



## WHO GLOBAL NETWORK OF AGE-FRIENDLY CITIES©

### City contact details

QUESTIONS	YOUR ANSWERS
Name of Municipality / City and Country:	
Name of Mayor:	
Full name, role and title of contact person:	
E-mail of contact person:	
Web site address for the municipality:	
Telephone and fax numbers:	

### To join the Network cities are required to commit to the following four steps:

FOUR STEPS	
<p>1. <i>Establishment of mechanisms to involve older people in all stages of the Age-friendly Cities (AFC) process.</i></p> <p>Cities are also encouraged to build partnerships with government and civil society (including non-governmental organizations and academic institutions).</p>	
<p>2. <i>Development of a baseline assessment of the age-friendliness of the city. This assessment can be flexible to take into account the diversity of cities, however at a minimum, it needs to consider each of the eight domains identified in the WHO Age-friendly Cities Guide.</i></p>	<ol style="list-style-type: none"> <li>1. outdoor spaces and buildings,</li> <li>2. transportation,</li> <li>3. housing,</li> <li>4. social participation,</li> <li>5. respect and social inclusion,</li> <li>6. civic participation and employment,</li> <li>7. communication and information, and</li> <li>8. community support and health services.</li> </ol>
<p>3. <i>Development of a 3 year city-wide action plan based on the findings of this assessment.</i></p>	<p>It is anticipated that the action plan will link to other municipal instruments to ensure that age-friendliness becomes a core responsibility for all municipal departments.</p>
<p>4. <i>Identification of indicators to monitor progress against this plan.</i></p>	



In addition, a letter from the Mayor and municipal administration indicating formal commitment of the municipality to undertake and/or complete the above noted four steps within the next two years is required.

<b>This letter is attached OR.</b>	Yes ____
<b>This letter will be sent by (date)</b>	

If any of the above steps have already been initiated and/or completed, please provide any relevant documents along with this form.

**If possible, also please provide the following additional information:**

ADDITIONAL INFORMATION	YOUR ANSWERS
Percentage of older persons (age 65 and above) residing in the city:	
Any funding available to assist with this project:	
Other related projects currently being planned or implemented in the city that specifically target older people:	
Local institutions and partners that are or may be involved in this project:	

**Please complete and return this form to:**

**THE WHO AGE-FRIENDLY CITIES SECRETARIAT**  
**Mrs Charlotte Wristberg**  
**World Health Organization**  
**Department of Ageing and Life Course (ALC)**  
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