

## **Symposia:**

### **S1: Crossing Oceans and Connecting People to Promote the Human Rights of Older People**

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The International Psychogeriatric Association (IPA) has been steadfast in its commitment towards advancing human rights of older persons since the release of its 2011 White Paper which expanded the focus of the Capacity Task Force to prioritize human rights. Through partnerships with the World Psychiatric Association Section Old Age Psychiatry (WPA-SOAP), Capacity Australia, International Longevity Centre Canada (ILC Canada), Canadian Coalition Against Ageism (CCAA), and Rights of Older Persons Australia (ROPA), IPA members have emerged as global leaders in advocating for integration of human rights-based mental health care for older persons. Advocacy efforts have spanned grassroots and global strategies. At the grassroots level, IPA has championed the seamless integration of human rights principles into clinical practice, demonstrating a commitment to action. Globally, IPA has engaged in advocacy for a United Nations (UN) convention on the rights of older persons, notably through active participation in UN Open Ended Working Group on Aging (OEWGA). This symposium showcases a diverse array of papers exemplifying these dual approaches. Papers on grassroots strategies include: (i) "Walking the Talk: 20 Ways to Embed Human Rights in Everyday Clinical Practice" (Carmelle Peisah) provide practical guidance for clinicians; (ii) "The UN Decade's and our own efforts to address ageism" (Liat Ayalon); (iii) Actualizing human rights of older persons with severe mental illness (Anne Wand). Papers highlighting global strategies include: (i) "Our role and impact with the OEWGA/OHCHR /WHO" (Kiran Rabheru) illustrating how our advocacy has urged healthcare organizations and multilateral bodies such as the UNOEWGA, World Health Organization (WHO), and Office of UN High Commissioner for Human Rights (OHCHR) to prioritize the human rights agenda for older persons; (ii) Is a new treaty critical for policy making? A lawyer's perspective (Andrew Byrnes); (iii) "The Global Alliance for Rights Based Care and Support (GARBCS)" (Carlos de Mendonça Lima) underscoring the transformative potential of collaborative efforts in fostering a rights-based approach to care. Established to address challenges faced by older individuals worldwide, GARBCS promotes optimal mental health, combats ageism, and fosters collaboration among member organizations, aligning with UN Decade of Healthy Ageing and WHO's focus areas. Founding Members include AAGP, CHeBA, ILC-Canada, IPA, WDP, WFMH, WFP, WPA, and WONCA, organisations led by many of our IPA members.

#### **Objectives:**

1. To understand the challenges faced by older persons worldwide;
2. To engage clinicians in becoming human rights champions;
3. To understand current global efforts at advocacy for the human rights of older persons.

#### **Walking the Talk: 20 Ways to Embed Human Rights in Everyday Clinical Practice- Carmelle Peisah**

**Summary:** This presentation will illustrate translational significance and practical implementation of the United Nations Convention on the Rights of Persons with Disabilities (CRPD), the primary international human rights framework. Articles from the Convention most relevant to the practice of old age psychiatry include: (i) Article 12: Equal recognition before the Law including the right to equal legal capacity, the support in exercising that legal capacity, and the right to be safeguarded against undue influence and abuse; (ii) Article 14: Liberty and security of the person; (iii) Article 16: Freedom from exploitation, violence and abuse; Article 19: Living independently and

being included in the community; (iv) Article 22: Respect for privacy; (v) Article 23: Respect for home and the family, and relationships on an equal basis with others; and (vi) Article 25: Equitable access to health. Clinicians will be provided with practical ways to implement each of these relevant Articles in their everyday practice.

### **Is a new treaty on the human rights of older persons critical for effective policy making? A lawyer's perspective- Andrew Byrnes**

#### **Objectives:**

1. To inform participants of the latest developments relating to a new treaty on the human rights of older persons
2. To highlight the potential positive contribution of such a new treaty in terms of policymaking
3. To explore through two case studies how the absence of such a treaty has skewed policymaking in relation to older persons and their rights

**Summary:** The development of a new United Nations treaty on the human rights of older persons or in older age has been under Discussion at the United Nations and elsewhere for more than a decade. One of the major advantages of a thematic treaty on the rights of older persons is said to be its potential contribution as a clear, comprehensive and coherent framework for policy making at the national level. Advocates argue that other thematic UN treaties – on discrimination against women, children and the rights of persons with disabilities have had this effect, as have regional treaties including those that address the rights of older persons in the Inter-American and African human rights systems. This presentation will explore the potential policy contributions that a new treaty could make by considering recent examples from Australia in which the lack of a comprehensive and coherent international framework on the human rights of older persons led to flawed analysis and policy making. The examples are the Royal Commission into Aged Care Quality and Safety and the drafting of the proposed new “rights-based” Aged Care Act (2023-2024), and the proposal for a national Human Rights Act put forward by the Australian Human Rights Commission (2023) and the Australian Parliamentary Joint Committee on Human Rights (2024). The presentation will argue that, had policymakers had such a framework available to guide their deliberations, a better, more rights-complaint outcome would have resulted.

### **Actualising human rights of older persons with severe mental illness A/Prof Anne Wand<sup>1,2,3</sup>**

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People living with severe mental illness experience greater morbidity and premature mortality compared to their peers who do not have mental illness. As articulated by the Convention of the Rights of Persons with Disabilities, persons living with mental illness have an equal right to access high quality health care including towards the end of life, and the right to determine what kind of care they want. These rights sit alongside the rights to live independently and be included in the community, and respect for home and the family. Too often though, these rights are not actualised.

Geriatric psychiatry has an important role in advocacy for older people living with severe mental illness to enjoy equitable rights to autonomy in decision making in areas of accommodation, consent to healthcare, and expressing wishes and preferences towards the end of life. Where capacity is lacking, clinicians may assist to maximise the older person's participation in decision making, including through supported decision making. This presentation will use examples of recent work conducted in public older persons mental health services in Sydney Australia to illustrate advocacy for older people living with severe mental illness to enjoy equal rights to autonomy

of decision making and access to quality physical healthcare, including care towards the end of life (advance care planning), and supported accommodation placement (pathways to community living initiative).

**Conclusions:** Often the only health professional engaging with an older person with severe mental illness, mental health clinicians have an opportunity and, arguably, an obligation to advocate for their consumers to actualise their human rights.

## **The UN Decade's and our own efforts to address ageism- Liat Ayalon**

Ageism is defined as stereotypes, prejudices, and discrimination towards people because of their age. It can be directed towards people of any age and be either positive or negative. However, its negative impact, especially on older persons is well documented. Given its substantial impact, it is one of four pillars identified by the UN Decade as essential to tackle to achieve a world for all ages. The UN Global Report on Ageism proposed three evidence-based strategies to reduce ageism. In this presentation, I will illustrate one such strategy, which consists of a 90-minute educational workshop. The workshop was delivered to 318 Israeli adolescents (aged 11 to 15, 73.9% females) to increase their familiarity with the concept, reduce their negative ageist stereotypes, and increase their inclination to become social activists via social media. We found an improved familiarity with the concept 'ageism', while adolescents drew upon concepts such as discrimination and racism to define ageism. Following the intervention, a diverse range of age-related stereotypes emerged, signaling a shift toward more positive perceptions, with notable growth in positive age stereotypes, especially among females. Finally, about two-thirds of created memes (online visual and textual social messages) targeted ageism against older persons, 18.98% promoted an age-inclusive world, and 17.15% addressed ageism towards children and young persons. Implications for reducing ageism in adolescence and for measuring social change are discussed.

## **Our role and impact with the Open-Ended Working Group on Aging (OEWGA), the Office of the High Commissioner for Human Rights (OHCHR), and the World Health Organization (WHO)- Kiran Rabheru**

### **1. Highlight the Collaborative Efforts of Key International Organizations:**

Illustrate the critical role of the International Psychogeriatric Association (IPA), World Psychiatric Association (WPA), and other organizations in working with UN bodies to advance the human rights of older people.

### **2. Emphasize the Importance of Increased Engagement and Advocacy:**

Discuss why deeper engagement from mental health professionals and advocacy groups is necessary to influence global policies and initiatives that protect and promote the rights of older persons.

### **3. Demonstrate the Impact of International Cooperation:**

Provide examples of how collaboration with the UN Open-Ended Working Group on Aging, the Office of the High Commissioner for Human Rights, and the World Health Organization has led to tangible improvements in the lives of older persons, particularly those with mental health conditions.

**Summary:** In an increasingly interconnected world, the role of international organizations such as the International Psychogeriatric Association (IPA) and the World Psychiatric Association (WPA) has become vital in promoting the human rights of older people. This talk will explore how these organizations collaborate with key UN bodies, including the Open-Ended Working Group on Aging, the Office of the High Commissioner for Human Rights, and the World Health Organization, to address the unique challenges faced by older persons, especially those who live with mental health conditions. By engaging more deeply with these global efforts, we can enhance

scientific advocacy, develop comprehensive policies, and implement effective interventions that safeguard the rights and well-being of older persons. This presentation will underscore the necessity of cross-sector engagement and international cooperation in fostering an inclusive world where the human rights of older people are fully actualized and protected.

**The Global Alliance for Rights Based Care and Support (GARBCS)- Carlos Augusto de Mendonça Lima, Gabriel Ivbijaro, Helen Lavretsky, Kiran Rabheru.**

Our world is rapidly aging, with scientific and medical advancements extending lifespans without necessarily enhancing the quality of those additional years. Older persons form a non-homogeneous group with varying levels of intrinsic capacity and functional abilities. Yet, universally, individuals in their later years aspire to preserve dignity, maintain control and independence, foster social inclusion, uphold justice and equality, receive respect for their identity, and pursue good health, security, engagement, and independence throughout their lives. They are entitled to timeless human rights and should receive rights-based care and support just like anyone else in society. Unfortunately, ageism, as defined by the World Health Organization, is pervasive and has a significant negative impact on the lives of older individuals. This discrimination, based on age, affects how people think, feel, and act towards older people. A human rights-based approach to health specifically aims at realizing the right to health and other health-related human rights. These rights are translated into clinical practice as social determinants of health. Their implementation is mainly dependent of fair distribution of money, power and resources at global, national and local levels. Planning health care for older persons should be guided by human rights standards and principles. The final aim of such an approach could be empowering rights-holders to effectively claim their health rights. Elimination of all forms of stigma and discrimination is at the core of a Human-Rights based care for older adults.

A meeting was held during the WPA World Congress in Vienna, Austria, 2023. The attendees unanimously acknowledged that there is a significant amount of work yet to be undertaken in championing the well-being of older individuals. This includes advocating for their dignity, human rights, and health promotion. There is a shared commitment to fostering optimal brain health, resilience, and overall well-being among older adults, addressing their diverse needs encompassing mental, emotional, cognitive, physical, and spiritual dimensions. It was agreed that there is a need to bring together a stakeholder alliance that is coalesced around strengthening the human rights and dignity of older persons. The concept of a Global Alliance for Human-Rights Based Care and Support for Older Persons was born with goals:

1. Strengthen collaboration among member organizations for impactful messages, optimizing mental health, generating knowledge, and driving person-centered, evidence-based change.
2. Enhance visibility and impact across education, research, media, policy, advocating for global awareness, resources, and policies addressing mental health, prioritizing rights, combating ageism, and integrating care, education, and research.
3. Propose transformative changes during the UN Decade of Healthy Aging, aligned with WHO's focus areas, combating ageism, fostering age-friendly communities, ensuring person-centered integrated healthcare, and expanding access to long-term care.
4. Identify strategic opportunities for advancing Sustainable Development Goals (SDGs) across diverse age demographics, addressing how ageism hinders global Objectives.
5. Ensure a unified communication strategy for care and support for older persons, emphasizing clear terminology within global initiatives.