

# **Update ILC-France 2003-2004**

**Joint Meeting ILC  
October 16-19 2004  
Kyoto**

**Professeur Françoise Forette**  
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## I-PEOPLE

The ILC France Annual Ordinary Meeting and Board of Directors's Meeting took place on April 26, 2004. Both the Operating Board and Board of Directors were renewed and 14 new members were admitted. All ILC France 2003 programs were outlined, accepted and unanimously voted on.

### 1- New Operating Board, elected since April 26, 2004

Françoise Forette (*Professor, ILC-France President*),  
 Pierre Joly, (*ILC-France Vice-President, President of the Foundation for Medical Research*),  
 Bernard Pejouan (*ILC France Treasurer, President of the Société Française des Docteurs en Pharmacie*),  
 Bernard Forette (*ILC-France Secretary General*)  
 Jean-Luc Lévêque \* (*ILC-France Deputy-Treasurer - Director L'Oréal*),

### 2- New Board of Directors, elected since April 26, 2004

The majority of those on the Board of Directors are founding members, and were re-elected (\*). They were chosen according to their interest in the objectives of the ILC. They belong to various domains:

#### -Institutions :

Robert Butler \* (*ILC-US President*)  
 Shiego Morioka \* (*ILC-Japan, President*)  
 Genevieve Laroque \* (*President of the Fondation Nationale de Gerontologie*)  
 Maurice Bonnet \* (*President of Eurolink Age, Vice-president of CNRPA*)  
 Jacques Robert \* (*Member of the Conseil Constitutionnel, President Rotary Club de Paris*)  
 Marie-Claude Tesson-Millet \* (*Founder and Past President of the "Quotidien du Médecin" and President of the "Equilibres et Populations" Association*)

#### -University :

Pr Etienne Baulieu \*,  
 Pr François Boller \*,  
 Pr Marc Gentilini \*,  
 Pr Claude Jasmin \*,  
 Pr Robert Moulias \*,  
 Pr Philippe Thibault \*.

#### -Media :

Liliane Laplaine \* (*journalist*),  
 Anne Jeanblanc (*Le Point*),  
 Alain Marié \* (*Quotidien du Médecin*)

#### -Industry :

Jean-Paul Treguer \* (*President Senior Agency*),  
 Jean-Noël Treilles \* (*President Lipha Santé*).  
 Bernard Chalchat.\*  
 Jean-François Henry \* (*Euthémis*)

### 3- Permanent ILC France members

Recently hired and appointed part-time (2004):

Dr. Marie-Anne Brieu (*Scientific Director*)  
 Dr. Jean-Claude Salord (*Administration and Finance Director*)  
 Marie-Claude Martel (*Assistant*)  
 Jacqueline Gaussens (*General Delegate*)  
 Véronique Faucounau (*Webmaster*)

### 4- ILC France members

Some of the following are founding members:

Michel Albert (*Member of the "Banque de France" Council*)  
 Jean-Michel Rossignol (*Director of UNAF*)  
 Yasuhiro Yokota  
 Jean-Paul Le Divenah (*State Secretary for the Elderly*)  
 Pr. Claude Griscelli  
 Pr. Jacques Milliez  
 Pr. Pierre Malangeau  
 Antoine Seillière (*President of the French Employers' Union*),  
 Bernard Mesuré (*President of the Pharmaceutical Industry Union*),  
 René Basdevant (*President Sandoz -France*),  
 Nicolas Cadre (*Director Parke-Davis-France*),  
 Yves Champey (*Director Rhone-Poulenc-Rorer Foundation*),  
 Jean Espie (*Director MSD-France*),  
 Louis Orega (*Director of the Information Centre of Bovine Industry*),  
 Jacques Servier (*Président Servier Group*),  
 Alain Sussfeld (*Director UGC*),  
 Paul Cadre (*President of Esai-France*),  
 Pierre Fabre (*President of Pierre Fabre Corporation*),  
 Marc Lambert (*Director of Zuritel Insurance Company*),  
 Eric Cornut (*Director General, Novartis France*),  
 Anne Barrère (*TFI*),  
 Hélène Cardin (*France-Inter*),  
 Françoise Dost (*Radio France*),  
 Robert Rochefort (*Credoc*)

#### Other members :

Anne Marie Cailloux (*Moët Hennessy*),  
 Jérôme Cornu (*Federation of Insurance Companies*),  
 Gérard de la Martinière et André Renaudin (*French Insurance Federation*),  
 Claude Fath,  
 Murielle Haïm (*MSD*),  
 Béatrice Houchard Portevin (*Journalist*),  
 Jacqueline Mervailly (*Ipsen*),  
 Martine Perez (*Le Figaro*),

Christine Pioli,  
 Hugette Rischard (*Bazar International Luxembourg*),  
 Brigitte Stehle,  
 Daniel Vasmant (*Aventis*)

**We are pleased to welcome 14 new members in 2004:**

**Frank Weber (*Servier*), David Causse (*French hospital federation*), Yves Christen (*Fondation IPSEN*), Hervé de Charrette (*Deputy of Maine et Loire*), Hélène Frey (*EISAI*), Alain Grange Cabanne (*President of the Federation of Perfume Industries*), Charles Lambert (*President of the IPSEN Foundation*), Martine Laval (*Consulting*), Monique Pelletier (*former ministry delegate for family affairs*), Michèle Saint Marc (*Bank of France*) and Lucia Septien (*GlaxoSmithKline*).**

## **II- ILC FRANCE ACHIEVEMENTS in 2003-2004**

### **1- An original study: The French and their retirement (annexe 1)**

This qualitative survey was undertaken by CREDOC, in the context of public debates on retirement, just before the parliamentary vote on a new law for retirement : “Loi Fillon”.

The main goals of the study were:

- to understand how a French person regards his/her own retirement
- to evaluate his/her knowledge of current economic gaps and problems
- to better anticipate his/her beliefs and reactions when faced with various different scenarios
- to analyze in depth his/her fears, and acceptance limitations with regard to possible solutions

#### **- February 20<sup>th</sup>, 2003 -:**

The results of this study were presented to over 40 journalists at a press conference held in “The Press Club”.

The main results were as follows:

- Unexpected consensus on the shortcomings of the system, linked to the increase of longevity that our country will have to face in the near future
- Misconceptions due to lack of information
- Some points to avoid or circumvent
- Specific data related to 40-60 years olds will need to be taken into account.

### **2- Colloquium on the World Cities Project**

The Study « World Cities Project » was coordinated by Victor G.Rodwin and Michael Gusmano from New York University and ILC US, in collaboration with the International Longevity Centres of Paris, Tokyo, London and New York.

The main goal of the study was to compare ageing and related long term care in each of the four megapoles.

**- June 13<sup>th</sup>, 2003 -:**

A one day meeting, open to journalists was held at « LaDefense » and was attended by more than 100 people in collaboration with DREES, the study's partner.

### **3- 10th Parliamentary Session on Longevity and Society and Quality of Life**

**-October 23<sup>rd</sup>, 2003- :**

This regular one-day meeting is the equivalent of the US Senate Hearings. The topic for 2003 focused on retirement and longevity :

**“Retirement pensions: how to solve the burning difficulties”**

This was an excellent opportunity to present the ILC study on “The French and their retirement”. The meeting's program was elaborated by Professeur Forette, as Scientific Director. The meeting's chairman was Deputy Denis Jacquat, Vice-President of the commission of cultural, family and social affairs, president of the working group on the elderly of the Assemblée Nationale and Vice-Président of a Parliament Commission in charge of cultural, familial and social affairs. The target audience consisted of those from the fields of geriatrics, institutions and politics.

### **4- Participation in the program « Grandir-Vieillir » (Growing up and ageing) –Annex 2-**

ILC France continues to sponsor, alongside others, a successful literature award entitled the “Chronos Award”, for children's books that deal with the subject of aging. This award, organized in partnership with the National Foundation of Gerontology, is mainly implemented by Jacqueline Gaussens.

In 2004, 27000 children participated on the jury.

Media coverage each year is extensive over a range of mediums, from written press to radio to television.

## **III – “ALLIANCE FOR HEALTH AND THE FUTURE».**

This international project was established in 2003 thanks to the initiative of three ILC directors: Professors Robert Butler (USA), Françoise Forette (FR) and Sally Greengross (UK). In partnership with Edelman and with the support of Pfizer, they became founders and co-chairs of the Alliance for Health and the Future.

### **1- The Alliance organisation in France**

The Alliance secretary is based in Paris within the ILC France organisation. There is no specific juridic or administrative entity. The magnitude of the project and the complexity of coordination between the three ILC branches and Edelman, due to various actors locations and organisations, determined several important decisions made by ILC France. Particularly:

- The implementation of a convention with the French Foundation of Gerontology to rent offices space, daily working facilities, part time assistants...
- The hiring of a scientific coordinator (Dr. Marie-Anne Brieu) and an administrative and financial director (Dr. J-C Salord ). Both on a part-time basis.

The magnitude of the project required the establishment of a special Task Force run by Françoise Forette, Jacqueline Gaussens, Didier Halimi, Brigitte Stelhe, Jean-Claude Salord and Marie-Anne Brieu. This task –force met on several occasions and decided to convene an Extraordinary Board Meeting on November 10<sup>th</sup>, 2003 which approved the implementation of the new organisation-

In conclusion:

*Board members (who either remained present, or were excused, after expressing their own opinions) unanimously accepted ILC France's participation in the Alliance project. The board emphasized their interest in the project, due to mutual scientific goals and financial means attributed. They retained the option to periodically reassess their commitment to the project, based on the projects evolution.*

**-August 20<sup>th</sup> – 21<sup>st</sup>, 2003 :** Meeting in Paris establishing the foundations of the Alliance Project.

**Participants:**

ILC	Pr Robert Butler, Pr Françoise Forette, Baroness Sally
Greengross	
Pfizer	Paula Luff, Michael Hodin
Edelman	Philippe Cherel, Carolyn Paul, Nancy Turett

**-August 27<sup>th</sup>, 2003 :** Coordination meeting between ILC France and Edelman France. (F. Forette/J.Gaussens/M-A Brieu/P.Chérel/Aurélie Sabatier)  
Several conference calls.

## **2- The goals of the Alliance –annex 4 -**

The Alliance project is founded on the global fame and credibility of its 3 co-chairs. Its missions are the same as those of the ILC. The difference between the two lies in the magnitude of their research fields: life long health and wealth, and an enlarged european focus give new scope to the ILC organisation.

## **3-Meetings and achievements**

**-November 18<sup>th</sup>-19<sup>th</sup>, 2003 : - annex 5-**

**The Inaugural Seminar of the Alliance in Paris**

« Placing Cognitive Health on Europe's Social and Economic Agenda ».

The full-day seminar was hosted by Alliance co-chairs Robert Butler, MD, Françoise Forette, MD, and Baroness Greengross. It featured scholarly presentations by Howard Fillit, MD, of the Institute for the Study of Aging; Howard Oxley and Mark Keese of the Organisation for Economic Co-operation and Development; Javier Yanguas of the

Fundacion Matia; and Ian Catchpole, PhD, of the Ipsos research firm. Also participating in the discussion were distinguished guests and delegates representing 11 different countries, along with several members of the media.

**-April 19th-21st, 2004 :**

The 12th annual Public Health forum was held in **Brighton (UK)** where the Alliance was supporting a Seminar entitled:

***-The Alliance for Health & the Future: A Call to Action***

Speeches made by Sally Grenngross and Suzanne Wait (ILC UK) focused on

***Age Discrimination in Public Health***

The speech of Francoise Forette (ILC FR) was noticeably focusing on Health disparities:

***Public Health: Influence on Health, Longevity and Wealth***

The extraordinary increase in longevity must be considered an immense privilege of western nations. Aging is usually characterized by a functional decline at the molecular, cellular, structural and system levels (Sehl 2001) and by an increase in age-related diseases and disabilities. This process is heterogeneous on both an individual and population level. Heterogeneity has a profound influence on the mortality dynamics of humans and other species (Carnes 2001). Two types of factors, genetic and environmental, may be involved in this heterogeneity.

The variations on a genetic level are extensive; 30% of genes coding for enzymes and other important proteins are polymorphic. (Lewing 1996). In addition, aging is characterized by an accumulation of genetic mutations within the somatic cells over the course of a lifetime contributing to the large variation in age at death ( Finch.2000).

The environmental factors encompass the medical progress particularly in terms of prevention and access to care and the socio-economic levels responsible for internal and inter country differences. For some scientists, (Finch 1990, Carnes et Olshansky 1993, Perls 2000), the role played by genetic factors is considerable and this will limit the increase in longevity. For others (Manton 1991, Rowe et Khan 1998) the environmental factors which are modifiable and the prevention approaches are more important to promote healthy aging and longevity.

The role which socio-economic levels play with regard to differences in mean life expectancy in different countries and/or continents is overwhelming. Factors such as poverty, poor sanitation, under nutrition and epidemics (such as HIV-AIDS) may explain these differences.

The female advantage with regard to life expectancy remains nearly universal and has become stronger in the twentieth century. A precise explanation for this gender difference is not clear because of the interplay of biological and social factors (see Kinsella 2002 for a review).

In developed countries medical progress, prevention and healthy lifestyles are determinants of healthy aging and preservation of function. Indeed, most age-related diseases may be related to modifiable risk factors, meaning they could be preventable. The prevention of strokes, cardiac diseases and dementia by the management of hypertension is a prime example.

Michael Gusmano (ILC USA) introduced the Guidelines :

***Guidelines for Health and the Future – A Call to Action***

#### **-May 12<sup>th</sup>-13<sup>th</sup>, 2004 -OCDE Forum- Paris -Annex 6-**

The Alliance participated at the OECD Forum held in Paris on : “ **Age and nations**” with speeches made by Baroness Sally GreenGross and Professor Françoise Forette

#### **-June 4th, 2004 – “Franco-American Scientific Alliance for Health and the Future” Paris - Salons de France-Amérique-**

This successful Dinner-Debate with Scientists and the Media was organized jointly with Pierre Lellouche, Deputy of Paris, in the context of Celebrating Liberation Week. Not only did D-Day pave the way for the liberation of France, it was also the beginning of an exciting era in scientific collaboration between France and the United States.

The Alliance for Health and the Future grasped the opportunity to organize the event with Ambassador Jean-René Bernard in the “Salons France-Amérique”.

At this debate French and American officials and scientists took a long term view on what is at stake in this Alliance for young scientists and physicians, who will have to face unprecedented challenges in public health worldwide.

More than 100 Scientists, professors, industry leaders, political decision-makers and key players from civil society accepted the challenge to attend the meeting.

##### **Speakers were internationally renowned in their field**

**Professor Etienne Baulieu**, President of the Academy of Science

**Professor Christian Bréchet**, CEO of Inserm

**Ambassador Constance A. Morella**, Ambassador of the United States to OECD

**Professor Victor Rodwin**, Professor of Health Economy, N-Y University, ILCUS

**Professor Georges Charpak**, Nobel Prize for Physics

**Professor Roger Guillemin**, Nobel Prize for Medicine

Professor Françoise Forette chaired the debate

## **4-Research program**

The research program represents the joint efforts of ILC-USA, ILC-France and ILC-UK. It is implemented by Michael Gusmano (ILC USA), Suzanne Wait (ILC UK) and Marie-Anne Brieu (ILC FR).

### **Indicators project**

The aim of this project is to develop a set of indicators and benchmarks for active life expectancy and productive engagement which can be used to compare European countries against one another over time.

ILC-France and ILC-USA will work collaboratively to produce reports for each of the 10 countries that represent the Alliance’s focus with regard to active aging measures. This will be partly based on a report to be produced by the IRDES in February 2005. This report will include:

- A literature review of indicators of healthy and productive engagement in Europe
- A description and quality assessment of available indicators in selected countries



- A preliminary selection of the most significant sources of data.

A final report presenting the vision of the Alliance with regard to “active ageing” will be available by December 31st, 2005.

### **Age discrimination : promoting age equality**

ILC-UK is leading a review focused on the status, progress, and outlook for national efforts to address age discrimination in 8 EU countries. This work is being conducted by a multidisciplinary group of leading academic experts, and covers health and social care, transport and the built environment, financial services, the labour market, public and civic participation and education and leisure. The final report will comprise a synthesis of findings across these areas and will strive to offer policy recommendations to promote age equality within the expanded European Union. Input from the Pfizer Healthy Advocacy Ageing Forum (PAAAF) member organisations is being collected and will be included in the project findings.

Final reports from this project will be produced by December 31<sup>st</sup> 2004.

### **Productive engagement**

ILC-France has established a partnership with the OECD (Organisation for Economic Cooperation and Development) to look at the relationship between ageing and employment. The project leader at the OECD is Dr Mark Keese. Countries included in the analysis are: France, UK, Germany, Italy, Spain, Finland, Sweden and the Czech Republic.

Final findings from the OECD study are due in February 2005, and will be presented at an Alliance event (possibly Davos). The findings will focus on:

- Demographic challenges of dependency ratios, both actual and prospective
- The situation of older workers in the market place: factors limiting and favouring employability
- Changing opinions: dispelling myths and preconceived ideas
- Potential benefits to the individual and community which may result from productive engagement of the older generation.

Dr Keese will also present initial findings from the OECD report “Ageing and Employment” at a one-day conference on promoting age equality in employment (“L’emploi après 50 ans. Pour l’égalité au travail à tous les âges”). This conference will be held in Paris on November 30<sup>th</sup>, 2004 and is organized by ILC-France/Alliance in collaboration with AGEplatform,

ILC-France will build on the above efforts and extend this project to other OECD countries over the course of 2005.

The OECD project findings, as well as the work on Age Discrimination in the Labour Markets (described above) will be combined with the results of Dr. Muller and Dr. Knapp’s analyses and integrated into a final report on “Occupations in an Ageing Society”. This report will be produced by December 31, 2005.

### **Health, longevity and Wealth**

ILC-USA has been conducting a review of the literature available on the relationship between health, longevity and wealth. This report will serve as preparation for a one-

day meeting on “Health, Wealth and Longevity” scheduled for the fall of 2005 at UNESCO in Paris.

ILC-USA and ILC-France are developing the programme jointly. Proceedings from this meeting will be published.

### **Guidelines for Health and the future**

The Alliance, under the leadership of Dr. Robert N. Butler, has conducted a review and critique of guidelines that are relevant to the issue of healthy aging in order to develop guidelines for the public on issues that have been frequently overlooked.

During 2004, the Alliance produced four guidelines on: balance, cognitive health, hearing, and vision. With strong support from Edelman, these guidelines are currently being ‘vetted’ for their content and usability with target audiences in different user groups in Europe.

### **.5-Publications and the Internet**

The Alliance produce regularly a monthly Newsletter :”Window on Health and the future”. This publication outlines major news and issues (Public, NGO, Industry) from the US and EU concerning the elderly.

In 2004, two magazines will be published, in June and in November, at 5000 ex. It will represent the Alliance to the general public and will develop a forum containing opinions and information on current problems linked to ageing.

The website: [www.healthandfutur.org](http://www.healthandfutur.org) is regularly updated.

## **6- Other on-going projects**

**A multidisciplinary Advisory Board** is currently being setting up. Four members to date have accepted the invitation to participate in this Alliance Board:

Pr Bassand, former president of the European Society of Cardiology

Pr Kouchner, Public Health and former Health Minister

Pr Winblatt, Geriatrics

Mrs Asgeirsdottir, in charge of the Health program at OECD.

They will offer advice and recommendations on future activity choices for the Alliance

In order create a broader framework and platform to ensure Alliance activities are sustainable in the long term, **active fundraising activities** for new partnerships are on-going.

Numerous meetings between the **co-chairs and officials of industry, politics, and institutions**, have also been set up to provide them with information on our missions and activities.

## **Appendix**

### **Annex 1**

## **French middle-aged and elderly population facing changes in Retirement Systems. Qualitative study in collaboration with the CREDOC 2002/2003**

Its legitimacy in the area of gerontology and its independence enabled ILC-France, in technical partnership with CREDOC, to carry out an in-depth qualitative survey. Based on a sample of persons aged 40 to 60, the survey was designed to meet the following three objectives:

- Evaluate what French people know about the current problem affecting pensions.
- Understand their basic perceptions and reactions.
- Find acceptable compromises.

The qualitative analysis showed:

### **1° An unexpected consensus,**

Firstly: Everybody interviewed expressed a positive opinion

Secondly: the basics of the contributory pension system and the difficulties of financing it are known to most people

The contributory pension system is unanimously appreciated and regarded as fair and supportive of the disadvantaged. But the majority are also aware that it will have to be adapted to the demographic realities and are in favour of moving towards a mixed system which would encourage self-funding pensions.

The majority would accept an increase in the contribution period to 42.5 years in the scenario proposed, as it would be necessary to save the contributory pension scheme and also because the extension of life after retirement is recognised.

A personalised retirement age received unanimous support.

Increasing the contributions of working people (by 15% in the scenario proposed) created a sense of guilt in those close to retirement age because their children will have to bear the full burden of the demographic problem.

### **2° Certain gaps in the knowledge of French people**

The majority of French people do not think about their retirement and do not prepare for it.

The majority of French people think that the problem is not an immediate one and will not concern them

A frequently made point was that it is the state's responsibility and it is not working hard enough to find solutions to the problem. Those on the lowest salaries and the least informed think that it is up to the state to solve the problem and that they need not contribute.

### **3° Points on which they are unbending and which should probably be avoided or circumvented.**

The imposition of a later retirement age would be regarded as a social step backward. Three quarters of those interviewed reacted negatively to a reduction in pensions which was considered as being unjust.

The reactions regarding contributing to Pension Funds were mostly negative.

Working part-time after retirement at the age of 55, on the premise that young people will be employed, was accepted if and only if the scheme implied no reduction in salary.

### **4° Specific points which will have to be taken into account.**

Retirement is regarded as free time, the end of obligations and a time for leisure. The generation interviewed took an individualistic point of view. Intergenerational relations must be based on reciprocal independence. Assistance must be only occasional. Reciprocally, those interviewed refuse to be dependent on their children.

In conclusion, the opinions expressed by French people when interviewed in depth, differ greatly from those expressed recently by some trade union leaders:

The French are aware that they must come to the aid of the contributory pension scheme to which they are profoundly attached. They know that specific measures are required to maintain the system, measures which they accuse previous governments of failing to take. So, there is certainly no majority in favour of demanding 37.5 years of contributions for all. Nevertheless, they are not ready to accept all of the measures proposed.

The solution accepted by the majority is the prolongation of the contribution period along with a personalised retirement age. They are in favour of the freedom to retire earlier and receive a lower pension, to work longer or to combine retirement with work to increase one's pension. The French think that there should be a combination of compulsory and voluntary contributions but they reject the term Pension Fund. Any unilateral measure to reduce pensions or impose a later retirement age is rejected. Freedom, behaving responsibly for the sake of coming generations and negotiations are the obvious bases for discussion. The message must be gotten across that the government, the pensioners and the future pensioners must work out a way between them to preserve the right to happiness to which the French people legitimately aspire.

## **Annex 2**

The purpose of this award is to make children aware of the process of ageing and to reinforce relationships between generations. The children, themselves, constitute the award jury.

In 1996, 220 schoolchildren were involved.

In 1997, 2800 children from French high-schools and foreign 'Lycees Français' in Brussels, Bonn, Barcelona, Beijing, Jerusalem and Rabat, read 10 books suitable for their age group.

In 1998, 8000 children were jury members from France and 15 foreign 'Lycées Français'. Among them, Tokyo, New-York and Los Angeles.

In 1999, 13,000 children participated from 121 cities in 13 countries.

In 2000, 18,000 children participated from 190 cities in 12 countries.

In 2001: 23,000 children participated, from 210 cities in 11 countries.

In 2004, 27,000 children participated in the award, from 320 cities in 10 countries.

The selected books are read by the schoolchildren under the friendly supervision of teachers. There are also intergenerational parties or meetings in retirement homes or nursing homes where some elderly people read the books to the nursery school children and discuss the topics with them. Conversely the 10 to 12 years old children read the books to invalid elderly who have vision problems for mutual discussions.

Besides the important purpose of making children aware of the longevity revolution as a fantastic challenge for their future, this project has the potential to give the children an interest in reading and fight illiteracy. In spite of the fact that schooling is

compulsory until 18 years of age, 20% of children do not read properly at 12 years of age and the percentage is the same at age 20. The Chronos project is now a part of the vast National Campaign against illiteracy.

The project is run under the protection of 5 ministries, Education, Culture, Health, Youth and Sports, and Foreign Affairs.

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### **Annex 3**

#### **Information Meetings on Longevity and Society, Quality of Life**

Five meetings were sponsored by Denis Jacquat, member of the "Assemblée Nationale" (french House of Representatives), Vice-President of the commission of cultural, family and social affairs and president of the working group for the elderly of the Assemblée Nationale. These meetings were held on May 23rd 1996, June 21st 1997, October 21st 1998, November 28th 1999 and November 30th 2000.

The meetings were placed under the scientific direction of Françoise Forette, president of ILC-France. Some meeting topics were as follows:

"Which prevention methods will improve aging ?" held on November 14<sup>th</sup> 2001.

"Is the APA (Financial help to maintain autonomy) convenient?" October 30<sup>th</sup> 2002.

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### **Annex 4**

#### **Alliance Vision and Missions**

*"The Alliance for Health & the Future envisions a society that thrives because all people, regardless of their age, enjoy healthy, fulfilling lives, at home, at work and in their communities.*

*Tapping unprecedented achievements in health and longevity, the Alliance will encourage greater societal awareness of issues related to healthy ageing. To promote longer and fuller lives, the Alliance will foster healthy lifestyles, quality healthcare, and economic security. To impart the necessity of sharing responsibility, the Alliance will build relationships among individuals, communities, organisations and governments. The Alliance will advance knowledge and provide training, skills and systems to help every person, and society as a whole, realise a healthy future.*

*Housed within the International Longevity Centre, the Alliance for Health & the Future is a "think-and-do tank" established to identify, inform and raise awareness of behaviours and systems that can lead to greater well-being and productivity throughout life.*

*Chaired by Dr Robert Butler, Professor Françoise Forette and Baroness Sally Greengross, the Alliance conducts scientific research and investigations, hosts events for scholars and thought leaders and carries out extensive education and outreach to improve individual, community, health-professional and government knowledge about productive ageing."*

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### **Annex 5**

**Alliance for Health & the Future  
Inaugural Seminar  
Paris, France  
19 November 2003**

(From the executive Summary prepared by: Edelman/BioScience New York, NY)

“A very important organization is being born today. It’s a unique organization designed to help all of us, whether we are health experts, people who work in policy, people who work in academia, members of the media, or the general public. Across the board, it will help us to better understand the implications of the enormous triumph we are all experiencing in the rise in longevity, the opportunity to live to a great age, and the opportunity to ensure that it is a life worth living.”

With these words, Baroness Sally Greengross introduced the Alliance for Health & the Future and opened its inaugural event, an international seminar on “Placing Cognitive Health on Europe’s Social and Economic Agenda.” The full-day seminar took place in Paris, France on November 19<sup>th</sup>, 2003 and was hosted by Alliance co-chairs Robert Butler, MD, Françoise Forette, MD, and Baroness Greengross. It featured scholarly presentations by Howard Fillit, MD, of the Institute for the Study of Aging; Howard Oxley and Mark Keese of the Organisation for Economic Co-operation and Development; Javier Yanguas of the Fundacion Matia; and Ian Catchpole, PhD, of the Ipsos research firm. Also participating in the discussion were distinguished guests and delegates representing 11 different countries, along with several members of the media. (A complete list of attendees and their affiliations is appended at the end of this report.)

Described as a “think and do tank” by its co-chairs, the Alliance for Health & the Future is committed to conducting important social research, issuing guidelines and publications, and leading an ongoing educational effort aimed at influencing policy decisions related to healthy and productive ageing in Europe and the world. The Alliance is supported by an unrestricted educational grant from Pfizer and housed in the International Longevity Centre, which has offices in London, Paris, and New York.

Delegates who attended the Paris seminar remarked favorably on the consistently high level of presentation and discussion and, in particular, on the unique, interdisciplinary approach to the medical, economic, and social challenges of cognitive health in an ageing Europe. Specific discussions and reports focused on:

**-Cognitive vitality may be maintained throughout life.**

**-Social, economic, and political issues of an ageing Europe**

**-Young adult survey**

**-Additional concerns on the following topics were discussed:**

**Baby boomers**

**Age discrimination**

**Retraining older people**

**Family structures and geographies**

**City planning and infrastructure –**

**Marked differences in social priorities may emerge between Western and Eastern European countries.**

## **SPEAKERS**

**Ian G. Catchpole, BSc, PhD, MIBiol**

Director of Ipsos Health UK Limited, London, UK

**Howard Fillit, MD**

Executive Director, Institute for the Study of Aging, Inc., New York, New York

**Mark Keese**

Principal Administrator, Labour Market Policies for Older Workers

OECD, Paris, France

**Howard Oxley**

Senior Economist, Structure Economic Unit, OECD

**Javier Yanguas**

Director de Investigación y Desarrollo

Fundación Matia, San Sebastian, Spain

## **Annex 6**

### **OECD “Health of Nations” Forum, May 12th-13th, (from the Conference Report written by Nina Gardner)**

The two European co-chairs of the Alliance for Health & the Future, Baroness Sally Greengross and Pr. Francoise Forette, participated in the OECD “Health of Nations” Forum in Paris, May 12th. This was perhaps the most high-level international conference on health policy in Europe this year, as it gathered key decision makers involved in government, business and health care to discuss the challenges we currently face in the health sector. This was the fifth annual OECD Forum, and the first one dedicated to health policy. The topic was chosen to coincide with the conclusion of an important three-year study conducted by the OECD entitled “Toward High Performance Health Systems,” and to take advantage of the presence of a great number of OECD health ministers, gathered for their own ministerial conference as well as for a first-ever joint meeting with OECD finance ministers to tackle the issues of health expenditure. More than 1,000 people attended – the majority government representatives, business leaders, health practitioners and the media.

The Forum served as the Alliance’s ‘formal’ debut on the world scene, following its important introduction to the international public health community at the WFPHA meeting. Corresponding media events also provided welcome publicity for the Alliance, such as radio interview for Françoise Forette.

### **Secretary General’s dinner**

One particularly unique touch to this conference was that the OECD Secretary General invited all the panellists to his house for dinner the evening prior to the conference. Pr. Forette and Baroness Greengross both attended, and therefore had the opportunity to meet most of their fellow panellists during a relaxed social function. They also were able to talk about the Alliance with prominent members of the OECD, journalists, CEOs, and trade union leaders. .

## **Ageing and Health**

Attended by about 500 people, the “Ageing and Health” panel was held the afternoon of Monday, May 12th in the main conference centre room. Pr. Francoise Forette, representing the Alliance, was joined by Pfizer CEO Hank McKinnell, the Health Minister of Mexico, Julio Frenk, and Director General for Health of New Zealand, Karen Poutasi. Philippe Maniere, former journalist and head of the Institut Montaigne, a prestigious French think tank, moderated the session. Pr. Forette highlighted the demographic trends in Europe and drew attention to the fact that longevity should be viewed as both an individual and collective opportunity for a population in good health. To maximize this opportunity, active prevention and health intervention is required throughout life. She also emphasized the strong correlation between the level of per capita revenue and life expectancy, i.e., not just that wealth contributes to good health, but that good health also contributes to greater wealth.

Dr. McKinnell, who was extremely eloquent, noted that innovation and research comes at great cost, but, if these advances improve healthcare outcomes, this can dramatically reduce total healthcare outlays. He emphasized the importance of prevention by making lifestyle changes and introducing early detection. He too drew the link between a people’s health and a country’s wealth. As he spoke immediately following Pr. Forette, the “good health creates wealth” leitmotif was doubly resonant.

## **Equity and Access to Healthcare**

The “Equity and Access to Healthcare” panel also was well-attended by about 500 people. Moderated by the dynamic and committed Mexican Minister of Health Julio Frenk, Baroness Greengross was joined on the panel by GlaxoSmithKline CEO Jean-Pierre Garnier, the UK Minister of Health John Hutton, and Secretary General of the European Multiple Sclerosis Platform Christoph Thalheim. This panel debated provocative equity issues with regard to not only differences of quality and access to health care between developed and less developed countries, but also largely unrecognized inequalities within developed countries themselves – much of which is linked to socio-economic factors.

## **Presentation of OECD Publication “Toward High Performance Health Systems”**

Both Pr. Forette and Baroness Greengross attended the presentation of the OECD publication “Toward High Performance Health Systems.” The presentation was made by Deputy Secretary General of the OECD and Alliance Advisory Council member, Berglind Asgeirsdottir. Other presenters included Deputy Head of the Directorate for Employment, Labor and Social Affairs (DELSA) Martine Durand and Head of the Health Policy Unit Elizabeth Docteur, all influential leaders with whom we have developed close relationships during the last few months. Martin Durand is the key decision maker within the directorate who will determine whether the Alliance can subcontract a study on productive engagement.

## **Sponsor Opportunity and Alliance Visibility**

Of special note, the Alliance for Health & the Future was the first NGO to sponsor an OECD Forum. All the top echelons of the OECD took notice of this, particularly the Secretary



General, the Public Affairs division, and the Directorate on Employment, Labor and Social Affairs, with whom we have been working for the last four months. Our intent has been to position the Alliance as a key organization to provide scientific support and disseminate information about issues of joint interest, such as productive engagement, long-term care financing, preventive health care (including the Guidelines), and health indicators. As such, we remain confident that showing support for the Forum was a good strategic action for the Alliance in 2004. As always, care is and should continue to be given to ensure the Alliance remains the lead authority on these topics of mutual interest.

We were therefore able to approach the CEO EMEA of Microsoft, the new President and CEO of GE Healthcare, the Chief Innovation Officer at Coca Cola, and the Head of Public Affairs at Bristol Myers Squibb. L'Oreal also was well-represented along with pharma companies GlaxoSmithKline, Merck and Pfizer (as earlier noted).

### **Liaison with Pfizer**

The Forum also provided an excellent opportunity for Dr. McKinnell of Pfizer, our main sponsor, to see Pr. Forette in action. As this may well have been his first time hearing Pr. Forette speak, it was important for him to see what an excellent orator she is. Also important, Dr. McKinnell met Baroness Greengross after his panel, and both Alliance co-chairs were able to hear Dr. McKinnell at his best. Most importantly, Dr. McKinnell saw first hand the potential for the Alliance and that after barely a year of existence, it is already participating in such a high-profile forum.

### **Media**

There was a radio interview with Françoise Forette and Martine Durand, deputy division chief of Employment, Labor and Social Affairs section of the OECD on Tuesday, May 11<sup>th</sup> with RFI, a French radio channel broadcast in French speaking areas. The program was live and lasted for 20 minutes (from 11.10 to 11.30). We have asked for a copy of the transcript.

### **Conclusions**

The OECD meeting was a strategically important event for positioning the Alliance with high-profile policy, health and government leaders, as well as corporate executives who may be potential sponsors. Another added value of the Alliance's successful participation at OECD is that it helped establish a required track record, which will be useful as we embark on proposing a panel at the 2005 World Economic Forum in Davos. Similarly, the list of attendees will be extremely useful base to work from for the conference the Alliance plans to hold at UNESCO in the Fall of 2005. Finally, the Alliance now can capitalize on the good will generated by its sponsorship and quality of the co-chairs' remarks to further engage with the OECD, which is considered one of the key think tanks and influencers in European and US healthcare policy.