



Submission to the Citizens' Assembly on

How we best respond to the challenges and opportunities of an ageing population



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Summary and Recommendations

Age Action was established in 1992, its main objective is to achieve fundamental change in the lives of all ageing people and especially people in later life by empowering them to live full lives as independent and actively engaged citizens and to secure their right to comprehensive high quality services according to their changing needs. We welcome the opportunity to make a submission to the Citizens' Assembly to inform its work on how we best respond to the challenges and opportunities of an ageing population.

Age Action urges the Assembly to focus on four key areas in its deliberations around this topic. We have also provided recommendations for each of these four areas that we feel the Assembly should make in its report to the Oireachtas.

1) Implementing a plan to address the needs of an ageing population

- a. We recommend that the Citizens' Assembly invite the Department of Health to address its meeting to set out the scope and breadth of the National Positive Ageing Strategy and to report on what progress has been achieved.
- b. The Citizens' Assembly should also invite the Commissioner for Older People in Northern Ireland to brief them on the scope and nature of his work.
- c. In its report to the Oireachtas, the Citizens Assembly should recommend the appointment of a senior cabinet minister to take the lead on planning for an ageing population and ensure that its report sets out clear, timetabled, goals.

2) Ensuring a secure and adequate income for all older people

In its report to the Oireachtas the Assembly should recommend:

- a. That the State Pension should be benchmarked in legislation at 35 per cent of average weekly earnings in line with the National Pensions Framework.
- b. Forthcoming reform of the State Pension must examine and correct the injustices created by the 'averaging' rule in the PRSI system and the failure to recognise the contributions made by women who left the workforce to take up caring roles.
- c. The Government should initiate a public awareness campaign targeted at younger generations to encourage retirement planning.

3) Promoting independence and choice as we age by establishing a statutory entitlement to home care

In its report to the Oireachtas the Assembly should recommend:

- a. The rapid development of a rights-based statutory homecare scheme that is person-centred and that is independently, and robustly, regulated.

4) Tackling ageism in all its forms

In its report to the Oireachtas the Assembly should recommend:

- a. The abolition of mandatory retirement ages, enabling older people to continue working if they choose to.
- b. Age-proof all new policies and initiatives to ensure that they do not discriminate against any group based on age.
- c. That the Irish Human Rights and Equality Commission investigates to identify ageist policies and practices in the State and within public bodies.
- d. Mandatory inclusion of modules addressing ageism in all professional education and training for individuals working with older people.

1. Introduction

Age Action was established in 1992. The main object of the organisation is to achieve fundamental change in the lives of all ageing people and especially people in later life by empowering them to live full lives as independent and actively engaged citizens and to secure their right to comprehensive high quality services according to their changing needs.

This is guided by the UN Principles for Older Persons. These principles are incorporated in the National Positive Ageing Strategy and should be used to guide the Assembly in its deliberations. They are¹:

- Independence;
- Participation;
- Care;
- Self-fulfilment;
- Dignity.

For the Citizens' Assembly to adequately examine this issue over just two weekends there is a need to narrow the focus of the deliberations. Age Action has identified four issues of critical importance where the Assembly could have a real impact in realising the vision behind these principles.

1. Implementing a plan to address the needs of an ageing population.
2. Ensuring a secure and adequate income for all older people;
3. Promoting independence and choice as we age by establishing a statutory entitlement to home care;
4. Tackling ageism in all its forms;

At the centre of these issues is the lived experience of older people in communities across Ireland. Throughout the document we integrate the voices of older people who have been affected by the issues raised in this submission. Age Action would welcome the opportunity

¹ General Assembly resolution 46/91, *United Nations Principles for Older Persons* (16 December 1991), A/RES/46/91 available from <http://www.ohchr.org/EN/ProfessionalInterest/Pages/OlderPersons.aspx>. Full text of the principles is provided in Appendix 1 of this submission.

to provide an input at the Citizens Assembly and to include the voice of older people in this contribution.

2. Implementing a Plan to address the needs of an ageing population

When we talk about planning for an ageing population, effectively we are talking about developing an age friendly society not just for those currently over the age of 65 but for all of us who hope to grow old.

According to the latest Census there were 637,567 people aged over the age of 65 in Ireland in 2016². In 30 years' time, in 2046, 1.4 million of us will be aged 65 years and over; 470,000 will be over 85 years³.

All too often media commentary depicts an ageing population in a negative light, referring to a 'pension's time bomb' or blaming older citizens for the lack of adequate healthcare by referring to them as 'bed blockers'.

But population ageing is first and foremost a success story for public health policies and social and economic development⁴. We are living longer and healthier lives – this should be celebrated – but it does create both challenges and opportunities.

Writing in 2015 the economist Colm McCarthy pointed out that Ireland does not face a demographic crisis, we face a policy crisis. This crisis is a product of our collective failure to prepare and plan for the coming changes in Irish society.

Furthermore, the contribution older people make within their families (e.g. caring roles), their communities (e.g. voluntary and unpaid work) and the broader economy (e.g. through their expertise in paid work) is rarely recognised. For example, half of those aged between 54 and 74 provide regular childcare assistance to their adult children enabling them to

² CSO (2017) *Census 2016 - Summary Results - Part 1*. Available at: <http://www.cso.ie/en/csolatestnews/presspages/2017/census2016summaryresults-part1/>

³ CSO (2013) *Population and Labour Force Projections 2016-2046*. Available at: http://www.cso.ie/en/media/csoie/releasespublications/documents/population/2013/poplabfor2016_2046.pdf

⁴ Brundtland, G. (1999) *World Health Day; Active Ageing Makes a Difference*. Available at: www.who.int/director-general/speeches/1999/english/19990407_world_health_day.html (downloaded on the 23.07.09).

pursue employment or education opportunities. Half also volunteer in their communities while almost one-fifth volunteer at least once a week⁵.

Over four years ago the government published the National Positive Ageing Strategy which describes “Ireland’s vision for ageing and older people” and how positive ageing can be promoted⁶. But there is still no detail on how this will be accomplished or when.

A recent initiative by the Department of Health to set up a forum bringing together organisations representing older people, academics and service providers is welcome but it remains unclear whether there is still a commitment to the specific targets in the strategy.

Invariably, issues affecting older people are understood as the responsibility of a single department rather than as cutting across the Government’s responsibilities. There is no one coordinating the work of the various government departments, local authorities and state agencies that have responsibilities for older people.

We need an independent champion for older people, someone who can fearlessly articulate their needs and interests. In 2011, the Stormont Assembly established the office of the Commissioner for Older People in Northern Ireland with responsibilities and powers set out in legislation⁷.

The Commissioner can deal with individual cases as well as seek to inform and advise the Assembly and lawmakers on issues affecting older people. A similar body in this State would be of enormous, practical, benefit to older people.

While recognising the efforts of current and former Ministers of State with responsibility for Older People the reality is a full Cabinet Minister with responsibility for older people is needed.

⁵ McGarrigle et al (Eds.) (2017) *Health and Wellbeing: Active Ageing for Older Adults in Ireland Evidence from The Irish Longitudinal Study on Ageing*. Available at:

<http://tilda.tcd.ie/assets/pdf/TILDA%20Wave%203%20Key%20Findings%20report.pdf>

⁶ Department of Health (2013) *National Positive Ageing Strategy*. Available at: <http://health.gov.ie/healthy-ireland/national-positive-ageing-strategy/>

⁷ See the Commissioner for Older People for Northern Ireland’s website for further detail <http://www.copni.org/>

This person could drive and coordinate the changes in policy and practice that are necessary to implement the National Positive Ageing Strategy and lead in planning for the coming changes in Irish society.

3. Ensure a secure and adequate income for all older people

The Irish pension system is made up of a number of pillars or tiers. Pillar one is the State Pension system, while occupational and private pensions make up pillars two and three respectively.

Ensuring that older people, and all of us who hope to grow old, have enough money to grow old with dignity cannot be left to when the individual reaches retirement. Less than half of those aged between 15 and 64 have a private pension⁸.

Adequacy of the State Pension

For those aged over 65, up to three-quarters of their income is made up of public transfers, of which the State Pension is the most important⁹. Ensuring the adequacy of the State Pension is therefore critical. We have identified a number of issues that must be addressed to reach this objective.

During the recession our members repeatedly emphasised that the introduction of new taxes and charges¹⁰, coupled with rising prices¹¹ and a reduction in secondary income supports¹², such as the Fuel Allowance, had a profound effect on their incomes. A freeze in the weekly rate of the State Pension from January 2009 to January 2016 meant that many older people struggled to keep their homes warm and to pay food and medical bills.

⁸ CSO (2016) *Quarterly National Household Survey (QNHS): Module on Pensions (Q4 2015)*. Available at: <http://www.cso.ie/en/releasesandpublications/er/q-penp/qnhsmoduleonpensionsq42015/>

⁹ OECD (2016) *Pensions at a Glance 2015 – OECD and G20 Indicators*. Available at: http://www.keepeek.com/Digital-Asset-Management/oeed/social-issues-migration-health/pensions-at-a-glance-2015_pension_glance-2015-en#page3

¹⁰ The introduction of taxes such as the Local Property Tax and the carbon tax, particularly its introduction on solid fuels, had a particularly negative effect on older people during the recession.

¹¹ To emphasise the impact of rising individual costs, research undertaken by the Vincentian Partnership for Social Justice in 2013 noted that while overall CPI fell by 0.15 per cent in the period 2008 to 2013, the cost of a Minimum Essential Standard of Living for a lone pensioner and a pensioner couple rose by 5.03 per cent and 7.34 per cent respectively. See VPSJ (2013) *Changes in the cost of a MESL in Comparison to CPI Inflation* – available at www.budgeting.ie.

¹² For older people solely dependent on the State Pension and secondary supports such as the Household Benefits Package, the Telephone Allowance and the Fuel Allowance, their weekly income fell by over €13 per week between 2009 and 2016 due to cuts in the latter two benefits.

“The State Pension is too low, especially since the extra charges were thrown at us. I find it hard to live on €233 a week and pay LPT...along with the everyday expenses e.g. oil, phone, food and clothing and if one is lucky, like me, to own a car (it’s 10 years old) for getting the groceries that too can become a headache with rising costs of insurance and motor tax along with NCT bills and upkeep of the vehicle. It’s certainly hard. That’s my opinion” (Response to Age Action Budget 2017 Consultation).

Older people see health insurance as a necessary outlay due to their increased likelihood to need timely access to health and social care services. House insurance is also a necessary purchase as older people are more likely to be residing in owner-occupied accommodation.

“Having private health insurance is the most important thing for older people and it takes almost the complete occupational pension to pay for private health insurance for my wife and myself. As we are retired 30 years the occupational pension has lost a large amount of its value. The Government now charges for a bed in a private hospital for which we have already paid” (Response to Age Action Budget 2017 Consultation).

In 2010 the Government published the National Pensions Framework¹³, which set out its plan for the reform of the pension system in Ireland. While some of its recommendations, including increasing the age at which someone can receive the pension, have been implemented one of the key measures has not.

The report states that the Government will seek to maintain the rate of the State Pension at 35 per cent of average earnings “to maintain this aim of preventing poverty for older people”¹⁴. This means the State Pension, currently €238.38 at the top rate, should be €248.36¹⁵.

In Britain, in 2011, to help eliminate poverty among pensioners, the Conservative – Liberal Democrat Government introduced what is known as the ‘Triple-Lock Pension’, which is set out in law.

Under this system the State Pension in Britain must increase every year by a minimum of either 2.5%, the rate of inflation or average earnings growth, whichever is largest.

¹³ Department of Social Protection (2010) *National Pensions Framework* - available at http://www.welfare.ie/en/downloads/nationalpensionsframework_en.pdf

¹⁴ Op.Cit.

¹⁵ Based on preliminary seasonally adjusted CSO figures for average earnings for Q4 2016 – available at <http://www.cso.ie/en/releasesandpublications/er/elcg/earningsandlabourcostsq32016finalq42016preliminaryestimates/>

According to the Department of Social Protection Ireland may be one of only two countries in the European Union that has no formula for indexing the State Pension to some combination of prices, wages or GDP¹⁶.

It is imperative we introduce a similar legislative approach in Ireland where the State Pension would be increased to the 35 per cent of average weekly earnings level and then locked to that figure. This would also depoliticise the issue of whether, and by how much, to increase the State Pension in the budget every year.

Women and the State Pension

"I was so shocked, angry and annoyed when I first heard the amount I was to be awarded. It brought back the anger I felt in 1972 when I had to leave my job. I believe I am being penalised for caring for my children"
(Research participant in Age Action's research *Towards a Fair State Pension for Women Pensioners*).

Many older women pensioners were obliged to give up work upon marriage, either by law before the end of the marriage ban in 1973, or because of cultural norms and practices. Their record of contributions to the Pay Related Social Insurance (PRSI) system can be broken and so they are awarded a lower weekly rate of the State Pension than they would have expected.

This is mainly because the weekly pension rate is calculated on the average number of contributions made over a working life.

For example, if an individual worked for a few months in 1968 and then left the workforce to raise a family (during which time she would not have made contributions) before going back to work in 2000, her total number of pension contributions is divided by 48 (the number of years between 1968 and 2016) to find the average.

The lower your average number of contributions, the smaller your pension. In effect, the weekly pension rate would be much higher if the individual had not worked in 1968.

The Homemakers' Scheme partly addresses gaps in employment due to caring responsibilities. It provides a disregard of up to a maximum of 20 years for those who take

¹⁶ Presentation to the Joint Oireachtas Committee on Social Protection on 15 December 2016.

time away from the workforce to care full-time for children (up to the age of 12) or a person with a disability (over 12 years). However, it only applies to periods of caring since 1994 meaning tens of thousands of individuals who took time out of the workforce before then are punished in retirement for caring for loved ones.

In 2012, women were further punished by changes to the qualifying criteria for the Contributory State Pension¹⁷. Essentially these made it harder to qualify for the higher rates of payment as well as reducing the weekly payment for those with a low level of contributions.

Research published by Age Action¹⁸ identified 36,000 individuals negatively impacted by these changes between September 2012 and June 2016 – one-third of new pensioners. Of these 62 per cent were women. Those worst affected lost €30 per week or over €1,500 per year.

A reversal of these cuts would enable many older women to access an adequate income.

The National Pensions Framework¹⁹ proposes that the link between the number of PRSI contributions and the level of payment received is strengthened. Such an approach, referred to as a Total Contributions Approach (TCA) is currently being developed by the Department of Social Protection as part of a programme of pension reform. It is critical that these changes address the unfairness in our State Pension system.

4. Promoting independence and choice as we age by establishing a statutory entitlement to home care

With increasing age, demand for long-term care and support will grow. The HSE estimates that approximately 10-11 per cent of people aged 65 years and over in Ireland require home

¹⁷ For a succinct account of these changes see Age Action (2017) *Reversing the 2012 State Pension Cuts*. Available at https://www.ageaction.ie/sites/default/files/attachments/briefing_paper_3_-_reverse_the_2012_state_pension_cuts.pdf

¹⁸ Bassett, M. (2017) *Towards a Fair State Pension for Women Pensioners* Dublin: Age Action.

¹⁹ Department of Social Protection (2010) *National Pensions Framework*. Available at http://www.welfare.ie/en/downloads/nationalpensionsframework_en.pdf

help supports²⁰. This works out at around 63,000 people but only around 50,000 people, including those under the age of 65, are getting home help hours.

Ireland's home care system is disorganised, fragmented and underfunded with social workers estimating more than half of the older people they work with could be at home instead of in long-term residential care if the appropriate services were available²¹.

Waiting lists for home helps and home care packages are growing. Community care is grossly underfunded and people are simply not getting the care they need. This means more people in acute hospitals who don't need to be there. It means more people in nursing homes who don't need to be there.

Older people's preference is to receive care and support in their home. This has been the policy of successive governments since 1968²². The National Positive Ageing Strategy is underpinned by a commitment in principle to support older people to age in place²³.

However, policy is very different to practice. Funding is directed towards residential care, with over 60 per cent of the current budget for the provision of services for older people allocated to support for long-term residential care even though only a small percentage of older people will ever need nursing home care²⁴.

"My husband has dementia. He is 85 years old and I am 75 years old. I have arthritis. I get only 1.5 hours home help a week from the HSE. My husband requires 24 hour care now and I find it very hard, especially when I am unwell myself (Response to Age Action Budget 2017 Consultation)".

²⁰ HSE Planning for Health (2017) – available at <https://www.hse.ie/eng/services/publications/planningforhealth.pdf>

²¹ Donnelly, S., O'Brien, M., Begley, E. and Brennan, J. (2016). *"I'd prefer to stay at home but I don't have a choice"* Meeting Older People's Preference for Care: Policy, but what about practice? Dublin: University College Dublin. Available at https://www.ageaction.ie/sites/default/files/aa2c_asi2c_iasw_final_research_report-a4-report_lr_for_web_2.pdf

²² Government of Ireland (1968) *The Care of the Aged: Report of an Inter-Departmental Committee on the Care of the Aged*. Available at: <http://www.lenus.ie/hse/handle/10147/559466>

²³ Department of Health (2013) *National Positive Ageing Strategy*. Available at: <http://health.gov.ie/healthy-ireland/national-positive-ageing-strategy/>

²⁴ Department of Health (2015) *Review of the Nursing Homes Support Scheme, A Fair Deal*. Available at: <http://health.gov.ie/wp-content/uploads/2015/07/Review-of-Nursing-Homes-Support-Scheme.pdf>

Unlike access to community care, long-term residential care in Ireland is underpinned by legislation, known as ‘Fair Deal’²⁵. If older people’s right to remain at home and receive support is to be upheld, home care must be put on a statutory basis.

“I am 88 years of age and have quite severe arthritis. My 91 year old husband has heart failure, renal failure and vasculitis. He now has Alzheimer’s and I am his carer. He cannot be left alone” (Response to Age Action Budget 2017 Consultation).

We need a substantial, and immediate, increase in funding for homecare supports. We are currently spending less money providing fewer hours of home help support to fewer people than we were at the height of the recession.

“Often the situation is that you are waiting for someone to die to access hours” (Social Worker interviewed as part of Age Action et al’s research on the care preferences of older people²⁶).

A statutory entitlement to home care is essential if the service is to attract ring-fenced funding to meet the needs and preferences of older people.

We welcome the initiative by Minister of State with responsibility for Mental Health and Older People Helen McEntee TD to launch a public consultation on how such a scheme should operate. This is due to begin in the coming weeks.

The Assembly should play its role in ensuring older people are able to age at home in dignity and with independence by recommending to the Oireachtas a statutory, rights-based, homecare scheme with robust and independent regulation.

5. Tackle Ageist practices and attitudes in all its forms

“The frustration of losing my job for no other reason than because I had turned 65 years of age was exacerbated by the financial hardship this policy of mandatory retirement inflicted on me. I was trying to pay a mortgage to the bank and a loan to the credit union at the same time. It was very difficult to keep going. I had to cut right back” (Angela Gallagher, Age Action member)²⁷.

²⁵ The Nursing Home Support Scheme (NHSS) Act (2009), ensures ring-fenced funding is allocated to the scheme from the HSE’s Social Care (Older People Services) budget each year.

²⁶ Donnelly, S., O’Brien, M., Begley, E. and Brennan, J. (2016). *“I’d prefer to stay at home but I don’t have a choice” Meeting Older People’s Preference for Care: Policy, but what about practice?* Dublin: University College Dublin. Available at https://www.ageaction.ie/sites/default/files/aa2c_asi2c_iasw_final_research_report-a4-report_Ir_for_web_2.pdf

²⁷ A full account of Angela’s experience is available on Age Action’s website - <https://www.ageaction.ie/blog/2016/03/03/mandatory-retirement-ireland-age-action-angela-gallagher>

Participation by older people can be hampered by discrimination and ageist practices.

Ageism is described as:

‘the way in which society and its institutions sustain ageist attitudes, actions or language in laws, policies, practices or culture. It can be encountered in the legal system, the media, health care provision and the economy, among many other areas’²⁸.

Eradicating all forms of ageism in our society protects and promotes human rights and fundamental freedoms and will help to create a society for all ages on the basis of equality²⁹.

An age bias is evident in many policies in Ireland.

For example a person aged under 65 with a disability may qualify for a personal assistant however, the Disability Federation of Ireland highlights that there is an “uncertainty associated with people who are using services ageing beyond 65 years, and their eligibility to continue to receive disability services, which could vary across the regions”³⁰.

The target for lifelong learning in the Department of Education’s Strategy³¹ focuses solely on those engaged in such activities who are aged between 25 and 64 and it fails to see the importance of engagement of those aged over 65.

Finally, every year in Ireland older workers are forced out of their job for no other reason than they turn 65. This is possible because Irish law permits employers to impose mandatory retirement ages in their employees’ contracts, in effect, facilitating ageism and creating a set of second-class employment rights for older workers.

The vast majority of professionals working in the health and social care field will engage with older people in the context of their work. It is therefore essential that they get the

²⁸ Age Platform Europe (2016) *AGE Platform Europe Position on Structural Ageism*. Available at: http://age-platform.eu/images/stories/Publications/papers/AGE_IntergenerationalSolidarity_Position_on_Structural_Ageism.pdf

²⁹ United Nations (2009) Report of the Expert Group Meeting ‘Rights of Older Persons’.

³⁰ Disability Federation of Ireland (2014) *Access to Life: Personal Assistant Services in Ireland and Independent Living by People with Physical and Sensory Disabilities*. Available at: <http://www.disability-federation.ie/index.php?uniqueID=10810#2.3>

³¹ Department of Education and Skills (2016) *Action Plan for Education 2016 – 2019*. Available at: <http://www.education.ie/en/Publications/Corporate-Reports/Strategy-Statement/Department-of-Education-and-Skills-Strategy-Statement-2016-2019.pdf>

training and supports they need to help people cope with physical and mental decline and to treat their clients with dignity and respect.

6. Conclusion

Ireland is simply not prepared for how our society, our culture and our economy will need to change to accommodate growing numbers of older people in the years to come.

As it stands, today, our current systems of social protection, health and social care are failing to enable many of us to age with dignity.

We must remember that only approximately 10 per cent of older people will ever need nursing home care or homecare supports.³² The vast majority live active, independent lives and are contributing to society but are trying to do so in a society that views them as objects of pity or, worse, derision.

The Citizens' Assembly is an opportunity to challenge all of this, to set Ireland on a different course, one that celebrates everything our older citizens have to offer, supports positive ageing for all of us who hope to grow old and ensures that we can all age with dignity and independence. Lets work together to make Ireland the best place in the world in which to grow old.

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³² Jones, J. (2016) 'Most older people are sharp and fit – so why the growing ageism?', *The Irish Times*, 14 June 2016. Available at: <http://www.irishtimes.com/life-and-style/health-family/most-older-people-are-sharp-and-fit-so-why-the-growing-ageism-1.2676978>

Appendix 1 – UN Principles on Ageing

General Assembly resolution 46/91, *United Nations Principles for Older Persons* (16 December 1991), A/RES/46/91. Available at <http://www.ohchr.org/EN/ProfessionalInterest/Pages/OlderPersons.aspx>.

Independence

1. Older persons should have access to adequate food, water, shelter, clothing and health care through the provision of income, family and community support and self-help.
2. Older persons should have the opportunity to work or to have access to other income-generating opportunities.
3. Older persons should be able to participate in determining when and at what pace withdrawal from the labour force takes place.
4. Older persons should have access to appropriate educational and training programmes.
5. Older persons should be able to live in environments that are safe and adaptable to personal preferences and changing capacities.
6. Older persons should be able to reside at home for as long as possible.

Participation

7. Older persons should remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their well-being and share their knowledge and skills with younger generations.
8. Older persons should be able to seek and develop opportunities for service to the community and to serve as volunteers in positions appropriate to their interests and capabilities.
9. Older persons should be able to form movements or associations of older persons.

Care

10. Older persons should benefit from family and community care and protection in accordance with each society's system of cultural values.
11. Older persons should have access to health care to help them to maintain or regain the optimum level of physical, mental and emotional well-being and to prevent or delay the onset of illness.
12. Older persons should have access to social and legal services to enhance their autonomy, protection and care.
13. Older persons should be able to utilize appropriate levels of institutional care providing protection, rehabilitation and social and mental stimulation in a humane and secure environment.
14. Older persons should be able to enjoy human rights and fundamental freedoms when residing in any shelter, care or treatment facility, including full respect for their dignity, beliefs, needs and privacy and for the right to make decisions about their care and the quality of their lives.

Self-fulfilment

15. Older persons should be able to pursue opportunities for the full development of their potential.
16. Older persons should have access to the educational, cultural, spiritual and recreational resources of society.

Dignity

17. Older persons should be able to live in dignity and security and be free of exploitation and physical or mental abuse.

18. Older persons should be treated fairly regardless of age, gender, racial or ethnic background, disability or other status, and be valued independently of their economic contribution.