



CREATIVE SOCIAL INCLUSION PROGRAMMES FOR OLDER PEOPLE IN UDINE

**or how to turn a bunch of keywords
into concrete practices**

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Mayor of Udine (ITALY)**

+ Stefania Pascut & Gianna Zamaro

**25th Anniversary Lecture Series:
New Policies for a New Era
Belfast *Béal Feirste* 14 2 2013**



UDINE

joined the Healthy
Cities movement

**HEALTH
ENLIGHTMENT**

in 1995

What is happening to me?

Will I still be able to care for my family, work and think to my interests?

Do my parents try to conceive something?

**Will I increasingly depend on the others?
Will I be a burden?**

Where can I find help in case of need? How much will it cost to me?

How can I manage to move?

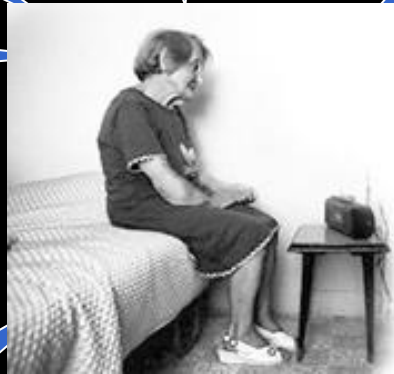
Who will care for my economic difficulties?

Where are my friends? Will they still come and visit me?

Will I be able to stay at home, even if my house is small and inadequate?

Which future should I expect for me?

Which future should I expect for my family?





Before...

&

Although, worldwide, care for frail elderly people, is provided by the family, changes in family structure and increasing participation of women in the paid work force are gradually

eroding the capacity of the family to provide care



Now



**Addressing challenges
in a time of crisis**

Beware!

- **Percentages vs absolute values**
 - Udine: 25% cuts in 5 years on government funds
 - But the budget has increased. Why?
 - The fiscal pressure of council taxes has increased by 10% this year, by 50% last year, but everything went to the Government, for the sake of ...
- **Stability**
- **Sustainability** is a **responsible attitude**, but the **stabilization triangle** needs to be split in more reasonable **wedges**

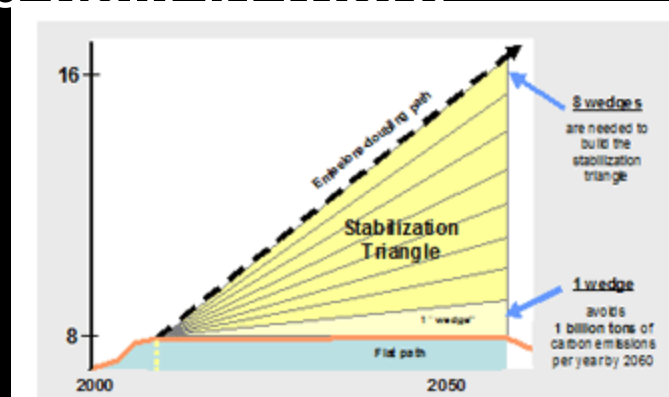


Figure 2



Shortening the supply chain: '0 km Markets

Are healthy eating habits more expensive?



Punto di Vendita AMICA
OFFERTA
Prezzo 0,50
Prodotto
Origine
Varietà
Categoria
€/kg

Prezzo Medio
-30% sms consumatori
Prezzo € 0,90/kg
Prodotto MELE
Origine BUTTARO
Varietà AUTOCTONE
Caratteristiche ROSSE

Prezzo Medio
-30% sms consumatori
Prezzo 0,60/kg
Prodotto
Origine
Varietà
Caratteristiche

PEDIBUS

An intergenerational activity

“Which class of vehicles has the smallest carbon footprint: black cars or cars with flowers painted on?”





Urban planning improving house to school route's through Children's and Senior Citizen's City Councils



Walking groups





ENERGY DAY: Frugality, education, integration

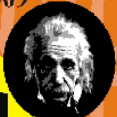
Archimedes Screw, Cochlea Archimedeia





Festa del Pi greco
Udine, Piazza Matteotti
sabato 14 marzo 2009

LUDOBUS
Buon compleanno, Albert!



π

Pi Day
3.14

π ore 15.30 > 17.30 >> Giochi d'ingegno con il Ludobus
 π ore 17.00 > Gara di Pi greco a memoria - sfida all'ultima cifra

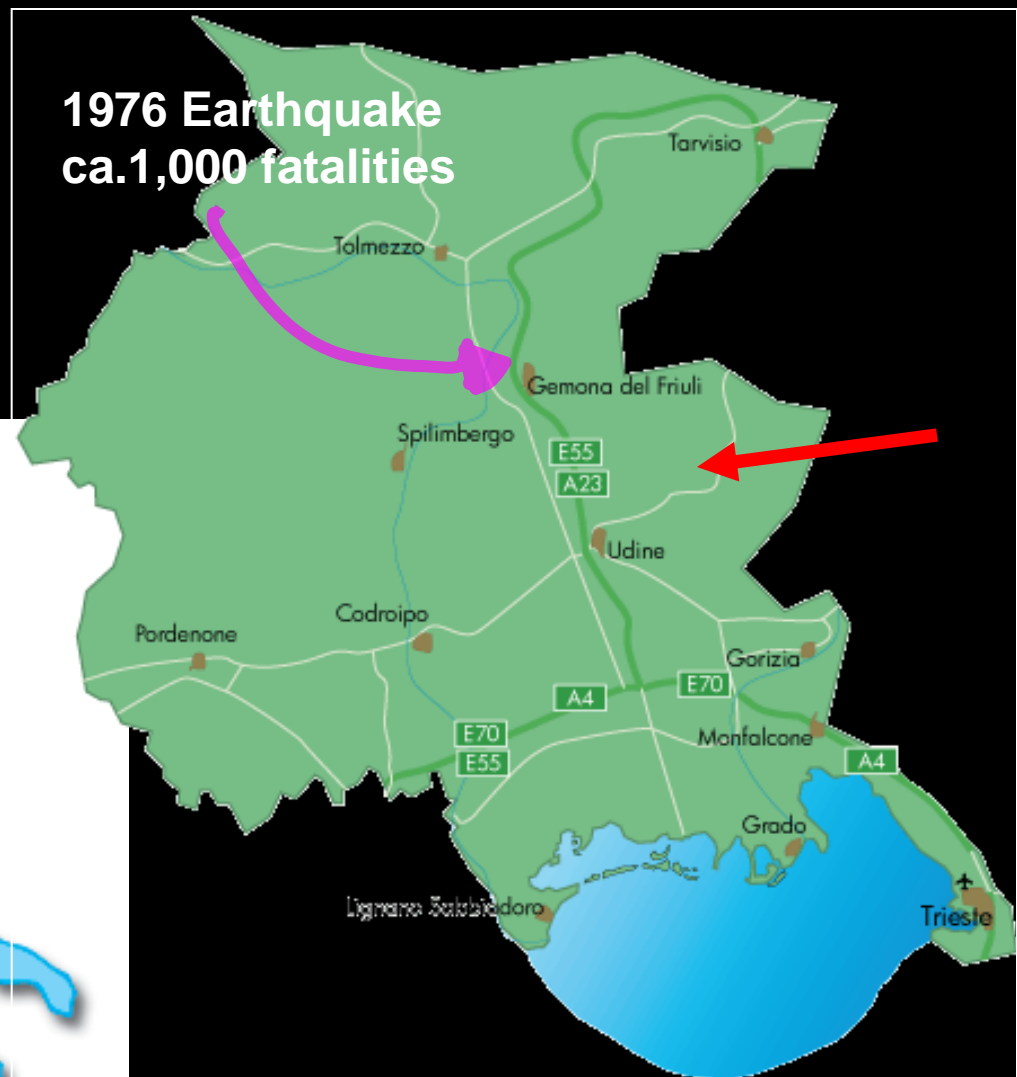
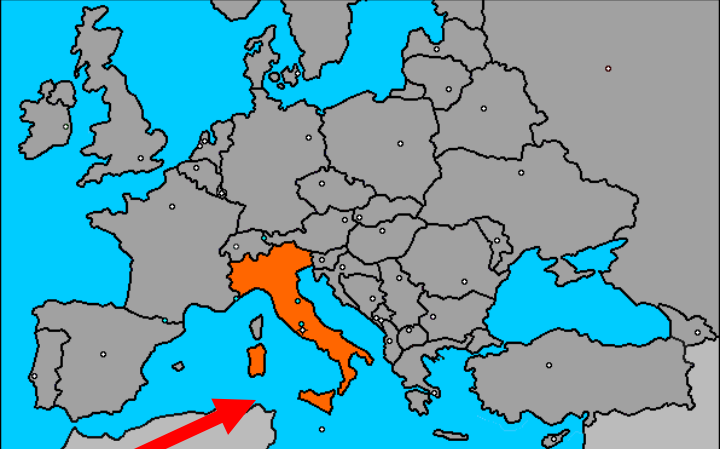
info
Comune di Udine
Puntoinforma tel. 0432 414717
Ludobus tel. 0432 271677 - 756
www.comune.udine.it

π

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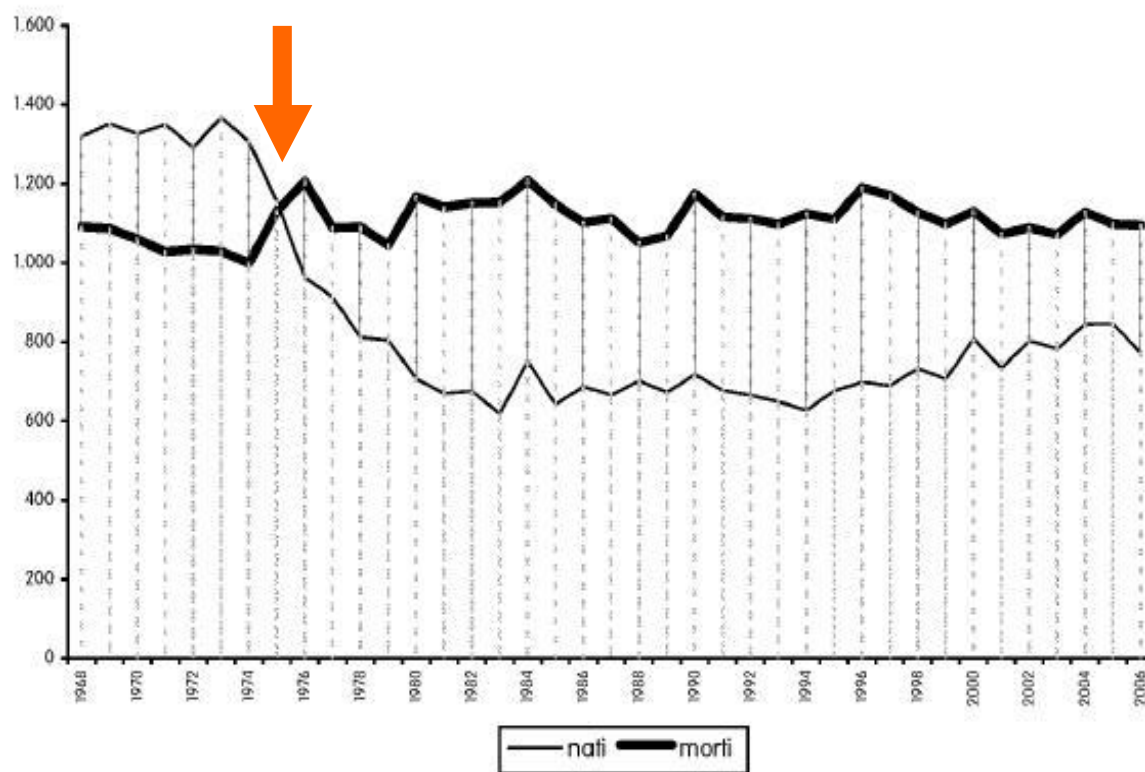
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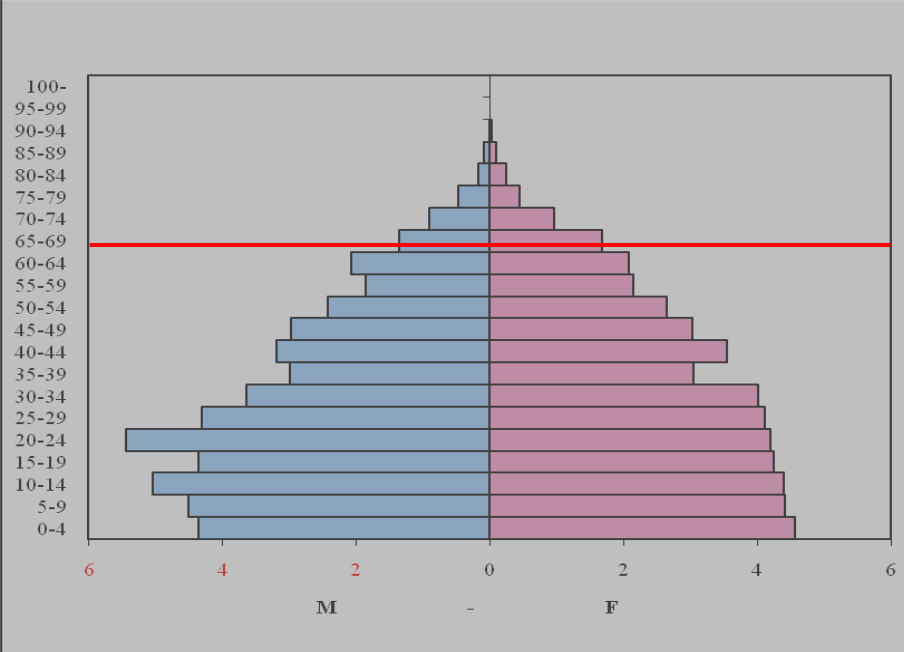


**1976 Earthquake
ca.1,000 fatalities**

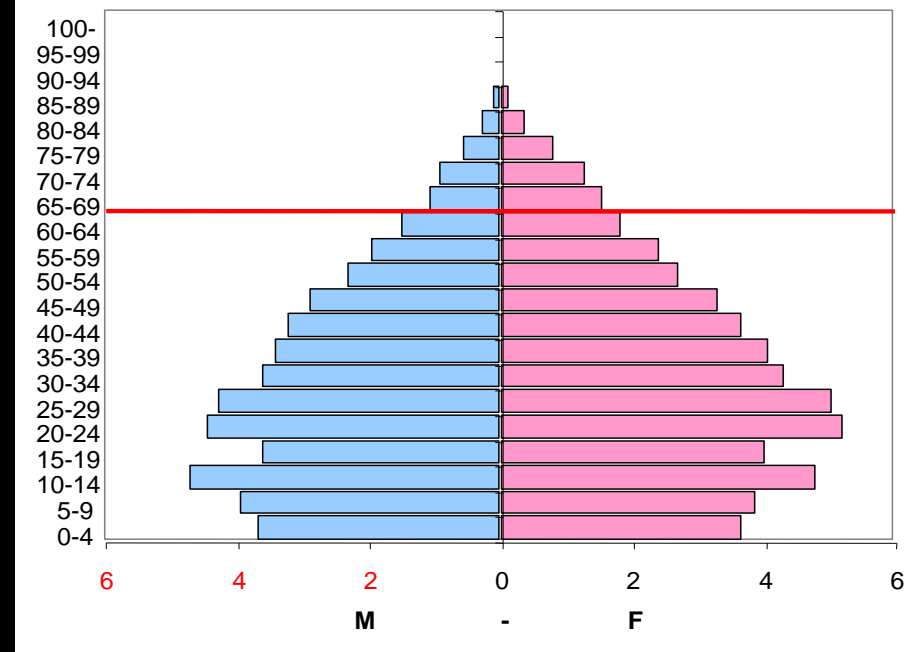
**Udine pop 100,000
Greater Udine pop 180,000**

NATALITY AND MORTALITY BETWEEN 1968 & 2006



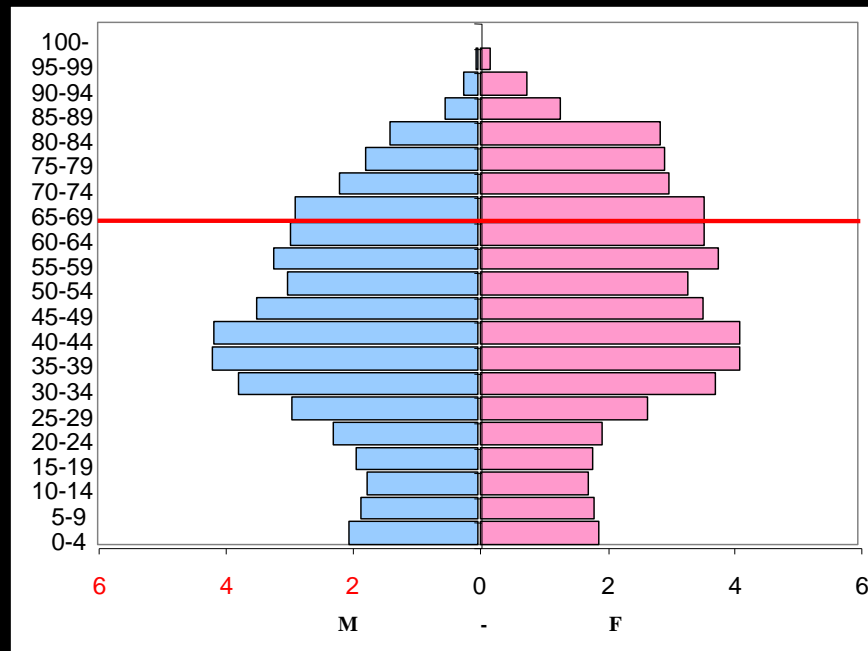


1871



1936

2001



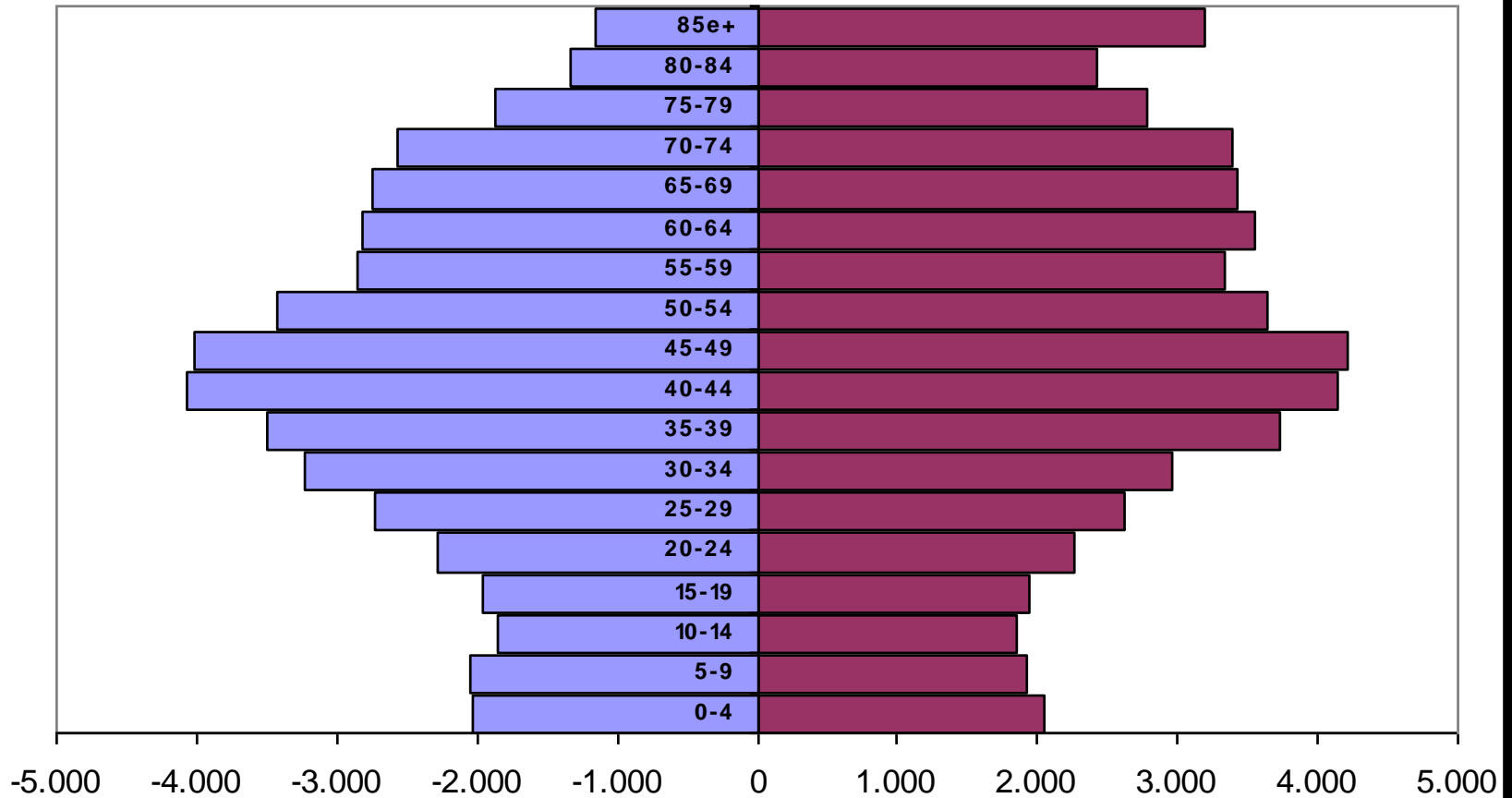
**DISTRIBUTION
PER AGE CLASS...**

**...ACCORDING
TO CENSUS**

Age class distribution in 2011

1:4. 1:8. 1:20

31 dicembre 2011



OLDER PEOPLE IN UDINE, ITALY & EUROPE

| | | Udine (2011) | Italy (2011) | Europe (2010) |
|-------------------------|-----------------------------|-----------------|-----------------|------------------|
| Average age | | 46 | 43 | 40.9 |
| Older people percentage | | 24.9 | 20.3 | 17.4 |
| Old age index | Population (65+) | 211.7 | 144.5 | 111.5 |
| | Population (0-14) | | | |
| Dependency ratio | Population [(0-14) + (65+)] | 57.8 | 52.3 | 49.3 |
| | Population (15-64) | | | |
| Old dependency ratio | Population (65+) | 39.3 | 30.8 | 25.9 |
| | Population (15-64) | | | |
| Exchange rate | Population (60-64) | 163.4 | 130.3 | - |
| | Population (15-19) | | | |

PERCENTAGE OF OLDER PEOPLE LIVING ALONE

| Age | Males | Females | Total |
|-----------|-------|---------|-------|
| % over 65 | 21,2 | 52,1 | 39,6 |
| % over 75 | 10,5 | 35,9 | 25,6 |
| % over 85 | 3,8 | 15,6 | 10,8 |

















World Health
Organization

REGIONAL OFFICE FOR Europe



Active Ageing
Good health adds life to years





World Health Day 2012
Copenhagen, 2 april 2012





World Health
Organization

REGIONAL OFFICE FOR Europe



Active Ageing
Good health adds life to years



Slogans

**ADD LIFE TO YEARS
NOT YEARS TO LIFE**

**What is good for older people
is good for other people**

**YOU CAN'T HELP GETTING OLDER,
BUT YOU DON'T HAVE TO GET OLD**

**But the hard truth is:
People with high income benefit more from
public funding than people with low income**

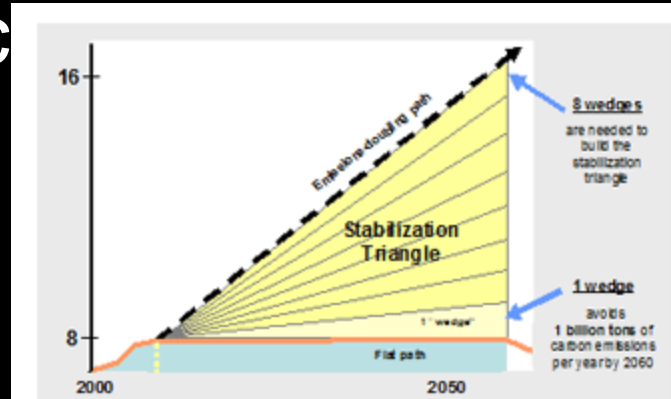


The context is critical

- We live in a **very difficult time**
- The recession is **extremely virulent**
 - It acts as a **multiplicative factor** mostly for the worst (2 cases concrete-work companies, the role of competition)
 - Inequalities and inequities increase dramatically (the **reverse “spirit level” effect**, life expectancy, school performance, quality of life)
- BUT We live a very important **discontinuity**, a time of holistic **paradigm revolution**, an **opportunity to improve**
- the scope of many of our principles (**development** vs **progress**) and concepts (e.g. citizenship, care, well-being, prevention) will change
- More holistic approach: whole-of-{ }

Strategic standpoints

- High commitment
- Intersectoral action
- Provide objectives (meaning, sense, points) to citizens and motivation to workers
- Break up the **stabilization triangle** in a number of **wedges** to reduce
- “best care at lower cost”
- “sometimes less is more”



STRATEGIES

- Avoid **fragmentation** of services
 - it leads to duplication
 - continuity and coordination costs
- Reduce waste of human, economic, and financial resources
 - Reduce gulf between research and practice, hospice, the right of a swan's song
 - Various rebound effects – over treatment over diagnosis
 - Bureaucracy
 - Excessive cost of technologies - tenders
 - Frauds and abuses – transparency and control
- Third sector, NPO's and voluntary workers

social capital as a common good

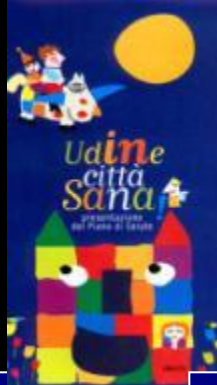
- Services of general interest
- Avoid Tragedy of Commons
- What is a citizen? Community welfare.
- Care should not be **category –specific**: elderly, physically or mentally disadvantaged disabled, marginalised , addicted, chronically ill, immigrants
- **Collective responsibility** of each and everyone towards all
- Equity (do not leave anyone behind) , sustainability, solidarity cohesion
- The “bus” effect The for-all movement e.g. sports for all
- Prevention and promotion, rehabilitation
 - Litteracy, lifestyles
- turn interaction into integration in society but also within service providers
- take into account – be accountable
- Sen’s principle: do not seek perfection but improve existing

The European Dilemma: liberism or solidarity?

- efficiency → market competitiveness
- freedom + transparency → liberism
- Trasymachus in Plato's Republic :
 - “justice is what suits the strongest best ”,
 - “power goes where power is”,
 - “justice goes where power is”,
 - “it rains always where it is wet already”
- Constitution → reduce the excess of power
- Human rights → Customers Rights,
- Sustainability → the Rights of the Environment of
→ the Rights of Future Generations
- In Need of a **European Constitution**

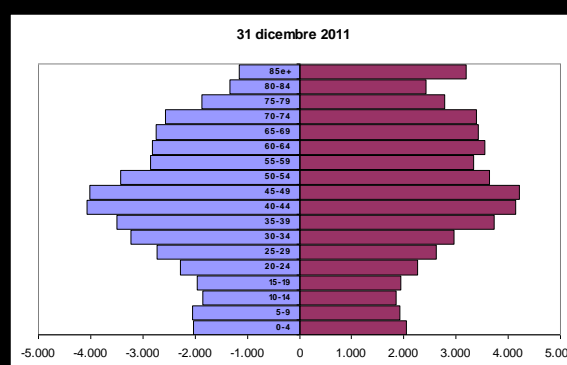
Cities movements

- Healthy cities
 - Active cities
 - Learning cities
-
- Welfare → well-being → happiness



Healthy City
Milestone 1
CITY
HEALTH
PROFILE

Healthy City
Milestone 2
CITY
HEALTH
PLAN

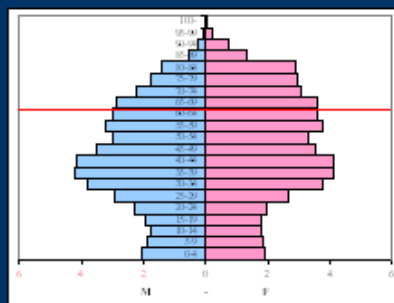
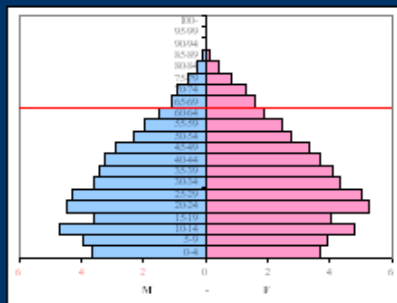


OLD
DEPENDENCY
RATIO
39.3 %

DEMOGRAPHY

**PRIORITY AREA:
ELDERLY**

STRUTTURA DELLA POPOLAZIONE DI UDINE (1936, 2001)

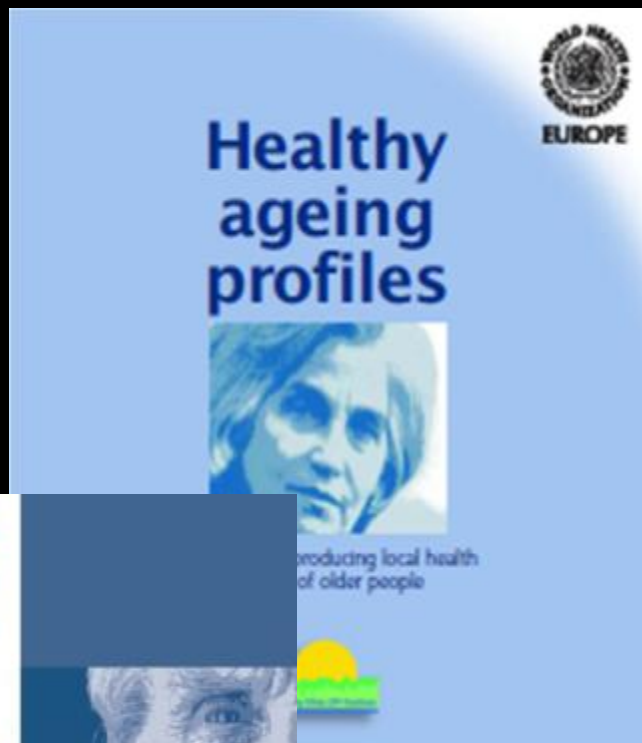


Fonti: Censimenti della popolazione 1936, 2001

**PROMOTE A PARADIGM SHIFT
OF AGEING**



Core theme Phase IV HEALTHY AGEING PROFILES (2004-2008)



UDINE
The health profile
of the elderly population



Table 1. List of indicators

Section A Population profile

| | |
|----|---------------------------------|
| 1 | Population structure |
| 2 | Small-area residence |
| 3 | Life expectancy |
| 4 | Population dynamics |
| 5 | Dependency ratio |
| 6 | Single household status |
| 7 | Mortality by cause, age and sex |
| 8 | Morbidity |
| 9 | Mental health |
| 10 | Functional impairment |
| 11 | Behaviour |

Section B Access to health and social support services

| | |
|----|---|
| 12 | Values |
| 13 | City delivery and social support system |
| 14 | Health and social care responsibility |

Section C The socioeconomic portrait: vulnerabilities and strengths

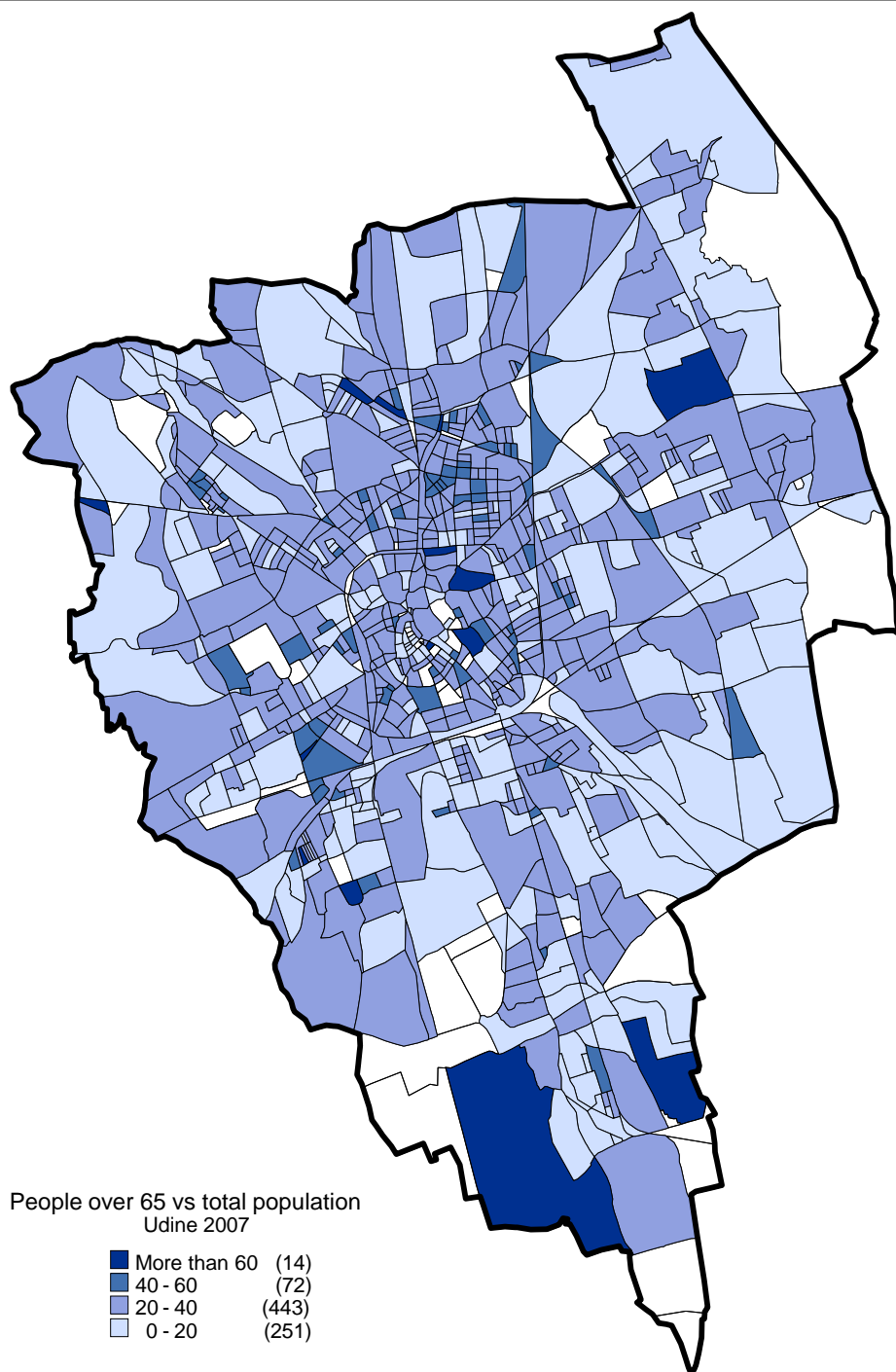
| | |
|-----------|--|
| <i>C1</i> | <i>Employment, income and social position</i> |
| 15 | Economic status |
| 16 | Income |
| 17 | Education |
| <i>C2</i> | <i>Housing and environment</i> |
| 18 | Housing ownership |
| 19 | Safety and security at home and in the neighbourhood |
| 20 | Access to transport |
| <i>C3</i> | <i>Participation and empowerment</i> |
| 21 | Participation in decision-making |
| 22 | Influence in the community |

CITY HEALTH MAPS

- Distribution of people aged over 65;
- Mapping of the provision of health, social and cultural services, such as:
 - GPs
 - CHEMISTS'
 - NURSING HOMES
 - BUS STOPS
 - SUPERMARKETS
 - GREEN AREAS
 - MUSEUM & LEISURE ACTIVITIES
- Analysis of gaps in services provision

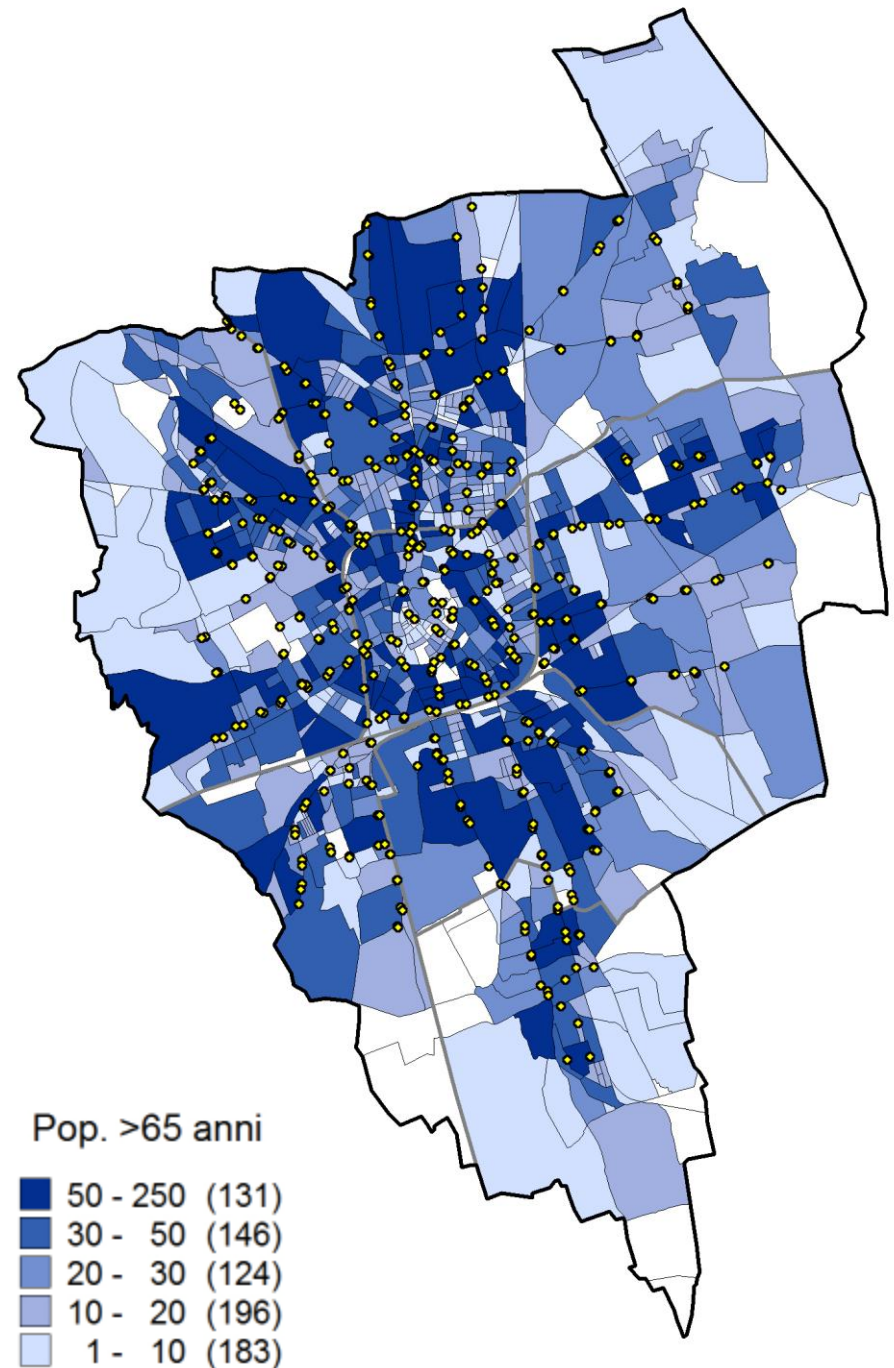
POPULATION OVER 65

- Almost 1 citizen out of 4 in Udine is an older person
- Older people correspond to 24.6% of the total population
- They are quite uniformly distributed on the city territory although in the city surroundings we register the smallest percentages



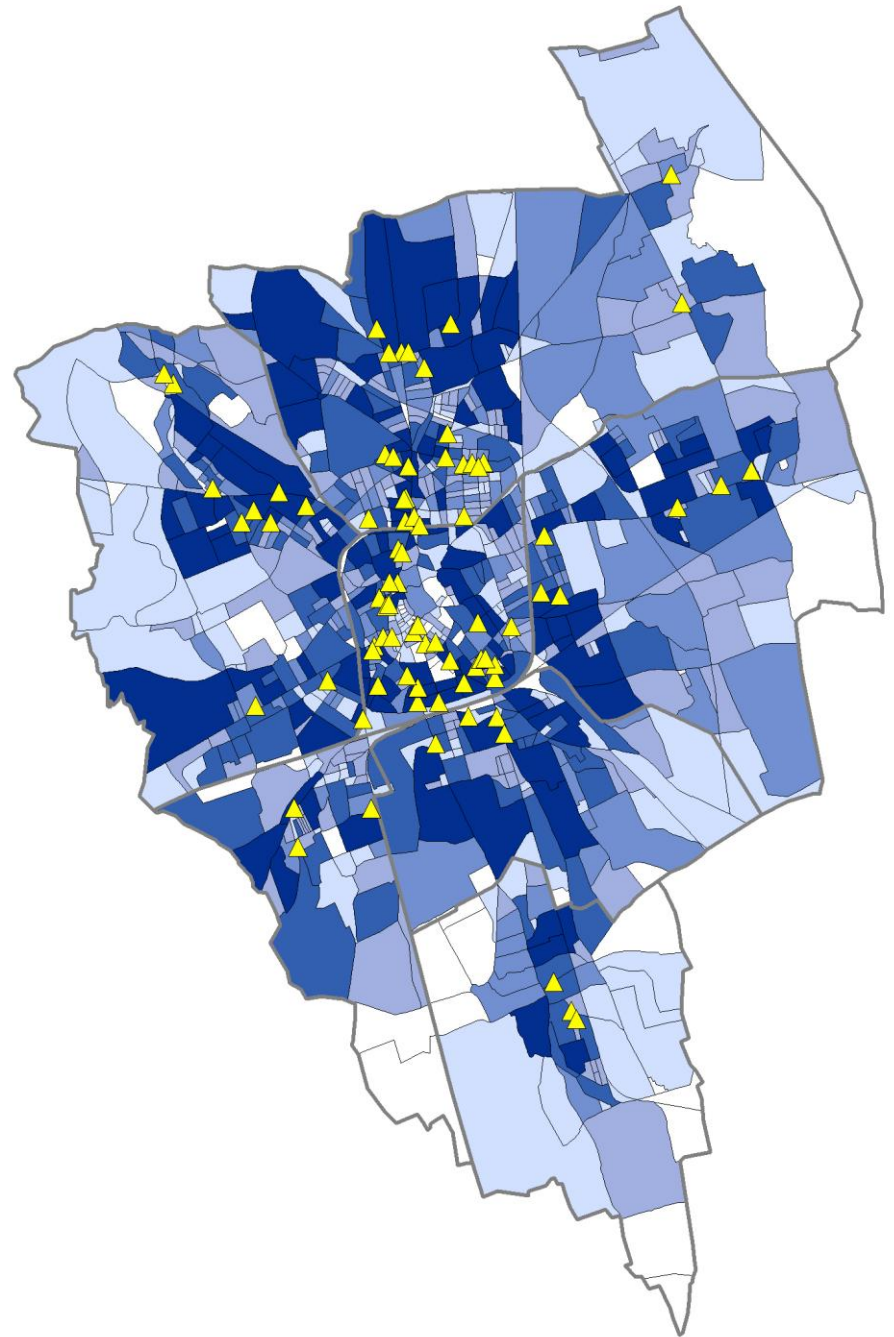
POPULATION OVER 65 & BUS STOPS

- Different nuances of colour refer to the density of population aged over 65
- Yellow points identify the bus stops distributed throughout the city
- Local transport lines are much more developed in the city centre than in the surroundings



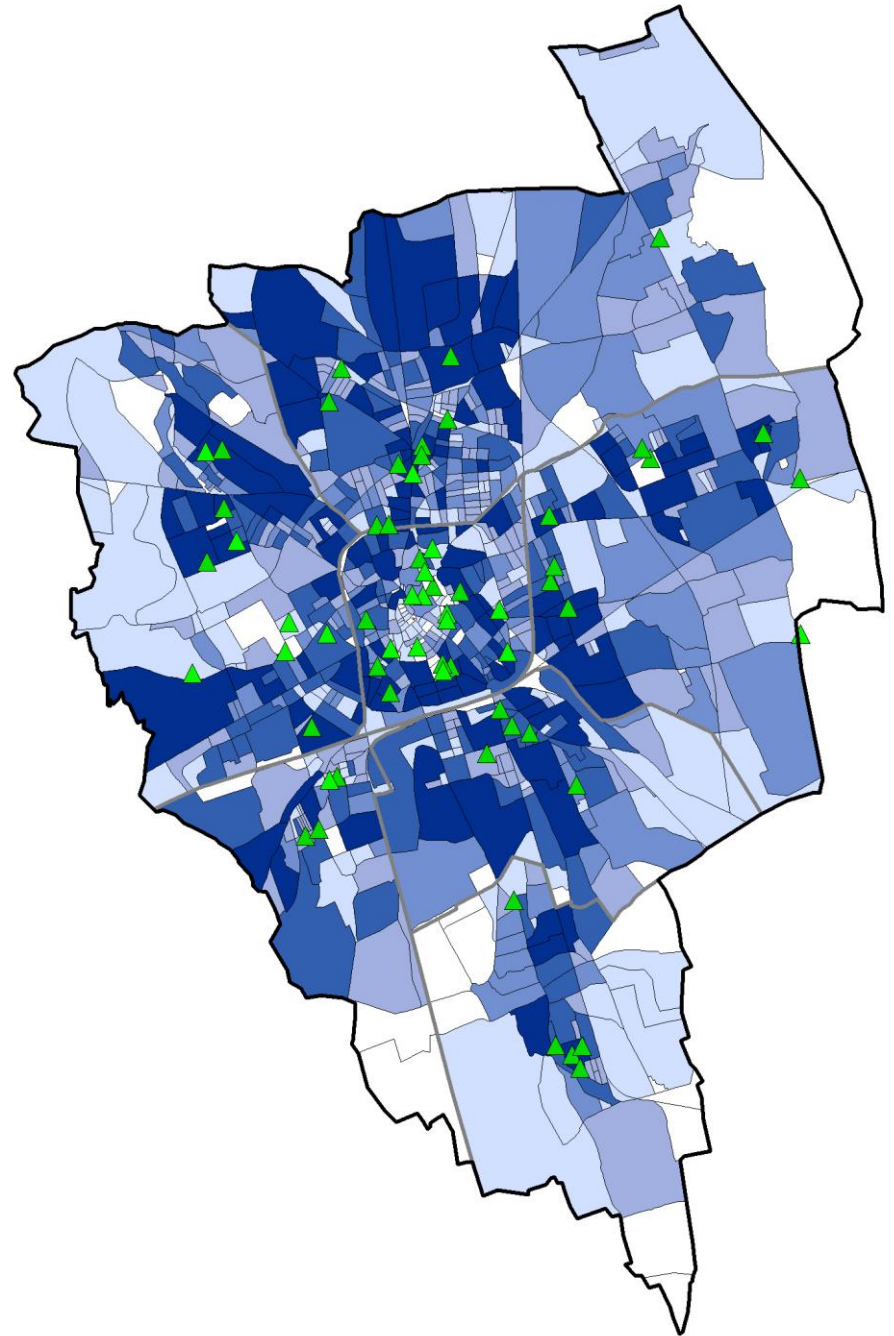
POPULATION OVER 65 & GPs

- The map shows the distribution of GPs in the city
- Support and recommendations by GPs are fundamental to older people
- Also GPs are more concentrated in the city centre



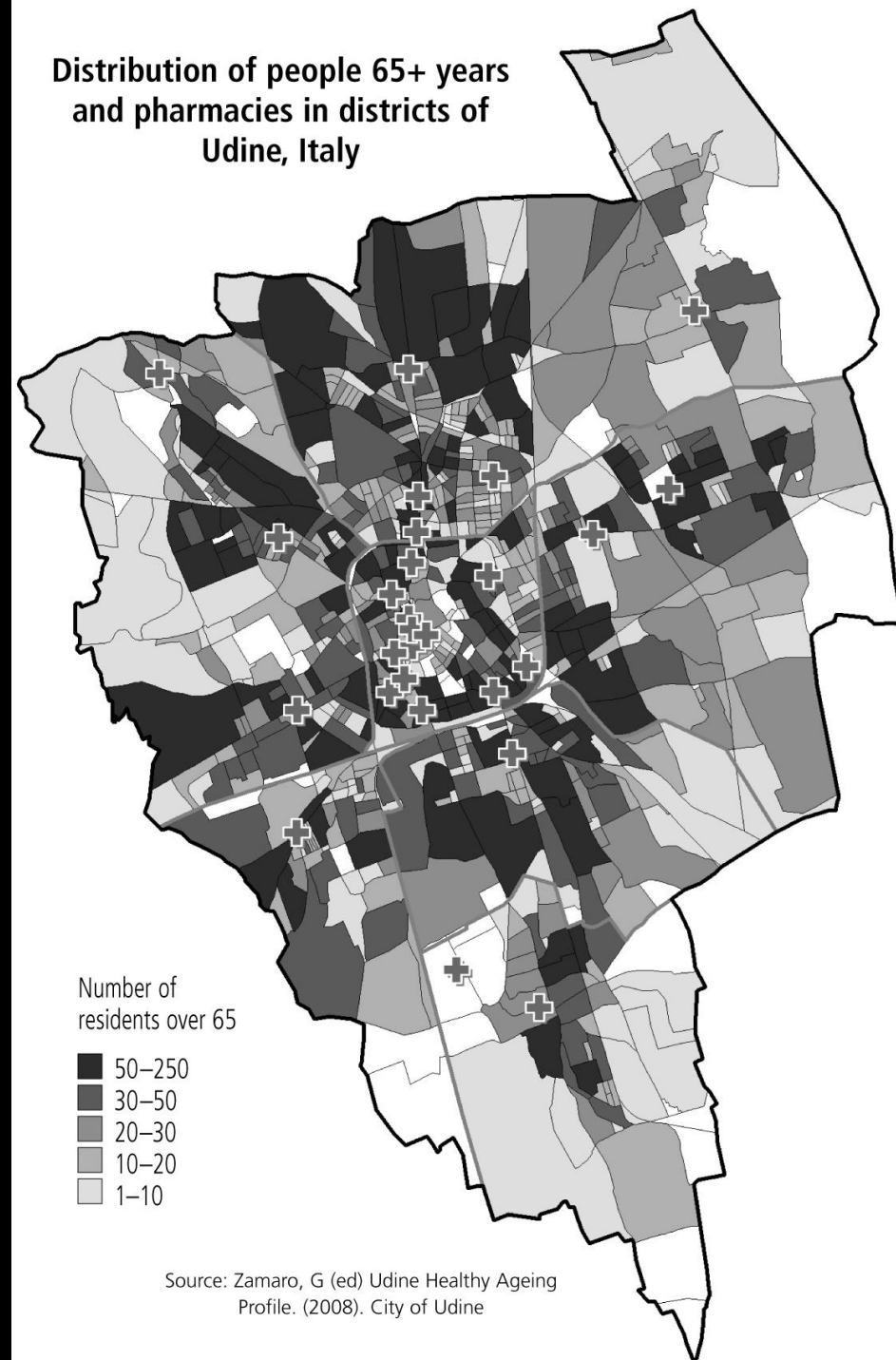
POPULATION OVER 65 & GREEN AREAS

- The map shows the distribution of green areas in the city
- Many areas in the city can benefit from the presence of green areas or parks



PHARMACIES IN UDINE

Distribution of people 65+ years
and pharmacies in districts of
Udine, Italy



Source: Zamaro, G (ed) Udine Healthy Ageing
Profile. (2008). City of Udine

Age-friendliness community assessment



World Health
Organization



Americas

Argentina, La Plata
Brazil, Rio de Janeiro
Canada, Halifax
Canada, Portage la Prairie
Canada, Saanich
Canada, Sherbrooke
Costa Rica, San Jose
Jamaica, Kingston
Jamaica, Montego Bay
Mexico, Cancun
Mexico, Mexico City
Puerto Rico, Mayaguez
Puerto Rico, Ponce
USA, New York

Africa

Kenya, Nairobi

Eastern Mediterranean

Jordan, Amman
Lebanon, Tripoli
Pakistan, Islamabad

Europe

Germany, Ruhr
Ireland, Dundalk
Italy, Udine
Russia, Moscow
Russia, Tuymazy
Switzerland, Geneva

UK, Edinburgh

UK, London

South-east Asia

India, New Delhi
India, Udaipur

Western Pacific

Australia, Melbourne
Australia, Melville
China, Shanghai
Japan, Himeji
Japan, Tokyo

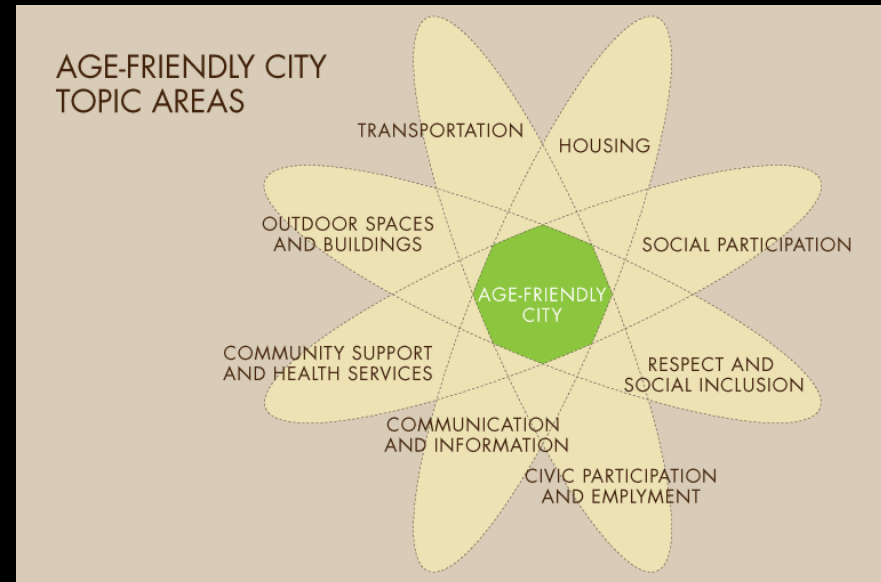
- Collaborating cities involved: 33 cities (22 countries)
- Objective: to identify age-friendliness features of the physical & social environment and elicit suggestions for improvement
- Results published in the

Global Age-friendly Cities:
A Guide



Age-friendliness community assessment applied to Udine

- Methodology adopted: [Vancouver Protocol](#)
- Period of assessment: January – December 2007
- Topics: What is it like to live in Udine as an older person?
- People involved: about 100 people
- 8 focus groups (10-12 people each group):
 - 4 with older people divided according to Age (2 groups aged 60-74 & 2 aged >75) & Income (2 groups with low income & 2 with high-middle income)
 - 1 with caregivers
 - 1 with voluntary sector
 - 1 with public sector
 - 1 with private sector





**What is it like to
live in Udine as
an older person?**

Survey 8 topics

OUTDOOR SPACES & BUILDINGS

Com'è per voi uscire di casa per fare una passeggiata, prendere una boccata d'aria fresca o fare delle commissioni?

ADVANTAGES

- Respondents feel secure enough from criminal victimization in the city

BARRIERS

- Older people find it difficult to attend some activities because they cannot reach the city centre or other places



EXAMPLE: TRANSPORTATION

| Age-friendly advantages | Age-friendly disadvantages | Suggestions for improvement |
|--|--|--|
| <p><u>Use of bicycle:</u></p> <ul style="list-style-type: none"> - Many older people, especially men, go by bicycle as a habit. - Bicycle is more used in the suburbs than to reach the city centre. <p><u>Walkways:</u></p> <ul style="list-style-type: none"> - Most of older persons in good health and without disability like walking around the city. <p><u>Public transport:</u></p> <ul style="list-style-type: none"> - New age-friendly buses have been introduced, with lower steps which enable access to older and disabled people. - According to the interviewees' opinion, buses usually arrive on time. <p><u>Taxi transport:</u></p> <ul style="list-style-type: none"> - Some older persons can benefit from vouchers for taxi transport, issued by the municipal administration according to their income and level of disability. | <p><u>Local transport:</u></p> <ul style="list-style-type: none"> - Lack of connecting lines of transport between the suburbs and the city centre, which forces older people to change many buses. - Lack of bus stops in long streets. - Old buses are not age-friendly and difficult to get on and off because of too high steps. - Bus drivers do not pay enough care to older people when they get on and off. - Older people feel not safe on buses because of bag-snatching. - Bus tickets are too expensive. - The time of validity of a bus ticket, that is one hour in weekday and four hours in Sundays, is not enough for older persons. <p><u>Safety and security:</u></p> <ul style="list-style-type: none"> - Older people do not like taking the bus during the night, because they do not feel safe and the number of buses is however very limited. - Older people feel not safe on houses because of bag-snatching. <p><u>Careless drivers:</u></p> <ul style="list-style-type: none"> - Drivers pay not care enough to older people. - In general, people do not drive with great attention, do not respect regulations and limits and do not use indicator lights. - Police do not enforce regulations/law. <p><u>Taxi transport:</u></p> <ul style="list-style-type: none"> - Some associations offer transport by taxi for a fee. | <ul style="list-style-type: none"> - Make a deviation to some connecting lines of local transport to offer a more complete extended service. - Buses should be more frequent. - Introduce more bus stops in long streets. - Introduce a shuttle bus for older people which helps them in reaching the city center. - Solve the problem of too high steps on the bus, perhaps through a mobile footboard. - Help older persons in need by transporting them where necessary, for example employing a pensioner who has the car. - Reduce the cost of bus tickets. - Increase the time of validity of a bus tickets. |

TRANSPORT

Descrivete la vostra esperienza nell'utilizzo dei mezzi pubblici, come autobus o treno. Com'è guidare in città?

ADVANTAGES

- Many older people still use a bicycle & go on foot, above all in the outskirts



BARRIERS

- Public transport is not much used by older people because of:
 - Difficulty in getting on and off from the bus;
 - Lack of connections



HOUSING

Parlateci della casa o dell'appartamento in cui vivete. Se le vostre esigenze cambiassero, che scelte fareste rispetto all'abitazione.

ADVANTAGES

- Older people are emotionally tied to their houses: they have lived there for many years and established good neighbourhood relationships

BARRIERS

- Most houses present architectural barriers and have no lift



CIVIC PARTICIPATION & EMPLOYMENT

Potreste parlarci del vostro servizio come volontari? Se siete al momento impegnati in attività remunerate o le state cercando, potreste dirci di cosa si tratti? Infine potreste parlarci della vostra partecipazione ad attività di interesse pubblico, come consigli comunali o associazioni varie?

ADVANTAGES

- The majority of respondents had been or were still engaged in voluntary work

BARRIERS

- Voluntary work does not always receive enough public recognition



Dublin Declaration 2011 Age Friendly Cities Conference



HEALTHY AGEING STRATEGIES

1. Healthy lifestyles
2. Active participation in the choices concerning city planning
3. Promote social opportunities and contrast solitude

1. To actively involve older people in **INFLUENCING & MONITORING** city policies regarding health



2. To tackle **SOLITUDE & ISOLATION** by offering opportunities of socialization and participation in city life



3. To develop strategies that allow older people to remain **PHYSICALLY, MENTALLY & SOCIALLY ACTIVE** for as long as possible



GENTLE FITNESS





1. Hands on the wall



2. On the tip of your toes



3. Eyes closed & without you hands

PHYSICAL ACTIVITY AT HOME

The aim is to stimulate the elderly towards a regular physical exercise and encourage them to participate to physical activity programmes



WALKING GROUPS

- Encouraging healthy lifestyles in adult and old age, to prevent or delay the onset of physical disability

- Offering opportunities of socialization and tackling solitude

- Turning our environment into a more attractive place where to be physically active





Horsens Senior Games 25 - 29 May 2008



HØRSENS





KEEP PHYSICALLY & MENTALLY MOVING

Walk together up to the library and then read a book and have a healthy snack

"Testa & Piedi in movimento"



Citizens on the move





CONTROL YOUR BREATHING

**free tests of your respiratory
functionality once a month at
the Primary Health Care
Department**





Scelte informate e consapevoli
per uno stile di vita salutare.

DESPAR  EUROSAPAR  INTERSPAR 

HEALTH PYRAMID

CONSUMERS AWARE OF
THEIR CHOICES FOR
HEALTHIER LIFESTYLES

Social marketing and health info
point in a supermarket, run by
health professionals and
voluntary associations

MISURAZIONE
DELLA PRESSIONE



CONTROLLO
DELLA GLICEMIA



RILEVAZIONE
DEL BATTITO CARDIACO



CALCOLO DELL'INDICE
DI MASSA CORPOREA



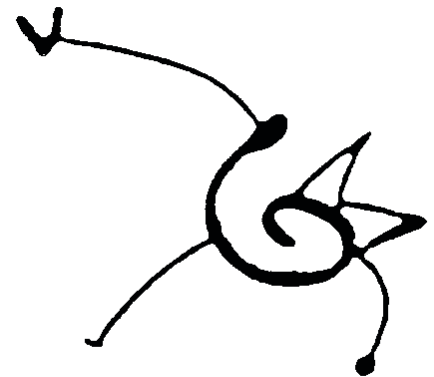




SILVER LIVING-ROOM Day Centre



URBAN GARDENS





DEFINITION

Land plots owned by the Municipality and rented by citizens to grow vegetables and small plants

USERS

Families

- Seniors**
- Schools**
- Associations**

IN UDINE

- 3 areas (60 total land plots)**
- Surface: 30 sq. m each**
 - Several other areas planned**

OBJECTIVES

- Socialization
- Education
- Crop production
- Urban restoration
- Open-air therapy
- Healthy lifestyle





OTHER ACTIVITIES







MOVE YOUR MINDS...



MINDS ON THE MOVE

CAMMINAMENTI

- is an integral part of the comprehensive strategy implemented by the local government in order to improve the quality of life of older people in Udine;
- is financed by the Udine Municipality with a special tax collected from citizens' donations (0.5% of their income devoted to their own Municipality) and then used for social needs;
- offers group meetings held in public places which are readily accessible and free to participants.

OBJECTIVES

- to facilitate the formation of local groups for older people where to offer new opportunities for learning;
- to provide new opportunities for people to meet and share the activities in a useful and entertaining way, making education for adults “fun” and more attractive;
- to contribute to scientific research by disseminating the findings of the project.

STAKEHOLDERS INVOLVED:

The project is carried out in collaboration with many local stakeholders dealing with education and learning, both institutions such as the Local Health Agency, the University, and educational partners, such as the municipal libraries and the game library, and a dozen associations from the third sector.



ACTIVITIES:

- music
- maths & logic games
- memory games
- English words in common use
- cards games
- calligraphy
- information on physical & mental health



EVALUATION & DISSEMINATION

- The participants' perception regarding their mental abilities and their satisfaction with the training program will be
- **FINALLY ASSESSED**
- (including self assessment)



PLANS FOR THE FUTURE

The project is at an experimental phase now and in 2013 it will spread to other areas of the city and will be available as a constant offer in order to inspire the community to enhance memory and recall ability while engaged in a more active and healthy lifestyle





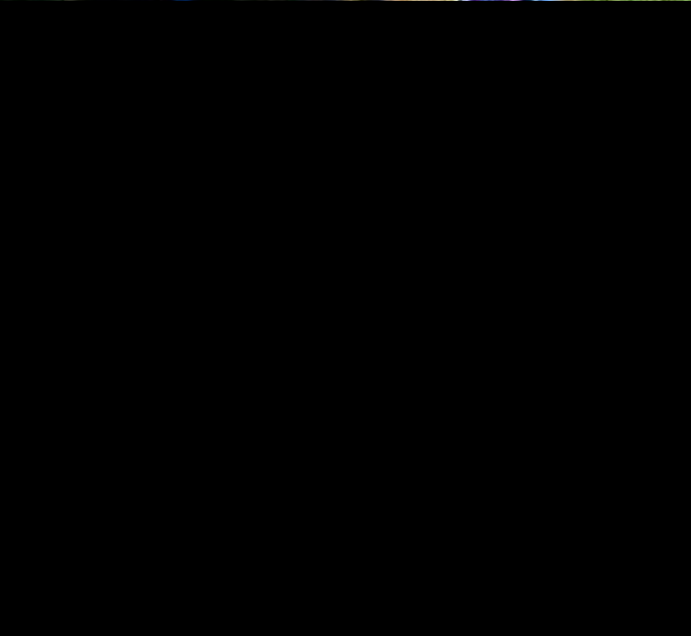
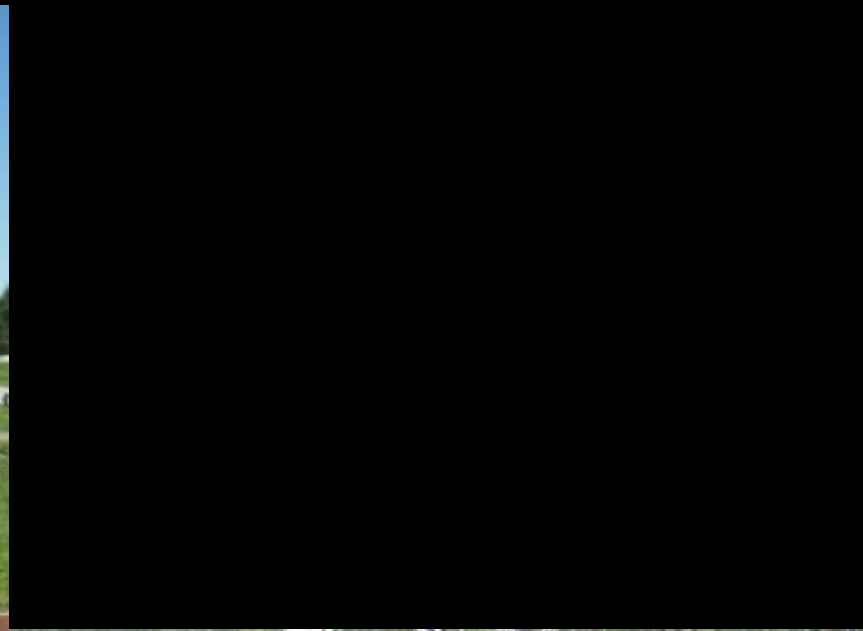
PARCOUR PROJECT

Personalised services for Active ageing using
netwoRked exerCise installatiOns in Urban
enviRonments

Plans for the future
include new actions
both to encourage
physical activity
opportunities among
older people and to
promote their social
inclusion by tackling
their marginalization
and isolation



- It is a cross-disciplinary project proposal for the **7th Framework Programme** under the EU;
- It aims at developing personalized services for active ageing in city environments using existing urban infrastructure enhanced with **smart sensor networks and adaptive training equipment**;
- It is a sort of **social platform for exercise** to enable the elderly users in building ability, agility and trust in using their local urban landscape as an exercise environment;
- **The third year would be dedicated to a real-life pilot implementation in Udine.**





| MALES | 2002* | 2050* |
|---------|----------------|----------------|
| Age x | e _x | e _x |
| | | |
| 0-4 | 76,72 | 81,32 |
| 5-9 | 72,01 | 76,62 |
| 10-14 | 67,04 | 71,65 |
| 15-19 | 62,07 | 66,68 |
| 20-24 | 57,25 | 61,84 |
| 25-29 | 52,51 | 57,06 |
| 30-34 | 47,70 | 52,21 |
| 35-39 | 42,91 | 47,37 |
| 40-44 | 38,11 | 42,52 |
| 45-49 | 33,48 | 37,79 |
| 50-54 | 28,91 | 33,10 |
| 55-59 | 24,63 | 28,61 |
| 60-64 | 20,49 | 24,20 |
| 65-69 | 16,70 | 20,01 |
| 70-74 | 13,29 | 16,08 |
| 75-79 | 10,36 | 12,47 |
| 80-84 | 7,90 | 9,23 |
| 85-89 | 5,55 | 6,20 |
| 90-94 | 3,92 | 3,96 |
| 95-99 | 2,79 | 2,31 |
| 100-104 | 1,93 | 1,97 |
| 105-109 | 1,33 | 1,69 |



| FEMALES | 2002 | 2050 |
|---------|----------------|----------------|
| Age x | e _x | e _x |
| | | |
| 0-4 | 83,18 | 97,38 |
| 5-9 | 78,47 | 92,75 |
| 10-14 | 73,51 | 87,78 |
| 15-19 | 68,56 | 82,81 |
| 20-24 | 63,62 | 77,85 |
| 25-29 | 58,70 | 72,90 |
| 30-34 | 53,79 | 67,95 |
| 35-39 | 48,88 | 62,99 |
| 40-44 | 44,00 | 58,06 |
| 45-49 | 39,22 | 53,16 |
| 50-54 | 34,54 | 48,29 |
| 55-59 | 29,99 | 43,45 |
| 60-64 | 25,55 | 38,63 |
| 65-69 | 21,16 | 33,81 |
| 70-74 | 17,07 | 29,06 |
| 75-79 | 13,27 | 24,36 |
| 80-84 | 9,82 | 19,73 |
| 85-89 | 6,87 | 15,24 |
| 90-94 | 4,72 | 11,02 |
| 95-99 | 3,38 | 7,28 |
| 100-104 | 2,36 | 4,22 |
| 105-109 | 1,63 | 2,35 |

*2002 because it is the latest death table available.

**2050 because the data is sufficiently robust to make this long term projections

Life expectancy table shows an increasing longevity in population, due to more effective health measures:

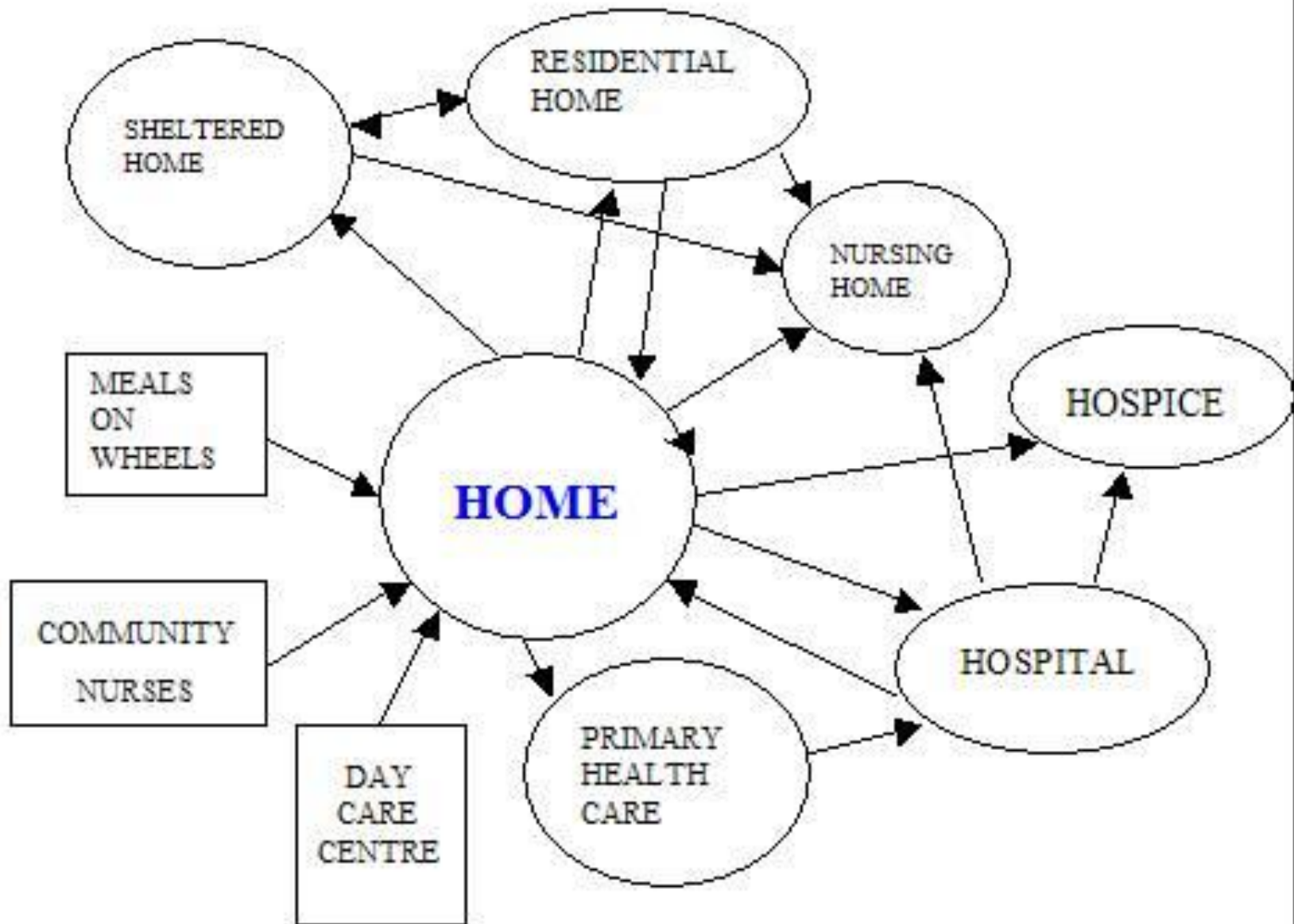
- Life expectancy in 2002

- Males 76.72
- Females 83.18

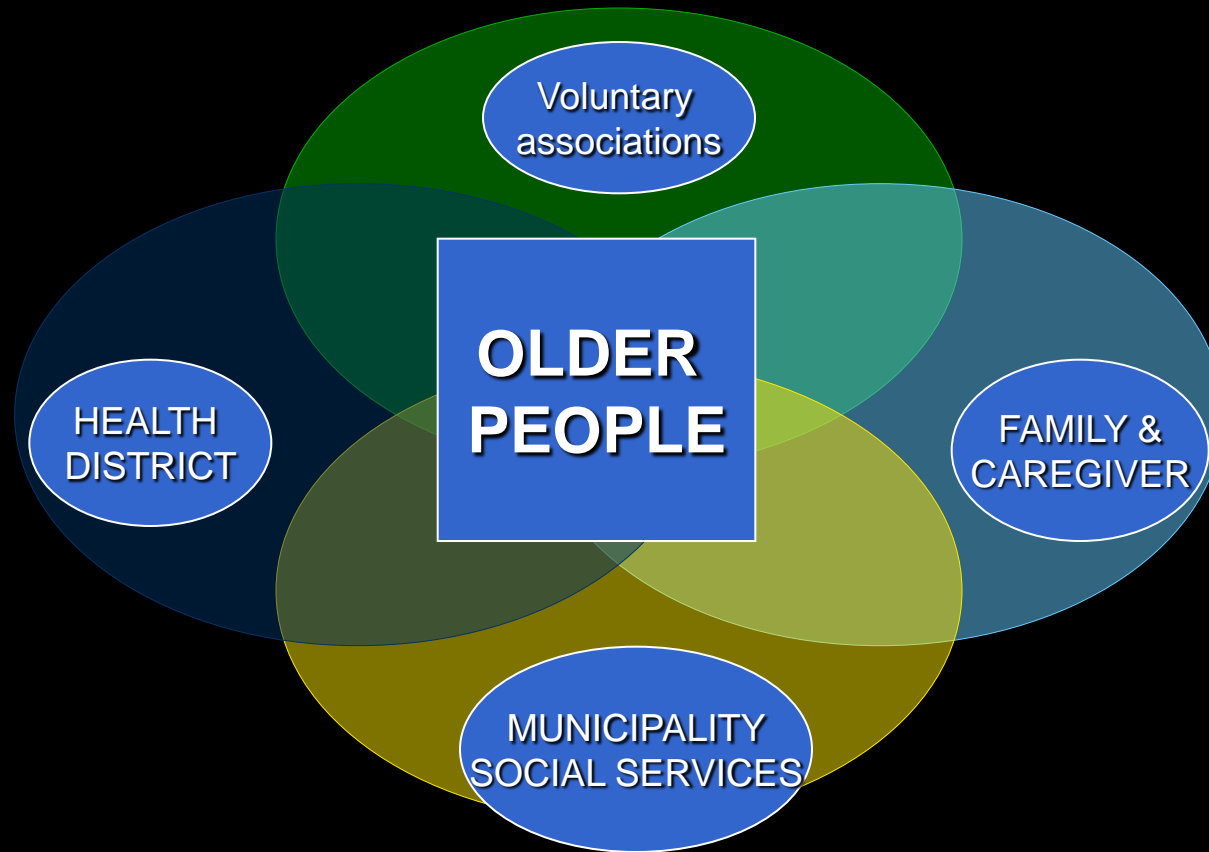
- Life expectancy in 2050

- Males 81.32
- Females 95.41

SOCIAL SERVICES FOR OLDER PEOPLE



INTEGRATION



NO ALLA SOLIT'UDINE



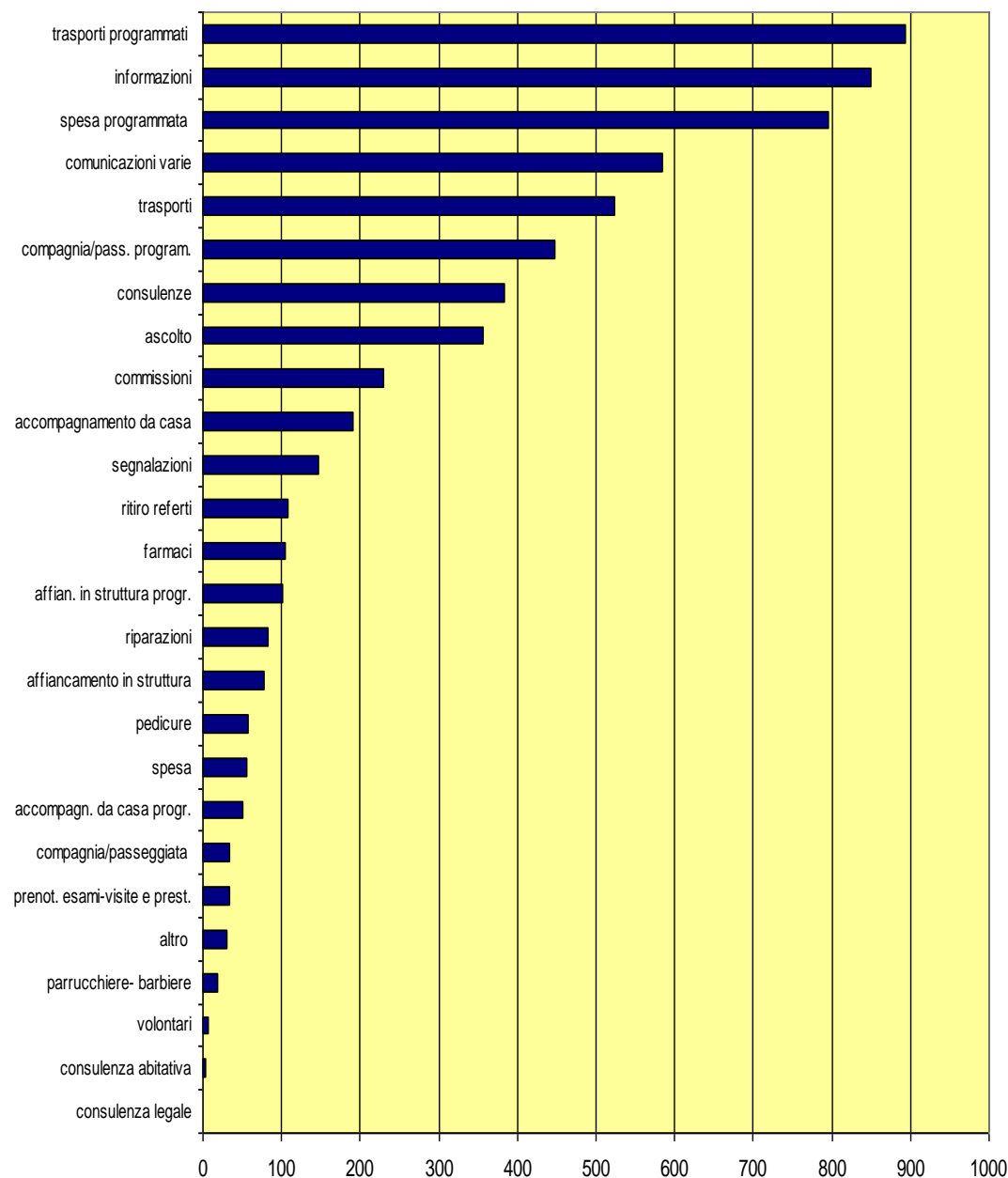
Giving support to
older and frail people
in their everyday life,
especially those living
alone, with disabilities
or economic difficulties



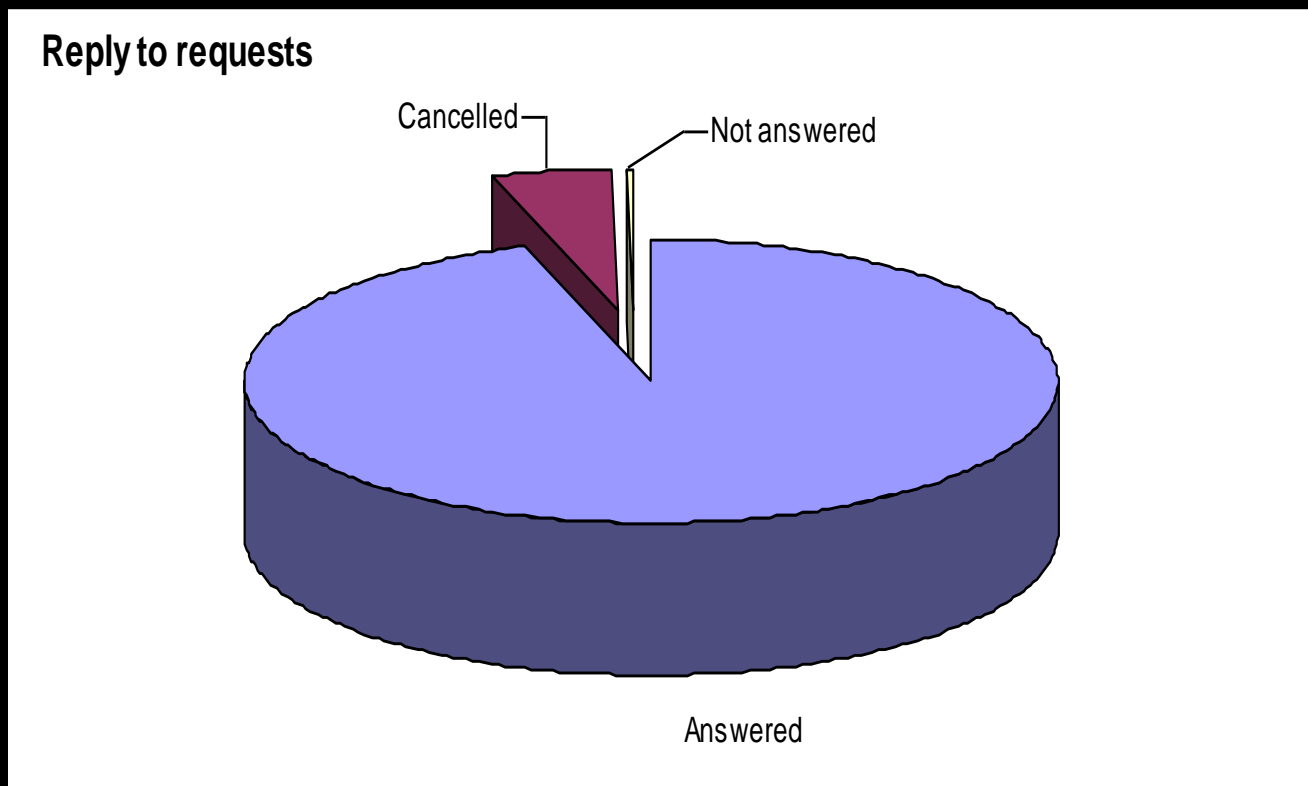
Provision of services for the everyday life:

- Listening
- Commissions
- Support for visits in the hospital
- Company
- Advice
- Professional and legal advice
- Medicines
- Information
- Injections
- Doing the shopping
- Transportation
- Repairs
- Other

Richieste pervenute - anno 2011



IN THE YEAR 2012
4637 REQUESTS were answered
175 REQUESTS were cancelled
85 REQUESTS were not answered



What is happening to me?

Will I still be able to care for my family, work and think to my interests?

Do my parents try to conceive something?

**Will I increasingly depend on the others?
Will I be a burden?**

Where can I find help in case of need? How much will it cost to me?

How can I manage to move?

Who will care for my economic difficulties?

Where are my friends? Will they still come and visit me?

Will I be able to stay at home, even if my house is small and inadequate?

Which future should I expect for me?

Which future should I expect for my family?

