## PAMPLONA DECLARATION ON THE RIGHTS OF THE ELDERLY

## OUR SENIORS: A HERITAGE ASSET

On the occasion of the celebration of its 25th anniversary in 2016, The Navarre Society of Geriatrics and Gerontology (SNGG) is aware of the increasing life expectancy of people and the challenges, opportunities and questions that the aging phenomenon raises, and wishes to convey to the public a Declaration on the Rights of the Elderly, who constitute a first-level heritage asset. The document, based on official statements by the United Nations and the World Health Organization in findings of national and international Geriatrics and Gerontology congresses and the professional experience of the members of the SNGG, intended to be a call to stimulate knowledge, public debate, awareness promotion and the adoption of measures to contribute to improve the situation of people in their aging process.

## STATEMENT OF RIGHTS OF THE ELDERLY:

. Right to a healthy existence and quality of life, understood within a holistic approach capable of integrating cognitive, emotional, social and participatory elements, in which the identity and dignity of the elderly is always safeguarded.

. Right to actively participate in the public, social and political life, both individually and as members of Senior Citizens' clubs and organizations through 'active aging' which intends to prevent and alleviate situations of vulnerability and frailty, disability and dependence.

. Right to access public facilities and activities that promote a mutually enriching socialization between generations.

. Right to freely choose one's lifestyle, arrange one's free time and enjoy life with their loved ones, by guaranteeing a stay in their usual environment whenever possible.

. Right to specialized geriatric care (hospital and in primary care), which is multidisciplinary, comprehensive, high-quality and focused on people rather than just on diseases, provided by trained professionals both in the Geriatrics and Gerontology fields.

. Right of the professionals who care for older people to be properly trained in geriatrics and gerontology skills in all curricula, and that the number of these professionals reflects the real needs of our society.

. Right to become active agents in volunteering schemes in which they can contribute their valuable personal and professional experience and, at the same time, pass on their knowledge, principles and values.

. Right to full social integration in private and public spaces, refractory to ageist prejudices, causing exclusion and discrimination at work environments as well as social, cultural and health settings.

. Right to decide about the conditions regarding type, place and people they want to be taken care of when their physical and cognitive abilities are limited, and, likewise, to receive palliative care when required.

. Right to draft the document of Living Wills, and be able to alleviate any concerns and ensure an adequate end of life for the protagonists, their families and relatives, accompanied by professionals who will maintain their dignity in times of vulnerability or cognitive impairment.

. Right of aging and old age to be portrayed with a positive image on social constructions, spread by the different media as harmful by default.

. The right of all the care and services received to fully comply with bioethical principles of non-maleficence, justice, beneficence and autonomy, as well as with strict respect for their dignity and privacy.

.Right to economic decisions that facilitate access to dependence care services to any person needing them, particularly those in the poverty threshold.

. Right to a network of dependency-care resources and services in rural areas in order to avoid older people being left out of their environment by bringing services closer to them.

. Right to implement strategies aimed at increasing the quality of care centers and care services for dependent people (home help, daycare centers, hospitals and residences).

. Right to the adoption of multidisciplinary cooperation measures – at architectural, technological, social and medical levels- in order to promote aging in place by integrating different services: communities, neighborhood and local agents via one-stop counters.

. Right to spread knowledge on neurodegenerative diseases (such as dementia) and other chronic conditions among the population in order to promote the improvement of people, as well as their family and social life.

. Right to have public administrations and the society itself promote actions and programs aimed at preventing situations of exclusion, isolation and loneliness.

Pamplona, October 1, 2016