THE DUBLIN DECLARATION
ON AGE-FRIENDLY CITIES AND COMMUNITIES IN EUROPE 2013

On the occasion of the ‘EU Summit on Active and Healthy Ageing’, held in Dublin, Ireland on the 13-14 June 2013, under the Irish Presidency of the European Union, we, the mayors and senior political representatives of European cities, municipalities, communities and regions unanimously declare the following:

Values and principles of action

1. We draw on the inspiration of the WHO policy framework on active ageing in which active ageing is defined as ‘the process of optimising opportunities for health, participation and security in order to enhance quality of life as people age, allowing people to realise their potential for physical, social and mental well-being throughout their lives and to participate in society according to their needs, desires and capabilities, while providing them with adequate protection, security and care when they require assistance. (Active Ageing: A Policy Framework, Geneva 2002. WHO.)

2. We fully endorse the principles and actions of the strategic priority area of age-friendly, supportive environments within the WHO Strategy and action plan for healthy ageing in Europe (WHO Strategy and action plan for healthy ageing in Europe, 2012-2020), the UN Principles for Older Persons and their emphasis on independence, dignity, self-fulfilment, participation and care (United Nations Principles for Older Persons, 1991), and the priority directions of the Madrid International Plan of Action on Ageing promoting older persons and development, advancing health and well-being into old age and ensuring enabling and supportive environments (Madrid International Plan of Action on Ageing, 2002)

3. We acknowledge the value and contribution of the WHO work with cities towards age-friendly communities, and WHO guidance to help cities and communities become more supportive of older people by addressing their needs across eight dimensions: the built environment, transport, housing, social participation, respect and social inclusion, civic participation and employment, communication, and community support and health services; and we will adopt these guidelines as they are adapted to fit the European context. (WHO Age-Friendly Cities Guide, 2008)

4. We understand the relevance to our work of the WHO European policy framework supporting actions across government and society for health and well-being, and acknowledge the four priority areas encouraging: a life-cycle approach and empowering people; tackling Europe’s major health challenges; strengthening people-centred systems; and creating resilient communities and supportive environments. (Health 2020: a European policy framework supporting actions across government and society for health and well-being, WHO, 2012)

5. We recognize the synergistic work of the WHO European Healthy Cities Network and the WHO Global Network of Age-Friendly Cities and Communities, and endorse the
principles and core values related to equity, empowerment, partnership, solidarity and sustainable development contained in the Zagreb Declaration for Healthy Cities. *(Zagreb Declaration for Healthy Cities. WHO 2009)*

6. We fully encourage and support the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA), and the partners’ commitments to the goal of increasing by two years the average healthy life years (HLY) of EU citizens by 2020 through improving the health status and quality of life of older people and the efficiency and sustainability of health systems and through fostering the competitiveness of EU industry for innovative age and health related products and services. *(Taking forward the Strategic Implementation Plan of the EIP on AHA, European Commission, 2012)*

7. Within the EIP-AHA, and based on the work of the WHO towards age-friendly, supportive environments, we fully support the D4 Action Plan for Innovations in Age-Friendly Buildings, Cities and Environments, and in particular, the creation of a thematic network of major cities, regions and municipalities committed to deploying innovative approaches to make the environment more age friendly, including the use of ICT solutions. *(D4 Action Plan: Innovations in Age-Friendly Buildings, Cities and Environments. EIP (AHA D4 Action Group, 2012)*

8. We draw great encouragement from the achievements of EY2012, the European Year for Active Ageing and Solidarity between the Generations, which has promoted active ageing in the three areas of employment, participation in society and independent living, empowering people to remain in charge of their own lives for as long as possible.

**Opportunities and Challenges**

9. Building on the Dublin Declaration on Age-Friendly Cities and Communities 2011, and the principles, values and approaches of the above strategies, frameworks, declarations, guidelines and initiatives, we recognise that:

- Where we live, our physical, social and cultural environment, greatly impacts upon how we live and age. The significance of ‘place’ in all our lives cannot be overestimated. The built environment and neighbourhood networks impact on the quality of all of our lives and can make the difference between independence and dependence for all people, but especially for those growing older. Place is inseparable from our sense of identity and this is true for people of all ages, including older people.

- Cities must equip themselves with the necessary means, resources and systems of distribution to promote equal opportunities, well-being and participation of all citizens, including their older citizens. While the trend of urbanisation continues to grow, many older people in Europe live in rural and sometimes remote
These communities must also develop the capacity to promote the health, well-being and participation of their older citizens.

- An age-friendly environment, in accordance with the WHO Strategy and action plan for healthy ageing in Europe, 2012-2020, is one in which service providers, public authorities, community leaders, faith leaders, business people and citizens recognise the great diversity among human beings and the importance of health to them, promote their inclusion and contribution in all areas of community life, respect their decisions and lifestyle choices, and anticipate and respond flexibly to their needs and preferences.

- Planning for environmentally, economically and socially sustainable communities is a crucial concern for all government levels, and such planning needs to take account of the ageing of populations and the role older people can play as a key resource in meeting their specific needs. Mechanisms to ensure the active voice of older people in planning and decision-making are vital to achieving solutions that are age-friendly.

- Older people are a bounty to European society, and it is important to recognise this value and to build on the strengths of the bonds of solidarity between the generations in Europe where people of all ages have a positive view of one another and where there is consensus between generations on the way forward.

- Actions to make the European Union age-friendly can reinforce many dimensions of the Europe 2012 - 2020 strategy towards smart, sustainable and inclusive growth. There is significant opportunity to build on the EU’s innovation and competitive strengths in ICT for inclusion and e-health to accelerate the deployment of new processes, products and services that enhance the quality of life and health of older people in European cities and communities, while improving the effectiveness and sustainability of our health and social care systems.

- Within Europe, building on the work of the WHO on age-friendly policies, as well as building on and bringing together ongoing innovative work in public transport, ICT, and smart cities, that this declaration can underpin a future cooperation agreement forming an EU Covenant on Demographic Change.

**Commitments**

10. Therefore, the undersigning cities and communities make the following commitments that shall be known as the ‘Dublin Declaration on Age-Friendly Cities and Communities in Europe 2013’, and they commit in the first place to:

i. **Promote** the ‘Dublin Declaration on Age-Friendly Cities and Communities in Europe 2013’ (Dublin Declaration 2013) in appropriate national and international forums, fostering the maximum adherence possible to its values, principles and premises, in terms of plans, programmes and resources, in order to implement
the commitments in this Declaration within a reasonable period of time.

ii. **Collaborate** with all relevant regional and local stakeholders to support the full application of the pledges in the Dublin Declaration on Age-Friendly Cities and Communities in Europe 2013, including cooperation with the WHO European Regional Office and its Network of Cities committed to developing age-friendly environments as part of the WHO Global Network of Age-Friendly Cities and Communities. This will involve commencing a multi-year cycle of continual assessment and improvement to make their environments more age-friendly.

iii. **Communicate** through local and regional channels and networks between the various cities and communities to stimulate and support advances in the promotion of equal rights and opportunities for older citizens and to share learning about advances in policies and practices which improve their lives.

**Supporting Pledge**

11. The undersigning cities and communities also pledge, where it is within their area of responsibility and economically feasible, to further the following specific actions, and to incorporate them into key planning instruments to strengthen long term sustainability:

- Promote among the general public **awareness of older people**, their rights, needs, and potentials, and highlight the positive social, economic and cultural contribution they make.

- Ensure that the views and opinions of older people are valued and listened to and that structures and **processes of citizen-centred engagement** are developed to ensure that older people have an adequate involvement in decision making and are actively involved in the design and creation of innovation and change.

- Adopt measures to develop **urban spaces and public places** that are inclusive, sharable and desirable to all, including older people, and ensure that publicly used buildings promote the dignity, health and well-being of users of all ages, and are fit for purpose to meet the changing needs of an ageing society.

- Promote and support the development of neighbourhoods and communities for all ages that are diverse, safe, inclusive and sustainable, and that include **housing** for older people that is of the highest quality. Particular attention should be given to the needs of older people in assisted living, residential care and nursing homes where their dignity and autonomy is at greater risk.

- Work to establish **public transport systems** that are available and affordable to all, including older people, and are ‘seamless’ within and across the various modes of transport that exist. The transport systems should also promote and facilitate personal transport use, such as cycling and driving by older people. As
these become more difficult, personal alternatives such as affordable taxis and car-pooling, which interconnect with the public system, should be made available.

- Promote the participation of all, including older people, in the social and cultural life of their community by making available a diverse range of events and activities that are accessible, affordable and tailored to be inclusive of them and promote their integration into the community. This should include the promotion of intergenerational activities.

- Promote and support the development of employment and volunteering opportunities for all, including older people, and recognise their positive contribution, and include the provision of lifelong learning opportunities in order to empower older people and promote their autonomy.

- Ensure that a comprehensive and integrated range of affordable, easily accessible, age-friendly and high quality community support and health services is available to all, including older people, to include health promotion and prevention programmes, community-based support services, primary care, secondary acute hospital, rehabilitation services, specialist tertiary, long-term residential and compassionate end of life care.

Dublin, 13 June 2013

SIGNATURES OF CITY MAYORS, COMMUNITIES AND REGIONAL AND LOCAL AUTHORITIES: