Emilia-Romagna Regional Authority Department for Social Policy, Immigration, Youth Project and International Co-operation

" PLAN OF ACTION FOR THE REGIONAL COMMUNITY "

A SOCIETY FOR ALL AGES: THE AGEING POPULATION AND PROSPECTS FOR DEVELOPMENT

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1.INTRODUCTION

"The Emilia-Romagna Region faces the threshold of the 21st century as an industrially advanced region within the framework of European and international environmental, economical, political, social and cultural contexts and situations undergoing increasingly fast evolution" (from the foreword of the Plan of Environmental Action for a sustainable future).

The ageing of the population is one of the most profound social and economic transformations that industrialised countries face and it will also face developing nations in the years to come.

Certain regions, Emilia-Romagna included, are affected to a greater extent by the changes connected to demographic aging.

The ageing of a population is almost always presented as a "problem," overlooking the fact that it is first and foremost an important **conquest**, that undoubtedly poses problems, but at the same time offers **opportunities** and a **challenge** that Europe's communities must be the first to tackle.

Well aware of the strategic importance it implies for the community of the entire region, for some time now the Emilia-Romagna Regional Authority, which governs one of the world's oldest regions, has been examining and processing development prospects of a regional community profoundly affected and altered by the aging process.

Focusing on the technical and scientific documentation produced by ERVET (the Development Agency of Emilia-Romagna Regional Authority) under regional appointment, an interdepartmental work group was set up, whose work, complemented by the contribution of subjects and bodies significantly involved in matters concerning the elderly, forms the basis of this proposal.

In connection with the initiatives and proposals put forward on an international level (2nd Conference on the Ageing of the Population of the United Nations, Madrid April 2002) and within the European Union, in the 21st century the Regional Authority intends to prepare itself to accept the challenge of an aging population in new terms of development opportunities, a widening of the margins of freedom of choice and self-determination of subjects and respect for human rights throughout the course of life.

The Plan of Action's proposal stems from the awareness that ageing:

? affects and involves the entire regional community, not merely part of it;
? represents a fundamental aspect in any possible sustainable development strategy;
? requires a profound, primarily cultural, change in attitudes, policies and practices at all levels;
? is a privileged vantage point for verifying the effective use of citizens' rights regardless of age or sex, which is the effective yardstick of the degree of civilisation of a community.

The Regional Authority has taken on the role of supporter of a profound renewal and catalyst of a vast, free and creative process. Methodology and contents have been clearly defined: decisions and programmes centring on today's senior citizens and those of tomorrow.

The Plan of Action's proposal is a challenge and an important undertaking that does not affect the institutions (Regional, Provincial and Municipal Authorities) alone. This proposal calls on all the components of the regional community to discuss, investigate and work, in an open exchange, on the quality of life and relationships for the elderly of today and tomorrow; in short, it involves the entire regional community.

The cornerstone around which the proposal is built is the need to progress from a restricted vision of integration limited to social and medical problems to the integration of policies in order to provide a joint response to the needs and requirements of our senior citizens, by guaranteeing independent living conditions.

Living, moving, having fun, practicing sports, taking care of oneself, making use of cultural facilities and initiatives, travelling, safe living, using new technology: this is the response that the Plan of Action for the elderly of today and tomorrow intends to provide.

From this point of view, the Plan of Action (and the underlying efforts of the inter-departmental work group) represents an initial concrete application of the integration principle, the general criterion of local and regional organisation and administration that will be strengthened by the approval of the proposed law of regional adaptation for the implementation of the reform of Item V, part two, of the Constitution.

The proposed challenge is ambitious and can only be tackled through the concerted effort of local communities, in their institutional expression and social representation. The regional Plan of Action represents a reference framework and a strong stimulus, whose contents can only be enhanced by the initiative and creativity of local communities.

Along the path we've undertaken, it's important to connect with the experiences and solutions that other regional communities in Europe have already put into practice, taking part in international networks for the exchange of the most successful experiences and in order to become familiar with different approaches.

The shared definition of indicators to measure the level of wellbeing of senior citizens will, over the next few years, become a common ground that will allow regions to compare results and perform longitudinal assessments of all aspects of interventions and programmes involving the elderly.

2. AGEING: A CONQUEST AND CHALLENGE FOR THE 21st CENTURY

The United Nation's 2nd Conference on Ageing (Madrid 8th – 12th April 2002) emphasised the fact that the problem of the ageing population has assumed global proportions.

"The late 20th century was characterised by a revolution in life expectancy. Life expectancy at birth increased by 20 years in 1950 to reach 66 years and it is foreseeable that this will have increased by a further ten years by 2050. On a worldwide level, it is forecast that the proportion of the population of an age equal to or higher than 60 years of age will double between 2000 and 2050 (from 10% to 21%), whilst the percentage of subjects under 18 will shrink by a third (from 30 to 21%)" (2nd International Conference on ageing – Madrid 2002, Plan of Action I,4).

"The category of senior citizens that is increasing at the fastest rate is that of the over-eighty age group. In 2000, 70 million people were eighty or over. It has been forecast that this figure will increase fivefold by 2050" Plan of Action I,7).

"Elderly women are more numerous than men in proportion to an increase in age. In any case, the situation of elderly women must be a priority in any plan of action. Recognising the different impact of ageing on women and men is fundamental for assuring total equality between the sexes and the development of effective, efficient measures in order to reach the objective. It is therefore necessary to assure a general prospective in all policies, programmes and legislation". (Plan of action, I,8)

In the decades to come, ageing will also affect developing countries, where it is forecast that the elderly population with grow fourfold over the next fifty years. The intensity and rapidity of this profound demographic revolution are new. What in industrialised countries has been a gradual process involving several decades and numerous generations, in developing countries will be compressed in two or three decades at most.

Industrialised countries, European nations included, have for some time now been facing the challenge presented by ageing. For Europe, this process also represents a strategic question with regards to the continent's role and influence if at the same time one considers the gradual reduction of the weight of the European population on the total population of the world (22% in 1950, 13% in 2000, 7% in 2050).

Significant differences exist from one European region to another. Some areas, including Emilia-Romagna, are affected to a greater degree by an ageing population.

In addition to the quantitative aspects of the phenomenon, we must also examine the qualitative changes and alterations to the family structure that require a profound reworking, not only of the ways in which services are offered to individuals, but also the overall organisation of regional communities.

Alongside the steady increase of the elderly female population (over 2/3 of senior citizens are women), the progressive growth of the over-eighty category, modifications to family structures (increase in one-person family nuclei, two-thirds of which are composed by people over 60), the significant increase in the instability of marriages and decrease in the marriage rate, an increase in the number of singles between 30 and 49 years of age, and increase in the number of elderly people who live alone [especially women over eighty] all pose serious problems for both the near and distant future concerning family solidity, subsistence and care.

The evolution of local communities, with significant specificity with regards to social cohesion, isolation and discontent, liveability, mobility and access to services represents another *significant*

variable (in the sense that there are significant differences between highly urbanised areas and remote mountainous zones).

The complexity and extreme diversity that characterise the elderly population require an approach using new, even cultural tools, in the awareness that differentiated answers and actions are required, capable of offering opportunities to a very varied range of situations and needs.

Ageing is one of mankind's most important conquests and in this sense it must be considered as a triumph. However, at the same time, it is also a challenge, full of positive opportunities, a challenge that "calls for changes in our attitudes, policies and practices at all levels and in all sectors, in order to promote the huge potential that ageing represents in the 21st century" (UN, Plan of Action, I,9).

A new approach is required to tackle the ageing of the population, **an integrated approach** that faces the problems of welfare, living, care and services. This change of approach is now an absolute priority with regards to the development of policies aimed at expanding the range of services available to the sector.

We must go beyond the sectorial boundary defining the approach to social health policies that has, until today, largely characterised the attention and direction of policies concerning senior citizens.

It must become possible to use the rights of citizens, without discrimination of age or gender, and in relation to this objective, we must redefine actions, policies and legislation, not in order to "protect" our senior citizens, but to guarantee everyone the benefits of their rights in the various phases of their lives, thus achieving the aim of "a society for all ages".

The Regional Authority's Plan of Action, in line with the documents produced by the Conference of Madrid (and the Conference of Berlin – September 2002 – for European countries) and in line with the contribution of the European Union, is an important tool for initiating a process of profound innovation in all regional community sectors, in order to face the challenge posed by an ageing population and guarantee the rights of citizenship and the freedom of choice throughout an individual's life.

3. AGEING AND SUSTAINIBLE DEVELOPMENT

Within a European context, it is worth remembering the objective of high social value contained in the European Union's Charter of Rights (art. 25 *"The European Union recognises and respects the right of elderly people to lead a dignified and independent life and to participate in the social and cultural life of the community"),* and the objective of sustainable development (European Council of Goteborg, June 2000).

An ageing population represents a particular vantage point, to date poorly explored, from which to consider the sustainability of a community. If sustainability refers to four macro dimensions (environmental, economic, social and institutional), in relation to an ageing population, it is apt to examine the social dimension.

The Region's Environmental Plan of action for a sustainable future (2001) defines social sustainability *"as the ability to guarantee conditions of human well-being and access to opportunities (safety, health, education, but also entertainment, serenity and social interaction), distributed equally throughout social layers, ages and genders and in particular between the current and future communities"*. The ageing of the population clarifies how sustainable development is necessarily based on strong social cohesion, **thus offering answers to the needs of today's generations while also taking into account those of generations to come.** This delicate balance has been examined in relation to the pension system, less so with regards to social and medical services, use of territory and urban planning choices.

Sustainability is incompatible not only with the degradation of natural resources, but also with poverty, economic decline and the violation of human dignity and freedom.

This Plan of Action is a specific extension, with regards to an ageing population, of the Region's Environmental Plan of Action for a sustainable future (2001), thus sharing an integrated and preventative approach to environmental, economic and social themes to which the behaviour of all the subjects involved can conform: public administration policy, the actions of industry, third sector activities and the behaviour of citizens and families.

In a social context too this requires new public administration function modes based on listening to citizens' needs and opinions and the pondering of different interests, both general and particular, on the integration of sectors.

We must start to perform a co-ordinated evaluation of impact of decisions in economical, social and environmental fields on the sustainable development of regional communities. The heart of the matter concerns the future of regional communities and the role, within this community, of an increasingly large part of it (approximately 30%), represented by the elderly.

Regional policies in all sectors are called into question where the ageing process is concerned and the quality of life guaranteed to today's and the future's senior citizens depends on our ability to profoundly innovate and, above all, integrate these policies.

The growth of the elderly population due to the lengthening of average life expectancy is accompanied by a revolution in lifestyles and the expectations and quality of demand for services (not only services to individuals).

This means that future welfare models founded exclusively on the network of services offered are inadequate. We have to focus our attention on the home, acting on lifestyles, and the quality of urban life, with radical changes in the very way we perceive infrastructures (residential, cultural,

concerning mobility, communication, interpersonal and commercial exchanges and also "care work") and the promotion of caregivers, for whom a specific strategy should be created. ("Taking care of the ones who care").

Ageing is a process that starts from birth and the quality of life during the various phases of a person's life determines the quality of life in the years to come. It is strategically important to understand that the actions taken must cover the entire life span of citizens as theses actions affect the community as a whole and its equilibrium. It is for this reason that facing the changes connected to ageing becomes strategic for the future of our community.

Low birth rates concur to unbalance demographic development. Integrated policies supporting the choices of parenthood by means of services, time conciliation policies and flexibility help to provide a balanced response to the social changes that are consequential to the ageing of the population.

Furthermore, ageing poses Europe's regional communities with the need for a more positive vision of immigration, required not only to satisfy productive needs, but also to create social balance in more general terms.

4. THE PLAN OF ACTION: STRATEGIC AIMS

A) **Recognition of the active role of the elderly and promotion of active policies for senior citizens and of a positive attitude towards ageing.**

Traditional approaches to the needs and requirements of the elderly are still characterised by prevalent, if not exclusive attention to their assistance and/or material needs. The recognition of the active role of the elderly requires renewed attention to the need for "active citizenship" expressed by the elderly. One prerequisite for the promotion of active policies is the reduction in the gap between the way in which senior citizens perceive themselves, and the image that the institutions and the social bodies of the regional community have of them. Focusing attention on active old age will also help to recognise the contribution (be it social, economical, political or cultural) that citizens, including the elderly, can guarantee the community. It's necessary to **promote a process of empowerment** by reinforcing the participation of senior citizens in decision-making processes at various levels and within different contexts and by strengthening the role of the organisations that represent them.
Local governments, citizen associations, and other organisations must commit to the definition of a series of initiatives aimed at helping people "age well." This can also be supported by promoting healthy lifestyles for all citizens, lifestyles based on solidarity, friendship, community and neighbourhood support and on intergenerational and intercultural relationships.

B) **Sustain senior citizen's freedom of choice**, thus empowering the elderly (and also those requiring care and personal assistance) to:
?   freely choose to continue living as they have always lived;
?   make their own decisions concerning everyday life (choosing between different opportunities and services);
?   make the best possible use of their residual resources and abilities.

C) **Favouring and supporting self-sufficiency**. The home (and its position in the urban context) must be promoted as fundamental for preserving rights for all citizens, including seniors. Continuing to live at home and within one's own social context favours continuing self-sufficiency for seniors and forestalls feelings of uselessness and the depressive states that lead to isolation and a steady decline in mental and physical health.

D) **Favouring the reorganisation of the course of life** on a collective and individual level, by means of greater flexibility between training, work and leisure in the different phases of life, thus overcoming rigid sequential order;

E) **Supporting those who choose to care for their family or acquaintances.** A work programme for **recognising those family members** who guarantee care and assistance as subjects with special needs, for whom qualified and specific measures are required.

F) **Ensuring responses to the needs of elderly women** through the development of appropriate gender-specific policies and assessment of their impact on the population and on social and healthcare and workers.

G) E**xpanding the contribution and use of new technologies** in order to increase the margin of freedom and self-sufficiency for all people (including the elderly) and directing research and the use

of technology to the needs of senior citizens and to promoting individual acceptance of new technologies.

H) **Promoting well-being and health in the elderly** by guaranteeing a preventative approach throughout life and the universality and equality of access to social and healthcare services by favouring **active ageing** and focusing on the factors determining this process such as continued health, social participation, and safety. It is also planned to create opportunities that will allow senior citizens to retire later than people do today and/or to continue being involved in work-related activities.

The general aim of this Plan of Action is to contribute to creating **a society for all ages,** that recognises the different needs and abilities of all its members, no longer programmed by referring to healthy adult males, but by taking into account the needs of children, the young and the elderly, in order to overcome age discrimination, listening to the opinion, experience and needs of the elderly in defining policies that affect them by means of active, organised involvement of senior citizens in the debating of policies and measures that affect quality of life.

5. PLAN OF ACTION AND REGIONAL AND LOCAL PLANNING

The regional Plan of Action is intended as a tool for investigating and qualifying sector policies and programmes considering its appropriateness and effectiveness from the point of view of a significant portion of the regional community, the elderly population.

The aim is not and cannot be to produce a further parallel sectorial programme, nor to fashion one specifically for the elderly in sector programming, but rather to centre sector programming on the need for unity and integration, representing the need to cope with a process of great social and economic transformation such as the ageing of the population.

From a legislative and regulatory point of view, the Plan is based on the second paragraph of art. 9 of regional law n.6, 24 March 2004 on the "Reform of the regional and local administrative systems. European Union and international relations. Innovation and simplification. Relations with universities." This law provides for the adoption of an integrated approach to programming and planning which takes into account related sectorial policies addressed to the same groups of recipients and taking the mutual effects of said policies into account.

The Plan outlines general strategy and can only "come to life" when interpreted and implemented at the local level by authorisation and mandate of local authorities to individual sectors to design and set up programmes and to take action.

The decision to draft the Plan of Action was based on the awareness of the need for a true cultural revolution, of changing the approach to make adequate and upgrade the organisation of the territory and services to the actual and changed needs of the whole community, including the introduction at all levels of a kind of "impact evaluation" of planning and other sector measures in relation to the needs of the resident population and therefore including the elderly, who constitute a considerable and growing part of the regional community. The Plan of Action is, first and foremost, an affirmation of this awareness and the expression of the desire to follow new paths.

We therefore highlight the necessity that the indications contained in the Plan of Action must be met by concrete and specific implementation and be declined into sectorial and integrated regional planning documents and sector initiatives to be put into practice in the years to come.

The translation of the Plan of Action's indications must also affect local planning and in general the sector's administrative acts and provisions (concerning the town planning, health and social services sectors) set up by local bodies (Municipal and Provincial Authorities) or by other public bodies (Local Health Authorities) and can also involve the actions and instruments of private subjects, with particular regard to non-profit making organisations and institutional representatives of the productive categories.

In short, the Plan of Action's underlying aim is to bring about a profound change in the approach to problems linked to the elderly population characterised by:
? close integration with local policy;
? a non-sectorial and non-special approach",
? the overcoming a mainly health-medical approach, consequence of the social stereotype that considers the elderly as being primarily needy of care, with a relocation of care facilities in the centre of the city, district, territory and life of residents.

The integration principle (see art.9 of reg. law no. 6, 24 March 2004 n.6) also represents a general criterion of local and regional administration and organisation, which the Regional Authority intends to adopt as routine method and foundation of legislative action and division of functions between the various levels of government.

6. AIMS

A. Favouring an independent life and supporting independent living with suitable housing choices.

The homes in which the elderly live are often the end result of a series of phases that have seen the formation of a family, where children have been brought up, children who later marry or in any case become autonomous and move away, leaving behind a home that is large, empty and often obsolete: the homes of the elderly age with them and are generally poorly maintained. Existing property is generally modelled around one type of family (young, with children, independent with regards to mobility), which does not always correspond to current and future accommodation needs.
Objectives:

1. To guarantee various accommodation possibilities, by means of housing types and solutions that respond to the varying needs of the elderly and to varying territorial contexts, thus respecting the freedom of choice of where to live, promoting the conditions for independent life.

In addition to families of senior citizens, we must offer solutions that are suitable for those who decide to be helped by a person living with them and also those who live in independent housing near to other family members. This aim can be achieved by offering a wide range of housing types and models.

Actions:

1.1 Supporting **recovery and adaptation** programmes, taking into consideration the specific needs of the different target populations and the continuation of interventions, no matter how recent, that have already been started (see Regional Program 2003/2004 on housing policies).

1.2 Promoting and supporting functional adaptation of the homes in which the elderly live (be it rented or owned) by means of:

a. The setting up and increase in the number of centres established throughout the region to provide technical advice and useful information on how to improve the quality of living and housing situations for the elderly, launched through a specific programme of the regional social fund;
b. Economic and fiscal incentives (reduction of taxes and rates), through joint-funding between the various levels of government, by extending the concept of abolishing architectural barriers and the target of construction work and promoting the use of systems, equipment and technology that widen the margins of autonomy and independent life;
c. Guaranteeing qualified and up-to-date information for the elderly and their families and for technicians on housing needs, the possible solutions and the aids available, developing the experiences are ready put into practice by some local authority bodies (information leaflets, dedicated websites, and the like).
1.3 Improving the quality of new houses or those created from renovation work paying attention also to the housing and cultural needs of the elderly, creating solutions that can be adapted to suit needs that change throughout life (flexible housing), aimed at "design for all" principles, by means of:

a. diffusing the best experiences and the design philosophy, because the housing planned today is not that much more suitable that that which already seems obsolete;

b. an upgrading and training programme, in co-operation with Universities and professional orders and category organisations for architects, electricians and craftsmen;

c. the promotion of integrated initiatives that add to the overall quality of urban and rural territory, rather than taking up new space for single purpose solutions;

d. preferential encouragement of recovery works of existing property, by means of concerted initiatives between private subjects and public administration;

e. the establishment of even radical transformation programmes of public residential property with regards to the type of housing (in order to make them more in keeping with new housing needs of the elderly, young couples, students, workers in mobility) and the level of comfort and equipment and technology and systems installed, by diffusing experiences already put to the test.

In the housing policy sector, it is not so much apt to act using models, but rather **functional aggregations:** it is more important to study how it is possible to bring together old people living alone with young couples, families of immigrants and students in the same district

1.4. Supporting social surveillance experiments, in agreements with local bodies and ACER, as an instrument that prevents solitude and isolation and promotes everyday wellness space, with the aim of guaranteeing the continuous presence, or the availability of an adequately qualified reference figure.

1.5. Encouraging actions that favour living together (co-habitation of subjects who are not relatives), aimed at assuring new forms of solidarity, also in preparation for old age.

2. Supporting autonomous residential mobility options

The inadequacy of housing currently available and profound alterations in family structures is producing significant modifications also with regards to the elderly population's housing mobility.
It is advisable to support autonomous residential mobility options by means of:

a) the competent authorities changing regulations governing residential mobility in public housing so as to promote it thereby supporting better independent, barrier-free living conditions, and solidarity between family members, thus making it possible and making it a priority to bring together (even from one town to another) family members or people who perform important care and support functions;

b) territorial monitoring of residential mobility and the experimentation of information and support instruments to improve mobility in the homes of people with limited self-sufficiency

3. Promoting a wide-scale "assisted living" programme

The widespread creation of new forms of sheltered housing, set up with the definition of certain guidelines (Regional Council resolution 270/2000) and the inclusion of such operations amongst those that can be funded by regional housing and social services planning, is a priority.

Assisted living is a new opportunity that enriches existing options and can represent a useful alternative, on the condition that it is centrally located, in order to favour social exchange and interaction and the promotion of the residents' freedom of choice and identity.

The role played by public authorities is important in establishing the process, supporting pilot projects, monitoring early experiences and promoting exchange with other European experiences, including management issues.

It is also important to create the conditions whereby by means of direct or indirect incentives (reduction in town planning charges, taxes and rates, etc.), but above all through direct financial intervention of the future residents and/or other investors, the arrangement of new contractual forms (for example, "right to advanced booking", etc.) in the years to come a substantial number of assisted living projects be realised, including the involvement of non-profit making organisations and foundations, as well as the traditional economic operators that operate in the housing sector.

The spread throughout the entire regional territory of significant quantities of new housing solutions that assure the comfort and availability of basic services, represents an absolute necessity both with regards to the profound transformation of the family unit and the widespread possibility for many of tomorrow's elderly not to be backed by family networks and in order to guarantee a reduction in use of institutionalisation.

W recommend that priority be given to interventions concerning urban renewal (see Regional Law 19/98 concerning regulations governing urban renewal) that allow for an integration of urban and social policies as supported in another regional law passed in February, 2003.

4. Strengthening and approval of economic support for renters

Many important and significant interventions to increase the supply of rental housing will be put into effect throughout the Region based on provisions found in regional law 21/2001 (measures to reduce anxiety and distress over housing and interventions to increase availability of apartments and houses to rent) and in regional laws 24/00 and 21/01 (that establish an experimental programme now underway to build rental housing of up to 20,000 apartments).

We must continue to pursue the goal of increasing the supply of rental housing.

Regarding measures to give economic support to families that pay rent, the recent trend over the last few years towards a steady reduction in national funding must be reversed. This is a social problem that needs to be faced at the national level so that, on the one hand, all of the nation's citizens with low incomes will be able to find adequate support, and on the other, it will become possible to develop a rental housing market.

5. Promoting the diffusion of up-to-date, qualified information on accessibility, usage, abolishing of barriers, aids and technology for an independent lifestyle.

Consolidating and qualifying the activity set up on a regional level (Regional aid Centre – Bologna and Regional Centre of information on accessibility and architectural barriers – Reggio Emilia), posing the aim of achieving, in conjunction with other regional authorities, the definition of qualified reference points for the entire regional and inter-regional panorama, by means of:

? the inter-regional dimension;

? structured introduction into a network with other international centres and experiences.

The action of the two centres within the Region must be characterised above all by:

a) information;

b) training;

c) management and updating of databases on regulations, experiences, innovative solutions, technology, products aids that can in any case favour an independent lifestyle;

d) Co-operation and supervision of citizens' advice bureau on adapting housing promoted on a territorial level (preferable on a district basis).

By promoting and assisting the realisation of the five abovementioned objectives, regional action is primarily focused in three directions:

? guidance, by means of legislative initiatives and standard provisions;

? promotion, based primarily on funding schemes aimed at encouraging and directing public and private projects in the sector:

? research, experimentation and monitoring of innovative models and pilot solutions.

A commitment is yet to be made in terms of real **co-ordination of regional policy,** in order to make integrated residency and assistance projects more widespread throughout the territory and in order to attribute each individual citizen a greater possibility to make choices regarding services to individuals of which housing must play a part.

B. A welcoming, secure, accessible, wholesome and user-friendly environment. A city for all ages

As a component of primary importance for the psychophysical well-being of elderly people, the home, even when functionally suitable and technologically equipped, is not sufficient, unless introduced within a network of relationships with the urban context, in order to satisfy the needs of the population as a whole. This calls for a rethinking of urban space considering the extended usership, in other words, considering all types of barrier, in order to favour accessibility, user-friendliness, and mobility of the largest possible number of people, starting with the elderly.

The concept of accessibility must go beyond technical and architectural requisites, but must also consider aspects that are equally important such as psychological, physical-sensorial ones, environmental comfort, individual privacy etc., thus creating a city where discrimination is minimised, built by citizens that are aware of the extensive presence of subjects with specific needs. A "tolerant" city that proposes mutual respect (even with regards to urban planning) as the basis of all human relations.

Planning that neglects the requirements of those with functional limitations, often the cause of emergency and crisis situations to which isolation or even worse institutionalisation represent a practical but avoidable solution. It is however clear that the needs of the elderly population is irremovable entwined with that of the rest of the community, in particular with other sensitive categories such as children and the disabled. The research into and recovery of a greater quality of urban space and more generally of the settlement and facilities system, is therefore one of the priority objectives that may also consent greater attention to and specific investigation of the real needs of this large section of the population.

The territorial context

In defining objectives and strategic action aimed at resolving the remaining incongruities between urban space and elderly population, we must therefore deal with:

？ the theme of non-homogeneity, evaluating the possible actions to be undertaken in urban centres, also according to the role that they play within a more wide-scale territorial organisation such as that represented by the Local Co-ordination Plans, which propose organisational action and measures according to the intrinsic potential and the rank that urban centres assume within the local dimension;

？ the ageing of small mountain, remote, valley or low plane communities, where relations between the young, active population and the elderly are profoundly altered and the very survival of the most isolated and worst served communities is threatened by the gradual deterioration of basic facilities (food stores, bars, chemist shops, medical assistance, leisure clubs, decentralised municipal offices, etc.).

1. Improving urban quality, intended as the achievement of parameters that define satisfactory levels in the quality of physical (air, water, noise, electromagnetic fields, etc), social (accessibility and mobility, public and private facilities, meeting places, commercial networks, etc.) and psychological (acceptance, safety, landscape, etc.) elements.

1.1 definition of criteria for new approach to town planning;

1.2 definition of indicators and standards for evaluating the "social friendliness" of communities, assuming them as a parameter for any form of incentive chosen;

1.3 putting into practice measures aimed at increasing safety and social cohesion;

1.4 recovery of parkland in the neighbourhood;

1.5 use of a functional mix in planning new districts and upgrading urban fabric;

1.6 localisation of facilities coherent with the distribution of the population over the territory;

1.7 guidelines and directives to authorities on the arrangement of urban and territorial planning instruments;

1.8 mitigation of negative impacts of traffic and urban congestion.

2. Improving the quality of living in the widespread settlement system, which must make the accessibility of primary services, an efficient public transport system and an efficient distribution of services throughout the territory top priorities.

2.1 upgrading the main and peripheral road network, the regional rail system and local road transport;

2.2 implementation of town planning and construction policies, even subsidised in order to allow, with involvement and consensual instruments, the transfer of the elderly population currently resident in parts of the territory characterised by difficult accessibility and absence of services into well-equipped urban areas;

2.3 the creation and upgrading of transport and information networks and the use of technology that permits transmission of data, including medical information, from homes to services and medical structures, thus reducing the need for mobility;

2.4 implementation of town planning policies for the consolidation and upgrading, where possible, of rural hamlets and agglomerations in order to reach the minimum population thresholds for justifying public and private services;

2.5 implementation of building and environmental policies aimed at securing rural areas against natural disasters such as floods, landslides and earthquakes;

3. **Improving the quality of technological infrastructures,** a theme that is transversal to those mentioned above, which affects both the quality of settlement environments and the ability of the use of new technology that serves the community.

3.1 definition of standards and parameters aimed at defining the quality of infrastructures;

3.2 implementation of policies and incentives for the transportation of new communication technologies (satellite reception, Internet, etc.) in areas with the greatest accessibility problems.

4. Promoting ongoing attention to the needs of various ages in the training process and decisions involving strategic urban planning choices.

It is advisable to set up an active citizen and association participation process in order to evaluate the impact of urban planning choices on social as well as environmental and territorial sustainability, by means of:

4.1 the diffusion and extension, also for social sustainability, of the use of Environmental and Territorial Sustainability Evaluation - ETSE), foreseen by regional town planning laws. On the basis of suitable regional indications, ETSE can be a useful instrument for:

? verifying the social sustainability of town planning choices;
? verifying the level of user-friendliness of the city for specific population targets, thus identifying the most urgent matters to tackle;
? orientating choices towards social interaction and cohesion.

4.2 The promotion of new forms of preventative debate and involvement of citizens and watchdog associations of various types concerning strategic aims and town planning choices.

4.3 The adoption of monitoring systems and ex-post verifications, using instruments aimed at evaluating also social impact on specific population targets, in particular the elderly.

C. Guaranteeing the right to movement and mobility, even for those with limited autonomy

Within the transport and mobility sector, the gap between the claims made in legislation and concrete actions aimed at eliminating margination situations is deep and very difficult to overcome. After the Law 118/71, which claims the principle of accessibility of means of transport to the disabled, we are currently awaiting the concrete translation of the framework law no. 104/92 and Presidential Decree 503/96 that assigns the Regional and Municipal Authorities the task of guaranteeing the right to mobility.

1 **Improving the quality of the mobility system,** which defines the degree of social integration of the population.

1.1 drafting of a *Plan for the abolishing of architectural barriers,* which can be defined as an instrument for planning initiatives aimed at defining a reference abacus for planning and improving the accessibility and visitability of buildings and urban structures linked to the mobility system, thus overcoming the current infrastructural rigidities that significantly limit the extent of the options available;

1.2 promotion of the new concept of urban visitibility, intended as the possibility of reaching and staying in those portions or areas of the constructed territory in which total accessibility is precluded by causes that can be attributed to the morphological conformation of the place and to design restrictions linked to binding technical and historical aspects;

1.3 use in the plan drafting phase of computerised instruments such as the most suitable dynamic data handling and cataloguing systems. The design solutions put forward for the implementation of the plan must conform with current legislation and must be the fruit of a number of evaluations concerning the functionality of pathways, the degree of concrete implementability and the compatibility of initiatives;

1.4 definition of infrastructural elements (such as the location of bus stops/stations/terminals, exchange car parks, etc.) deriving from ex-ante defined design input (for example, the elimination of obstacles hindering user-friendliness, accessibility, reachability of structures), in order to avoid ex-post intervention, in an occasional way, thus avoiding the errors and incoherencies that hasty action inevitably entails;

1.5 upgrading and diffusion of urban traffic plans in favour of subjects with limited autonomy;

1.6 creation of protected cycle paths and pedestrian walkways, restricted traffic and monitored speed areas.

2. Upgrading the public transport system for a wider usership

2.1 Experimenting solutions that help subjects with physical difficulties get on to public transport, the seating, positioning and anchoring of people or wheelchairs and optic and acoustic installations that facilitate orientation, recognition of the stop and booking, for those which sensorial disabilities;

2.2 Promotion of pilot projects throughout the territory, above all to favour service flexibility (reservation service, dedicated lines, etc.) and the physical conditions of the journey, in particular the introduction of vehicles aligned with pavement height and the inadequacy of pavements;

2.3 upgrading of the taxi and chauffeur-driven rental systems, with definition of higher levels and better conditions by the Municipal Authorities in exercising the power set out in regulations, including the use of incentives.

2.4 Promotion of tariff policies aimed at favouring the mobility of certain population categories, by promoting facilitated access to public transportation as well as to promote safety and reduce the risk of accidents.

2.5 Incentives for the adaptation of vehicles and means of locomotion in favour of specific user categories and the technological renewal of vehicles on the road.

2.6 Improvement of the availability of information on the mobility system, tariffs and by means of the use of multimedia technologies whose applications are able to upgrade the solutions available starting from those information tools able to reach various sensorial and physical handicaps, or the settlement of administrative fulfilments, for bookings (panels with varying messages, forms of protection and assistance for the elderly users that use the various services);

2.7 Renewal of the service contract with Trenitalia, paying greater attention to the needs of disadvantaged usership categories, also by promoting active participation of the local communities in order to upgrade those railway stations that do not have a service in order to once more guarantee good levels of comfort and safety inside the station and also in terms of accessibility not only of places and vehicles but also information, which must be accurate and regularly updated.

2.8 Promotion of innovative and flexible solutions for assuring mobility opportunities even in mountainous or remote areas, by means of the integrated use of different transport systems and the experimentation of new forms of transport that operate on a demand-basis, also involving Associations and volunteers.

2.9 Availability of data on the use of means of transport and on the mobility needs of the various population targets for different age bands.

2.10 Expansion of the distribution criteria of the regional fund also taking into consideration the need for mobility of the elderly population.

The transformation of the transport sector, in preparation for the gradual privatisation of local public transport, poses the need for great attention in order to prevent the rationalisation of management expenditure and sub-concessioning that results in keeping obsolete vehicles on the road.

The heart of innovation and better accessibility by disadvantaged population categories lies in the technological renewal of the vehicles in circulation. Constant promotion of actions aimed at technological adaptation that allow the service those characteristics of agility and flexibility required by the disadvantaged users' needs is therefore a condition of primary importance.

Widespread use of the opportunities made available by information technology and computerised devices reducing the need for mobility is a strategic action of a general character that produces positive effects also on the mobility system.

D. Improving the health and quality of life of the elderly by means of a multi-sectorial approach and a fair, impartial and economically sustainable health system and supporting family members as caretakers

The health system is called on to perform a profound cultural and organisational change in order to respond to the specific requirements posed by the condition of co-morbidity and functional loss that characterises for a long period the life of elderly people who are fragile or are likely to become so. Both the aims (no longer recovery alone) and the parameters of evaluation (possible well-being) as well as care timeframes (long-term care) are changing. This requires a revolution on cultural and professional levels in the health and social sector, in pursuing some fundamental options:

? supporting and promoting independent living at home;
? favouring and supporting the self-determination of the elderly's choices;
? favouring appropriate use of technology;
? making the services available flexible, integrated and qualified;
? favouring the consolidation and professionalisation of a social market.

1 Promoting health and well-being for the elderly population and assuring equal opportunities of access to social and health services without age discrimination.

1.1 Developing prevention initiatives for the pathologies that most frequently affect the aged and reducing the cumulative effect of factors that increase the risk of illness and the loss of autonomy in old age.

1.1.1 Qualifying Plans for health in relation to the needs of the elderly population. Plans for health represent a golden opportunity for launching, on a national level, initiatives aimed at intervening on the factors that determine the health of the aged, taking into consideration the pressure that changes, especially those in social spheres have on the state of a subject's health and well-being. Specific support and monitoring must be guaranteed to this important process of regional health system innovation, within the context of Plans for health and Local Implementation Plans, creating programmes aimed at changing lifestyles in the course of one's entire life is a fundamental choice for any prevention strategy.

1.1.2 Promoting specific regional programmes for the prevention and reduction of the impact of the most common pathologies to which the elderly are prone.

In the same way as for senile dementia, specific programmes must be promoted on a regional level in order to tackle the illnesses that are most frequent and have the greatest impact amongst the aged, by means of low technology, simple actions based on scientific evidence but capable of producing positive, very effective effects. The topics to which this type of experience can be applied are:

? the identification of and prevention for the aged prone to fragility;
? the reduction of the likelihood of falls,
? the reduction of domestic accidents, aimed specifically at the elderly.

1.2 Promotion of wellness and healthy lifestyles for the entire course of the subject's life. Promoting the implementation of a regional programme, which, on the basis of recent World Health Organisation proposals, offers the regional community a significant commitment for "**active ageing",** intended as a balanced lifestyle to be assumed throughout life (to be developed).

1.2.1 Creating a regional initiative co-ordination and development programme in the telemedicine field with the aim of diffusing the use of new technologies, in order to:

? reduce the need for patients to move:
? to network residential long-care structures (sheltered homes, assisted housing) and guarantee, where necessary, on-line monitoring in connection with specialist departments;
? favour independent living even by those patients who have pathologies that require ongoing monitoring.

2. Improving access to health and social services

2.1.1 Programme for favouring access to and use of integrated care systems, which guarantees the reduction in charges borne by the citizen (first access, bookings, appointments with the family doctor, etc).

2.1.2 Adoption of actions aimed at simplifying contact between senior citizens and healthcare facilities and/or professionals (contacts established with patients during hospitalisations, mailing their medical reports home to them, online communication with GPs, access to doctors' offices, etc).

3. Guaranteeing an adequate long-term care system as a citizens' right

3.1.1 Numerous factors pose questions concerning the ability of the current system to provide adequate funds for the network of long-term care services that must be organised now and, above all, in the years to come. Despite the contribution of the regional health system, which guarantees essential levels of care, the contributions that the Municipal authorities grant to subsidise the cost of the services, the further resources that originate from the public and private social sector, to the elderly and their families, a very high charge is now required for the payment of long-term care services. Moreover, this sector also requires further hefty funding in order to develop innovative services that support independent living and living in sheltered housing (the development in particular of the new type of "assisted living"). For these reasons, the Regional Authority has scheduled the establishment of a regional fund to help provide an entire range services to the non self-sufficient elderly population. Allocation of said monies is ethically and socially based on the principles of universality and equality. Recent Finance Acts have curtailed the levying of Regional and other local taxes, thus making it impossible to set up said regional fund, the establishment of which is strategic and essential to the creation of a system of social and health care for the non self-sufficient population, an unalienable right of all citizens.

3.1.2 Favouring, as part of a service network logic, the diffusion of innovative housing solutions. The creation of new housing solutions with services, the development of policies supporting independent living, together with a new network approach calls for a rethinking concerning the regional planning indexes of current services. These indexes must refer to the overall capacity of local systems to respond adequately and appropriately to needs rather than to the attainment of rigorous goals set according to service typology.

3.1.3 Guaranteeing the right to information regarding existing opportunities at the local level, through the creation of social "helpdesks or windows" as provided for in the Regional law passed in February, 2003.

3.1.4 Redefining and re-enforcing the role of the person in charge of the case from the perspective of a relationship between the citizen-user and the network of services based on collaboration and on acknowledging the decisive role played by individuals and their families in decisions regarding life and healthcare while guaranteeing the necessary professional support and continuity of services.

3.1.5 Developing home care services in terms of meeting demand and of the qualification, flexibility and integration of interventions. From this standpoint, it becomes clear that home care services will have to be developed following a different line of reasoning by which roles are differentiated and the contribution of all those involved in delivering home care is taken into consideration.

3.1.6 Expanding flexibility of the network of services, especially with reference to the necessity of continually adapting the services offered to the needs of seniors and their families.

3.1.7 Increasing the quality of services for senior citizens by adopting an accreditation system for said services, guaranteeing clients the right to choose the services they want.

3.1.8 Guaranteeing outcome evaluation and consistency among the different organisational levels and types of services, and ensuring that communities are equipped to respond to the social and healthcare needs of the elderly they serve.

3.1.9 Ensuring basic education, professional training, and continuing education courses to qualify professionals in this field.

§ Adopting a programme for the protection of the rights of the elderly using the services: also on the basis of significant experiences abroad, evaluating the feasibility of the adoption of qualified instruments of protection for the elderly in long-term care using the services, also by means of use of "protection of rights" voluntary work. The aim is to aid the elderly in using the services to become familiar with their rights and make use of them. The complex nature of the aid relationship and the variety of services suggests the need to develop a specific initiative that, by means of support to the elderly and mediation with the managing subject can favour rapid solutions and responses that are better suited to the elderly's needs.

4. Development and Qualification of a network of residential services

4.1 In order to respond to families and their needs (needs assessed and determined at the community and local levels), planning related to residential facilities for people who are no longer self-sufficient must take into account the fact that the homes must be equipped to accommodate the various levels of self-sufficiency and the dynamics of a changing population. Within this context, it is appropriate to:

- exploit existing housing that has already been licensed as retirement homes or assisted living facilities;
- support renovating and refurbishing certain portions of existing nursing homes in order to accommodate a wider variety of clients;
- favour investments in more flexible and innovative facilities, necessary instruments to support policies to improve assisted and institutionalised living;

4.2.1 Promote a special programme to improve the living conditions of guests in residential homes in full respect of individuals and their rights as human beings, by means of:

4.2.2. Actions on environments in order to guarantee better quality (improvement in the quality of the air, increase in the spaces available to protect privacy with gradual transformation of existing structures, increasing space and moments of privacy, increase in the availability of one-bed rooms, increasing the size of rooms, greater personalisation of interiors)

4.2.3 Changes in the organisational structure to support more customised services and to empower guests and their families, and especially to enhance the feeling of community and make the facilities feel more like homes in which interpersonal relationships are highly valued. It is important to ensure that the interests, health, and life of guests be safeguarded and that services be of the highest professional quality within an organisational climate that encourages warmth and humanity in full respect of the guests' dignity and freedom of choice.

4.2.4 Setting up projects promoting the return home of guests who desire to return home and are able to do so;

4.2.5 Experiments that emphasise the possible role of residential structures in supporting independent living by means of a greater destination of hospice places, the development of greater relationships with the territory through consultation activities and support for family groups and outside assistants at home.

4.2.6 Improving the overall quality of care and of life by pursuing high and verifiable standards of social and health care.

5. Supporting family caretakers and the neighbourhood solidarity network.

5.1 Initiatives to support family members (information, counselling, educating caretakers, flexible use of services, increasing step-down and long-term facilities) to help empower both clients and their caregivers. Specific actions for caregivers (assessment and response to their needs, aid in care management).

5.2 Increasing recourse to care benefit checks on the part of family members who take over responsibility for the care of an elderly person by promoting this system as a viable alternative to institutionalisation, defining uniform criteria applicable throughout the region, and assessing its effectiveness and utility in relation to the resources invested;

5.3 A regional intervention programme sustaining and regulating home help on the part of private individuals (especially on the part of the immigrant labour force) should be developed jointly with the local authorities, AUSLs (community health and social services), provincial governments, other administrative bodies, and the tertiary sector. The programme should support families' freedom to choose and safeguard the interests of both the clients and the caretakers.

5.4 To promote the necessary changes to allow for greater flexibility between people's jobs and care taking activities, guaranteeing some form of pension coverage for those periods spent taking care of others and the possibility of recommencing work once care taking is terminated;

5.5 Launching qualified consulting services for complex problems (developing services to help deal with dementia and dementia-related issues: legal, social security, psychological, social and health care, technical advice on how to furnish and equip housing for seniors).

5.6 Promotion and diffusion of low-threshold interventions that have a high preventive impact and favour service information and availability (in relation with associations and craftsmen; agreement

with public organisations for census taking and the advertising of availability of home deliveries per each product sector, etc.).

6. Promoting actions for frail or sickly senior citizens, and for those who are at risk of developing problems of frailty or who are living alone and isolated from others.

The aged live in a state of precarious equilibrium resulting from living alone and from the steady loss of contact with other people. This situation becomes critical if the elderly person is frail and weak and gets sick, with the flu for example, or has to face a particularly hot summer or cold winter.

When emergencies of this nature happen, we are forced to wonder not only about the quality of our health and social services but also of the quality of housing and social life within the community.

It is necessary that programmes be developed throughout the entire social network that deal with the problems of solitude and frailty in the elderly population :

6.1 Surveys and charting of the frail elderly population

6.2 Promotion of situations that allow senior citizens to socialise and of programmes to rebuild or support existing social networks and interpersonal relationships;
6.3 Active programmes to maintain contact with the population at risk; for example, periodically telephoning seniors over 75;

6.4 Specific interventions to reduce the effects of extreme climatic conditions (such as heat or cold waves) on the elderly population at risk;

6.5 Sustaining the development of initiatives and of services closer to senior citizens.

6.6 Development of initiatives to prevent the loss of physical and social health and to maintain self-sufficiency and personal and social equilibrium.

7. Supporting socialisation and contact with other people

Social centres for senior citizens and the assignment of small plots of land for the planting of vegetable gardens have proven to be extremely significant, regionally-promoted initiatives that allow senior citizens to take responsibility and participate fully in activities concerning them directly.

It is necessary to support the further development of these types of initiatives and to reflect on the changes taking place in our society especially with respect to the needs and experiences of our senior population in the near future.

The diversity and articulation of activities, the growing female population, the development of activities and initiatives aimed at facilitating intergenerational relationships, the increase in activities of mutual self-aid represent important fields of confrontation for the further development and consolidation of initiatives that have already been implemented.

8. Dying with dignity and limiting pain.

Overcoming the growing social and emotional isolation that characterises death in hospitals, creating the conditions that allow people to decide where and how to die, surrounded by people they choose to be with them, free from pain and as much as is possible through:

? respecting the decisions made by the elderly.
? the development of a palliative care and pain control system in all environments (from the home to long-term care facilities, to hospitals).

9. Using professional training and continuing education as a strategic instrument for organisational change and to promulgate innovation.

A strategic and essential instrument is education (professional training and continuing education), a topic that will be dealt with in detail later in this Plan. It must be pointed out how for social and medical service workers it is essential that their professional training assures an integrated approach, favours inter-professionalism and multidimensionality and makes the best possible use of experience. The possibilities offered by distance learning also open new prospects for the upgrading of social workers and medical staff.

By means of accreditation mechanisms, a concerted action at a regional level is an important instrument for using new methods and instruments, thus saving time, costs and movements. The vast number of subjects and places where services for the elderly are provided can be transformed from a negative factor to a positive opportunity.

E. Ensuring continuing education and lifelong learning opportunities

In the prospect of a positive placement of the elderly within a civilised society that is able to promote professional skills and know-how and favour the growth of independent and qualitative living standards, a strategic role is assumed by education meant as a process of lifelong learning.

Aims:

1) Working within the framework of European Union guidelines on lifelong learning and of the agreement made in March, 2000 between national and local governments (regions, provinces, city and rural municipalities) to reorganise and increase continuing education for adults, our goal is to implement a series of actions at the regional level in enforcement of regional law no. 12 – 30 June, 2003 stating "Provisions for equal opportunity of access to knowledge for all citizens for their entire lifetime through the reinforcement of education and professional training and their integration, especially section V in "Adult Education.""

Lifelong learning can serve to help people adapt more easily to the transformation taking place by which all forms of knowledge (cultural, scientific, traditional) are combining to form a new Knowledge Society. It is also a means to help us avoid competence or skill obsolescence and lessen the risk of social alienation.

Regional Actions in this context tend to favour the enrichment of the cultural heritage of senior citizens and their personal development.

Actions:

1.1 To promote a regional co-ordination of the organisations that operate throughout the territory (associations, Universities for adult education, co-operatives, foundations, centres for continuing education) that will take into consideration, through formal agreements if necessary, the response to local demands and expressed needs.

1.2 To guarantee the integration of continuing education initiatives promoted by Associations and other organisations or groups (in particular Universities for adult education) in order to create an integrated and articulated range (subject matter, category, and duration) of educational opportunities/options at the regional level.

1.3. 1 To create educational and informative pathways aimed at stimulating "active ageing" and at forestalling the onset of problems related to old age through programmes on health education, personal hygiene, nutritional education, help in overcoming situations of isolation and distress linked to ageing, development of a social role, etc.). An example could be training and educating seniors in community volunteer work that would improve their knowledge base and skills and allow them to do something for their community (thus nurturing a sense of social utility).Another focus could be on educating seniors who do not have family support or are unable to protect their rights.

F. Ensuring the basic and continuing education of workers and professionals in contact with the elderly.

The availability of workers and professional figures prepared to interact with the elderly population, an increasingly significant target in most service and financial activities, represents an important problem for all sectors, and not merely for the sector dealing with social and healthcare services.

Promoting the knowledge of the need to upgrade and train staff in relation to the ability to interpret the needs of the elderly population and the solutions and opportunities that, in the single sectors, are available and can continue to improve the quality of an independent life of elderly people.

All the various economic and social subjects must reflect on the training and upgrading needs that the ageing of the population poses professionals and workers operating in the various sectors (transport, banks, tourism, public administration, construction, etc.), thus developing the technical and interpersonal knowledge that improve interaction with citizens/clients and consequentially the level of satisfaction and safety.

1 Guarantee social – medical and medical staff that are qualitatively and quantitatively suited to the needs of the elderly

The lack of qualified personnel is already an emergency, with regards to both the nursing profession and community health and social workers. Considering current demographic patterns it is absolutely necessary to adopt actions that consent suitable responses to today's and tomorrow's care needs.

1.1 Careful evaluation of the needs of different professional figures and the definition of planning of basic professional training in line with those needs;

1.2 To acknowledge and increase appreciation of social care work and related professions, including greater economic recognition and prestige. A cultural leap must be taken whereby the welfare system will be acknowledged as a producer of wealth and social wellness as the premise to increasing the value of work in the field of community social health.

1.3 Guaranteeing support to access and the attending of degree courses for nursing staff and basic professional training for community health and social workers. with the aim of assuring coverage of the programmed need.

1.4 Developing formal relationships with foreign local governments for the creation of projects in order to jointly regulate the licensing of immigrant social and health (recognition and/or reciprocity of degrees or diplomas, supplementary education or training for certification, orientation programmes to help immigrants better understand occupational and social contexts at the regional level, incentives for becoming part of the trained workforce in community social and health services.

1.5 Promoting postgraduate qualification activities in conjunction with Universities by setting up first level masters in geriatrics.

2. Guaranteeing appropriate continuing education to community health and social workers

2.1 Offering continuing education to maintain skills and train workers in new skills so that they will be better able to respond to qualification needs in the network of services, also with innovative

modules that facilitate specific attendance and learning, thus protecting the need to promote, starting from training, the co-operation and group and inter-professional work.

2.2 To support the right of social and healthcare workers to individual professional training and continuing education (Law no. 1236/1997).

3. Assure the availability of new professions useful for facing the new and differing needs of the elderly population and the services offered it

3.1 Promoting on a regional level, in co-operation with service administration, Universities and sector professional training workers, a careful evaluation of the new training needs currently not covered in order to reach, by means of the necessary experimentation, the definition of initiatives capable of giving responses to current short-fallings.

Within the framework of a process aimed at developing and improving skills and knowledge in the different professions thereby reducing the number of new professional profiles and making it easier for senior citizens to know who they have to contact and for what purpose, we must question if we really do need to define new pathways or professional profiles, particularly concerning:

a) operators that are able to work not only directly with the usership, but that are also able to set up authentic social-educational and social-rehabilitation schemes, by building around the user the most suitable network of possibilities, able to highlight and evaluate needs and perceived and real hardships or difficulties and to build pathways, one could think, in this sense, of the opportunity to consider a figure as "go-between";

b) specific areas of competence that are yet to be given clear professional profiles and training pathways, such as for example, the competences relative to cognitive therapy and those concerning occupational therapy;

c) social custodian.

4. Promoting the training and upgrading of family members and other informal caregivers involved in care or care- and support-related activities to the elderly, with regards to the knowledge of the network of social and medical services, formal and informal care and procedural, legislative and technical opportunities for a productive relationship with home and the surrounding social environment.

4.1 Publishing information leaflets on specific themes.

4.2 Promoting in each territory a programme of meetings with family members developing support groups, thus inserting these activities in the training planning.

4.3 Creation of an expert site on the main problems linked to personal care for the elderly with the possibility for family members and workers to access the documentation available (texts, photographs, video) in order to learn the best practices, with absolute freedom with regards to timeframes and modalities.

5. Co-operation with Universities in order to enrich, in relation to the ageing of the population, the basic education modules with initiatives and contents aimed at qualifying basic training of operators and professionals, in particular:

? doctors, nurses, therapists, social workers and educators, also with regards to certain conditions that strongly affect senior citizens (also in terms of numbers) creating unbalance in the life of patients and their families as in the case of dementia;

? technical designers and installers operating in residential construction and mobility (on both a public and private enterprise level).

This last action is aimed at creating professionals able to favour independent living not only by promoting flexible and comfortable housing types for the specific needs of the elderly alone, but by planning environments, infrastructures, park areas and transport in an optic of total accessibility and safety, using innovative, mechanical, electronic or computer technologies, in order to favour the elderly person remaining at home as long as possible. Today what is lacking is basic and specialist knowledge, which needs to be tackled by means of training on an academic level and through continuous professional refreshing of those categories involved in the design, operative and organisational processes of different sectors. When a residential unit, a new housing or commercial complex is designed, a system of transport or an improvement of urban accessibility, the user model must be considered, thus also promoting generational differences.

G. Favouring access to culture and to the benefits of taking part in cultural activities to the entire population regardless of age or sex

The differentiation of cultural needs and access to culture and cultural activities (including entertainment) by seniors is characteristic of the current situation. We must consider the high percentage of senior citizens that are isolated and therefore prevented from taking part in cultural activities but who are avid "consumers of television shows." It is probable that "tomorrow's elderly" will have different, even more articulated needs and demands. Any strategy that aims at improving access to the entire range of cultural options offered throughout the region must face these problems and in particular take into account that:

? there are varying degrees of participation in and enjoyment of cultural activities offered within the region; there are many cases of senior citizens living alone who are unable to access or to afford taking advantage of what's offered or are socially disadvantaged and culturally deprived because of this;
? an ever greater number of senior citizens is highly educated and has a wide knowledge base; many seniors participate in community life and, moreover, thanks to the organisations in which many unite, contribute to making or keeping vital contexts that would otherwise be likely to degenerate into cultural and social extinction;
? cultural policies that take into account the phenomenon of an ageing population must facilitate and increase access to museums, libraries, and to the theatre; however, the underlying strategy must be based on the involvement of the elderly and on their active role in drafting proposals which is fundamental to re-establishing cross-generational interaction and dialogue. Culture forms the context *par excellence* for meeting and aggregation between people; and therefore any action that leads in the direction of increasing involvement and opportunity should be favoured.

1. Strengthening access and use of cultural structures and activities by the entire population, in particular the elderly

1.1 Promotion of the relaunch of libraries as the ideal place to favour access to information by different types of public.

1.2 Promotion of reading by means of the upgrading of initiatives such as "invite to reading" (book launches with authors, also in conjunction with voluntary associations and/or co-operatives, thus extending to the entire regional territory significant experiences set up in certain communes.

1.3 Supporting computer literacy programmes, by participating in expenditure for equipment and arrangement of the rooms, on the model pf initiatives already put into practice in certain libraries.

1.4 Adoption of adequate communication and disclosure strategies on the cultural facilities that animates library and museum circuits.

1.5 Promotion of a museum plan in the organisation of initiatives that recreate citizen interest. City repossession pathways can also include museums, by rethinking welcoming and visiting proposals. Promotion of the modernisation of museum guides so that adults and the elderly as well as students are accompanied in such a way that a correct and in depth relationship is established with the facility.

1.6 Promotion and support for activities conducive to the use of cultural initiatives, in conjunction with Universities for the elderly, associations and social centres that are active in the area.

1.7 Processing of training pathways by voluntary organisations, primarily constituted by the elderly, which already work with cultural institutions (museums and libraries) in a number of different cities in the Region, not only with regards to the performance as custodians, but above all to allow them to receive and assist the public and give out information.

1.8 Assure the various levels of programming of regional and local initiatives, a unitary relationship with the associations that operate in the sector, with social centres and all the other aggregations with a significant presence of elderly citizens.

2. Upgrading access and use of life shows by the entire population, and the elderly in particular

2.1 Definition of actions of stimulus and encouragement to widening the users demographic and social origins, by:

? promotion of actions aimed at public training/literacy; this is a determining factor in a sector such as theatrical productions, which by nature marry innovative language, tradition and cutting-edge technology, this applies to an even greater extent to the elderly.
? reinforcement of the existing channels of disclosure of information on theatre initiatives, including ticket price reductions and special arrangements, with means and technology that is also accessible to the elderly.

2.2 Improving the knowledge and promotion of the associations dedicated to dialect-based drama and amateur dramatics, in conjunction with the Municipal Authorities, the primary points of contact with this type of live entertainment.

2.3 Support and encourage the creativity of the elderly population and the production of cultural initiatives (in particular dramatics) with the direct participation of the elderly, by means of schemes involving schools or in any case oriented at favouring relations and solidarity between generations.

2.3.1 Support, in conjunction with the Municipal Authorities, of dialect-based and amateur dramatics.

2.3.2 Support to the theatrical activity initiatives that involve the elderly as actors and to the creation of a network of amateur dramatics experiences, with the active presence of the elderly and the connections with similar experiences in other European countries.

3. Promote the participation of guests of network structures and services in cultural activities

3.1 Identification of strategies for greater involvement of the guests of residential structures present in the territory /transport, accessibility, need for greater staff presence and co-operation with voluntary associations);

3.2 Co-operation with cultural operators for initiatives to be created within the structure.

H. Favouring physical and sports activities for the entire population regardless of age or gender

Widespread prejudice has contributed to privileging the use of sports facilities and equipment by the young and adults. For years in most of the Region, under the initiatives set up by Municipal authorities and Associations, physical education and swimming courses have been held for senior citizens, often with personalised pathways on the basis of psycho-physical characteristics and the attitudes of the individual. The right of all to practice sports, in compatibility with their own abilities must be highlighted.

1. Improving accessibility and use of sports facilities also by developing within the Regional Observatory for Sport specific attention to sports practiced by the elderly and disabled.

2. Promote use of sports facilities open to the entire population, by means of the flexibility of opening times, regardless of age or gender in the definition of priorities.

3. Creation of accessible areas that can also be used for a range of physical activities and sports (nature walks, safe cycle paths, etc.)

4. Increase the percentage of the elderly who perform sports activities continuously, in a compatible way with their psycho-physical condition, in particular with the following actions:

4.1 Reduce the obstacles to the elderly participating in sports initiatives (poor information, transport problems).

4.2 Creation of an information campaign on the benefits for people that derive from the adoption of a correct lifestyle and regular sports activity and on the opportunities existing in each area.

4.3 Promotion of social aggregation and combating the isolation connected to practising sports.

4.4 Encouraging and sustaining the work of associations and groups that organise physical activities for the elderly with continuity and experience.

4.5 Experimentation of especially trained qualified figures for favouring sports for the elderly over 70.

I. Guaranteeing an easy-to-access commercial network

The reduction in commercial businesses in town centres and the tendency to concentrate large-scale retail on the outskirts of urban settlements, with the consequential problems of accessibility, has a negative social impact on the categories of the population with limited mobility autonomy. The partial disappearance in isolated, mountain areas of small shops, which often represent the last service of sociality, often poses problems with regards to the cohesion of the community.

Moreover the development of new commercial techniques (such as electronic shopping), has consequences in terms of logistics and the traffic system with a consequential profound redefinition of the distribution structure, whose effects and potentials have yet to be adequately evaluated.

The recent reform of legislation on commerce has given the Regional Authorities a great opportunity, as they have been called on to exercise full responsibility with regards to the definition of objectives and instruments for achieving them. The aim of the regulation issued by the Emilia-Romagna Regional Authority in 1999, to implement legislative decree no. 114, was mainly that of constructing a distribution network able to guarantee all consumers a service able to take into account their needs.

One of the needs most frequently expressed in recent years was that of nearby services, a rather pressing need in a situation, such as that of our Region, characterised by a very considerable presence of elderly people, often alone.

1. Guaranteeing a structured distribution network that is easily accessible.

1.1 The maintenance of commercial businesses in areas at risk from commercial desertification, starting from town centres and less densely populated areas, or rather rural and mountain areas through commercial promotion projects (Regional Law 41/97 and Law 14 /99).

The maintenance of the network of nearby businesses in town centres and less densely populated areas of the region – more characterised by the presence of elderly people – has been identified by the Regional Authority as one of the primary purposes to be pursued by local bodies, in defining the planning of the distribution network.

Commerce can be an important instrument in guaranteeing liveability and therefore safety in those areas in which presence is maintained, safety intended as freedom to move and to live with serenity the city's public spaces. From this point of view, the presence of a widespread network of shops and hospitality businesses (bars, restaurants, etc.) constitutes an element of safety and urban liveability.

Communal administrations can adopt measures in terms of both town planning provisions or regulations and local fiscal regulations, in order to preserve and favour the concentration of commercial businesses in town centres and in consolidated areas of service where liveability and safety problems are worst.

The forecasting of such projects stems from the awareness that the relaunch of our town centres cannot depend exclusively on sectorial policies that only concern commerce and promotion, but also passes through vaster strategies and projects that include the territorial requalification of cities, services, infrastructures, relations with other activities and not only financial ones, the promotion of the social role played by town centres.

Regional Law no. 14 - 26 July 2003 provides for more flexible regulations regarding the distribution of food and drink and may be used as a means for guaranteeing better service to rural and remote areas.

1.2 Adopting active policies for the maintenance of commercial businesses in mountain and rural areas and the ease of access in summer periods.

Initiatives already foreseen by regional regulations must be developed to activate and support **multi-functional businesses,** or rather those businesses in which commercial activity can be combined with other services of collective interest, also in agreement with Public or private organisations (for example, postal services, booking for medical appointments and other healthcare services, etc.).

Incentives to the development of said businesses were created by a public announcement for funding – 2004 by which newly established multi-functional businesses as well as trade and services businesses can request subsidies under art. 10 of regional law 41/97.

1.3 Maintenance of markets on public areas and qualification of those areas.

1.4 Definition on a regional level of objectives aimed at assuring, within the ambit of Communal and Provincial Authority territorial planning, a balanced development of the distribution network in terms of range between large and small-scale retail, carefully evaluating the negative social consequences of choices that are not balanced on categories of the population with limited physical abilities, in order to consent a diversified range of products capable of satisfying the various needs of citizen-consumers.

1.5 Guaranteeing accessibility to nearby businesses also during the summer period. Municipalities, within their radius of authority, can perform important actions by co-ordinating opening hours, maintaining the opening of commercial businesses (especially those selling foodstuffs) during the summer months, taking into account accessible distances.

2. Accompanying the development of electronic commerce with active policies aimed at guaranteeing on the one hand the possibility of using categories of the population less used to using computers and on the other reduces the risk of abuse.

Electronic commerce can undoubtedly represent an instrument for extending the autonomy and independence of individuals and therefore constitute a type of sales whose diffusion is also sustained by economic support.

2.1 Develop in conjunction with Consumer Associations information campaigns and training initiatives aimed:

? at the acquisition of basic knowledge in order to make the most of electronic commerce, consumer rights and instruments for protecting them;

? at protection and prevention of abuse.

3. Assuring in the ambit of the activities of the Regional Observatory on Commerce a constant monitoring of the evolution of demand, also in reference to the needs of the elderly population.

4. Promote and valorise, within the context of intervention plans foreseen by regional legislation, in conjunction with commercial operators, service activities to users that guarantee important social support to independent living:

? development of tele-shopping and home deliveries;

? development of co-operations with voluntary associations for home deliveries for people living alone or those with limited physical abilities, thus diffusing the positive experiences already introduced in certain municipalities;

? local scale production of information instruments (brochures, etc) in order to get to know for each product sector the availability of businesses that offer home delivery services.

J. Guaranteeing the possibility to be able to travel autonomously and with adequate, easy-to-access services

Increased life expectancy, greater diffusion of healthcare, improved attention to one's physical and psychological well-being, greater financial peace of mind and greater availability of free time has stimulated greater use of tourism by the elderly population. Tourism represents one of the activities for expressing one's autonomy and gives greater space to one's self-satisfaction.
How can the elderly's independence be stimulated even when on holiday?
In Emilia-Romagna, considering the contribution made by tourism to the regional economy, this process requires greater attention with regards to both the demand and supply of tourism, in order to guarantee on the one hand adequate use of tourism resources by the elderly and on the other to widen the range of options available giving adequate responses to an increasingly large slice of the market.

Until the present time, this form of tourism was placed under the wide heading of "social tourism", characterised by use during low season and at a low cost, often with support (organisational or economic) from local authorities.

A new approach is called for in order to take full advantage of the new potential of this sector of the tourism market, which must not be considered as residual or assisted, by considering the growing call for movement and tourism by the elderly as an economic resource.

With this regards limited experiences of collateral hospitality services of a social, medical and paramedical nature have developed, that guarantee a strong element of safety for elderly users (presence or vicinity of health structures and facilities).

In order to extend the use of tourism resources to population categories with medium – low incomes, some new opportunities were foreseen by framework law 135/2001 (Assisted Tourism Fund). The failed application of the foreseen regulations leaves open the problem of the forms of incentives to extend the use of tourism.

1. Improving the conditions of accessibility of tourism structures

1.1 Creating an investigation on the accessibility of hospitality structures in order to guarantee tourism for all

1.2 Development of the "accessible tourism" project that foresees a series of cognitive and operative actions in favour of tourists with special needs. The project is part of the national campaign set up by the Department of Tourism entitled "Italy for all". The work is currently being launched and can be visited on the website www.italiapertutti.it

1.3 Improving the information available on the effective level of accessibility of the structures, foreseeing a quality brand name linked to the possession of requisites and services, by supplying citizens with an important reference.

1.4 Increasing the quality of planning concerning accessibility, usability and liveability by means of the production of regional guidelines and training programmes and updates by technical designers, installation staff and craftsmen.

1.5 Promoting greater sensitivity and attention, not only the formal of local authorities, in performing monitoring and verification work with regards to funding granting procedures.

2. Improving the tourism environment and making it more user-friendly

2.1 Gathering best practices and formulating suggestions and guidelines on a regional level.

2.2 Supporting the intervention of municipal authorities in upgrading the tourist area with the most suitable characteristics (such as pedestrian areas, adequate parking for socialising, better services, activities that make holidays more active, etc.).

3. Promoting and sustaining the experiences of qualification of the tourism options with specific programmes for the elderly

3.1 Encouraging product clubs with characteristics that meet the needs of the elderly target (hotel and cultural and/or oeno-gastronomical packages, construction of farm holiday network circuits)

3.2 Encouraging initiatives of communication of qualified associated tour operator products.

3.3 Encouraging the development of "solidarity tourism as part of exchanges and relationships aimed not only at tourism, promoting specific initiatives that see elderly citizens as active leaders of relationships (twinships between social centres, development of opportunities between twin cities, promotion of packages and initiatives for the elderly living abroad);

3.4 Promoting regional programmes aimed at qualifying the tourism possibilities that can be used by elderly citizens with an expansion of the services offered;

3.5 Promoting, also in conjunction with Consumer Protection Associations, a client protection programme centred on elderly clients in particular, starting from clarity of information, contractual rules, guarantees and safety requisites.

4. Supporting a different approach from sector operators and local authorities to the matters linked to tourism for the elderly, starting from the activities of the Regional Observatory on Tourism thus guaranteeing constant monitoring of the tourism demand by the elderly and effective use of tourism services.

K. Improving safety and limiting the negative effects of crime

The theme of security and safety in domestic environments and public places has assumed considerable social importance. The deep dichotomy between two fundamental aspects, the degree of victimisation and the perception of insecurity should be considered. The fact that the two phenomena are separate and not interdependent has been proven by the statistical data recorded.

Referring to the national survey on citizen security/safety conducted by ISTAT for 2001-02, one observes how, with regards to crimes against the individual (against people and things), age is an important element in identifying the victim and potential risk, in fact "Age is one of the keystones for the identification of victims and of potential risk […] Victims of theft, robbery, and assault decrease with age. This is not true for purse snatching and pickpocketing. Pickpocketing episodes decrease with age until people hit 45, at which point they start increasing again. Young people have quick reflexes and generally manage to avoid getting robbed or pickpocketed, at least 50% of attempted thefts fail. (ISTAT: Citizen Safety. Crimes, victims, perception of security and protection systems. Multipurpose survey of families "Citizen Security" Year 2002)

Therefore from a point of view of victimisation, the elderly would appear to be the less likely to be the victims of crime. The situation is different for the perception of safety: "the variables that are most strongly correlated with this fear are sex and age […] in general, the feeling of not being safe diminishes as age increases and reaches its lowest point in the adult population before rising again as people age." Even though the elderly are less likely to be victims of crime, they would nonetheless seem to be the category that most suffers from insecurity and feelings of not being safe.

1. Promoting actions aimed at reducing victimisation, without however increasing alarm and insecurity, thus intervening also on the perception of security as a separate phenomenon.

1.1. Promoting the production of information instruments for the prevention and reduction of social alarm. Support of the drafting of information guides aimed at citizens, constructed in such a way as to not increase social alarm with regards to the social phenomena treated. For the elderly, this type of material has a particular importance, due to the very ease with which an impression can be made on this category that characterises them. Diffusing useful information in order to obtain more secure behaviour at the various times of the day, in the form of suggestions and precautions for avoiding unpleasant episodes (on the road, when using public transport, at home, at the critical moment in which they collect their pension, (etc.) thefts or frauds. These are often very simply good sense suggestions, that are not far removed from citizens' habits and way of thinking and are therefore easily put into practice, with attention to the language, simple and reassuring, without reference to emergency or particularly alarming situations, with attention to promote behaviour to repair social relationships and favour the opening of one's life style to spaces and to other people, even with the adoption of a series of precautions.

1.2 Promoting the elderly themselves as instruments of security.

Promoting actions to involve the elderly in policies of reconstructing "social bonds" that most communities have lost. The introduction of associations for the elderly in the "management" of the urban territory performs two simultaneous functions: on an individual level (strengthening of role) and on a community level (strengthening of social control of the territory, an improvement of the revitalisation of those places that may be most abandoned, new stimuli for the reconstruction of community cohesion).

Areas of co-operation with associations could be: the management of public parks, presence in front of schools when children leave to go home, organisation of recreational activities and direct information to the elderly themselves, amongst others.

1.3 Promoting on a local level a co-ordination of the police force, thus guaranteeing better monitoring of the territory and co-ordinated actions in those areas that are more exposed to the risk of insecurity.

2. Promoting help action programmes to the victims of criminal activities. Action to reduce damage.

Actions aimed at helping victims must constantly take into account two objectives: reduction of victimisation and increase in the sense of security.

2.1 Promoting and supporting local victim support programmes;

2.1.1 Promotion of local agreements between the public safety forces and local police forces in order to facilitate the reporting of crimes by the elderly or those with physical limitations (collection of reports from the home, procedure simplification, etc.)

2.1.2 Organisation on a territorial basis, in conjunction with associations for the elderly (crime victim support and assistance centres, from both a personal point of view (concerning all the aspects linked to the emotional aspect of the crime) and a more material one, of the behaviour to adopt (reports to the police, bureaucratic operations for obtaining duplicate documents, general information on types of medical assistance, possibility to access alternative modes for solving conflicts, etc.). The risk of discontinuing the help offered, which could lead to an increase in the perception of the damage suffered, is to be avoided.

2.2 Experimenting the diffusion of forms of insurance, clarifying the limits of insurance cover, in a co-ordinated way with stably organised victim help initiatives, thus making the policy one of the instruments of a vaster policy of attention to victims.
The implementation of insurance mechanisms cannot be but directed at micro-interventions and that a generalisation that leads to the application of a general principle is not imaginable.
These are always, and in any case, specific interventions, which are directed at particular types of subject and particular damage situations. Next to positive elements the adoption of insurance mechanisms also relieves a number of concerns. Insurance mechanisms certainly have the merit of giving a reassuring sign to citizens. The positive nature of this effect is not however guaranteed: the mere insurance mechanism, in fact, does not provide stability of intervention – assistance and moreover it is limited to a series of limits and conditions for compensation, which may frustrate the subject's expectations. The long-term effect can therefore consist in an increase in satisfaction (and therefore the moving away from the institutions) and of the alarm, because the instrument identified is not able to respond to the expectations that it has allowed to generate amongst citizens.
Moreover, insurance instruments, which clearly have no effect in reducing the phenomenon, have a very limited effect in reducing damage and therefore can have (with the doubts expressed above) a single effect in reducing alarm.

3. As part of the project "Safe Cities," to support the monitoring throughout the Region of problems linked to the security and safety of senior citizens and of the best practices

implemented in the Region in order to promote the project, also by means of regional incentives.

Of all the actions addressing safety, particular attention must be given to road safety. In order to do this, we must:

 - guarantee that the Regional Observatory focuses attention on road accidents involving senior citizens and on actions that could be taken to prevent these accidents.

 - promoting specific campaigns on road safety and education to reduce the risk of road accidents involving senior citizens.

L. Improving the living conditions of the elderly population in rural and mountain/remote areas

The presence of elderly population in rural, hills and mountainous areas is significant.

1. Improving living conditions and infrastructures in remote and mountain areas

1.1 Action in the transport and mobility sectors (see objective C action 2.8)

1.2 Widespread use of new technology in order to reduce the need for movement by facilitating access to the services and public administration.

1.3 Supporting the maintenance of services of importance to the community by means of multi-purpose commercial businesses (see objective I action 1.2)

1.4 Promoting the diffusion of new association/co-operative forms, even small ones, that bring together the users of services and organisers of responses, in particular for nearby services and care services, thus guaranteeing both the rooting to the territory and favouring maximum involvement of both.

1.5 Experimenting innovative forms for the temporary accommodation during the winter period of elderly subjects that live in isolated positions in residential structures, that can be used in other periods of the year for a range of activities (scholastic tourism, social tourism, etc.).

1.6 Diffusing the use of appropriate technology for widening the possibilities of an independent life even in remote or mountain areas, by means of tele-aid and tele-assistance and the experimentation of specific tele-medicine projects.

1.7 Appropriately exploiting existing resources and services in order to increase integration and support to small communities by incrementing social caretaking and safeguarding small villages.

2. Improving the living conditions of the elderly who live in rural areas and use new forms of integration between production and activities of care

2.1 Paying attention in the planning of caregiver support initiatives (training, information, leaflets, etc.) of the specific nature of the rural population;

2.2 Combining the value of the agricultural world and new forms of developing care intervention. Supporting the development of initiatives that, subject to adequate training and verification of residential conditions, allow certain farm structures to accommodate elderly guests (maximum small groups of 2/3 people) and to provide care and assistance, thus guaranteeing at the same time a stay in warm, family environment.

M. Ageing and economic development

Policy-makers involved in economic planning and advancement interventions have become increasingly sensitive to the environmental and social repercussions of policy implementation. The focus on producing policies that take both social cohesion and economic development into account has already been manifested at all levels of planning: European community, national, and regional. Following the Lisbon European Summit in 2000, governments at all levels have committed to defining a strategy by which Europe's economy will become "the most competitive and changing knowledge economy in the world marked by steady, sustainable economic growth, low unemployment and higher quality jobs, and greater social cohesion."

An ageing population places new challenges on production and on the production cycle while it also represents new opportunities that have already been partially developed through actions outlined in the new DOCUP regulating the management of European Structural Funds allocated on a regional basis and are in the process of being defined in the forthcoming 3-year Plan for business and manufacturing. It is equally important to mention law no. 7 passed in 2000 on industrial research, innovation, and technological transfer that may certainly have significant repercussions in this field. Furthermore, when speaking of initiatives concerning new business development and business succession, we must not underestimate the importance, at least in the case of certain traditional handicrafts, of the passing down of handcrafting skills to apprentices.

1. Making the goods and services market able to provide a qualified response to the needs of senior citizens.

1.1 Promoting innovation and quality in the production of services. We believe that regional initiatives and programmes for innovation and quality should give support to the public and private sector areas that promote product and process quality and innovation pathways in compliance with requirements for environmental protection, reliability, safety, etc. It is appropriate to mention those initiatives jointly developed with local governments in support of improving the quality of life and of the realisation of projects for the development of social services using modern information technologies (telemedicine, information services online, public work stations etc.)

1.2 Promoting a new entrepreneurship development programme in the personal services area and interventions for improving the quality of life and for the development of an information society.

1.3 In order to reinforce the adoption of practices and instruments that may be shared by all European countries and to render communication within and among companies more transparent, we propose developing actions to support small and medium enterprises that implement socially responsible activities.

2. Supporting the opportunities for economic development and increasing productivity offered by meeting the needs of an ageing population

2.1 To promote the development of businesses that manufacture products for the disadvantaged or specifically for the elderly: developing incentives for technological innovation, creating a network through which to access know-how and knowledge, making it possible for aggregate demand to "meet" supply, as the poor knowledge of the available products makes it difficult for certain markets to take off;

2.2 Favouring access on the part of businesses to research, developing specific professional training for researchers in universities and in research centres, developing a network of initiatives, activities and facilities for research. Creating quality innovation, even in the sectors of greatest impact on the elderly population (availability of devices to aid the elderly, designing specific tools and devices for use by the elderly, definition of service standards).

Points of reference are the regional programme for innovative action – FESR Health, Life Sciences and technological innovation and PRITT – a Programme for Industrial Research and Technology transfer

The regional programme for innovative action is expanded in reference to the needs of the elderly population: the objective is in fact to promote and stimulate innovative dynamics in the regional system with particular reference to the Health and life science and technology system. The strategy aims to create competition between businesses that produce goods, services, or technologies in order to stimulate greater co-operation between the Research system and the health system, both for offering citizens the best possible services and through the development of projects and services connected with information technology.

Similarly, PRITT, a Programme for Industrial Research and Technology Transfer, in compliance with the provisions of Regional Law n.7, year 2002 and within the framework of the 3-year Plan for business and manufacturing, will start co-ordinated interventions to promote better communication and greater co-operation between the fields of economic and social research and businesses. The life sciences, genomic studies, and biotechnologies are among the chosen priority areas.

N. Guaranteeing access to the use of new technology

Technology for innovation can do a great deal for people and it represents, in fact, an opportunity for autonomy. Learning to use computer, telematic and domotic technology, and living with it inside homes, services and urban territory means for the elderly being able to prolong the times and quality of their autonomy.

However, a direction must be given to this process, starting from the conditions and viewpoint of the user; this requires an overcoming by the elderly of a motivational barrier to what is new and unknown and a facilitated approach to codes in such a way that the latter makeup part of everyday practice.

It is reasonable to think that if a number of elderly people are "allergic" (even due to preconceived positions) and adverse to technology, be it mechanical, electronic or computerised, the attitude of the "computer generation" or rather that of youngsters and those adults who already use the computer will be different.

However, in terms of access to Internet, the elderly, in particular those affected by physical, sensorial or cognitive handicaps are discriminated by a series of technical difficulties that could be partly resolved by suitable planning of websites and their contents. This applies to an even greater extent given the expansion of public services online, a vast part of the population is likely to be excluded. Guaranteeing access and use of what has been known as the "fourth know-how" therefore becomes a decisive point also from a substantial democracy point of view.

1. Facilitating the use of Internet and telematic services by the entire population, thus favouring an active role of elderly subjects in the instrument, interface and language definition process.

1.1 Creation of a programme of computer literacy, in conjunction with local bodies and associations, aimed at all bands of the population currently at the margins of the "fourth know-how" and far from the use of computer technology, especially the elderly.

1.2 Promoting, also through commercial incentives and agreements, a diffusion of computers even in the families that do not own them and/or renewal of the technology and means used.

1.3 Promoting a careful evaluation of constant need of cultural mediation in all new technology diffusion and learning activities, in order to guarantee the utmost efficacy and overcome "rigidity".

1.4 Ensure that the benefits of new technology, especially information and communication technology, are available to all and take into account the needs of elderly people, in particularly elderly women, thus encouraging the design and production of computer technology and audio material and for printing studied bearing in mind the changes in the elderly's physical and visual abilities;

2. Promoting a regional programme for the development and diffusion of new technologies in the information, daily care and medical assistance sector, able to increase the autonomy and freedom of people, independent living, reducing the need for movements and making more efficient and effective medical interventions.

2.1 Promoting the development and diffusion of user-friendly information in order to assist the elderly in such a way that the technological products available are able to respond effectively to everyday life needs;

2.2 Co-ordinate the experience in progress in the regional territory in the telemedicine sector and promoting an integrated programme, in line with the priority aims of the Regional Health Plan, thus involving universities and the productive world, in order to guarantee a homogeneous and diffuse development, thus exceeding inconstancy.

2.3 Promoting a programme of action aimed at using new technology to support caregivers and operators (for example by means of the production of documentation and materials concerning the main assistance problems, thus guaranteeing maximum flexibility of access by means of a dedicated website).

3. Improving accessibility to public body websites giving concrete implementation of the "Europe 2002 Plan of Action", adopted by the European Council during the ministerial Conference of Feira (June 2000), in such a way as to allow elderly and handicapped subjects access to information and make the best possible use of the opportunities offered by the administration online system by applying the WAI (Web Accessibility Initiative) to Internet websites of public administration by 2001".

3.1 Definition of a regional plan for disclosing the guidelines and guaranteeing the usability and accessibility of the websites of all the public bodies of the region and diffusion of good practices of universal planning for Internet, through:

3.1.1. Sensitisation of information managers on the "guidelines" and their objectives:

3.1.2 Encouragement of the use of instruments to make websites available.

3.1.3 Realisation of training actions for those responsible for web pages of public authorities

3.1.4 Bond of funding to "certified" website projects, in relation to WAI.

3.2 Promotion, even by non-institutional subjects (co-operatives, associations, commerce, etc.) of a process of improvement of accessibility of websites, already existing, with an action in particular aimed at the authors of web pages and website creators, so that they may make the multimedia contents accessible following the guidelines.

4. Assure support infrastructures capable of facing, with adequate responses from a technical and functional point of view, the foreseeable growth of telematic necessities. Without a clear strategic choice and hefty investment it will not be possible to support widespread use of the opportunities that new technology offers.

O. Eliminating all forms of abandon, abuse and violence of the elderly

1. Sensitising professional figures and public opinion, through suitable information campaigns on the abuse of the elderly, on the different characteristics, causes and common responsibilities.
2. Definition of guidelines for correct behaviour in medical and medical-social personal services, aimed at eliminating forms of abandon, violence and abuse, in the constant respect of dignity, freedom and personal rights;
3. Promotion of agreements with public and private subjects, with consumers' associations and trade union organisations for the realisation of citizen protection and elderly consumer programmes, starting with clarity, simplicity, comprehensibility and legibility of agreements and contracts that govern relationships between producer and supplier of goods or services and the citizen/consumer;
4. Promotion of protection or support action to victims of abandon, abuse and violence;
5. Introduction of the theme of abuse and violence towards the elderly in personnel training and refresher programmes that perform care and assistance tasks;
6. Promotion of information campaigns in order to educate elderly people on the knowledge of their rights, how to exercise them, also in relation to possible forms of fraud.
7.Promotion of empowerment of elderly population in every context.