
REVIEWED by **Shyh Poh Teo**

The increase in population ageing requires strategic planning to meet the needs of older people. In the past, policy discussions dwell on medical and social support services, long-term care and the financial commitment needed for sustainability. As the majority of older people are active and independent, a more inclusive approach, such as development of age-friendly cities and communities (AFCC), is appropriate to achieve wider reaching benefits through increased participation and quality of life. This book is timely, focusing on these concepts and the “paradigm shift,” which has become an age-friendly movement globally.

This book brings together international expertise to discuss the complex decisions involved in planning AFCCs. An interdisciplinary team, including architecture, urban design, sociology, and social and environmental gerontology, is necessary to take into account considerations

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such as demographic change and the spectrum of older people’s needs in communities. The book is relevant to those studying about or engaged in urban development or services for older people.

The intuitive layout is divided into three sections: the first section covers the general principles and considerations required to develop AFCCs, followed by international case studies to illustrate the challenges and opportunities to develop age-friendly policies. The final section describes more advanced and complex application of these concepts, ranging from how to involve architects and artists into age-friendly practices to the additional challenges for older people with visual loss that should be considered in AFCCs. The book ends with a manifesto for change, which serves as a call to action for countries to strive towards age-friendliness.

I enjoyed the narrative and historical perspective of how ageing strategies originated from humble beginnings, later evolving to AFCCs to account for the diversity of ageing experiences. As a novice in social gerontology, I appreciated the gradual introduction to the wide-ranging principles relevant to AFCCs. This included the insightful descriptions of how communities and cities evolve and change due to migration, economic inequalities within cities and displacement of traditional sources of support and how austerity measures affect services. The dynamic interaction of different aspects of the environment, in the immediate vicinity and homes to higher levels of society such as neighbourhoods and cities, and how it shapes an individual’s ageing experience are described eloquently. As these factors affect political, economic and other forces beyond a person’s community, they exemplify the need not only to focus at the individual level but also to integrate among multiple levels of social organizations.

Case studies were appropriately chosen from countries that have introduced or initiated the process towards AFCCs, which highlight the range of issues described in the first section. The German experience was quite fascinating, with the backdrop of the fall of the Berlin wall and the rapid urban transformation that followed this historical event. A balanced discussion was provided regarding the conflict between economic interests and the needs of an ageing but less affluent population. The Brussels story describes the Active Caring Community project
for frail older people in disadvantaged neighbourhoods. Older people were involved to create a community that supports ageing in place by providing meeting opportunities and enabling residents to know each other. This demonstrated how opportunities can be derived from challenging circumstances, once there is insight into the social dimensions of the environment.

The authors from Hong Kong shared lessons from Asia-Pacific countries, such as Japan, Korea, Thailand, Singapore and China. Within Australia, age-friendly approaches were compared between Sydney, Melbourne and Canberra within state and national contexts. The diversity of experiences was useful to contrast the different backgrounds of each location. Despite this, there is an overall sense that there are similar demographic changes, common problems and solutions to move forward the agenda of AFCCs.

One of the main strengths of this book is the strong research base from which the recommendations are made and how these can be integrated into policy. The research findings from Ireland in implementing AFCCs took the views of local, national and international stakeholders in developing their programme. It was eye-opening to observe that although these groups were involved in the same initiative, their perspectives differed in terms of motivation, actions influencing development of the AFCCs and what issues need to be addressed for the future. Although there is paucity of data on evaluation, this was consistently reiterated as a recommendation for many of the age-friendly initiatives.

As a clinician reading this book, I believe these insights on AFCCs provide richness to my future social considerations. For example, older people may choose to remain in suboptimal housing, due to the proximity of familiar spaces, resources and support services. The awareness to consider broader economic, political and cultural dimensions was heightened, in order to avoid the risk of neglecting factors that are integral to a person's life experience and community life. This book also provided a new perspective on the use of the international guide for developing age-friendly cities (World Health Organization 2007). Instead of following a rigid checklist, emphasis should be placed on the process of involving older people and taking into account the considerations that makes their environment suitable for their needs.
Overall, this book offered much insight into the development of age-friendly initiatives in the community, focusing not just on the environment but also on the broader perspective of involving older people in the process of designing, production and research of their living spaces.

Reference