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Dr Alexandre Kalache
Age-Friendly Environments
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MARK: Good morning, ladies and gentlemen. My name is Mark Tucker-Evans. I'm the Chief Executive of COTA, Queensland. Welcome to this event. We're pleased to see you here. We're pleased to see familiar and new faces as well.

I would like to welcome Kerry Charlton. Kerry is a Koenpal, Undanbi, Yuggera person whose traditional country includes Stradbroke Islands and adjacent coastal mainland and the wider Brisbane area. As an Indigenous consultant, educator and facilitator, Kerry's extensive experience spans community and organisational development, covering Indigenous Social Justice, Community Development, Education and Training.

Kerry currently sits on the Forde Foundation Board of Advice, the State Library of Queensland Indigenous Advisory Group, a national inter-congregational Indigenous Leadership and Healing Project Steering Committee and a recently completed term as National Director of the National Aboriginal and Torres Strait Islander Ecumenical Commission of the National Council of Churches in Australia. Kerry is culturally a senior woman and highly regarded. Welcome to you, Kerry. (Applause)

KERRY: Good morning, everybody and thank you, Mark, you did well with those words, the terminology. I'd like to thank the organisers for inviting me here today to give you a welcome to country. It is a special event with a very special presenter.

First of all, I'd like to say *goori* in my language is an Aboriginal person and *daggi* is for non-Aboriginal person. In traditional times we only referred to ourselves as *gooris*. And when a new wave of people came to the shores a term had to be worked out because we didn't have a name for non-Aboriginal people. So *daggi* was decided.

So I would like to say when a Goori stands before you it is a celebration of survival of the ancient - within us we hold ancient memories of cultures, connections, wisdoms and spiritualities of over 100,000 years. Thousands and thousands of footprints across this country for thousands and thousands of years. And we remain in spite of our past and our footprints today turn the soil. I acknowledge our ancient neighbours, the Turrbal, Nugi, Yugembeh, NingiNingi, Undambi, Kabi Kabi and Wakka Wakka.

Today I perform a contemporary Welcome to Country, which is based on the traditional laws of waiting on the borders of another's country for the approval to walk across that border to speak with the elders to state the purpose and gain permission to be on that land. Usually a fire was lit to signify one's presence. This occurred in various ways across the 250 countries in this nation.

Also, there is the deeper understanding of crossing someone else's dreaming place with different dreaming and sacred places and very important to acknowledge someone's presence in that land and be assisted by local guides to ensure safe passage whilst there regarding land and laws. Sometimes permission was given and sometimes not depending on local activity at the time, be it ceremonial, seasonal food gathering, festivals, message stick delivery, et cetera. So, in a sense this morning we honour the first nations people of this country, the Yugerra people and this tradition by seeking permission to do special business on country. We then today partake in an ancient ceremony.

As part of this ceremony, I ask that we observe a one-minute silence to reflect on those many Goori footfalls on country who have gone before us - caretaking country and each other - leaving a legacy of beautiful, functional and sustaining landscape for generations to come. So if you wouldn't mind closing your eyes to have a one-minute of silence.

As we gather here on this country, I say to you *Bi Balka Nariba BaBing Wanjiina Wagancheeba - Bi Balka Bi Balka, jinungs neeooba Yggera dja*. Blessings of the great spirit above, welcome your footsteps on this Yugerra country. Thank you.

MARK: Thanks very much, Kerry. Now more than ever, issues associated with ageing are influencing public policy and shaping the way we plan our communities and environments to be more neighbour friendly. COTA is honoured to host Dr Alex Kalache, a world-leading authority on ageing and a former head of the World Health Organisation Ageing and Life Course Program, who now leads the International Longevity Centre in Brazil. Dr Kalache has come to Queensland from South Australia, where he is part of the South Australian Thinker in Residence program.

In Adelaide he has been building a deeper appreciation for the contribution and needs of our ageing population. In particular, he has been assisting the implementation of new and exciting initiatives as part of the state reform agenda *Adding Life to Years*. Dr Kalache has worked with the partner organisations to examine how we are advising and implementing policy around ageing issues according to the four pillars of security, participation, health and continuity of education. This will provide opportunities to examine issues around ageing in a more holistic way.

As I said earlier, Dr Kalache has a wealth of experience at the international level through his work between 1994 to 2008 as director of WHO and as an advocate for older people. During this time, Dr Kalache advanced the state of knowledge about health care in older age and gerontology through dissemination of information, training and research, launching in 2002 the WHO Active Ageing Policy Framework, which is what drives Australia's framework. Also under his leadership WHO launched the Global Movement on Age-friendly Cities.

Dr Kalache is a senior policy adviser to the president on Global Ageing at the New York Academy of

Medicine; consultant to the municipal and state governments in Rio de Janeiro and in Sao Paulo as well as to the federal government in Brazil;

International ambassador for HelpAge International, a global network of not-for-profit organisations with a mission to help disadvantaged older people worldwide. Can I introduce you to Dr Kalache. (Applause)

DR KALACHE: Good morning. Thank you very much, Mark. And a special thankyou for your very kind words and very beautiful introduction. As you have heard, I'm Brazilian, so I will have to ask you to cope with my accent. I expect you won't have difficulties to understand me, but if you have just raise your arms and please repeat it and I will try to repeat with the same accent because I can't pronounce otherwise.

I have just spent three weeks in Adelaide. It is my third visit in Adelaide as a thinker in residence for the government in South Australia. It has given me opportunities to start implementing what we expect is going to be the first ever age-friendly state, and this is following many hundred/thousands of centres around the world that have joined us in this venture on how to build a global network on aged communities.

This is the story that I'm going to tell you because I think it is relevant in talking to Mark. I expected that this is what you would like to see in Queensland over the next years, the building of age-friendly cities, and why not an age-friendly Queensland. So that is the story that I'm going to tell.

I'm going back a few years when we built the first five cities around the world that joined to established this age-friendly cities following an experiment. I have to start the story telling you how it first started. Have you ever been here? This is Copacabana Beach. I know Margaret Steinberg has been there. And this is where I was born. Have you heard of Copacabana Beach before? What comes to mind? I didn't hear that. Festivals, music, beautiful girls in bikinis, strong men playing volleyball. It is all there. It is a very vibrant part of the city Rio de Janeiro. I was born there. I was born about here, there was a maternity there which no longer exists. Today it is a geriatric hospital. So, now I'm spending more and more time, after I left WHO, I have a very good chance of - with this geriatric hospital - ending up where I first started. That is what is Copacabana today, a taste of what is to come. My parents came to Copacabana because...You will understand that Copacabana is surrounded by these big blocks, rocks. And this is in the 1930s, was difficult to have access. And it was only in the 1930s with the things that were built under the rocks that people could come and there was this big surge of development, the urbanisation of Copacabana in the 30s, 40s, 50s. Many people, young people, came to live in what I could say was a kind of Gold Coast of Rio de Janeiro although it is only about 15 kilometres away from the city centre. But before 1930s and 40s it was uninhabitable. No-one would be living there because the access was difficult.

Well, my parent's generation came and those survived and are still living there in Copacabana. You can see the reason. It is dense; you have all the services around you; you can walk everywhere; you have

restaurants; hotels; chemists; you have public transport; you have very beautiful beach so you can walk, which is pleasant. But we also have the fact that those that don't live right by the coast, away from the city -- it is not everybody that is rich, so there is a mix of the country as a whole and because the generation of my parents moved and they are still living there, those that survived, but they have children and grandchildren that have moved away and are now living in more fashionable districts of the city. This city has aged because younger generations, my generation, my children's generations, my nieces, nephews are all living away from Copacabana. Today in Copacabana, in proportion terms, more older people, which is the oldest population in the world.

So, we can use Copacabana as a laboratory to test it, to see if some policies, some new practices will work or not. And because it is a mix of socioeconomic class, it is not only rich people that live there, you can really see what is happening and what is going to happen in 2042/2043, the proportion of people in my country is going to be as high as it is going to be in Copacabana today. Amazing. It is amazing that in my lifetime when I was born in Copacabana the proportion of all the people would be three or four per cent.

My life expectancy was about 43 when I was born. Today it is 75 for the country as a whole. It is a completely different country. And the fertility rate, which is really the ageing that gives the speed to the population age, is 1.7. It is below replacement level. When I was born it was close to eight. When I left Brazil to do my training in England, it was about six in 1975. So, you can see the speed of ageing just having a look at what has happened to Copacabana, to Brazil. It is the taste of tomorrow's global society. It is here, ageing, it has never happened before in the history of human kind that we could face such a very fast ageing process throughout the world. And obviously this is what is happening in a country like Australia and specifically here in Queensland.

So, this is what Mark has asked me to come and share this story, that it starts with Copacabana because in 2005 we had the international congress of gerontology in Rio. It was exciting. It was a new country supposed to be independently hosting. And the organisers gave me the honour of opening, giving the speech at the beginning, but they said, "Alex, try to bring an idea that will excite the media and that they will talk about in congress." And I thought, well, I'm going to associate the word "Copacabana" with "ageing" and in the same way it has surprised you. As you're not familiar with Copacabana, and as you would have associated this with volleyball, festivals. The people were there for the opening of the congress were also surprised.

So, what I did was very simple. I looked at my district where my mother still lives, my dad isn't there, but my mother is still there, has been living there since 1942, when she got married. And they organised with friends, friends that live in Copacabana, friends that worked as gerontologists in Rio and they said, "Help me. I need groups of older people to tell me what is the age in Copacabana so I can tell this story?" The media will be because the (inaudible) didn't pursue it, is not used - was not, now it has changed a lot to associate Copacabana and ageing.

So it was an improvised way to bring people together around the table and talk about ageing in Copacabana from their personal experience, them as protagonists. And they told me three things that were extremely interesting. It becomes obvious once you hear them, but it was kind of new.

You can see that Copacabana is basically a district where people live in apartment buildings. And below there you still have men, never a woman, who is the porter, a doorman. And the people in Copacabana - they said our best friend is the doorman. It becomes obvious once they tell us. And why? It is not because they carry your shopping, change the bulbs so you don't get - fall from the ladder, break your hip - it is more than that, it is more than the physical help that they do provide. It is also listening, it is also monitoring. "Oh, it is 2 o'clock in the afternoon and Mrs Smith hasn't come down. She usually is here at 8, 9 o'clock to buy bread for her breakfast. I better go there, knock at the door to see what is happening." Or the very quick visit that people so busy - everybody is working hard, and pass by Copacabana and they visit their folks once a week and the porter will tell them, "I'm worried about your mother, she's getting very forgetful." Or, "I'm worried about your father, he's sometimes bringing people that are not good people from around this neighbourhood", so they warn, the porter, we need to do something about this, or we'll call the emergency, the ambulance, a relative if something happens.

So what we're doing now is simple. If these guys are the best friends let us train them and give somebody the tools so they can be more effective in what they do. (Inaudible) because the most important is the largest private bank in Brazil, a real powerhouse, is providing the resource. And this training is being done so that (inaudible) or porters in Copacabana are gaining all the districts (inaudible) are now aware of the power of the big cities in Brazil are being trained in a very simple way so this guy's becoming age-friendly porters. They get a certificate, it is in association with the Brazilian Society of Gerontology. So it is very simple. Twelve hours, four sessions, three hours each. And they will have the skills and tools to become more effective in what they were already doing, improvise.

Their importance can be so great that I remember this old lady saying in one of the focus groups, this is back in 2005, "I pray every night for my porter not to die before me. You know, he's getting old. I would be lost. I wouldn't know what to do." Then another lady said, "Yeah, I lost my husband back two or three years ago and my friend started saying you are depressed, you need a counsellor, you need to go to the psychologist. So I went and went there for three months. And it was always a time convenient for her, not for me. Sometimes I would start to warm up and say something really meaningful and then the session would finish. It was costing a lot of money and then I clicked and said, I'm going to deal with my porter. He's there, he cannot escape me. It is going to last for as long as I want. It is free. And guess what, his counselling is much better than the psychologist gave me." Perfect. So sometimes simple things like this can make such a difference. And it is up to you to listen to the people in your community to find who are the agents that can be powerful.

In Copacabana we are working with barbers and hairdressers because we found out from older people that these are people that are giving support. And we learnt so much talking to barbers and hairdressers.

But in the same way that older people told us who are their best friends, they told us who are their enemies. Can you have a guess? Bus drivers. Hopeless. They don't wait for you to sit with comfort and safety. They start abruptly. Suddenly you have a fall, you have a fracture. Sometimes they don't stop close to the...all the things that shouldn't be done. And later we found out it is a universal experience. Many cities all the people were telling us the same. So we are now training the bus drivers, but they are not friends, so we have to sensitise them first. It is simple. You take a very cheap plastic pair of glasses, so you have a bit of (inaudible) on the glasses, you put ear plugs in, you put gloves so you don't have the same feeling, you put some weight in their arms and limbs, and you tape one of their knees so they don't have the flexibility, and then you ask the bus driver to do what they are supposed to be doing, which is not wait for you to get in and out of the bus with safety. They will never forget it. Then we tell them, "It could be you tomorrow, it could be your mother today. Don't you think it would be nice to go to some training on how to provide the services with safety, security." And then we start training. Again, it is (inaudible) financing the training.

The third finding is at the time things are getting much better. There was a problem with safety, so we're working with the police. And we have right in the middle of the beach where there is a tube station, an underground station, we have now a police station that is open 24 hours seven days a week for older people. It is staffed by men and women that are trained to deal with old people. Again, it doesn't cost a bomb and it is providing a service that all the people are telling us this is what matters for us to live in Copacabana in a more age-friendly environment.

When I told this story in 2005 there was such a great deal of interest in the audience. I said, well, we can do this elsewhere in the world. And the first twelve cities that joined us with an interest - we went to Vancouver, sponsored by the Canadian government, and we started in Vancouver with the twelve cities. Later we expanded to 35 cities, including here in Melbourne and in Western Australia. And what we did in Vancouver we provided the protocol, very carefully prepared the methodology that is needed for us to look how people are ageing through their own voices, protagonists.

And later in 2006, about March, we started in all 35 cities, with the same methodology, qualitative research, so we could listen to all the voices of the people and we could start this. This is the story I'm telling you here today. And why is this important? There are two very important (inaudible) today in the world: one is ageing. And there will be 2 billion older people in the world. This is the total population that I had around me in the globe when I was born, so in my lifetime, since I was born, to the year 2050 there will be as many older people as there were 105 years earlier, the population as a whole. It is a revolution. It has never happened. We are actually very privileged to be here, alive, professionals, or older people, that are seeing this revolution, the longevity revolution happening before our eyes and we can intervene. We can be ourselves protagonists. Protagonists of this big change in the way society has to be organised, but in parallel to this we have another very important phenomena which is urbanisation.

I know I'm speaking (inaudible) it is highly urbanised. About 90 per cent of the population live in cities.

Still there are some people that are in remote areas, stay vulnerable because it is more difficult to bring services to them. But Australia is where most of the world will be increasing for the next three or four decades, increasingly more urbanised.

For the first time in 2007 the United Nations said there were more people living in rural areas than the first time in history. It is exciting. In another 15 years, instead of 50 per cent, there will be close to two thirds. And it is going to be like this so by the year 2050 not only will there be 2 billion people over the age of 60 in the world but the vast majority will be still living in urban areas. So we bring those two things together, ageing and urbanisation. Then we have all the (inaudible) to explain why, preparing for this kind of reality, ageing in cities is so important. It is so important because what happens in the city will have repercussions throughout the country, throughout the state. What happens in the village in a small town doesn't get the same headlines, so very quickly you will start influencing the country as a whole and Queensland as a whole.

Okay, the other reality is that not only we are ageing but there are hundreds of millions of people that are ageing like this woman in poverty. I'm talking about the world as a whole. You are incredibly privileged. You should be aware of that. Ageing for you - the vast majority of Australians is ageing with privilege, with access to services. Don't forget this. I'll come back to this at the end of my talk because if there is a word that combines with longevity it is solidarity. Solidarity is between the young and the old, the poor and the rich, the developed world and the developing world. But you are ageing on the whole very well. And I pay respect to you because I'm afraid I don't know what is the problem with Aboriginals. I don't understand. It would be incredibly arrogant for me to explain or understand why you people - why you're not ageing. It is something that you have to address (inaudible) is that it is embarrassing to have the original population of this country with a life expectancy that is so much lower than for you, the vast majority of those listening to me here. So I don't intend to make any recommendations about ageing on the Aboriginal population because it escapes me. It is sad for me to see you are where you are, where Brazil was 60, 70 years ago. And now Brazilians have a life expectancy of 75 and seem to be stuck with a very poor life, poor conditions. And I don't understand it, and this is why I apologise for not making comments about something that I can't simply understand.

Well, no city is perfect. This photo I took a few years ago and you can see it is a city built on hills, so you have staircases and you have difficulties and slopes, but if you put hand rails, simple. Not high tech. It is going to make the life of older people easier, but make the life for everyone easier. You have a beautiful thing in English, that we don't have in other Latin languages. You can say "Age-friendly". It is not senior friendly, it is friendly to age. It is friendly to everybody. Because a pregnant woman and a man with a suitcase are not - a teenager with a rucksack - everyone is going to find this staircase easier to go up and down because you put the hand rail there thinking of older people to start with.

And that is the other message that I want to leave here. If it is going to be friendly to older people it is going to be friendly to everybody. And obviously we need to ask this question - this is a slow system. Do

we need age-friendly societies? Is it important? Maybe it is important because many of you here are ageing and you can see and appreciate, but is it important for everybody, all generations, age groups? Well, I will give you one example that I'm not very proud of and it is the example of the staircase of the building in which I work for many years, in Geneva, the World Health Organisation.

As you come from the side of the street, outside, into the darkness of the building you see this big bold staircase in black marble with white stripes. So you don't actually see it very well. It looks like a big slope than a staircase, but you know that you have to come down because the core of the building, the heart of the building, is here with the library, board rooms, workshop rooms, the cafeteria, so you say to yourself, "I have to be brave. I have to come down." And to make things a little more difficult this staircase is built with steps that are very wide and shallow, so not only are you not seeing very well what you're doing but you cannot feel with your feet. It is unusual. But you have been given two options: you can fall to the left and as you fall you will bang into the glass, so not very present; or you can fall to the right where the cactus are. (Laughing). This is the World Health Organisation. And they spent 14 years campaigning, asking different administrations, different organisations.

When I first started it was a Japanese man and I said you come from the oldest population in the world. You have visitors, maybe your mother will come and visit you here and she will be ashamed that you allow this to happen. And then came someone from Norway, a lady, and I thought, oh, now it is going to be different. European sensitivity coming from a very rational Scandinavian country. She is going to do something, but no. It went on and on. What would be needed? \$2000 to put handrails in the middle, to the left to the right. I know we can't rebuild the building with a different staircase, but adapt the staircase so it would be more age-friendly. It would cost nothing. And I threatened them. I said before I leave I'm going to simulate a fall, I'm going to break this little finger and I'm going to sue you and be rich. Well, I had a fall two months before and I broke this finger, the right-hand, but not there so I couldn't sue anybody. That is the reality in which we live. And this is what we have to do: it is to build an urban environment accessible, include (inaudible) that could promote participation of (inaudible) as around many (inaudible) periods of health, lifelong learning, participation and security. I'll come back to that.

The objectives of the age-friendly cities. First of all, it is to raise awareness. It is what I'm doing here so that everybody will understand that if it is age-friendly, it is more senior friendly, it is going to be safer and friendly for everybody. It is also gratitude so that we can start, so that we can have stories, models of good practice so that we can bring an idea from Brisbane, to Adelaide, to Kingston, to Geneva, but also to bring ideas from elsewhere so we can exchange models of good practice. Easy. We have over 1,000 cities today and counting. It is increasing all the time. In the website you find already good models, good ideas and very often very simple ideas. It is nothing that is going to cost millions of dollars. But intervention can make all the difference between age and excluded and age which is the (inaudible) experience now, bringing more quality of life for everybody.

But we are stuck with - we need a new frame, and frames are important. Frames are important because

they are mental structures through which we can see the world differently. And instead of having in five or 10 years a list of different interventions that are not coherent, they don't fit well together, we'll have something that is coherent and consistent. And this is why the starting point for this age-friendly cities, it is the active age policy framework - exactly 10 years ago, in 2002, when we had the (inaudible) in ageing, it was in Madrid, so all the United Nations, all the countries in the world, converged to Madrid. After two or three years was preparing themselves. And we launched it there in April 2002. That continues to be very relevant for policy development. Unfortunately, it is not enforceable, it is optional. Countries, even if they are signatories, it is not a convention, it is not international. And we missed that.

Today in the world the only group of vulnerable people (inaudible) as we age we become more vulnerable. The only group that doesn't have a convention to protect our rights of people that are ageing is exactly the group of people that are increasing fastest, the older people. We have conventions for women, for children, for indigenous populations, people with disabilities, you name it. The only group that is missing, a specific convention is rights of older people. Older people. It doesn't make sense. And we are struggling from here.

Next week I'll be at a meeting in the United States and hopefully we will be drafting a convention on rights of older people for the region. We have been struggling with this at United Nations, and they say this because I have the privilege of being in the delegation of my country, but also as a global ambassador. And I go there to New York and I see the resistance of developed countries. Developing countries are increasingly speaking with one voice, "We need it". But you, without privileges, thinking that we have the rights for your people are putting in the back (inaudible). And I'm not specifically talking about Australia. Australia is sitting on the fence. It hasn't said one way or the other. But in European countries, United States, Canada and Japan are saying, 'We don't need new convention of the rights of older people. We have our housing in order.'

You know working for COTA and all the senior groups in this country that that is not the case, that you have abusers all the time. It is just that you don't have enough members because we are in relation to help abuse in the same way we were with domestic violence 30, 40 years ago. Society has been brushing it under the carpet. And, no, we treat our women and our children with roses and we are incapable to do any abuse to them. And then the numbers came because the feminists moved and started doing the research and showing the ugly face of domestic violence that we know today. No society can be spared. And we are today exactly in the same corner denying elderly abuse. It takes a lot of effort to show, to get the numbers because all the people themselves are the first not wanting to incriminate the abuser, usually a family member, and alcoholics and drug-addicted grandchildren.

And this is the reality that we are here today, not only in relation to elderly abuse, but it is the right to services, to location, to a job, to employment, to the common things that we adults, older adults, take for granted and that for older people is denied because it is a right, an approach that is needed.

I'm saying this here and I have discussed with the Commissioner for Ageing for the rights of older people, Susan, and I have been discussing this in Canberra, in Sydney, Adelaide and Melbourne. And I will continue to say this: "It is important for you to break and become the first country in the developed world that will unequivocally say we need a convention at the UN on the rights for older persons. And I would be delighted if you said so."

But going back to 2002, we had this very important campaign and everyone started looking at the WHO expecting that WHO was going to come with something significant to contribute to the debate; after all, health is a universal right. Everyone wants to grow older but in good health and that is what we were trying to do there, to bring this discussion and to bring the active ageing framework so we could make progress.

And this is the finish: activating the process to work for opportunities for health and lifelong learning in order for us to continue to participate in society, and failing that we need to take the fourth pillar, which is the security that somehow we are going to be protected if we become old and sick, disabled, if we won't need the protection that sometimes comes at the end of our lives.

The determinants are many and we can see here that we have to build the determinants of our participation with the background of gender and culture. Men and women age differently, not only because we have different hormones but because the social - what it is to be a man and woman in different societies will be very different. You have the privilege of providing care. You are women, the main carers. We miss out. On the other hand, it is important to bring us into this equation to change the paradigm of what it is to be a neighbour. In very chauvinistic - and maybe we will enter societies like Brazil so that we can build together a more caring world especially because societies are ageing so fast. And of course the culture - what works in Shanghai may not work well in Brisbane, but it is important to think about.

And the active ageing is right in the middle. This is what we want. And in order to get there we need a contribution of these groups of determinants: access to services, behaviour, personal determinants, the physical environment, the social environment, the economic determinants. All of them contributing to active ageing but also all interrelated. And that is what age-friendly cities are trying to do, is trying to rationalise the idea of active ageing and practice - put this framework into practice into the city.

And for that we also need a life course perspective. We have to bring to these children the message that the best that can happen to them is to age. After all, there was only one preparatory. What would you prefer? Premature death? So let us age positively facing what is really the greatest achievement of the 20th century, more than 30 years of extra life given to us. And yet so many talk about age in a negative way like a burden, like a problem, like a punishment.

In this life course prospective it is important because it is also a new framework. It is an approach that

offers an interdisciplinary framework that can guide us to research, to policies and can help us to disentangle and understand the human development and age. And it is encapsulated into this graph.

When we are born we are completely dependent on our parents. And let us follow this red line, which is what we want. Very quickly, in the stages of growth and development and childhood and adolescence we reach the peak of our functional capacity. I'm not talking about intellectual capacity; physical, our strength, how we - speed, our capacity. And then gradually once we reach that peak we start to (inaudible). Anybody here (inaudible)(phone ringing) Well, I can give you good news, you are all declined. Providing that you reached the age of 85 and you continue to be above the disability threshold you are independent, you have this tremendous gift of life that can continue to be above that disability threshold. I'm not saying that people with disabilities cannot contribute to society, but what I'm saying is that it costs them double, three times, four times the effort it takes for us to come here and to participate.

We have to appreciate this gift of life for those that can reach old age above the disability threshold, but we should not put back because now I'm afraid I'm going to look at you and going to tell you for you to come here to this spot, in this modern building you would have to be careful to overcome this barrier that is unnecessary. It is inhuman to put you in a situation that you would have to be humiliated, to be carried to be put here to do what I am doing because I am able to manipulate the steps but you are not. What society are we are building that we still allow the barriers like this even in a modern building like this library? And that is the disability threshold that we can put high like we have here, or much lower. And if we put it lower, eliminating this step, everybody that could otherwise not manipulate because the threshold was so high, all these group of people would be free from disabilities, not because they don't have the disability organically functioning, but because we have improved the environment. And sometimes all that is needed is to put a ramp instead of a step as it would be so easy to put here in this auditorium.

And the other problem, of course, is for many people in the (inaudible) it would be the problem of not reaching the functional capacity peak because of poverty, because of a certain situation, because of an attachment that could have been prepared were not, and preventing all these group of people to reach the maximum of their functional capacity in early life. And I'm talking about Aborigines in Australia. All these disadvantages throughout the first stages of life that will make your health so much poorer than it is for the vast majority for us. And then throughout the stages of adult life, the social determinants of health. It is the poverty, the quality of work, the (inaudible) that will make more difficult for you to work, the stresses, you work 10 hours and then you have an hour and a half of very bad public transport. Which is the reality for the vast majority of the world. Not you, but it is the reality for the vast majority of the world that cannot age well because of the conditions in which they work, in which they get entertainment if they are able to. The conditions in which they cannot socialise, and then you hit the disability threshold early in life. Say in your 60s you have a stroke and then you may be alive for another 30 years, but with a quality of life that doesn't compare with the other work that continues to age above the disability

threshold and may die without having ever experienced becoming disabled before that death.

So this life course perspective is of paramount importance as we grow older and can offer to our populations this experience of ageing well. So it is time for a new paradigm and one in which we can see the peoples protagonists. Beneficiaries as well as contributors to societies, to the wellbeing, and for that we need to make the effort of ensuring that their voices will be heard.

And for that, what age-friendly city is that it is to organise groups for older people. Ask older people. They know best than the experts so-called. Ask them what is it to live in Brisbane? What are the pros and cons? What are the difficulties? What qualities are necessary so the quality of life can improve for everybody including themselves. So it is that approach to listen to the voice and increasing what we're doing throughout the world, not only listening to these voices, but once we listen to them we can organise public forum like here, like we had in Adelaide with younger people, people of all generations working together with this common aim of making Adelaide, Brisbane, New York, Geneva more age-friendly.

But we also need a top down approach. It is not enough to listen to the voices if we're not going to do anything with them. We also need to involve the government, the councillors. These people that you elected yesterday, let us give another week. Today is a bit too early. They are still celebrating with too many bubbles. But tomorrow or next week let us listen, let us bring them to the debate because we'll need this top down approach as we are doing.

There's a toolkit and guidelines that were produced by the South Australian government relating the protocol into the reality of South Australia.

We are bringing here all these dimensions that will make our life step. It works for everybody, all ages, but it is particularly important as we age. We are talking about policies and transportation, housing, social participation, respect and social inclusion, civic participation and employment. Yes, employment. Many older people need to continue to work. It is not only because they want and society should allow them, but also because many people in the world still depend on their work to have an income. Communication and information. Community support and health services. Outdoor spaces and public buildings. So it is a combination of all these different dimensions that will make better our lives. And the protocol in which the basis of focus groups of the people are based on these dimensions. And yet once we did this research in 2006, in 2007, we did on the 1st of October, make an international day (inaudible) launched by the WHO global age-friendly cities, the guideline. And we have these four pages like this - sorry this is in Spanish - a checklist. All this is translated into a tool that can help the policy maker to start to look at what is going on here in Brisbane, what is the starting point, and then we have to listen to the voices of people that are ageing in Brisbane so that we can go straight into what really matters in this society.

As I said, since 2007, since launching the guide, hundreds of cities throughout the world have joined this network. This is like in Brazil where we have now a public transport. You will see the difference. Instead of an old person that is with a walking stick, not that there is anything wrong with the need of a walking stick, but the vast majority of old people don't have a walking stick. Why do we have to symbolise older age with a walking stick? It is going to the negative rather than the positive. The vast majority of older people can guarantee that older people over the age of 60 don't have it. It is a bit like the vast majority of women don't have a moustache. It would be like having a moustache identifying a woman. It doesn't hold. So we have to think in terms of what is common and then find a global term that we can really identify older people in a positive way.

However, what goes (inaudible) is the quality of life of older people often depends on things that are beyond the borders of your municipality. And this is why in South Australia we are working towards an age-friendly state. Not only Adelaide, but state. Your public transportation is here, and you have to cross the municipality in order to work in another, which is often the case, therefore, we need an age-friendly state. And this is what we're doing. I'm working with a number of communities and councils around so that we can build an age-friendly state.

And it is important because that is a society, like yours, that will need this very important energy. Especially this baby boomer generation. Us, because every single stage of life we have transformed it. Adolescence is something that today we take for granted but it was a social constraint that we baby boomers brought to history. Before the Second World War people didn't have the luxury of adolescence, it was an abrupt transition from childhood into adulthood. Then came this very big cohort living in affluence, much richer than before, with much longer schooling. The educational levels much higher. And much better health than ever before. And then we had the luxury of four or five years of transition into adulthood. I know that for some they would rather be adolescence forever, but for the majority of us is four or five years. Now these baby boomers are going to reach a different transition that's not going to last for four or five years, it is going to last for 20 years, 25 years in which we are going to be healthier than ever before with more money in our pocket, with higher education levels and we are going to transform what is the (inaudible). I'm not going to grow old like my father, not like my grandfather. My grandfather died when he was younger than I am today. I was 13. I remembered him well for many years, but he was an old man that shuffled away. I'm not like him. And I have (inaudible) transformation. I was present in 1968 in this stupid movement. I have helped to transform societies through sexual liberation, for participation of women in the workforce. All that happened in my cohort. And now that I'm getting older with many, many millions of people like me we're going to change and in the same way we were adolescents and we're going to bring this new stage of life. And I bet those that are younger - in forty years from now you will remember Alex was right. Adolescence is...Well, I was going to say that there are words that are important. I was going to present some few examples of things we were doing in South Australia. I can do it in your time, but I just wanted to leave you with a final message: longevity rhymes with solidarity. It also rhymes with (inaudible). We are different as we grow older. Sometimes reflecting the privileges that some of us have and others don't - wow. This is what I hope you will sign,

the Dublin Declaration. In South Australia we have projects. And now it is going to race. Involvement, you, the private sector, we want more services that are more age-friendly. This is how we are projecting the idea of age-friendly South Australia.

Before I miss everything together, I just want to say the increasing presence in this ever-more urbanised global world reminds us that we live in this impressive period of history. We are so privileged. Not only we're living longer and longer but also we have the opportunity to shape for better future for everybody. It is revolution. And there you have in the background Copacabana again. It reminds us that we have to change and develop a culture, a culture in which we are going to respect diversity because not all older people are the same. We have an age range from 60 to 110, increasing. How can you compare me with the needs of my mother, 94, has? And yet we so often talk about the elderly as it could be a common group. It doesn't make any sense. But above all, please, remember that we need to build this culture that promotes solidarity between the young and the old.

My son, who lives in Britain, brought his daughter, his little baby, when she was six months old to meet her great grandfather for the first time. He was then 94. She's now nine and he's 103. And they continue to establish the same (inaudible) that they suppose here, looking at each other through the eyes, coming closer and closer, as it is natural, until they touch each other on the nose. This is what we want. It is a society with natural attraction and the solidarity will be expressed, expressed in all different ways.

Thank you very much. And I'm sorry to go over. (Applause).

MARK: Thank you very much. I think we've got a couple of minutes for questions. So we've got a microphone just here. So if anybody would like to ask Alex a question, the microphone over there or here.

SPEAKER: Thank you very much. It has been very, very interesting. What I would like to do is put a good word in for Brisbane bus drivers. Every time I go to my seat on the bus when I get on I can see them look - they must be trained, they are looking in the rear vision mirror. On leaving the bus, I even got told off by an eager young bus driver because I stood up before it stopped. So I got in trouble. So I think our bus drivers are doing very well. Thank you very much.

DR KALACHE: Wow. Fantastic. I would like to bring some of your bus drivers to Brazil. Conversely, the other day I had an experience that was very interesting. I got into a bus in Copacabana and this old lady came and looked at this girl, young girl, 16 maybe, and said, "Could you please get up. This seat is for me. It is especially for older people. What are you doing there?" And the girl immediately stood up. This is a right approach. There is a law in Brazil. This is a rights-based approach. It is not an option for you to give your seat to an older person, it is in the law. It is a right-based approach that will tell you if you are here you have to respect and this place is for older people. And sometimes I'm afraid to say this you need these laws because not all the bus drivers are as civilised as yours in Brisbane.

MARK: Yes, thank you.

PETER: Are the attitudes of jobs of people in other countries similar to the attitudes we encounter here in Australia where it is very difficult for older people to get work because they are seen as being up to their use-by date? And a lot of these people can be productive and a lot of people don't seem to realise that is the case. And so from an economic point of view, from the country's point of view, they should contribute towards the economy but also very much help themselves financially or per se want to remain active and in the workforce. So, do these attitudes exist in other countries as well?

DR KALACHE: It is good to change. I can't offer you good examples because as I said it depends on culture, but it is going to change for a very good reason. I don't know what is your fraternity in Australia. It's been all over the place and it has been for a long time. You have two options: you can either import more immigrants, and I hear and see in the papers that the attitude is not that favourable, although this is a country of immigrants, except for the Aboriginal population. All of you will have one, or two, or three grandparents that came from other countries and yet some people forget to be proud about that, or they say, no, no, no, my parents were not immigrants, they came from Britain. I say, "Wow". (Laughing). That is one option. The other is to make best and better use of the manpower that you have and this is by prolonging the life, the working life of those that have the experience and if they are willing to continue to work. But for that it is absolutely indispensable (inaudible) of active ageing: good health and life-long learning because if you stop learning at the age of 30, or 40, or 50, if you're not giving opportunities in your society to acquire new knowledge and new skills you will be deserted at 25.

I know people that haven't learnt since I'm - finished my medical degree so many years ago. Had I finished my learning at that point I wouldn't be here, you wouldn't be interested in listening to this Brazilian doctor. So these are the two keys. You need to be in good health and you need, by and large - and you need to have the skills to continue to compete in the workforce. And people don't want at 60 or 65, or even at 50, for someone to tap on your shoulder and say, "Guess what, I have good news. You are going to have another five years of your very boring job because we want you to continue to work." No, it has to be done with sensitivity with assurances that we are going to invent life force. Now that we are living 30, 35 years, 40 years more we need to reinvent society. That is my hope with my generation, the general essence, that we are going to reinvent the opportunities to give people - at younger age, younger adults to have longer periods for maternity/paternity leave so that they can breed children. Don't we need more children? Well, let us reinvent a society that will give this opportunity and then there are opportunities for you to take a sabbatical at 35, to do a masters degree at 45, to reinvent yourself at - and then you will be excited to continue to work until you are 70, 75 in everybody's game. For every three older people that continue to work you are creating the wealth to open a new space at the bottom of the pyramid. Australia gives the demographic imperative which we are - we need to use more widely the resources that you have and the resources are definitely older people and their experience.

MARK: Thank you, Alex. On that very positive note, thank you very much for coming today. This is the first in series of talks that COTA will be hosting over the coming years. And I would like you now in joining me in thanking Alex for coming once again. (Applause).

DR KALACHE: Thank you. You call me in five years to show me how wonderful the age-friendly Queensland is going.