Your Self Care Guide to Healthy Ageing
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**Africa Region Working Group:** Namara Arthur Araali, Executive Director, Health Nest Uganda; Dr Brian Byaruhanga, Medical Officer, ROTOM, Uganda; Felleng Lethola, Help Lesotho, and chairperson Lesotho Age Network; Rose Gahire, vice chairperson, Nsingdazia, Rwanda; Serkalem Girma, Co-Founder, Roots and Wings Elixir NGO; Ethiopia; Lydia Makena, Health Program Project Officer, Help Age Kenya.

**Technical expert reviewers:** Kenneth Mugayehwenkyi, Founder and Executive Director, ROTOM, Uganda; Priscilla Gavi, Country Director, HelpAge Zimbabwe; Tewodros Belachew, Country Director, HelpAge International, Ethiopia. Roseline Kihumba, Portfolio Development and Quality Manager, Healthy Ageing Portfolio, Kenya, HelpAge International Nairobi.

**Asia Region Working Group:** Sanju Thapa Magar, CEO, Ageing Nepal; Syed Moeez, Country Director, HelpAge Pakistan; Chaminda De Silva, Head of Programmes, HelpAge Sri Lanka; Vira Tum, Executive Director, HelpAge Cambodia; Poppy Walton, Public Health Coordinator, HelpAge, Myanmar; Mary Dunbar, SUNI-SEA Project Manager, Help Age International.

**Technical expert reviewers:** Dr Ratu Rana, Mission Head Healthcare, HelpAge India; Dr Khin Hnin Swe, SUNI SEA Project Manager, HelpAge Myanmar; Nong Thi Thu Trang, SUNI-SEA Project Coordinator, HelpAge Vietnam; Emily Beridico, Executive Director, Coalition of Service of the Elderly (COSE) Philippines; Caitlin Littleton, Healthy Ageing Portfolio Lead, HelpAge International; Clarisse Aquino, Program Manager, Coalition of Service of the Elderly (COSE), Philippines; Prakash Tyagi, Executive Director, GraminVikas Viggan Samiti (GRAVIS), India.

**Latin America and Caribbean Region Working Group:** María Fernanda Sigliano, Social Services Manager, Asociación Mutual de Protección Familiar, AMPF, Argentina.

**Technical expert reviewers:** Dr Javier Manrique, Humanitarian and Health Programme Coordinator, Convite AC, Argentina; Marcela Bustamante, Regional Representative, Latin America and Caribbean Region, HelpAge International; Adriana Ruffa, President of the SIDOM Foundation, Argentina; Luis Descalzi Jara, President of CASPAM, Peru; Magda Guzmán Pinelo, Social Support Center for Older Adults, CASPAM, Peru; Viviana García Ubillo, Executive Director of Centro Gerópolis Universidad de Valparaíso, Chile; Jaime Ayra, General Coordinator, the Horizontes Foundation, Bolivia;
**European Region Working Group**: Zinzi Pardoel, SUNI-SEA researcher, University Medical Centre Groningen, Netherlands.

**Technical expert reviewers**: Dr Jaap Koot, SUNI -SEA Project Coordinator, Department of Health Sciences, UMCG, Netherlands; Johanna Vervoort, SUNI-SEA Project Manager and PhD student, Department of Health Sciences, UMCG, Netherlands; Mary Muturi, SUNI SEA research assistant, Department of Health Sciences, UMCG, Netherlands; Dominika Plancikova, Researcher, Department of Public Health, Faculty of Health Care and Social Work, Trnava University, Slovakia, Diana Hiscock, Humanitarian Inclusion Advisor, Help Age International; Marion Staunton, Humanitarian Protection Advisor, HelpAge International; Annie Wright, Inclusion Advisor, HelpAge International; Jemma Stovell, Voice Advisor, Help Age International; Georgina Veitch, Gender Policy Advisor, Help Age International; Camilla Williamson, Healthy Ageing Advisor, Healthy Ageing Portfolio, HelpAge International. Christiana Fashola, Covid Vaccine Advisor, Health Ageing Portfolio, Help Age International; Tatiana Sorocan, Country Director, HelpAge International, Moldova.

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Introduction

Welcome to your self-care guide to healthy ageing. We hope this guide will encourage and support you to achieve healthy ageing.

Important underlying messages throughout this guide are:

1) It is never too early or too late to take action to achieve healthy ageing.
2) No matter what our health status or personal situation we can take small doable actions to improve our health and wellbeing.
3) And no matter who we are, regardless of our social or economic status, place of residence, age, gender, ethnicity or health status we have the equal right to achieve the highest attainable standard of physical and mental health without discrimination, and to have equitable access to the facilities, products, information and services that we need for our health and wellbeing. We also have the right to meaningfully participate and have our voices heard in decisions about health and care services in our local area and beyond.

What is universal health coverage?

Universal health coverage (UHC) means that everyone, everywhere is able to access the quality health and care services they need without suffering financial hardship.

The health and care services provided to us should include the full continuum of community-based care from health promotion and disease prevention to early diagnosis and treatment, rehabilitation, specialist, long-term care and palliative care.

**Services should be person-centred** which means that each person is treated respectfully, without discrimination as an individual human being. It involves health care providers seeking out and understanding what is important to us and our family and support people and involving us in decision making about our health care plan.

This guide focuses on self-care and healthy lifestyle choices to support us to achieve healthy ageing. Taking action to achieve healthy ageing also includes our participation in holding our government accountable for its commitments and to be engaged in decision making about health and care services in our community and beyond. We need concerted action across all areas and levels of our government and society to achieve healthy ageing and universal health coverage for all.
This guide is for everyone interested in achieving healthy ageing. We hope it will be useful for people living in many different contexts. It does not contain everything you might want to know, and some topics may not be relevant to your situation. Hopefully you will find topics and tips that motivate and support you on your healthy ageing journey. Use the content page to identify topics of interest. Return to the guide whenever you need to.

In the next section you will find an overview of healthy ageing. What does healthy ageing means to you?
Section 1: What is healthy ageing?

A common myth about healthy ageing

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy ageing is about being free of disease and disability.</td>
<td>Being free of disease or disability is not a requirement for healthy ageing, everybody can experience healthy ageing. Even if we have one or more health conditions, when they are well-managed, they have little influence on our overall wellbeing.</td>
</tr>
</tbody>
</table>

Ageing is a lifelong process that starts even before we are born. It is never too early or late to take action to achieve healthy ageing. We can help preserve our physical and mental health and mobility as we age by self-care practices and adopting and maintaining healthy lifestyle choices.

Self-care is about making and maintaining healthy lifestyle choices that will help us achieve healthy ageing. Self-care means taking good care of ourselves so that we can be healthy and feel well, can do our job, care for others, and continue to do all the things we want to accomplish. Self-care also helps us maintain our independence and dignity.

Why is self-care an important part of healthy ageing?

As older people we are not passive onlookers for our health and care. We do not exist to be 'done to' or 'looked after'. We want and need to be active participants in our own health and care, to be able to voice our needs, share our priorities and contribute our experience and ideas, to improve the health and care services for ourselves and our peers in our community and beyond.

No matter what our current health status or living situation there are always things we can do to improve our health and wellbeing. We can also greatly benefit from joining with others to take actions to achieve healthy ageing. If we are willing to reach out to others, we can better manage our self-care. When we join with our peers and other people working for healthy ageing, we can share our concerns and ideas and learn from each other. Working together with others is motivating and increases our influence, magnifies our voice and provides us with courage and inspiration.
Did you know that making small doable lifestyle changes can help us live longer and better?

What is healthy ageing?

Healthy ageing is about all of us, everywhere being able to enjoy wellbeing, dignity, and our right to health, to live independently and continue to do the things that matter the most to us, and to participate at all ages.

As shown in this diagram healthy ageing is influenced by our physical and mental abilities and the environment in which we live, and how these areas of our life interact.
In the next section you will find tips to support you to achieve healthy ageing. As you read think about what small doable actions you would like to take to improve your health and wellbeing.

**What does self-care involve?**

- Making and maintaining healthy lifestyle choices
- Adhering to reliable health provider guidance for managing our health and taking medicines correctly
- Learning how to manage mild symptoms and knowing when to seek health and care services.
- Self-monitoring our health status and taking action when needed.
- Actively participating in decision making about health and care services and monitoring progress for achieving person centered care.
- Being actively involved in decisions to help you cope with chronic diseases and disability.
Section 2: What can we do to achieve healthy ageing?

Many factors influence healthy ageing as shown in the healthy ageing diagram in the last section. Some factors are beyond our control such as genetic factors but there are many others such as lifestyle choices that we have more control over. Maintaining/ adopting and sustaining healthy lifestyle makes an important contribution towards our health and wellbeing.

Tip: While planning to make healthy lifestyle choices, we do not need to make big changes all at once. Focus on introducing a few small doable actions that fit easily into your daily routine. This will make healthier practices easier to sustain over the long term. E.g., do 5 minutes of physical exercises in the morning while you are waiting for the kettle to boil. Find other opportunities during the day to make small changes to your daily routine that will benefit your health and well-being.

What actions can we take to achieve a healthy lifestyle?

1. Stay active, take regular physical activity.
2. Eat a healthy diet and stay hydrated.
3. Get a good night’s sleep.
4. Reduce and manage stress.
5. Maintain an active brain.
6. Quit smoking.
7. Avoid harmful use of alcohol.
8. Receive an annual health check and be fully vaccinated.

See the chart below to assess your healthy lifestyle practices. Consider the questions and think about what you will do to improve your health and wellbeing. Remember each small healthy choice you make is progress towards achieving healthy ageing.
### Use this checklist to reflect on your lifestyle choices

<table>
<thead>
<tr>
<th>#</th>
<th>Healthy behaviour</th>
<th>Page</th>
<th>Question</th>
<th>Response</th>
<th>What action will I take?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Stay active</td>
<td>14</td>
<td>Do I take at least 30–60 minutes of light or moderate exercise a day, or 15–30 minutes of more vigorous exercise?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Eat well</td>
<td>18</td>
<td>Do I eat a portion of protein foods at each meal?</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Do I eat 5 or more servings of vegetables or fruit every day?</td>
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<td></td>
<td></td>
<td></td>
<td>Do I restrict my daily intake of salt to not more than one teaspoon?</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Do I restrict my intake of sugar to no more than the equivalent of 6 teaspoons of sugar per day?</td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Do I drink at 6–8 glasses of water/other liquids per day?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Do I restrict my daily intake of oil to no more than 6 teaspoons of healthy oil in my food?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Sleep well</td>
<td>28</td>
<td>Do I have a good sleep routine?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Reduce and manage stress</td>
<td>29</td>
<td>Do I stay in touch with family and friends?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Do I make time to do things that I enjoy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>#</td>
<td>Healthy behaviour</td>
<td>Page</td>
<td>Question</td>
<td>Response</td>
<td>What action will I take?</td>
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</tr>
<tr>
<td>5</td>
<td>Maintain your brain</td>
<td>32</td>
<td>Do I continue to try to learn new things? Do I participate in community activities and decisions about issues that matter to me? Do I participate in social group activities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Quit smoking</td>
<td>35</td>
<td>Do I smoke? Do I chew tobacco or betel nut?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Avoid harmful use of alcohol</td>
<td>37</td>
<td>Do I drink too much alcohol?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Medications</td>
<td>39</td>
<td>Do I take my medication correctly?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Health check/vaccinations</td>
<td>43</td>
<td>Did I have an annual health check? Am I up to date on my vaccines?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In the next section you will find tips about healthy lifestyle practices. As you read, think about what healthy lifestyle choices you could include in your daily routine.

**2.1 What should we do to stay active?**

Here is a common myth about physical exercise for older people.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older adults should take it easy and avoid exercise, so they don’t get injured.</td>
<td>Almost anyone, at any age and with most health conditions, can participate in some type of physical activity. Exercise and physical activity are not only great for your mental and physical health, but can help keep you independent as you age.</td>
</tr>
</tbody>
</table>
Benefits of regular physical activity for your health:

- Reduced risk of premature death from all causes including heart disease, high blood pressure and diabetes. Reduced incidence of some types of cancers.
- Reduced symptoms of mental health problems such as anxiety and depression.
- Improved memory and thinking skills and improved sleep.
- May help to reduce excessive body fat.

**Tip:** It is more enjoyable and motivating to exercise with a group. Find an exercise group in your area or start a group with your friends.

It is never too late to get active. Almost anyone, at any age, can exercise safely and get meaningful benefits.

**How can we start to improve our physical activity?**

Build up your exercise routine gradually. You can do a few minutes of exercise several times a day or spend a longer time once a day.

The four groups of exercise that are important for your health are:

- **Endurance** (keeps your heart, lungs and blood vessels healthy and increases your fitness).
- **Strength** (strenthen your muscles).
- **Balance** (helps prevent you falling).
- **Flexibility** (stretching exercises).

**Important to avoid:**

Staying still for large parts of the day damages your health and wellbeing. Limit the amount of time every day that you are sedentary.

See chart below for guidance on types of exercise activities\(^1\).

\(^1\) WHO GUIDELINES ON PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR (2019)
https://apps.who.int/iris/bitstream/handle/10665/337001/9789240014886-eng.pdf
# Physical Exercise Guidelines

<table>
<thead>
<tr>
<th>Light-moderate exercises (30-60 minutes per day)</th>
<th>Intense exercises (15-30 minutes per day)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example:</td>
<td>OR Example:</td>
</tr>
<tr>
<td>• Fast walking</td>
<td>• Heavy physical work</td>
</tr>
<tr>
<td>• Swimming</td>
<td>• Jogging/running.</td>
</tr>
<tr>
<td>• Gentle cycling</td>
<td>• Jumping rope</td>
</tr>
<tr>
<td>• Dancing</td>
<td>• Fast cycling</td>
</tr>
<tr>
<td>• Yoga</td>
<td>• Running up stairs</td>
</tr>
<tr>
<td></td>
<td>• all kinds of team sports</td>
</tr>
</tbody>
</table>

**PLUS**

**Muscle strengthening and balance exercise**
(at least twice a week)

Example:

- Pushups/ squats, standing up from sitting.
- Lifting weights, climbing stairs.
- Heavy gardening; using resistance bands.
- Hill climbing

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**Tip to assess your level of physical activity.**

When you’re active, try talking:

- If you’re breathing hard but can still have a conversation easily, it’s moderate-intensity activity.
- If you can only say a few words before you need to take a breath, it’s vigorous-intensity activity.

**REMEMBER** Be sure to drink water if you are doing any activity that makes you sweat. Always keep water close by during exercise

See links to physical activity handouts and videos in appendices.
Start exercise slowly and gradually increase. Remember that your daily routine provides many exercise opportunities such as walking upstairs, housework, gardening, walking or cycling to the market etc. Depending on your fitness level select light or moderate exercise or intense exercise. As you become stronger you can increase the length of exercise. In addition, at least twice a week do muscle strengthening and balance exercises. Seek advice from your health care provider if you are unsure or feel nervous about exercise.

Can I do physical activity if I have a disability?

If you have a disability, it is very important that you take regular physical activity for your health, strength and wellbeing.

According to your current activity level, health status and physical functions, start by doing small amounts of physical activity, and gradually increase the frequency, intensity, and duration over time.

There are no major risks if you have a disability and engage in physical activity if the activity is appropriate to your current health status.

It is helpful to consult with a healthcare provider or physical exercise specialist to help you select the type and number of activities appropriate for you.

Don’t worry if you’re not currently active, have never exercised, or have stopped these good habits. **It’s never too late to get active.**

Keep a positive attitude. Focus on the physical activities that you **CAN DO** and not those that you can’t.

Find physical activities you enjoy and schedule those activities often. It will be more fun if you join a group of friends to exercise with.

**See appendices for handouts and links to videos for a variety of exercises for people with mobility issues and other disabilities.**

In the next section you will find tips about a healthy diet. As you read this section think about what you could do to make your diet healthier.
2.2 What should we do to achieve a healthy diet?

Here is a common myth about older people and a healthy diet.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older people need to eat less as</td>
<td>While our metabolism does slow and our energy decreases as we age, food and eating remain vital to ageing well. As we age, we need</td>
</tr>
<tr>
<td>they get older.</td>
<td>more protein, vitamins and minerals. Protein keeps our muscles, our immune system and our body organs and brain working. Vitamins</td>
</tr>
<tr>
<td></td>
<td>and minerals help to keep our body functions healthy.</td>
</tr>
</tbody>
</table>

A healthy diet has many benefits for our health and wellbeing.

- Helps us live longer and in better health.
- Lowers our risk of heart disease, type 2 diabetes, and some cancers.
- Helps achieve and maintain a healthy weight.
- Keeps our skin, teeth, eyes and digestive system healthy.
- Supports our muscles and strengthens our bones.
- Boosts our immunity and helps protect us from diseases.
- A combination of healthy diet, physical exercise and quitting smoking may reduce our risk of developing dementia.

A healthy diet includes:

- **Plenty of fruits and vegetables** (protective foods) 5 servings (400-500 grams) of fruits and vegetable per day. 1 serving is equivalent to 1 piece or serving of fruit, or 3 tablespoons of cooked vegetables.
- **A portion of protein foods** (muscle building foods) at each meal (see examples of protein foods and portions below).
- **A portion of carbohydrates** (energy foods) at each meal, such as lentils, potatoes, rice, bread, pasta, noodles etc. Whole grains (e.g., unprocessed maize, millet, oats, wheat, brown bread and brown rice are healthier).
- **Low in salt** (sodium chloride). Restrict salt to less than 5 grams (1 small teaspoon) per day. Excessive salt increases our blood pressure. Use iodized salt. Iodine is an essential mineral for healthy body functions. Limit eating highly processed packaged food, they are high in salt, unhealthy fats and sugar.
- **Limited amount of unhealthy fatty oils** (saturated fats) e.g., palm oil, coconut oil, fat from meats like pork, beef and chicken, and fats in dairy foods such as full milk, butter, and cheese. Trans fat is a very unhealthy
processed fat. It raise "bad" cholesterol which increases our risk of heart disease and stroke. Foods that contain trans-fat are factory produced packaged goods, such as cakes, cookies and pies and fried foods, including french fries, doughnuts and fried chicken; non-dairy coffee creamer and most margarine.

- **Limited amount of ultra processed package foods, fast foods and sweetened carbonated drinks.** Avoid highly processed packages foods, they are high in preservatives and salt, sugar, and fat. This combination of salt, sugar and fat in foods is very addictive. Ultra processed foods usually contain less nutrients and promote unhealthy weight gain and high cholesterol, which damages our heart and blood vessels. Ultra-processed foods tend to include ingredients that are not typically used in home cooking, such as preservatives, emulsifiers, sweeteners, and artificial colours and flavours.

- **Limited amounts of free sugars (e.g. sugar, honey added to tea, coffee, or adding sugar to foods we cook).** Eating a diet high in added sugar increases our risk for becoming overweight or obese, which increases the risk of high blood pressure and type 2 diabetes as well as some cancers and stroke. Men should eat no more than 37.5 grams per day or 9 teaspoons, and women no more than 25 grams or 6 teaspoons per day.

- **Low in red meat and pork.** Red meat and pork contains unhealthy fats. Replace with white meats such as chicken and turkey (remove skin) and oily fish. Avoid processed meats such as hot dogs, ham, sausages, corned beef, beef jerky as well as canned meats, as they contribute to causing some kinds of cancers. See the box below for healthy plant-based proteins.
Alternatives to meat, fish and egg sources of protein:
Legumes, nuts, and seed group including:
• soya bean products including tofu.
• beans
• split peas
• lentils,
• nuts and seeds.
• quinoa

Replace unhealthy fats with healthy (unsaturated) fats for example those found in plant oils such as olive oil, peanut oil, canola oil, sunflower oil, and soya bean oil.

Nuts, fish, and other foods containing healthy omega-3 fatty acids are other good choices of foods with healthy fats.

A healthy diet – recommended plate portion

Vegetables: ½ of the food plate

Rice or noodles: ¼ of the food plate

Fish, meat or eggs: ¼ of the food plate

One serving of vegetables is approximately half a cup of cooked or raw vegetables (75grams). Preferably eat vegetables that are in season and locally available, they taste better and are fresher. Also buying local produce supports your community’s economy.

One serving of fruit is one piece or serving of locally available seasonal fruit depending on where you live.

One serving of protein per meal is approximately 20 grams (¼ plate of protein foods such as meat, fish, eggs, tofu, lentils, nuts, beans, seeds etc.)
• As much as possible eat locally available, affordable foods that are fresh and free of pesticides and other chemicals.
• Eat a variety of foods every day. Eat as many different colours of fruit and vegetables as available, they are very nutritious.
• If possible, grow your own vegetables. Join or start a group gardening project in your community.

Tips for keeping our muscles strong:

As we age it is especially important to eat enough protein to prevent muscle loss.

Between the ages of 40 and 80 years we lose up to 50% of our muscle mass if we are not eating enough protein and doing regular muscle strengthening exercise. The protein we eat in our diet helps us maintain and build our muscles. Our muscles are vital for helping us maintain our independence and functioning as we age, such as our ability to perform our daily tasks: dressing ourselves, staying mobile, walking up steps, getting out of bed and much more. As older adults we should aim to consume 1.2 grams of protein per kg body weight per day (approximately 68-80 grams of dietary protein daily), in addition to doing regular strength and balance exercises to strengthen our muscles and prevent or rebuild our muscle loss.

Our protein intake should be spread out over the day to provide the most benefit. We should try to eat 20-30 grams protein at each meal. Sources of dietary protein are meat, seafood, poultry and eggs. If we follow a mostly plant-based diet, we can get our protein from tofu, whole grains, beans such as soya beans, seeds, nuts and lentils. Other foods that have a smaller amount of protein are potatoes, multigrain bread and wholewheat bread.
Getting enough vitamins and minerals from our diet, remains important as we age.

We need vitamins and minerals to keep our body needs healthy. Eating a variety of foods will help us get the minerals and vitamins we need. Minerals are elements that can be found on the earth and in foods. Some minerals are only needed in very small quantities. Others, such as calcium, and potassium, are needed in larger amounts.

Vitamins and mineral that are especially important as we age.

- **CALCIUM** - we need to take more calcium as we age because we start to lose more calcium from our bones than we can absorb. This can make our bones break more easily (osteoporosis), especially for women after menopause. Calcium also helps our muscles, nerves, cells, and blood vessels work well. Foods rich in calcium are dairy foods such as cheese, yogurt and milk, all kinds of seeds are high in calcium and other nutrients such as sesame, poppy, sunflower and pumpkin seeds, beans and lentils, edamame beans and tofu, amaranth, green leafy vegetables, and all kinds of fish especially small-boned fish such as sardines.

- **Vit D** - we need vitamin D so that we can absorb the calcium from the foods we eat. Vit D also protects our muscles, nerves and immune system so they can work well. Most people get some vitamin D from sunlight. But as we age our body is less able to convert the sun’s rays to vitamin D. Fatty fish like mackerel, sardines and salmon are a good source of Vit D.

- **Potassium** plays a part in functioning of every part of our body, including our heart, kidneys, muscles, and nerves. It also may help protect against stroke, high blood pressure, and osteoporosis. Foods that are rich in potassium are: leafy green vegetables, spinach, and broccoli. bananas, pumpkin, cucumbers, mushrooms, potatoes and dried fruits such as raisins.

**Important**

It is usually better to get the nutrients we need from food, rather than vitamin pills. That’s because if we eat a variety of nutritious foods, they contain many other nutrients and fibre which is good for us.

Taking vitamin/ mineral as pills can sometimes interfere with certain medications. Unless we have a poor appetite or have conditions that keep us from eating a healthy diet, we probably do not need vitamin and mineral supplements.

If you are concerned, you are not getting enough vitamins and minerals from the foods you eat ask advice from your health care provider.
In addition, **fibre** is a vital part of a healthy diet and is very good for us especially as we age. Fibre improves our digestive system, protect against stroke, helps us poop more regularly, and lowers our cholesterol and blood sugar. Foods rich in fibre are all kinds of vegetables, fruits, beans, lentil, whole grain bread, brown rice, and oats.

**Water is also essential for a healthy digestive system.** Drinking enough water helps us make sure that fibre is moving through our body, preventing constipation. Without enough water, our poop may build up in our system which can lead to constipation.

- **What is dehydration?** Dehydration is a potentially serious condition that occurs when we don’t drink enough fluids for our body’s needs. This can lead to health problems ranging from mild to serious, such as urinary tract infections (UTIs), heat stroke, heart problems, kidney failure, and blood clots. Dehydration also affects our body’s ability to fight infections and heal from injury or illness.

- **Early signs of dehydration** include dark-coloured urine, urinating less frequently, feeling weak or tired, irritability, headaches, muscle cramp in legs and arms, dry mouth, confusion. **NOTE** tiredness and lack of coordination caused by dehydration can increase our risk for falls and injury.

**Staying hydrated is very important as we age.**

Water is not only important for quenching our thirst, but is also essential to all our bodily functions, from lubricating our joints to pumping blood to our heart. Being hydrated simply means that our body has enough fluids to function properly. A quick way to tell if we are drinking enough is to check the color of our urine. If it’s pale in color and clear, we are likely to be well-hydrated. If it’s dark-colored we may be dehydrated.
**Tips for staying hydrated:**

**Choose foods with high water content.** If we have trouble drinking fluids, try including water-rich foods with every meal e.g., salad and vegetables, soups, broths and stews.

**Always keep water close by.** Keeping fluids close to us makes it easier to stay hydrated. Carry a refillable water bottle wherever we go. Keep a jug of water close our regular sitting place.

**Avoid or reduce your alcohol intake.** Alcohol prompts our body to remove fluids from your bloodstream. Limiting alcoholic drinks can help us retain more water.

**Refresh your taste.** Pure, clean water is the best way to stay hydrated. If you feel bored with plain water, try adding slices of fresh lemon to flavour your drink. Herbal teas are also good. Limit how much coffee and black tea you drink as they have a dehydrating effect.

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**Why are we more vulnerable to dehydration as we age?**

Our appetite and thirst may decrease as we age. Even when our body need fluids we might not be aware of it and not drink enough. As we age the changes in the composition of our body leaves us with less water stored in our body compared to when we were younger. In addition, as we age our body does not regulate our body temperature as well as when we were younger, which makes us at greater risk of becoming dehydrated during exercise and when we are exposed to high temperatures.

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**Prevent dehydration** by drinking more water throughout the day. Generally, we need to have approximately 1.5 litres of fluid per day (8-10 glasses) throughout the day.

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How can we manage common eating problems?

Living on a limited budget

As we age, we may have a reduced budget to live on. The good news is that it is still possible to eat a healthy diet with less budget. It takes planning in advance but is worth the effort.

Tips for eating a healthy diet on a limited food budget:

- Planning our weekly menu in advance can save money. If possible, do this in collaboration with family or friends.
- Locally grown seasonal fruit and vegetables are best. Consider growing your own fruit and vegetables. Find out if you can join a community garden group. Vegetables can also be grown in small pots and any available space around your house. *(See home garden links in appendices.)*
- If fresh vegetables are unavailable or too expensive, use tinned vegetables. They may be cheaper and are comparably nutritious to fresh vegetables. Canned oily fish (such as tuna and sardines) may also be a cheaper and more easily available than fresh fish.
- Reduce fuel and electricity costs. E.g., use a slow cooker or pressure cooker. Consider cooking meals with friends and sharing the costs. If you have a refrigerator / freezer/ icebox you will be able to cook larger amounts and store meals to eat later.
- Join with friends to buy stable foods in bulk at a cheaper price (e.g., lentils, potatoes, rice and pasta and flour).
- Find local shops/ market stalls etc. that reduce the cost of some fresh foods at certain times, e.g., just before closing time or items close to expiry date.
- Make friends with local food vendors who sell meat, fish and fruit and vegetables. When you are a regular customer, they may sell you smaller amounts and recommend cheaper but nutritious cuts of meat and fish.
- Try preserving or pickling foods to use over a longer period, e.g., pickling vegetables, fruit, eggs, drying fruits, making fruit jams etc. Find a friend or group in your community who can teach you how to do this.
**Poor appetite**

Changes to our body as we age can cause us to feel full sooner than when we were younger. Other causes of a poor appetite may be due to changes in our daily routine, loneliness, depression, side effects of medicine or illness. Discuss with your health care provider if your poor appetite continues over a few weeks and you are losing weight.

Things you can try to improve your appetite:

Be more active and spend more time outdoors. In addition to the benefits of physical activity and fresh air, more time outside helps increase our appetite. You can also try eating a smaller amount of food more regularly or adding nutritious snacks between meals such as fresh fruits, soya bean milk, hard-boiled egg, handful of unsalted roasted nuts, potato or pumpkin or yogurt with honey or fruit. If you aren’t hungry because food is not tasty, try adding seasoning, but avoid adding extra salt. Try using lemon juice, garlic, black pepper, vinegar, or herbs to boost the flavour.

**Tired of cooking or eating alone**

Eating with our friends and family is more enjoyable than eating alone. Make the effort to find time to spend with family and friends to cook and enjoy a meal together. Also find places in your community such as social clubs, religious facilities, or associations, where you can meet others and share a meal together. If there are food delivery services in your area this may be another option to increase.

**Problems chewing or swallowing food.**

If we have problems with our teeth or dentures it may affect our diet and enjoyment of eating. If you face problem with chewing visit a dentist to check for problems. If you wear dentures, the dentist can make changes so that they fit better and are more comfortable. If food seems to get stuck in your throat or is hard to swallow., visit your health care provider as there may be many reasons for this which can be addressed Sometimes diet needs to be adjusted to have soft or pureed foods.

**Difficulties to eat due to an illness of disability.**

Sometimes chronic diseases such as Parkinson’s disease, stroke, or arthritis can make it harder for us to cook or feed ourselves. There are many things we can do to improve the situation such as adapt our food preparation and eating utensils to make them easier to use. For ideas about how to adapt utensils see attached video links. [https://www.physio-pedia.com/Eating_and_Drinking_Assistive_Products](https://www.physio-pedia.com/Eating_and_Drinking_Assistive_Products)
Food safety.

As we age, we are at a higher risk from foodborne illness. This is because our immune system (body’s protective system) weakens, making us more susceptible to infectious diseases. Our digestive system also holds our food longer allowing the bacteria more time to grow. We may also have chronic conditions that weaken our immune system. We can reduce our risk of food borne illness by practicing 4 basics rules of food safety:

- **Clean – wash hands, utensils and kitchen surfaces often.** Use plain soap and water and scrub the backs of your hands, between your fingers, and under your nails for at least 20 seconds. Wash utensils and kitchen surfaces well after use. Store cooking utensils in a clean safe place.
- **Separate foods** – keep produce and other foods that will not be cooked away from the juices of raw meat, poultry, seafood and eggs.
- **Cook to the right temperature.** Food is safely cooked when the internal temperature is high enough to kill germs that can make you sick.
- **Keep foods cool and stored properly.** Perishable foods (likely to decay or go bad quickly) should be stored in a refrigerator or a cool box within 2 hours of purchasing.

In the next section you will find tips for a good night’s sleep.
2.3. What should we do to get a good night’s sleep?

A common myth about sleep and ageing

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>The older we get, the less sleep we need.</td>
<td>Older adults need the same amount of sleep as all adults — 7 to 9 hours each night. Getting enough sleep keeps us healthy and alert. Adequate sleep can also help reduce our risk of falls, improve our overall mental well-being, and has many other benefits.</td>
</tr>
</tbody>
</table>

As we age sometimes our sleeping patterns change, and we may not get as much sleep as we used to. But whether our sleeping routine there are things we can do to improve the quality of our sleep:

- Be more active during the day. Cut down on daytime naps.
- Go to bed at the same time each night and wake up at the same time in the morning.
- Avoid eating a heavy meal or drinking alcohol close to bedtime.
- Develop a bedtime routine. Do relaxing activities before sleeping.
- Reduce your daily number of drinks containing caffeine such as coffee/tea.
- Avoid using smartphones and other devices just before trying to sleep.
- If you wake up and cannot get back to sleep, get up and do something for a short time before returning to you to bed.

The benefits of sleep

- Healing and repair of our body cells, tissues, and blood vessels
- Stronger immune system to protect us against disease.
- Improved mood and energy
- Better brain function alertness, decision-making, focus, learning, and problem solving.
- Reduced risk of chronic disease

Poor sleep may put us at higher risk for:

- Cardiovascular disease
- Cognitive decline and dementia
- Depression
- High blood pressure, high blood sugar and cholesterol
- Obesity

In the next section you will find tips on how to manage stress
2.4. How can we manage stress?

Everyone experiences stress at times. A little bit of stress is not a problem. Short-term stress can even focus our thoughts and motivate us to take action. But very high or prolonged stress can affect our physical and mental health and wellbeing.

What causes stress?

Stress is how we react when we feel under pressure or threatened. It usually happens when we are in a situation that we feel we cannot manage or control for e.g., when we encounter several challenges at the same time, when we feel uncertain or worried about the future or face financial difficulties. Stress can come on suddenly and last a short time usually less than a few weeks, or last for a longer period.

What are the signs of stress?

Many people experience unpleasant feelings when they are stressed such as:

- **Physical symptoms**: headaches or dizziness, muscle tension or pain, chest pain or a faster heartbeat
- **Mental symptoms**: difficulty concentrating, struggling to make decisions, feeling overwhelmed, constantly worrying, being forgetful
- **Changes in behaviour**: being irritable and quick to feel upset, sleeping too much or too little, eating too much or too little, avoiding certain places or people, drinking, or smoking more.

Is stress a mental health problem?

Stress is not normally considered a mental health problem, but stress can cause mental health problems such as anxiety and depression.

What can we do to reduce our stress?

- **Take control.** Remember there is always something we can do to reduce our stress. That feeling of loss of control is one of the main causes of stress and lack of wellbeing. Find out what is causing our stress and tackle it. We will feel empowered when we find coping strategies to manage our stress.

- **Prioritize our tasks**, focusing on the ones that will make a real difference. Accept that we cannot do everything.

- **Try to be positive** at the end of each day think about the things we are grateful for.
• **Accept the things we cannot change.** Try to concentrate on the things we do have control over. E.g., if we have a chronic disease that cannot be cured, think of all the things we can do to prevent our disease from getting worse.
Five tips to help reduce our stress:

1. **Connect with other people.** Social connections are important for our mental wellbeing. They can help provide emotional support and allow us to support others.

   Things to do: Make time even if only for a few minutes to meet with family or friends; visit someone who needs company, volunteer in your community; use available internet technology such as skype, video chats etc to stay in touch with friends and family who live far away.

2. **Be physically active.** Being active is not only great for our physical health and fitness. Evidence also shows it can improve our mental wellbeing *(See physical exercise section).*

3. **Learn new skills.** Research shows that learning new skills can also improve our mental wellbeing by boosting self-confidence and helping us to connect with others. Even if we are busy find a short time to learn a new skill e.g., learn about eating a healthy diet and try making new recipes with friends and family *(see healthy diet section)*; try teaching a friend or younger people in your community a new skill that you are good at such as gardening, sewing etc. Try new hobbies such as group games with friends, learning how to swim, dance etc.

4. **Give to others.** Research suggests that acts of giving, and kindness can help improve our mental wellbeing by creating positive feelings and a sense of reward, giving us purpose and self-worth, helping us connect with others.

5. **Pay attention to the present moment (mindfulness).** Paying more attention to the present moment can improve our mental wellbeing. This includes our thoughts and feelings, our body, and the world around us. Mindfulness practice can help us enjoy life more and understand yourselves better.

   *(If you have an internet connection there are many free mindfulness breathing videos for beginners on You Tube. You may be able to find one in your language. Alternatively, you can access a relaxing music video to use when you practice mindfulness breathing exercises. [A link to a relaxing music video]*

In the next section you will find tips on how to keep your brain active. As you read think about things you would like to do to keep your brain active
2.5. How can we keep our brain active?

Here is a common myth about our brain health as we age.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is inevitable that older people will get dementia.</td>
<td>Occasional forgetting an appointment or losing things are signs of mild forgetfulness which is common in normal ageing. Dementia is when we experience significant decline in our thinking and behavior. It is not a normal part of aging. Although the risk of dementia increases as we age it is not inevitable. There are lifestyle choices we can make to reduce our risk of dementia. Many people live into their 90s and beyond without having dementia. <em>(For more information about dementia see section 5).</em></td>
</tr>
</tbody>
</table>

What is brain health?

Brain health is about how our brain functions across several areas:

- **Cognitive health** — how well we think, learn, and remember.
- **Motor function** — how well we control our movements, including balance.
- **Emotional function** how well we interpret and respond to emotions (both pleasant and unpleasant).
- **Tactile function** — how well we feel and respond to sensations of touch — including pressure, pain and temperature.

As we age our brain health can be affected by injuries such as stroke or head injury, depression, addictions to substances or alcohol, and diseases such as Alzheimer’s disease. While some factors affecting our brain health cannot be changed, there are many lifestyle practices that might make a positive difference.

- Receive an annual health check-up –Page 43
- Eat healthy foods- Page 18
- Stay active- Page 14
- Manage chronic health problems like high blood pressure, diabetes, depression and high cholesterol. Pages 70
- Reduce risk for brain injuries due to falls and other accidents. Page 64
- Limit use of alcohol –Page 37
- Quit smoking, chewing tobacco or betel nut Page 35
- Get enough sleep, generally seven to eight hours each night Page 28
- Reduce social isolation and loneliness Page 53
How can we keep our mind active?

- Learning new skills may improve our thinking ability, too. For example, one study found that older adults who learned sewing skills or photography had more memory improvement than those who only socialised.
- Research on engagement in activities such as music, theatre, dance, and other creative activities has shown promise for improving quality of life and well-being in older adults including better memory and self-esteem, reduced stress and increased social interaction.

Additional activities that can keep our minds active:

- Reading books and magazines.
- Playing games.
- Learning a new skill, hobby, or a new language
- Meaningful work or volunteering.

NOTE: However, a recent review of several studies did not find strong evidence that these types of activities have a lasting, beneficial effect on our cognition. Additional research is needed to be able to confirm whether these activities may help reduce cognitive decline or maintain healthy cognition.

These types of mentally stimulating activities have not been proven to prevent serious cognitive impairment or Alzheimer's disease, but they can be fun, help to reduce loneliness and make new friends, and improve our wellbeing. People who engage in personally meaningful activities, such as volunteering or hobbies, say they feel happier and healthier.

In the next section you will find information and tips about social isolation.
Social isolation and loneliness

Social isolation and feeling lonely may be bad for our brain health. Loneliness has been linked to higher risk for dementia. Less social activity has been linked to poorer cognitive function. By taking steps to reduce our risks for cognitive decline, it will help us to maintain our cognitive health for the future. See section 3 for more information about how to manage isolation and loneliness.

Stay connected with social activities.

- Connecting with other people through social activities and community programs can help keep our brain active and help us feel less isolated.
- Participating in social activities may lower our risk for some health problems and improve well-being.
- People who engage in meaningful activities with others, tend to live longer, boost their mood, and have a sense of purpose.

In the next section you will find tips on how to stop smoking. Quitting smoking is not easy but it is possible and will bring many benefits.
2.6 How can I quit smoking?

Here is a common myth about quitting smoking.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>I’m too old to quit smoking. It is too late to improve my health.</td>
<td>Quitting smoking at any time improves our health. Smokers who quit have better health and improved well-being. Smoking causes many health problems. Quitting smoking can lower our risk of heart and lung disease; lower our heart rate and blood pressure over time and reduce our risk of cancer, heart attack, stroke, and chronic lung disease. Quitting will also reduce second-hand smoke exposure to our family members.</td>
</tr>
</tbody>
</table>

**Steps to quit smoking**

1. Learn about the harm tobacco causes to us and our family, and the benefits of quitting.
   - Smoking is estimated to cause one third of all deaths from heart disease and 90% of lung cancers.
   - Within 1 year after quitting, our risk of heart disease goes down by half.
   - Cigarettes, e-cigarettes, and tobacco products contain many toxic chemicals, as do their smoke, vapor and liquids that damage your health.

2. Make a plan to quit.
   - You’re more likely to quit tobacco for good if you prepare by making a plan that fits your lifestyle.
   - Example SET a quit date within the next 7 days. QUIT on your quit day.
   - CHOOSE a method: either stop completely on your quit day or reduce tobacco gradually.
   - DECIDE if you need help from a health care provider or someone you know who has been able to quit.
   - PREPARE for your quit day by planning how to deal with cravings and urges.

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Tips to help us quit smoking:

**Deal with urges**

- Identify the situations / routines in our life that make us want to smoke or use tobacco. Plan for how we can avoid them.
- Avoid situations that make us want to smoke or use tobacco until we’re confident that we can handle them.
- Get active, physical activity can help us manage the stress and cravings when quitting. We will feel better too.

**Handle stress**

- Learn other healthy ways to manage the stress of quitting. Such as hobbies, playing popular games with friends, gardening, handicrafts, music etc.

**Get support.**

- Find peers who can provide a support system and help us manage the struggles of quitting.

**Do not give up. Try again.**

- Quitting takes a lot of willpower. Forgive ourselves if we fail on some days. Get back on course as soon as possible and focus on the day we successful quit.
2.7 How can we avoid harmful use of alcohol.

Here is a common myth about drinking alcohol.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am too old to have a drinking problem.</td>
<td>We may think that drinking problems must start early in life. In fact, some of us develop problems with drinking at a later age. One reason is that we can become more sensitive to alcohol as we get older. Some of us may start to drink more because we have chronic pain, are bored or feel lonely or depressed. Even if we never drank when we were young, we can have problems with alcohol as we age.</td>
</tr>
</tbody>
</table>

Why should we think about reducing or stopping to drink alcohol?

There's no completely safe level of drinking alcohol. Much like sugar and unhealthy fats alcohol isn't good for our health and should be consumed only sparingly.

Drinking alcohol too much or too often, or being unable to control alcohol consumption, is harmful and can hurt our quality of life, cause major health issues and harm our relationships.

Some of us are more susceptible to alcohol than others and should be careful when drinking alcohol e.g., if we are at risk of falls, have preexisting health conditions and take medications that may interact with alcohol.

There are many risks to drinking too much alcohol:

- Raised blood pressure and stroke.
- Stomach disorders
- Depression and emotional disorders
- Cancers, particularly of the mouth, throat, and gullet
- Hepatitis and liver damage
- Malnutrition
- Accidents /suicide
- Losing work and income

Risk to our family

- Violence, accidents
- Less to spend on food and living costs
- Lower quality of relationships with friends and family
- Bad example for our children
Tips to help us stop or control our alcohol consumption:

1. Monitor our alcohol drinking PATTERN – WHEN do we drink alcohol and WHY? “I drink beer with my friends to enjoy their company” “I pour myself a drink every evening so I can relax and forget the stresses of the day”.

2. Become AWARE of the consequences of drinking TOO MUCH alcohol. “I lose my temper over trivial things” “I spend more than I can afford on alcohol.”

3. Take special notice of times when we have drunk TOO MUCH “After drinking with friends is a problem time for me – I come home and provoke a fight for no reason” “After drinking too much I have a bad mood the next day.”

4. Decide to CUT DOWN on alcohol “I won’t drink during the day” “I will only have one drink per day.” I will reduce drinking to one drink two times per week. Work out ways you can AVOID alcohol.

5. Ask our friends and family for support. Ask them to PRAISE us when we drink less.

6. Select ALTERNATIVE things to do when tempted to drink alcohol “At lunchtime or in the evening I will go for a brisk walk to avoid temptation.”

7. Seek out friends who don’t drink or want to avoid drinking, provide each other support to avoid alcohol.

8. Practice how to say “NO”! If we RELAPSE remember, we are human! Learn from our mistakes and TRY AGAIN. Seek professional help if it is difficult to control your drinking.

In the next section you will find tips about taking medicines correctly. As you read think about how you could improve your practice of taking medicines.
2.8. How can we safely manage our medicines?

Here is a common myth about taking medicines for chronic diseases.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>My blood pressure has lowered so I can stop taking my medication.</td>
<td>High blood pressure is a very common problem for us as we age—and can lead to serious health problems if not treated properly. If we take medicine to reduce our blood pressure and our blood pressure goes down, it means the medicine and lifestyle changes are working. However, if we stop taking our medicine without consulting our health care provider, our blood pressure could rise again, increasing our risk for a stroke or kidney disease. Stopping any medication suddenly without consulting a health care provider has risks. <em>(For more details about high blood pressure see section 5)</em></td>
</tr>
</tbody>
</table>

As we age, we may be prescribed medicines to manage health issues. If we have a chronic condition these medicines may need to be taken over a long period of time and become part of our daily routine. It is important we carefully adhere to the guidance provided by our health care provider, and learn about how our medicines work, how to take them correctly, and the possible side effects so that we can take timely action if we experience problems.

As we age our body experiences changes such as reduced muscle and fat and water storage, which makes it more difficult for our body to absorb and process medicines. Because of this some medicine can causes serious problems such as increase our risk of falls and confusion. Other challenges for taking medicines correctly may occur due to poor eyesight, hearing problems, arthritis, and memory loss.
Tips when starting new medicines:

When our health care provider prescribes a medicine for us, ask questions to learn more about the medicine:

- What is the medicine for?
- What are the benefits and risks of the medication?
- What are the potential side effects of the medicine?
- Ask if there is alternative options to taking the medication, such as physical therapy, change of diet, exercise etc?
- Inform and show the health care provider if we are taking any other medicine, vitamins or herbs.
- Important Don’t share. Do not take medicines prescribed for another person or give your medicines to someone else.

Watch for side effects of medicines.

It is important to learn about our medicines and be on the aware of any new or unfamiliar symptoms, that could be side effects. Side effects include:

- Confusion, sleep problems, infections, nausea or diarrhoea, feeling anxious.
- panic attacks, loss of appetite, weight loss, dizziness and falls.

If we experience side effects or have concerns about you medicine, we should contact our health care provider.

Additional tips to help us manage our medicines:

It is a good idea to keep an updated medicine list to share with our health care providers. If we are taking other medicines they need to know, as some medicines can interact with others and have negative effects. If possible, take the medicines with us. If we need help, ask a family member or friend to help make the list. Include on the list:

- Any medicine purchased without seeing a health care provider.
- Medicines provided by health care providers.
- Vitamins
- Supplements
- Herbs or other kinds of traditional medicine
- Include list of our allergies including medicines we cannot take.
Tips to help manage our medicine safely:

- Pre prepare our medicine using a 7-day pill box. We can make a simple storage box at home. Make one section for every day of the week.

- Make a routine daily plan for taking medicine according to the instructions provided by the health care provider.

- Keep all medicines in the same place so they are easy to find when we need them.

- Make a simple chart of our daily medicine routine. Stick it on the wall where it is easy to see.

- Set an alert reminder on our watch or telephone when it is time to take medicine.

- Make sure you we do not run out of medicine. Put a date on our calendar or medicine plan to remind us of when we need to request more medicine.

Store medicine safely

Medicines are best stored in a cool, dry place, keeping them away from sunlight, hot appliances, and damp areas such as sinks. A container with a tight-fitting lid will keep insects and rodents out. If we are living in a home with small children, it is best to keep medicine stored in a cupboard that small children cannot reach.

Next you will find answers to frequently asked questions about medicines:
Q: What should I do if I miss a dose of medicine?
A: Ask your healthcare provider about this. Do not just take two tablets the next time. This does not work well for certain medicines and can even be dangerous.

Q: Is it safe to drink alcohol when I am taking medicines?
A: It can be dangerous to combine alcohol with many medicines. This can cause drowsiness and mental confusion, resulting in falls, accidents and injuries. Some medicines should not be taken if you are a regular alcohol user due to serious side effects. Discuss this with your healthcare provider.

Q: Could my daily vitamins react with my other medicines?
A: Yes, particularly if you are taking medicine to thin your blood. This is why it is important to tell your healthcare provider about all the medicines you take including vitamins.

Q: My friend takes medicine for anxiety. I am feeling stressed, and I would like to try her medication. Is that a good idea?
A: Never take someone else’s medication, and do not share yours with anyone else. Doing this could be dangerous. If you need help with “nerves” or anxiety, or any other health problem, talk with your healthcare provider.

Q: How do I know when my medicines have expired?
A: There is a date on the medicine container that shows when it will expire. If you do not know when your medicine will be out of date check with your healthcare provider. Also ask your health care provider how to safely dispose of old medicines.

In the next section you will learn about the importance of an annual health check. As you read think about how an annual health check might be of benefit to you.
2.9 Why should I receive an annual health check and stay up to date on vaccinations?

Here is a common myth about annual health check.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you feel healthy you do not need a health check.</td>
<td>As we age, we face a higher risk for chronic diseases like high blood pressure, diabetes, lung disease and cancer. These conditions are often called the ‘silent killers’ as we may not have symptoms until the disease is advanced. An annual health screening can help to detect risk factors for disease early. It is aimed at finding early signs of diseases so that they can be treated before they become serious. This increases our chances of recovery or achieving good control of the disease and reduce the complications. <em>(See section 5 for more details about chronic diseases)</em></td>
</tr>
</tbody>
</table>

An annual health check will help to:

- Identify health issues early and treat them before they become more serious.

- The health care provider will measure our weight, height, blood pressure and do blood tests for blood sugar and cholesterol (unhealthy fats). Depending on what resources are available at the health facility, we may also have a chest X ray, ultrasound scan and other tests.

- Inform us about healthy lifestyle choices to reduce our risks of disease.

- Track our health status from one year to another and help motivate and alert us about the need to correct unhealthy practices. It is useful to keep a health care check-up booklet with details of our annual check-up results.

- If we have a chronic condition like high blood pressure or diabetes it will help to track our disease and check that it is well controlled. Our health care provider can adjust our medicine and health care plan to prevent it getting worse.

- Keep us up to date on important vaccinations we need to protect our health.

- Give us the opportunity to ask the health care provider about any issues, concerns or changes we notice or are worried about.
Why is it important to keep our vaccinations up to date as we age?

As we age our immune system is not as strong as when we were younger, which makes us more vulnerable to infections. Vaccines can help keep you from getting serious or life-threatening infectious diseases. Vaccines are very safe. The most common side effects of vaccines are mild and may include pain, swelling, or redness at the injection site.

Each country may have a slightly different vaccination schedules according to your age. Normally there are 5 important vaccines to keep up to date as we age.

- COVID-19 vaccine
- Influenza (flu) vaccine
- Pneumonia vaccine
- Shingles vaccine.
- Diphtheria, tetanus and pertussis.

It's a good idea to keep your own vaccination record, listing the types and dates of your vaccines, along with any side effects or problems.

Information about the infectious diseases that can be prevented by vaccination.

- **Covid 19** – Covid 19 is an infectious respiratory disease caused by a virus. Symptoms include fever, cough, and shortness of breath. It can spread quickly from one person to another through small droplets from the nose or mouth, which are expelled when a person with Covid infection coughs, sneezes, or speaks. People can catch COVID-19 if they breathe in these droplets, and when touching their eyes, nose, or mouth after touching surfaces or objects that have been contaminated by the Covid.
virus. Older adults are more likely than younger people to get very sick from COVID-19. The disease can lead to serious illness and death. COVID-19 vaccines reduce the risk of getting this disease. The vaccine will also help keep us from getting seriously ill or having to go to the hospital. 4

- **Influenza (Flu)** Flu short for influenza is a virus that can cause fever, chills, sore throat, stuffy nose, headache, and muscle aches. Flu is very serious when it gets in your lungs. Older adults are at a higher risk for developing serious complications from the flu, such as lung infection (pneumonia). The flu is easy to pass from person to person. The virus also changes over time, which means we can get it again. To ensure the flu vaccines remain effective against the virus, the vaccine is updated every year.

- **Pneumonia vaccine** - pneumococcal disease is a serious infection that spreads from person to person by air. It often causes pneumonia in the lungs, and it can affect other parts of the body. Older adults are at higher risk than younger people of getting very sick or dying from pneumococcal disease.

- **Shingles**- shingles is caused by the same virus as chickenpox. If you had chickenpox, the virus is still in your body. As you get older, the virus could become active again and cause shingles. Shingles affects the nerves. Common symptoms include burning and shooting pain, tingling, and or itching, as well as a rash with fluid-filled blisters. Even when the rash disappears, the pain can remain for some time.

The shingles vaccine is safe, and it may keep us from getting shingles and the pain that remains after the rash has gone. All healthy adults aged 50 and older should get vaccinated with the shingles vaccine, which is given in two doses. Even if we have previously had chickenpox, we should still receive a shingles vaccine. However, we should not get a vaccine if we currently have shingles, are sick or have a fever or a weakened immune system. Check with a health care provider if you are not sure what to do.

- **Diphtheria, pertussis, and Tetanus**

  Diphtheria is a serious illness that can affect the tonsils, throat, nose, or skin. You can catch it from a person who has the infection and coughs or sneezes. You can also get infected by coming in contact with an object, such as a toy, that has bacteria on it.

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Pertussis also known as whooping cough, causes uncontrollable, violent coughing fits that make it hard to breathe. It can spread from person to person.

Tetanus is a serious illness caused by a bacterium that lives in soil, saliva, dust and manure. The infection causes painful tightening of the muscles, usually all over the body. It can lead to "locking" of the jaw. This makes it impossible to open your mouth or swallow. Tetanus is a medical emergency. The bacteria can enter the body through a deep cut, like those you might get from stepping on a nail, or through a burn. If you get a deep cut while farming, gardening or in a dirty environment it is important to receive a booster dose of Tetanus vaccine if you have not received a booster dose in the last 10 years.
Below are the global vaccine recommendations. Each country may have slightly different vaccine guidelines. Please check with your health care provider for the vaccine guidelines for older people in your country.

<table>
<thead>
<tr>
<th>#</th>
<th>Vaccine</th>
<th>Schedule</th>
<th>Update to date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>1</td>
<td>Covid 19 vaccine?</td>
<td>2 primary doses, then a booster dose according to the vaccination guideline in your country.</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>For older people we are included in high priority groups as we are more vulnerable to Covid infection. It is recommended we receive an annual booster dose of vaccine, 12 months after our previous dose.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>For older people who have a chronic health condition it is recommended to have a booster dose 6 months after the previous dose</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Annual flu vaccine?</td>
<td>1 dose every year</td>
<td>Yes</td>
</tr>
<tr>
<td>3</td>
<td>Pneumonia vaccine?</td>
<td>Depends on the type of vaccine given, you may only need to receive one dose or 2 doses with the 2nd dose given 12 months after the 1st dose.</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Pneumococcal pneumonia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Shingles vaccine?</td>
<td>Two doses of vaccine. The 2nd dose given within 2 to 6 months after the 1st dose</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Full course of DPT / or DTAP?</td>
<td>Usually, 3 primary doses given in early childhood, then a booster dose every ten years.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Diphtheria, Pertussis and Tetanus)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Measles, Mumps, Rubella (MMR)</td>
<td>Some countries may recommend a booster dose of MMR for older people who may not have received a dose when they were a child.</td>
<td></td>
</tr>
</tbody>
</table>
Add additional vaccines that are recommended in your country.

<table>
<thead>
<tr>
<th>#</th>
<th>Vaccine</th>
<th>Schedule</th>
<th>Update to date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Have I received the full course of?</td>
<td></td>
<td>YES NO</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2.10 What can I do to be able to self-monitor my health at home?

Self-monitoring of our health and wellbeing is an important part of self-care. It helps us to be pro-active in managing our health, identify problems early and seek medical care when needed. Self-monitoring also motivates us to maintain healthy lifestyle practices. Making a self-care plan will help us monitor the things that are most important to us. Be realistic, start with selecting small lifestyle choices changes that fit into our daily routine. We can gradually add new choices as needed.

Tips for making a self-care plan:

- Reflect on our current health status. What is going well? What lifestyle practices would benefit from improvement? Use the healthy lifestyle checklist in the section above as a reflection guide.
- Select one or two healthy lifestyle choices that are important to us.
- Make specific goals e.g., eat a serving of vegetables every day.
- It is helpful if we work with a group of peers to improve healthy lifestyle choices. We can encourage and motivate each other.
- Identify a friend who can support and encourage us.
- Make it a weekly practice to review and share our progress with our self-care support person/s.
- Do not become disheartened if we are unable to achieve our goals as fast as we planned. The most important thing is we stay committed to making positive changes and continue to work towards our goals. Celebrate our achievements.
- If we do not have a blood pressure measuring machine, weighing scales or other equipment, find out what is available in our community. Community volunteers may be able to help us.
- If we have an internet connection and an android phone, we can find free health monitoring apps on Google Play Store. If this is not available to us record our healthy lifestyle plan in a booklet. Add useful numbers for health and care services, contact people etc.
### Example of a Healthy Lifestyle Plan

<table>
<thead>
<tr>
<th>Health Goal</th>
<th>What I will do</th>
<th>Progress</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy eating</td>
<td>I will include more vegetables in my diet.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eat at least one cup of vegetables with my daily meals.</td>
<td>![Progress Icon]</td>
<td></td>
</tr>
<tr>
<td>Regular exercise</td>
<td>I will do muscle strengthening exercises for 10 minutes, two times per week</td>
<td>![Progress Icon]</td>
<td>![Progress Icon]</td>
</tr>
<tr>
<td></td>
<td>Before I have my lunch, I will do 10 minutes of squats or walking up stairs to strengthen my muscles.</td>
<td>![Progress Icon]</td>
<td>![Progress Icon]</td>
</tr>
<tr>
<td>Regular sleeping</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health and well-being</td>
<td>I will socialise with friends at least one time per week.</td>
<td>![Progress Icon]</td>
<td>![Progress Icon]</td>
</tr>
<tr>
<td></td>
<td>I will join friends to play card games every Friday.</td>
<td>![Progress Icon]</td>
<td>![Progress Icon]</td>
</tr>
<tr>
<td>Adherence to medicine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood pressure monitoring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weight monitoring</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In the next section you will find tips for preserving your self-esteem and dignity. As you read think about what you most value about yourself.
Section 3: How can we maintain our self-esteem and dignity as we age?

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>As we age, we feel invisible and less valued.</td>
<td>Ageing is a natural and often a very satisfying phase of our life. We are all getting older no matter what. Our worth is not based on our age. Our age is simply a number and does not influence our value as a human being. Preserving our self-esteem is a skill that we should not abandon as we grow older. Good self-esteem includes valuing ourselves and maintaining our dignity and independence as we age. Our health, cognitive ability, sense of control over our life, and social inclusion support our self-esteem.(^5)</td>
</tr>
</tbody>
</table>

3.1 What causes us to lose our self-esteem and dignity?

Various life events may affect our self-esteem, the loss of loved ones, health issues, retirement and a drop-in our socio-economic status can all lead us to feelings of loneliness and irrelevance and may affect our self-esteem and trigger depression.

Ageism also has a serious impact on our self-esteem. Ageism is having unfair and untrue beliefs about people or discriminating against people based on their age. Discrimination is the unfair or prejudiced treatment of people and groups based on their characteristics such as age, race, gender, sexual orientation). Ageism is everywhere in society and even in us. We can be ageist about ourselves (internalised ageism), or ageism can be systemic ageism (ways in which sections of society, including individuals, institutions, laws and policies work together to sustain ageist attitudes, actions or language. It is common to hear and read negative attitudes to ageing via social media, news stories and jokes. However, this does not mean that we should ignore and accept unfair treatment because of our age. Ageism is equally unacceptable as other types of discrimination e.g., racism, sexism, ableism.\(^6\)

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Examples of ageism

- **Self-directed ageism** is when we ‘take to heart’ a negative attitude to age we have experienced from others. We may then start to have self-doubt and develop a negative perception of ourselves. We might start to believe that we are a burden, or that we are worthless in our community.

- **Systemic ageism** is when social norms, practices, policies and laws are unfair and exclude older adults, such as a rigid retirement age without consideration of our ability or wish to work; or older adults’ exclusion from work opportunities, health research or health insurance policies that use age as an exclusion.

- **Ageism can also be made worse by other dimensions of our identity such as our gender, race and social economic status etc**, which increase the effects of discrimination in our personal lives as well as our access to essential services such as health and care, housing and education. Older women are especially impacted by gender inequality, socio economic status and ageism as we become older.

![Info]

Remember whatever situation we are facing it is important to acknowledge that we are not powerless.

We can all take steps to address the negative effects of discrimination that we face.

### 3.2 How does ageism affect our self-esteem and dignity?

Ageist attitudes, thoughts, and actions do much more than insult us and make us feel undervalued. Ageism can have a significant effect on our mental and physical health, sense of self-worth, social life, and even our finances. Self-directed ageism can also result in poorer health outcomes and slow recovery from illness. In addition, if we have a low self-esteem, we are more likely to engage in unhealthy habits such as smoking and drinking. Low self-esteem may cause us to lose our friends, affect our mental health and create barriers to access health and care services.

**Effects on social well-being**

Ageism can result in social isolation and loneliness. We may feel rejected by family members and withdraw from friends and social events. Loneliness can lead to stress, reduced quality of sleep, weakened immune system, increased risk of physical and mental illness and cognitive decline. Ageism can also lead to financial
insecurity, such as lost work opportunities due to our age and increased costs of health insurance as we age.

**How can we address ageism?**

Firstly, it is important that we accept that we are getting older. Our body functions may not be the same as they used to be. We may have more wrinkles and grey hair. It is normal to feel unhappy about these changes. However, we should try to keep everything in perspective, we still have plenty of life to live and much to offer our family, friends, community and society.

Try these tips to address ageism.⁷

**Tip 1: Strengthen intergenerational bonds.** Try to spend more time with children, grandchildren, younger coworkers, or other younger people in our community. Learn about them, their views and values, and share our own. Stay open-minded and try to understand different views. Find opportunities to learn new skills from younger people such as internet technology. Share our experience and skills with younger people depending on their interests. Doing things together helps develop friendships. Helping others is a good way to strengthen our resilience.

**Tip 2: Push back on ageist attitudes or actions.** If we receive an ageist comment or face discrimination because of our age, don’t allow it to go unchallenged. We do not have to be defensive or angry. Just offer a gentle reminder and provide examples to make our point. E.g., if we are exercising and a person tells us that we should not be doing that at our age, we can respond, “We love exercising, it is good for our health and wellbeing, most older adults enjoy staying active and sometimes older people are even fitter than people much younger than us.”

**Tip 3: Defy the unfair and untrue beliefs about older people** Although verbally challenging ageist remarks is important, we can also show by our practical actions that the unfair and untrue beliefs about older people are untrue. Resisting these untrue beliefs improves our self-esteem and reduces our risk of mental health issues. We should try to maintain a sense of independence in many areas of our life. Stay involved in community events and meetings that matter to us. Join with other older people and younger people to take actions against ageism and advocate for changes in systemic practices, laws and policies that exclude older people. Maintaining a healthy

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lifestyle and working towards achieving healthy ageing, can help us to continue to do the things that are important to us.

**Tip 4: Focus on the positive.** Focus on what we have gained rather than what we have lost as we age. Overcome negative messages by choosing to focus on the positive things in our lives. E.g., Thinking about what we have gained as we age e.g., becoming more assertive, more patient, more sympathetic etc. Aging is not only about loss. Our gains as we age are often greater.

**Tip 5: Manage stress** knowing how to manage our stress can help us stay confident and build our self-esteem. It can also help us counter the negative physical and mental effects of self-directed ageism, such as depression and chronic health conditions. *(See section 2 on managing stress).*

**Tip 6: Learn how to deal with discrimination at work age** discrimination at work occurs when a supervisor or co-worker treats us less favourably due to our age, e.g., we may be denied a job because of our age; be overlooked for promotion due to our age or mocked by colleagues. Consider if the incident was due to ageism or was there other reasons. Mention the issue directly with your colleagues or supervisor. They might apologize and offer ways to right the wrong. If we cannot find a resolution, find out who is available in your area to advise us about what further action we may be able to take.

### 3.3 How can we maintain and expand our social connections?

Human beings need to connect with others. Social connections are essential for our wellbeing and self-esteem. While we may feel lonely sometimes, we thrive within relationships and communities of people. Loneliness and isolation can affect our mental and physical health, increase our stress and trigger anxiety and depression. Loneliness and isolation also increases our risk for heart disease and stroke.
What causes loneliness and isolation?

A variety of factors can cause us to experience loneliness. Some causes of loneliness may involve the way we see ourselves and the world around you. Other causes are external such as where we live, our physical limitations, and the actions of others. Some people are more likely to face loneliness and isolation than others. For example, people with different gender identifies (LGBTQ+) may experience more social exclusion, and people living with disabilities and older adults with chronic diseases can feel more physically isolated.

External factors include living in a rural area with large distances between us and our neighbours, poor transportation system; living in an urban area with poor planning, air and noise pollution, and multiple barriers for us, other older people and people with disability to travel and be mobile. Relocating to the area as a migrant or refugee; losing our lifelong partner or close friend can lead to a sense of isolation; Too much time on social media can also increase our loneliness.

Internal factors: shyness, low self-esteem, language limitations or hearing or sight problems may discourage us from meeting new people or from participating in social events. This can lead to self-isolation, even though we really want to engage with others.

Because there are so many different causes of loneliness and social isolation there is no quick solutions. However, by trying out various coping strategies we can find ways to stay connected.

Try these tips for overcoming loneliness and social isolation:

**Tip 1: Expand our social network.** Whether we just relocated to a new area or simply feel a lack of social support, forming new connections might help us overcome feelings of loneliness. Ask about clubs or groups to join in the area. There might be clubs specifically for older people or intergenerational clubs which provides the opportunity for older and younger people to interact. Think about learning new skills that we would enjoy such as cooking, gardening, swimming, handicrafts, dancing etc. Or think about teaching these skills to others. Consider volunteering in your community for something we really care about. If we use social media, we can usually find long lost friends and reconnect with them.

**Tip 2: Overcome our fears about socialising.** How we feel about ourselves can make a big difference in how we relate to others. If we believe that we are boring, weird or burdensome, we might hesitate to reach out. When we feel anxious about socialising, we might be frightened that we cannot control our panic attack.

Try these steps: slow down, start with focusing on our breathing, take a slow breath in and a longer breath out. This kind of breathing exercise can
calm our nerves and reduce a rapid heartbeat. Try to slow down our pace of speaking. Use pauses to collect our thoughts. Shift our focus from ourselves to listening carefully to other people. Be curious about what the other person is saying. We will see improvement over time.

**Tip 3: Address mental health issues.** They can lead us to self-isolate and increase our feelings of loneliness. Learn as much as we can about our condition, treatment options and self-care practices. *(See section 2 and section 4 for more information about mental health).*

**Tip 4: Use technology to overcome isolation.** Face-to-face interactions are very important to our mental well-being. Socialising with others promote positive feelings and counters stress.

However, not all of us are able to enjoy these types of interactions regularly. If we live in a rural area and have access to an internet connection and an android phone, we can use the internet to connect with friends and family, and even join online clubs and forums with people who have similar interests. If you are unfamiliar with using the internet for communicating, identify a person in your community who can help to teach you the skills you need. Younger people are often very skilled with internet application and social media and enjoy sharing their skills.

**Using assistive devices/ technology to reduce barriers to social interactions.**

Certain disabilities, such as hearing, or sight loss are associated with loneliness and isolation. The use of assistive tools can make socializing easier. Some examples include text-to-speech systems for nonspeaking people, hearing aids for people with hearing loss, electronic fluency devices for people who may have a speech impairment, and communication boards for people with limited language skills. You are never too old to learn how to use these tools. Get to know your options, and don't feel ashamed to ask for help and guidance from friends and service providers in your community.

**Key takeaway:** the more we take the initiative to reach out, the better our chances of overcoming loneliness.
3.4 How can we maintain personal hygiene and grooming?

Having good personal hygiene contributes to our positive self-image, wellbeing and confidence. Good personal hygiene also helps prevent disease and enhance our social acceptance.

Bathing

Taking a regular bath or shower and caring for our hair, nails and oral hygiene are enjoyable and relaxing.

Skin Care

Our skin is the largest organ in our body. Its main job is to protect our body from germs and infections. The skin also helps to regulate our body temperature and is our biggest sense organ. As we age our skin’s protective function decreases, and our skin becomes less elastic, is thinner and produces less oils to moisturise it. Our skin also loses fat and no longer looks as plump and smooth as it once did. It may become drier, itchy, and more susceptible to damage. Scratches, cuts, or bumps can take longer to heal.

These changes make good skin care essential. If we keep our skin clean and dry it will help avoid itching and irritation. Healthy eating including plenty of vegetables and fruit will help to maintain healthy skin. If our skin is very dry, we can try using moisturiser or natural herbs such as aloe vera or coconut oil or use mild soap.

Try these tips for skin care.

- Some sun is good for us, but we should avoid staying too long in bright sunlight to avoid skin damage. We should wear a hat to shade our face and eyes, and long sleeves to protect our arms.
- Regularly check our skin for changes in moles, birthmarks, or new growths such as: irregular shape, one half of growth looks different from the other half, irregular borders around the growth, colour changes or more than one colour in the growth, the size of the growth is bigger than the size of pencil eraser; the growth is changing in shape or size or becoming itchy and tender to touch. If you find any of these signs check with your health care provider as soon as possible to make sure that it is not skin cancer.
• If we have diabetes, we need to take extra special care of our skin, we can develop an infection more easily. Seek immediate medical care for a skin or nail infection as it can quickly become serious. If we have diabetes, we should check our feet carefully every day for small cuts or scratches. Treat cuts, scrapes, and wounds immediately, gently wash the area with soap and water and cover the wound with a clean gauze dressing. To help the skin heal, clean the wound every day. If it fails to heal after a few days, or gets worse, seek medical care.

Dressing and grooming

A common myth is that as we age, we have less interest in how we look, and focus more on comfortable clothes. The fact is dressing and grooming remain very important to us as we age. It is a way to express our personality, increase our confidence, self-esteem and dignity. There is no such thing as needing to dress for our age, such as wearing muted colours and conservative styles. We should wear what makes us happy and enjoy choosing the colours and style that we love.

Hair care remains important as we age.

A good haircut can provide an enormous boost to our confidence and make us feel wonderful. Having a haircut also provides a good occasion for socialising. We can often have our nails manicured in the same place. Be daring if you have had the same hair style for years, try new styles and colours. Keeping our hair in good condition help us feel well Try using natural herbs and oils as conditioners, such as coconut oil, aloe vera, jojoba oil and lemongrass oil. Eating a nutritious diet will also improve the condition of our hair.

How can I take care of my teeth and mouth?

Taking care of our mouth and teeth is an important part of our daily hygiene practice. Good teeth care contributes to our confidence and sense of wellbeing and is vital for supporting our enjoyment of eating. As we age, we increasingly have tooth and gum problems, particularly if we are unable to access preventative dental treatment. If we do have access to a dentist prevention of tooth and gum disease is better and cheaper than waiting to go when we have a problem. Ideally, we should try to visit a dentist every 6 months to have our teeth cleaned and descaled.

To maintain tooth and gum health we should brush our teeth at least twice a day to remove the food caught between our teeth. Our teeth should be brushed from top to bottom rather than from side to side. The yellow plaque that forms where the teeth meet the gums should be scraped off if possible. Plaque contains bacteria, which contributes to tooth decay and gum disease. Clean under the gums regularly
by passing a thin strong thread (dental floss) between the teeth will help to avoid this problem.

**Key takeaway:** Cut down on sweet foods and carbonated drink. Sugar consumption increases our risk of tooth decay.

If we have dentures, we should clean them using toothpaste and a brush and rinse well. Store them in a container with cold water at night. Rinsing your mouth with a solution of salt water or sodium bicarbonate several times a day will help to freshen the breath and prevent infection. Apply vaseline on your lips to prevent drying and cracking. Dentures may need to be replaced every few years, depending on how well they continue to fit well in your mouth. Check with your dentist if you feel your dentures are loose or are rubbing your gums and causing pain.
3.5 How can we manage bladder and bowel problems as we age?

Here is a common myth about bladder and bowel problems.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>We cannot avoid bladder and bowel problems when we age. We just have to put up with them.</td>
<td>Bladder and bowel issues are not an inevitable part of ageing. There are many things we can do to improve our situation. We should not feel embarrassed to seek help.</td>
</tr>
</tbody>
</table>

**Urinary Tract Infections**

Urinary tract infections (UTIs) are bacterial infections that affect the urinary system, including the bladder and kidneys. As we age, we have an increased risk of UTIs due to the ageing process in our pelvic floor which supports our bladder and outlet tube.

**What are the signs and symptoms of a urinary tract infection?**

Seek prompt advice from a health care provider if we think you may have a UTI such as:

- Frequent peeing,
- Pain or discomfort in the lower abdomen,
- Sudden urges to pee,
- Feeling you cannot empty your bladder completely,
- Urine that is cloudy, bad smelling or contains blood,
- Feeling unwell, with aches and pains and tired.

Here are some tips that can help reduce our risk of UTIs:

- **Stay hydrated**: Drink adequate fluid to prevent dehydration. Sufficient water intake promotes urine production and flushes bacteria out.
- **Practice good hygiene**: Maintain regular bathing and cleansing of genital area. It's important to wipe from front to back after using the toilet to prevent the spread of bacteria from the anal area to the bladder.
- **Go to the toilet as soon as needed**: avoid holding urine for long periods. Practice regular and timely peeing.
- **Avoid irritating hygiene products**: harsh soaps, douches, and powders, can irritate our urine outlet and increase the risk of UTIs. Use a mild soap in the genital area.
• **Avoid constipation:** A high fibre diet, fluid intake, and physical activity facilitates regular bowel movements and prevents constipation.

• **Take regular bathroom breaks:** Emptying the bladder at regular intervals helps prevent the multiplication of bacteria in the urinary tract.

• **Annual health screening check-ups** can help identify and manage underlying conditions that may contribute to UTIs.

Bladder and bowel problems tend to increase with ageing. Embarrassment about bladder and bowel problems prevents us from accessing help to manage them. There are always things that can be done to improve the situation. Left untreated constipation and urinary and faecal incontinence can significantly impair our quality of life.\(^8\)

**Common bladder problems**

• **Urinary incontinence** is a loss of bladder control, which means we sometimes pee unintentionally. It is caused by a variety of bladder problems. Urinary tract infections such as cystitis causes a sudden urge to go to the toilet and a burning sensation when peeing.

• Getting up to pee often during the night is called nocturia. This can disturb our sleep and make us feel tired during the day.

• **Urge incontinence** is where we need the toilet urgently, and it may be difficult to reach it in time. Urge incontinence also causes us to go to the toilet more often. It is often caused by an overactive bladder.

• **Stress incontinence** is when we pee a little when we cough, sneeze, laugh or exercise – including during gentle walking. It is caused by a weak bladder outlet and weakness of the pelvic floor muscles that support the bladder. Women often experience this due to damage to the pelvic floor during childbirth. The weakened pelvic floor muscles can also cause a ‘slipping down’ (prolapse) of the uterus, bladder, or bowel. Women are also affected after their menopause by loss of hormones which keep the uterus, bladder, and vagina healthy. Men can experience stress incontinence when they have had an operation on their prostate gland.

• In men over 50, bladder problems can be a sign of a prostate gland problem. If you have a weaker flow of pee, you should visit your health care provider to check the problem. If you notice blood in your pee or feel pain when peeing, you should also see your health care provider as soon as possible.

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Common bowel problems

Many of us get constipated or have an upset stomach occasionally. However, if any of these problems happen regularly or are starting to affect your daily life, we should see our health care provider.

**Constipation** is a common type of bowel problem when your poo becomes hard and difficult to pass. Constipation may be caused by not eating enough fibre in your diet; not drinking enough; not being active enough; certain medicines such as some painkillers; not being able to get to a toilet or postponing going even when there is an urge to go; neurological diseases, such as Parkinson’s and bowel diseases such as irritable bowel syndrome (IBS).

**Diarrhoea** is frequent, urgent, watery poos that can cause us to have an accident if we can’t find the toilet in time. Diarrhoea has many causes, including the overuse of laxatives, a bacterial or viral infection, or having IBS or other bowel diseases.

**Bowel incontinence** is when we cannot control our bowel movements, and some poo accidentally leaks out. It’s usually a symptom of an underlying medical condition for example, constipation, diarrhoea and stroke. Bowel incontinence can also be caused by muscle weakness or damage to the muscles that control the anus. Some women who had damage to the pelvic floor during childbirth can develop incontinence of the bowel later in life.

**Cancer of the bowel** – our risk for bowel cancer increases as we age. Bowel cancer symptoms can include blood in our poo, changes in our bowel habits and lower abdominal pain, bloating or discomfort. If we have bowel problems for more than 4 weeks, we should go to see our health care provider.

**What are the treatments for bladder and bowel problems?** The treatment will depend on the type of problem we are experiencing. What works will vary from one person to another. Sometimes more than one treatment will be needed.

- **Pelvic floor exercises** can help with stress incontinence and urge incontinence by strengthening the muscles around the bladder or bowel.
- **Bladder or bowel training** involves learning techniques to hold pee for longer so that we can use the toilet less often and gain control of our bladder. Bowel training involves establishing a regular time to poo and stimulating our bowels to empty themselves.
- **Medications may be available for different types of incontinence**. Talk to your health care provider. Do not purchase medicines by yourself.
- **Surgery may be an option for some people** if other treatments haven’t worked.

**Note:** See appendix for links to handouts on pelvic floor exercises for men and women and bladder training guidelines. Ask a help care provider for support.
**Self-care tips for care of bladder and bowel problems:**

- If we frequently need to get up to the toilet at night – try drinking less in the few hours before we go to sleep.
- Cut down on tea, coffee and fizzy drinks; also, alcoholic drinks or drinks with artificial sweeteners as they may irritate our bladder and make it more active.
- Stopping smoking decreases our risk of bladder cancer, and reduces coughing, which can put pressure on our pelvic floor muscles.
- Maintain a healthy weight. Being overweight puts pressure on and can weaken our pelvic floor muscles.
- Avoid constipation by eating plenty of fibre-rich foods and making sure we are drinking plenty of liquid.
- Keeping as active and mobile as we age will help keep our bowel healthy.
- Ask our health care provider if any medicines we are taking could be disturbing our bladder.

**Incontinence products.** Before we start using incontinence products long term, it is important to identify the cause of our problem. There may be treatment that can help. Our local health care provider may be able to inform us about the type of products and devices available in our area. In some countries incontinence products may be provided for free from the health system or civil society organisations. You may also be able to purchase continence products in pharmacies and supermarkets, but they will be more expensive. Another option is online purchase of incontinence products which are much cheaper but require you to buy in bulk. Such as the link to Ali Baba online shopping website below:

There are a variety of pads, pants and other products. Find out what is available in your area.

The following can be used by men and women: washable products such as re-usable pads; all-in-one pads with plastic backing and adhesive patches to seal the sides; For men there is a range of products that fit over the penis and collect pee into a bag strapped to the leg; men can also wear pads and pants, or dribble pouches.

Adapt your living area to make it easier to use the toilet: consider adding grab bars to the wall in the toilet to provide support for toileting. Use nonslip mats on tiled floors. Make a seat cover for the toilet seat to make it higher and easier to sit down and stand up. Consider making a commode chair with a bedpan to put beside the bed at night to make it easier to go to the toilet. Keep a plastic bucket with lid near the bed to make it easier to dispose of soiled pads at night. Adapt clothing to make it easier to manage when toileting, such as using elasticated waist bands on trousers.

Maintain good personal hygiene and comfort when managing incontinence.

- Wash skin regularly and dry carefully with a soft cloth or towel.
- Change pads regularly and dispose of them safely.
- If washable pads and pants, make sure to rinse them well to get rid of all the washing powder and dry well in sunlight.
- Use a barrier cream to protect your skin such as Vaseline. If skin becomes red or sore, make sure that pad fits properly and is not rubbing. Avoid skin allergies caused by washing powder. If your skin becomes broken it can lead to a skin infection. Seek care from a health care provider.
- Keep wet clothes or sheets in a bucket with a lid until washed. Mop up spills quickly.
- The smell from bowel incontinence is more difficult to hide. Change soiled pads as soon as possible and put them into a sealed bag.
- A healthy balanced diet and plenty of fluids can help keep skin healthy.
3.6 How can we prevent falls?

Here is a common myth about falls.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
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<tbody>
<tr>
<td>Older people worry too much about falling.</td>
<td>In fact, we may not worry enough about falls. Each year it is estimated that one out of three adults aged 65 and older have a fall. And approximately one out of every three older people who fall suffer moderate to severe injuries (hip fractures or head trauma). Yet, we often think falling is someone else’s problem. We are not aware of the precautions we should take in our home where most of the falls happen.</td>
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What causes falls?

Common causes of falls include safety hazards in the home such as slippery surfaces, poor lighting; and physical issues such as poor eyesight; hearing problems, slower reflexes, muscle weakness in our legs, loss of balance, dizziness due to medications or chronic diseases, and foot problems.

Falls can severely affect our health and wellbeing.

A fall can happen very quickly when we least expect it. Slipping on a wet floor or falling down a step can break a bone or cause a head injury.

As we age a broken bone or head injury can lead to more serious health issues and may cause long-term disability.

Tips to prevent a fall.

If we take good care of our health, we can lower our risk of falling.

- **Stay fit and active.** Regular exercise improves our muscles and makes us stronger. Exercise also helps keep our joints, tendons, and ligaments flexible. Mild weight-bearing activities such as walking or climbing stairs, may slow bone loss from osteoporosis (loss of bone mass) a disease that makes bones weak and more likely to break.
• Due regular balance and strength training exercises. (See section 2 for more information)
• Eat a healthy balanced diet especially ensure we get enough foods with calcium and Vit D to help protect your bones (See section 2 for more information)
• Review medications: talk to a healthcare provider to check if our medicines may cause dizziness.
• Check eyesight and hearing: poor vision and hearing can increase the risk of falls. Use glasses and hearing aid as prescribed.
• Make our home safer from falls, remove tripping hazards such as loose rugs, clutter, and cords. Install extra lights as needed.
• Install grab bars and handrails in toilet, bathroom, and stairways. Use no slip mats for bathing and toileting.
• Wear appropriate footwear: Wear shoes that are comfortable, provide good support, and have non-slip soles.
• Use assistive devices: such as a walking cane or walkers as needed.
• Stay hydrated: to prevent dizziness by drinking plenty of water.

What should I do if I fall?

Whether you are at home or somewhere else, a sudden fall can make you anxious and upset. Stay as calm as possible and do the following things:

• Breathe. Take several deep breaths to help you relax. Remain still on the floor or ground for a few moments to recover from the shock of falling.
• Decide if you are hurt. Avoid trying to get up too quickly.
• Is there is someone in the house or close by that you can call for help.
• If you are by yourself and think you can move yourself safely without help, roll over onto your side. Rest again while your body and blood pressure adjust. Slowly get up on your hands and knees, and crawl towards a study chair.
• Put your hands on the chair seat, then slide one foot forward so that it’s flat on the floor. Keep your other leg bent so the knee is on the floor. From this kneeling position, slowly rise and turn your body to sit in the chair.
• If you are alone and do not feel safe to move, try to get into a comfortable position and wait for help to arrive.
• If you live alone, it is a good idea to prepare in advance in case you have a fall. If you have a mobile phone keep it close to you. Arrange for a daily contact with a family member or friend in your community.

In the next section you will learn how to prevent common infectious diseases. As you read think about the most common infectious diseases in your area and how you can protect yourself.
Section 4: How can I prevent infectious diseases (communicable diseases)?

As we age our immune system becomes weaker which makes us more vulnerable to infectious diseases, especially if we have a chronic health condition or an unhealthy lifestyle. Infectious diseases (communicable diseases) are caused by tiny germs that can only be seen under a microscope such as: bacteria, viruses, parasites, and fungi. It is important that we take precautions to avoid infections as they can cause serious illness, create chronic health problems, be life threatening and spread to other people.

4.1 What are communicable disease infections?

Infectious diseases can be spread in various ways:

1. Direct contact between people via touching or exchange of body fluids, or a spray of droplets from the lungs when coughing or sneezing, e.g., Covid 19, pneumonia, influenza and tuberculosis, sexually transmitted diseases.

2. Indirect spread of infection can be via airborne spread of germs via dust particles or droplets from the lungs, touching objects that have been contaminated by germs such as door handles and surfaces;

3. Contaminated food and water; e.g., food poisoning, cholera, dysentery.

4. Insects’ bites such as mosquitos; e.g., malaria, dengue, rabies;

5. Animal to person contact; rabies, toxoplasmosis.

6. Soil, water, and vegetation also contain infectious germs that can be transferred to people. E.g., the tetanus bacteria lives in the soil and can infect us via a skin wound, hookworm.
4.2 How can we prevent common infectious diseases?

Here are 10 simple tips to help us prevent infectious diseases.

1. Stay up to date with vaccinations *(See section 2)*

2. **Practice good hygiene** such as regular handwashing. Hand-to-face and hand-to-mouth transmission are among the most common ways that infectious diseases are spread.

3. Cover our mouth with our elbow when coughing or sneezing to prevent germs infecting others.

4. **Stay at home if we feel sick.** Wear a face mask to help us avoid getting an infectious respiratory disease and prevent us from infecting others. Always wear a face make if we have a sore throat, runny nose, coughing or sneezing.

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**Wash hands properly**

Wash our hands thoroughly and vigorously with soap and running water for at least 20 seconds followed by hand drying with a clean towel or drying by moving your hands in the air.

If we don't have water and soap with you use a hand sanitizer or alcohol wipe.

Source: NHS
5. **Practice food safety** Germs thrive on virtually all food items, particularly foods left at room temperature *(See section 2)*

6. **Avoid sharing personal items** such as toothbrushes, towels, razors, handkerchiefs, and nail clippers. They can carry germs such as bacteria, viruses, fungi, and parasites.

7. **Travel safely**- infectious diseases can easily be picked up while traveling to other places or countries. Be careful about water – use bottled drinking water if we are unsure the tap water is safe. **Avoid raw and uncooked meat, poultry and fish.** Wash or peel fruit before eating. Avoid eating salads in places where clean preparation cannot be guaranteed. Check with our health care provide about vaccine we might need when travelling to another country.

8. Practice Safe Sex *(See section 6)*

9. **Avoid animal-borne diseases**- protect against mosquito bites by using insect repellent, mosquito nets and wearing long sleeves shirts, and socks or long-legged trousers. Make sure if we keep pets, they are up to date with vaccine such as rabies.

10. Practice good hygiene and regular handwashing in hospitals and outpatient services. Hospital-acquired infections are a significant cause of illness and death because health facilities can become breeding grounds for infections.

For more information about common infectious diseases that can be protected by vaccination: Covid 19, influenza, pneumonia, shingles, diphtheria, tetanus and pertussis, *(See section 2).*

An additional infectious disease which is important for us to know about is tuberculosis. As we age, we become more susceptible to tuberculosis infection due to our weaker protective system. Many of us have been infected with TB when we were young, and it remains in active in our body without causing illnesses. As we get older and have a weaker protective system, the TB can become active. We can spread TB to other people without being aware that we are infected.

**Tuberculosis**

Tuberculosis (TB) is caused by a type of bacteria and most often affects the lungs. TB is spread through the air when people with lung TB cough, sneeze, or spit. A person needs to inhale only a few germs to become infected. Most of the people who fall ill with TB live in low- and middle-income countries, but TB is present all over the world. Many people all over the world have been infected with TB bacteria but do not spread it to other people unless it becomes active in their body.
Tuberculosis is preventable and curable if found early and treated. The treatment is a combination of antibiotics that need to be taken for several months. Symptoms of TB may be mild at first, and the infected person can spread TB to others without knowing. Common symptoms are a prolonged cough (sometimes with blood), chest pain, weakness, tiredness, weight loss, fever and night sweats. Certain conditions can increase our risk of TB disease: diabetes (high blood sugar); weakened immune system (for example, HIV or AIDS), malnutrition and smoking.

To prevent TB infection: we should seek prompt medical attention if we have a prolonged cough, fever and unexplained weight loss. Early treatment improves our chances of recovery and stops us spreading TB to others. We should get tested for TB infection if we are at increased risk, such as if we have HIV or are in contact with people who have TB. If we are prescribed treatment for TB, it is very important that we complete the full course; wear a mask, cover our mouth and nose with our elbow when coughing or sneezing, and dispose of sputum and tissues properly.

**Key message to prevent infectious diseases:**

important things we can do to prevent common infectious diseases is ensure that we keep updated on vaccinations; practice a healthy lifestyle (see section 2) and maintain good personal hygiene.

In the next section you will learn about common non communicable diseases (NCDs) and how to prevent and manage them.
Section 5: How can we prevent and manage chronic diseases?

As we age our risk of having a non-communicable disease (NCD) increase. They are the number one cause of death globally and are mostly preventable.

5.1 What are chronic diseases (non-communicable diseases)?

Non communicable diseases (NCDs) are chronic diseases, that affect our health and wellbeing over a long period of time. We can have more than one NCD at the same time. They are called the ‘silent killers’ as we may be unaware, we have an NCD until we have a health checkup. NCDs can progressively get worse if not detected and managed. NCDs are not caused by infections and cannot be transmitted from person to person.

What causes non-communicable diseases?

Non communicable diseases share 5 major risk factors, these factors are all related to unhealthy lifestyle choices.

Unhealthy lifestyle practices - risk factors

1. Physical inactivity
2. Unhealthy diet
3. Harmful use of alcohol
4. Tobacco use
5. Exposure to air pollution

Effects on our health

- High blood pressure
- Overweight and obesity
- High blood sugar level
- Raised cholesterol level (unhealthy fats that damage heart and blood vessels)
- Lung damage

Increased risk of NCDs

What are the 5 most common types of NCDs?

1. Cardiovascular diseases (CVDs), such as heart disease and stroke
2. Diabetes
3. Chronic respiratory diseases, such as chronic obstructive pulmonary disorder (COPD) and asthma
4. Cancers, such as lung cancer, stomach cancer, liver cancer, colorectum cancer, breast cancer and others
5. Mental health, neurological and substance disorders (MNS) such as depression, anxiety, dementia, and alcohol and drug abuse.
How can we know if we are at risk of NCDs?

We are often unaware that we have developed an NCD. An important first step to prevent NCDs is to have an annual health screening, even if we feel well and healthy. NCDs often have no symptoms until they become serious. The sooner we can identify that we have NCD risk factors the sooner we can start to take action to prevent or manage them, avoid complications and serious illness.

What happens at a health screening?

The health provider will:

- Check our health history and family history of NCDs,
- Check our weight and height to estimate if we are a normal weight,
- Check our blood pressure,
- Take a blood test for blood sugar level and cholesterol levels,
- Discuss about our lifestyle practices such as physical activity, nutrition, smoking and drinking habits,
- Our community volunteers may also be able to provide a basic health screening and refer us to the health facility if we have risk factors.

What should we do if we have NCD risk factors?

If we are found to have risk factors such as: high blood pressure, overweight, high blood sugar or high cholesterol, our health care provider will discuss about how we can reduce our risks. Depending on our risk factors or symptoms, in addition to recommending healthy lifestyle choices our health care provider may prescribe medicine e.g., to control high blood pressure or reduce our cholesterol level. We will need to return to the health facility for regular follow up.
What should we do if we develop an NCD?

It is important that we seek treatment from our health care provider. The treatment we receive will depend on our type of NCD, our symptoms and the progression of the disease. The health care provider will discuss how we can manage our disease, and we may receive medicine to control our NCD and prevent complications. If we need further tests or specialist consultation, we will be referred to the next level of the health care system.

Remember it is important to ask the health staff questions so we can learn more about our health and discuss our concerns. Joining a small support group of people in our community who have NCDs is helpful. It allows us to share our experiences and support each other.

5.2 How can we prevent chronic diseases?

There are many things we can do to prevent and manage NCDs. Even small changes to our lifestyle practices can make a positive difference.

Check the topics below to help you identify areas of your lifestyle that may need improvement, and consider making a self-care plan (See section 2 for more details)

- How to stay active – page 11
- Eat a healthy diet and stay hydrated – page 18.
- Get a good night’s sleep – page 28.
- Reduce and manage stress – page 29
- Maintain your brain – page 32.
- Quit smoking – page 35.
- Avoid harmful use of alcohol – page 37.
- Attend regular health check appointments – page 43.

It is very important to learn about our chronic disease/s. With knowledge and practical experience of managing NCDs, we will become a local ‘expert’ and an active partner in collaboration with our health care provider to manage our disease and prevent it from getting worse. We will also be a valuable resource in our community to support others to prevent and manage NCDs.

In the section below you will find information and tips for preventing and managing the 5 most common NCDs.
5.3 What are cardiovascular diseases (CVD)?

Cardiovascular diseases (CVDs) is a term used to describe diseases of the heart and/or blood vessels. CVDs are the world’s leading cause of death. CVDs can restrict blood flow to our heart, brain or other areas of our body, due to a blood clot (thrombosis) or a build-up of fatty deposits in our blood vessels. Cardiovascular diseases can cause a heart attack and stroke. It is very important that we detect CVDs early so that they can be treated and avoid serious complications.

The 3 most common types of CVDs:

- **Coronary heart disease** - damage to the blood vessels of our heart.
- **Stroke** - caused by a blood clot in blood vessels in our brain.
- **Peripheral arterial disease** – caused by fatty deposits in our blood vessels which restrict or block the blood flow from our heart to our legs.

There are many risk factors for CVDs including: high blood pressure; smoking; unhealthy diet high in sugar and unhealthy fats; diabetes; drinking excessive alcohol; lack of exercise; air pollution, chronic stress; family history of CVDs; older age.

**What can we do to reduce our risk of CVDs?**

- Assess our lifestyle practices and plan to introduce health lifestyle choices. See section 2 for self-assessment and self-care plan.
- Have an annual health screening.

**Most cardiovascular diseases can be prevented by:**

- Quitting tobacco
- Eating a healthy diet and maintaining a normal body weight.
- Taking regular physical exercise
- Stopping harmful use of alcohol.
- Reducing exposure to air pollution

**Medication**

If we have a high risk of developing cardiovascular disease, our health care provider may prescribe medication to reduce our risk such as: medicine to reduce our blood pressure, medicine to control our cholesterol (unhealthy fat) level and medicine to prevent a blood clot.

Never take medicines without seeking our health care provider’s advice.
5.3.1 What is coronary heart disease (CHD)?

Coronary heart disease (CHD) occurs when the large blood vessels that supply oxygen and nutrients to our heart muscles become blocked or constricted by cholesterol (fatty substances). This causes chest pain that comes and goes called angina. Angina pain is a warning sign that we could be at risk of a heart attack or stroke. With treatment and healthy lifestyle changes, it is possible to control angina and reduce the risk of more serious problems. If some of the blood vessels becomes completely blocked, it causes a heart attack. This is a medical emergency.

The good news is that once we understand our risk for coronary heart disease, we can take action to reduce our risks.

What can we do to reduce our risk of heart disease?

- Have an annual health check even if we feel well. Coronary artery disease remains silent for a long time until our condition becomes serious. Our health check includes checking for risk factors for heart disease and measuring blood pressure, weight, blood sugar and cholesterol level.

What is high blood pressure (hypertension)?

High blood pressure is a serious medical condition. It damages our blood vessels and makes our heart work harder. It increases our risk of heart, brain, kidney, and other diseases. It is a major cause of death worldwide affecting both men and women. We are more at risk of high blood pressure as we age.

Blood pressure is too high if it is 140/90 mmHg or higher. It can become serious if not treated. The higher our blood pressure levels, the more risk we have for a heart attack, and stroke.

Risk factors of high blood pressure?

High blood pressure develops over time. Risk factors are unhealthy lifestyle choices, such as lack of regular physical activity and an unhealthy diet. Health conditions, such as diabetes and being overweight also increase our risk for developing high blood pressure.
What are the signs of high blood pressure?

High blood pressure usually has no warning signs. Many of us do not know we have it. Measuring our blood pressure is the only way to know whether it is high.

What are the dangers of high blood pressure?

High blood pressure can cause heart disease, heart attack, heart failure, stroke and brain problems and kidney disease. High blood pressure is also linked to poorer cognitive function and dementia in later life.

How can we prevent and manage high blood pressure?

Check our blood pressure regularly. If possible, buy a blood pressure measurement machine to keep at home. Have a regular health check and receive treatment if our blood pressure is high. (See section 2 for healthy lifestyle choices).

<table>
<thead>
<tr>
<th>Healthy diet</th>
<th>Physical activity</th>
<th>Avoiding tobacco and harmful use of alcohol</th>
<th>Managing stress</th>
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<tbody>
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**IMPORTANT:**

In addition to the positive lifestyle choices above, we need to reduce our exposure to air pollution. Some people with high blood pressure will also need to take medicine provided by their health care provider to control their blood pressure.
5.3.2 What is a stroke?

A stroke, or ‘brain attack’ is a serious condition. It happens when the blood flow to part of our brain is stopped. This can be caused by a blood clot, or fatty deposits (cholesterol) blocking a main blood vessel to the brain; or by a brain haemorrhage caused by high blood pressure bursting a blood vessel. The brain needs a constant supply of oxygen and nutrients to work. If the blood supply is stopped even for a short time, brain cells start to die. When brain cells die, some brain function is lost for example, a stroke may affect our ability to: move, speak, eat, think, remember, control our bowel and bladder, control our emotions, and control other vital body functions. **A stroke can happen to anyone at any time and is a medical emergency that needs immediate treatment.**

What are the risk factors for a stroke?

Our chance of having a stroke increases when we have:

- High blood pressure, blood pressure is 140/90 or higher;
- Heart disease or diabetes, a high blood sugar level damages blood vessels;
- smoking doubles the risk of a stroke;
- high blood cholesterol and lipids (unhealthy fats and oils) damages blood vessels and restricts blood flow to the brain, heart and kidneys;
- lack of exercise, obesity and excessive alcohol use are also important risk factors for a stroke.

What are the signs of a stroke?

The main stroke symptoms are:

- Face drooping – One side of the face is drooping or numb;
- Arm weakness – One arm is weak or numb.
- Speech difficulty

If we have any of these signs immediately call for help and contact emergency medical services.

What can we do to prevent a stroke?

Have an annual health check to check our risk factors for a stroke. Many stroke risk factors can be reduced or treated. Example if we have high blood pressure it can be managed by making healthy lifestyle practices and taking blood pressure medicine prescribed by our health care provider. **(Assess your lifestyle practices and make healthy lifestyle choices. See section 2).**
5.3.3 What is peripheral arterial disease?

Peripheral arterial disease (PAD) is the narrowing or blockage of the blood vessels that carry blood from our heart to our limbs. It is caused by the buildup of unhealthy fats in our blood vessels. PAD is more common in the legs than the arms.

What are the risk factors?

The risk factors are the same as the other CVDs: smoking; high blood pressure, damage to blood vessels which causes hardening and narrowing of the blood vessels (atherosclerosis); diabetes; high cholesterol and older age.

What are the signs and symptoms of PAD?

The symptom of PAD is pain in the legs with physical activity such as walking. The pain gets better after rest. However, up to 4 in 10 people with PAD have no leg pain. Symptoms of pain, aches, or cramps with walking can also happen in the buttock, hip, thigh, or calf. There may also be some muscle weakness in the leg and smooth shiny skin that is cool to the touch, or pain in one of your feet while resting.

How can we prevent PAD?

Healthy lifestyle choices can help prevent PAD such as: regular physical activity; healthy diet, quit smoking; control high blood pressure, reduce high cholesterol and control diabetes. (See section 2 for healthy lifestyle choices)

How can PAD be treated?

The treatment depends on how severe our PAD is, and what other health problems we have. Discuss with our health care provider about healthy lifestyle changes. Our health care provider many also prescribe medicine to reduce the symptoms and prevent complications of PAD. If our condition does not improve surgery may be advised to increase the flow of blood to our limbs.

5.4 What is diabetes?

Diabetes occurs when our body does not produce enough insulin. Insulin’s role is to control the level of sugar (glucose) in our blood, and to use the blood sugar to produce energy. Diabetes is when our body cannot control our insulin and our blood sugar becomes too high.

There are two main types of diabetes: Type 1 diabetes is often diagnosed during childhood or young adulthood. It is caused by a malfunction of the protective system of our body which damages the cells which produce insulin, causing a lack
of insulin; and **Type 2 diabetes** which is acquired in people 45 years and older. It is usually caused by an unhealthy diet, lack of physical activity, being overweight and other lifestyle factors.

**What are the signs and symptoms of diabetes?**

The common signs of diabetes are: hunger and fatigue; peeing more often and being very thirsty; dry mouth, itchy skin and blurred vision.

**How does diabetes affect our health?**

If diabetes is not identified and treated early, it can cause long term health problems:

- Damage to our eyes which can cause blindness;
- Restricted blood supply and nerve damage to our legs, which increases our risk of foot injuries and slow wound healing. Diabetes is a major cause of amputation of a toe, foot, or leg. Many amputations could be prevented with good daily foot care.
- Damage to the blood vessels to our heart and kidneys, causing heart and kidney disease.
- We can also experience complications of diabetes such as a sudden change in our blood sugar level, either too low blood sugar or too high blood sugar.

**Signs of a low blood sugar**

Typical early warning signs of a low blood sugar are feeling hungry, trembling or shakiness, and sweating. In severe cases, we may also feel confused and have difficulty concentrating. In very severe cases we lose consciousness.

**What should we do if we experience a low blood sugar?**

The immediate treatment for low blood sugar is to have some food or drink that contains sugar, such as dextrose tablets or fruit juice. It is a good idea to always keep something sugary in our pocket. After having something sugary, you may need to eat a longer-acting "starchy" carbohydrate food, such as a sandwich or a few biscuits. If you are a diabetic it is important that your family or neighbours know the signs of a low blood sugar, so that they can help you.

**Signs of a high blood sugar**

Symptoms of a high blood sugar develop slowly over a few days or weeks and may include increased thirst and a dry mouth, needing to peer frequently, tiredness and blurred vision, weight loss and recurrent infections such as bladder and skin infections.
Symptoms of high blood sugar can also be due to undiagnosed diabetes, we should see our health care provider if we are concerned about diabetes, we can have a test to check your blood sugar level.

What can we do to prevent diabetes? (See section 2 on healthy lifestyle choices)

- Have an annual health screening even if we feel well.
- Manage our weight.
- Exercise regularly
- Eat a balanced, healthy diet.
- Control our blood pressure.
- Limit our alcohol intake.
- Quit smoking.
- Reduce exposure to air pollution.

How can we stay healthy if we have type 2 diabetes?

A healthy diet and staying active will help us manage our blood sugar level. It will also control our weight and help us feel better. There's nothing we cannot eat if we have type 2 diabetes, but we need to limit the amounts of certain foods such as sugar, fat and salt. (See section 2 for a healthy diet)

We should eat a wide variety of foods – including fruit, vegetables and some wholegrain starchy foods like potatoes, bread, rice, noodles, cereals. Eat breakfast, lunch and dinner every day – do not skip meals; drink water rather than other drinks.

Other important self-care practices when we have diabetes.

- Take medicine carefully and correctly.
- If feasible purchase a blood sugar monitor to monitor blood sugar level at home.
- Keep appointments with our health care provider to control our disease.
- Take care of our emotional health, consider joining a peer support group.
- Be fully vaccinated; diabetes increases our risk of having infectious diseases.
Good foot care is especially important if we have diabetes.
To prevent serious skin infections and other complications, check our feet every day.
Look for calluses, cuts, sores, blisters, red spots, and swelling. Ask our health care provider for advice if we find a problem.
Keep our feet clean, wash in warm and not hot water to avoid burning our skin. Ask for help if needed to carefully cut toenails.
Wear shoes that fit well and protect our feet. Do not walk outside with bare feet.

5.5 What is chronic obstructive pulmonary disorder (COPD)?

Chronic obstructive pulmonary disorder (COPD) is the name for a group of lung conditions that cause chronic breathing difficulties. It includes damage to the air sacs in our lungs (emphysema), and chronic bronchitis which is chronic inflammation of the airways in our lungs.

COPD is a common condition that mainly affects us if we smoke, or we have long term exposure to smoke from other smokers (2nd hand smoke) or live or work for a long time in an area with air pollution. Many of us do not realise we have COPD until it is advanced. The breathing problems tend to get worse over time until it limits our everyday activities.

How do we know if we have COPD?

The main symptoms of COPD are increasing breathlessness particularly when we are active and a persistent cough with phlegm. Some people may dismiss this as just a "smoker's cough;" We may also have frequent chest infections and persistent wheezing. Without treatment the symptoms gradually get worse.
What causes COPD?

The main cause of COPD is smoking tobacco, or long-term close contact with people who smoke, and exposure to air pollution, both household air pollution from coal, charcoal or wood fires and open cooking stoves fuelled by kerosene, wood, animal dung and crop waste., and outdoor air pollution from traffic and transportation fuels such as gasoline and diesel, chemical from factories, coal powered electricity plants, construction sites, waste burning fires or slash and burn agriculture.

Air pollutants are very dangerous tiny, microscopic particles called ‘particulate matter’ or PM. The smallest size particles called PM 2.5 can damage our lungs and blood vessels and cause heart and lung diseases.

When should we seek medical advice about breathing problems?

We should see our health care provider if we have a persistent symptom of cough or breathlessness, particularly if we smoke or used to smoke or have had long term exposure to air pollutants. The sooner we start treatment the better to prevent further damage to our lungs.

What is the treatment for COPD?

The damage to the lungs caused by COPD is permanent, but treatment can help slow down the progression of the condition.

Treatment include stopping smoking, this is the most important thing we can do. (See section 2 on tips to stop smoking) Our health care provider may also provide medicine or inhalers to make breathing easier, and antibiotics if we have a chest infection. Breathing exercises and information about how to manage our breathing may also be provided. We also need to avoid exposure to air pollutants.

How can we prevent COPD?

COPD is largely a preventable condition. We can significantly reduce our chances of developing COPD if we avoid smoking. If we already smoke, stopping can help prevent further damage to our lungs. We should also reduce our exposure to air pollution.

How can we manage COPD?

- Take medicine as prescribed such as inhalers, this can help prevent flare-ups of the disease.
- Stop smoking. This will slow down or prevent further damage to our lungs.
- Exercise regularly. This will improve our symptoms and quality of life. Exercise until we are a little breathless is not dangerous, but do not push yourselves too far.
• Maintain a healthy weight. Take action to reduce our weight if overweight.

• Get vaccinated. When we have COPD, we are more vulnerable to infections. Receive annual flu vaccine; pneumococcal vaccine and an annual booster dose of Covid 19 vaccine.

• Avoid dusty places, fumes, such as car exhausts, smoke, air freshener spray, strong-smelling cleaning products, perfumes etc. Wear a protective face mask that protects against PM 2.5, if we are exposed to polluted air. If feasible protect our home from air pollution by using air filters and sealing at least one room in our home where we can be safe from pollution.

• Attend regular check-ups with our health care provider to monitor your condition.

• Join a support group with other people who have COPD.

• Take care of our relationships, —a chronic illness can cause stress for us and our family Difficulty breathing and coughing can make us feel tired, irritable and depressed. It is important to share our worries with our family and friends.

What is the future if we have COPD?

The outlook for COPD varies from person to person. The condition cannot be cured or reversed, but for many of us, treatment can keep it under control, so it does not severely limit our daily activities. In some people, COPD may continue to get worse despite treatment and have a significant impact on our quality of life.

Helpful breathing techniques

There are various breathing techniques that may help for breathlessness.

These include breathing control, which involves breathing gently using the least effort, with the shoulders supported. This can help when people with COPD feel short of breath.

Breathing techniques for people who are more active include:

• Relaxed, slow, deep breathing
• Breathing through pursed lips, as if whistling
• Breathing out hard when doing an activity that needs a big effort.
• Paced breathing, using a rhythm in time with the activity, such as climbing stairs.
What can we do about air pollution?

We can feel overwhelmed and helpless when we struggle with the issue of air pollution. It is a complex and serious issue that affects everyone’s health and wellbeing and negatively impacts our country’s economy.

This problem can be solved but requires concerted effort and commitment from everyone including our community leaders, community members and government, in addition to regional and global action and collaboration. There needs to be policies and laws to reduce air pollution, and governments must ensure they are implemented and monitored. There is an urgent need to move away fossil fuels such as coal, gasoline, diesel etc to renewable, clean energy such as wind and solar power.

1. **Raise our voices**: we can all take steps to reduce pollution and avoid exposure, but we need our policymakers to prioritize clean air. Find out about environment activist groups in our area and join in advocacy actions such as sending messages to decision-makers and sharing our personal stories of how air pollution affects our health and quality of life.

2. **Take action at our local level** e.g., things we can do include reusing and recycling as much as possible; stops using plastics such as bags, cups and drinking straws; dispose of trash and other waste in a safe way that avoids polluting the air and water, do not burn it. Avoid using cleaning products with chemicals; stop smoking; take action to reduce or regulate forest fires; join with others to plant more trees; learn about affordable, cleaner and more efficient cooking and heating energy sources available in your area.

5.6 What is cancer?

Our bodies are made of tiny cells that work together. There are many different types of cells in our body with different functions. Sometimes a new cell forms and it is not healthy. Usually, unhealthy cell quickly die and are not a problem. But sometimes an unhealthy cell starts to reproduce and forms an unhealthy growth in our body called a tumour. A tumour can be benign, meaning it does not spread or cause damage, or it can be malignant, meaning it keeps growing and invades other parts of the body. This is cancer.  

The only sure way to know if we have cancer is with a biopsy (a doctor will remove a very small piece of the tumour and send it to be examined under a microscope by a specialist).

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9 Where There is no Doctor (2018) [https://hesperian.org/](https://hesperian.org/)
What are common signs of cancer?

- If a new lump is growing or causing pain, under your skin or anywhere in your body, you should get it checked. This is especially important if the lump is firm and does not move. A lump could be an infection or a lump that is harmless.
- Depending on where the cancer is you may also experience sudden weight loss, feel tired, have a change in bowel and bladder habits or a persistent cough or trouble breathing.
- If you have any of these signs it is good to check with your health care provider. The symptoms could be caused by many things. It is always better to find the problem as early as possible.

What are the risk factors for cancer?

We know a lot about the causes of cancer, but not always why some people get cancer and others do not. Anyone can get cancer, our risk for cancer increase as we age. For a few types of cancer, especially breast cancer having one person in the family with that cancer makes it more likely that another person in the family may get it too. But most cancers do not run in the family.
What are the most common cancers in men and women?

Globally, among men lung, prostate, large intestine or rectum, stomach and liver cancer are the most common types of cancer.

Whilst among women breast, large intestine or rectum, lung, cervical and thyroid cancer are the most common.10

What can we do to prevent cancer?

• There are many things that can cause cancer and it is often difficult to know the exact cause of every type of cancer. Except for some cancers such as lung cancer, usually caused by smoking tobacco, and cervical cancer usually caused by a viral infection.

• Most other cancers seem to come from a combination of exposures to certain harmful things and unhealthy lifestyle choices.

• While we cannot prevent all cancers, we can lower our risk of getting cancer by limiting the things that make cancers more common.

What can we do to prevent cancers?

• Avoid smoke and smoking - tobacco smoking is one of the main causes of cancer. Smoking causes lung cancer and cancers of the large intestine, bladder, and neck. It leads to heart attacks, strokes, lung infections, and ulcers. Stopping smoking makes cancer less likely no matter how old we are. When we quit smoking, we also protects our family and friends too.

• Indoor cooking fires increase the chances of cancer and lung diseases. Building a no-smoke or low-smoke cook stove and venting smoke outside reduces the risk of cancer for the whole family.

• Take action with others to reduce air pollution. Such as advocating for implementation of regulations to control pollution from factories, cars, and trucks. When people demand it and laws require it, factories can be made to produce less smoke. We can all do our part to prevent pollution such as reduced used of cars, reduced air travel, support increased trees and parks in; limit our use of plastic bags, cups and boxes, and avoid/ reduce using fossil fuels (coal, natural gas, diesel petroleum etc) for heating and fuel. Lobby your government to meet its environment protection commitments.

• Working in a polluted environment is dangerous. If you work in a factory or other kind of building and are exposed to pollution, ask your boss

10 World Health Organisation. Cancer website page. https://www.who.int/health-topics/cancer#tab=tab_1
or your union to improve ventilation, and provide filtered masks (respirators).

- **Drink less alcohol drinking** unhealthy amounts of alcohol makes several cancers more likely. See section 2 about alcohol.

- **Avoid and treat infections.** H. pylori, the bacteria that causes stomach ulcers, can lead to stomach cancer if it is not treated. If you have a chronic stomach pain, ask your health care provider to check the cause and receive treatment.

- **Hepatitis B and C can lead to liver cancer.** There is a vaccine for hepatitis B. It is given in very early childhood. Both hepatitis B and C can also be prevented by using condoms during sex, and not reusing needles for injections.

- **HPV (human papilloma virus)** is a sexually transmitted infection can cause cervical cancer, A vaccine that can prevent HPV infection is provided to teenagers and young adults. Tell young people in your area about this important vaccine.

- **HIV makes certain cancers more common.** Prevent HIV by using condoms during sex and not reusing needles.

- **Good food makes good health** a healthy diet can contribute to or protect against cancer.

- **Access to healthcare** When people have access to quality healthcare they have better health, and more cancer is prevented. Advocate for good quality primary health care and universal health coverage. It can help prevent many diseases.

- **Avoid exposure to chemicals.** Chemicals are made and used in industry and agriculture, and then released into the environment and contaminate the air we breathe, the water we drink, and the food we eat. Avoid using pesticides and chemical cleaners, or reusing any containers chemicals may have been stored in.

- **Don’t burn plastics or other trash** (this releases toxic fumes into the air we breathe). If you cannot avoid chemicals in your community, try not to breathe or touch them. Wear gloves, a face mask, and protective clothing if you are in contact with chemical, wash your hands often so chemicals do not get into your food or your mouth.
**What is the treatment for cancer?**

Cancer treatments aim to try to cure cancer, and to help a person with cancer to live longer with a better quality of life.

The type of treatment depends on the kind of cancer a person has and the stage of the cancer, whether it is only in one part of the body or has spread to other parts. Treatment methods may be used alone or in combination.

There are 4 main types of cancer treatments:

1. Surgery—removes cancer cells from the body.
2. Chemotherapy—uses medicines to kill cancer cells.
3. Radiation—uses beams of high energy to kill cancer cells.
4. Hormone therapy—uses medicines to stop hormones that make cancer worse.

### Treatment for cancer

- While treatments may have uncomfortable side effects, they are often the only way to destroy the cancer, allowing us to get well.

- There are constantly new treatments being developed and tested. Sometimes it might be possible for us to participate in a trial of a new treatment.

- Some treatments may not yet be available in our area.

**Are there other cancer treatments?**

There are many methods that people use to try to cure cancer or to help ease the effects of cancer. These include spiritual healing, hypnosis, meditation, herbal remedies, special diets, exercise, acupuncture, and massage. There is no evidence that these methods can cure cancer, but people report they help to ease the effects of cancer and some methods such as acupuncture, spiritual support and meditation can help improve well-being.

**How can we cope if we have cancer?**

If we find that we have cancer, we will be worried and frightened. But there are things we can do to fight cancer and feel better. The earlier cancer is identified the better chance of controlling the spread of the cancer and extending our lifespan. Also, cancer treatments continue to improve, and more are becoming available.
• If we worry about cancer, find a doctor or hospital that has experience with treating cancer. Find out what treatment is available in our area. Many cancers can be successfully treated when caught early.
• Talk to others who have cancer. They often have helpful advice and can be understanding listeners.
• Practice healthy lifestyle choices. *(See section 2 for more details.)*

**How can we take care of our mental health during cancer treatment?**

You may experience feelings of hopelessness, worry or anxiety. This is normal when you are dealing with cancer, with all its uncertainties. Caring for your mental, emotional health and spiritual health is just as important as physical care and drug treatment. There are many ways to get this help.

• Spend time with loved ones. Talk about our feelings and fears with someone we trust.
• Join a peer support group with other people who are managing cancer. If we have an internet connection, we may be able to access online support.
• If we have a spiritual or religious group participate in group activities and pray together.
• Continue activities that we enjoy and help us relax (e.g., music, meditation, massage and gentle exercise).

**Questions to ask our health care provider.**

• Ask for more information about your cancer?
• What happens to most people who have this type of cancer?
• What can we do to live longer or survive the cancer?
• What choices do you have about our treatment?
• What are the side effects of our treatments?
What should we do if our cancer is not responding to treatment?

Most of us, depending on the type of our cancer and the stage at which our cancer was treated, are successfully cured. In some of us there is a good response to the treatment during the first few years and then suddenly the cancer returns. In some cases, our cancer may not respond well to treatment. Then our doctors may try various other treatments. If our cancer does not completely go away with additional treatments, our doctors will use treatments to try to slow down the growth of the cancer and manage our symptoms.

- If our cancer does not respond to treatment, we will feel very disappointed and fearful about our health and our future. This is a normal response. Despite this we should try to remain hopeful and positive and consider that there are new cancer treatments becoming available and there is an increased understanding about how to control cancer and manage symptoms.
- Even though our cancer may not be cured it is possible that with regular medical care and treatment and with a healthy lifestyle, we can slow down the spread of our cancer, manage our symptoms and be able to continue to do the things that matter most to us.
- It is important to talk openly with our doctor about our fears and concerns. Ask about the various options for our care and treatment.
- Find out about health and care services in our area that can support us to live with cancer. Find out if palliative care services are available in our area. Palliative care is holistic care for people living with chronic diseases and serious illnesses such as cancer. Palliative care providers focus on helping us meet our needs and priorities for physical, emotional and spiritual care and support us to manage our symptoms and deal with pain and emotional stress. Palliative care is a valuable service that can help us live with increased wellbeing and provide us more control over our care and support.¹¹
- Talk to family and friends and discuss your plans for care and support and let them know how they can help you.
- Consider making a self-care plan. Think about things that you enjoy doing? What helps you manage stress, what can you do to improve your sleep. How can you maintain a healthy diet and physical exercise. Continue to focus on

¹¹ World Health Organization Palliative Care, Essential Facts. www/https://cdn.who.int/media/docs/default-source/integrated-health-services-(ihs)/palliative-care/palliative-care-essential-facts.pdf?sfvrsn=c5fed6dc_1
doing the things that matter most to you. **(See section 2 healthy lifestyle choice)**

- Accept that none of us know when we are going to die, it could be sudden, or we could live for many more years. As we get older making an advanced plan about what we would like to happen to us in the future provides us with a great sense of comfort and allows us to maintain control over things that are important to us. It is helpful to discuss our wishes with a family member or close friend. We can ask them to help us with planning our future care and support. Some of the questions we can consider include:

  - Are there things we really want to do before we become unable to do them; what help do we need to achieve them?
  - Are there any messages we would like to record or write to leave behind for our loved ones when we die?
  - Are there any types of treatment or care that we don’t want to have if we become very sick during the final days of life?
  - Do we have any unresolved issues with family members or friends that we would like to sort out?
  - Do we want to make a last will or update a will we have already made?
  - Do we have a preferred place to die? Who would we like to be with us if we become very sick?
  - Do we have a spiritual support group that we would like to spend time with as we manage our cancer?
  - Who should we provide instructions to about where to find our will, financial records, and other important documents etc?
  - Do we have any religious or cultural practices we would like to be carried out before and after we die? What are our wishes for after our death?
  - Do we want to donate our organs?
  - Where do we want our final resting place to be?

In the next section you will find information and tips for managing mental health and neurologic disorders.
5.7 What are mental health and nervous system disorders? (Neurological diseases)

Here is a common myth about mental health.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
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<tbody>
<tr>
<td>Depression and loneliness are normal in older adults.</td>
<td>Some of us may find ourselves feeling isolated or alone as we age and we may feel sad, anxious or depressed. However, these feelings are not a normal part of aging. Studies show that most older adults feel satisfied with their lives, despite having illnesses or physical problems. However, if these feelings last more than a few weeks it may be depression.</td>
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</tbody>
</table>

What is mental health and why is it important?

Mental health is a state of mental well-being that enables us to cope with the stresses of life, achieve our capacities, learn, and work well and contribute to our community. It is an essential part of our health and well-being, Mental health also supports our ability to make decisions, establish relationships and participate in decision making about things that matter to use. Mental health is a basic human right. 12 According to the World Health Organisation (WHO0 over 20% of adults aged 60 years and over suffer from a mental health or neurological disorder.

Unfortunately, there is still a lot of stigma and discrimination about mental illness, which may cause us to ignore or hide mental health issues and fail to receive help.

What causes mental illness?

There is no single cause of mental illness. Numerous factors can contribute to a risk for mental illness, including poverty, violence, inequality, exclusion, traumatic experiences in childhood, chronic health conditions, chemical imbalances in the brain; unhealthy use of alcohol and drug and feelings of loneliness and isolation.

As we become older, we may experience additional life stressors such as loneliness, reduced mobility, chronic pain, or other health issues; a decrease in independence; and bereavement of loved ones for example. Some of us may also face physical, verbal, financial and sexual abuse, or abandonment. These stressors can lead to anxiety and depression.

What are common mental diseases?

Two common mental health disorders are anxiety and depression. We will discuss them below.

What is anxiety?

Anxiety is a feeling of stress, panic or fear that can affect our everyday life. We all feel anxious at times when we face stressful events in our lives. It becomes a problem if our anxiety is very high, lasts over a longer period, and affects our ability to live our life as fully as we would like.

What are the signs of anxiety?

Anxiety affects us physically and mentally and may also change our behaviours:

- **Physical effects of anxiety:** faster heartbeat, dizziness, headaches, chest pains, loss of appetite, sweating, breathlessness and shaking.
- **Mental symptoms:** tense or nervous, unable to relax, constant worrying, tearful, sleep problems, lack of concentration, overly pessimistic.
- **Changes in behaviour:** unable to enjoy leisure time, self-neglect, avoidance of socialising.
- **Anxiety can also cause panic attacks** - we may experience sudden and intense fear. A panic attack can cause a fast heartbeat, dizziness, sweating, breathlessness and feeling loss of control. A panic attack can last from 5 to 30 minutes. It can be very frightening but is not dangerous and does not harm us.
**Tips to help reduce anxiety, fear and panic:**

- Find someone we can talk to about our feelings such as a friend, family member, a health care provider or a counsellor.
- Set small targets that we can easily achieve. Do not try to do everything at once.
- Focus our time and energy on helping ourselves to feel better. Do not focus on the things we cannot change.
- Try calming breathing exercise, listening to calming music or practicing meditation.
- Do activities that we enjoy and help us relax such as walking, swimming and yoga.
- Learn how we can improve our sleep (see section 2 on sleep).
- Eat a healthy diet. Have meals with friends and family whenever possible (see section 2 on healthy diet)
- Consider peer support, meet people experiencing similar issues so that we can provide mutual support to each other.
- Seek advice from our health care provider about available services in our area.
- Try not to use alcohol, cigarettes, gambling or recreational drugs to reduce our anxiety. They may provide temporary relief but can contribute to poor mental health.

**What is depression?**

Depression is a feeling of extreme sadness or feeling nothing at all. It can cause great suffering and make it difficult for us to manage our daily life.

Some of us may have felt depressed when we were younger and continue to have episodes of depression; for others depression may start as we get older. This is often because of loneliness, loss of loved ones, changes in our health, or loss of independence. Some of us are also more vulnerable to depression if we have faced stigma, discrimination, isolation or rejection in our lives.
A depressive episode may be mild, moderate, or severe depending on the severity of our symptoms and impact on our daily life. Some of us may only get one episode of depression that does not come again. Others may have repeated episodes of depression. Some of us may also experience sudden mood changes, with depression alternating with periods of hyperactivity (manic depressive symptoms) including feeling very happy, irritable, increased energy, talkativeness, racing thoughts, increased self-esteem, and impulsive behaviours.

What causes us to feel depressed?

Depression is caused by a complex interaction of many factors, and may be triggered by a multitude of things:

- **An upsetting or stressful life event**, such as bereavement of our partner, chronic illness, divorce, loss of work and money worries.

- **Facing chronic stigma and discrimination** affects our dignity and self-esteem and increases our vulnerability to depression, e.g., people living with a disability, belonging to an ethnic minority, being a migrant, being a sex worker, or having a different sexual and gender orientation such as lesbian, gay, transgender, queer, non-binary etc. (LGBTQ+).

- **'Downward spiral’ of events that leads to depression.** For example, if we are diagnosed with a chronic disease, we may feel stressed and worried and isolate ourselves, then start drinking to ease our worries. This can make us feel worse and trigger depression.

- **Social and economic situation** depression is more common in people who live in difficult social and economic circumstances (unemployed, financial difficulties, poor housing or living conditions, high crime area etc).

- **Our personality** may make us more vulnerable to depression for example if we have a low self-esteem or are overly self-critical.

- **Family history** If someone in our family has had depression in the past, we might be at more risk to develop it.

- **Loneliness and isolation** can be caused by a big change in our life such as being separated from our friends and family.
What are signs that we may be depressed?

- Feeling sad most of the time
- Difficulty sleeping or sleeping too much.
- Increased irritability; difficulty thinking clearly; loss of interest in pleasurable activities such as socialising, eating, or sex;
- Physical symptoms such as headaches or intestinal problems that are not caused by illness; slow speech and movement; lack of energy; thinking about death or suicide.

What can we do to prevent becoming depressed?

- **Make healthy lifestyle choices.** Depression is closely related to our physical health. Many of the factors that influence depression such as lack of exercise or harmful use of alcohol are also risk factors for chronic diseases. Chronic diseases can cause us to become depressed due to worry about the disease. Maintaining a healthy lifestyle such as healthy diet and regular exercise can improve our mental health, wellbeing and self-esteem.

- **Try not to be alone too much.** Maintain a network of friends, who can help to support us during difficult times.

- **Consider volunteering.** This will provide us with new opportunities to learn, interact and create new friendships. Volunteering also provides us with a sense of achievement and pride in our contribution to our community.

- **Talk about our feelings with someone we trust.** Remember depression can happen to anyone. Mental health illness is not caused by personal weakness. It is a very common issue with over 5% of adults worldwide suffering with depression.

When should we seek help for depression?

- Seek help if we are still feeling down or depressed after a couple of weeks. Find out what services are available in our area. Talk to a health care provider about our symptoms. Treatments for depression may include talking therapies (talking to a specialist about our feelings) and medicine to help us feel better (anti-depressants).

- If we start to feel hopeless about our life and think about harming ourselves, we should seek help immediately. Tell someone we trust about our feelings and talk to our health care provider too.
Tips to help us cope if we are feeling depressed:

- **Keep a daily routine.** When we feel down, we may experience sleep problems. Not having a good sleep routine can also affect our eating. Try to keep to a regular sleep routine and eat regular meals during the day. This will contribute to an increased feeling of wellbeing.

- **Face your fears.** Don't avoid the things we find difficult. When we feel low or anxious, we sometimes avoid talking to family and friends. Sometimes we can lose our confidence in going out, driving or travelling. If this starts to happen facing up to these situations will help them become easier to manage.

- **Stay in touch.** Don't withdraw from life. Socialising can improve our mood. Keeping in touch with friends and family means we have someone to talk to when we feel low.

- **Considering joining a support group.** Sharing our experiences and concerns with other people who suffer with depression can be very helpful.

- **Avoid drinking alcohol** for some of us, alcohol can become a problem. We may drink more than usual as a way of coping with or hiding our emotions. But alcohol won't solve our problems and can make us feel more depressed.

- **Stay active.** Take up or continue physical exercise. There's evidence that exercise can help lift your mood. If you haven't exercised for a while, start gently by walking for 20 minutes every day. Invite friends or family members to join you.
5.7.2 What are nervous system diseases?

Here is a common myth about dementia.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
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<tbody>
<tr>
<td>It is inevitable that older people will get dementia.</td>
<td>Dementia is not a normal part of aging. Although the risk increases as we age dementia is not inevitable. Occasionally forgetting an appointment or losing your keys are typical signs of mild forgetfulness, which is common in normal aging.</td>
</tr>
</tbody>
</table>

What are nervous system diseases?

Nervous system diseases (neurological disorders) are diseases of the brain, spinal cord, and the body’s nerve system and muscles. They become more common as we age.

Some of the most frequently seen nervous system diseases are dementias including Alzheimer, and Parkinson disease. It usually takes a long time to diagnose a nervous system disorder as the symptoms are very vague.

Our body’s nervous system is a highly specialized network of nerves that sends messages back and forth between our brain and the body. The brain controls all our body’s functions without us being aware of it. From sight to smell and even walking.

In nervous diseases something goes wrong with a part of our nervous system. There are many causes of nervous system problems including genetic disorders, birth abnormalities, infections, lifestyle, or health problems including malnutrition, accidents, and brain injury.

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What is Dementia?

Dementia is a term for several diseases that affect memory, thinking, and the ability to perform daily activities. Four main diseases account for most dementia Alzheimer’s; vascular dementia; dementia with Lewy bodies and frontotemporal dementia.\textsuperscript{14}

The symptoms of dementia vary according to the part of the brain that is affected. The illness gets worse over time. It mainly affects older people but not all people will get it as they age.

It is normal to sometimes be forgetful as we age, but mild cognitive impairment (MRI) is a condition in which some of us may have more memory or thinking problems compared to other people of the same age, but we can still do our normal daily activities. If we have mild cognitive impairment, we are more at risk to develop Alzheimer’s disease, however, not all of us with MCI will develop Alzheimer’s disease.

Importantly, there is often a lack of awareness and understanding of dementia, resulting in stigmatisation and creating barriers to early diagnosis and care. This may cause people and families affected by Alzheimer’s to become isolated and unsupported.

What is Alzheimer’s disease?

Alzheimer’s is the most common form of dementia. It is a chronic progressive disease that destroys cells in the brain and ultimately interferes with our most basic mental and physical functions.

What causes Alzheimer’s disease?

The exact cause of Alzheimer’s disease is not yet fully understood, although it is thought to be caused by the abnormal build-up of proteins in the brain. There is also a decrease in chemical messengers involved in sending messages, or signals between brain cells. Over time, different areas of the brain shrink. The first areas usually affected are responsible for memories. More women than men have Alzheimer’s.

Memory problems are not just caused by dementia – they can also be caused by:

- Depression and anxiety
- Stress
- Medicines
- Alcohol or drugs
- Other health problems – such as hormonal disturbances or nutritional deficiencies

What are the risk factors for Alzheimer’s disease?

Several things are thought to increase our risk of developing Alzheimer’s disease, these include increasing age; a family history of the condition; untreated depression; lifestyle factors associated with cardiovascular disease such as: smoking, obesity, diabetes, high blood pressure and high cholesterol (unhealthy fats in the blood vessels).

What are the signs of Alzheimer’s disease?\(^{15}\)

1. Memory loss
2. Difficulty performing familiar tasks.
3. Problems with language
4. Disorientation to time and place
5. Poor or decreased judgement
6. Problems keeping track of things.
7. Misplacing things
8. Changes in mood and behaviour
9. Challenges understanding visual and spatial information.
10. Withdrawal from work or social activities

\(^{15}\) Warning signs of dementia infographic | Alzheimer's Disease International (ADI) (alzint.org)
How can we reduce our risk of Alzheimer’s disease?

We can help reduce our risk by making healthy lifestyle choices e.g., stopping smoking, eating a healthy diet, leading an active life, both physically and mentally, maintaining a healthy weight, drinking less or stopping alcohol, and having an annual health check to identify issues early. (See section 2 for details)

What should we do if we feel worried about Alzheimer’s disease?

- It is best to see a health care provider as early as possible if we are worried about our memory or are having problems with planning and organising.
- An early diagnosis gives us the best chance to adjust, prepare and plan, as well as access to treatments and support.
- Your health care provider will ask you and your family about your concerns and carry out some simple checks. They will refer you to a specialist for further assessment if necessary.
- If you are referred to a specialist, they will assess your mental abilities: thinking, memory, language, judgment, and the ability to learn new things (cognitive assessments). It may take several appointments and tests over many months before a diagnosis of Alzheimer’s disease can be confirmed.

What can we do to help manage a diagnosis of Alzheimer’s?

- We may feel a mix of emotions at first, sad, angry, disbelief, fearful.
- Talk to friends and family about how we are feeling. Talking about things is often the first step to dealing with them.
- When we are diagnosed with dementia, there are lots of things we can do that will help us to live as well as possible. It’s important to try to stay positive, and to focus on the things we can still do and enjoy.
- Dementia is progressive, which means that our symptoms will get worse over time.
- How quickly it progresses will vary greatly from person to person. Some people with dementia may need a lot of support soon after their diagnosis. Others may be mostly independent for many years.
- Find out about services and opportunities available in your area for people with dementia.
What is the treatment for Alzheimers?

There is no cure for Alzheimers, but a lot can be done to support people living with the illness and those who are their care partner. If you have dementia maintain a healthy lifestyle and care for your mental health by staying socially connected with your friends. In addition, there are medications that can reduce the symptoms. The health care provider will explain about the medicines available in your area.

Other things that can help:

- Protect against falls and head injury, by making your house safer, removing things that might cause you to fall, and wearing shoes that are non-slip.
- Seek help for treating hearing and sight problems. Hearing loss may make it more difficult to interact with others and affects your communication skills.
- Have your eyes checked for vision problems which can be treated and improve your vision.
- Identify people to support you and help you communicate your choices.
- Create a plan to tell people what your choices are for care and support.
- Bring your ID with your address and emergency contacts when leaving the house.
- Join a local support group or consider starting a small support group in your community.

What is Parkinson’s disease?

Parkinson’s disease is a chronic disease which caused the malfunction and death of important nerve cells in our brain. This causes uncontrollable body movements, such as shaking and stiffness of our hands, legs and jaw and difficulty with balance and coordination. The cause of Parkinson’s is still unclear. Parkinsons is more common in men than women, and most people develop; the disease after aged 60 years.

The most usual signs and symptoms of Parkinson’s disease are caused by damage to brain cells that controls movement and nerve cells involved in regulating our heartbeat and blood pressure. The loss of chemicals produced by these brain cells also causes tiredness, digestive system problems and a sudden drop in blood pressure when standing up from a sitting or lying position.
Parkinson disease symptoms usually worsen over time. As the disease progresses, people have:

- Tremor in hands, arms, legs, jaw, or head
- Muscle stiffness
- Slow movements
- Difficulty with balance and coordination, sometimes leading to falls.

As the disease progresses, some people may develop dementia and be diagnosed with Parkinson's dementia.

**How is Parkinson's disease diagnosed?**

There are currently no blood or laboratory tests to diagnose Parkinson's. Doctors usually diagnose the disease by taking a person’s medical history and performing a neurological examination. If symptoms improve after starting to take medication, it's another indicator that the person has Parkinson's.

**What is the treatment for Parkinson's disease?**

Although there is no cure for Parkinson's disease, medicines and other treatments can relieve some symptoms. Medicine may not be needed in the early stages of the disease as symptoms are usually mild.

- The main treatment for Parkinson's is a medicine called Levodopa.
- Another drug is given with levodopa to reduce the side effects of levodopa.
- People taking levodopa should never stop taking this medicine without consulting with a health care provider. Stopping the medicine can cause serious side effects like trouble moving or trouble breathing.

Other therapies that may include supportive treatments, such as muscle exercises to build and strengthen physical strength, and support to strengthen practical skills for daily living such as bathing, dressing and eating skills.

Our health care provider may be able to link us to services that can help us with managing daily tasks of living. We may also be able to access assistive technology to help with daily activities such as special spoons and plates that make eating easier; equipment to make bathing and dressing safer such as wall rails, non-slip mats etc. (See links in annex to website for ideas about assistive technology)

If we have Parkinson disease it is very important, we keep regular appointments with our health care provider so that our condition can be monitored.
What is the future if we have Parkinson’s disease?

- Many of us living with Parkinson’s respond well to treatment and only experience mild to moderate disability. A small number of us may not respond as well and can in time become more severely disabled and require support for managing activities of daily living.

- Parkinson's disease does not directly cause us to die, but the condition can make some of us more vulnerable to serious and life-threatening infections. There continues to be advances in treatment and most people with Parkinson disease can have a near normal life expectancy.

Tips to care for our health and wellbeing if we have Parkinson disease:

**Exercise** - Regular exercise is particularly important in helping relieve muscle stiffness, improving our mood and relieving stress. There are many activities we can do to help keep ourselves fit. If we are newly diagnosed or our symptoms are mild, we can try a range of activities including some vigorous exercises and muscle strengthening. If our symptoms are progressing, start more slowly and try less strenuous activities such as walking, or simple stretching and strengthening exercises. *(See section 2)*

**Healthy eating:** Eating a balanced diet gives our body the nutrition it needs to stay healthy. *(See section 2 for more information)*

**Protect ourselves from infections**—update our vaccinations. Everyone with a long-term condition is encouraged to get an annual influenza vaccine. In addition, the pneumococcal vaccine is recommended to help prevent chest infections.

**Stay connected to friends and continue to do activities that we enjoy.** Consider joining a support group for people living with Parkinson disease in your area. Sharing your experiences with others can be a great support.

In the next section you will find tips about how to continue to enjoy your sexuality and intimacy as you age.
Section 6: How can we continue to enjoy intimacy and sex as we age?

Here is a common myth about older people, intimacy and sex.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older people lose interest in intimacy and sex.</td>
<td>Intimacy and sexual health are fundamental for our overall health and well-being. Many people over 60 continue to enjoy intimacy and have an active sex life. Intimacy and a satisfying sex life can not only make us feel better about ourselves and our relationship, but may also reduce our risk of chronic illness, improve our memory and cognitive function, and even enhance our sexual function.</td>
</tr>
<tr>
<td></td>
<td>It is disrespectful when other people assume that intimacy and sex are not important to us as we age. This myth can create barriers for us to access information that can help us manage our sexual health e.g., prompt treatment of problems and prevention of sexually transmitted diseases.</td>
</tr>
</tbody>
</table>

6.1 What does intimacy and sexuality mean?

Intimacy is a feeling of closeness, support and connectedness with our partners, which creates trust and openness to share our deepest thoughts and emotion and assures us that we are loved and accepted for who we are. Physical intimacy can include kissing, hugging and cuddling. It does not necessarily involve sexual intercourse.

Our sexuality is the way we express our sexual, emotional and physical feelings or attractions towards another person. It can include many different types of physical touch or stimulation including sexual intercourse. Our sexuality is affected by our emotional and physical state.

Although intimacy and sex are two different things they are closely connected. Especially in women, emotional intimacy can lead to more positive sexual experiences. And physical intimacy, whether it involves sex or not, can help us feel connected with our partner in other ways.

As we age some of us may want to continue both an intimate and sexual relationship. Others may be content with intimacy only or choose to avoid both. Many of us find more enjoyment in our sex lives when we are older, than we did when we were younger. We usually have less distractions, more time to be together and no fear about getting pregnant.16

**Important** - Sex should always be free of force, discrimination, and violence. We have the right to say no to any kind of sexual activity. If we do not want to do something, we should say no. If our partner forces us to have sex, it is rape, and if we are forced to do something else sexually, it is sexual assault. Being raped or sexually assaulted is never our fault.

Having a healthy sex life means being able to communicate to our partner what we want to do, and do not want to do sexually. Our partner should respect our boundaries, and we should respect theirs.

**6.2 Common challenges to intimacy and sexual health as we age.**

- We may be affected by ageism, social norms and social media. This may cause us to feel embarrassed about being intimate and sexually active. Ageism may also make us feel that we are less desirable to our partner. Stress, worry and chronic health conditions can also create barriers to enjoying intimacy and a fulfilling sex life.

- Menopause can affect our intimacy and sexuality. Menopause usually begins in our 40’s or 50’s, and last for several years. It ends when we have not menstruated for 12 months. The symptoms of menopause are different in every woman, ranging from very mild symptoms to severe. The first sign of menopause is usually irregular periods. Most of the symptoms of menopause are thought to be related to a decreased production of hormones that control our sexual and reproductive health system and our bone strength and other functions. Symptoms of menopause may include hot flashes, sleep disturbances, mood changes, irritability and memory problems. We can also experience weight gain, and a decreased or increased desire to have sex. For women our vagina shortens and narrows, with thinner vaginal walls and less vaginal moisture which may make having sex painful.

- It is important that we learn about the menopause and discuss our concerns with our partner. It may also be helpful to share experiences and provide mutual support to other women who are in the menopause. There are many

16 National Institute of Public Health USA 2023 Health, Sexuality, and Intimacy for Older Adults.  
practical things we can do to reduce the symptoms of the menopause e.g., for hot flashes we can wear layers of clothes that can be removed during hot flashes; carry a simple paper fan in our bag, keep cool water close by, avoid spicy foods, caffeinated drinks and alcohol. Healthy lifestyle choices can also help us manage the symptoms such as: a healthy diet, physical exercise, a good sleep routine and stress management activities (See section 2 for healthy lifestyle choices).

- Do not try to manage by yourself if you are finding it difficult to manage your menopause symptoms. Seek advice from a health care provider or sexual and reproductive health service provider in your area.

- For men impotence, also called erectile dysfunction (ED) becomes more common as we age. This is the loss of ability to have and keep an erection. In some men this can happen occasionally and others may face this problem frequently. If men have an enlarged prostate gland it may also affect the ability to have an erection and reduce their desire to have sex.

6.3 What can we do to maintain our enjoyment of intimacy and sex?

- If we have a partner, talk openly with them about the changes we are experiencing. Try not to blame ourselves or our partner. Make time to relax and enjoy each other’s company and listen attentively to each other, so that we can understand the changes we are facing and find ways to manage them.

- Check with our health care provider if there are services in our area to help people who have sexual health problems. Do not feel embarrassed to discuss this important area of your life.

- If our partner seems less interested in sex do not assume they are no longer interested in having sex with you. Find a good time to discuss and reassure them that many things which cause sexual problems in older adults can be treated. E.g., if you are having pain during sex due to vaginal dryness your health care provider or pharmacy can suggest water based or silicone-lubricants which are effective to moisture your vagina before sex.

- Our health care provider or sexual and reproductive health service may also prescribe a hormone vaginal cream. This cream can help the vagina to produce more natural lubricants. Do not buy hormone cream without discussing with a health care provider. Some plant-based foods such as soya beans and tofu also contain a natural plant hormone which may improve vaginal health. If your symptoms are severe and disrupting your daily life your health care provider may suggest using hormone replacement therapy (HRT). This medicine has benefits but also may have risks, especially when
we are over 60 years old and have existing chronic diseases. Ask your health care provider about the potential risks of taking HRT so we can make an informed decision.

- If erectile dysfunction (ED) is a problem, it may be able to be managed through talking with our partner and sharing ideas for what kind of sensual touch or stimulation helps to arouse you. Take your time to relax and enjoy intimacy, do not feel the need to rush. Reassure each other that you can always try again at another time if unsuccessful this time.

- Our health care provider may suggest medications or other treatments. They may also prescribe testosterone hormone if you have low levels. Although taking testosterone may help with ED, it can also lead to serious side effects. Make sure to talk with your health care provider to understand the benefits and risks of testosterone therapy.

- Be careful of dietary or herbal supplements that promise to treat ED. These products may have dangerous side effects or interact with prescription medicines. Do not use any treatment for ED without first consulting with a health care provider.

- Lifestyle choice such as limiting alcohol or stopping alcohol, or increasing physical activity, many help to reduce ED.

- Another important reason to see your health care provider for ED is that it may be a sign of an underlying health problem that should be treated, such as clogged blood vessels or nerve damage from diabetes.

- Find out what cancer screenings services are available in you are: as older people it is important for us to stay up to date on cancer screenings, including breast and cervical cancer screenings for women, and prostate and colon cancer screenings for men. Early detection of problems provides a better change of successful treatment and recovery.

6.4 Do we need to be concerned about sexually transmitted diseases as we age?

- Yes, if we are sexually active, we should continue to be concerned about sexually transmitted diseases no matter what our age. There are numerous different bacteria, viruses and parasites that are transmitted through sexual contact, including vaginal, anal, and oral sex. Among the 8 organisms linked to the most common sexually transmitted diseases (STIs), 4 are currently curable: syphilis, gonorrhoea, chlamydia and trichomoniasis. The other 4 are incurable viral infections: hepatitis B, herpes simplex virus (HSV), HIV and human papillomavirus (HPV).
If we are not in a committed, monogamous relationship with one partner, we should always practice safe sex and use a condom. The best way to prevent STIs is to use a condom correctly and consistently. Condoms are one of the most effective methods of protection against STIs, including HIV. Although condoms do not protect against STIs that cause genital ulcers (i.e., syphilis or genital herpes). When possible, condoms should be used in all vaginal and anal sex.

Older people who are sexually active may be most at risk for STIs such as syphilis, gonorrhea, chlamydial infection, genital herpes, hepatitis B, genital warts, trichomoniasis and HIV. We are more at risk for HIV if we or our partner have more than one sexual partner, if we have unprotected sex, or if we or our partner are using recreational drugs and sharing needles. In recent years the number of older people infected with HIV is increasing.

**Common STIs and symptoms we need to know about:**

**NOTE:** Many STIs have no signs or symptoms. Even with no symptoms we can pass the infection to our sex partners.

- **Chlamydial infection:** abnormal vaginal discharge burning during urination.
- **Genital Herpes:** may be only minimal signs or symptoms or one or more painful blisters on or around the genitals or rectum.
- **Genital Warts:** Small, hard painless bumps on the vulva and vagina or on the penis or around the anus
- **Gonorrhoea:** bad smelling discharge from vagina or penis
- **Syphilis chancre:** a painless open sore that appears around or in the vagina or on the penis.
- **HIV The** disease spreads more easily in the first few months after a person is infected, but many are unaware of their status until the later stages of the illness. In the first few weeks after being infected we may have influenza-like illness including: fever, headache, skin rash and sore throat.
- **Hepatitis B:** Presents as acute and chronic phase, with acute symptoms and signs including general fatigue, loss of appetite, nausea, vomiting, abdominal pain, low-grade fever, jaundice, enlarged liver and spleen, anemia, and skin rash. The chronic phase manifest as liver cirrhosis, jaundice, and varied manifestation of liver failure

**Tips to have safe sex:**

The best way to protect ourselves and our partner is for both of us to get tested for HIV and other STIs before we start having sex. We could have an STI and not know, because the symptoms are not obvious. And some symptoms of STIs or HIV, such as tiredness, can be mistaken for age-related health problems.
• Unless we are in a long term committed monogamous relationship with one partner, we need to know our partner’s sexual background before having oral, vaginal, or anal sex. We should start by expressing our concern for each other’s health and wellbeing, and talk about any past SITs, STI testing and whether we have injected illegal drugs. Before having sex check, we should check our partners penis or vagina for sores, abnormal discharge or odours. Always practice safe sex using a condom correctly. Women who have sex with women are also at risk of STIs and should use a dental dam for safe sex.

**Correct condom use means:**

• Use one condom and lubricant every time we have vaginal, oral, or anal sex, including during our pre sex stimulation activities (foreplay), until we know our partner’s sexual history, STI status, and are in a monogamous relationship.

• Use a water-based lubricants such as K-Y Jelly or silicone lubricant as they lower the chances of getting a sore or tiny cut on the penis or inside the vagina. These sores and cuts can increase the risk of getting STIs. Do not use Vaseline or mineral oil with condoms because it destroys the condom lining.

• Put the condom on after the penis is erect, leaving a 1/2-inch space at the tip.

• Hold the condom at the base (open end) as you remove it.

• Do not use the same condom twice. Do not use expired condoms.

• Never re-use the same condom. Dispose of it safely. Wrap in tissue paper and dispose of it in a regular garbage bag.

**Special consideration for sexual and gender minority older adults:**

If we identify as part of a sexual and gender minority group, such as lesbian, gay, bisexual, transgender or queer, we may experience extra difficulties with sexuality in later life. For example, studies have found that:

• We are more likely than heterosexual older adults to face barriers to experiencing intimacy and sexual health such as: increased mental distress and higher rates of chronic diseases, obesity and disability.

• Because of discrimination and fear we may be less open about our sexual orientation. This creates barriers for us to access sexual health services and puts us more at risk of STIs and other health problems.
• We may face discrimination when we access health and care services and find it more difficult to ask questions and discuss our concerns. Our health care provider may not have the training to manage our sexual health issues.

• There is increasing awareness and acknowledgment that much needs to be done to improve our situation for gender minorities. In 2023 the World Health Organization developed a guideline on health for trans and gender diverse people, and steps are being taken to integrate services for LGBT into national health services. This is a small glimmer of progress, but it will take time to achieve inclusive service for gender minorities.

• LGBTQ communities usually provide a supportive environment. You may be able to access support and advice for sexual health from a special support centre or from community-based organisations who support gender minorities issues. If you have access to an internet connection and android phone you may also be able to access peer support groups and hotline services in your language.

**Conclusion**

We have come to the final section of our self-care guide to healthy ageing. Thank you for your interest in joining us to learn more about self-care. We hope that some of the topics have been useful to you. This guide is part of a larger package of resources about healthy ageing, with links to additional information. Please see the link below to access the online the ‘community-based approaches to healthy ageing resource package’.

As we mentioned in the introduction this guide is a generic resource, it is not designed to be specific to one country or context. Our intention is that countries and communities will be able to take sections of the guide and improve and adapt them to your context and needs.

If you are interested to adapt the guide to your context, consider joining with groups working on healthy ageing approaches in your area, such as community-based organisations, health care providers, community volunteers and non-government organisations. In the package of resources, we provide a brief guidance on the process of adaptation and important points to consider when you adapt the guide.

We would love to receive your feedback and hear about your experiences of using and adapting the guide. Ideally, we would like to build up a library of self-care resources to healthy ageing that are adapted to different countries and languages.

**You can access the resource package and links to other resources below.**
Appendices

**Section 2:**

1. Link to resources for physical exercises for people with mobility issues or other disabilities [https://www.powerforparkinsons.org/youtube?gad](https://www.powerforparkinsons.org/youtube?gad)

2. Link to mindfulness videos and relaxing music for meditation [https://www.youtube.com/watch?v=oPD0QhK72L0](https://www.youtube.com/watch?v=oPD0QhK72L0)  
   [https://www.youtube.com/watch?v=bLpChrgS0AY](https://www.youtube.com/watch?v=bLpChrgS0AY)  
   [https://www.youtube.com/watch?v=i50ZAs7v9es](https://www.youtube.com/watch?v=i50ZAs7v9es)

3. WHO Doing what matters in times of stress. (in 20 languages)  
   [Doing What Matters in Times of Stress (who.int)](https://www.who.int)

4. WHO Frequently asked questions about stress  
   [Stress (who.int)](https://www.who.int)

5. Scaling up physical exercise for older people from community to national levels

6. Scaling up sport for older people from community to national levels.

   [https://www.youtube.com/watch?v=9tSYnaqB74M](https://www.youtube.com/watch?v=9tSYnaqB74M)

8. Balcony garden  
   [https://www.youtube.com/watch?v=YF2iQAGA5Bg](https://www.youtube.com/watch?v=YF2iQAGA5Bg)

9. How to grow Mung Beans at home  
   [https://www.youtube.com/watch?v=0QlfBoxQN7A](https://www.youtube.com/watch?v=0QlfBoxQN7A)

10. Mushrooms in a bucket  
    [https://www.youtube.com/watch?v=AMNbEE0K1Cw](https://www.youtube.com/watch?v=AMNbEE0K1Cw)

11. Growing cabbage in small containers at home  
    [https://www.youtube.com/watch?v=RIuBbUnqNXw](https://www.youtube.com/watch?v=RIuBbUnqNXw)
Section 3


13. Link to handouts for pelvic floor exercises for women and men

https://nafc.org/downloadable-pelvic-floor-exercises/


Link to online resources to purchase incontinence pads and supplies
https://www.alibaba.com/premium/incontinence_pads.html?src=sem_qgl&field=UG&from=sem_qgl&cmpgn=9413056005&adgrp=98531876394&fditm=&tgt=kwd-

Section 5

14. Link to assistive technology for people living with a disability.
https://www.physio-pedia.com/Eating_and_Drinking_Assistive_Products

15. Cognitive health and older adults
National Institute of Ageing. USA. Cognitive Health and Older Adults.