



EXECUTIVE COMMITTEE

President:

Prof Gary Andrews, Australia

Secretary General

Prof Mary Luszcz, Australia

Treasurer:

Mr Charles Young, Australia

President Elect:

Dr Gloria Gutman, Canada

Past President:

Prof Edit Beregi, Hungary

COMMUNICATIONS

Website:

www.cas.flinders.edu.au/iag

E-mail:

IAG@flinders.edu.au

Telephone:

+61 8 8201 7552

Facsimile:

+61 8 8201 7551

Postal Address:

Centre for Ageing Studies, Flinders University of South Australia, Laffer Drive, Science Park, Bedford Park, South Australia 5042

IN THIS ISSUE

Presidents report	1
From the Secretary General	2
Reports from the regions	4
Novartis Prize for Gerontological Research	7
IAG congress calendar	8



President of IAG, Prof Gary Andrews

PRESIDENT'S REPORT

I am pleased to write this short greeting to all of you in my capacity as newly inducted President of the IAG. The 16th World Congress of Gerontology held in Adelaide, Australia is over and we must now actively build on all of the positive opportunities for further networking, collaboration and development that the Congress presented. As an event the Adelaide meeting proved an outstanding success. Over 2000 delegates attended the Congress representing 64 different nations. While the Satellite meetings were less well attended (150 delegates in Honolulu and 174 in Singapore) they, nonetheless, added greatly to the scope and quality of the Congress.

The video-conference linking all three sites and marking the opening of the international event was widely acclaimed by delegates as riveting in impact. During four and a half days, more than 350 symposia, round tables and free paper topics were run as 25 parallel sessions with a major exhibition, professional visits, many special events and satellite symposia in addition. Apart from the scientific presentations that provided an

overwhelming array of information there were opportunities to pursue exchanges with many of the key international agencies such as the United Nations, the World Health Organization, the UN International Institute on Ageing (Malta), the Geneva International Network on Ageing (GINA) and many others. In a significant departure from past practice this will be the first IAG Congress that provides a direct contribution from surplus funds to assist the work of the IAG Secretariat (more than US\$60,000) and in addition will provide a seeding loan (US\$30,000) to the Organising Committee of the 17th World Congress to be held in Vancouver, Canada in 2001. The Congress culminated at the closing ceremony with the endorsement by delegates of the **Adelaide Declaration on Ageing** a copy of which is included with this Newsletter.

Between now and the next World Congress in Vancouver in 2001 the prospect of the 1999 International Year of Older Persons provides unprecedented opportunities for pursuing the global objectives of the IAG. I was able to represent the Association at the UN NGO Committee on Ageing meeting on the occasion of the Seventh Commemoration of the International Day of Older Persons. This meeting focussed on 'Older Persons and Human Rights' and was very well attended. I was able to take the opportunity of discussing in depth the proposed collaborative project on 'Developing a Global Research Agenda for the Twenty First Century'.

This project is being undertaken as a collaborative effort involving the UN programme on ageing, the IAG and the Novartis Foundation for Gerontological Research. It will commence with an Expert Group Meeting in September this year and

culminate in the proposal of a comprehensive research agenda for endorsement of the UN General Assembly in 2001, translation into all 6 UN languages and a major public launching at UN Headquarters early in 2001 with participation of most prominent scientists relating to each priority area, as well as heads of international development agencies.

It is also planned to introduce the Research Agenda to all of the Member States of the United Nations and distribute it to national governments for action. Following the Expert Group Meeting, intended to identify a framework for the Research Agenda, I hope that the IAG Regional Committees and Member Associations will become heavily involved in the process of further development and refinement of the specific elements in the drafts produced by the Expert Group.

I will write directly to Regional Chairs and Presidents of Member Associations regarding this initiative in the near future.

The World Health Organization Programme on Ageing and Health is also seeking our close involvement in a number of key activities in the immediate future. Prominent scientists in the IAG network will be approached by the WHO to provide draft position papers in several critical topic areas.

These papers will, after further consultation and development, be distributed as joint statements of WHO and IAG. In addition our assistance is to be sought in the development of guidelines for conduct of national survey research on ageing and in a number of the activities planned by WHO to contribute to the 1999 International Year of Older Persons. I expect to have further information to share with you on these initiatives in the near future.

With the commencement early in 1998 of the IAG World Wide Web Home Page I look forward to keeping in closer touch with many of you as we work towards a much

more proactive and productive time for the IAG and its regions and member associations. Together, as an international organisation, I hope we can contribute to improved global understanding of human ageing and particularly, through fostering of research and educational initiatives world wide, to improved prospects for healthy and successful ageing and the attainment of the objectives expressed by the UN theme of the 1999 International Year of Older Persons — ‘... *a society for all ages*’.

Gary Andrews
President, IAG

FROM THE SECRETARY GENERAL

Highlights from 1997 Council Meetings held during the World Congress, Adelaide



IAG Executive

The composition of the Executive is shown on page 1. Professor Gary Andrews (President), Professor Mary Luszcz (Secretary General/Vice President) and Mr Charles Young (Treasurer) will operate as a sub-executive of the IAG in Adelaide for matters of a routine nature arising between meetings of the full Executive Committee. Other members of the Executive include Past-president, Professor Edit Beregi and President-elect, Professor Gloria Gutman. Outgoing members of the previous executive made reports on key activities during their terms in office. The meeting acknowledged their contributions, extended their gratitude to them and wished them well in all their future endeavours.

Secretariat

The issue of establishing a permanent secretariat had been explored initially via a postal vote, subsequent to the Congress in Budapest. In Adelaide it was decided that the notion of a permanent secretariat was no longer pressing. Ready access to electronic means of communication had advanced to a stage rendering superfluous a permanent physical location.

For the next four years the Secretariat will be located at the Centre for Ageing Studies, Flinders University of South Australia. In lieu of a permanent secretariat, the Executive was urged to proceed with establishment of a WWW address and WebPage. Soon, if not now, you will be able to access the IAG at www.cas.flinders.edu.au/iag. A Website should facilitate communication among Council members and others interested in the objectives and activities of the Association.

Budgetary Matters

Increase to Capitation Fees (Dues). A proposed increase in the capitation fee to enable the IAG to operate in a more proactive way between Congresses was moved. Dues have been constant for a considerable period of time. Joaquin Gongalez Aragon, the former Secretary-General from Mexico, reported that the previous increase occurred in 1972 and was from \$0.25 to \$0.50, per member of constituent societies/organisations. The proposal was debated, with members from several countries questioning the need for, and level of, increase. The Treasurer moved that the amount of the increase be 10% (ie, from \$0.50 to \$0.55 per member of constituent society or organisation). A vote by council members passed the motion by a substantial majority.

Pledge to IAG Secretariat

It was agreed that a pledge of 25% of the net surplus from each Congress would be made available to the IAG Secretariat to be used by the Executive for day-to-day operational activities on behalf of the IAG. This arrangement would apply to the current (1997) and the next (2001) Congress. At that point, the Pledge arrangement would be reviewed.

Congress Finances

Two decisions were taken that will affect future Congress organisers. It was agreed that final audited Congress accounts should be presented to the Executive and then to Council Members in a timely fashion, eg, within 6 months of the closure of a Congress. To assist in early stages of Congress organising, it was agreed that a low interest loan

would be made from Congress to Congress. In the first instance the value of the loan would be \$US30,000. It would be made contingent upon a Congress Business Plan (budget) being approved by the Executive and repayable within six months of the closure of the Congress.

Karger Journal: Gerontology

Dr E Busse has served for many years as *Gerontology's* 'Editor for the IAG'. Prof Andrews had proposed, and Karger had accepted, a new editorial arrangement whereby the *Editor for the IAG* would be appointed for a four-year term, concurrent with membership on the IAG Executive. The Editorship need not be tied to any particular Executive position. Gary Andrews proposed that Mary Luszcz assume this role on the basis of her research background and experience as reviewer and editorial board member for other peer-reviewed journals. Council endorsed this recommendation.

New Member Organisations

Six new applications were pending (1 each from Bulgaria, Colombia, Georgia and Ukraine, and 2 from Russia). The meeting agreed to admit five new members: from *Bulgaria, the Bulgarian Association on Ageing*; from Colombia *The Columbian Federation of Gerontology*; from Georgia, *The Georgian Society of Gerontology*; from Russia, *The Gerontological Society of the Russian Academy of Sciences*, and from the Ukraine, *The Ukrainian Gerontology and Geriatrics Society*. With these new admissions, 56 countries and 60 national societies are members of the IAG. Based on individual members of the constituent societies, each would be entitled to 1 voting Council member (By-Laws, Article 14a). Details on the president and address of each new organisation appear later in the newsletter, along with a short description of our new Colombian and Russian member organisations.

European Region: The Older Person's Charter of Standards

Prof. Mario Passeri spoke to the charter that outlined a series of entitlements and rights of older people and means to achieve them. In discussion, several concerns were

raised, such as the pertinence of some of the specific recommendations in the document to every member country of the IAG, given the diversity of policies and procedures that characterise aged care, broadly defined; the function of the IAG Council in approving or endorsing such documents, and the purpose to which the document would be put or how it would be used.

It was agreed that there should be basic entitlements for all elderly people and that the document suggested a framework that individual countries or regions could work with to develop their own charters. It was pointed out that a similar framework was used by the British Geriatric Society.

The meeting commended the European Region for its efforts in codifying the complex issues encompassed in the Charter. It can be obtained through the European Region's Permanent Secretariat (address below).

Adelaide Declaration

A draft of the declaration was published on August 21 1997 in the First Edition of the Congress Courier. Members who had already commented on it were thanked and others were invited to peruse the draft and provide further comments or suggestions for amendments.

A final draft was presented at the Closing Ceremony and endorsed by the Congress. The *Adelaide Declaration* is reprinted in full as an insert to this newsletter and is available at our Web site. We urge you to make additional copies and disseminate them widely in your regions, to organisations, researchers, scholars and policy makers interested in furthering our understanding of older adults and thereby contributing to their welfare.

UN Affiliation

The IAG's consultative status with the UN as an NGO member of the Economic and Social Council was reconfirmed. As an NGO with Class 2 consultative status, the IAG may initiate recommendations to the UN, for instance to its Ageing Unit,

without being requested to do so. Since the Budapest Congress, the IAG participated with the UN in preparation of a Declaration and Plan of Action of the World Summit for Social Development.

The UN *Programme on Ageing* is developing a Research Agenda on Ageing for the Twenty-first Century to serve as a background for policy responses to population and individual ageing, especially in developing countries. Gary Andrews has been engaged in some of the early deliberations, and members of the Executive may be called upon to contribute further to this process at meetings to be held in 1998 and 2000.

Year of Older Persons Initiatives

Gary Andrews reported that he is a member of several bodies promoting activities for the UN International Year of Older Persons (IYOP) in 1999. Their Website is well worth regular visits: <http://www.un.org/dpcsd/dspd/iyop.htm>. These include being a member on an Expert Advisory Panel on Ageing and Health of the WHO, Ageing and Health Unit (Chief, Alexandre Kalache, MD, PhD) and Coalition '99, which has been established to promote and coordinate activities within Australia.

Future Congresses

Vancouver, British Columbia was confirmed as the location of the **17th World Congress of Gerontology** in 2001. Professor Gloria Gutman is the President of the Congress. She and her organising committee have secured a beautiful conference centre. Planning of the event is now well underway and it is anticipated that as many as 5,000 delegates may register for the Congress. See the 'Congress Calendar' below for further details.

2005 World Congress of Gerontology

Austria, Brazil, Israel, Portugal and the United Kingdom sought to host the 18th World Congress to be held in 2005. Subsequently Israel withdrew its application and Portugal lent its support to the Brazilian bid. Each location clearly met all the requirements for hosting the 2005 Congress. Conference and

accommodation facilities and infrastructure appeared quite adequate. Ultimately Rio de Janeiro was selected, by a substantial majority. It was suggested that future bids stress the scientific status of the proposed site, with lesser emphasis being given to the merits of local attractions and travel options.

Novartis Prize

The Novartis Prize would remain at 50,000 Swiss Francs and be awarded every two years, as had been the case for the previous Sandoz prize. Slight modifications will need to be made to the guidelines. The composition of the 8-member jury panel for the prize comprises three categories: 4 nominees by the IAG, 2 nominees by the Foundation (people external to the company) and 2 former prize winners. Dr H Stähelin, President of the Board of Trustees, NFGF, will continue as Administrative Officer/Coordinator for the Novartis Prize, as a non-voting member of the panel. Further information is included later in this *Newsletter*.

Mary Luszcz
Secretary General of IAG

REPORTS FROM THE REGIONS

COMLAT

Ernesto F. Chalita, Chair

The newest region, COMLAT (Latinamerican Committee) was designated on July 8th 1993. Since then, COMLAT has academically supported more than 37 Gerontological meetings in the region (eg, Venezuela, Mexico, Cuba, Colombia, Brazil, Chile, Paraguay, Uruguay, Argentina). The most significant meeting was the inaugural Pan-American Congress of Gerontology that was held in conjunction with the North American Region in February 1995, in Sao Paulo, Brazil.

The II COMLAT Regional Congress was held in November 1995, in Buenos Aires, Argentina. There were more than 1800 attendants, many of them coming from several countries outside Latin America. Meetings were organised in

collaboration with the World Health Organisation and the Pan American Health Organisations. Latin American Gerontologists have attended and participated in several congresses, conferences and workshops all around the world.

Meetings also have been held throughout the region in collaboration with governments to achieve National Plans for the elderly people in Colombia (May 95), Cuba, (May 96), Brazil (July 96), Argentina, (September 96) and Chile (November 96).

Regional sub-committees have been established in the areas of Research, Rehabilitation, Abuse and Neglect, and Accidents. Each of these committees is researching and developing their respective programs so that some consensus can apply in the Region. The Region is committed to working together to develop the field of Gerontology. The success of this venture is reflected in an increase in the number of members of Regional Gerontological Societies, eg, Brazil and Argentina have more 1600 members and in full Regional support for Brazil as the site for IAG's World Congress in 2005.

Looking to the future, there are three important events to mark the celebration of the International Year of Older People in 1999. The major events are the II Pan-American Congress and the III COMLAT Congress, (see *Congress Calendar* below). Between these congresses the Region will hold a meeting in conjunction with the Scientific Societies of Gerontology and Geriatrics of the MERCOSUR countries to develop policies and programs for the aged population.

ASIA/OCEANIA

Hajime Orimo, Chair

The Asia/Oceania Region of the IAG was established in 1978, administrated mainly by Australia and Japan. As the recognition of the importance of population ageing in this region has grown, so also has the participation by countries in this

association. Currently, the member countries include Australia, China, DPR Korea, Hong Kong, India, Indonesia, Japan, Korea, New Zealand, Singapore, Taiwan and PR China.

Since 1995, this region has issued an annual Newsletter of IAG, Asia/Oceania Region, to strengthen the linkage among each association and promote mutual understanding of members of various countries. It features reports from regional council members, information on member societies and conference news. The distribution of 6000 copies through council members includes countries within this region and the other three IAG regions.

Regional congresses are now held every four years. The first was held in Melbourne, Australian (December, 1980), the second in Singapore (January, 1983), the third in Bangkok, Thailand (November, 1987) and the fourth in Yokohama, Tokyo (November 1991). The 5th Regional Congress was held in Hong Kong during 19-23 November 1995 with the theme *Total care of the elderly - A multidisciplinary approach*. This very successful conference was attended by about 1100 delegates from this region and 35 other countries outside the region, including the United States, Canada and United Kingdom. Professor Tom Arie of University of Nottingham, United Kingdom, gave the keynote address *Care of the Aged: New and Old Issues*.

Eight plenary speakers from various fields of Gerontology from all over the world addressed the delegates. There were invited symposia, round table sessions, oral papers and poster presentations. Topics covered in the symposia included: support of caregivers in Asian countries, biochemical aspects of ageing, development in geriatric assessment, care of elderly patients with cancer, depression in the elderly, oriental medicine, etc. More than 600 papers were presented by 474 speakers on topics such as: caring for the demented elderly, attitudes towards the elderly, quality of life, centenarians and longevity, biology

of ageing, osteoporosis, metabolic disorders, cerebrovascular diseases, dementia and Parkinson's disease.

The conference also featured a satellite symposium on osteoporosis, nutrition and infection. Diverse topics were discussed in the areas of biological science, clinical medicine, social and behavioral science, and social research planning. The conference provided a significant opportunity for academics, social scientists, practitioners, healthcare professionals and social workers to share their experience in the care of elderly people.

This Hong Kong congress was not only a scientific success, but also a financial success. Half of the surplus was donated to the secretariat of regional committee of IAG according to the regulation of our regional association of IAG. I would like to take this opportunity to express my sincere thanks to Dr Leung and all the members of the organizing committee of the 5th regional congress in Hong Kong.

The 6th Regional Congress will be held in Seoul, Korea, hosted by the Korean Gerontological Society. The theme is *Changing family systems and care for the aged in the 21st century*. Korea, in cooperation with other Asian/Oceania countries, will assume an active role at the international level in preparing for the 21st century.

An interim activity was the second Sino-Japanese symposium (December 1995). This symposium was organized as an IAG Asia/Oceania Region Workshop, sponsored by the Geriatric Society (Beijing Branch), the Chinese Medical Association and the Japanese Gerontological Society. In 1998 a meeting will be held in Korea to plan a similar small symposium or workshop, in conjunction with a visit of the chairman and the secretary of the region to promote the 1999 regional congress in Korea (see *Congress Calendar*).

Other activities for the future include exploring the possibility of

organizing a workshop on how to develop training and gain experience working within a geriatric assessment team on a multidisciplinary basis.

EUROPE

Mario Passeri - Chair

In the European Region, which I have the honour to chair, many events have taken place in the last four years and others have been scheduled for the future. There is no doubt that inter-country relationships, reciprocal acquaintances, information exchange among the associated organisations, and the functions of the secretariat and the executive have developed. Every member of the Executive Committee cooperated vigorously in these endeavours. In addition to the office bearers (see *Chairs and Secretaries of the IAG Regional Committees*), the Executive committee comprises: Michael Lye (UK) Treasurer; Dick Knook (Netherlands) Chair of the Biological Section; Ariela Lowenstein (Israel) Chair of the Behavioural, Social Science and Research Section; Jose Manuel Ribera Casado (Spain) Secretary and protempore Chair of Clinical Section; John Dall (UK) Past Chairman; Rudolf Schutz (Germany) President of the 1999 European Regional Congress.

The number of full member societies of the Region has increased. Four years ago, when I was elected Chairman of the Region, the IAG European Region had 30 full members, representing 27 countries. Each country has one member society, except the UK, where for historical reasons there are 3 Geriatric Societies and France had 2 which have recently united.

These member societies represented only a part of Europe, because the dissolution of the Soviet Union was followed by a great crisis in Geriatrics, which complicated the situation in the East-European Societies. Many of the latter were not members of the IAG and perhaps some of the new republics do not yet have a gerontological society. Two who did, Ukraine and Serbia, were

until recently IAG members in observer status and others were applying for IAG membership. Serbia and the Ukraine are now full members, as are Bulgaria, Georgia, and Russia (see *New Members*). Now the IAG European Region comprises 31 Societies and is closer to reaching full geographical membership of gerontological organisations.

Most of the relevant activities of the Region over the past four years have occurred at meetings organised under the auspices of the IAG. For instance at the II European Region Clinical Section Congress (Florence, June 16 - 19 1994) a database covering all the European Gerontological Societies was created in Parma. At the III European Region Congress of Gerontology (August 30 - Sept 2, 1995) the current executive was elected. 1996 was a watershed for the Region. In February a permanent secretariat was established in Madrid and the Parma database was combined with that held in Madrid. A new Bulletin of the Society was started (three issues have been published thus far) and meetings were held of the Presidents of the European Gerontological and Geriatric Societies (Parma, March 30), the Behavioural and Social Science and Research Section (Haifa, June 25 - 28), and the Clinical Section (Thessaloniki, Nov 14 - 17). In 1997, the Executive met in Madrid in January to institute various task forces and to draw up for discussion and approval a *Charter of the Rights of the Elderly*. The European Region's *The Older Person's Charter of Standards* was presented for consideration to the World Congress Programme Committee Meeting (Singapore, Feb 24 - 25) where it was agreed it could be included on the Agenda for one of the Council Meetings in Adelaide (see above).

Other activities of the Region include institution of a prize, kindly provided by Merck Company, Italy, for outstanding activity in Geriatrics and Gerontology to be awarded at the IV European Congress of Gerontology in Berlin in 1999.

There has been contact and cooperation with the WHO Regional Director and others in order to support and maintain the Ageing and Health Program of the WHO Regional Office for Europe.

A provisional agreement was struck with the Journal *Ageing*, allowing individuals of IAG European Region member societies to obtain half-price subscriptions to it. Time has also been devoted to promotion of targeted task forces which join professionals of different countries working or researching common subjects. Attention and effort has also been directed at determining sources of fund raising to promote the aims of the IAG within the region.

Two forthcoming major gerontological meetings of the Region are the IV Congress of the European Region Clinical Section, Helsinki, Finland, June 14 - 17, 1998 and the IV European Congress of Gerontology: Berlin, Germany, July 7 - 11, 1999 (see *IAG Congress Calendar*).

NORTH AMERICA **Gloria Gutman - Chair**

When the Newsletter went to press, a written report was unavailable. Delegates were invited to attend the next World Congress of Gerontology, to be held in Vancouver in 2001.

NEW IAG MEMBER COUNTRIES

Five new member organisations were ratified at the Council Meetings in Adelaide (see Report on Council Meetings). The president of each is indicated below. In response to material provided by Colombia and Russia, these two societies are showcased in this *Newsletter*. Welcome to the IAG and its Regions!

The Philippines are in the process of re-instating their membership and The Kyrgyz Republic has inquired about joining the IAG. This indicates that the gerontological community of scientists, scholars, researchers and practitioners continues to expand and strengthen.

EUROPEAN REGION:

Assoc Prof Ignat Petrov, President
Bulgarian Association on Ageing
Boulevard Vitosha 36
Sofia 1000
BULGARIA

Dr Nodar Kipshidze, President
Georgian Society of Gerontology
Research Institute of Therapy
4 Ljubjana Street
Tbilisi, 380059 GEORGIA

Prof. Vladimir Anisimov, President
Gerontological Society of the Russian
Academy of Sciences
NN Petrov Research Institute of
Oncology
68 Leningradskaya Str, Pesochny-2
St. Petersburg, RUSSIA 189646
Tel: (812) 437 8607
Fax: (812) 437 8947
email: Anisimov@anisimov.spb.r

Prof. Vladislav Bezrukov, President
Ukrainian Gerontological and
Geriatrics Society
Vyshgorodskaya Street 67
254114 Kiev UKRAINE
Fax: (380) 44 430 4169
Email: direct@geront.freenet.kiev.ua

COMLAT REGION:

Dr Elisa Dulcey-Ruiz, President
Federative Association of
Gerontology of Colombia
Apartado 52366
Bogotá, COLOMBIA
Fax: +5768 210 1715

COLUMBIA

The *Federative Association of Gerontology of Colombia* brought together the *Interdisciplinary Association of Gerontology (AIG)* and the *Colombian Association of Gerontology and Geriatrics (ACGG)* and was established in Bogotá on April 26, 1996.

Its fundamental purpose is to coordinate efforts and actions of professionals from different areas, in order to build and spread interdisciplinary knowledge about ageing and old age, through permanent dialogue with national and international organizations. Its purpose is to contribute to the improvement of life quality of present and future older generations.

According to its By-laws, the *Federative Association's* Fundamental Objectives are:

1. To promote the coordination of efforts and actions of the legal entities that work on Gerontology in Colombia.
2. To represent the interests that are common to its members and express them before national and international organizations.
3. To achieve, through joint efforts and respecting each entity's identity and own objectives, the construction, dialogue and diffusion of interdisciplinary knowledge with the objective of improving the quality of ageing and old age.

RUSSIA

The *Gerontological Society of The Russian Academy of Sciences* was established in March 1994 at the All-Russian Founding Conference of Gerontology and Geriatrics, St. Petersburg.

At present the Society has 16 regional divisions: in Moscow, St. Petersburg, Ekaterinburg, Nizhny Novgorod, Novosibirsk, Perm, Petrozavodsk, Rostov, Ryazan, Samara, Saratov, Stavropol, Tchita, Tyumen, Ulyanovsk, Volgograd. Individual memberships total about 350.

The Society publishes a journal *Clinical Gerontology*, a quarterly bulletin *the Herald*, and this year published its first year-book *Advances in Gerontology*. Several research institutes have been established, for example the *International Center for Problems of the Elderly* in Samara, and the *St. Petersburg Institute of Bioregulation and Gerontology*.

An annual award is made to an outstanding young researcher and an active program of conferences and meetings on gerontology and geriatrics now occur throughout Russia. An All-Russian Congress of Gerontology and Geriatrics will held in 1999 in Samara.

NOVARTIS PRIZE FOR GERONTOLOGICAL RESEARCH

One of the aims of the Novartis Foundation for Gerontological Research is honoring achievement in gerontological research by awarding a biennial prize of 50,000 Swiss francs to individuals with an outstanding record of advancing gerontological knowledge. The prize is normally awarded to individuals or teams who have:

- made a significant research contribution in a particular area of gerontology or geriatrics,
- encouraged and trained younger research workers, or
- given impetus to progress in these fields in some other comparable way, for example through the publications.

Photos show the recipients being made their awards at the World Congress in Adelaide. The inaugural prize was awarded to M Powell-Lawton of the USA, for research on quality of life and to Ladislav Robert of France, for work on connective tissue.

The Second Novartis Prize will be awarded in 1999

Applications and nominations should be submitted no later than 31 October 1998 to:



Recipient of inaugural Novartis Prize Prof M. Powell-Lawton receiving his award from IAG Past-President, Edit Beregi and Hannes Stähelin, Chair of the Novartis Foundation for Gerontological Research.

Hannes B. Stähelin, MD,
Official Coordinator,
Head of Geriatric Clinic,
University Hospital, CH-4031 Basel,
Switzerland.

Information can be obtained from:
**The Secretary, Novartis Foundation
for Gerontological Research,**
CH-4002 Basel, Switzerland
Fax:++41-61-324 4294 E-mail:
charles.studer@pharma.novartis.com

Decisions will be made by a jury comprising four representatives of the IAG, two previous winners of the Sandoz/Novartis Prize and a distinguished gerontologist. The membership of the jury panel is as follows:

Professor Gary Andrews,
President (Chair), IAG, Australia

Dr Edit Beregi,
Past President, IAG, Hungary

Dr Gloria Gutman,
President Elect, IAG, Canada

Professor Mary Luszcz,
Secretary General, IAG, Australia

Dr Caleb Finch,
Former Winner, United States of
America

Dr Alvar Svanborg,
Former Winner, Sweden & USA

Professor Nelson Chow,
Distinguished Gerontologist, Hong
Kong, China

Other Congress Research Awards

To acknowledge work of junior and mid-career researchers, two other categories of research awards were presented at the Congress in Adelaide. Busse Research Awards were made to Dr Anthony Jorm, National Health and Medical Research Council Psychiatric Epidemiology Research Centre, Australian National University, Canberra, Australia and to Dr Michael Rose, University of California, Irvine, USA. For the first time, three Chinoin Young Investigator awards were made to recognise accomplishments of scientists under the age of 35. These went to Dr Kaarin Anstey, School of Psychology, University of Queensland, Australia; Dr Carl V. Asche, Department of Health Administration, University of Toronto, Canada; and Dr Christopher Mulrooney, Bedford Veteran Affairs Hospital, Westport, Massachusetts, USA.



Recipient of inaugural Novartis Prize Dr L. Robert receiving his award from Edit Beregi, IAG Past-President, and Hannes Stähelin, Chair of the Novartis Foundation for Gerontological Research.

IAG CONGRESS CALENDAR

1998 June 14 - 17

IAG: European Reigon Clinical Section

Helsinki, Finland

Prof Reijo Tilvis, Division of Geriatrics
Department of Internal Medicine
Helsinki University Hospital
FIN - 00290 Helsinki, Finland
Tel: + 358 9 471 3815
Fax: + 358 9 471 4013

1998 August 28 - 31

IAG: 1st European Congress of Biogerontology

Helsingør (Elsinore), Denmark

Dr Dick L Knook
RNO Centre of Ageing Research
PO Box 2215
2301 CE Leiden, The Netherlands

1999 February 21 - 25

Pan-American Congress of IAG

San Antonio, Texas, USA

Dr Roger McCarter, President
Univ of Texas
Health Science Center
San Antonio, Texas
Tel: 210 567 4327
Fax: 210 567 4410.

or

Dr Miguel A Acanfora

Secretario, COMLAT Region of IAG
Av Figuerda Alcorta 3700 9-B
Buenos Aires 1425 ARGENTINA
Fax: + 541 801 6238
E-mail: acanfora@connmed.com.ar

1999 June 7 - 11

Asia/Oceania Regional Meeting of IAG

Seoul Korea

seoul99@soback.kornet.nm.kr
Suite 1504 Teheran Officetel
707-38 Yeoksam-dong,
Kangnam-ku
Seoul 135-082, KOREA
Tel: + 82 2 3452 7484/
Fax: + 82 2 557 0566

1999 July 7 - 11

IV European Congress of Gerontology

Berlin, Germany

Congress Secretariat/Registration
Congress Organization Geber & Reusch
Habichtsweg 11
D-60437 Frankfurt/Main
Tel: + 49 69 50 52 29
Fax: + 49 69 50 39 78

Scientific Secretariat

Univ-Prof. Dr. med Rudolf-M. Schütz

Medizinische Universität Lübeck

Ratzeburger Alle 160
D-23538 Lubeck, Germany
Tel: 49 4 51 500 24 00
Fax: 49 4 51 500 65 18

1999 Sept 27 - October 1

COMLAT Regional Meeting of IAG Gerontology and Geriatrics '99

La Havana, Cuba

Dr Miguel A Acanfora
Secretario, COMLAT Region of IAG
Av Figuerda Alcorta 3700 9-B
Buenos Aires 1425 ARGENTINA
Fax: + 541 801 6238
E-mail: acanfora@connmed.com.ar

2001 July 1 - 6

World Congress of Gerontology

Vancouver, British Columbia

Gloria M. Gutman, Ph.D, Professor and Director
Gerontology Research Centre
Simon Fraser University at Harbour Centre
#2800-515 West Hastings Street,
Vancouver, B.C. Canada V6B 5K3
Tel: 604/291-5062
Fax: 604/291-5066
E-mail: gutman@sfu.ca
WEB SITE:
<http://www.harbour.sfu.ca/gero>

2005

18th World Congress of Gerontology

Rio de Janeiro, Brazil

SCHOOL AT BELGRADE

**Modern Geriatric School
Belgrade 3rd to
12th May, 1998**

Sponsored by the Clinical Institute for Geriatric Medicine, Clinical Center *Zvezdara* in association with the International Institute on Aging, UN, Malta.

All attendants will receive international diplomas.

The price of the course is \$600, but may be discounted for some registrants.

If interested contact the organisers with a short professional curriculum vitae as follows:

Klinicki institut za gerijatriju KBC Zvezdara
(attention Prof Dr Mladen Davidovic)

Rifata Burdzevica 31
11000 Beograd, Yugoslavia
Tel: + 38 11 417094
Fax: + 38 11 418962
E-mail:
davidovi@EUnet.yu

IAG GOES INTERNET

Visit the Website:
www.cas.flinders.edu.au/iag



ADELAIDE DECLARATION ON AGEING

A MESSAGE FOR WORLD LEADERS

We, participants in the 1997 World Congress of Gerontology, met in Adelaide, Australia, as a community of practitioners, scholars, public officials and citizens of 64 nations from throughout the world. We reported current research results on ageing and information on advances in gerontological education, policy, planning and practice.

The findings reported at this Congress led us to a profound concern for the future prospects for quality of life of older people everywhere.

The phenomenal, unprecedented rate and scale of population ageing world wide, especially in the developing world, is widely appreciated. This greater understanding of the issue of global ageing needs to be accompanied by a more effective plan of action by governments throughout the world.

To more effectively address the challenges posed by this massive global demographic change we call for a fundamental shift from the traditional narrow perception of individual and population ageing. In almost all policy statements, writings, and research findings 'the old', however defined, are distinguished from the 'non-old'. Such arbitrary categorisation overlooks the universality of ageing and the continuous evolution of the experience of ageing in a rapidly changing world. While the main focus in gerontology has been on the later stages of human life we stress the importance of lifelong individual development to achieve successful ageing.

In the future more attention also should be paid to intergenerational issues, human rights, cultural variation, gender differences, and the rich diversity of older people in all respects. It is also important to address the relationship between population ageing and societal development.

During the Adelaide Congress, major problems, threats and challenges to the well-being of ageing populations were identified. These problems and challenges, if not addressed effectively, could undermine the possibility for current and future generations to live out their natural lives in security and dignity. Some major threats, such as war and

environmental catastrophes, affect whole populations, but even here it is those at the extremes of life who are most vulnerable and likely to suffer most.

Critical issues that have a pronounced impact on ageing persons include risks associated with poverty, malnutrition, disease, marginalisation, abuse and neglect. The removal or at least significant lessening of these barriers is fundamental to the attainment of an optimal quality of life for ageing populations.

We have identified key issues and actions that should be supported and pursued by governments to improve quality of life and well being for people as they age. From a gerontological perspective, we list what we consider to be the most important of these below and urge that action be taken now at global, regional, national and local levels to respond positively to these challenges.

RESEARCH

Advancement of knowledge of ageing through biological, behavioural, social, technological and clinical research is central and critical to the improvement and maintenance of quality of life in later years. Research into major burdens of ageing, such as Alzheimer's Disease, is already yielding strategies to lessen the burden of morbidity and disability associated with ageing. Other specific effective preventive and therapeutic measures are within our grasp.

- Basic, applied and strategic research related to ageing should be actively encouraged. A greater proportional allocation of funds for research in ageing related fields is urgently required.
- All governments should ensure that there are effective systems for monitoring national demographic and epidemiological trends to take account of changing age structures and consequent social, health and economic implications.
- Results of monitoring and research should be more clearly and effectively analysed and presented to better inform policy and decision makers.

- Cross-disciplinary research consistent with the multidimensional aspects of ageing should be actively supported and encouraged by funding bodies.
- All educators and practitioners working in ageing should be trained to have an understanding of research methodologies and be skilled in critical assessment and application of research findings.
- All practice should include elements of research to develop the evidence-base for interventions and to provide the framework for continuous quality improvement.
- Interdisciplinary practice recognises the importance of the whole range of influences upon older individuals including psychological, social, cultural, economic and environmental. It is important to take account of all of these in assessment and care.

EDUCATION

Education is fundamental to the improvement of quality of life and well-being of all. Life long learning and education about ageing should be an integral part of formal education curricula at every level.

- The general public of all ages should be educated to dispel prevalent negative beliefs, myths and stereotypes of ageing.
- The media can be a powerful tool to improve information, knowledge and perceptions of ageing in the community and should be more effectively employed for this purpose.
- Ageing persons should themselves be empowered to ensure their capacity for self-help and independence and enable them to make informed choices about all aspects of life.
- The role of older persons as educators in the community should be taken into account and a respect for wisdom and experience restored.
- Appropriate education and training should be ensured for both formal and informal caregivers to deal effectively and positively with issues associated with ageing. At all levels, and across disciplines, formal education should incorporate an appreciation of similarities and differences among people of different ages.
- Services should encourage and support older persons in maintaining an active and participatory life-style and encourage them to take the lead in pursuing the improvement and maintenance of their own health and well-being.
- There is a need to recognise the integral role of the family and other forms of informal social support of older persons.
- Maintenance of the individual in their chosen environment must be the primary objective of care programs for older persons.

We voice the need for immediate action through research, policy, education, training and practice. The 1999 Year of Older Persons with its theme 'Towards a Society for all Ages' provides an excellent vehicle for concerted action at the global level. Governments, international agencies and organisations representing older persons should work in partnership with gerontologists worldwide to ensure success in establishing and attaining positive goals for 1999 and beyond.

It is crucial that the evidence before us now be effectively used and interpreted to support policy and decision makers in implementing practices that provide measurable benefits in ensuring an optimal quality of life for older persons now and in the future.

POLICIES AND PRACTICE

Governments have an obligation to establish a sound policy framework for the development of services for an ageing population that meet basic principles and obligations for all human services.

- Policies and programs on ageing should have a sound scientific and ethical basis.
 - Evidence-based practice should be promoted as it identifies relationships between interventions and outcomes. This supports more effective and responsible use of limited resources.
- Finally, we strongly emphasise the importance of research at all levels to support the further development of sound policies, education, training and practice. We believe that future directions in all fields related to ageing should be informed by the best research available. Investment now in a sound and considered research agenda will benefit not only older people of the immediate future but many generations to come. We therefore call on the International Association of Gerontology in partnership with the UN programme on ageing and other concerned parties to actively collaborate in the development, pursuit and realisation of such an agenda for the twenty-first-century.