

**George A. O. Alleyne**  
**Director, PAHO ·**  
**7 April 1999**

---

**ACTIVE AGING MAKES A DIFFERENCE \*\***  
**(Washington, D.C.)**

---

Mr. Chairman, Ladies and Gentlemen. Let me welcome you to the Pan American Health Organization. It is a pleasure to collaborate with the American Association for World Health in organizing this year's celebration of World Health Day. This is the International Year of Older Persons and the world as a whole is or should be turning attention to the situation of the older adults and their place in society.

I could begin these few remarks in the traditional fashion by citing some of the numerous statistics about the older adults in the Region of the Americas. The growth rate of the older population in the Region is consistently higher than that of the total population. We estimate that by the year 2010 the growth rate of the population 60 years and over, will be 3.5 times that of the total population. The percentage of that section of the population is already higher in Uruguay than in North America, and you no doubt know that concern about the state of the older adult is not confined to the developed countries. Already we note that outside of Europe and North America, the Caribbean is the oldest sub-Region in the world. This traditional approach is the one I have used in addressing you on previous World Health days.

But the topics and themes of World Health Days past conjured up different images and thoughts in me. Themes were essentially problems of health. Last year for example, I could enter fully into a debate about maternal mortality and argue with vigor for the various policies and strategies that should and could be adopted to prevent this preventable scourge. I had before me the image of a mother dying in childbirth and it was not a pleasant one.

But this year the theme of *Active Aging Makes a Difference* conjures up a set of images and evokes thoughts that are quite different. We are not dealing with the older adult as a problem. We are trying to make a reality of the United Nations' theme for 1999 *Toward a Society for all Ages* and conceptualizing a society in which the generations would "invest in one another and share the fruits of that investment guided by the twin principles of reciprocity and equity." On days like this I cannot help but reflect on my own images of the older adult. One of my early memories of the different appreciations of what constitutes old age is of the death of my own grandmother at age 76 and hearing that her mother, my great-grandmother said: "I knew I would never raise my baby -she was always a sickly child." I can also never forget the Latin quotation that said: how "bent old age will come with silent foot" conveying the image of an

---

\* **Pan American Health Organization, Pan American Sanitary Bureau, Regional Office for the Americas of the World Health Organization.**

\*\* **Celebration of World Health Day. PAHO Headquarters Building. 7 April 1999, Washington, D.C.**

insidious debilitating condition that would creep up on us, converting us into crabbed relics of our former selves.

But as I became an adult, the images changed and I now recalled Hemingway's Santiago, the old Cuban fisherman in "The Old Man and the Sea," involved in a noble epic struggle with his brother the big fish. This portrayed the self-reliance and capacity to overcome that can only come to those who have read and inwardly digested the contents of the many pages of life's book. Of course we have recent examples of older movers and shakers like John Glenn, Jacques Cousteau, and Nelson Mandela. They all demonstrate what is meant by active aging making a difference and are examples of the fact that being an older adult is indeed a privileged position as the alternative is of course death.

These images on this day remind me that the main problem faced by our developing countries is primarily one of a change of mindset. They have to awake to the needs of the older adult especially in health. There must be an appreciation that changes, in the form of social organization that accompany so called development, are making the older adult less and less an integral part of the family with denial of the rights and responsibilities that go along with being a respected and contributing elder.

These considerations always make me rethink what we mean by the development of individuals and the fundamental issue of intergenerational equity. We tend to think of the physical and psychosocial development of children as being of prime importance to a society and often forget that this process of development is a lifelong one and perhaps never comes to an end before the final days. There may not be the traditional physical development, but certainly there is room for intellectual, social, and spiritual development throughout the life span.

The issue of intergenerational equity is particularly important for us whose focus is health. There must of course be differences in health status and physical capacity between the young and the old. Osteoporosis and cancer of the prostate are diseases primarily of the older adult. But we must be concerned if society casts generations as opposing groups —us versus them— negating the right of the older population to access to the kind of care that must be given to all humans. But of course this right goes along with the responsibility of the individual, the community and the state to stress healthy lifestyles throughout the lifespan. The older person has the same right as any other to those sanitary and social measures that are necessary for the promotion and protection of health.

The literature in your folders speaks to the myths surrounding aging that must be exploded. These are that:

- Most older people live in developed countries
- older people are all the same
- men and women age the same way
- older people are frail

- older people have nothing to contribute
- older people are an economic burden on society

The debate on these last two is particularly heated at the moment as there is growing acceptance of the notion that the definition of economic activity based exclusively on a market economy expressed in terms of money transactions is totally inappropriate. This approach is inimical to the social solidarity needed for societal progress. We must incorporate all the contributions of all members of society, even though they do not all attract a monetary value. I find it a strange paradox that, in the world of today, a premium is placed on the knowledge possessed by individuals as being one of the major factors of production. Yet scant attention is paid to the knowledge of the older adult that has been acquired in the school of life and is so valuable for the kind of living to which societies aspire.

I would suggest that the theme of this World Health Day —Active Aging Makes a Difference— be construed as a call for all human beings to be active throughout the life cycle. Since we begin to age from birth, aging is not a stage restricted to the conventional older adult. I think that the theme also calls for us as individuals and in our groups that make up society, to view the contributions and needs of the older adult differently.

I have not spoken of the activities of the Pan American Health Organization but our program on aging and health seeks to incorporate many of the principles I have mentioned above. It advocates vigorously that the health and other needs of the older adult be not seen as a problem any more than vaccination of children is a problem. It emphasizes the application of the basic strategies of health promotion to this age group and emphasizes that our principle of health equity is as important both within these groups of persons as well as between this and other age groups.

I call on you to let this day be a genuine celebration of aging —a reminder to all to promote physical, intellectual, and spiritual activity from birth until we cross the bar. It will make a difference to us and the world we live in.

I thank you and greet you well —may this be a memorable day for us all.