instead on what is important to them in their daily life. Therefore, importance is a better input than expectations in the nursing home context.

Though the five SERVQUAL dimensions are present, they are not clearly differentiated. The process of the decision to move to the nursing home and the way the operations of the nursing home are organized (system orientation) emerged as important aspects of the experience. Satisfaction is a multi-complex concept that is very difficult to measure.

Measuring service quality
The importance and experience of each variable was measured. The importance variables revealed a six factor structure: respect and empathy; system orientation; responsiveness and attention; professionalism and safety; inclusion; and tangibles. With regard to experience, four factors were identified: responsiveness and hospitality; courtesy and personal approach; inclusion and care access; and system orientation. These are stronger than the importance factors and demonstrate the importance of experience in service evaluation. Different issues are important to clients pre- and post-residence.

“Worldwide, societies are ageing and the proportion of people over 60 in the world population will increase from 10.8% in 2009 to 21.9% in 2050 (United Nations, 2009).”
Predicting service quality and satisfaction
Regression analysis showed no relationship between importance factors and perceived service quality. Experience factors however, are related to quality evaluation and two experience factors, “responsiveness and hospitality” and “courtesy and personal approach” have the ability to predict perceived service quality.

In the relationship between perceived service quality and resident satisfaction, the variable perceived quality is strongly associated with overall satisfaction.

Conclusions
The SERVQUAL dimensions, though a good starting point, require modification to produce a robust construct for the Nursing Home sector. The additional dimension, “system orientation” concerns the level of choice in everyday aspects of life in a nursing home. Interviewees and respondents feel that they experience a system in which service delivery is planned for the benefit of the organization and not primarily for the clients’ preferences. We have identified different factors in importance and experience. Interaction between resident and staff are more important in service delivery in a nursing home than tangible aspects such as privacy, choice of food and drink, and the neat appearance of staff.

During experience, variables that represent interactional aspects of the service delivery are the strongest factors. This research gives a clear understanding for managers about why people choose their service and thus the elements of their offering that they should emphasize. We have confirmed that perceived service quality has a predictive power to satisfaction; and outcomes such as meeting the individual needs of the resident play a role in resident satisfaction next to the perception of output, the service delivery.

This study is important for the management of nursing homes with the ultimate goal of improving their service quality and satisfaction of their residents. These findings give an indication for a marketing strategy for nursing homes. The marketing strategy must not focus on the services that they deliver, but on the aspects that are important in enhancing the quality of life of their residents. With worldwide ageing societies and the current negative image of nursing homes, the findings of this study contribute towards a shift to a more client-oriented situation and, therefore, a more positive image of the nursing home sector in the future.

The results of this study were the foundation for an instrument that is currently implemented in several care organizations in The Netherlands. The study will be extended to other countries.

A free copy of the summary of this study can be obtained by sending an email to: freek.lapre@movinex.nl. The IFA award-winning full paper is available on the IFA website.

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REFERENCES
For the first time since the Age-Friendly Cities initiatives were formed by the World Health Organization (WHO) in 2006, the International Federation on Ageing (IFA) and TURYAK Seniors Council Association awarded prizes of USD$20,000 to two exceptional projects showcasing the Best Age-Friendly Cities project and the Best Future Vision for an Age-Friendly City or Community. The winner of the Best Existing Age-Friendly Initiative category was Age-Friendly New York, accepted by Dr. Ruth Finkelstein of the New York Academy of Medicine.
The winner of the Best Future Vision of an Age-Friendly City or Community category was the DIVANET Tri-City Project of Volgograd (Russia), Izmir (Turkey) and Dijon (France) and was accepted by Ms. Elisabeth Biot, Deputy Mayor of Dijon and Mr. Ali Muzaffer Tuncag from the Izmir Metropolitan Municipality.

**Competition finalists:**

- **Hong Kong Housing Society Elderly Resource Centre (Hong Kong)**
- **Quimper (France)**
- **Sharon Mackenzie Educational and Intergenerational Consulting (Canada)**
- **Human Endeavour (Canada)**
- **Kilkenny Age-Friendly County (Ireland)**
- **City of London (Canada)**
- **Vietnam Public Health Association (Vietnam)**
- **Los Altos, California (United States)**

Congratulations to all those who participated. To view the videos showcasing the top finalists’ age-friendly projects, click on their names above.

For more information, please visit the IFA website: [www.ifa-fiv.org](http://www.ifa-fiv.org)
Calling for Abstracts and Posters

The theme of the IFA’s 12th Global Conference on Ageing is Health, Security, and Community. Join us in building a world that will facilitate the growth of a country, engage members of society, bring harmony amongst generations, and ultimately, improve the quality of life for all.

We are calling for abstracts and posters from individuals around the world to cover the themes of Health, Security and Community.

Conference Speakers:

Prof. Muhammad Yunus
Chairman, Yunus Centre, Dhaka, Bangladesh
Founder, Grameen Bank
Nobel Laureate, 2006

Dr. Alexandre Kalache
President, International Longevity Centre-Brazil
Founder, WHO Active Ageing Framework

Dr. Kiran Bedi
Founder, India Vision Foundation
India’s first/highest ranking female officer

Ms. Chetna Gala Sinha
Founder, Mann Deshi Mahila Group World Fellow, Yale University

Dr. John Beard
Director, Ageing and Life Course Programme, World Health Organization

Dr. Lieve Fransen
Director, Europe 2020: Social Policies in Directorate General Employment, Social Affairs and Inclusion, European Commission

Ms. Kasia Jurczak
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Dr. Yves Joanette
Scientific Director, Canadian Institute of Health Research
Institute of Ageing

Mr. Tom Wright
Group Chief Executive, Age UK

The 12th Global Conference on Ageing will feature:

Plenary Panel 1: ‘Innovations in Care’
Plenary Panel 2: ‘Life Course Approach to Immunization’
Plenary Panel 3: ‘Social Protection and Security’
Plenary Panel 4: ‘Women and Ageing’

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Akita City is known to have a faster growing older population than other cities in Japan. 1 in every 4 persons is aged 65 or over. With the changing demographics and increased citizens’ expectations, local authorities have recognized the need to address issues to better include and serve older adults. In October 2009, the International Federation on Ageing (IFA) and Friends of IFA (FOIFA) Japan organized the International Forum on Ageing-in-Place and Age-Friendly Cities in Akita City. As a follow-up to the Forum, Akita City decided to adopt and launch the WHO idea of ‘age-friendly cities’ as a core component of a positive approach to the challenges of population ageing. To achieve the goal of becoming more ‘age-friendly’, the local government prepared a 5-year plan and engaged the city’s agencies, community groups, NGOs and the business sector to better include and serve older adults in all the 8 domains as outlined in the WHO guidelines on ‘age-friendly cities’. 
Implementing the Age-Friendly Plan
Before adopting the WHO ‘age-friendly’ initiative, Akita City made improvements through the promotion of a policy based on ‘Barrier Free’ where ‘age-friendly’ features are visible. However, with help from the IFA, the city has conducted assessments over the past 3 years in order to take steps for further improvements where necessary.

Some areas (especially in the city center) now have what is considered user-friendly outdoor spaces and buildings. Pedestrian walking areas have been widened, without bumps, and with Braille inducement blocks. The city has also increased the number of public rest spots. Busy areas with schools, shops and public offices have heated sidewalks to enable all persons to walk in safety and comfort during winter. Automated doors, ramps, handrails, elevators and escalators are continuously being installed in public areas and buildings to facilitate access to elevated and underground areas. Improved guide displays, traffic signs that are visible with understandable guidance and restrictions, have also been part of the city’s development process.

In response to improving the transport needs of senior citizens, Akita City introduced a service called the ‘one-coin’ bus as of October 2011. At the start, the service was available to people aged 70 and over where, with ‘one-coin’ (100 Yen = 1 EURO), they could use the bus for a single trip within the city. In October 2013, the ‘one-coin’ bus policy was revised with the age criterion changed to 68 years and over. According to the city administration, this approach has seen an increase in the number of city-bus users among senior citizens.

Furthermore, since the 5-year plan was introduced, the level of awareness of the ‘age-friendly’ initiative has increased among residents in the city. As a positive sign, a series of working groups on ‘age-friendly’ have been created such as the Akita Action Plan Committee, Akita Action Plan Working Groups and Akita Citizens Association for Age-Friendly Cities (ACAAC). The ACAAC group organizes activities intended to engage people and encourage their participation in the city’s ‘age-friendly’ work. One such activity is called “walk in town and talk” where members of the ‘age-friendly’ association walk around the city visiting neighborhoods, shrines and inviting people to join them. The purpose of the walk is to get people to share their opinions on the nature of Akita City’s age-friendliness and make proposals for improvement. To promote the activities, the group has also created slogans (translated from Japanese) like “akita handsome grandfather” and “akita beautiful grandmother”. The City Office has also published a brochure (distributed free of charge) on ‘age-friendly’, to facilitate the understanding of the ‘age-friendly’ features in the city, acknowledge and make use of them.

“The plan is to help the city evaluate the level of progress on its ‘age-friendly’ work, as well as to understand what future steps are required to improve on its age-friendliness.”
Another example demonstrating the on-going ‘age-friendly’ work in Akita City is a project called “Kizuna (bonding) System”. The project, supported by the Ministry of Internal Affairs, is being coordinated by Akita City Office, Friends of IFA (FOIFA) Japan, four business corporations and other organizations. “Kizuna (bonding) System” works with the use of an iPad with special applications to permit users to have direct access to a concierge center (24 hours a day) if and when they require support services such as shopping, healthcare consultations, access to taxi services and/or community support with daily life. The iPad also displays information about the city and activities by way of promoting social participation and inclusion. Introduced for the first time in November 2013, “Kizuna (bonding) System” is currently being tested in Akita City with more than 200 iPads distributed to senior citizens free of charge. It is hoped that the “Kizuna (bonding) System” can in many ways assist older persons, and contribute to their independence and participation in the ‘age-friendly’ Akita City. Although many users of the services have expressed gratitude and satisfaction with the initiative, it is difficult at this time to attach a numeric value to the project that offers an objective evaluation.

Since Akita City engaged in development work on becoming more ‘age-friendly’, there have certainly been improvements in areas such as roads, buildings, public places, participation and inclusion. However, improvements have only been happening in the city center. Senior citizens are still not able to enjoy an active lifestyle due to the fact that the city has not been able to meet many needs in other areas. It is hoped that Akita City’s 5-year plan in becoming more ‘age-friendly’ will continue and expand to other parts of the city where the environment, facilities, services and products will be designed so that they can be applicable to people of all ages.

"Furthermore, since the 5-year plan was introduced, the level of awareness on the ‘age-friendly’ initiative has increased among residents in the city.”
IFA has been accredited to the United Nations via the Economic and Social Council (ECOSOC) and its Committee on NGOs since 1995. This enables IFA to have its credentialed appointees representing the organization in various programs of the United Nations (UN) as well as in the NGO (Non-Governmental Organizations) community, representing Civil Society. Through the accreditation to ECOSOC the IFA is recognized by and represented in another branch of the UN, the Department of Public Information (DPI).

IFA’s prominent presence and ability to advance international efforts is largely due to dedicated UN Representatives who have undertaken honorary duties for over two decades.

IFA at the United Nations in New York City, United States

By Ms. Helen Hamlin
Our Work
The IFA representatives in New York are active members of the NGO Committee on Ageing (CoA), comprising over 70 members. The mission of the Committee is to first and foremost raise awareness of the challenges, as well as the opportunities of global ageing; second to advocate within the United Nations to further integrate ageing in UN policies and programs; and finally to encourage Member States to recognize the needs of older people in social and economic policy considerations.

Representatives on behalf of the IFA attend various UN meetings, intervene and present statements on behalf of the organization. Visits to the Member States’ Missions to the UN are undertaken to further promote our goals within the framework of the work of the UN.

Recent and critical work within the United Nation’s system has been focused on the protection of the rights of older people through supporting the endeavors of UN DESA and the UN Open-ended Working Group on Ageing. A second encompassing initiative has been with the Post-2015 Development Agenda, sponsored by the Commission on Sustainable Development. This initiative is to create an agenda for UN collaboration to follow the Millennium Development Goals (MDGs) of 2000-2015.

Due to the absence of any mention of older persons in the MDGs, civil society is striving for language in the Post-2015 Development Agenda to be inclusive of people of all ages, including older people.

The work at the United Nations, both with Member States and the various Focal Points - Ageing, Family, Youth, Disability and the NGO Committee on Ageing itself – is busy, absorbing, frustrating and utterly worthwhile – every victory, no matter how small, is celebrated!

More information is available via our headquarters.

Ms. Helen R. Hamlin
Main Representative, since 1992 - Former Social Work Executive in community agencies, Washington, D.C. and NYC
Ms. Helen R. Hamlin’s leadership of the IFA team at the UN in New York spans more than two decades. She has been a member of, and chaired, numerous committees and sub-committees, including the NGO Committee on Ageing; the Sub-Committee on Intergenerational Relationships; the Task Force on Post-2015 Development Agenda Subcommittee; the NGO International Planning Committee for the Second World Assembly on Ageing, Madrid, April 2002; the ECE Task Force on Ageing; the Committee on the Family; and the Committee on Mental Health.

Additional roles include member of SCOW, the Sub-Committee on Older Women; active in the Sub-Committee on Elder Abuse; and chaired and co-chaired several International Day of Older Persons events; as well as former Chair, NGO Committee on Ageing (CoA) from 1997-2003.

Ms. Mary J. Mayer
Since 1994 - Former Deputy Commissioner, New York City Dept. for the Aging
In the NGO Committee on Ageing, (CoA), Ms. Mayer is the Chair of the By-Laws Committee, attends Executive Committee and Program Committee meetings and is also member of the NGO Committee for Social Development, working in its sub-committee on Poverty.

Mary is a strong contributor to the Civil Society Forum, which annually preceded the sessions of the UN Commission for Social Development, is interested and involved in elder abuse issues and collaborated in the publication of a booklet on Older Persons and Disability (2011) by the CoA in cooperation with the UN Focal Point on Disability.

Ms. Mayer has co-chaired an International Day of Older Persons event, which was sponsored by the CoA in cooperation with the UN Focal Point on Ageing.

Ms. Valerie Levy
Since 1996 – Former Director for Minority Affairs, NYC Dept. for the Aging: member-at-large of CoA Executive Committee
Ms. Levy represents the IFA in the NGO Committee for Human Rights and currently serves as Co-Chair of the NGO sub-committee on the Post-2015 Agenda. Through her involvement and interest in the rights of older people, Valerie has attended meetings of the UN Human Rights Commission in Geneva and has been a strong contributor to the development of the International Day of Older Persons as chair and member of the committee.

Ms. Cynthia Stuen
Since 2013 - Former Vice President and Program Director, Lighthouse International
Ms. Stuen represents the IFA on the NGO Committee on the Status of Women whose mission is to “advocate for gender architecture reform at the UN, women’s rights and the advancement of women and girls worldwide.” Cynthia is a member of SCOW (Sub-Committee on Older Women) and on the NGO Sub-Committee on the Post-2015 Agenda.
The United Nations Office in Vienna (UNOV) is one of the four headquarters of the UN, along with New York, Geneva and Nairobi, and is housed at the Vienna International Centre (VIC), also known as UNO City. Among the organizations located at the Centre are the International Atomic Energy Agency (IAEA) and the UN Industrial Development Organization (UNIDO). The UN Office on Drugs and Crime (UNODC), is also headquartered in Vienna. As a centre for UN affairs, many meetings of interest to IFA take place here, such as those in the last months concerning mountain communities, UN Environmental Programme (UNEP); Vienna+20, a follow-up to the Human Rights Conference, Vienna, 1993; A UN Economic Commission for Europe Ministerial Conference on Ageing, which took place 30 years after the World Assembly on Ageing was held in Vienna.
Various NGO Committees, covering most aspects of the work of the UN, have been established in Vienna, and they meet regularly at the VIC. IFA is a member of the committees on Ageing, on the Status of Women, on Drugs and on the Family. The IFA representative takes part in, and reports on, NGO Committee meetings as well as many of the special meetings organised by NGOs, the host country, Austria, and the international community. Subjects of interest to IFA members, have recently included human rights; ‘violence against women’; ‘femicide’; ‘crime against older persons’; and environmental concerns. Another important aspect of the work of NGO committees is to prepare statements, expressing their views on matters to be addressed at various meetings of UN bodies, which members of the committee are invited to sign.

One interesting conference held in 2012 was the final meeting of the Bigfoot project organized under the auspices of the UN Environmental Programme (UNEP), entitled ‘crossing generations, crossing mountains’. Admittedly limited to three mountainous regions in SE Europe it provided evidence of how an intergenerational learning approach can be beneficial to both young and older persons, and to local sustainable development.

Besides gathering information for IFA members on UN matters of interest, the role of the representative to the UN is to bring attention, to the UN, to the situation of older persons.

For instance, during Vienna+20 at the Conference of Civil Society Organizations, the NGO Committee on Ageing brought attention to the human rights of older persons, not mentioned anywhere in the discussions, and managed to get a reference to the importance of establishing a convention covering these rights, in the final Declaration of the conference. It was pleasing to see that the promotion and protection of the human rights of older persons was addressed at the meeting of the Human Rights Council, in September, 2013, in Geneva and the resulting appointment of an independent expert on the enjoyment of all human rights by older persons. Also that an open letter from the High Commissioner for Human Rights to the permanent missions in Geneva and New York, emphasises the centrality of human rights to sustainable development – all human rights for all – without discrimination. A goal for the Millennium Development Goals (MDGs) post 2015, a subject that will feature in the near future in many NGO discussions.

During the “16 days of activism to end violence against women” there were several events including a symposium on forced marriages and violence against women in the migrant community. Yet again there was no specific reference to older women in many discussions and statements, providing a challenge!

Last but not least when meetings of UN bodies are held, relevant NGOs in consultative status with the Economic and Social Council (ECOSOC) of the UN, and civil society organizations, are invited to attend and where appropriate contribute to the debate. One example, in Vienna, is the meeting of the Commission on Crime Prevention and Criminal Justice (CCPCJ), one of the commissions of the UNODC. At the meeting of the Commission, in May 2014, the Vienna NGO Committee on Ageing intends to organize a side event addressing “Burning issues in the areas of crimes suffered by older persons”, aimed at bringing specific and important issues of criminal acts against older persons to the attention of participants of the CCPCJ. These issues were identified in paragraph 19 of the UN General Assembly resolution 67/143, in which Member States were called upon to address cases of neglect, abuse and violence by designing and implementing more effective prevention strategies and policies.

The side event will focus on four major areas of crime that older persons are particularly exposed to:
- Criminal acts of economic/financial nature
- Acts of violence and physical aggression
- Criminal acts of abuse of various nature
- Unlawful neglect and refusal of help

In addresses by the chair and vice-chair of the NGO Committee on Ageing and the key note speech of Vivienne Brunne, of the UNECE Working Group on Ageing, it will be pointed out how civil society organizations that either represent older persons, advocate the concerns of older persons or offer services to older persons can contribute to the detection of criminal behavior against older persons and to the prevention of such acts and situations where these can occur. Also the advantages of close cooperation between public authorities and civil society in this domain will be emphasized.

Ms. Christina Quijano-Caballero
IFA Representative at the United Nations, Vienna, Austria
Globally, millions of older adults live their later years with severe visual impairment or blindness. There is a misperception in society that vision decline is a normal outcome of ageing; yet scientific evidence has proven that 80% of vision loss is in fact preventable. Advancements in technology and medical innovations, coupled with governmental policies, could change the current fact that vision loss is the leading cause of age-related disabilities.

The World Health Organization estimates that 285 million people are visually impaired and of these 39 million are legally blind. As the global population ages, non-communicable age-related eye diseases, such as age-related macular degeneration (AMD), are likely to claim the vision of many more older adults in both developed and less developed countries. In doing so, this will affect the social and economic fabric of nations.

IFA Taking the Lead: Action in Global Advocacy (AGA)
Vision loss extends far beyond the individual – affecting families, caregivers, and members of the community. A person with vision loss may experience the loss of identity and role, loss of productivity in paid employment and volunteering, as well as loss of place and participation in family and community. Vision loss, whether it is sudden or gradual, also raises the impact of pre-existing conditions, which can marginalize older adults further; and trigger premature admission to residential care.

The evidence is in the numbers. Globally, the number of older persons (aged 60 years and over) is expected to more than double, from 841 million people in 2013 to more than 2 billion in 2050 (UNDESA, 2013). Proportionally, the global share of older people today represents 11.7%, which is projected to increase to 21.2% by 2050. The numbers are significant and juxtaposed to the growing prevalence of age-related eye diseases, a proactive response is critical to ensure the healthy vision of older adults is a public health priority. Moreover, as the leading cause of disability amongst this group of the population, vision and ageing organizations must work together to bridge the gaps in knowledge, raise awareness, and generate a stronger voice in the fight to prevent avoidable age-related eye diseases.

Action in Global Advocacy aims to help build the capacity and capabilities of vision and ageing organizations that work together on advocacy campaigns to raise awareness of age-related eye diseases, promote preventative measures to maintain eye health, and improve access to timely eye examinations and treatments.

The project which is being implemented in six countries (Italy, France, Germany, Spain, Turkey and Brazil) has three main pillars: (1) connecting vision- and ageing organizations through common goals and objectives, (2) developing a resource repository for centralized knowledge exchange of best practices, tools, and latest policy updates via the AGA website, and (3) monitoring of national and regional policies and programs that may impact advocacy efforts to eliminate unnecessary blindness and visual impairment.

Experience has shown that advocacy strategies and campaigns are rarely evaluated, in part due to a lack of resources, but also because of a lack of knowledge of methodological approaches. Each element of AGA will contribute to the building of an “advocacy index” that aims to equip organizations with knowledge and tools to measure the impact of the intervention.

The AGA project is not about ownership. It is about building capacities and capabilities to empower ownership of ideas, tools, strategies and opportunities at the grassroots; to have an organization-led advocacy campaign, and ultimately influence the development of a nationwide campaign. More importantly, the hope is to change individual behavior and address the misconceptions that have been the greatest barriers to overcome. Changing mindsets and translating everyday actions into a conscious, collective movement will be important in ensuring older adults live their later years without visual impairment or blindness.

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By Mr. Sean Keays

Long-term care wait lists

As the population ages, the length of waiting lists to get into long-term care (LTC) homes keeps growing and growing. Across Canada there are currently 300,000 people residing in LTC homes and it is projected, by the year 2047, that Canada will need over 800,000 LTC beds (Canadian Senior Care Industry Facts, 2014). As of May 2013 the Ministry of Health and Long-Term Care (MOHLTC) reported approximately 21,000 seniors awaiting placement in one of the 77,600 LTC beds in Ontario’s 630 LTC homes (MOHLTC Long-Term Care Home System Report, 2013). The occupancy rate in the province averages 99.0%. For example, in the city of Welland, Ontario, there is a waiting list of more than 400 people awaiting placement in LTC homes with approximately 400 total beds in the community (Hamilton, Niagara, Haldimand and Brant Local Integrated Health Network, Community Care Access Centre, 2014). It is evident that we are heading for an “Aging Tsunami” which is why we need to rethink the way we deliver institutional care for older people (Sinha 2014).

According to statistics compiled by the Ontario Health Quality Council (2013), wait times for LTC beds in Ontario have tripled over the past five years. The council states that the average wait time for an LTC bed in Ontario
It is also reported that 225,000 Canadians turn 65 each year and that approximately 7% of people aged 65 and older reside in a health care institution (Canadian Senior Care Industry Facts, 2014). Dr. Sinha (2014) reports that our current hospital model works well for younger patients, but it is not ideal for our older patients who tend to acquire multiple active chronic problems. As the population ages and there are more Canadians over 65 each year, this challenge will grow, requiring us to find solutions that will come with increased charges. For example, in examining the LTC industry and evaluating population demographics alongside health care costs, it is obvious that additional investment will be needed in providing LTC for older people. In response to the challenge of addressing the complexities of caring for older adults in chronic care settings and across the continuum of care, governments across Canada will need to support high quality service providers, especially in the not-for-profit sector to become more viable and gain economies of scale by helping them grow their services. These initial funds will most likely need to be raised through a mix of tax dollars and additional out-of-pocket expenses (e.g. higher rent and more service fees).

**Linguistic, Ethnic, Cultural and Religious Importance**

As we live in the most multi-cultural country in the world it will be very important for provincial governments to recognize the impact that linguistic, ethnic, cultural and religious services have on health care outcomes for residents living in LTC. For example, having worked and studied in LTC for the past twenty years I have noticed that mealtime, music and faith-based activities are the three most regularly attended social events in LTC homes. In addition, as Chief Administrative Officer of the only Francophone population base among our residents, Foyer Richelieu Welland has noticed significant increases in all our required quality indicators. Currently we sit among the provinces top quartile and/or top one percentile for all mandatory reported quality indicators. Although these results are experimental it is important for governments to recognize and support these types of initiatives that can have important health care benefits with minimal financial investments.

**Not-For-Profit Sector**

In an analysis of the Ontario Ministry of Health and Long Term Care's waitlist data, OANHSS (the provincial association representing not-for-profit providers of LTC and housing for seniors) calculates that the greatest demand exists in the not-for-profit sector. Not-for-profits account for just over 40% of all homes in the province and less than one half of all beds, but they are the number one preference of two thirds of individuals on the total provincial waitlist.

I find it interesting that when talk turns to privatizing our hospitals, it creates such a huge stir that discussions immediately dwindle and disappear. On the other hand, it is deemed acceptable to make a profit from older people living in LTC. Action must be taken by provincial governments to increase the number of LTC beds throughout Canada and ensure the majority be attributed to the not-for-profit sector.

**Conclusion**

Policy makers, service providers and residents/patients have a significant challenge ahead in ensuring that Canadians continue to receive efficient, high quality health care services. Some have even referred to it as “apocalyptic demographics” (Gee and Gutman, 2000) or “Aging Tsunami” (Sinha, 2014). However, by investing in our high quality not-for-profit service providers, ensuring that culturally based organizations are given the opportunity to be viable and having Canadians continue to invest in older people we will continue to strive and meet increasing demographic demands for LTC services.

Mr. Sean Keays
CAO, Foyer Richelieu Welland, Ontario, Canada
Join the IFA today and make a difference in the lives of older people...

For as little as USD$75 for individuals and USD$500 for organizations per year your membership of the International Federation on Ageing (IFA) will connect you to a global network of NGOs, academics, policy makers, governments, business leaders, marketers and media, that are working towards a better understanding of the quality of life of older people around the world.

As a member you will:
- **Get connected** to expert resources and information in the most important fields relating to older people
- **Be linked** with potential project collaborators and business partners
- **Access** the latest policy and practice information from a network of organizations around the world striving to support and improve the lives of older people
- **Be part of** a global movement to create opportunities to support people as they age
- **Be part of** the global monitoring of ageing policy and practice
- **Have a voice** at the United Nations, World Health Organization and its agencies through our Directors
- Have opportunities to **represent** the IFA on special committees and task forces
- Receive a **monthly enews** updating you on global trends and activities
- Receive **Global Ageing** journal

So join us today to work toward a better world for older people.

### Membership Options:

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