VOICES OF THE ELDERLY

Consell Assessor de la Gent Gran de Barcelona

BARCELONA

AGE-FRIENDLY CITY

Together we will build a city for all ages

Ajuntament de Barcelona
BARCELONA
AGE-FRIENDLY CITY
Together we will build a city for all ages
**Introduction**

In 2009, Barcelona City Council, at the proposal of the Elderly Advisory Council, began the **Barcelona, age-friendly city** project, an initiative that is part of the Age-friendly Cities programme promoted by the World Health Organisation (WHO), which encourages health and well-being for the elderly.

The elderly constitute one of the biggest, most dynamic and diverse groups in the city. The majority are active, independent people with great potential to be involved in citizen dynamics. Older men and women are working in the various participation councils to promote a better quality of life for the elderly, and also for everyone who lives in the city.

The city of Barcelona has a long tradition of building its own model of services, equipment, transport and public spaces with a view to enabling dignified ageing for everyone, in an accessible, welcoming and inclusive environment. A model that has always taken participation from older people into account in building these strategies.

Beginning with this participation and involvement from the elderly, the public policies being promoted by Barcelona City Council have been aimed at encouraging active, healthy ageing for older people and at improving the well-being of those older people who are vulnerable due to dependency, isolation or very low levels of income.

The ‘Barcelona, age-friendly city’ project is a great opportunity to continue advancing in the same direction, and to do this within the context of a global network of cities that are seeking the same objective, namely, to create cities that will enable the elderly, in their diversity, to live with security, maintain their health and to participate in society fully; ultimately, cities that will facilitate and encourage the daily lives of people of all ages.

This is a project from older people and for older people, which seeks to continue building a city that considers the views and needs of the elderly, with the conviction that the proposals and ideas we put into practice will benefit everyone. This project seeks to cover all the spheres of life in the city, reflected in the eight dimensions that all the work is organised around: social and civic participation; mobility and transport, accessibility and the use of public and private spaces; housing; social and health services, mutual support and aid relations; respect, inequalities and conditions for inclusion and communication.

This publication includes the results of the extensive participatory process carried out in the forums for the elderly conducted in each district and in the 3rd Voices of the Elderly Convention that took place in March 2011, where the World Health Organisation awarded the city of Barcelona the accreditation recognising it as a member of the Global Network of Age-friendly Cities, with the commitment to improving by continuing to build a city for all ages, enabling greater participation and a better quality of life for the elderly.
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Age-friendly Cities is an initiative being promoted by the World Health Organisation (WHO). The WHO started the Global Network of Age-friendly Cities in 2005, incorporating cities from all five continents. It is an initiative at the crux of two key aspects of the 21st century: the ageing of the population and the process of urbanisation. It is estimated that by 2030, two-thirds of the world’s population will live in cities, and the population over the age 60 will surpass 25% of the total in the main urban areas of the developed world.

How is an age-friendly city defined? It is a city that enables older people, in their diversity, to live with security, maintain their health and to participate in society fully. The ideal city for the elderly places more emphasis on opportunities than barriers, and favours daily life for people of all ages.

The Age-friendly Cities project is aimed at promoting active ageing through actions that are defined within the different areas and situations of everyday life in the city. The active ageing paradigm, presented by the WHO in the Second World Assembly on Ageing held in Madrid in 2002, sets out that faced with the challenge of adapting societies to the ageing population, there must be collective action that includes older people in their diversity of life histories, conditions and interests.

What does remaining active in old age mean? In the active ageing paradigm, it means that people continue to participate in social, economic, cultural, spiritual and civic matters; therefore, ageing actively is not limited to the ability to stay physically active or to participate in the labour market. The chances of remaining active are strongly conditioned by the environment in which the people live: the environment, both natural and constructed, such as the relational environment and the services available as well, shape circumstances that can encourage or discourage the daily
life of the elderly and their involvement in the city. Consequently, involvement that promotes active ageing must focus on both the people and the systems.

**Government willingness and public participation**

Friendly Cities is an initiative that is based on two foundations: the willingness of the city’s government to identify and develop improvements in the different areas of municipal activity, and community participation, primarily led by older people.

In terms of municipal activities, this includes developing a design concept for a city open to diversity, to the idea that the needs of its inhabitants evolve over the course of their lives, and that they also change throughout the ageing process. A design concept that gives highest priority to people’s daily lives, emphasising spaces, movement, relationships, outlining daily life by combining something specific from a certain neighbourhood with what has become common in different parts of the city. Activities committed to involving systems must also be planned in line with this open concept of design. In consequence, this requires adopting an approach that both cuts across and connects the different units involved, in addition to involving a large number of agents. Because support for ageing actively increases when the activities in different areas are united, linked to each other.

In terms of participation, the elderly contribute their experiences in the city’s day-to-day and the reflections they make in various ways. They describe the situations, the spaces, the interactions, anything that is comfortable for them and anything that has become an obstacle, at the same time thinking about the reasons for this and coming up with suggestions. In other words, they undertake the role of active citizens, very much removed from the stereotypes of the elderly as a passive group that only generates costs. But it is not just older people that should participate. In describing daily life, there must also be participation by other people who have daily activities that allow them to advise about what is comfortable and what is an obstacle. As professionals, family or volunteers, these people contribute suggestions that are generated at very different times and situations within the day-to-day.

In the Age-friendly Cities project, the WHO establishes a working route for the cities who wish to form part of the global network. The route follows a cycle structured
into four phases. The first phase is planning, where participation mechanisms must be established to involve older people throughout the process, to comprehensively evaluate the city’s ‘friendliness’ and to establish a three-year action plan based on the results of the evaluation. The second phase is implementation, where the action plan must be presented to the WHO, and then it is implemented. The third phase is evaluating the progress, which entails presenting a report to the WHO that highlights progress in the indicators identified in the first phase. Finally, in the fourth ongoing improvement phase, evidence of the progress must be shown and a new action plan for the next five years must be defined. It is clear that being a member of the network requires ongoing commitment.

**Barcelona as member of the Global Network of Age-friendly Cities**

Barcelona has been part of the Global Network of Age-friendly Cities since earlier this year, along with other cities from around the world.

The most important part of the tasks corresponding to the planning phase has been developed out of the abovementioned cycle: the participation mechanisms have been established and implemented and the preparatory work for defining the action plan has been carried out. The tasks that have been carried out form a process that combines actions and research; that is, they combine the organisation of activities where people contribute their experiences with studying everything they have expressed, in addition to plans, programmes and municipal services.

This process has been created through cooperation, reflected in various ways. The first way is the cooperation between Barcelona City Council and the Elderly Advisory Council. The Barcelona, Age-friendly City project has been promoted by local government at the proposal of the Advisory Council. The second way concerns the involvement of municipal organisations; the commitment from local government is shown in the positive attitude of the municipal areas as a whole. Thirdly, the collaboration established with the Autonomous University of Barcelona’s Institut de l’Envelliment (Institute of Ageing) is of note, as the Institute has taken responsibility for designing the tools and activities for collecting and analysing data in the different sequences of the work process, as well as the subsequent preparation of the results.

The elderly in their diversity and alongside people who are involved in or close to their daily lives (professionals from different areas employed in various fields of activity, family carers, etc.) have participated in a series of activities on this path, all with a shared aim: to contribute to improving the city. Because a city that is more friendly to the elderly is also more friendly to all ages. Just think of the improvements to accessibility in public transport: they help older people with mobility problems, parents who are carrying pushchairs and people who use wheelchairs.
The Barcelona, Age-friendly City project delves deep into daily life and brings together the experiences of the elderly, focusing on eight dimensions:

- Social and civic participation
- Mobility and transport
- Accessibility and the use of public and private spaces
- Housing
- Social and health services
- Mutual support and aid relations
- Respect, inequalities and conditions for inclusion
- Communication and information

Each dimension includes many and varied day-to-day moments and scenes. The design of the ways to participate is particularly important as it enables people to be involved and facilitates them in expressing their contributions. These must be diverse and combine various methods and formats: large meetings, big and small groups, interviews, questionnaires. The variety of formats is necessary to incorporate the diversity that characterises older people as a group, as well as the contributions from family members and professionals. The contributions are later analysed as a whole in order to systematise the ideas, assessments and proposals – as with any research – which in this case forms part of a work programme based on the guidelines established by the WHO.

Of course, every city meets the guidelines set by the WHO in light of its own background. Barcelona has started from path it has forged over the years, which includes three fundamental components: the 2008-2011 Municipal Action Plan, the 2006-2010 Municipal Programme for the Elderly and the Voices of Barcelona’s Elderly conventions.

The 2008-2011 Municipal Action Plan structures public participation in city planning, incorporates local diversity through district plans and the commitment to develop the international dimension through connecting, exchanging and cooperating with other cities.

The 2006-2010 Municipal Programme for the Elderly is based on the WHO’s active ageing model and is committed to involving older people in the processes of building a city for all ages, in other words, an inclusive city. This is done through a very wide range of activities covering the different stages and situations of the ageing process, all incorporating involvement by different participants.

The Voices of Barcelona’s Elderly conventions, held every four years, bring together the participatory movement of the elderly, lead by the Elderly Advisory Council and the district councils, with support from the City Council. It should be pointed out that the Second Convention, held in 2007, emphasised a city model for all ages promoting active and healthy ageing, while it also shared with the convention held in 2004 the interest in extending opportunities for participation to more and more varied groups of older people.
Both the City Council’s action programmes and the space to work provided by the conventions are especially valuable in understanding Barcelona’s background in this area, where the commitment of local government and the Elderly Advisory Council is fundamental. While these provide information as to the starting point for the work done in order to be part of the Global Network of Age-friendly Cities, they also allow for understanding that the decision to join this network is completely in line with the work that has been done and will be done in future – the work required by the network – in two aspects: participating and planning.

In effect, the Barcelona, Age-friendly City project is a very good chance to strengthen participation by developing new opportunities where more older people are involved and where the diversity of the people who participate is increased as well, diversity in terms of their aspirations, situations and life circumstances. And at the same time, it also becomes a good opportunity because active ageing is thus consolidated as a central focus in local policies, reinforcing the connection between different municipal activities, as well as the lines of cooperation between the various agents.
This chapter presents the work process carried out as part of the Barcelona, Age-friendly City project, showing the approach adopted and the actions undertaken. The different sections detailing the first phase of the work cycle established by the WHO – the planning phase – show how participation has been set up and how the qualitative research has been carried out.

In Barcelona, the planning phase culminated with laying the foundations for the three-year action plan, defined as a result of the path established through the participation activities and analysis carried out on the data that was collected. The participatory process, systematisation of the information on the city and municipal activities and the work with the different municipal areas were all developed on this path, and are all elements on which the evaluation of the city’s friendliness is based.

The WHO has defined eight dimensions for encompassing the multiple aspects of older peoples’ daily lives:

- **Social and civic participation**: including participation through bodies such as councils, participation in activities of all kinds (training, leisure, volunteering, etc.), participation in city events and the labour force by the elderly.
- **Mobility and transport**: covering mobility in the city on foot as pedestrians and through using all types of public and private transport.
- **Accessibility and the use of public and private spaces**: including accessing and using outdoor spaces such as parks and squares and closed spaces, both public and private, such as shops and other services.
Housing: including the physical spaces where we live, as well as options for adapting homes to the needs that come with ageing and the different housing alternatives if it is not possible to remain at home.

Social and health services: including both the care received and the different social and health services. This also incorporates health and well-being from an overall perspective considering all the fields and environments from which it can be promoted.

Mutual support and aid relations: covering the support older people give and receive in their families, between friends and neighbours, in their neighbourhoods and the city.

Respect, inequalities and conditions for inclusion: including the respect given to the elderly by the other members of the public and the specific conditions that create inequalities and risk of exclusion for older people, such as dependency, poverty, sexual orientation and immigration, among other aspects.

Communication and information: covering all methods and means of communication and information, as well as the features that make them accessible, effective, understandable and aspects regarding proximity.

In terms of research activity, the qualitative methodology used allowed for noting that the dimensions are a point of entry for gathering and articulating the complexity that characterises the day-to-day. And what is most important: it allowed for the ties between the dimensions to be perceived; for example, it can be seen that respect is a relevant issue in the transport dimension and also in social and health services; that communication and information are key themes in the social participation dimension, in the same way they are key when people talk about support relations, which come up in talking about housing and also form part of what older people express when they recount some of their experiences regarding public spaces.

As a result, the dimensions constitute an organisational focus that acts as a guiding principle in the path of the Barcelona, Age-friendly City project, since they are used in the various activities that give it specific shape. The dimensions structure both the dynamics of the participatory process, as well as the systematisation of the documentary research and the analysis of the contributions generated in the participatory process. They are also used within the different groups involved in the work process undertaken: the elderly, professionals, family and volunteers, and also municipal leaders.

The dimensions, in addition to the qualitative research on the contributions from participants, define the tasks for the Age-friendly City project in any city that has the desire to become part of the network. But in Barcelona, these tasks have taken their own shape through two ways: first, because they embody the city’s background in terms of developing participation and local policies, and second, because the project’s activities are being incorporated into the action plan that is already underway. In other words, in Barcelona the work for the Age-friendly City project is not being developed as something
new and unfamiliar, separate or independent of the Municipal Programme for the Elderly or of the Advisory Council’s activity, and that is why this project is the main element of the 3rd Voices of the Elderly Convention, and why it is being developed within the agenda for action of the participatory movement for the elderly.

Within the activities designed by the Autonomous University of Barcelona’s Institute of Ageing as a whole, the priority has been to make them stimulating and to ensure they facilitate expression by everyone who is invited to participate in the different areas and contexts for participation. The activities carried out are described in the following pages, grouped into two sections. The first and more extensive section focused on the public, presents the activities where older people, family, professionals and volunteers have all participated, while the second section presents the activities where municipal leaders and experts have participated.

**Contributions from the elderly**

This section, which presents the participatory process where the elderly have been the main protagonists, details the activities in which they have participated, as well as other activities where family, professionals and volunteers have also participated. Information is provided here regarding the activities of the Elderly Advisory Council and the Municipal Council for Social Welfare (CMBS), the district forums, interviews and discussion groups, the project’s website and the 3rd Voices of the Elderly Convention.

**Elderly Advisory Council activities**

The Barcelona, Age-friendly City project was approved during the plenary session of the Elderly Advisory Council held on the 4th of November 2009, and has been part of the Council’s work programme in the periods 2009-10 and 2010-11.

At the start of the project, a work group was created within the Council dedicated to the Barcelona, Age-friendly City project. This group has undertaken the task of monitoring the design and development of the project, making proposals and assessing the work plans, while at the same time collaborating in carrying out participatory activities.

The participatory process began in March 2010, when the Elderly Advisory Council’s Forum was held, to which all its members were invited. This forum was developed in two sessions and 64 people attended. Each dimension was dealt with in groups, which included a professional from the Autonomous University of Barcelona’s Institute of Ageing to ensure dynamics. For each dimension, the group identified their concerns, what makes things easier for them and proposals for improvements based on the experiences, opinions and ideas of the elderly participants.
The Council, and members of the Barcelona, Age-friendly City Work Group in particular, also participated in the forums of the ten districts, presented below, which encouraged participation from the older people in each area, and where they also worked alongside members of each district council. Once the forums had been held, the Work Group followed up the work and the results from both the forums and all the activities that were carried out, and was also heavily involved in preparing the work dynamic for the Convention’s work areas.

The development of the Barcelona, Age-friendly City project was presented in the Standing Committee and in the plenary sessions of the Advisory Council that were held between November 2010 and February 2011.

However, the project has been developed with the ten district councils in two different ways: through presentation in plenary sessions, which brings together all the representatives from the institutions, and through meetings with advisers for the elderly.

**Municipal Council for Social Welfare activities**

The Elderly Work Group from the Municipal Council for Social Welfare has incorporated the project into the work programme for the periods 2009-10 and 2010-11. In May 2010, a forum was held where 25 people participated, working in two groups: one for older people and one for professionals. This session complemented by the contributions generated in the first forum that was held, where there was participation by members of the Elderly Advisory Council. In the 2010-11 work programme, the group dedicated a session to processing and reviewing the work area dynamics of the 3rd Voices of Barcelona’s Elderly Convention.

However, the Barcelona, Age-friendly City project was dealt with in the Municipal Council of Social Welfare’s Standing Committee. In April 2010 the work programme was reported in detail, and in April 2011 the results of the activity undertaken were presented.
District forums

Ten forums, one in every district, were held between June and November 2010. The forums involved the district councils and participation by 306 older people.

This initiative, designed to embody the rationale of proximity, encouraged participation and demonstrated the existing diversity (geographic, relational, lifestyles, etc.). It also facilitated involvement by people who often share some of the same nearby everyday surroundings, who recounted their experiences in using spaces, transport or services, encouraging similarities and differences to be expressed. Both of these aspects are in line with the project’s aim and reinforce the results, since they allow proposals to be related to everyday surroundings.

In these participation areas, following the same methodology applied in the Advisory Council forum, the older people expressed what they positively assess in their daily lives and what concerns them, while at the same time proposing specific changes that could make the day-to-day in Barcelona more pleasant, hospitable and comfortable. Working in groups, the older people reviewed what happens in each dimension of the project, accompanied by a debate leader to dynamise the group. In the ten forums, special emphasis was placed on identifying and building proposals for improvement together, proposals that encourage action to be taken.

The elderly have had a key role in identifying the elements of daily life in the city’s various neighbourhoods and also in reflecting on how to improve it.

The forums’ design has been confirmed as a good way to encourage interaction. They have effectively been a space for exchange between people that generally do not know each other, based on the experiences of their daily lives, and have provided support for the experiences shared that has fostered the creation of proposals. The group dynamics allow people to explain themselves and listen to the explanations of others, share information, visualise new elements regarding the topic at hand and to open up to new opinions. In doing this, participants have broadened their understanding of the surroundings in which they live and of the changes that are being proposed.
In consequence, the usefulness of the forums goes beyond stimulating and collecting input from older people based on their daily experiences. The forums have shown that they are a new way to participate in the city. It is in this group exercise that older people, in reviewing their experiences, identify the difficulties and strategies to deal with them and see themselves as the protagonists who give expression to their contribution in building the city.

**Interviews and discussion groups: listening to different voices in the city**

Holding interviews and discussion groups has demonstrated the principle that the initiative Barcelona, Age-friendly City is aimed at the elderly, recognising their diversity. In this respect, we have been able to learn about the day-to-day experiences of older people, some of whom live in particularly vulnerable conditions; people who were very unlikely to have gone to the district forum, and therefore voices that would not have been able to be heard. We have also brought together the experiences of people who are in direct contact with the elderly: family, professionals and volunteers. Therefore, interviews and/or discussion groups have been held with people who are dependants and are cared for at home and others who live in residences; the carers who are their family members; older homosexual men and women; older gypsy men and women; older immigrant men and women; and also professionals who do different work in the nearby surroundings.

**The Barcelona, Age-friendly City project’s website**

There has been a website at: [http://bcnamigagentgran.com/](http://bcnamigagentgran.com/) since the outset, which explains what the project consists of and how to participate in it. Furthermore, the website gives men and women of all ages the chance to evaluate the city’s friendliness in the context of the different dimensions, as well as to provide input.

It received 10,600 visits and 45 people answered the online questionnaire between May 2010 and April 2011.

**The Third Voices of the Elderly Convention**

The 3rd Convention, held in Barcelona on the 2nd and 3rd of March 2011, featured participation by 761 people and had the Barcelona, Age-friendly City project as its main focus.

At the opening ceremony – presided by the then-mayor of Barcelona, Mr Jordi Hereu, the deputy mayor for Social Action and Citizenship, Mr Ricard Gomà and the vice president of Elderly Advisory Council of Barcelona, Ms Mary Luz Eixarch – Mr John Beard, a representative from the WHO, awarded the city of Barcelona accreditation as a Member City of the Global Network of Age-Friendly Cities. Detailed information on the activity undertaken up to this accreditation was also shared in the plenary session.
Over the two days, participants were grouped into the eight work areas, one for each of the dimensions into which the project is structured. The approach applied in these participation areas was aimed at moving forward in building the work agenda of the participatory movement for the elderly, and to do this by encompassing two criteria to make the city more friendly for older people and for all ages: co-responsibility in the activities and in promoting involvement in various ways, through institutions, in groups and individually.

Each work area focused on one dimension and was structured into two parts, one based on presentations and the other dedicated to debate. The first part started with the presentation of the results from the forums by professionals from the Autonomous University of Barcelona’s Institute of Ageing. Second, older people who are members of the Elderly Advisory Council introduced that body’s activity on the subject specific to each of the dimensions, the initiatives that had started and the proposals. Third, various municipal leaders explained key aspects of the City Council’s courses of action and initiatives that illustrate the activities undertaken in different areas, then the older people presented experiences that have taken place in the various districts in the city as an example of participation by the elderly movement in response to the aspirations, interests and needs of older people. Later in the second part, the ways and means that older people consider suitable for advancing the ideas and proposals suggested throughout the participatory process were debated. Thus, this convention put the principle that older people are agents of change into practice once again.
Contributions from municipal professionals and experts

In addition to participation by older people, the Barcelona, Age-friendly City project also incorporates the internal perspective from within municipal organisations. The contributions from professionals responsible for planning and municipal management are key for addressing the city’s state of friendliness and the alternatives for improvement.

The method of participation designed for Barcelona is a work group made up of municipal leaders and experts. In January and February 2011, five groups were held where 39 professionals from 23 authorities and departments of Barcelona City Council participated.

The design of the work groups enabled participants, who came from different teams and fields, to delve deeper into the project. This initiative was designed taking into consideration the fact that participants must have the opportunity to learn about the contributions from the elderly in detail and to grasp their meaning, understood as a requirement as they could then make connections with the fields of activity where they undertake their professional duties. Starting from the defined work dynamic, the municipal leaders and experts developed various ways of addressing their task. They reviewed the systematised information about the city and municipal activities, and as a result they set out themes to incorporate or issues to expand upon and reflected on what the elderly had contributed in terms of priority situations and issues and the evaluations and proposals for improvement. They related these re-
Reflections to the municipal criteria for action and to current planning, sometimes referring to criteria or activities planned in previous periods.

However, the groups have served as a very important context for the work. The contributions from these professionals as a whole provided extremely useful criteria and information for putting together the city’s submission documentation, which along with the contributions from the public, form the evaluation of the city’s friendliness. And in terms of planning, they play a decisive role in advancing the overall approach to municipal planning required by the Barcelona, Age-friendly City project, a role that has two complementing aspects situated in two time horizons. In the first aspect, on the short-term horizon, we must consider that the contributions from the professionals who participated in the work groups provided useful elements of analysis and contrast for laying the foundations of the Action Plan for Barcelona, Age-Friendly City, the aim of which is for it to be used as a roadmap for municipal planning. And, in the second aspect, we must consider that the contributions from technicians and managers highlight the connections between the concerns and the aspirations of the elderly and the municipal principles and courses of action, and they present the conditions for putting the improvements into practice. The two aspects complement each other as a driving force for the systematic and articulated interventions that must characterise the municipal plan of action to be implemented in coming years.
BARCELONA, AGE-FRIENDLY CITY
This chapter explores the participatory process in greater detail and reveals the results of the research on the contributions that the elderly and other groups from the public have made. Following the eight dimensions that structure the project, the ideas, assessments and proposals that came up in the different participation areas are described. Before going into the different dimensions in detail, a series of data will be provided to give a snapshot of the ageing profile in Barcelona.

Currently, there are 334,273 people aged 65 and over in Barcelona, representing 20.5% of the population.

Barcelona has experienced fundamental changes in the structure and size of its population over the past thirty years. The 16-64 age group (potentially active) has remained stable throughout this period, the number of children has decreased considerably and the 65 and over age group has undergone huge growth.

The pyramid of ages for Barcelona, like for many other cities around us, reflects a strong presence of people aged 65 and over, 20.5% of the city’s total population. Despite the gradual increase in birth rates within the last decade, the population aged 0-14 still represents 12% of the population, far from the figure of 21.3% in 1981.

The number of people aged 65 and over has gone from 234,033 in 1981 to 334,273 in 2010, implying an increase of 40% and nearly 100,000 people in absolute terms. The total population of Barcelona decreased by around 9% during this period. Both trends explain the increase in the relative weight of older people on the city’s population, which has gone from 13.4% in 1981 to 20.5% in 2010.
The growth rate will tend to slow down over the next ten years. The current forecast states that the population aged 65 and over will reach 338,000 by 2015 and 344,273 in 2020, 3.2% more than at present, a much lower increase than the one that has taken place over the past two decades (17%).

The proportion of the population of more advanced ages has also increased noticeably over the past twenty years. In 1991, 45 out of every 100 people aged 65 and over were older than 75. In 2010, 55 out of every 100 people were older than 75.

People aged 65 and over and weight on the total population. 1981-2020

There are more older women than older men. Of the 334,273 people aged 65 and over who currently live in the city, 40% are men and 60% are women. As age increases, the relative presence of women also increases. If we consider the population aged 85 and over, women represent 72% of the total.

Around 50% of the population aged 65 and over that lives in the city were born outside Catalonia.

In terms of distribution in the city, the district with the most people aged 65 and over is Eixample, where 17.2% of the all older people in the city live. At the other extreme is Ciutat Vella, with 4.9% of the elderly population.

Horta-Guinardó and Nou Barris are the oldest districts, meaning the ones with the greatest proportions of older people: 22.52% and 22.54%, respectively. At the other extreme is Ciutat Vella, where older people represent 15.2% of the population.

In terms of the economic situation of the elderly, 24.1% of the population aged 65 and over stated they had incomes lower than the Public Revenue Index (IPREM) (532.51 euros) in 2010.

There are 7,526 recipients of non-contributory retirement pensions in the city, and 7,693 recipients of non-contributory disability pensions. 4.5% of the population aged 65 and over receive a non-contributory pension. In Ciutat Vella, this figure reaches 13.5%, while the lowest figure is in the district of Les Corts, with 2.5%. 64% of non-contributory pension recipients are women.

Regarding living situations, there have been significant changes in recent decades in terms of a decrease in the number of people per household and an increase in the number of people who live alone. This latter aspect is especially important when considering the elderly. In 1991, there were 54,054 people aged 65 and over who lived alone in Barcelona, 18.9% of the total for this group. In 2001, this number had grown to 75,359, representing 23.2% of older people. In 2010, there were now 85,494 people aged 65 and over living alone, so around 26% of older people live alone. 78.4% of people aged 65 and over who live alone are women. If we consider the population aged 80 and over who live alone, women represent 83%.

### Population aged 65 and over, and women aged 65 and over. Barcelona 2010

<table>
<thead>
<tr>
<th>District</th>
<th>Population aged 65 and over</th>
<th>Population aged 65 and over (district with respect to the city)</th>
<th>Population aged 65 and over/total population of the districts</th>
<th>Women aged 65 and over/population aged 65 and over</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ciutat Vella</td>
<td>16,286</td>
<td>4.9%</td>
<td>15.24%</td>
<td>60.45%</td>
</tr>
<tr>
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<td>21.77%</td>
<td>62.97%</td>
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<td>10.6%</td>
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<tr>
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</tr>
<tr>
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<tr>
<td><strong>Barcelona</strong></td>
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<td><strong>100.0%</strong></td>
<td><strong>20.50%</strong></td>
<td><strong>60.64%</strong></td>
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</table>

Ciutat Vella is the district showing the highest index of the population aged 65 and over who live alone, 32.5%. At the other extreme is Les Corts, where the index value for living alone is 22.4%. These two districts show the extreme values.

In Barcelona, 51.2% of people aged 65 and over do not have any type of dependency, 26.2% have a mild dependency, 10.7% a moderate dependency, 7.9% a serious dependency and 4% a severe dependency.

“...the district with the most people aged 65 and over is Eixample, where 17.2% of the all older people in the city live.”

There are more older women than older men. Of the 334,273 people aged 65 and over who currently live in the city, 40% are men and 60% are women.”

The city in the eight dimensions

In reading about each of the dimensions, it will become evident how older people have expressed their love for Barcelona in various ways, that they feel part of it and they value the path that had been built to make improvements in many areas (services for the elderly, transport, etc.). These expressions do not hide, however, concerns or unease at lack of civic-mindedness, worries about the decline of support that used to exist in neighbourhoods and also the feeling of less social cohesion due to the predominance of individualism.

It is clear that older people aspire to a Barcelona where people of all ages live together, where older people feel and are recognised as an important part of the public, are treated with respect and where their diversity, aspirations and particular needs are taken in account. They are especially worried about dependency and solitude because these can lead to risk of social exclusion. And they also express that, like the path that has been forged by all members of the public, the path that
remains to be built to improve Barcelona is also something for the elderly; they feel they can promote changes and put them into action through their families, the neighbourhoods where they live, the organisations and environments where they participate. At the same time, they defend the importance of the participatory processes and contributing their experiences and observations, because they understand that these processes contribute to achieving more cohesion and better responses to the aspirations and needs of the different generations.

The results from the research on the contributions are presented in the following pages, grouped into each of the eight dimensions. As we have described in the previous chapter, the dimensions complement each other, and therefore the contributions show ideas that are often related to two or more dimensions. Each dimension is organised into two parts.

The first part provides the results from the forums and different activities and shows the contributions generated in the different participatory sequences: a variety of moments and glances from both older people and professionals, family and volunteers. In order to facilitate reading, we have avoided mentioning all contributions that coincide from the different public groups involved in the participatory process.

The second part focuses on the 3rd Voices of the Elderly Convention and follows the eight work areas dedicated to each of the eight dimensions up until the conclusions and proposals are posed. It begins by presenting the main elements from the debates held during the Convention, where themes from the forums and the different activities undertaken come together with approaches from the projects conducted by the Elderly Advisory Council, particularly the “Living document on rights and liberties of dependent older people”, the “Declaration of the Elderly Advisory Council of Barcelona on the economic situation and risk of social exclusion for the elderly” and the “Recommendations from the Advisory Council on the treatment and participation of the elderly in the media”. Municipal activities are also illustrated that exemplify ongoing lines of work for each dimension, and experiences are introduced that have been developed in the city’s different districts, expressing the activity of the participatory movement for the elderly. Finally, the conclusions and proposals are presented that closed the 3rd Convention, which outline paths for demands and commitments to action.
Social and Civic Participation

Public contributions: qualitative research results

In the social and civic participation dimension, the senior citizens have said that is a city with lots of opportunities for participation. Participation by the elderly is a very rewarding experience, with benefits both for themselves and for the people around them: it affords protection against social isolation, enables training and self-fulfilment, makes people feel useful, provides well-being for others, strengthens community support networks and has a positive impact on the social image of senior citizens.

For example, the fact that an older person works with an organisation means that younger people no longer see old age as being an inactive time of life. It also enables other senior citizens to identify with this person and feel more able to have an impact on their surroundings.

The elderly, however, point out that people may find it hard to take the decision to participate and in particular to make a commitment. This can create frustration for the people who do participate and who often cannot find a way to reach the rest. Some of the most common barriers that restrict participation have been identified in the forums: firstly, doubts and insecurity about joining an organisation for fear of not having sufficient knowledge. As a result, elderly people say that newcomers need to be given a warm welcome and great care must be taken to ensure that they decide to continue. They also say that sometimes the allocation of excessive family responsibilities to the elderly reduces their chances of participating. Another barrier is the social vision of the elderly as passive people or consumers of activities instead of viewing them also as potential organisers. Furthermore, seniors in the Roma community say there are also issues related to cultural traditions that can lessen the chances of participation, as may be the case for elderly women gypsies. However, they also note that the growing trend is towards a gradual increase in participation.

Another major barrier to the participation of the elderly is the difficulty of circulating information about organisations and the opportunities that exist to take part in them. One of the most effective channels is informal communication (word of mouth),
since posters are often impersonal and do not usually attract attention while personal communication makes it possible to ask questions as the conversation progresses. The elderly also recommend using channels such as the Internet and blogs to publicise the activities run by the organisation since the number of senior citizens who are Internet users is rising.

Older people have set out many of the problems they encounter when getting new people to participate and they have also put forward ways to deal with them. They have stressed the responsibility of the organisations concerned to act rather than waiting for government to solve these problems. However, they also say that there are some issues that are the responsibility of institutions and should be tackled. These include the fact that it is often difficult for associations and groups to find venues where they can conduct activities and that moreover the management of public facilities is not always ideal; for example, sometimes there is not enough flexibility or coordination between districts in using public facilities.

In addition, they point out that there are some senior citizens who take part in associations, activities and centres that are not specifically for older people, something which demonstrates the diversity to be found among the elderly. Some seniors who participate in associations may require specific resources to accomplish their goals. The interviews with homosexual elderly men and women have given an illustrative example of this diversity, as these people say that often they are not sure they will be well received in clubs and centres for the elderly. Hence they may sometimes need specific organisational facilities in order to address the problems of people in the Lesbian, Gay, Bisexual and Transgender (LGBT) community. This does not mean setting up centres for the elderly that are exclusively for homosexuals, but it does entail providing rooms for LGBT meetings.

- **Participation of people with difficulties in daily life**

People with difficulties in daily life live in a situation that is virtually unknown to the rest of society. If it is usually hard to draw new people into participation projects, these people have to overcome even more obstacles to getting involved, ranging from architectural barriers to social isolation. Both the elderly as well as professionals in the sector say that mentoring by volunteers can greatly increase the chances of participation by people with dependency, for example ones who use a wheelchair and have difficulty travelling. They point out that this mentoring should be carried out not only by volunteer organisations but also by clubs and other centres for seniors.

Great care must be taken and an extra effort made to achieve the participation of people with difficulties. This is because it...
is more than likely that due to their living conditions they have a reduced interest in their surroundings. For example, the travelling difficulties experienced by people receiving home care mean they may no longer be interested in going to vote if the polling station is too far from their home or if there is no one willing to go with them.

Relatives, volunteers and professionals should encourage participation, paying particular attention to people with difficulties in daily life. Mutual aid groups also provide very useful support in these cases.

**Participation in old people’s homes**

As for people living in old people’s homes, it is also very likely that the conditions of their daily lives prevent them from getting actively involved in building their surroundings and do little to foster their participation in the decisions made about the operation of the home. Thus when there is limited participation on residents’ committees the reasons for it should be investigated rather than just waiting for the situation to change. It may be the case that people are under the impression that these are decision-making frameworks with little influence on the issues that concern them, or that they talk about organisational issues but not about the experiences of residents. In short, what is needed is quality participation.

“Great care must be taken and an extra effort made to achieve the participation of people with difficulties. This is because it is more than likely that due to their living conditions they have a reduced interest in their surroundings.”

It is also clear in the case of the elderly living in old people’s homes that the personal autonomy of dependent people needs to be promoted so they can take part in the home’s formal participation forums and also in decisions about everyday issues: for example, professionals should ask patients if they prefer to take their medication by themselves or would like some assistance, or if they want to review the meals timetable.

As for the activities run in the homes, some of the older people interviewed suggested that it should be the residents who choose the activities to be carried out, and that the staff in the home should be in charge of logistics management. This would mean activities would be more to the taste of residents (educational, enriching and not infantilising) as well as more appropriate and tailored to everyone’s possibilities (e.g.: those with eyesight problems cannot sew but they can paint, etc.). In general they say

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**Did you know that...?**

- Between 2004 and 2007 the number of old people who were members at senior centres and facilities increased significantly from 45,000 to nearly 49,000 users.
- Most of the people who did voluntary work with seniors were women (94% versus 6% of men), with voluntary work being the area featuring the most women and fewest men according to the Third Sector Yearbook 2009.
- Physical activity in leisure time decreases with age. In the Health Survey in 2006, 83.6% of men and 89% of women aged 65 or over said they did not do any physical exercise in their leisure time.
that there should be more, and more varied, activities and more staff: workshops led by well-trained people with suitable material.

Moreover, several proposals were made at the forums to encourage the involvement of the elderly in old people’s homes in activities in the city: making it easier for residents who have mobility difficulties to get out and to join in with activities, exporting activities from the centres for the elderly to neighbourhood old people’s homes and publicising neighbourhood activities more in the homes. With a view to strengthening these relationships, the elderly suggested stepping up coordination between all those involved, neighbourhood organisations and institutions.

## Participation in activities

Thanks to the strong network of associations in Barcelona and public facilities such as clubs and community centres, there is a wide and varied range of activities on offer. The activities, whether fun or educational, are important as they facilitate participation and promote social relationships. Lately, however, due to the increase in the number of people who would like to do them the number of places is insufficient and the waiting lists are too long. The seniors argued that the budget allocated to leisure, training and cultural activities should be increased. In addition, the price of these activities may be discriminatory since not everyone can afford the courses and outings offered.

On occasion, the topics chosen are not sufficiently attractive to the elderly. They feel that there should be more innovation in the types of activities offered so that they are less passive, with professional facilitators if necessary and about the issues that really concern the elderly. The seniors also expressed their interest in organising intergenerational activities, as this is a way of encouraging contact and joint participation by people in different age groups.

## Participation in senior centres

Centres for the elderly are a very important source of information for people in the neighbourhood; however, not everyone is aware of them. For this reason, seniors suggest increasing the visibility of centres for the elderly through more extensive contact and coordination with other local stakeholders: health centres, neighbourhood associations, civic centres, libraries, etc.

Another issue of interest to people at the centres is that the latter should increasingly be perceived more as a place where recreational or training expectations can be met. There is a perception that the relational and participation aspect has recently been pushed into the background. It may be the case that more individualistic values and overcrowding mean that there is no longer an atmosphere of closeness between people or as much involvement in the organisation of the centres. Seniors have repeatedly stressed that the specific needs of neighbourhoods, in terms of facilities where older people can participate by doing activities or getting involved organising them, must be met.
Finally, seniors value the good upkeep of municipal and private centres but place special emphasis on the need for more financial support for activities. In addition, the elderly have shown some concern about the fact that outsourcing management may reduce the participation of users in decision-making and encourage a more passive model. Sector professionals believe that the officers who promote and mentor participation in the centres should also provide education in the work of associations. In general, older people appreciate the presence of professionals who provide technical and logistical support, but sometimes they have the feeling of being under the tutelage of someone else.

**Civic and political participation**

This area is where the elderly identify a higher degree of resignation. They argue that the lack of information about the impact of participation in the institutional participation channels makes them feel they are not heard. Hence more information about the results of the activities of participation bodies is required to encourage civic engagement. Concern has again been expressed about the lack of seniors who want to be active in political parties.

They think it a pity that few people know the Advisory Council for the Elderly exists and what its functions are. There is a feeling that the councils have no influence and that the institutional representation of the elderly can be treated very superficially. They believe that more work should be done in groups in the districts, where people specifically deal with local issues they think are useful, to encourage involvement. In addition, they think there should be a greater presence of small organisations in the councils. They argue that the Advisory Council for the Elderly and the district councils can encourage increased interaction and cohesion between the different types of entities so they can work together.

“*They believe that more work should be done in groups in the districts, where people specifically deal with local issues they think are useful, to encourage involvement.*”

**Voluntary work**

Volunteering is very necessary to improve the wellbeing of people living alone or who need help to participate. However, the network of volunteers is still not strong enough. Professionals have found that in particular there is a lack of volunteers to assist in support and care for the elderly; many people consider it to be a kind of voluntary work which has low social prestige. Hence they believe the reciprocal benefits of voluntary work in supporting and helping the elderly should be promoted more.

More people need to get engaged in these projects, and the main ones that can attract new people are those who are already doing some kind of voluntary work. Institutions should also get involved more, providing facilities to organisations, identifying the people in need of assistance and promoting a culture of more pro-social values. Volunteers also need access to training and professional help with the tasks they carry out. It is stressed that there should be no mixing up of the responsibilities of volunteers and of professional carers and that their roles are complementary.

“*They argue that the Advisory Council for the Elderly and the district councils can encourage increased interaction and cohesion between the different types of entities so they can work together.*”
Paid work

The seniors said that working life should not necessarily end at 65. Several proposals have been put forward so that older people can continue working if they so wish: a flexible retirement age, doing occasional jobs related with the profession and activities they have had throughout their working lives, the possibility of earning income in spite of having a pension, or transferring professional knowledge acquired to young people in trade workshops, extra tutoring services, etc.

They also state that retirement is a very significant life change. Providing periods of preparation and adjustment to retirement would help make the change less abrupt. In addition, the elderly are concerned by cases where someone loses their job when aged around fifty, as they will find it hard to get another as they are too old but they are not yet entitled to retirement. In these cases employment policies with a more social perspective are needed (e.g., creating specific employment programmes to meet such situations).

The 3rd Convention: contributions and results

The debate about participation

How to promote social and civic participation by the elderly was discussed during the debate in the Convention’s workspace. The options put forward included drawing up a list of the reasons and interests that older people may have that would encourage them to get involved. Several suggestions were made for working in this area: organising discussion groups to bring out the reasons for participating based on personal experiences, installing mailboxes in centres for the elderly so that volunteers can write down the reasons that lead them to participate, publicising through blogs and local media, etc. The need to encourage men in particular to participate and do voluntary work was also noted, because usually it is women who are more involved.

The debate also noted the need to promote a type of voluntary work that helps people with difficulties in daily life to take part (e.g., being accompanied to the centre for the elderly, motivation to become involved, etc.). As there are people who are willing to help others to participate, ways must be found to support these individual initiatives, for example by providing free transport or creating groups of volunteers in the centres for the elderly to carry out this task. Mention was also made of the possibility of increasing the exchange of positive experiences among the various districts.

The documents drawn up for the Third Convention by the Advisory Council for the Elderly also refer to the issue of participation on a number of occasions. The "Open
Document about the Rights and Freedoms of the Dependent Elderly” argues that professionals working in care and support services and the relatives of dependent elderly people must respect their dignity, integrity and autonomy and encourage their participation and independence. It also notes that the participation of families in the care of dependent elderly people must be encouraged and facilitated in day centres and residential institutions.

Moreover, the paper “Recommendations about the Treatment and Participation of Older People in the Media” urges the elderly to get involved in the defence of the right to be treated with respect by the media either through organisations or on their own initiative, and also to participate actively in the construction of a social image of older people in the media that is more positive and closer to reality.

**Municipal activities and experiences**

This section sets out the municipal activities and experiences presented at the Third “Voices of the Elderly” Convention. These examples show how this dimension is reflected in municipal planning and initiatives deployed by the organisations and groups where older people participate. Taken together they reveal various aspects of cooperation between government and citizens.

In terms of participation, the Municipal Citizen Participation Master Plan is an example of global planning to upgrade opportunities for participation based on a review of the experience of participation over thirty years. Participation in services for the elderly, the second municipal action to be presented, gives a detailed report about the specific channels for participation that are currently available to the elderly.

The two projects presented, ‘University Sharing’ and ‘Volunteers in Centres’, include examples of how seniors take part through group work. In the former, participation takes the shape of interaction between seniors and university students in which both generations give and receive. Meanwhile, ‘Volunteers in Centres’ sets out the building of a voluntary work project based on the introduction of the new model of municipal centres together with the specific goals it seeks to achieve.

**The Municipal Citizen Participation Master Plan**

Since 1979 Barcelona City Council’s policy, as presented by Glòria Meler, has been to recognise and make effective the right of citizens to participate in the mapping out of public policies by contributing their views based on their knowledge and experience. The City Council has the responsibility of taking what it views to be the best decisions with the participation of citizens. It is also required to report what it has finally decided and how the contributions of the public have been taken into account.
After more than thirty years of experience in participation, it was time to share this experience, review it and commit to improving it. In all these years there has not been such a serious discussion about participation in Barcelona as the one that took place when drawing up the Municipal Citizen Participation Master Plan.

The Plan is one of the measures proposed in the Municipal Action Plan 2007-2011 and sets out objectives for the period 2010-2015. It was approved last October by the City Council with a broad political consensus.

The Advisory Council for the Elderly and senior citizen committees in the districts are part of the participation structure operating in Barcelona: 18 city boards, 310 district boards and 200 assorted forums (public hearings, processes, plans, commissions, etc.). It is a very complex structure to understand and operate properly. Resources are limited and our duty is to use them to the best benefit of citizens. This is why most of the objectives put forward in the Plan are to do with improving the operation of existing components.

The Plan is a commitment and also an opportunity for participation to really become an essential cornerstone in enhancing the government-citizen relationship, the delivery of services and community living in the city.

For example, one of the measures in the Plan is the Participation Agenda, which is a summary of the activities that take place sponsored by the City Council to promote public participation in matters of public interest. This agenda will help to increase public awareness of the boards and other participation forums and also improve coordination between them.

**Did you know that...?**

- Figures in the Third Sector Yearbook 2009 show that organisations helping the elderly had the largest numbers of volunteers.
- Since the start-up of the Municipal Senior Centres and Facilities Improvement Plan in 2007, 14 centres and facilities for seniors have been built in Barcelona and another 10 have been refurbished.
- In 2006 11% of municipal sports centre members were aged over 65.
Barcelona, Age-Friendly City

Barcelona City Council approved the “Scheme for the Operation of Housing with Services” and the “Scheme for the Operation of Centres and Facilities for the Elderly”, which include guidelines for implementing participation in these facilities.

The participation of users in services refers to both services that are delivered in facilities as well as those provided at home.

Thus participation in the Home Help Service includes the right of older people to be informed and participate in their care plan, the recommendations of the participation boards, satisfaction surveys and the complaints and suggestions system. It is similar to provisions for the participation of older people in residential centres, which include: the right to be informed and participate in their care [maintaining decision-making capacity], the representation of users and family members on the board of the centre, participation in centre activities, satisfaction surveys and the complaints and suggestions system. Participation also takes place in residential centres through the centre’s board that is made up of centre managers, a secretary, two members of the managing organisation, two centre employees (at least one in direct care), four users, a relative or a member of the relatives’ association, and a local government officer.

As for housing with services for the elderly, the system of internal procedures provides that participation includes the creation of a board of residents (composed of a chairman and two members) and the right to participate in centre activities, to be informed and participate in their care plan, and the carrying out of satisfaction surveys and the complaints and suggestions system.

The system for municipal centres and facilities for the elderly fosters democratic, plural, joint and egalitarian participatory activities with shared responsibility, significantly increases the number of people involved in management/decision-making processes, recognises the role of volunteers and guarantees the generational handover and the training necessary to assume management tasks. The principles on which it is based are: everyone takes part on an equal footing, responsibilities are shared and there are no superiors, decisions must be taken with the maximum consensus, the activity committees are responsible for the smooth running of activities, management committee decisions must be respected by everyone, and participation should ensure a balance between personal and group interests.
In short, participation is understood as a right whose exercise calls for information and training or support as well as taking into consideration the importance of motivation.

Senior citizens can participate as users of services as well as through their contributions in the various kinds of community action. Community development plans, group care provided by the social services and networks for charitable exchange all run a variety of schemes for participation in the city.

**University Sharing**

The Faculty of Psychology at the University of Barcelona, in conjunction with the Sants-Montjuïc Seniors Programme, runs a four-day seminar for second year Psychology students. Pura Hidalgo and Víctor Pérez stated that its goals are: to promote intergenerational relationships in order to acquire a broad, flexible and critical vision of aging and youth and the conjugation between past and present, and connect new social and moral values with tradition, origins with the future and history experienced with social changes.

The seminars are attended by senior citizens from the Cotxeres de Sants Municipal Centre and university students. The project is divided into two parts. The first part takes place at the Faculty and consists of sessions at which a range of topics are discussed. The second part takes place at the Cotxeres Centre and the sessions feature sewing, cold cooking and laughter therapy workshops and ballroom and country dancing. Finally, all participants (old and young alike) evaluate the activity in writing. These evaluations amply demonstrate that the elderly, in addition to increasing their self-esteem and losing their fear of rejection by the young, can contribute things and can also receive. As for the students, many of the stereotypes about older people fade away when both groups are brought together and mutual assistance is encouraged based on respect and freedom.

**Volunteers in centres**

This project has been run by the Directorate of Services for People (Horta-Guinardó District) and seniors from the Baix Guinardó, Horta and Vall d’Hebron municipal centres take part in it.

The project began three years ago with the introduction of the new centre model at three centres in the district. Estrella Hernández and Paula García explained that each centre had a new facility featuring many possibilities for doing activities. As a result a team of volunteers had to be

**Did you know that...?**

- The Barcelona educational project declaration seeks to expand lifelong training opportunities and provide a creative leisure offering that is suitable for all ages.

- Barcelona is an educational city and hence urban planning needs to include measures against the segregation of people from different generations and cultures who can learn a lot from each other.
set up who, together with the facilitators and people providing information, would ensure the centre management committee and activities committees have the participation required by the new model and the knowledge and skills of members, some of whom offered to be voluntary workshop leaders or to support the organisation of the centre, is used. In lockstep the facilitators and the officer from the Directorate of Services for People developed a volunteer project including induction for volunteers, monitoring volunteer staff and the activities they carry out and recognition for their contributions to the smooth running of the centre (training, celebrations, etc.).

The project’s main goal is getting seniors at the three centres to play an active role in the operation of the facility involving personal commitment and responsibility. Through taking part in this project, volunteers are trained and develop skills in teamwork that is non-hierarchical but shared out across committees to help with organisation. The goals have largely been achieved, and since 2008 the number of volunteers has more than doubled at the three centres involved.

Conclusions and proposals for the future

Senior citizens play a very active role in the city’s associations, either by joining general or specific associations or organisations for the elderly when they start having more free time or alternatively by stepping up their involvement in organisations in which they have taken part throughout their lives.

The participation of the elderly has been a very important area for the Advisory Council as has been reflected in the three conventions, and is the basis for the “Barcelona, friend of the elderly” project.

Old people’s organisations, like most organisations, face the challenge of strengthening existing voluntary work and recognising the change in and diversity of motivations and interests of the people with respect to doing a voluntary activity.

Proposals from the public, expressed at different times in the participatory process and during the 3rd Convention, outline courses of action for developing the Barcelona, Age-friendly City project, courses in which involvement of older people is key. The following points set out a wide range of actions to be carried out:
Promote social and civic participation among the elderly by conveying the message “Benefit from taking part” so that people can see the variety of reasons for participating, using innovative strategies and methodologies and having the Advisory Council of the Elderly and district councils across the city sponsor a campaign. This campaign could include, inter alia, a competition about the reasons for taking part and the reasons for not doing so.

Tackle the challenge of encouraging people who have retired or taken early retirement to participate in all kinds of associations, including senior centres, and the challenge of enabling vulnerable people to take part.

Promote voluntary work that fosters participation under the slogan “Get involved and get them involved!” and provide advice, training and monitoring for the volunteers.

Enhance the ability to bring in new volunteers, and learn how to manage volunteers so as not to overload or discourage seniors who want to help. This year is the European Year of Volunteering and this should be used as a promotional tool.

Promote the recognition and visibility of the work of all seniors involved in all kinds of organisations and find mechanisms to facilitate their activities, such as for example transport.
In the dimension of Mobility and Transport, the elderly have talked about mobility as pedestrians, as users of public transport and as users of private transport. On the other hand, the professionals have also stated that the assistance tasks undertaken by some volunteers are fundamental for facilitating and enabling mobility for people with difficulties; in this respect, it would be interesting to further encourage a culture of assisting people with difficulties that we may encounter on the street, even if only sporadically.

**Pedestrian mobility**

Older people have referred to the aspects of streets that hinder or facilitate getting around the city on foot. Pavements have been one of the main topics of debate: it is noted that they must be wide enough to guarantee the safety and comfort of pedestrians. Sometimes pavement upkeep is insufficient; this leads to potholes and puddles that can increase the risk of falling. Containers are sometimes placed in such a way that they hinder passage and also make visibility difficult at pedestrian crossings. Burying waste is an initiative that has been very well received. Older people feel especially vulnerable on pavements when vehicles use it inappropriately (e.g. driving and parking scooters). This puts more wear on the pavement and reduces mobility for people with difficulties.

In terms of pavements and pedestrianised areas, carers have explained that the bollards preventing vehicular access to some streets hinder ambulance access when this is necessary or urgent. They believe there should be a better regulating mechanism for these situations, for example, speeding up the process of lowering the bollards in case of emergency. On the other hand, in terms of ambulances, carers explain that this means of transport has a very medicinal look that often scares or further disorients people with dementia when they are in a crisis situation; perhaps a more normal means of transport would be better in these cases.

The gradual introduction of ramps at pedestrian crossings is assessed very posi-
tively, but a way to prevent slipping when it rains should be incorporated as well. A proposal for increasing the safety of pedestrian crossings is to post signs at the bottom that show the direction of traffic, in order to indicate which way to look before crossing the street. Regarding traffic lights, it was frequently mentioned that crossing times are sometimes too short, and that a good solution are traffic lights with countdown timers.

In terms of street signs, older people explain they need a sign with the street name in order to orientate themselves, as well as needing to see the building numbers clearly. Other elements that facilitate orientation are neighbourhood maps and signs with arrows for streets and places of interest.

One of the main mobility problems on the pavement indicated by older people is the inappropriate use of bicycles. There is a lack of cycle lanes, and little awareness about the insecurity older people feel when people cycle on the pavement or without respecting traffic signals. Older people and professionals are in favour of improving road safety education and knowledge of the rights and duties of pedestrians and cyclists, as well as providing cycle lanes throughout the city, marked with reflective bollards and good signage for dangerous areas. In addition, the route must interfere with pedestrian routes as little as possible (e.g. the cycle lane must not go between the bus at the bus stop). On the other hand, it has also been pointed out that bicycles are a means of transport that can help reduce pollution in the city a great deal.

Using public transport

Public transport in Barcelona is highly valued by the elderly; the network is extensive and well-connected, in addition to recently having increased comfort and accessibility. Public transport that is efficient and economic can be key in preventing isolation for older people. Some people believe the price of public transport in the city is too high, in spite of existing discounts for the elderly. It has also been mentioned that there are many points on the Transports Metropolitans de Barcelona (TMB) public transportation network that are still not accessible for everyone, which is especially true for people with reduced mobility and also carers of people with a certain degree of dependency. On the other hand, well-equipped means of transport usually have less frequent services, so waiting times can be very long.

Older people have made various proposals for improving communication about information on public transport. The Transports Metropolitans de Barcelona website [www.tmb.cat] is very useful, but information about timetables and transport must also be made available to customers on
Public transport that is efficient and economic can be key in preventing isolation for older people.

paper (guides, brochures, etc.), since not everyone has internet access. In general, written communications should use a larger font as reading can be very difficult. Furthermore, it is suggested that generalised information on routes and connections should be provided inside buses. The possibility of installing touchscreens (like a GPS) at stops has also been raised, so that people can find out which route to take to their desired destination.

In talking about civic attitudes on public transport, older people have shown they are very bothered and disappointed by the lack of regard given to reserved seats. Some ways of dealing with this would be: loudspeaker announcements, notices from the conductor and also for the elderly themselves to be more involved in defending their rights. Another issue that has been stressed is the feeling of insecurity at night and weekends. An increase in security personnel has been suggested to cover these times.

Buses

This is a preferred means of transport for older people. The network provides an extensive service, but sometimes the frequency of certain bus services is not good enough. This particularly occurs on holidays and at the weekend, which are just the days when people are more likely to go out to do leisure activities. It would also be good to add more buses to the beach in summertime and also more to the Bus-Nit nighttime network (which currently has waiting times that are too long). Older people are particularly satisfied with the neighbourhood bus services: it is more familiar and the bus goes nearly everywhere. However, buses also come less frequently than they would like. Inside buses, key factors for preventing falls include sensitivity from the driver in avoiding heavy braking and good positioning of points for holding on to and preventing losing balance.

In terms of bus stops, there are some aspects that are fundamental for older people: shelters and providing seats are mentioned most. Signs with waiting times are also considered very useful. Finally, platforms that stick out from the pavement are a very effective solution for facilitating access to the bus; otherwise, sometimes the pavement is too far from the door and older people have difficulty accessing it. This issue is also important for people with mobility difficulties: there are still buses that do not have access ramps. The professionals consulted were in favour of encouraging the custom of helping the elderly get on to buses when it is difficult for them to do so on their own.
Tram

The tram is a means of transport that is much appreciated by older people, since it has good accessibility, the interior is comfortable and it comes frequently. Furthermore, it has a smoother ride that sets it apart from buses. Older people are in favour of expanding the tram lines to connect the two extremes of the city, but also carrying out an accurate study of the route to avoid major interference with road traffic.

Trains (FGC and Renfe)

It is highly valued that the stops are in good condition and there may be benches to sit on. However, there are often too many steps and few lifts. There must be good accessibility in all stations. The height of the steps onto Renfe trains is a particular problem: many older people have stopped using this service for this reason. Mobile steps should be used to solve this problem. On the other hand, this issue has been resolved very well in FGC trains. Finally, the elderly suggest installing toilets in commuter trains and at stops, since urinary incontinence is a fairly common problem that merits special attention.

Underground (Metro)

The underground is a fast, well-connected transport system with good frequency, although the branching structure of the lines sometimes makes it go around too much. It is hoped that the new underground lines will alleviate this problem.

Crowding causes various problems during rush hour: the platforms are too narrow and getting on and off the train generates insecurity in older people. If the waiting times in stations were a bit more in line with the number of people, the elderly would feel more calm in these situations. In addition, there are many people who do not consider ways to make people’s movement easier during rush hour (e.g. staying to the right on the stairs). They believe slow/fast lane systems could be installed.

Did you know...

- In the scope of its competences, Barcelona City Council works to guarantee access for people with reduced mobility to the range of cultural, sporting and recreational events on offer, and, generally, to guarantee access to participatory coexistence in the community.
- The pedestrian route of any street undergoing new development or improvements must have an unobstructed passageway of at least 0.9 m.
- In 2006, older people gave public transport a 7.3 on a scale from 0-10, with a 7 for intermunicipal public transport and a 6.4 for the tarmac, so there are still things to be improved.
to regulate movement, especially in stations with lots of stairs, narrow corridors or long transfers.

In terms of accessibility, older people are not happy there are still stations that have not been adapted, and that instead, other changes have been prioritised that were not as necessary (e.g. installing automatic walkways). They stress the importance of escalators (both down and up) and lifts, as well as appropriate signage for indicating where disabled exits can be found. Older people commend the height of the platforms and the installation of ramps at some carriage doors.

**Taxis**

Taxis are a comfortable and fast public service, but too expensive, especially when they charge a night or luggage supplement. In addition, according to the carers who were interviewed, it must be taken into account that people with more mobility difficulties are often the ones who need taxi services most, since the bus and underground are still not sufficiently adapted. Many suggestions were made during the forums to reduce the costs of taxi journeys, for example applying reduced tariffs for older people. Personal experiences were expressed in the forums where the driver did not know the streets well or used a longer route than was necessary.

Furthermore, despite being public transport, taxis do not always have adequate accessibility. Older people and carers have explained that the back doors are particularly narrow, and many taxi drivers do not make the effort to help the person get into the car. There are also cases where drivers do not stop for older people with mobility difficulties who need the taxi. Older people stress the need to complain when these cases of abuse or poor service take place. The professionals have felt the number of taxis adapted for older people should be increased, for example providing facilities for drivers who intend to commit to improving the accessibility of their vehicles. They also propose the creation of a special telephone line for adapted taxis, and the advisability of making it as easy as possible to use this type of taxi by applying the same criteria that are used for people with disabilities of other ages.

Older people have proposed installing benches and shelters at some taxi ranks, since there are often no taxis on rainy days so people have to wait a while. These ranks can be especially useful in areas close to hospitals or public buildings.

**Private transport**

The vast majority of older people consulted have shown themselves to be more partial to public transport than private, for environmental reasons (noise and air pollution), among others. In fact, many of the proposals suggested are aimed at reducing the use of cars: increasing taxes on the most polluting vehicles, reducing speed limits within the city centre, paying fees for driving cars into the city, building car
parks in the main entryways into Barcelona and encouraging the use of intercity public transport.

Another aspect mentioned by older people is the lack of car parks in the city. For this reason, carers have expressed particular concern over the difficulties involved in applying for a parking badge for people with disabilities; they have proposed that this should be given automatically to anyone with a grade II or III dependency.

The 3rd Convention: contributions and results

■ The debate on mobility and transport

The possibilities for improving mobility and transport so they are more adapted to the needs of older people were debated in the Convention’s work area. One way of starting the debate would be the older people describing the difficult situations encountered daily when getting around the city and on the various means of transport. Another noted aim was the job of making drivers, pedestrians and the public in general aware of the needs of the elderly in terms of mobility and transport. In addition, it should be considered how the issue of the elderly themselves defending their rights when these are not respected can be promoted; to facilitate this, there could be more awareness about what means the elderly have available to them to deal with situations where their rights have been violated on public transport.

The Elderly Advisor Council also referred to the issue of transport and mobility in the “Declaration on the economic situation and risk of social exclusion for the elderly”; in this document, the Council calls for expanding the income criteria for accessing the free and reduced Targeta Rosa (Pink Card), and for the transport tariffs for holders of the reduced Targeta Rosa to be frozen. They also call for continuing the process of reducing architectural barriers in public buildings, on the street and on public transport.

■ Municipal activities and experiences

This section details the municipal activities and experiences presented at the 3rd Voices of the Elderly Convention. These are examples that give evidence as to how this dimension is encompassed in municipal planning and in the initiatives developed by the organisations and groups where older people participate. Overall, they reveal var-

Did you know...

- The information within buses to indicate the route is called SIU (Sistem d’Informació a l’Usuari, or User Information System) and TMB is introducing it throughout its bus fleet.
- The ticket validation machines on buses give audio and visual messages to facilitate ticket validation for people with visual or hearing difficulties.
- One of the advantages of the underground for people with reduced mobility is the fact that there is no height difference between the platform and the train and, in addition, there are spaces reserved for wheelchairs.
ious aspects of the cooperation between local government and the public.

The Mobility and Transport presentation introduces the structure of the Mobility Plan. Based on the principle of guaranteeing the right to mobility regardless of economic and physical condition, the plan is broken down in measures related to pedestrians, bicycles, public transport, goods and private vehicles, modes that have been at the centre of many of the contributions collected throughout the participatory process, and are also the focus of the themes dealing with the two experiences presented. The Mobility, Coexistence and Safety prevention campaign is based on an approach where it is key for people to improve their ability to protect themselves, an idea that the elderly have highlighted repeatedly; while in terms of the TMB Universal Accessibility Plan, in addition to realising the development of solutions to the barriers, employee awareness activities are also being carried out and a way to realise the two types of activities demanded by the elderly and family carers in many of the proposals made is illustrated.

Mobility and transport

Barcelona’s mobility model is developed in the city’s 2006-2012 Urban Mobility Plan, and is based on the Mobility Act (2003) and the Sustainable Mobility Plan, as well as including a participatory organisation, the Mobility Pact. It is based on a principle of guaranteeing the right to mobility regardless of economic and physical condition.

Carles López describes how the plan is organised into four areas of activity: safe mobility in consideration of living sustainability (reducing traffic accidents and the effects of pollution); sustainable mobility in consideration of environmental sustainability: minimising effects on the environment (Kyoto Protocol; more accessibility with less impact); fair mobility in consideration of social sustainability (guarantee the right to mobility, regardless of financial ability and physical condition of the person and universal accessibility) and efficient mobility in consideration of economic sustainability (using each type of transport in the ideal area).

The model establishes a hierarchy based on types of transport: 1) pedestrian; 2) bicycle; 3) public transport; 4) goods and 5) private vehicles.

There are a number of noteworthy activities: 1) general improvements to pedestrian spaces: widening pavements, pedestrian zone conversions, defining minimum widths, street furnishings (benches, bollards, railings, etc.); 2) general improvements to accessibility: dropped kerbs for pedestrians, mechanical escalators and lifts; 3) elements for improving road safety: traffic calming measures (30 zones, installing speed humps), location of containers at pedestrian crossings, new types of containers, on pavements (cycle lanes and scooter parking on the road), pedestrian/cyclist coexistence in the Traffic Ordinance and orientation elements (informative signage for pedestrians).

Accessibility regarding buses has improved a great deal: 100% of buses have
low floors at the same height as stops and for access platforms.

The main lines of improvement are aimed at: increasing commercial speed (bus lanes with priority traffic lights, etc.), accurate design for neighbourhood services (routes and frequencies) and information channels for the service and ticket sales.

Regarding the underground, there has been a general increase in accessibility in stations and trains. The main lines of improvement are aimed at reducing the problems resulting from crowding on certain lines and during particular time periods through extensions, which are already in progress, and promoting measures regarding the perception of safety and fraud.

**Prevention campaign: mobility, coexistence and safety**

Barcelona’s city police force, the Guàrdia Urbana along with its firefighters, have held a series of informative sessions on prevention aimed at the elderly and people who have recently come to the city within the context of the prevention campaign. Estefania Molina explains that these sessions include a first part, Mobility, Coexistence and Safety, that consists of three sections: “Move aware”, “We all live together” and “Safety at hand”. The second part is called Protecting Yourself at Home: close the door to the fire and the firefighters will take care of it. In addition, informative material is provided at every session: brochures with personal safety advice and magnets with emergency telephone numbers.

**Did you know...**

- Buses have a ramp to make getting on and off easier for people in wheelchairs; they have a low platform, specific places with belts for anchoring wheelchairs and buttons at a lower height.

- During 2009 and 2010, Barcelona developed the city’s stop plan with the aim of rearranging all the elements found at stops that prevented accessibility. This plan was implemented at 1,800 stops and detailed the appropriate stopping point, signage for the exit door for people with visual impairment and the elimination of obstacles at the height of the wheelchair boarding door.

- People with reduced mobility and parking badges have the right to park in blue zones, green zones, loading and unloading zones for free and without any time limit.
This project seeks to achieve various aims: to be able to know yourself, accept yourself and protect yourself, for the public to see the area of mobility in an environment that entails risk and to consider what the safest way of getting around the city is. On the other hand, it also seeks public reflection our role as transmitters of knowledge to the children in our care and to consider the importance of changes in attitude as a condition for improving coexistence in the city. Finally, this project also seeks to recall advice and recommendations for improving personal safety.

Transports Metropolitans de Barcelona’s Universal Accessibility Master Plan

This project seeks to improve travelling conditions for everyone and poses solutions from a “design for everyone” perspective. Maite Peris suggests the concept of accessibility refers to the entire population. Accessibility is dealt with both internally, in the form of employee awareness, as well as externally, when developing solutions to physical and mental barriers.

These aims are realised through a series of actions divided into three groups: projects for buses, projects for the underground and corporate projects. In terms of bus projects, more precise access ramps for getting on and off the vehicle are being installed, the information and communication technology is being improved (info-accessibility) and standards are being established for managing emergency situations in case of travellers with special needs. As for underground projects, the aims are to minimise the space between the platform and the train, to adapt routing for people with visual difficulties, to ensure good lift performance, to improve info-accessibility and to increase civil protection. Corporate projects seek to promote awareness of diversity among TMB staff, to improve labelling, signage and information elements according to universal accessibility criteria and, finally, to approach topics such as full accessibility in TMB workplaces.
Conclusions and proposals for the future

Mobility and transport are two fundamental aspects for the smooth running of the city and quality of life of all members of the public, and for both reasons it is key to continue promoting the use of public transport. For older persons, mobility is an essential element for retaining their autonomy and independence.

In recent years, many improvements have been made in accessibility and communication that facilitate the use of public transport. Despite these improvements, there are still aspects regarding accessibility that hinder the mobility of older people, especially those with reduced mobility.

Proposals from the public, expressed at different times in the participatory process and during the 3rd Convention, outline courses of action for developing the Barcelona, Age-friendly City project, courses in which involvement of older people is key. The following points illustrate a wide range of actions to be developed:

- To progress in improving mobility and transport so they are more adapted to the needs of older people: “mobility, respect and safety must go hand in hand.”
- Continuing to improve the accessibility of all public transport in the city, especially underground transport, and to increase the frequency of services, especially at the weekend.
- To review the financial criteria for accessing the scheme and to incorporate commuter transport into the Targeta Rosa as an element to facilitate mobility for the elderly.
- To make drivers, pedestrians and the public as a whole aware of the needs of the elderly, in the same way that the elderly themselves must be made aware in order to defend their rights in new forms and new ways.
Accessibility and the use of spaces and buildings

Public contributions: qualitative research results

Older people have dealt with very diverse issues in the dimension Accessibility and the Use of Spaces and Buildings, referring to both public and private spaces. One of the aspects that worries older people when they plan on doing something is not knowing whether there is good accessibility where they are planning to go. For example, some experiences illustrate how people wanting to go to the cinema have had to go back home because the premises was not adapted. Another frequent situation is where someone in a wheelchair wants to go into a park, but there are no indications anywhere of where the adapted entrances are. For this reason, it is not only important that as many places as possible are adapted to the specific needs of everyone, but that there also must be information in this respect.

Open public spaces

Regarding outdoor spaces, older people value green areas very much. They are concerned that there are few open spaces in the city available to everyone, since they believe these must be reclaimed as spaces for social interaction. Older people like parks and gardens because they are places where different generations can intermingle. In addition, they can be used as recreational and cultural spaces: children’s areas, table games, exercising, resting, public events, etc. Older people believe a park is well-equipped when it has green or garden areas, sufficient benches, water fountains, public toilets, a playground, a bar and an area to shelter from the weather (e.g. a shelter for protection from the rain or sun). However, a recurring theme in all the district forums has been park maintenance and cleaning, which are frequently considered insufficient. Furthermore, they have also expressed the lack of security they sometimes feel in these spaces.

The older people and carers interviewed have also comprehensively discussed the use of streets as a public space, and they have pointed out many of the barriers frequently found there: poorly placed pav-
ing stones, ramps that are slippery when it rains or are too steep to be able to go down them in wheelchairs, big puddles, pedestrian crossings that have not been adapted or are not well-signposted, lack of benches, doors without numbers or corners without street names, etc. On the other hand, they also believe that sometimes misuse of the pavement makes life difficult for people with reduced mobility. Some of the most frequently mentioned examples are streets that are too narrow for wheelchairs, unloading lorries parked on the pavement, bicycles riding on the pavement, pavement cafés taking up more space than permitted and roadworks that temporarily block passageways. The professionals suggest that whenever there are roadworks, rough information should be provided about the expected end date, that way older people can plan to avoid going through areas where accessibility is poor during works.

Suitable furniture in public spaces can make it easier for older people to go out. For example, free public toilets: at the moment there are not very many and they are usually quite dirty. One proposal is to not only install them on public roads, but also at train and underground stations, since sometimes the routes are too long for an elderly person. Benches are also important: they allow for resting and meeting (although individual benches usually hinder communication between older people). They stress the importance of benches with ergonomics adapted to the mobility difficulties that some people have: they must be a suitable height, allow for back support and have bars on the sides to provide arm support and enable standing up more easily. It is important that there are enough benches on the street, and this aspect is especially important in areas where there are more older people (areas of the city with more older inhabitants and close to housing with services for the elderly, health centres and other facilities such as markets, etc.).

In terms of trees, older people feel they sometimes hinder visibility of signs and posters, and they also affect lighting at nighttime. The roots sometimes lift up the pavement, and the holes where trees are planted can sometimes cause falls if they are not covered well.

Dogs in public spaces is also a topic of debate. The existence of areas equipped for dogs is highly valued: the dog toilet (“pipicán”) is one example, although hygiene in these areas is usually poor. Older people 

“...it is not only important that as many places as possible are adapted to the specific needs of everyone, but that there also must be information in this respect.”
point out the importance of holding animal owners accountable so they are responsible, in order to preserve the tidiness of public spaces and prevent risk situations (attacks, falls).

- **Public buildings**

As for public buildings, both older people and the professionals complain that there are still public facilities that are not accessible for everyone: lack of chairs in waiting rooms, stairs without a railing or doors that open in a single direction are some of the barriers that they have come across most often. However, they value the efforts made over recent years by institutions that have been aimed at improving these issues.

In terms of government buildings, older people believe the City Council offices are more accessible than the Generalitat offices. Inside buildings, they appreciate when there are sufficient seats while queueing, as well as numbering systems.

Reference has also been made to public libraries: in general, they find there are not enough, and the opening hours should be extended. However, they consider the cultural offering to be good and that they are treated very well and personally. They appreciate the existence of the lending service and value the possibility of extending the home book delivery and collection system for people with reduced mobility.

Older people highly value that there are discounts for museums and other cultural centres for the elderly, for example with the Targeta Rosa. However, they believe that visits to emblematic buildings and museums should be free in general. They also believe there must be more information for learning about the cultural offerings provided by the city. Some districts need more civic centres.

- **Private spaces: shops and services**

In terms of privately-owned buildings, older people express that frequently there is not

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**Did you know...**

- In 2006, in conjunction with the International Year of Trade, the Municipal Institute of People with Disabilities (IMD) conducted an awareness campaign for improving the accessibility of small shops in order to encourage their owners.

- There is a demand for the book delivery and collection system in libraries for people with reduced mobility.

- There is a quality manual for works that establishes a quality standard and provides general criteria for action in terms of accessibility criteria that works must comply with.
sufficient awareness of the specific problems of people with reduced mobility. For example, there must be more efforts to improve accessibility: reduce architectural barriers and equip shops and bank branches with rest areas. They propose the creation of an Age-friendly Establishment category to easily identify any places that take older people’s needs into consideration.

In the interviews with older people who live alone, they have mentioned a specific aspect about the size of packaged foods on sale in shops; they usually come in 2-3 portion sizes, which often means they go off or meals have to be repeated. They have also explained that it is sometimes difficult to understand the bills they receive at home (electricity, gas, etc.) or the transactions in their bankbooks, and they often need help from family or people they trust to understand them; therefore bills and bank documentation must be sufficiently understandable.

In terms of shops, older people generally prefer neighbourhood shops, since they are usually treated better and more personally there. Sometimes employees and cashiers pay special attention to the needs of older people and they help them count their money or take products from higher shelves. On the other hand, there are also people who do not respect the pace of older people or people with difficulties.

In both shops and supermarkets, they stress the importance of having products at an average height for easy access, prices are clearly visible and aisles that are wide enough to pass through with a trolley or walker. As pointed out by some of the people interviewed who receive home care, these issues are particularly relevant for people with difficulties in daily life. They also mention the issue of home deliveries: they feel that older people should benefit from this service without having to pay when they have low pensions, and that this service should be extended to small shops (not just supermarkets).

The 3rd Convention: contributions and results

The debate on accessibility and the use of spaces and buildings

In the debate held at the Convention’s work areas, it was discussed how organisations for the elderly can promote the use of parks and other outdoor spaces for doing activities there. One of the initiatives that was considered is related to workshops on healthy ageing organised by elderly centres; for example, by doing physical activities in a nearby park where both workshop attendees and people who are inspired to join in can participate. There were also ideas that link physical activity with the relationship between generations: for example, organisations and gyms organising an annual outdoor...
activity that brings young people, adults and older people together. Linking culture to the use of public spaces can also be a way of bringing older people to parks: from excursions to organised lectures on poems and other literary genres.

Improvements in neighbourhood shops to make them more adapted to the needs of the elderly were also noted at the work area. Older people can identify what shops must do to make their daily lives easier and thus begin to work in creating the Age-friendly Establishments brand for shops, bars, offices and other establishments. In order to achieve this, it is not only important that the Elderly Advisory Council and associations cooperate with the City Council and retail organisations, it is also necessary to make shops aware so they are more adapted to the needs of older people.

In terms of the documents of the Elderly Advisory Council presented at the 3rd Convention, the “Living document on rights and liberties of dependent older people” refers the to right for society to be aware of and sensitive to the difficulties of dependent older people. For society to be sensitive to their difficulties by means of improving accessibility to the city’s spaces and services, as many people have expressed in the various participation contexts.

**Municipal activities and experiences**

This section details the municipal activities and experiences presented at the 3rd Voices of the Elderly Convention. These are examples that give evidence as to how this dimension is encompassed in municipal planning and in the initiatives developed by the organisations and groups where older people participate. Overall, they reveal various aspects of the cooperation between local government and the public.

Both the Green Strategic Plan and the Safety Plan are two examples of municipal courses of action that include new problems and challenges. The two plans cover very diverse aspects in their aims and in the interventions designed to achieve them. New uses for parks or the development of participation activities are topics that have been discussed by the elderly, at the same time as it must be ensured is that both parks and squares are spaces for interaction between people. The “Physical activity and company in parks” and “Urban

“Linking culture to the use of public spaces can also be a way of bringing older people to parks: from excursions to organised lectures on poems and other literary genres.”
gardens” illustrate new ways for people to interact with the unbuilt environment. The former also shows older people’s capacity for response and the latter evidences the multitude of benefits – individual, group or collective – that an activity can generate.

The Green Strategic Plan

Barcelona is a city where the population demands more green as a basic aspect of quality of life. Montse Rivero suggests that new problems or challenges emerge: conservation of biodiversity, climate change, at the same time as a different social demand. Therefore there must be a new conceptual framework that understands the city’s green system as a first-rate ecological and social infrastructure. A conceptual framework that includes: management and maintenance, greenness in the region, communication and education, historical and regional diversity, social and health aspects, composition, structure and green ecological services.

The provisional scope of the plan has long-term aims (twenty years) and actions to be developed within the next 5-10 years.

The Green Strategic Plan’s participation process relies on various agents: institutions (environmental and social), the economic sector (liberal companies, associations, professionals), experts (universities, professional schools, research centres) and other authorities (Provincial Council of Barcelona, Generalitat de Catalunya, Barcelona Metropolitan Area); representing the City Council is the Environment Area, other municipal departments and areas, as well as other municipal councils. The aims of this participatory process are to share in identifying current urban green spaces, agreeing on long-term aims and gathering proposals for preparing the action plan (5-10 years).

The strategic lines set out by the different dimensions of the Plan are:

- Planning green spaces to increase their presence, looking for balanced distribution.
- Improving connectivity through green corridors.
- Designing green spaces considering their environmental services and integrating the risks resulting from climate change.
- Promoting the use and enjoyment of gardens, responding to new public uses.

Did you know...

- Construction on the first recreational areas for dogs began in 2005. By the end of 2010, there were 120 areas of dogs, almost half of which are recreational areas, with a total area of 28,287 m².
- Trees extract 5,000 net tonnes of CO2 and 305 tonnes of local air pollutants every year in Barcelona.
- The five tree species that have become part of the city’s identity are banana (in Eixample), orange (since medieval times), date palm, cypress and pine.
- Creating opportunities for interaction and participation in conserving green spaces.
- Preserving and valuing the historic heritage of gardens.
- Conserving and improving natural heritage and biodiversity.
- Managing green spaces with efficiency and sustainability criteria.
- Promoting information, training and working online regarding the value of green heritage.
- Improving knowledge about green.

**Barcelona Safety Plan 2009-2011**

The Safety Plan is a tool for planning public policies for public safety in the city as a whole and in its districts, where Elena Moss indicates that four strategic areas have been identified in relation to insecurity and the challenges of public safety in Barcelona. These areas are: the perception of safety in urban areas; coexistence, uses of public space and safety; prevention and control of criminal activity and local management of public safety.

In terms of the area of coexistence, uses of public space and safety, there are different courses of action: 1) preserving public space as a place of coexistence with respect to dignity and the rights of others and the existing diversity in Barcelona; 2) facilitating free access and enjoyment of streets, parks, squares and spaces to meet and interact and 3) identifying and managing conflicts of coexistence that arise from the use of public spaces before a safety issue occurs.

**Did you know...**

- According to public perception and evaluation, green spaces are the spaces that make the city human, that give it personality, generate a sense of belonging, provide variation, break up the characteristic grey infrastructure and socialise.
- One course of action in the Green Strategic Plan is to promote the use and enjoyment of parks and gardens, responding to new public uses and preparing a plan for social uses, adapting spaces to new needs, undertaking dynamising activities, improving them with leisure and health facilities and installing public toilets in the parks.
Actions to promote coexistence in public spaces that have been carried out include the following: advising about the rights and rules of coexistence, promoting responsible neighbourship, encouraging the role of schools as a confluence of public creation, in addition to cultural and sporting activities, and promoting coexistence through partnership and public participation. The Plan also includes actions to improve peaceful coexistence between vehicles and pedestrians through education for respectful and safe mobility, initiatives to increase safety around educational institutions, as well as measures to reduce accidents. Conflicts of coexistence are also a work aim of the Plan. Shared identification systems for conflicts of coexistence are being promoted under the criteria of identifying and managing conflicts of coexistence in the use of public spaces before a safety issue occurs.

As for managing conflicts of coexistence, different criteria are being developed: dissuasive presence in the proximity of any spaces with a greater likelihood of concentrating conflicts of coexistence or insecurity, public co-responsibility in preventing and managing conflicts, the penalty system and conflict management services.

**Physical activity and company in parks**

This is an scheme promoted by the Elderly Volunteers Group, and also involving the Nou Barris District Elderly Committee.

Given the lack of space in houses, Amparo Cid explains that a group of people decided to do gymnastics led by a professional in a park near their homes. Over time, and due to meeting every day, they have ended up forming an interrelated group. Since then, the activity has gone beyond simple physical exercise and has become a group and social interaction activity. Not only does it improve the physical and mental health of the elderly, it also promotes awareness and confidence among attendees, and furthermore, the elderly in the neighbourhood are doing new, different activities.

**Barcelona Urban Gardens Network**

This is a scheme promoted by Barcelona City Council’s Environment Area.

The project seeks to incorporate older people into environmental improvement activities through growing garden produce according to the principles of biological agriculture. Paquita Surribas explains that this involves small plots of land between 25 and 40 m² that are awarded by competition to people aged 65 and over who are registered in the district where the garden is located. Participation in the urban gardens not only improves the quality of life of the gardeners through physical activity, but also facilitates the creation of a network of new relationships between them. Furthermore, the urban gardens also benefit the city as a whole: they form new green spaces, and they are used to promote environmental education by holding activities with schools, which also strengthens inter-generational coexistence.
Conclusions and proposals for the future

Space for public use is space for all the public to coexist. The configuration of urban space and the elements that make it up determine the things that older people can use it for. Barcelona has important architectural heritage and many identifying symbols linked to street furniture. Efforts must be made to preserve them.

The Elderly Advisory Council values the city’s transformation effort to make it more accessible, more green, more beautiful and more friendly for everyone very positively. The conversion of streets into pedestrian areas is a good measure for reclaiming a quieter and cleaner public space.

The public’s proposals, expressed at different times in the participatory process and during the 3rd Convention, outline courses of action for developing the Barcelona, Age-friendly City project, courses in which involvement of older people is key. The following points illustrate a wide range of actions to be developed:

- Guaranteeing that renovation of public space is aware of both aesthetics and function, and that it creates neighbourhood identity; with comfortable, good-looking street furniture and suitably equipped with services (toilets, benches).
- Continuing improving accessibility to public spaces, eliminating stairs and inclines as far as possible by installing lifts, mechanical walkways or escalators.
- Working resolutely to prevent accidents involving older people in public roadways by improving the condition of the pavement and making pedestrian rights compatible with the use of bicycles, while ensuring a comfortable and safe public space for older people.
- Promoting the use of parks and other outdoor spaces with cultural and physical activity initiatives: “Outdoor culture and exercise make ageing healthier”.
- Working to make neighbourhood shops more adapted to the needs of older people under the slogan “Shops and establishments that make life more comfortable”.

Resident contributions: findings of the qualitative research

In the housing dimension, the elderly have drawn attention to one of the characteristic problems of Barcelona city: land constraints and the subsequent need to control property speculation and empty flats that are unusable or in disrepair. The elderly also feel that a strong emphasis is placed on the difficulties of housing access for young people, while some elderly people also have specific needs that need to be addressed and are not always given enough importance. In this regard, they consider subsidised and assisted housing, together with financial aid for minor household reforms, as very positive measures. However, there is a rather widespread feeling that the budget is insufficient, that the information on the financial aid does not reach everybody and that administrative procedures and long waiting lists often pose a major barrier. The elderly also have a high regard for the guidance and advice given by the housing offices in each district.

“...the elderly also have a high regard for the guidance and advice offered by the housing offices in the different districts.”

Conditions for access to flats and their features

One of the main impediments to housing access for the elderly is the financial condition; pensions are often very low, especially among the elderly, and rents are too high (as is the case when contracts are renewed). This issue is too important to ignore, so they suggest giving priority to financial grants and reducing waiting times to prevent elderly people from finding themselves in a state of helplessness.

The lack of public places in social housing, assisted housing and homes is a matter of great concern for the elderly. These services have a very important function that is difficult to cover in other ways. They see the difference between the number of public places available and the number of ap-
Barcelona, Age-Friendly City

Applications that remain on the waiting list as very disturbing. For the elderly, it is important that places are allocated not by a draw or on the basis of financial issues, but that they also take into account the functional independence of the applicant. For example, elderly people regret that the criteria are sometimes not sufficiently flexible and that the specific features of individual cases are not taken into account. Moreover, many people are not aware of the information needed to begin these procedures. The information on the services that can be requested and the relevant advisory services needs to be more widely available. Lastly, the forums highlighted a common concern for the location of assisted and social housing and nursing homes: attention has been drawn to the importance of the fact that all these housing options are located as close as possible to the neighbourhood of the applicant...

Some professionals have also mentioned cases in which neighbourhood relocation was seen as an opportunity.

On the subject of housing options, senior citizens referred several times to programmes seen as alternatives. These included Llars compartides (Shared Households) and the Viure i conviure (Living Together) programme. They consider these initiatives to be very attractive but not well known. Hence, the Council ought to extend and spread knowledge of these programmes and introduce new projects inspired by the principles underpinning them.

Ageing at home: accessibility and reforms

Elderly people usually prefer to grow old in their homes. This means that grants for adapting flats are very important to these groups, given that they determine the dif-

Did you know...

- 73% of over-65s own the home in which they live, while 22.1% live in rented housing and, of these, 24.8% live in housing built before 1900.

- Several studies indicate that adapting the homes of people with disabilities contributes both to a reduction in their personal care needs and to improved self-esteem and satisfaction.

- One of the main actions in terms of accessibility is a considerable increase in grants for the installation of lifts; from 2008 to 2010, lifts were installed in 710 buildings, which has benefited the residents of 10,350 flats.
The forums regarded programmes such as home adaptation programmes as very positive, but the widespread ignorance of this public aid was also noted. The need to increase the budgets for these services was also mentioned.

Another aspect mentioned during the discussions is that it is often harder for the middle classes to make the necessary adaptations to their flats: their financial status is not sufficiently unfavourable for them to qualify for grants, but they do not have the money to pay for them out of their own pockets. In these cases, elderly people believe that it is necessary to revise the criteria used to award grants and to consider the creation of low-interest government loans for the elderly middle classes.

Regarding the reform of common areas in blocks of flats, it was noted that poor accessibility to the building can have a major impact on everyday life. The structural barriers most often mentioned included the impossibility of installing a lift in the building, heavy doors at building entrances, steps without ramps, steps that are too high or narrow, and ramps or stairs without handrails. Undoubtedly, the issue of most concern for the elderly is the absence of lifts, as this can lead to serious and unnecessary situations of isolation. In general, the subsidised installation of lifts is prioritised as a solution. However, it is not uncommon for flat owners or residents of the building to wash their hands of the situation and fail to give their support to the initiative. Under current legislation, a simple majority is required to approve a reform in the building. Hence, elderly people consider that this requirement should be made more flexible when it comes to a basic need for any of its residents. Another option is that this factor be taken into account in the criteria for allocating flats within the framework of social housing. Some elderly people indicated an interest in the possibility of exchanging assets for Council-run assisted housing or the creation of other options (public or private) to allow people whose income is too high to access assisted housing in order to take advantage of this resource.

In terms of reforms inside flats, elderly people expressed concern for the numbers of people who pay for these adaptations out of their own pockets, either because they were denied a grant or because they did not know that they existed. Hence, they consider that more awareness campaigns are needed to inform people about the public aid.
services they can apply for. Another problematic situation mentioned in relation to flat refurbishment is where the owner puts up resistance; some elderly people believe that it ought to be possible to carry out major works to adapt the residence for personal safety reasons even when the landlord is opposed to them. The City Council should also conduct regular inspections of the interiors of rented flats to check the safety of the structures and other basic elements such as pipes, leaks, poor ventilation and the lack of basic facilities (shower, toilet, heating, lift).

On the subject of accessibility, professionals also stressed the need for more information on support products to facilitate mobility and housing use. One of the lines of improvement they suggest is to prioritise the occupation of lower floors by the elderly, to create a stock of emergency social housing by encouraging the initiative of non-profit organisations and to ensure monitoring by the social services for elderly people with housing problems.

“Those who live in nursing homes have noted how important it is for the lifts in facilities where older people receive care to be wide enough to accommodate several wheelchairs in order to facilitate the movement of people with mobility difficulties.”

Carers have drawn attention to the fact that bathroom doors are often too narrow for wheelchairs. Elderly homosexuals have described the shared housing initiative implemented from time to time for people with HIV who are at a high risk of exclusion when they are left homeless.

Those who live in nursing homes have noted how important it is for the lifts in facilities where older people receive care to be wide enough to accommodate several wheelchairs in order to facilitate the movement of people with mobility difficulties.

There is a clear concern among people living alone at home who receive home care services that their rent will be increased following home improvements and necessary changes such as the adaptation of bathrooms or the installation of lifts. As a result, many elderly people do not begin these reforms. They also mention the importance of being aware that the Housing Offices offer information on the rights of citizens in relation to these issues.

There is an interest in creating supervised shared flats for people who need care all day long.

The group of elderly homosexuals and the group of carers concur with the contributions made in the forums and ask that flat sharing be encouraged among older people. There is also an interest in creating supervised shared flats for people who need care all day long. This would prevent the isolation of dependent people living alone; a
professional carer could care for a number of people without having to making multiple trips and it could be arranged in large flats in Barcelona that are currently empty or occupied by elderly people who live alone and are interested in this initiative.

One last point mentioned by the elderly in relation to growing old at home concerns the measures that could be taken to prevent falls. In general, there is a lack of information on what people can do to prevent falls and adapt their homes; the elderly believe that this advice should be spread and a good way to do so would be to give talks at centres for the elderly.

Safety in the home

The elderly also discussed safety in the home, observing that they would like more information on how to prevent robberies and fires. They suggest that this could be done by hosting more talks with police officers and fire-fighters. They also believe that it would be very useful for people with mobility difficulties to be able to make complaints from their homes, since it is not always easy for them to get to a police station to do so.

Another recurring issue in the forums related to the conflict of interests that sometimes arises between tenants and their landlords. They believe that the mediation of another person could help the parties to reach a compromise. This figure would also be useful in disputes between residents in a building.

The biggest type of conflict with landlords or property managers is property harassment. This is a problem for the elderly that is made worse because they often do not know that the situation they are in is illegal or illegitimate. The prevailing view in the forums is that there are major obstacles to reporting cases of property harassment, so the work that can be done by the Housing Offices or the Bar Association programme, which offers assistance in these situations, is considered positive. Neighbours and family also play an important role in helping elderly people address abuse from landlords and report situations of injustice.

The 3rd Convention: contributions and results

The housing debate

The workspace of the Convention on housing discussed improving the dissemination of housing information among the elderly under the title “Adapt your home and make your life safer and more comfortable!”. The initiative proposes that organisations for the elderly find out about available aid and hold talks on the subject. The individual experience of elderly people who have adapted their homes is that it allows them to go about their day-to-day lives better. The aim, therefore, is to encourage the elderly to do things to make their homes safer and more comfortable, such as raising awareness of measures to prevent falls in the home. In the discussion, mention was made of the fact that active groups in residences should take responsibility for disseminating this information; there was also an interest in creating a network among organisations to share information on housing. Other aspects mentioned were the effectiveness of word of mouth for spreading information, the importance of information that has been adapted and does not generate mistrust, and the difficulties in raising interest in and increasing attendance at the informative talks already being held. It was also pointed out that dissemination
is limited, especially with regard to safety issues. Intergenerational cohabitation has sparked interest and the need to determine the mechanisms guaranteeing its smooth operation has been noted.

The Senior Citizens Advisory Council has made reference to several housing issues in the documents it presented at the Third Convention. The “Open document on the rights and freedoms of the dependent elderly” covers the right to choose where one lives – where this is possible and desired – and to have access to quality care services in the vicinity that may be required from time to time.

Likewise, in the “Declaration of the Senior Citizens Advisory Council of Barcelona on the financial situation and risk of social exclusion of the elderly”, the Council includes a section on housing. In this section, it makes a number of requests of Barcelona City Council: to continue to construct new housing developments with services for the elderly; to increase the funding for adapting housing to the needs of dependent people or those with limited mobility in order to improve the quality of life of older people in their homes; to make the procedures for the awarding of assistance for the payment of rents more flexible and for these to take effect quickly, and to continue supporting elderly people who are victims of property harassment.

Moreover, the Advisory Council has actively participated in designing and monitoring the implementation of the Assisted Housing Plan and has sat on the Assessment and Admissions Committee since its constitution.

- Municipal actions and experiences

This section describes the municipal actions and experiences presented at the Third Convention “Voices of the Elderly”. They are examples of how this dimension is reflected in the municipal planning and in the initiatives implemented by organisations and groups in which elderly people participate. Overall, they reveal diverse aspects of cooperation between government and citizens.

In the housing dimension, it was decided to describe the various programmes underway, assisted housing, grant programmes for the installation of lifts and improved accessibility. These programmes combine initiatives specifically for the elderly with others aimed at citizens in general, which is also a feature of municipal actions in other areas.
The three experiences described offer three approaches to addressing the hopes and concerns expressed by older people in relation to housing: “Let’s get out” highlights the capacity of communities for helping elderly people living in isolation in their homes because the building does not have a lift, the Joan Torras Assisted Housing Plan is a prime example of how to encourage adaptation and integration in new environments, new housing and, very often, new neighbourhoods, while “Intergenerational housing blocks” is based on the premise of encouraging contact between different generations applied to the design of spaces.

**Housing and the elderly**

The actions of Barcelona City Council in housing matters, described by Lluís Fajarí, are based on two lines: a focus on the specific housing demands of the elderly, adequate housing adapted to capabilities through assisted housing, and improved living conditions and accessibility through diverse initiatives, such as grants for the rehabilitation and adaptation of interiors or the lift installation programme.

Flats in the assisted housing system have a useful area of 40-42 m² (bedroom, living room, kitchen and adapted bathroom), with common areas and community facilities on the ground floor. The Barcelona Municipal Housing Board develops and manages the blocks of flats and the Social Action and Citizenship Department of the City Council is responsible for the management of the services. There are general services (reception, cleaning and maintenance of common areas, laundry facilities, registration for services, subscription to the care line), social support (individual social care, assistance in the use of neighbourhood resources and help with procedures) and personal support according to conditions and demand (monthly cleaning, odd jobs, personal care). The initiative is addressed at over-65s who are independent in their daily activities but who require housing or have issues with accessibility or living at home and have an annual income of less than 2.5 times the IPREM (public revenue index), which is €24,604.43. Flats are awarded on a points basis and the contract is for use and residence.

The programme of grants for the installation of lifts includes financial assistance, legal and technical advice, and collaboration with the installers. It applies to all blocks in which a lift can technically be installed without having a major effect on the structure of the building (6,851 buildings).

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**Did you know...**

- In 2010, 281 assisted flats were made available for elderly residents, thus making a total of 1,210 flats in the city.

- Under the Barcelona Housing Plan 2008-2016, the construction of assisted housing for the elderly will continue, with the development of some 2,000 flats with these characteristics.

- The role of the Integrated Housing Office Network is to manage funding for rehabilitation, social housing access, rent subsidies, housing pools and support for issues related to private housing.
Other programmes have the goal of improving living conditions and accessibility. These include the removal of structural barriers to improve access to the building and its common areas, and the elimination of slopes and the programme for the adaptation of interiors, as part of the Home Care Services (removal of barriers, adaptation of facilities, elimination of damp, refurbishment of sanitary ware, etc.). The purpose of this initiative is to guarantee the basic adaptation of housing to the over-65s, people with limited autonomy, the disabled, people on low incomes, and those who cannot be cared for by their families.

The city has a Housing Office Network, which is an information and management point for all housing issues (entry in the Applicants Register, rehabilitation grants, rental assistance, information and legal advice on rental agreements, mediation and monitoring of possible cases of property harassment, etc.).

Let’s get out. Community Plan of Poble-Sec

The “Let’s get out” experience was implemented as part of the Community Plan of Poble-Sec with the support of the Coordinator of Organisations of Poble Sec, specifically the commissions for Health and the Elderly. The project received funding from the Public Health Agency of Barcelona, UNNIM’s Social Projects programme and from the Generalitat of Catalonia.

In the Poble-Sec neighbourhood, there are 300 elderly people living alone in physical isolation in their homes, in blocks of flats without a lift. How can these residents resume any social activity in their environment? As explained by Elvira Cerro, Eduard Garcia and Eva Galofré, in order to address this situation, the commissions for Health and the Elderly of the Community Plan of Poble-Sec use the home care census of health facilities to implement the “Let’s get out” project. The initiative is aimed primarily at getting to know these people, who have been unable to leave the house for six months or more, and secondly, to create bonds of trust in order to get them to participate in weekly group outings in the company of volunteers and other elderly people.

The organisations and individuals involved, which include professionals and volunteers, work together on coordinated joint actions to achieve this aim. They host group outings with volunteers once the professionals have picked up the individuals from their homes and helped them down the stairs using a stair lift and adapted transport service. They also make regular follow-up visits and telephone calls.

The project, currently in the consolidation phase, has been carried out under the Catalan Neighbourhood Improvement Law and is included in the Neighbourhood Health Programme of the Public Health Agency, which has confirmed the benefits of the project for its participants and launched similar initiatives in other parts of the city.

Indeed, the community plans are being shaped as an excellent way of promoting
the implementation of innovative actions that are often “micro” in nature, accompanied by a strong rooting in the environment; this feature adds to the positive effects of the initiative for older people: their increased visibility.

**Joan Torras Assisted Housing Plan and participatory entities**

This is an experience launched by Barcelona City Council. The organisation responsible for its management is the Association of Welfare and Development.

The neighbourhood integration plan seeks to put an end to the isolation and social stigma often attached to the elderly. Magdalena Alum and Carolina Caral explain that assisted housing has two aims: firstly, it improves the immediate environment of its elderly users, guaranteeing decent housing conditions and revitalising common areas, and secondly, it stimulates the conditions of the immediate environment by encouraging coexistence and social cohesion. It also promotes better relations with the neighbourhood in common areas around the themes of culture, leisure, sport and health, among other areas, and in accordance with the Action Plan of the District of Sant Andreu.

The three phases of this plan are: 1) the acceptance phase, both for the service and for the neighbourhood; 2) the adaptation phase, which includes accompanying residents where necessary to use the network of resources in their area (medical facilities, bank, chemist, markets, social services...), and 3) the integration phase, where residents use the services and participate in the everyday life and programmes of activities of the neighbourhood.

To encourage the participation of housing residents in these activities, the Association of Welfare and Development – the organisation that manages the facility – holds talks and workshops for the whole community, as well as outings and celebrations. The housing residents also participate in community initiatives.

**Intergenerational housing blocks**

This experience was launched by the Federation of Catalan Organisations of Senior Citizens, Women and Families with the support of the Sol Verd SCCL cooperative, the Iser Foundation and the J. Valiente Pulido Foundation – Protective Community Action for Ageing.

The aim of the project is to outline and disseminate housing projects based on criteria that will encourage relationships between their users through common areas and other elements that can be used jointly by the users of the housing and individuals of different generations. As explained by Eduard García, the common areas and the

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**Did you know...**

- Financial assistance is available for vulnerable groups for the payment of rent or for assistance with accommodation.
- The Housing Plan 2008-2016 will continue the actions to prevent property harassment and overcrowding and to promote the use of empty housing and ensure compliance with the obligation of repair and maintenance.
distribution and characteristics of the housing and services are regarded as key elements. It is therefore important to plan and encourage the development of residential buildings designed to promote intergenerational and solidary relationships between users and occupants. It is also necessary to develop concepts to rationalise the use of the available spaces and land, saving energy and promoting the use of renewable energy and, ultimately, emphasising the convenience of a type of housing that stimulates and facilitates intergenerational solidarity and constitutes a key element of a city for all.

With this aim, a pilot project has been outlined and structural proposals are being collected in architectural projects through the convening of the second “A ‘home’ for life” awards [Protective Community Action for Ageing] 2010-11, organised by the J. Valiente Pulido Foundation and by the Barcelona section of the Professional Association of Architects of Catalonia in order to spread ideas, raise awareness among the authorities and secure the commitment of private economic agents.

**Conclusions and future proposals**

Housing is a right closely related to the dignity of the individual and, as such, is recognised in the Constitution. Elderly people demand the right to choose where they live, where this is possible, and to have access to quality care services in the vicinity that they may require from time to time.

The Senior Citizens Advisory Council has always paid special attention to the housing problems of the elderly and is actively involved in monitoring the city housing policy.

The proposals of residents suggested at different points of the participatory process and during the Third Convention set down lines of work for implementing the “Barcelona, a senior-citizen friendly city” project, in which the participation of the elderly is crucial. Below is a list of wide-ranging actions to be introduced:

- To continue to implement the policies already underway and increase the range of assisted housing for the elderly and social housing specifically for senior citizens, and to increase the grants available for adapting and improving housing, for the installation of lifts and for assistance with the payment of rents.

- To combat the property harassment suffered by many older people and ensure that they have the necessary information and support.

- To ensure that the message “Adapt your home and make your life safer and more comfortable!” reaches the elderly by organising comprehensible and practical promotional activities offering information on the grants available and the purpose of the Housing Offices.

- To foster support for the creation of teams in organisations and centres for the elderly that can provide information on housing issues and where to go, and to encourage networking among organisations interested in housing issues.
Resident contributions: findings of the qualitative research

Elderly people praised the smooth running of many aspects of social and health services. Nonetheless, in the forums, they also mentioned many areas with room for improvement. Some of the main concerns relate to lack of funds, insufficient coverage of services and waiting lists. Another aspect discussed was how the elderly are treated by professionals, since they are not always satisfied with the level of care received. The elderly are concerned about the possibility of being dependent on others as they get older. They believe that organisations should host talks and other initiatives to encourage elderly people and give them the opportunity to voice their concerns about the things that affect them, since there is a wide variety of situations, living conditions, aspirations and values among elderly people. It was also noted that some elderly people are not informed about the Government grants they can apply for. Moreover, the elderly highlighted the joint responsibility of citizens and the importance of people doing what they can to deal with problems themselves with the help of others, such as participating in community projects.

“The elderly are concerned about the possibility of being dependent on others as they get older. They believe that organisations should host talks and other initiatives...”

Social services

Both the professionals and the elderly stressed the importance of increased coordination between health and social care in matters relating to senior citizens.

The elderly drew attention to the distance between social services facilities and the real needs of the city. They appreciate that the resources have increased and that care in general is improving, but they also make the point that the insufficient coverage of services reduces their quality and efficiency. The fact that there are social workers at primary care facilities is seen as positive, although the need for specialised training in the elderly is highlighted.

It was suggested that the number of actions to detect and address the needs of elderly people living alone be increased, with home visits by professionals, for example. Moreover, if effort is put into coor-
The subject of care at home was mentioned...The problems described relate to the frequent changes in family workers and the need to ensure effective but close and friendly care, which is not incompatible with respect for privacy and professionalism.”

The professionals have a good opinion of proactive programmes for identifying and caring for elderly people living alone of whom the social services have no knowledge.

Social Services Home Care is also pivotal and although the service has been extended there is still much room for improvement. One of the main demands is that Social Services Home Care workers be able to work in decent conditions: if these professionals are poorly paid and do not have time to rest properly, they will leave their jobs sooner or later. Social Services Home Care must also be allowed more time to meet the needs of the elderly. One way of optimising this time, which has already been introduced at certain times, is to assign workers to families in their own neighbourhoods or within the same neighbourhood, in order to cut down travel time.

Regarding day centres, elderly people argued that the price is not always affordable. They consider them a very useful service and have a good opinion of the transport service for people who cannot get there by any other means.

On the subject of nursing homes, the elderly indicate that the care tends to be more professional in public facilities than in private ones. What is common – and disturbing – to all is the frequent staff turnover. Poor hygiene and abuse are a reality.

Did you know...

- In 2009, the city had 34 social services centres and almost 400 professionals; by 2010, these figures had increased to 37 social services centres and 612 professionals. The map of social services centres of Barcelona will be completed in 2011, with 40 centres and almost 650 professionals.

- The “Shared meals” services are addressed to people aged 65 and over who need support to cover the need for a nutritionally correct diet and a space for relations with a professional who welcomes people and encourages bonds of friendship and connection between users and the community.
in some homes and elderly people think that an active stance needs to be adopted to intervene in these situations and report known cases. They argue that more inspections and continuous work side-by-side with professionals are required.

They consider the prices of private homes to be very high, which is a cause for concern as there are not enough places in public homes and long waiting lists. In this respect, they point out that initiatives such as assisted housing should be encouraged in order to reduce waiting lists for less severe cases. Assisted housing prevents very independent people from feeling trapped in environments like nursing homes, where people are much more affected by dependency, often because they suffer from dementia. Moreover, elderly people point out the need to start organising themselves in order to come up with community alternatives to homes (such as housing cooperatives). Likewise, the elderly are satisfied at having urged the construction of new nursing homes and assisted housing through the Senior Citizens Advisory Council.

There are some aspects of nursing homes that could greatly improve the well-being of their residents: locating the facility in the home neighbourhood of its residents allows informal support networks to be maintained; having staff of the home accompany residents on walks or establishing more flexible visiting times are other ways in which the home’s isolation from the outside world can be avoided; closer ties with the surroundings is viewed as positive because it increases transparency and creates more opportunities for interaction and a choice of activities for residents. Lastly, the elderly welcome the creation of the Council of Residents, which is mandatory in all homes under the Social Services Law, as a space for participation in which proposals, complaints and criticism from residents can be heard. This initiative should be extended to private homes.

Elderly persons living in nursing homes have placed a strong emphasis on the care they receive from the professional carers at the facilities, stressing the importance of being heard, of mutual understanding and of the mutual affection between carers and residents, which they regard as components of good care. Their biggest concern is the potential lack of care for residents who are more dependent and their helplessness in situations of inadequate care, neglect or abuse. They point out that other residents could play a key role in these situations because they can offer help and support.

Elderly people are sensitive to the excess burden shouldered by family carers and highlight this important responsibility, especially when the person being cared for has dementia. They stress the value of
counselling and logistical assistance. For example, it would be beneficial to create free centres to care for people with dementia, freeing up the family carer to do other things. Family members who care for dependants point to mutual help and support groups for carers run by psychologists as places to obtain and receive help, where they can share strategies and the anxieties of everyday life as well as learn practical techniques such as relaxation. The Law on promotion of personal autonomy and care for dependants is viewed as a breakthrough in the recognition of non-professional carers. However, waiting times and the non-retroactive nature of payments have relativised many of the benefits that this law could have.

The elderly, particularly the foreign-born elderly population, point to the importance of regularising the work of carers and professional carers in order to avoid contributing to the underground economy, often carried out by illegal migrant workers.

Health services

On the subject of health services, elderly people have described some of the aspects that they consider to be well run: they view the fact that every district has health facilities (primary care clinic, hospitals) as very positive. They also place importance on the different types of home care, such as rehabilitation and doctor’s visits. In addition, this population segment considers that always receiving care from the same team generates trust and a feeling of security among patients.

One of the areas for improvement mentioned is the need to strike a balance between efficiency and the quality of care. More time should be spent on visits and reducing waiting lists to ensure good medical care (for example, patients have to wait many months for an operation on something as simple but limiting as cataracts). Dealing with medical professionals is also a cause for concern among the elderly: they sometimes lack sufficient expertise in geriatrics, they underestimate the symptoms in elderly people or they are insensitive in their communication and interaction. Lastly, the elderly draw attention to the lack of coordination between different medical teams, although initiatives such as computerisation and unified medical records could solve this problem.

Primary care facilities deal with large numbers of patients but the care is usually very compassionate and professional. Elderly people feel that the pressure on the health professionals working at these clinics should be lifted. One initiative introduced in some of the city’s primary care facilities is the coordination of its management with a board of users made up of people from the neighbourhood (e.g. neighbourhood associations). This coordination has helped improve certain management aspects of primary care facilities, so it is suggested that this model be extended to other clinics around the city.

Professionals recommend that doctors write in a comprehensible way in order to
prevent oversights and misunderstandings about requirements and indications. They highlight the need to set up support groups for the chronically ill in the context of primary care centres and the interest in drawing up a register of individuals who visit the clinic most often.

With regard to hospital care, elderly people welcome the reductions in the hospitalisation period required after surgery. However, this development can sometimes prove contradictory because it involves circumstances that doctors do not take into account when discharging, such as when a person lives alone and does not have the necessary support to follow post-operative medical guidelines at home; in these cases, the hospital stay ought to be extended. As for the care received in emergency facilities, this is generally viewed as very positive. Complaints concern long waiting times and it is noted that people often use emergency facilities incorrectly, given that the latter also often carry out tasks that other health services cannot do due to a lack of resources.

Another aspect of relations between doctors and patients in hospitals concerns making decisions about the patient’s life. The elderly would like to be consulted when a medical decision has to be made and they want health professionals to ensure that patients take the decision in the right conditions (without pressure, with knowledge and understanding of the consequences, etc.).

Family carers also mention the need to train health professionals and assistants in the behavioural problems of dementia sufferers, and to adapt hospital dynamics and forms of interaction (respecting paces, recognising warning signs...) to prevent confusion and agitation.

Elderly homosexuals point out that more knowledge of specific health aspects affecting gay men and women is needed among health professionals.

The people cared for at home or living in homes saw the sensitivity of the health professionals to their day-to-day problems as good. Where this sensitivity is lacking, elderly people feel inhibited about sharing and expressing their concerns. People who

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**Did you know...**

- With regard to the implementation of the Law on promotion of personal autonomy and care for dependants, as of 31 December 2010, applications for the recognition of dependency amounted to 74,596, of which 58,575 (78.77%) were graded. The total number of applications assessed as grade II or III was 41,289 (representing 70.49% of all graded applications), of which 31,758 had an Individual Care Plan (76.92%).

- On a scale of 0 to 10, people aged 65 or over gave the public health services an average score of 7.2.
have been in hospital mentioned the lack of respect they were afforded in certain situations that caused them distress, such as when they needed to go to the bathroom and nobody accompanied them. People who receive care at home would like to see more from accompaniments to the doctor’s surgery (hours, knowing the person who accompanies them, that it be an extra and not lead to reductions in the help they receive to perform other tasks, etc.).

Family carers described the difficulties of getting out of the house with dependent elderly people suffering from dementia: long waits, transportation difficulties and disorientation of the elderly person are just some of the aspects that cause distress among carers when they have to see specialists. They suggest measures such as easier parking and a more integrated organisation of visits to specialists, for example through the role of the geriatrician at the hospital. With regard to hospital emergency services, they suggest that the carers and relatives of elderly people (especially dementia sufferers) accompany them from the very start of the visit.

People living in homes have mentioned the importance of fitness facilities in these centres for both exercise and rehabilitation, and have highlighted the professional support of physiotherapists for their optimal use. They would like to see an increased interest in their health among medical professionals and a relaxation of the prescribed dietary measures that takes into account that the preferences and priorities of the elderly person are central to their quality of life.

Elderly people revealed a certain opposition to the excessive tendency to prescribe medicines, often based on the belief – among both doctors and patients – that there are no alternatives to pharmacology for the generation of well-being. They also pointed out that if elderly people take a lot of medicines, it is essential to take into account interactions and incompatibilities, which is not always the case. However, there are ways to help the person to take control of the medicines he or she takes: unified records and prescriptions are very useful. They particularly welcome the initiative taken by certain pharmacies to prepare medicines in doses for ease of administration, especially for elderly people who live alone or have mobility problems. They consider that this initiative should be extended further because it can make life easier for many people. Elderly people also made reference to the problem of medicines that have expired or have to be thrown away. One solution is that the medicine be purchased in the exact amount needed.

Elderly people see it as very positive that the Targeta Rosa (senior citizens discount card) includes different services related to health and personal care, such as chiropody, as these are often too expensive for many senior citizens.

“Elderly people see it as very positive that the Targeta Rosa (senior citizens discount card) includes different services related to health and personal care, such as chiropody, as these are often too expensive for many senior citizens.”
ness and depression (increasingly frequent problems among the elderly). One way of promoting mental health is to encourage people to take part in activities to increase self-esteem, occupation, feeling useful, relations of support and the motivation of taking care of oneself.

Elderly groups point out shortcomings in the public mental health network (for example, waiting times to see a psychotherapist and overprescription of psychiatric medication). They are also very concerned about depression among the elderly and suicide attempts.

Senior citizens adopted a very broad view of health in the forums. For example, they took into account the possibilities of linking clubs with certain aspects of health. “They suggest that centres for the elderly could be a good place to promote prevention activities, health education and healthy ageing.” They believe that clubs for the elderly should be linked specifically to the medical facilities of their neighbourhoods because residents of this space are especially likely to require medical help; they also consider it useful to organise first-aid courses for elderly residents in clubs for the elderly. Senior citizens believe that these spaces could be used for medical check-ups, as a way of making contact with those who do not use the health services.

Healthy ageing is another issue that has occupied a central place in the discussions on health. Elderly people are very interested in finding out how to promote health (balanced diet, exercise) and safety (such as preventing falls) through talks at centres for the elderly and gyms, for example. Senior citizens increasingly welcome the importance attached to the need for exercise (adapted to the characteristics of elderly people), and many clubs and homes already put on this type of activity. However, the instructors are not always professionals, which is a cause for concern among the elderly. They believe that if the instructor is a volunteer, a professional must at least monitor the activity to make sure that the guidelines given are appropriate. Gyms are another option for exercising but their prices are often restrictive; they therefore suggest subsidising gym fees to encourage older citizens to embark on a healthier lifestyle by linking health services to the network of gyms and sports centres, for example.

“One way of promoting mental health is to encourage people to take part in activities to increase self-esteem, occupation, feeling useful, relations of support and the motivation of taking care of oneself.”

They suggest that centres for the elderly could be a good place to promote prevention activities, health education and healthy ageing.
The 3rd Convention: contributions and results

The debate on social and health services

One of the topics of discussion of the workspaces of the Convention was how we can help make social and health services more friendly, in order to ensure correct dealings and detailed information, among other aspects, and make the services more welcoming. During the discussion, resources were mentioned that promote the city’s friendliness, such as the block of facilities in Fort Pienc with its concentration of services, as well as barriers, such as the lack of small neighbourhood shops, which hinder the introduction of initiatives to help detect cases of isolation among the elderly. It was also noted that elderly people cared for by the social services must be encouraged to participate in or set up boards for participation in the social services they use.

The question was posed as to how to share experiences that promote active and healthy ageing, such as banks of support products (wheelchairs, walkers, walking sticks), the collection of expired medicines, talks with the Fire Department and Police to promote safety in the home... Among other aspects, the discussion pointed out the importance of working with schools to share experiences and to familiarise children with ageing as a part of life.

With regard to the Senior Citizens Advisory Council for the Elderly, the documents submitted to the Convention also made reference to issues of social and health services. The “Open document on the rights and freedoms of the dependent elderly” covers various rights and duties referring to them: the right to receive information on and make use of measures for the prevention of dependency, the right to evaluation and early diagnosis to ensure proper care and the promotion of autonomy, the right to take part in decisions on the provision of care and support, the right to use local, quality care services as required from time to time, the right to receive care from people with continuing and appropriate basic training and the right to receive care services adapted to level of dependence within the framework of a patient-based care model.

The “Declaration of the Senior Citizens Advisory Council of Barcelona on the financial situation and social exclusion risk of the elderly” also mentions the importance of the adoption of Law 39/2006, on promotion of personal autonomy and care for dependants, and Law 12/2007, on social services in Catalonia, which have raised social rights to the fourth dimension of the welfare state. It is pointed out that Barcelona’s implementation of the Municipal Plan for the Elderly, the new model of basic social services and the Plan for Social Inclusion are also examples of the city government’s efforts to improve quality of life for the elderly and have improved the quality and quantity of resources and...
services, as shown by the data provided. The elderly mention the importance of ensuring justice and equity without reducing social benefits, which would be a step backwards and require renouncing the progress made by our society. We must, therefore, respect the rights of the elderly to financial sufficiency, health care, social services and the social affection and recognition of their fellow citizens.

On the subject of health, this document contains contributions complementing those made over the course of the participatory process: offsetting limitations on everyday living with subsidised support products and disseminating the advance directives document with regard to healthcare aspects and all legal protection issues.

### Municipal actions and experiences

This section focuses on the municipal actions and experiences described at the Third “Voices of the Elderly” Convention. They are examples of how this dimension is reflected in municipal planning and in the initiatives implemented by organisations and groups in which elderly people participate. Overall, they reveal diverse aspects of cooperation between government and citizens.

The two municipal actions, that of basic social services and that entitled “Active and healthy ageing”, are lines of action proposed by elderly people, their families and professionals and volunteers. The first describes the decisions taken by the City Council that structure the development of the network of social services centres and the increase in professionals or the extension of canteens for shared meals in all districts. The municipal action for “Active and healthy ageing” illustrates how local intervention can combine principles such as autonomy, the protection of rights and social relations among elderly people by organising the participation of institutional and community actors.

The three experiences provide examples implemented in different contexts. “Get active in park” testifies to the acceptance and success of the possibility of exercising in parks while the “Radar” project reveals how coordination between residents and the social services of a district encourages solidarity and effective action to prevent loneliness and isolation among the elderly.
elderly. The experience of the Municipal Nursing Home of Fort Pienc describes the implementation of participation, with the involvement of elderly people, their families and professionals. All three initiatives testify to the convergent action of different actors in promoting the welfare and the formation of responses to the interests and needs of elderly people at different stages of the ageing process.

**Basic social services**

The last five years have ushered in major changes in social services. Ramon Mora explained that these are structured around three aspects:

- A new regulatory framework (the Law on social services in Catalonia and the Law on promotion of personal autonomy and care for dependants), with a significant impact on the whole population and on the elderly in particular, since they establish individual and universal rights for all as part of a bid to strengthen the fourth pillar of the welfare state.

- Large-scale social, labour and demographic changes (increase in ethnic and cultural diversity, increase in the diversity of family structures, increased life expectancy, difficulties in accessing employment, etc.).

- The impact of the economic crisis on many families and individuals. Consequently, social services centres have seen the registration of 17,000 new users in the system of basic social services between 2007 and 2010, combined with an increase in the complexity of the types of case that professionals need to deal with, essentially because the impact of the three elements described has increased the fragility of family situations.

Against this backdrop, Barcelona City Council has taken three important decisions:

- Afford priority to social cohesion policies through increased budget headings, more human resources for basic social services, improvements to social services centres and enhanced computer software.

- Set up the Municipal Institute of Social Services of Barcelona to gain in agility, flexibility and expertise and to improve the processes and results of intervention in basic social services.

- Develop a new, city-wide model of basic social services to improve accessibility, establish uniform criteria for technical processes and criteria for care that take into account the unique features of each area, further optimise resources, improve the quality of the services and transform the internal and external image of basic social services.
These decisions have had a major impact on the improvement of care for the city’s elderly. Many of the users of social services are over the age of 65 and the network of accessible, comfortable, decent and safe social services centres has been completed across the city with an increase in the number of professionals working at them. The service of canteens for shared meals has been extended to all city districts. The budget for the Home Care Service has tripled while that of the Telecare Service has doubled. In Barcelona, it is estimated that over 40,000 people have been involved in the implementation of the Law on promotion of personal autonomy and care for dependants, grants to individuals and families have increased by more than 30% and, as set out in the Law on social services in Catalonia, group and community work has been carried out in all 73 of the city’s neighbourhoods.

In a bid to inform the population about its services and to foster communication between residents and social services, social services centres organise group information sessions on resources for the elderly, either at the centre or in collaboration with other services or organisations in the area, giving talks at clubs or spaces for the elderly, at day centres or in community centres.

Active and healthy ageing

The Public Health Agency of Barcelona promotes active and healthy ageing with an emphasis on the autonomy, social rights and social relations of the elderly. Its strategic lines are social support and involvement, mental health, the environment, nutrition, physical activity, the prevention of injuries, abuse, the abuse of addictive substances (alcohol and tobacco), the use of medicines and their associated problems, and prevention services. Lucía Artazcoz explains that the Agency implements these principles by introducing and collaborating on programmes that cater to health in its different dimensions: the “Let’s get out” programme, which encourages social involvement and support; classes on health for the elderly, held in diverse neighbourhoods of the city; the promotion of mental health among carers and the elderly suffering from discrimination, poverty, loneliness or the loss of loved ones, and the promotion of physical activity, namely through the “Barceloneta step by step” and “Get active in the park” programmes.

Get active in the park

This project was launched by the Department for the Environment of Barcelona City Council and the Public Health Agency of Barcelona. It also involved the participation of the Provincial Council of Barcelona. The Barcelona Sports Institute coordinates the programme while the sessions are run by the Sarrià-Sant Gervasi Sports Association.
“Get active” is a free exercise and health programme, as described by Núria Lozano. It takes place outdoors in different parks and gardens of Barcelona and its aim is to encourage people to exercise in order to maintain a psychologically and socially active lifestyle, to feel better in themselves and to reduce the risk of illness while making use of the green spaces of the city.

The aim of the project is to promote physical exercise and health in Barcelona’s parks, affecting both physical appearance and the psychological, social and emotional state of its participants. Specifically, it seeks to make physical exercise a habit among the population aged over 40. It also hopes to transform the city’s parks and green spaces into a point of reference for health, active lifestyles and coexistence among residents through healthy activities such as Tai Chi, Chi Kung, walks and memory exercises.

**Radars**

This experiment was launched by Barcelona City Council and carried out in the Gràcia district. The implementation of the programme involved residents, traders and people from diverse organisations and neighbourhood associations.

It is a preventive community action project for the elderly that is run in the Camp d’en Grassot neighbourhood in the Gràcia district. It was launched in 2008 in an attempt to create a more solidary and compassionate neighbourhood. Rosa Rubio and Joan Clota explain that the Radars project has interviewed more than 200 elderly people in order to learn about their situation and needs, with door-to-door visits by Red Cross volunteers. Once the elderly population has been detected, the social services of the Gràcia District perform a psychosocial assessment and, if indicators of risk are observed, professional intervention is carried out. A total of 139 elderly people are now equipped with telephone systems monitored by Red Cross volunteers. Volunteer neighbours and traders also play a part: they form a “neighbourhood radar”, i.e. they are respectfully attentive to changes in the situation of the elderly and cooperate with the social services and neighbourhood organisations involved in the project.

For more information about the project, call 932 914 325 or e-mail radars.gentgran@gmail.com.
Quality and participation in the Municipal Nursing Home of Fort Pienc

This experience was launched by the Area for Social Action and Citizenship of Barcelona City Council through the Joint Commission International-Foundation for Healthcare Accreditation and Development.

The participation of residents and families is incorporated into the model of accreditation of the Joint Commission International as a key part of individual-based care. Irene Peña, Antonio Gil Carvalla and Mari Luz Rodríguez describe the different ways of participating at the nursing home: democratic elections of representatives of residents and their families; council of the centre composed of representatives of all those involved in the facility (residents, families, technical team, team of assistants, supervisors, management, company and the Area for Social Action and Citizenship of Barcelona City Council; monthly management meeting with resident representatives; quarterly management meeting with the families on each floor, and management meeting with the representatives of the Relatives Association whenever appropriate.

Conclusions and future proposals

Health and social services are essential for personal well-being throughout life, especially as we grow old, and for the well-being of the community, the generation of wealth and social cohesion. It is therefore essential to create a welfare state that takes into account the rights, duties and everyday needs of the elderly.

The implementation of the Catalan healthcare model and social services model, the network of public healthcare and the public network of social services, together with the professionals who work there, have improved quality of life for citizens in general and for the elderly in particular.

We must recognise the value and quality of these services while using them responsibly. As explained in the “Open document on the rights and freedoms of the dependent elderly”, elderly people have the responsibility of getting involved in their self-care, in line with their abilities, to follow treatments and to comply with the agreed measures.

The implementation of the Law on social services in Catalonia and the Law on promotion of personal autonomy and care for dependants has been essential in meeting the social needs of all citizens, most particularly the elderly.

The Senior Citizens Advisory Council and the district councils of senior citizens have always had the monitoring of health and social services on their agendas and they actively participate in defining public policies.

The proposals of residents suggested at different points of the participatory process and during the Third Convention set down lines of work for implementing the “Barcelona, a
senior-citizen friendly city” project, in which the participation of the elderly is crucial. Below is a list of wide-ranging actions to be introduced:

- Guarantee full implementation of the Law on promotion of personal autonomy and care for dependants within the established terms, considering its implementation as a source of employment and not merely as an expense.

- Promote “Senior citizen-friendly health and social services”, identifying the situations and conditions that make medical facilities and social services centres easy and more comfortable to use for the elderly. Participation is key; it is important for elderly people to be active with regard to the opportunities for participation among the users of different health and social services.

- Spread information on the criteria used to allocate resources and social services to promote an understanding of a social care that integrates equality and diversity.

- Continue placing importance on the role of geriatricians at primary care facilities and ensuring specific training for GPs in the care of elderly people.

- Introduce a wide range of actions to prevent dependency and for the prevention and early detection of mental health problems in the elderly, with a special emphasis on depression.

- Introduce a line of action under the motto “a healthy exchange”, whereby elderly people and organisations can share in the experiences already carried out, in an attempt to encourage active and healthy ageing.
Supportive relationships and mutual help

Resident contributions: findings of the qualitative research

In the dimension of supportive relationships and mutual help, elderly people talked about the relevance of these relationships, both in everyday life and in difficult times.

Elderly people define supportive relationships and interpersonal knowledge as pivotal to their well-being. These relationships are especially important during difficult times in life: mourning, emancipation of one’s children, disease... Some elderly people do not usually ask for help when they need it for fear of making work for others; however, failing to express their needs is an attitude that could hurt them in the long run.

One aspect that came up time and time again in the forums was the importance of human relationships in the local context: one’s street, one’s neighbourhood and one’s district.

“One aspect that came up time and time again in the forums was the importance of human relationships in the local context: one’s street, one’s neighbourhood and one’s district. For example, it was pointed out that in local shops or on neighbourhood buses, the elderly are treated in a much more personal way, which creates trust and a degree of social support. However, the customs that generated this trust in one’s street and neighbourhood are disappearing, partly because of individual mobility and a waning sense of belonging to one’s neighbourhood but also because of individualistic values, which mean that increasingly fewer people are taking an active role in their neighbourhoods to foster local relations, and of a lack of commitment to others. The urban planning of public spaces can also have an effect because it is difficult to make acquaintances when there are no spaces in which...”
to meet people. The elderly stressed the importance of leisure activities in their neighbourhoods as a way to foster local relationships, although clearly a more open and participatory attitude towards the neighbourhood is required among residents. Neighbourhood associations can also be useful in strengthening relationships between neighbours, along with other types of association, civic centres and libraries.

It was argued that preconceived opinions about the elderly weakens support networks in two ways: firstly, the elderly are often seen by others as constantly complaining and always ill, and secondly, there is a tendency to adopt a paternalistic attitude to the elderly, which has the effect of making us forget that they are able to offer protection to others. They also make the point that elderly people should adopt an open mind when it comes to young people, although this is not always the case.

Some professionals suggest creating socio-cultural spaces for cultural exchange, taking the positive values of each group and using them to combat the stereotypical views of the rest of society.

Intergenerational relationships were a recurring theme in the forums; elderly people believe that these need to go beyond relationships between grandparents and their grandchildren. For example, community centres are a good place to encourage intergenerational contact because the space of the facility is usually shared by people from different generations; sadly, though, there is no real contact or joint activities. The suggestions for promoting these types of relations range from generating links between centres for the elderly and schools to using nursing homes as spaces for meeting up with children from shelters without foster families on weekends.

**Supportive relationships for difficult times**

The elderly are very sensitive to the problem of loneliness. They find it worrying that people could be living alone without having their basic needs met, such as women who have spent all their lives caring for their families and who are now old and alone with nobody to care for them. Situations of loneliness ought to be prevented, and relatives, neighbours and centres for the elderly can all play an important role here. In order to reach people who are already living in isolation, the elderly call for increased institutional organisation of social and community services with coordinated action by volunteers. They believe that elderly people living alone should be given proactive, personalised and regular monitoring.

Death is another topic that cropped up repeatedly in forum discussions: elderly people remarked that it is often a taboo subject with their families. Grieving is another process that is rarely discussed and also a risk factor for isolation. The lack of communication within the family has an adverse effect on the real support received by the elderly. They are often unable to share their concerns with their children.

“Elderly people should be encouraged to tell their children how they wish to die and to talk about issues or topics related to old age and death...”
or talk about them openly with grandchildren. Elderly people should be encouraged to tell their children how they wish to die and to talk about issues or topics related to old age and death (delegation of long-term autonomy, advance directives, etc.).

Professionals and the elderly advocate the strengthening and creation of spaces to host groups for mutual help, support for carers and bereavement care by non-profit organisations.

**Agents that make up supportive relationships**

The elderly referred to the people and agents that constitute supportive relationships for individuals in one way or another: centres and clubs for the elderly, associations, community centres, volunteers, neighbours and family. However, senior citizens make the point that support should not be based solely on relations with relatives, friends and the local environment but that institutions must also play a vital role. Neglecting this issue could result in the isolation of people at risk or the over-burdening of the people around them, who will feel obliged to do more than they can or believe that they ought to.

Centres for the elderly not only have an educational and entertainment role, they are also pivotal in strengthening supportive relationships. It is nonetheless necessary to monitor compliance of this relationship function because overcrowding in clubs and the outsourcing of their management can reduce knowledge of individuals and cause the demise of informal monitoring when people stop attending. They therefore advocate restoring these functions by creating personal support groups and accompanying individuals to the centres, calling people who are going through difficult times to offer support and encourage them to keep going to the club, welcoming new people at the club, exchanging positive experiences with other centres for the elderly, setting up collaborations between nursing homes and clubs, etc. Mention is also made of certain individuals at centres for the elderly who give newcomers an informal welcome and thus gain their trust. Lastly, the elderly expressed concern that certain conditions of clubs could discriminate against more vulnerable groups: people on low incomes may have difficulties paying for the courses and activities organised and very old people and those with functional difficulties could often lose out on a place on the day of enrolment because they are unable to stand in queues.

Both professionals and the elderly point out that hierarchical structures need to be avoided at clubs and that working on activity committees can foster social relationships. Some also suggest that social education professionals could bolster social relationships among the elderly people who visit the centres. In addition, they make the point that putting on social and cultural activities that could interest men is one way of increasing the participation of the latter.
Volunteers are pivotal in personal support networks. The existence of functions for coordinating and supporting volunteers in places like nursing homes is viewed as very positive. Other examples of successful coordination between institutions and volunteers that were put forward include time banks and solidarity banks with social services teams, which could be useful for reaching people in need. However, it would appear that both society and the institutions need to give them the recognition they deserve: there are not enough grants for associations, there is often a lack of training and support for volunteers and not enough is done to attract people who might be interested.

Professionals and the elderly agreed on the need to increase participation in volunteer projects for strengthening supportive relationships.

Some family carers have indicated an interest in exchanging hours of support for care work through time banks. They could therefore make use of their caring experience to give another carer time for him or herself and get something in return.

Relations with neighbours can also be an important source of help for the elderly. These relations are increasingly debilitated by the growing trend among new generations to change their place of residence, often distancing themselves from their family. Pensioners, who have more free time, can bolster and help bond relationships among residents within blocks of flats; there is also the possibility of strengthening these relations through programmes such as the “Good neighbours” project, which was generally viewed as very positive by the elderly.

Some professionals highlight specific problems during the summer months when elderly people are left alone while their neighbours go on their holidays.

Lastly, the family is a source of security and very important company. Indeed, those without family close by are much more vulnerable to social isolation. However, elderly people are witnessing a growing tendency to neglect the elderly members of the family, whether due to lack of time, the difficulty in reconciling work and family or, sometimes, due to a certain lack of care among younger members, There is a widespread perception that it is difficult for children to take care of their parents when they grow old. Some families delegate the tasks of caring for the elderly entirely to the authorities and they fail to assume their part of the responsibility. Along these lines, they point out the need to raise awareness and offer more support to adults with respect to the care that elder members of the family may need. Elderly people are well aware of the exhaustion that care work can bring; hence, carers should receive psychological support and greater recognition for their work. When the only option is to go into a nursing home, one of the responsibilities of the family is to ensure that the elderly person is being treated correctly.

“[Neighbourhood] relations are increasingly debilitated by the growing trend among new generations to change their place of residence, often distancing themselves from their family.”

“...and encourage the elderly to learn how to maintain part of their free time and put limits on the demands of their families.”
Flexible visiting hours are also regarded as important because family support must continue even when a person goes into a home. Family members should not feel as though they are in the way.

Within the family, elderly people should not merely be regarded as recipients of care, since they can also provide protection to other family members. For example, the care of grandchildren and the family are rarely given enough recognition. However, grandparents are often overburdened with responsibilities that prevent them from doing other things outside the family (such as activities of interest to them or meeting up with friends), which leads to the weakening of their support networks. Elderly people point out the need to raise awareness of this problem among their adult children and encourage the elderly to learn how to maintain part of their free time and put limits on the demands of their families.

Elderly people who are cared for at home have mentioned the fact that the distance from their children makes communication difficult; they avoid talking about problems and ailments because they feel that their children cannot do anything about them.

“...they point out the need to raise awareness and offer more support to adults with respect to the care that elder members of the family may need.”

However, they emphasise the value of having neighbours whom they can trust and count on in case of need and who can get to their home to help. They also underline the importance of knowing that the volunteers they let in are people they can trust.

Elderly people living in nursing homes welcome the activities of other organisations in the home that allow them to meet people from other generations, although they regret that these only take place on specific days such as public holidays. They mention the lack of visits from family and believe that these should be made easier by providing a room for family visits and allowing for more flexible mealtimes if a resident has visits or has left the home to spend a day with family elsewhere.

Elderly homosexuals often explain that they have lost all previous family support and some find themselves in situations of

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**Did you know...**

- The district with the highest rate of isolation among over-65s is Ciutat Vella (32.5%), while the district with the lowest index is Les Corts (22.4%). (Municipal register, 2010).

- Elderly people give their social and emotional support (expressing love, affection and sympathy) an average score of 84.2 (from 0 to 100), according to the 2006 Barcelona Health Survey.

- The confidential social support received (i.e. having somebody they can trust with whom they share their problems and concerns) is as follows:
  - 76.7% of men and 75.1% of women aged 65 to 74 years.
  - 73.9% of men and 73.5% of women aged 75 to 84 years.
  - 68% of men and 63.6% of women aged over 84 years.
distress and isolation as they grow older. Nonetheless, they value the ease with which they can generally share their experiences and struggles with one another.

The 3rd Convention: contributions and results

- Discussion on supportive relationships and mutual help

The discussion spaces of the Convention talked about how we can foster intergenerational relationships within and outside the family in order to bridge the gap between generations.

To improve intergenerational relationships within the family, we need to encourage attitudes of respect and commitment among the adult children of elderly parents. Informing and advising these individuals on how to care for and help their parents in the ageing process could contribute to this goal. Another initiative might be to organise classes to encourage elderly people to share their experiences and learn how to put limits on their relationships with their children and grandchildren.

Outside the family, meeting spaces should be set up for sharing and exchanging experiences between youth, adults and the elderly. Another way of encouraging intergenerational contact could be to organise leisure activities in neighbourhoods in conjunction with youth organisations, as well as the regular or occasional activities organised at community centres.

In the discussion, the need was noted for a conviction among elderly people – beyond what is specific to each generation – that they are a part of society and want to stand alongside and share with other citizens.

The Convention workspace also posed the question of how to improve the identification and care of elderly people who are alone and how to prevent situations of loneliness. For example: organisations could collaborate in the identification and care of elderly people living alone; support groups could be set up in clubs and other organisations to carry out visits and help people with mobility difficulties. Centres for the elderly could provide much needed support to overcome grief and avoid isolation by incorporating these issues into the activities they organise. Very useful actions in preventing undesirable situations of loneliness could include welcoming new users of clubs and monitoring individuals who, for various reasons, may be at risk of isolation or who stop attending the clubs. Nonetheless, we not only need to think about what can be done at clubs or centres for the elderly: it is also important to raise awareness among families and neighbours and to include them in these tasks.

The discussion touched on the possibilities of involving family and neighbours in the detection of lonely elderly people (in coordination with the social services) and the need to involve volunteers in the care and accompaniment of lonely elderly people. Ensuring a good welcome and good integration into centres for the elderly, where certain people can also feel lonely, was discussed in detail.

The Senior Citizens Advisory Council refers to supportive relationships and mutual help in the documents it presented at the Third Convention. The “Open document on the rights and freedoms of the dependent elderly” covers various rights and duties with regard to supportive relationships. It refers to the maintenance of family relationships and friendships and also mentions the right to receive care from people with ongoing and adequate basic
Did you know...

• The main source of relationships among the elderly are relatives who do not live at home, a trend that is more pronounced among women over the age of 75. Based on data from the 2009 Survey on living conditions and habits among elderly people in Barcelona.

• According to data from the 2009 Survey on living conditions and habits among elderly people in Barcelona, the main source of relationships outside the home of elderly people are relatives not living with them, a trend that is more pronounced among women over the age of 75.

training, whether they be family members or professional or non-professional carers, and the right of family carers to adequate support.

The “Declaration of the Senior Citizens Advisory Council of Barcelona on the financial situation and social exclusion risk of the elderly” notes that elderly people are an important asset of society who have contributed with their individual and collective work to the well-being of our families and the general public today, and that they continue to do so in the current times of economic crisis. They do so by supporting their families in a variety of ways, by contributing as citizens through their taxes, contributing as consumers and by acting as volunteers in many different projects and social, political and cultural organisations. They argue that special recognition should be afforded to elderly women who have worked in and outside the home and who have never retired from taking care of their families or of working towards the development of a better city.

Lastly, it is important to appreciate the work of non-profit organisations working to improve quality of life for elderly people – most especially of all the volunteers involved in social and relational programmes and projects for the elderly.

This document also argues that planning and promotion through basic social services must involve the collaboration of organisations that carry out community action in order to develop the necessary measures to prevent the isolation and loneliness of elderly people. They also refer to the need to launch programmes to encourage intergenerational and intercultural relationships in the context of the city and of its individual districts.
Municipal actions and experiences

This section focuses on the municipal actions and experiences described at the Third "Voices of the Elderly" Convention. They are examples of how this dimension is reflected in municipal planning and in the initiatives implemented by organisations and groups in which elderly people participate. Overall, they reveal diverse aspects of cooperation between government and citizens.

In the dimension of supportive relationships and mutual help, the municipal action addresses the problem of severe isolation and indicates the criteria for beginning and continuing cooperation between residents and the government, application of which produces good results.

The three experiences describe initiatives launched by groups. "Elderly people, wonderful people" uses collaboration between diverse organisations and volunteer training to create networks of support for elderly people living in situations of isolation, dependence or with a lack of family support. The "Carer team" is a group formed by carers to create a space for continuous mutual help. "Gymnastics for well-being" uses physical activity as a theme to create support. These experiences illustrate the variety of forms that supportive and mutual help initiatives can adopt.

Joint responsibility for the detection and care of isolated elderly people

The unfortunate coincidence of critical situations of isolated elderly people within a short period of time made us realise that very powerful indicators of alarm were available both through the coverage of needs and through neighbours. The death of a person in Gràcia, unknown both to care services and close neighbours, shows that some sort of mechanism needs to be set up to offset this urban isolation, which is especially cruel for elderly people.

As explained by Josep M. Raya, this situation led to the reflection, design and implementation of the project for risk detection and neighbour involvement in its solution, with one conclusion: we can only meet this need through shared responsibility among the people who form the immediate environment of elderly people living alone and the authorities. The former, by caring for their neighbours (hence the project name, Radars), and the authorities, using the devices designed and prepared for intervention. Without the participation of volunteers, nothing would be possible.

Something else to bear in mind is that we need to overcome the red tape and preserve the old spirit of neighbourhood solidarity, of collaboration with the people closest to us, being interested in what the people around us are going through and enjoying. This spirit is what can make projects such as this sustainable in the long run.
**Elderly people, wonderful people**

This project is run by several organisations, including clubs, community centres, the Caritas charity, several churches, day care centres and neighbourhood associations. Josep Muniente and Marifé Molano explain that the main aims of these organisations in this project are to improve the living conditions of elderly people in the neighbourhood who are excluded both socially and from their families and to create mechanisms for the intervention of the organisations in order to encourage volunteering and set up a support network to help those in need.

The project is implemented through the training of volunteers with talks that will enable them, among other things, to detect cases of need. When a case is detected, the organisations meet, determine the type of help required and locate the resources they can offer to alleviate the exclusion of this person. The beneficiaries of this help are often elderly people living in situations of isolation, dependence or who lack the support of their families.

**The “Carer team” (Network of Carer Groups)**

This experience was implemented by carers themselves with the support of the Municipal Social Services Institute (social services centres of the Antiga Esquerra, Dreta and Fort Pienc areas of the city), and the basic health areas of Via Roma and Casanovas.

The “Carer team” is an ongoing, open group for people who carry out care work, in line with their needs and personal interests. Lídia Mas and Eduard Gràcia explain that the group was set up to meet the need for support, reflection and learning that these types of people may require. It also operates as a self-care space, whose aim is to help discover and legitimise the need to enjoy oneself, carry out leisure activities and relax.

Another of its aims is to increase awareness of the issues faced by carers, to encourage these carers to raise awareness among people in the same situation and to demand more support measures.

This is done through meetings that focus on techniques such as group dynamics, information sessions, reflection, discussion, mutual help and self-help, relaxation techniques, leisure and cultural outings, etc.

Alongside this initiative, social services centres carry out group care projects to support carers of dependent family members, with a special focus on emotional and psychological aspects; in this area, their

**Did you know...**

- Women state that they have received more help from their children (47.3%) than from their partners, while men state that they receive more help from their partners (52.3%).
- There are plans and community projects to promote collaboration and help among neighbours and to facilitate support to elderly and very elderly people who are alone.
- The Social Services centres implement group care projects offering support to carers of dependent family members, with a special emphasis on the emotional and psychological aspects affecting these carers.
priority is to help families in the functions, situations and phases of the family cycle with increased vulnerability, burden and crises.

Social services centres often organise these activities in conjunction with other services, particularly health, or social initiative organisations working in the area that share the same goals. Many basic support groups do more than the scheduled activities and programme; participants organise themselves, with the support of professionals, to implement ongoing projects, such as the “Carer team” or mutual help groups, which cover community-wide goals such as outreach and awareness raising.

**Gymnastics for well-being**

This project is based on two workshops – one stretching and relaxation and one psychomotor – for the over-75s. It gives participants an introduction to corrective body movement and allows them to participate in the activities of the club for the elderly that runs the project, Can Castelló. Olga Palau explains that the project dates back to 1996 and was extended in 2010 with three 50-minute workshops.

Gymnastics for well-being seeks to accompany people by providing them with the tools to enjoy a better quality of life, work on body movements without difficulty, effort or risk of injury, give personalised attention to participants and invite them to participate in the other activities hosted by the club and continue to train at different workshops.

**Conclusions and future proposals**

Elderly people have contributed with their individual and collective work to the well-being of their families and the general public today, and they continue to do so by providing their families and environments with wide ranging support.

In this respect, we must acknowledge the high level of the activities, projects and volunteer organisations in the city. However, the support and day-to-day care of individuals cannot only be based on family, volunteers or friends. A network of public and community resources and services also offers support to elderly people in vulnerable situations.

Spaces allowing the formation of relationships, like clubs, organisations, friendship groups and activities, are the cornerstones for successful and active ageing and a veritable network of support and mutual help. The government authorities need to view these as an investment in quality of life for elderly people and for the community on the whole and as spaces for prevention, both in relation to health and social problems.
The proposals of residents suggested at different points of the participatory process and during the Third Convention set down lines of work for implementing the “Barcelona, a senior-citizen friendly city” project, in which the participation of the elderly is crucial. Below is a list of wide-ranging actions to be introduced:

- Create a varied and attractive range of activities and projects that takes into account the diversity characterising elderly people, based on the observation that “people give and receive”. This range should be geared towards encouraging interpersonal relations in centres as well as support and mutual help.

- Encourage society to “get to know the elderly people who live alone near us”, in order to care for them, provide them with company and prevent social isolation through community actions involving neighbours, professionals and the immediate environment.

- Raise awareness of the very positive experiences being carried out to promote intergenerational relationships, with the creation of meeting points for children, teenagers, adults and the elderly. “Bridge the gap between generations” by extending these types of experience across the city. The conviction that we are all individuals and not simply part of a generation is essential.

- Work to increase the appreciation of the work of carers and give them the emotional and relational support they need.

- Ensure that community actions and plans are seen as an opportunity for the active participation of elderly people in exchange networks and mutual help networks.
Resident contributions: findings of the qualitative research

Respect, inequality and conditions for inclusion

Inclusion of the elderly

On the subject of Respect, inequality and conditions for inclusion, elderly people talked about discrimination towards them. Discrimination begins to rear its head generally after retirement because people often think that somebody who does not produce in the labour market is of no use. Some senior citizens described how certain elderly people can feel excluded from society because of how they are treated, while others warn of the prejudices both of other people and of the elderly themselves. Because of this prejudice, elderly people put restrictions on themselves and do not see their own skills and value. During the consultation process, protectionism and paternalism towards the elderly were also mentioned as major barriers to their full personal development.

“Because of this prejudice, elderly people put restrictions on themselves and do not see their own skills and value. During the consultation process, protectionism and paternalism towards the elderly were also mentioned as major barriers to their full personal development.”

The need for elderly people to be more aware of and to defend their rights was noted in the forums and to achieve this it was considered that every elderly person should make clear his or her own skills. The elderly agreed that there are ways to improve their social image and that we need to uncover the diversity of this group.

The elderly found that social participation is a very important factor for inclusion because it allows people to integrate into city life. However, the values of today’s society are very individualistic, which discourages people from taking part. As a result, they believe that “things should be made easy” in order to increase participation rates among the elderly. In addition, the elderly people who get involved feel that they have little influence on politics and institutional aspects (government authorities, parties) and argue that their demands often fall on deaf ears. The differences between elderly men and women when it comes to taking on responsibilities in the management bodies of associations were also highlighted: the boards are made up mainly of men, while women often tend to be linked more to participatory projects.

The elderly discussed inclusion from an intergenerational perspective. In general, they detect a mutual underrating between young people and the elderly because of prejudices that undermine cohesion and intergenerational relationships. They believe that the different generations must adapt to one another, starting with the family and gradually extending this adaptation to other environments such as associations and community centres.
Some professionals highlight the need to combat the stereotypical image that elderly people often have of youths. One way to do this is by promoting social and cultural spaces where people participate based on interests rather than their age, as is the case with the other types of activities put on at community centres.

**Respect in specific contexts**

On the subject of respect and inclusion, elderly people pointed out areas of clear discrimination against them.

The elderly also felt discriminated against in health services and social services. Some doctors underestimate the symptoms or suffering described by the elderly. For example, they often do not pay much attention to their psychological care needs.

In public spaces, a civic attitude has been mentioned as one of the essential conditions for ensuring respect among individuals. Anti-social behaviour can sometimes affect the quality of life of elderly people. This is the case with cyclists who ride on the pavement or people who sit in the seats reserved for the elderly on public transport. The elderly point out that more security on the streets would help to alleviate these problems but they also accept that individuals ought to intervene when they witness situations of disrespect.

Professionals and the elderly state that the role of grandparents in the education of their grandchildren both in the family and at school should be highlighted in order to reduce anti-social behaviour. Some add that community agents could be appointed to encourage the correct use of public transport and respect among its users. Elderly people often draw attention to the importance of promoting civic values as a goal for improving quality of life for everybody.

The media were identified as an important source of discrimination, due to the image of old age that they portray. Firstly, the contents are usually aimed at young audiences and, secondly, the vocabulary used to refer to elderly people is often disrespectful. No space is given to the discussion of issues that interest or concern the elderly, or only briefly, and when elderly people are discussed, negative and stereotypical images are often projected (death, passivity, tradition as an expression of old-fashionedness) or they are clichés and idealised images (travel, leisure time). The elderly define themselves as a heterogeneous group and believe that the media do not portray them with the diversity that characterises them. They stress that the media has a very strong influence on public opinion and that they should therefore...
Professionals and the elderly mentioned the importance of working together to ensure that television puts on programmes that foster respect among individuals rather than crude and vulgar contents. Some professionals suggest creating awards for films and documentaries on subjects of interest to the elderly as a means of achieving this.

On the subject of respect and disrespect, the elderly talked a lot about the family context. Elderly people see many everyday situations that are subtle forms of discrimination. One of the most common is the abuse and overburdening of grandparents in the care of their grandchildren, a little known but very important task for parents and schools. Another form of discrimination mentioned is when the family does not attach importance to the ability of the elderly person to make decisions on his or her life, such as control over money or respect for where the person wants to live. Lastly, the forums have highlighted a particularly sensitive area relating to situations of elderly abuse, both from within the family and by professional carers. The importance of reporting such situations was stressed as a way to combat this problem. However, elderly people see the reporting of abuse as difficult, given that it is a taboo subject and often kept private. As a result, they stress the importance of detecting these types of situation through more careful monitoring and increased social awareness. This monitoring must be performed both by institutions and services, such as home care and telecare, and by the social networks of the individual (including neighbours). The increase in community projects and forms of cooperation between organisations and groups and individuals in different neighbourhoods could facilitate the awareness and monitoring of situations of abuse and neglect.

**Conditions leading to the risk of social exclusion**

The elderly referred to various social conditions that can increase the risk of social exclusion. Elderly people accept that there is often a certain rejection of people from other cultures, such as when different ways of living become evident, which can generate problems of coexistence. Nonetheless, elderly people do not see all migrant groups in the same light, and co-existence with some can be especially easy. For example, some people come from cultures where the elderly are more respected than in our society. The elderly expressed an interest in activities to help break down intercultural barriers and encourage closer relations between local residents and newcomers.

“The elderly define themselves as a heterogeneous group and believe that the media do not portray them with the diversity that characterises them.”

“The increase in community projects and forms of cooperation between organisations and groups and individuals in different neighbourhoods could facilitate the awareness and monitoring of situations of abuse and neglect.”
Professionals noted that, among other aspects, we need to combat the negative views that elderly people often have of migrants.

Elderly people have also recognised homosexuality as a risk factor for exclusion. They accept that because of how they were educated and the stigma attached to anything related to sexuality elderly people often have difficulty in recognising and accepting sexual diversity. They also mentioned elderly homosexuals who have had to keep their sexuality hidden to avoid rejection. Nonetheless, they believe that if more work is done on this issue, the attitudes of elderly people could be more open.

Elderly gay men and women explained that, despite the progress made, we need to carry on working to normalise the image of homosexuality and real integration. They condemn the fact that discrimination and homophobia, together with insults and attacks, are still happening in the city, both in the public space and in families and nursing homes. They believe that more institutional support is needed to combat this abuse and to properly train and prepare professionals and centres for the elderly in order to raise awareness about respect, as is already being done in certain areas. They also state that the activities organised should be better publicised and that the social achievements of homosexuals in other countries should be afforded greater media coverage. They point out that elderly homosexuals themselves are the people who participate and help to change the social image of this group. Sexual and affective education in schools is key to improving the situation in younger generations.

They lament the fact that certain religious discourses generate a false and negative view of homosexuality, adding that the media are increasingly prepared to bring the issue of homosexuality in all its complexity into the limelight. They also believe that it would be worthwhile to use documentaries as a tool to raise awareness and introduce unfamiliar realities – such as that of elderly homosexuals – among the elderly.

Lastly, they indicate the need to work to incorporate the heterogeneity of the elderly into clubs for the elderly without discrimination based on functional limitation or sexual orientation, for example. In this regard, they welcome actions by film forums organised by the City Council and carried out by senior citizens at clubs for the elderly to discuss homosexuality in the clubs, and they believe that this should be extended across the city.

Did you know...

• A total of 54% of elderly people stated they have sufficient resources to reach the end of the month, 26% stated that they had some difficulties and 11.3% stated that it was very difficult, while 8.7% stated that they could comfortably reach the end of the month, according to data from the 2006 Survey on living conditions and habits among elderly people in Barcelona.

• IDESCAT statistics place the poverty risk threshold for a person at EUR 8,992 per year. All minimum individual pensions in 2011 were below the poverty risk threshold of 2009.
Functional limitations, dependency and illness are also identified as social conditions that could exclude a person from their environment. In this regard, they mention the progress made with the adoption of the Law on promotion of personal autonomy and care for dependants. Elderly people have also highlighted the importance of support associations for patients and their families to combat the social exclusion of elderly people in these situations.

In interviews with elderly Roma people, conflicts were mentioned between Roma and non-Roma people in the city, often in hospitals. These reveal the prejudice on both sides as a key factor that needs to be addressed. The elderly consider that a mediator would be useful in such cases.

Many people expressed concern over the problem of loneliness and social isolation, especially since networks of support and friendship are lost over the years. They believe that the authorities should take more responsibility for tackling this problem. However, they also recognise that neighbours and centres for the elderly can play an important role in avoiding loneliness.

Lastly, the forums discussed poverty as a problem that affects and leads to the discrimination of many elderly people. Low pensions and a lack of financial resources can be a very significant factor in isolation: transport, activities for the elderly, cultural activities, medicines... almost everything has a price and, for many people, it can be restrictive. Subsidies and discounts are a useful aid but they are not always used because people with scarce resources often feel embarrassed about drawing attention to their situation.

The 3rd Convention: contributions and results

- Discussion on respect, inequality and conditions for inclusion

The workspace of the Convention on this dimension discussed how we can improve respect for the elderly by combating age-related prejudice, adopting the message of “taking personal action to combat prejudice” as the main theme. Some elderly people are proud of their knowledge and skills for dealing with prejudice. For others, however, the force of the prejudice leads them to forget their skills. The discussion explored which actions could be taken to foster the recognition of elderly people as skilled individuals. Participation in organisations, projects or bodies that are not exclusively for the elderly can be a way of improving respect and promoting cohesion between different generations. The importance of starting with the family for changing age-related prejudices was stressed. The initiative of talking to schools about old age by inviting senior citizens to share their experience of ageing with children is another practice carried out at some schools in Barcelona that clearly contributes to this goal. The elderly also mentioned the need to express their disagreement when they feel that they are being discriminated against or disrespected by contacting organisations for the protection of the elderly.

“...they indicate the need to work to incorporate the heterogeneity of the elderly into clubs for the elderly without discrimination based on functional limitation or sexual orientation, for example.”
The Convention workspace also discussed ways of combating the abuse of elderly people based on the understanding that “we must all play a part in preventing abuse”. Following on from the agreement on the relevance of raising awareness, the question arose as to how to promote the involvement and responsibility of those around us. Along these lines, initiatives were proposed, namely the creation of groups to work on the issue at centres for the elderly in order to provide information on how to prevent abuse, detect cases of abuse and assist in reporting. The discussion mentioned the importance of providing clear information on the mechanisms available at public authorities and how to access them. One suggestion was to set up a telephone line to allow elderly people suffering from abuse and people close to them who detect the situation to obtain the necessary information and report the situation as easily as possible.

Moreover, the documents submitted by the Senior Citizens Advisory Council to the Third Convention makes several references to the issue of respect, inequality and conditions for the inclusion of the elderly.

The “Open document on the rights and freedoms of the dependent elderly” covers various rights and duties with regard to respect and conditions for inclusion. It refers to the right of the elderly to autonomy of decision and to continue to be recognised throughout old age as full citizens with absolute respect for their dignity and privacy, the right to protection from any form of abuse or violence in the family, public, health care and government contexts and the right to sufficient income and to remain in control of the management of their assets and income.

In the “Declaration of the Senior Citizens Advisory Council of Barcelona on the financial situation and social exclusion risk of the elderly”, the Senior Citizens Advisory Council of Barcelona refers to the need to ensure compliance, together with the city’s organisations for the elderly, with Article 18 of the Statute of Autonomy of Catalonia of 2006, which reads: “The elderly have the right to live in dignity, free from exploitation and abuse, and without discrimination because of their age”.

Lastly, the Senior Citizens Advisory Council has also drawn up a document entitled “Recommendations on the treatment and participation of the elderly in the media”. This document analyses whether the media contribute to stigmatisation and promote negative stereotypes of elderly people, especially in relation to dependency. The media do not currently portray a true image of the diversity of social and lifestyle realities of the elderly. The Council also argues that although the elderly appear as part of the public in many television programmes, they still have a low presence and active participation in the media.

In the light of this situation, the document calls for the media to be more responsible in their portrayal of the social image of the elderly, asking that they: show the diversity of the elderly; avoid patronising, discriminatory and/or derogatory language towards the elderly; make efforts to protect the right to the privacy, image and dignity of the elderly (especially the more vulnerable); avoid reinforcing stereotypes that see youth as a positive attribute and old age as negative; show the active role of elderly people in caring for their families, as carers or through financial support, and reveal how the elderly participate in the social and community life of the neighbourhoods. The Council also asks that the media incorporate elderly people into their spaces as individuals and/or in representation of organisations for the elderly and
that they give the elderly a voice and a presence; it asks that more opportunities be given to elderly people to participate in general programmes and debates, just as other citizens do.

The Senior Citizens Advisory Council undertakes to bring all of these demands to the Professional College of Journalists and the media, suggesting a line of work for the detection of good and bad practices in the media and urging organisations for the elderly to become active agents of communication. The document sets out a number of ideas about how to start working on this, both individually and through organisations: create working groups to monitor the image of the elderly in the different media; use the channels set up by the media itself to report situations that are considered bad practice (TV ombudsman, letters from the director, etc.); publicise best practices in communication with regard to the elderly; adopt an active approach to the media and offer to participate in it. These are just some of the ways in which the Council suggests increasing the incidence of the elderly in the media. It also emphasises the need for the elderly to extend their knowledge of the communication options afforded by new technologies (ICT). For example, the elderly can transmit information through new technologies, using social networks like Facebook or Twitter, or by creating websites and updated blogs describing the actions of organisations for the elderly and the contributions that elderly people make to society.

### Municipal actions and experiences

En aquest apartat es mostren les actuacions This section shows the municipal activities and experiences presented at the Third Convention “Voices of the Elderly.” They are examples of how this dimension is reflected in municipal planning and in the initiatives implemented by organisations and groups in which elderly people participate. Overall, they reveal diverse aspects of cooperation between government and citizens.

In the dimension of respect, inequality and conditions for inclusion, the municipal action described is the “Barcelona anti-rumour strategy”. It reveals one way of taking action, aimed at debunking myths, that came about following the Intercultural Plan and has become an example of an instrument in this regard. In this particular case, it is useful in preventing the distortion introduced by rumours, with the subsequent negative effects on social inclusion; this tool can be reinforced by other initiatives based on meetings and participation.

The experiences described address three issues that have aroused interest throughout the participatory process. In the “Homosexuality and the elderly” experience, elderly people from different clubs have got involved to talk about homosexuality and promote respect for it. Abuse is the theme of the Daphne project and reveals how organisations for the elderly can provide input while working alongside other associations, federations and organisations. The third experience, “We all have a family”, is an example of interaction between youths and the elderly aimed at mutual learning. They are all examples of different approaches to respect, inequality and inclusion.

**Barcelona Anti-rumour Strategy: myths about cultural diversity that need debunking**

Relationships between people are intersected by the images we have of one another. Often, when people do not know each other, distorted images are created that generally circulate in the form of rumours. Carolina Astudillo explains that rumours go round about the foreign-born
population of Barcelona in relation to their use of services: the images of these groups “taking all the grants” or “collapsing the medical centres and health services” are examples of these rumours, since only 5.3% of the foreign-born population actually used the social services in 2009, while the health expenditure of the foreign population – 13% of the total population of Catalonia – represents 4.3% of the total budget (Department for Health of the Generalitat).

To debunk these myths, the Barcelona Intercultural Plan has launched the Anti-rumour Strategy, which offers free anti-rumour training and is based on the work of the BCN Anti-rumours Network, which has involved more than 125 organisations and media channels with different instruments: a manual to combat rumours and stereotypes about cultural diversity in Barcelona and a variety of materials such as videos, leaflets, comics, as well as the www.bcn.cat/antirumors website.

The Anti-rumour Strategy is an example of actions to promote coexistence.

Indeed, the coexistence of residents is at the heart of a wide variety of municipal actions, some of which are very familiar to the elderly. This is the case of community centres, libraries and community action.

Many elderly people participate in community centres, neighbourhood facilities that work with citizens to promote coexistence and creativity. For the past thirty years, these centres have been open to all. They run projects of community value and provide actions and services to foster a richer and more diverse way of living based on sharing through culture. The elderly participate in a number of ways, such as going to or organising activities, collaborating as volunteers in the performance of activities, or representing associations and groups as the coordinators of projects that are outlined through these groups and associations and carried out at the community centre to allow more people to become involved. Elderly people are library users and participate in programmes both at libraries and by bringing libraries closer to home through initiatives by volunteers, who include senior citizens. These actions express the aims of the City Education Project: to foster intergenerational relationships and the participation of all, while offering a range of creative leisure activities for all ages.

Coexistence also forms the basis of community actions. These are put forward as a catalyst for change in order to create more inclusive communities and districts. The construction of change is based on processes in which the group is the driving force, while also recognising the relational and constructive abilities of citizens.

Along these lines, we can mention the media prizes awarded each year by the Municipal Council for Social Welfare of Barcelona in recognition of the proper handling of information on social issues. 2011 was the eighteenth year of these awards.
**Homosexuality and the elderly**

This experience is part of the EU AHEAD project to combat discrimination on grounds of sexual orientation. It was launched by the Department of Civil Rights of Barcelona City Council and carried out at two clubs for the elderly in the Eixample and Ciutat Vella. The Institute for Ageing of the Autonomous University of Barcelona (UAB) was also involved in coordinating the local action, while the Institute of Government and Public Policy of the UAB undertook the scientific coordination of the EU project.

Fourteen elderly people from clubs in Ciutat Vella and the Eixample formed a core group on homosexuality and the elderly, coordinated by the Institute for Ageing of the UAB. Montserrat Canales explains that the aims were to: generate activities and spaces in which to talk openly about homosexuality; raise public awareness about the issue of homosexuality; help eliminate taboos, and to normalise and restore the dignity of the individual and society with a view to equality, acceptance and respect as opposed to discrimination and segregation.

The group held three meetings in July 2010, during which the documentary by TVE2 channel’s “Documentos TV” (directed by Ana Isabel Muñoz) entitled “Salir del armario a los 60” (Coming Out at the Age of 60) was shown and discussed. These meetings also discussed the possibility of organising a film forum around the documentary at the different clubs.

Based on the input from the core group meetings and the working guidelines drawn up by the Institute of Ageing, two film forums were organised at two clubs for the elderly, Josep Tarradellas and Pati Llimona in the Ciutat Vella neighbourhood, which were a success in terms of attendance and participation in discussions.

Other actions have also been carried out under the AHEAD project to raise awareness among and train professional carers working in nursing homes and home care services in order to prevent homophobic attitudes.

**Daphne project. Research on the financial abuse of the elderly**

This experience was launched by the Federation of Associations of Senior Citizens of Catalonia (Federació d’Associacions de Gent Gran de Catalunya, FATEC) with the support of the FIAPA-Europe (International Federation of Associations for Elderly People).

According to Montserrat Sarri, Daphne II is an EU programme whose aim is to conduct further research into the financial abuse of elderly people. Firstly, based on a representative sample of elderly victims of abuse, it obtains quantitative data on the financial abuse suffered by this group. It also obtains qualitative data by consulting experts on the problems of abuse. Nonetheless, its aim is to determine factors of vulnerability and risk of abuse – including financial – in the elderly.
Did you know...

• Of the total migrant population in 2009, 3.6% were aged over 65 years, of which 49.3% came from other parts of Catalonia, 30.4% from elsewhere in Spain and 20.3% from abroad.

• Elderly people have a positive view of the city’s increased socio-cultural diversity given its contribution to the economy and increasing the birth rate. Moreover, the care services provided by certain migrant groups are important for the elderly people who receive them and are viewed as positive by the latter, according to the Barcelona Intercultural Plan.

To achieve these aims, each country drafted an initial report on the current situation of ill treatment of the elderly overall, for which 1,000 people from their populations were surveyed and professionals were interviewed. The final report for the European Commission includes an analysis of the shortcomings in existing legislation and proposed reforms.

Intergenerational day: we all have a family

The organisations that coordinated and participated in this project are the Senior Citizens Council of the Horta-Guinardó District, the Narcís Monturiol Institute and municipal clubs for the elderly in Horta, Baix Guinardó and Vall d’Hebron.

This activity stems from the need to create a space for the exchange of life experiences between two generations – the elderly and young people – so that they may learn from each other and seek out intergenerational similarities. Marta Borrell and Ventura Lázaro explain that each year the two groups work on a topic of common interest; in 2009, they worked on the topic “Love has no age limit”. This year, the main theme of the exchange has been the family, since it is a bond or structure that remains present throughout life.

The project promotes the active participation and involvement of all participants in the conference. It thus establishes a link for communication between the two generations by creating a space for free expression in which to exchange experiences, opinions and values among the elderly and young people.
Conclusions and future proposals

Elderly people should be more visible and socially acknowledged for their contribution as citizens in the past and present. They need to make themselves heard and not adopt passive attitudes. They must be convinced about keeping an open, participatory attitude and having a willingness to learn.

The elderly have a lot to teach and share, but they can also learn a great deal from their fellow citizens. Intergenerational projects and programmes are a good tool for strengthening the bonds of social cohesion and solidarity between generations.

The concern about the negative social image of elderly people is not limited to the media, although this is where it is most evident. This negative image encourages the discrimination of the elderly in a range of services and in various public and private spaces.

The Senior Citizens Advisory Council has always expressed concern about situations of social vulnerability affecting the elderly. Poverty, illness, dependency, loneliness and homosexuality are still conditions that can encourage social exclusion.

The “Declaration of the Senior Citizens Advisory Council of Barcelona on the financial situation and social exclusion risk of the elderly”, the “Open document on the rights and freedoms of the dependent elderly” and the “Recommendations on the treatment and participation of the elderly in the media” are three clear examples of the commitment and concern of the Advisory Council.

The proposals of residents suggested at different points of the participatory process and during the Third Convention set down lines of work for implementing the “Barcelona, a senior-citizen friendly city” project, in which the participation of the elderly is crucial. Below is a list of wide-ranging actions to be introduced:

- Focus initiatives for 2012, European Year for Active Ageing and Intergenerational Relations, on the promotion of innovative spaces for dialogue and relations between generations, and on combating negative images, prejudice and discrimination against elderly people, with special attention to those living in situations of risk of exclusion.

- Combat the abuse of elderly people by rallying under the slogan “We must all play a part in preventing abuse”, by raising awareness of the issue through organisations and by implementing specific measures such as an information line.

- Defend the need to “take personal action to combat prejudice” on ageing in order to increase respect for the elderly while showcasing their skills. Likewise, awareness must be raised among the elderly to put an end to prejudice on grounds of sexual orientation as a factor for social exclusion.
Resident contributions: findings of the qualitative research

In the Communication and information dimension, the elderly referred to the amount of information available to the public. They value access to information because it affords them greater autonomy when it comes to making decisions and forming critical opinions. On the subject of public decisions, they consider that information with data on the reasons and benefits of implementing a public decision is a prerequisite for active citizenship.

However, the elderly explained that the information available to them is often difficult to understand; they would like to ask of the people who make this information: have you thought about how to go about ensuring that this information is useful? They also stress the shared responsibility of the sender and receiver in getting information to do its job. Proximity is a criterion that elderly people stress with regard to information: the information that reaches them most easily is located in areas close to them and covers local issues. Interviews with elderly homosexuals also highlighted the importance of not using masculinised language, to ensure that everybody who hears a discourse can feel included and identified. Another example of inclusive communication is that which does not exclusively reinforce the traditional model of the heterosexual family.

Informative media

Elderly people believe that there are very useful places on the street where information can be displayed: information boards and posters in crowded places fulfil their function very well. Moreover, both professionals and the elderly believe that the creation of information points for the elderly in areas significant to them would be beneficial. For example, places such as...
primary care facilities, markets, pharmacies and bakeries could be used to disseminate information.

The elderly usually like to receive information by post because it is very accessible and they feel that it is more personal. The downside of this means of communication is that information about activities can sometimes arrive too late. Moreover, the habit of sending information over the Internet is spreading at a faster rate than elderly people can adapt to new technologies. They therefore suggest that people should be able to choose whether to receive information by post or digitally.

Of the traditional media (press, radio and television), the elderly listen to the radio in particular because it is portable, although they point out in their ratings that the interlocutors sometimes talk too quickly and that advertising interferes with the messages. There is a general preference for local media because the information is regarded as helpful, local and generally respectful in terms of the image of the elderly it projects. They like to read the press because they can spend as long as they need on each article and it is easier to retrieve the information. Specifically, the elderly feel that they have gained a great deal with the creation of the free press: distribution points are easy to find, their articles summarise the information, there are more pictures and the layout is more manageable than traditional newspapers. However, they often warn about the sensationalist tone that sets them apart from paid-for daily newspapers.

Elderly people talked about the impact of the Internet on their lives. Firstly, because more and more information is now only available on-line, and secondly, because they see the Internet as a gateway to a wealth of information that can be very useful to them. The Internet also has the advantage of not requiring travel, so it can open up a whole new world for elderly people with mobility difficulties. Despite its potential benefits, many elderly people do not see the Internet as a tool of interest and have not developed the habit of using it. Some forum participants suggested that elderly people should take the initiative by trying to be open to the possibilities offered by new technologies and that support from younger members of their families could help to overcome any initial reluctance.

Elderly people welcome the fact that increasingly more centres for the elderly have a computer room with Internet access. The problem they mention is that, in some places, the computer courses are often expensive, there are not enough places and there are long waiting lists. To overcome the digital divide, institutions need to get involved in spreading the use of this tool. For example, some suggest that the elderly not only need to learn to use the Internet but that it would also be good for them to receive financial aid in or-

“Some forum participants suggested that elderly people should take the initiative by trying to be open to the possibilities offered by new technologies and that support from younger members of their families could help to overcome any initial reluctance...”
der to have a computer and Internet connection at home. One last highly regarded aspect is the gradual installation of Wi-Fi in different parts of the city. They suggest that this initiative be extended to nursing homes as it can be a key factor in the personal growth of residents.

Another information channel mentioned was informal communication. This is the primary channel for many elderly people. “Word of mouth” can be especially useful for reaching people who do not have an active attitude towards the acquisition of new information, despite the risks of distortion involved.

■ Information issuers

Barcelona’s institutional information is generally viewed as good by the elderly. They value the existence of citizen information offices (oficines d’atenció ciutadana, OAC), as well as municipal information boards in streets. The mailings containing the newsletters of the neighbourhood and the city, although they often arrive too late to attend activities, are also appreciated by the elderly because the information is often useful and affordable. Moreover, some people who receive home care or have difficulty leaving their homes are especially thankful for the municipal newsletters because they ensure a better connection to city life.

Some elderly people would like to see more centralised information about city events and specific information for the elderly. They therefore propose the publication of a guide containing resources of interest for the elderly (information on culture, health, leisure, etc.), together with information that is not widely available at present, such as details of the grants that residents can apply for. One positive action taken by district authorities highlighted by the elderly is that they send a written reply to letters of complaint.

“...some people who receive home care or have difficulty leaving their homes are especially thankful for the municipal newsletters because they ensure a better connection to city life.”

According to the professionals consulted, specialists in social services and health should receive specific training to optimise communication with the elderly.

Elderly people mentioned a number of situations with respect to service companies. The widespread presence of advertising in their environment is highly criticised by the elderly. This rejection is accentuated because of the stereotypes about women and the elderly they detect in the adverts. Professionals have warned that advertising...
should reinforce elderly values as being positive for society. Elderly homosexuals have also pointed out that the advertising often projects social images that exclude family models other than the traditional one.

Elderly people come across situations of misleading advertising against which they feel unprotected. They also mention the intrusive advertising of telephone calls selling products, as their persistence and frequency are very irritating to them. Another point raised were telephone companies that put up countless obstacles to customers leaving the company.

Centres for the elderly, organisations and community centres are also seen as agents that inform their members and their environment, with the advantage of providing local information. Clubs, spaces and centres for the elderly, as well as organisations in general, ought to do more to publicise the activities they put on. Neighbourhood newspapers are a good way of doing this (information can be inserted for free). The elderly suggest increasing the use of new technologies to improve communication between organisations and their members and to send information to other people, whether elderly or otherwise. They believe that the creation of a communication group in centres and associations could help improve circulation.

**Understanding information**

Much of the input obtained from the forums on the comprehension of information has emphasised the need for a more synthetic, coordinated (non-repetitive), quality and understandable language.

In written communications, the elderly feel that the information should be made more attractive, simple and specific. The font should be easy to read and use a suitable size, spacing and thick outlines. An illustrative example of the importance of this was mentioned by people with difficulties affecting their day-to-day life and by some of the women interviewed who receive care at home; on many of the products they buy, they cannot read the expiry date or ingredients. As for information on the Internet, professionals suggest encouraging websites to include a simple mechanism to adjust font size.

In the press, pictures and the use of plain language can make texts much easier to read (as in the style of the free press).

In telephone communication, the elderly place importance on friendly and helpful attention at an affordable price. One of the aspects of telephone calls that least pleases elderly people is the progressive introduction of automated responses, which speak too fast or give unclear instructions. They believe that it is important to have the option of personal attention when an automated response is not satisfactory.

With regard to the comprehensibility of institutional information, the elderly also
express some concerns. They point out that the people hired to inform the public do not always know the information they have to give out. The authorities are also insensitive to the specific characteristics of the elderly: they use technical language, the font size used on the website is small and the administrative procedures are very complicated. It is therefore important to have agents to advise the elderly by centralising their services in community centres, for example.

Lastly, the elderly argue that people with difficulties affecting their day-to-day living (for example, hearing or visual deficits) may have particular difficulties receiving information. However, some people strive hard and play a very active role in obtaining the information of interest to them. The people in our immediate environment and institutions specialising in people with sensory deficits are also key players in facilitating access to information.

“...people with difficulties affecting their day-to-day living (for example, hearing or visual deficits) may have particular difficulties receiving information. However, some people strive hard and play a very active role in obtaining the information of interest to them.”

The 3rd Convention: contributions and results

Discussion on communication and information

In the discussion of the workspaces the question was posed as to how we can improve the dissemination of information of interest to elderly people in organisations for the elderly. Suggestions included the creation of a tool (such as an Internet blog) where all clubs and associations for elderly people could share and centralise information accessible by everybody. The need to train informers at centres for the elderly was also mentioned, in order to ensure more effective communication (for example, with members of the club or when they welcome new users).

In the Convention documents, the Senior Citizens Advisory Council makes several references to communication and information. In relation to the communication and information dimension, the “Open document on the rights and freedoms of the dependent elderly” covers the right to receive information and be protected by measures for the prevention of dependency throughout life, together with the right for society to recognise and be sensitive to the difficulties of the dependent elderly.

Likewise, the “Declaration of the Senior Citizens Advisory Council of Barcelona on the financial situation and risk of social...
exclusion of the elderly”, makes two references to communication and information: firstly, it proposes that the public should be able to interact with public authorities and emergency services (and basic service companies) through free telephone lines. Secondly, the Advisory Council calls on the government to improve the channels of information on the rights and services of the elderly, so that they may know their rights, exercise them and also know which services and benefits they can apply for. They add, however, that the Advisory Council and district councils must also take responsibility for this task and get involved.

Lastly, the document entitled “Recommendations of the Senior Citizens Advisory Council of Barcelona on the treatment and participation of the elderly in the media” also mentions the social image of the elderly projected by the media and the measures that can be taken by the Advisory Council and organisations for the elderly in this regard. The contents of this document are included under the subheading “Discussion on respect, inequality and conditions for inclusion” in the “Respect and conditions for inclusion” dimension.

### Municipal actions and experiences

This section focuses on the municipal actions and experiences described at the Third “Voices of the Elderly” Convention. They are examples of how this dimension is reflected in municipal planning and in the initiatives implemented by organisations and groups in which elderly people participate. Overall, they reveal diverse aspects of cooperation between government and citizens.

The municipal action reveals the different tools and formats used by the City Council to inform citizens and communicate with them by describing the uses of each medium and instrument.

The three experiences described are initiatives based on the use of technology in projects with wide-ranging aims. “Digital literacy for the elderly” reveals the introduction of elderly people to the use of technology with the collaboration of senior citizens as volunteers. “Virtual Memory” focuses on interaction between teenagers and elderly people through e-mail, blogs and chats for the creation of a biographical work in digital format. Lastly, “Film Workshop” focuses on cooperation in a group of elderly people to create a short film. The three experiences have the common denominator that they are examples of a journey of learning and cooperation.

### Communication and information

Barcelona City Council currently uses a wide range of communication channels to inform the public about the city in general and for easy access to specific information of interest on services, activities or procedures.

Pilar Guinchard explains that since some channels are based on personal interac-
tion, whether face-to-face or over the telephone, the hours during which calls can be made have been substantially extended. Others, such as newsletters, are printed on paper. In addition to these channels, which have long been the only means of communication, we now have information on screen: screens that tell residents which types of public transport tickets they can purchase and screens with Internet access. The Internet has definitely opened up many new possibilities. One of these is the Virtual Office, which can be used to carry out multiple procedures without leaving our homes. Browsing the municipal website offers access to news, searching for information on activities and finding out the details of many initiatives taking place on a daily basis in Barcelona. It also opens the door to specific websites such as the Targeta Rosa site, which details the advantages that can be obtained with the senior citizens card in different services.

The municipal authorities sometimes launch specific campaigns. One example is the campaign that followed the launch of the new social services model, where information on the social services centres, home care service and shared meals was spread through newspaper supplements, brochures and posters in the metro. This type of campaign is justified if we consider the variety of conditions and circumstances of its intended recipients; it was designed to ensure that the information about the services and the words and images used were simple and conveyed the basic values of support and respect.

Lastly, Barcelona is present in the communication channels of on-line social networks; through Facebook or Twitter Barcelona, residents can discover points they have in common. It is a new way to communicate and reduce the distances between us.

Digital literacy for the elderly

This experience was launched by the Directorate for Resident Services of the Les Corts district.

In order to introduce the elderly to new technologies, clubs offer workshops to train users in Internet browsing and provide information and advice to people who connect to the Internet from the club, which is often the time when questions arise. Cris-

Did you know...

- According to the 2010 Quarterly Survey on information systems of Barcelona City Council, of the interviewees aged 65 to 74, 37.3% have used a computer at least once, 32.5% have used e-mail at least once, 35.7% have used the Internet at least once, 52.4% have a computer at home that they currently use, 46.0% have an Internet connection at home and 92.9% have working mobile phones at home.

- According to the same survey, when they need information about the city: 23.0% read the press, 18.3% check the Internet, 17.5% watch the television, 15.1% ask other people, 11.1% call 010 and 10.3% use the City Guide, among other means. If they need to carry out procedures with Barcelona City Council, 66.7% use the Citizen Information Offices (OAC), 4.0% call 010 and 1.6% visit the municipal website, among other means.
tina Jordà explains that a network of volunteers is formed from the elderly people who know how to surf the Internet in order to help others to do so, either from home or at the club. This learning process also seeks to promote intergenerational participation by involving children and grandchildren in meeting spaces and joint activities, for example.

To achieve these aims, free Wi-Fi has been installed in municipal clubs, free workshops have been held on Internet browsing, laptops have been bought to be borrowed by people who do not have their own equipment, and talks have been organised to advise people on the purchase of computers based on their individual needs.

**Virtual memory of the elderly**

This experience was carried out in the Sant Martí district through the Centre for Educational Resources with support from the Education Consortium (Educational Services) and the Community Projects scheme of "la Caixa".

The project is addressed to elderly people who are learning IT at different clubs for the elderly and teenagers from schools in the San Martí district. Norberto Sinatra and Joan Arumí explain that after the training phase of the elderly in multimedia classrooms, the knowledge acquired is put to work at meetings (physical and virtual) between senior citizens and teenagers from the district. Using e-mail, blogs and chats, the elderly explain their life experiences, writing their stories and adding photographs and old documents about the history of the neighbourhood. The teenagers then produce a biographical work in digital format on the experiences and lives of each elderly person.

Therefore, the aims of this project are not only to introduce the elderly to new technologies but to do so with a specific, fun purpose that feels close to home: sharing personal experiences with younger people. By so doing, the project strengthens intergenerational relationships in the district and helps to restore the collective memory and enhance the self-esteem of the elderly people involved.

**Film Workshop**

This experience was launched by the New Technologies Commission of the San Antoni Space for the Elderly in collaboration with the municipal facility of the Eixample district and TalaTala Producciones.

With the aim of introducing the elderly to new technologies, a group of different ages ranging from 63 to 80 years took part in the creative process of making a short film: script, direction, filming, image, sound, etc. Joan Domínguez explains that the highlights of the preparation, recording and editing were the good relations, teamwork, what was learned and the desire to continue acquiring knowledge in order to improve. Work has already begun on a second short to continue the project.
Conclusions and future proposals

The Senior Citizens Advisory Council is particularly concerned about the negative and stereotyped image projected all too often by the media on the elderly and the negative effects of this. As a result, it undertook a task of reflection that culminated in the manifesto presented at this convention.

Despite the information channels of the municipal services and the efforts of the Advisory Council, many elderly people have expressed their dissatisfaction with the situation because they believe that they are not sufficiently informed of many things affecting them, especially when they require a service and do not know where to go. This situation warrants a creative and self-critical review of why the channels for the circulation of information are not working.

The difficulty of transmitting information is also observed within and between organisations, both at city and district level. Organisations for the elderly carry out many similar projects and activities but are unaware of this and therefore lose out on the possibility of collaborating and sharing experiences.

The proposals of residents suggested at different points of the participatory process and during the Third Convention set down lines of work for implementing the “Barcelona, a senior-citizen friendly city” project, in which the participation of the elderly is crucial. Below is a list of wide-ranging actions to be introduced:

- Join forces to see how we can improve the circulation of information, specifically of useful information for day-to-day living among the elderly. The Advisory Council, organisations and centres for the elderly have become useful channels for the dissemination of information of interest to the elderly, both in relation to services and for the general information affecting them as elderly people.

- Learn how to “spread hope” and “strengthen participatory dynamics” within organisations to ensure that information flows from clubs and organisations for the elderly, training and equipping the elderly with the skills of participatory dynamics to develop their leadership skills and teamwork.

- The Advisory Council and organisations for the elderly must transmit information through traditional channels and the use of new technologies, creating updated and active websites and blogs. They must also have a social networking presence to publicise the actions of organisations for the elderly and the social contributions of older people.

- Use the “Barcelona, a senior-citizen friendly city” project both individually and in organisations to spread information, give a better welcome to newcomers to centres for the elderly, and encourage more participation, inserting the slogan “I also make Barcelona, a friendly city” everywhere.
Senior Citizens Advisory Council of Barcelona
The previous chapters have introduced the “Barcelona, an age-friendly city” project and its achievements thus far. We have seen how the project came about and what it consists of, the way in which Barcelona approached the task and why, and what the findings of the qualitative research have been. In short, the previous pages have detailed the progress made.

Turning now to what remains to be done, the Third “Voices of the Elderly” Convention gave us two unique inputs, one from Joan Subirats at the inaugural conference and one from Mayte Sancho at the closing conference. Both give us a useful set of elements for the three key issues in the implementation of the action plan: rethinking welfare policies, actions taken by government authorities, and the focus on the local sphere when promoting the basic values of autonomy, equality and diversity.

- Rethinking welfare policies

Following the shock of the global economic crisis, we are currently in the throes of a political debate on how to rethink welfare policies and how to meet the challenges posed by the more structural process of the change of era. Amid all of this, our cities have undergone a very obvious change. They are more heterogeneous and more crowded cities, neighbourhoods and streets with diversified and unique options. The changes in our life cycle have been dramatic and positive; more years in which to live and a potentially better life. This is not a problem, it is a wonderful opportunity. To make the most of it, we need to rethink our concepts and paradigms. A first element of primary importance is understanding that we cannot look to the future without thinking about how we ought to manage and recognise the diversity of every individual, the diverse dignity of both individuals and
groups. Anybody who thinks that we simply need to create a new policy, a policy for the elderly, is mistaken. What we need is to consider all municipal and public policies and programmes through the logic of diversity, based on the determination to ensure autonomy for all and to fight for equal conditions, possibilities and opportunities.

The logic of diversity and the importance of autonomy become all the more significant if we consider the intragroup heterogeneity of the elderly population. Often, the importance given to stereotypes means that we fail to appreciate the many ways in which elderly people do things and live out their lives, although this variety is evident when we observe the differences between the generation in its nineties and those in their sixties, or the differences in life expectancy determined by income level. Another trend observed among older people is the increasing importance they attach to autonomy, i.e. self-governance, in relation to how their lives are organised, taking care of themselves or with regard to how and where they wish to be cared for. These trends go hand in hand with rising social values and require diversity and autonomy to be something more than mere inspiring principles: we need to be able to translate them into criteria for action that become tangible in specific initiatives.

**Action by public authorities**

In our public authorities, the most conventional way of operating in institutions tends to be to do the work that needs to be done without considering anybody in particular. This is what is known in administrative law as “indifferent efficacy”. And yet, the challenge lies in how we can make our action programmes and public services more effective and more tailored, more “differentiated” in the sense of being more attentive to the growing diversity of ages, lifestyles, food choices, sexuality, family composition, culture, religion and ethnicity.

We clearly face a huge challenge in avoiding the trap of segmenting public services into different social categories. We need to reconstruct universal services so that they remain as such and, at the same time, make sure that they can handle diversity as a value to preserve and defend. We cannot generalise about “all old people” or “all women”, “all immigrants” or “all youths”. We need to realise that the older people of recent generations have much more in common in terms of lifestyle with groups of adults than with people of a very advanced age. Likewise, we need to focus on the increased life expectancy among men, which entails and will entail in the future more years of living as a couple, a decline in the loneliness resulting from widowhood and an increase in situations of dependence among couples. These new situations require us to fine tune our understanding of everyday life by firmly incorporating the gender perspective.

Segmentation can also be dangerous because it prevents us from seeing and noticing how families are being restructured,
with fewer members in each generation and longer lives; these are “narrow and longer” family structures in which care for the elderly must extend to equality between sexes and ages. Only if we do away with segmentation will we be able to entertain the idea that young people are also capable of accompanying elderly people in need of help to carry out their day-to-day activities. The negative effects of segmentation also affect the approach adopted to tackle challenges. Responding to the will of many people to live at home or live as though they were at home, when they require the help of others on a daily basis, calls for changes in our current approach to services and in housing policies. These changes need to allow for the incorporation of aspects such as the importance of the proximity of the homes of family members or advising people so that they can take informed decisions in order to continue living at home when they have functional limitations affecting their day-to-day living.

The role of the local environment in promoting the basic values of autonomy, equality and diversity

We are increasingly realising that we can only address the new demands of the change in era we face from the local level. People do not have differentiated problems in the way that governments have specialised their departments into health, education, social services and housing. People have mixed problems throughout their lives and they demand an integrated response, a response in which they are not merely an object of the Administration, but also a subject and a central figure. All of this is very difficult to achieve from a distance, just as it is difficult to conduct home services from a distance or to think about services that are increasingly integrated both physically and administratively.
At the local level, we need to realise that many more years of disability-free life will extend the period of independent living for many men and women, who will be able to actively engage in the defence of basic values such as autonomy, equality, and diversity. This type of contribution enriches city life but it also requires the support of the government authorities and the recognition of the person making the contribution. Increased longevity will also require the construction of new forms of care, support and solidarity that will affect us all. In short, the challenge is not how to adapt our cities and public authorities to the elderly, but rather how to rethink our cities and governments in order to adopt the basic values of autonomy, equality and diversity throughout life.

**Rethinking welfare policies**

As explained in Chapter One, being part of the Global Network of Age-friendly Cities requires an ongoing commitment to materialising the working route established by the WHO, in which the participation of older people is essential both for their contribution to the assessment of the city’s friendliness and for setting priorities, proposing solutions and monitoring progress. This working route is split into the following phases:

1. **Planning** (years 1-2)
   In this phase, the mechanisms are established to involve the elderly in the whole process, to assess the friendliness of the city, develop the foundations of the action plan based on the results of the assessment and to identify the indicators for monitoring progress.

2. **Implementation** (years 3 to 5)
   After the initial phase, an action plan is developed that is submitted and subject to the approval of the WHO. This plan has an implementation period of three years.
3. Assessment of progress (end of 5th year)
At the end of the first part of the implementation, a progress report is submitted to the WHO with the results and indicators formulated in the planning phase.

4. Continuous improvement
Based on the results of the assessment, an ongoing improvement phase will begin with the development of a new action plan for a five-year period. The progress of this new plan will be measured at the end of this second implementation period.

Barcelona has carried out the key tasks of the planning phase, launched a large-scale participatory process and performed the groundwork for the assessment that will form the backbone of the action plan.

The route to follow from now on in the planning phase has the following milestones for developing the basis for the “Barcelona, age-friendly city” action plan: a tool for planning the municipal action over the coming years and the creation of an expert committee, composed of individuals familiar with all of the fields covered by the eight dimensions that structure the “Barcelona, age-friendly city” project. Their input is sought to contrast with the findings on both levels – substantive and operational – and to extend cooperation to actors from all sectors capable of contributing to implementation of the action plan.

The planning phase will conclude with the specific projects carried out by the municipal government to make this project one of the central themes of the future action plan of the city overall and for its individual districts. When the municipal action plan is submitted to the WHO, the second phase will begin. The action plan will be implemented across the city over a three-year period.

The participatory movement of older people as a catalyst for change

The path taken by the “Barcelona, Age-friendly City” project has been a productive one. The work plan designed to encourage and facilitate the participation of older people has given many of Barcelona’s residents a say in how the city can be made more friendly. It has also shown that the input of the elderly refers to improvements addressed not only to older generations, but rather to improvements that contemplate future sustainability, i.e. they think beyond the current generations of adults, teenagers and children.

The participatory movement of older people, led by the Advisory Board, has shown that it wishes to play a leading role in the construction of an age-friendly city and that it wishes to do so with determination. As a result, the Third Convention has outlined a working agenda, an agenda that will stimulate the City Council and lead to the launch of actions for organisations as a group and for individuals. Older people feel that they are citizens, social actors with responsibilities that they refuse to give up, which is why they make demands and give answers, why they ask and give; they do so by thinking in terms of creative cooperation among all stakeholders, public and private. They do it in the determination to build a city for all ages.

“...the participatory movement of older people, led by the Advisory Board, has shown that it wishes to play a leading role in the construction of an age-friendly city and that it wishes to do so with determination.”
The Barcelona age-friendly city project involved the participation of:

- **PARTICIPATORY COUNCILS**
  - Senior Citizens Advisory Council of Barcelona
  - Municipal Council for Social Welfare (Elderly Group)
  - Senior Citizens Council of Ciutat Vella
  - Senior Citizens Council of L’Eixample
  - Senior Citizens Council of Sants-Montjuïc
  - Senior Citizens Council of Les Corts
  - Senior Citizens Council of Sarrià-Sant Gervasi
  - Senior Citizens Council of Gràcia
  - Senior Citizens Council of Horta-Guinardó
  - Senior Citizens Council of Nou Barris
  - Senior Citizens Council of Sant Andreu
  - Senior Citizens Council of Sant Martí

- **MEMBER ORGANISATIONS OF THE SENIOR CITIZENS ADVISORY COUNCIL OF BARCELONA**
  - Lessons for the Elderly (Aules per a la Gent Gran, AUGG)
  - Catalan Association of Families, Users and Collaborators of Assisted Geriatric Centres (Associació Catalana de Familiars, Usuaris i Col·laboradors de Centres Geriàtrics Assistits, ACFUC)
  - Association of Families of Alzheimer Sufferers of Barcelona (Associació Familiars malalts d’Alzheimer de Barcelona, AFAB)/Welcome and Information Department
  - Association of Training Classes (Agrupació d’Aules de formació, AFOPA)
  - Association of RENFE Pensioners and Retirees of Catalonia (Asociación de Jubilados y Pensionistas de RENFE de Catalunya)
  - Coordinating Association for Old Age (Associació Coordinadora per a l’Ancianitat, ACA)
  - Association of Stevedore and Dockworker Pensioners of Barcelona (Associació de Pensionistes Estibadors Portuaris de Barcelona)
  - Widows Association of Barcelona (Associació de Vídues de Barcelona)
  - Association of Industrial Engineers of Catalonia (Associació d’Enginyers Industrials de Catalunya)/Retirees Commission
  - Association of Early Retirees and Pensioners of SEAT (Associació Prejubilats i Jubilats de SEAT)
  - Association of Older Volunteers (Associació Gent Gran Voluntària, ASVOL)
  - Association of Retired Workers of Catalonia (Agrupació de Treballadors Jubilats de Catalunya, ATJC)
  - Belluga’t
  - Professional College of Civil Engineers of Catalonia (Col·legio Ingenieros Caminos, Canales y Puertos de Catalunya, CICCP)/Retirees section
  - Barcelona Swimming Club (Club Natació Barcelona)/Masters Department
  - Lambda club (Casal Lambda) “Autumn Group”
  - Professional College of Sales Representatives of Barcelona (Col·legi d’Agents Comercials de Barcelona)/Retirees Association
  - Professional College of Pharmacists of Barcelona (Col·legi de Farmacèutics de Barcelona)/Senior Citizens Section
  - Professional College of Industrial Technical Engineers of Barcelona (Col·legi d’Enginyers Tècnics Industrials de Barcelona)/Retirees Commission
Professional College of Doctors of Barcelona (Col·legi Oficial de Metges de Barcelona, COMB)/Retired Doctors Department

CONNEX

Dones Mundi

Coordinator of Municipal Clubs for the Elderly

Coordinator of Representatives and Pensioners of the Federation of Residents’ Associations of Barcelona

Federation of Associations of Senior Citizens of Catalonia (Federació d’Associacions de Gent Gran de Catalunya, FATEC)

Catalan Federation of the Democratic Union of Pensioners (Federació Catalana de la Unió Democràtica de Pensionistes, FCUDP)

Federation of Catalan Organisations of Senior Citizens (Federació d’Organitzacions Catalanes de Gent Gran, FOCAGG)

Les Grans / Ca la Dona

Association to Promote Consumer Guidance for the Elderly (Associació Promotora de l’Orientació del Consum de la Gent Gran, PROGRAN)

Spanish Seniors for Technical Cooperation (Seniors Españoles para la Cooperación Técnica, SECOT)

Catalan Union of Seniors (Unió Catalana de Sèniors)

Union of Pensioners, Retirees and Early Retirees of the UGT (Unió de Pensionistes, Jubilats i Prejubilats de la UGT)

CCOO Trade Union of Barcelona (Unió Sindical de CCOO del Barcelonès, USCOB)

Workers’ Trade Union of Catalonia (Unió Sindical Obrera de Catalunya, USOC). Federation of Retirees and Pensioners

Association for the Protection of the Elderly (Associació per la Defensa de la Gent Gran, ADEEG)

Women’s Network for the over-50s (Xarxa de Dones de 50 i més)

ORGANISATIONS AND ASSOCIATIONS

Platja d’Aro Club for the Elderly Association (Associació Casal Gent Gran Platja d’Aro)

Verdum Club for the Elderly Association – Crafts (Associació Casal Gent Gran de Verdum - Artesania)

Mossèn Clapés Club for the Elderly Association (Associació Casal Gent Gran Mossèn Clapés)

Casalet del Turó Cultural Association (Associació Cultural Casalet del Turó)

Casa Nostra Club for the Elderly Association (Associació Casal Gent Gran Casa Nostra)

Bascònia Club for the Elderly Association (Associació de Gent Gran Casal Bascònia)

Vallbona Club for the Elderly Association (Associació de Gent Gran de Vallbona)

Penitents Association of Retirees and Pensioners (Associació de Jubilats i Pensionistes Penitents)

Pau Casals Association of Retirees and Pensioners (Associació de Pensionistes i Jubilats Pau Casals)

La Sedeta Association of Retirees and Pensioners (Associació de Pensionistes i Jubilats La Sedeta)

Siracusa Club for the Elderly Brotherhood Association (Associació Germanor Casal d’Avis Siracusa)

Congrés-Indians Residents Association (Associació de Veïns Congrés-Indians)

Association of Residents and Traders of Plaça Lesseps (Associació De Veïns i comerciants de la Plaça Lesseps)

Association of Residents and Traders of carrer La Cera (Associació de Veïns i Comerciants del carrer La Cera)

Meridiano Cero Residents Association (Associació de Veïns Meridiano Cero)

Sagrada Família Residents Association (Associació de Veïns Sagrada Família)

Association of the Residents Platform of Sant Andreu (Associació Plataforma veïnal de Sant Andreu)
Friends Association of La Bordeta
(Associació Amics de la Bordeta)

Representative of Retirees of the
Residents Association of Horta
(Associació de Veïns i Veïnes d’Horta)

Representative of Retirees of Font
de la Guatlla-Magoria (Jubilats Font
de la Guatlla-Magoria)

Senior Citizens Representative of the
Residents Association of La França
(Associació de Veïns la França)

National Coordinator of Pensioners
and Retirees of Catalonia

Association for Effective Women
(Associació per la Dona Efectiva, APDE)

Elisenda de Montcada Women’s
Association (Associació de Dones
Elisenda de Montcada)

Association of Forced Retirees
(Associació de Jubilats Forçosos)

Nou Horitzó Association

Association for Development and
Well-being (Associació pel Benestar
i el Desenvolupament, ABD)

Association for the Leisure and Culture
of the Third Age (Associació por la
Cultura y el Ocio de la Tercera Edad,
ACOTE)

Avismó

Solidary Bank of Free Services
(Banc Solidari de Serveis Gratuïts)

Càritas Diocesana de Barcelona

Centre Passatge

Professional College of Educators
of Catalonia (Col·legi de Pedagogs
de Catalunya)

Professional College of Economists
of Catalonia (Col·legi d’Economistes
de Catalunya)

Colla Cuidadora (Carer team)

Commission for the Elderly of the
Community Plan of Poble-Sec

Coordinator of Health Users

Red Cross

Culture. Solidarity/Peace, Community
of Sant Egidi

Friends of the Elderly Foundation
(Fundació Amics de la Gent Gran)

Secretariat of Organisations of Sants,
Hostafrancs and La Bordeta

BARCELONA CITY COUNCIL

Executive Management
(Social Action and Citizenship)

Department for Health Services
(Social Action and Citizenship)

Department for Social Participation
(Social Action and Citizenship)

Department for Civil Rights
(Social Action and Citizenship)

Department for the Elderly
(Social Action and Citizenship)

Department for Basic Social Services
(Social Action and Citizenship)

Department of Communications
(Social Action and Citizenship)

Department for Conflict Management
(Social Action and Citizenship)

Department for Participation
and Associations (Education, Culture
and Welfare)

Department for Immigration
and Cooperation (Education, Culture
and Welfare)

Department for Women
(Education, Culture and Welfare)

Department for Uses of Time
(Education, Culture and Welfare)

Department for Community Centres
(Education, Culture and Welfare)

Department for Prevention Services
(Prevention, Security and Mobility)

Department for Mobility Services
(Prevention, Security and Mobility)

Department for Communications
and Information Systems

Road Safety Education of the City
Police Force

Department for Green Space Services
(Environment)

Municipal Social Services Institute

Barcelona Sports Institute

Municipal Institute of Education

Municipal Institute for People with
Disabilities
Among the thousands of elderly people who participated in this project (through the district Forums for the elderly, the discussion groups and the Third Convention), many do not belong to any of these organisations but have given their input as users of clubs and spaces for the elderly, nursing homes and assisted housing, or as residents of Barcelona.

**Participants in the Simultaneous Work Spaces of the Third Convention**

**Social and community participation**
- Mr Antoni Navarro, member of the Senior Citizens Advisory Council
- Ms Glòria Meler, Director of Citizen Participation, Barcelona City Council
- Ms Esther Quintana, Head of the Senior Citizens Department, Barcelona City Council
- Ms Pura Hidalgo, volunteer for intergenerational projects in the district of Sants-Montjuïc
- Mr Víctor Pérez, student at the University of Barcelona “University Sharing”
- Ms Estrella Hernández, volunteer at the Baix Guinardó club for the elderly
- Ms Paula Garcia, promotional figure at the Baix Guinardó club for the elderly

**Mobility and transport**
- Ms Montserrat Moll, member of the Senior Citizens Advisory Council
- Mr Carles López, Department of Mobility, Barcelona City Council
- Ms Maribel Cruset, Road Safety Education of the City Police Force of Barcelona
- Ms Maite Peris, Director of the Corporate Development Service and Public Relations of TMB

**Accessibility and public spaces**
- Ms Josefina Leóncio, member of the Senior Citizens Advisory Council
- Ms Montse Rivero, Strategic Plan for the Urban Green Space, Parks and Gardens
- Ms Elena Mas, Department for Prevention, Barcelona City Council
- Ms Amparo Cid, volunteer in the Physical Activity and Company project, Nou Barris district
- Mr Josep Ordóñez, Head of the Local Network of Urban Gardens
- Ms Paquita Surribas, vegetable farmer of the Can Mestres vegetable garden
**Housing**

- **Mr Juan Manuel Velasco**, member of the Senior Citizens Advisory Council
- **Mr Lluís Fajari**, Housing Department, Barcelona City Council
- **Ms Magdalena Alum**, user of Joan Torras assisted housing
- **Ms Carolina Canal**, Director of Joan Torras assisted housing
- **Ms Eva Galofré**, promotional figure in the “Let’s get out” project Community Plan of Poble-Sec
- **Mr Eduard Garcia**, volunteer for the “Let’s get out” project Community Plan of Poble-Sec
- **Ms Elvira Cerro**, participant in the “Let’s get out” project Community Plan of Poble-Sec
- **Mr Eduard Garcia Freixades**, FOCAGG

**Social and health services**

- **Mr Jordi Galligó**, member of the Senior Citizens Advisory Council
- **Mr Francesc Porret**, member of the Senior Citizens Advisory Council
- **Ms Lucia Artazcoz**, Public Health Agency of Barcelona
- **Mr Ramon Mora**, Manager of the Municipal Social Services Institute, Barcelona City Council
- **Ms Núria Losano**, Barcelona Sports Institute, Barcelona City Council
- **Mr Antonio Gil**, social educator at Fortpienc nursing home
- **Ms Irene Peña**, resident of Fortpienc nursing home
- **Ms M. Luz Rodríguez**, President of the Association of Relatives of Fortpienc nursing home
- **Ms Rosa Rubio**, Regional Director of Social Services for the Gràcia district
- **Mr Joan Clota**, neighbourhood radar in the Radars project in the Gràcia district
- **Mr Josep Maria Raya**, Director of Personal Services of the Gràcia district
- **Ms Olga Palau**, volunteer at Can Castelló club for the elderly
- **Mr Josep Muniente**, volunteer on the Solidarity Commission of Navas club for the elderly
- **Ms Marifé Molano**, promotional figure at Navas club for the elderly
- **Ms Lídia Mas and Mr Eduard Garcia**, members of the Colla Cuidadora (Carer team)

**Respect and inclusion**

- **Ms Montserrat Rabella**, member of the Senior Citizens Advisory Council
- **Ms Mari Fe Calderón**, Immigration Department, Barcelona City Council
- **Mr Ventura Lázaro**, volunteer at Vall d’Hebron club for the elderly
- **Ms Marta Borrell**, promotional figure at Vall d’Hebron club for the elderly
- **Ms Montserrat Canals**, member of the core group of the AHEAD project
- **Ms Montserrat Sarri**, FATEC

**Communication and information**

- **Ms M. Lluïsa Oliveda**, member of the Senior Citizens Advisory Council
- **Ms Pilar Guinchard**, Citizen Information Department, Barcelona City Council
- **Mr Joan Domínguez**, volunteer at the San Antoni Space for the Elderly
- **Ms Cristina Jordà**, promotional figure in the Digital Literacy project of the district of Les Corts
- **Mr Joan Arumí**, member of the Can Saladrigas club for the elderly
- **Mr Norberto Sinatra**, promotional figure in the Virtual Memory project of the San Martí district

**Mutual support and aid**

- **Ms Dolors Fita**, member of the Senior Citizens Advisory Council
References

- 2008-2011 Municipal Action Plan
- 2006-2010 Municipal Programme for the Elderly
- Municipal Citizen Participation Master Plan for the period 2010-2015
- 2010-2015 Municipal Plan for Lesbians, Gays, Transsexuals and Bisexuals
- City Education Project. 2008-2011 Action Plan
- Municipal Senior Centres and Facilities Improvement Plan
- 2006-2018 Urban Mobility Plan (Pla de Mobilitat Urbana, PMU)
- 2010 Universal Accessibility Master Plan, Transports Metropolitans de Barcelona (TMB)
- Barcelona Public Safety Plan. 2009-2011
- 2009 Barcelona Intercultural Plan
- 2011 Green Strategic Plan
- The LAPAD (Law 39/2006 on promotion of personal autonomy and care for dependants) includes the aim of preventing dependence
- Law 12/2007 on social services
- Law 9/2003 on Mobility