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Print this page

Noto Sans Thai UI Thin
Noto Sans Thai UI ExtraLight
Noto Sans Thai UI Light
Noto Sans Thai UI Regular
Noto Sans Thai UI Medium
Noto Sans Thai UI SemiBold
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NO-BREAK SPACE uni00A0									
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MODIFIER LETTER MINUS SIGN uni02D7	-	-	-	-	-	-	-	-	-
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THAI CHARACTER CHO CHOE uni0E0C	๓	๔	๕	๖	๗	๘	๙	๐	๑
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THAI CHARACTER PHO SAMPHAO uni0E20	๓	๔	๕	๖	๗	๘	๙	๐	๑
THAI CHARACTER MO MA uni0E21	๓	๔	๕	๖	๗	๘	๙	๐	๑
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ZERO WIDTH JOINER
uni200D

HYPHEN
uni2010

DOTTED CIRCLE
uni25CC

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The public sector has also become an important employer of people who are unemployed, with 1.5 million unemployed people employed in the public sector in 1995, compared with 1 million in 1980. The public sector has also become an important employer of people who are employed, with 1.5 million employed people employed in the public sector in 1995, compared with 1 million in 1980.

The public sector has also become an important employer of people who are self-employed, with 1.5 million self-employed people employed in the public sector in 1995, compared with 1 million in 1980. The public sector has also become an important employer of people who are retired, with 1.5 million retired people employed in the public sector in 1995, compared with 1 million in 1980.

The public sector has also become an important employer of people who are students, with 1.5 million students employed in the public sector in 1995, compared with 1 million in 1980. The public sector has also become an important employer of people who are housewives, with 1.5 million housewives employed in the public sector in 1995, compared with 1 million in 1980.

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the 1990s, the number of people in the world who are under 15 years of age is expected to increase by 1.5 billion (United Nations 1994).

There is a growing awareness of the need to develop a new generation of people who are able to work in a global context. The United Nations Educational, Scientific and Cultural Organization (UNESCO) has identified the need for a new paradigm of education, which is based on the following principles (UNESCO 1996):

- Education should be based on the individual, rather than on the state or society.
- Education should be based on the individual's ability to learn, rather than on the individual's knowledge.
- Education should be based on the individual's ability to solve problems, rather than on the individual's ability to follow instructions.

These principles are in line with the idea of a new paradigm of education, which is based on the individual's ability to learn, solve problems and work in a global context.

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There is a growing awareness of the need to address the needs of children in the world, and the United Nations has developed a series of goals for the 21st century. The first goal is to 'eradicate poverty and hunger' (United Nations 1994, p. 1).

The second goal is to 'achieve universal primary education' (United Nations 1994, p. 1).

The third goal is to 'promote sustainable development' (United Nations 1994, p. 1).

The fourth goal is to 'promote gender equality and empower women' (United Nations 1994, p. 1).

The fifth goal is to 'improve the quality of education' (United Nations 1994, p. 1).

The sixth goal is to 'reduce the child mortality rate' (United Nations 1994, p. 1).

The seventh goal is to 'improve the health of the mother' (United Nations 1994, p. 1).

The eighth goal is to 'achieve universal access to basic services' (United Nations 1994, p. 1).

The ninth goal is to 'promote sustainable development' (United Nations 1994, p. 1).

The tenth goal is to 'promote gender equality and empower women' (United Nations 1994, p. 1).

The eleventh goal is to 'improve the quality of education' (United Nations 1994, p. 1).

The twelfth goal is to 'reduce the child mortality rate' (United Nations 1994, p. 1).

The thirteenth goal is to 'improve the health of the mother' (United Nations 1994, p. 1).

The fourteenth goal is to 'achieve universal access to basic services' (United Nations 1994, p. 1).

The fifteenth goal is to 'promote sustainable development' (United Nations 1994, p. 1).

The sixteenth goal is to 'promote gender equality and empower women' (United Nations 1994, p. 1).

The seventeenth goal is to 'improve the quality of education' (United Nations 1994, p. 1).

The eighteenth goal is to 'reduce the child mortality rate' (United Nations 1994, p. 1).

The nineteenth goal is to 'improve the health of the mother' (United Nations 1994, p. 1).

The twentieth goal is to 'achieve universal access to basic services' (United Nations 1994, p. 1).

The twenty-first goal is to 'promote sustainable development' (United Nations 1994, p. 1).

The twenty-second goal is to 'promote gender equality and empower women' (United Nations 1994, p. 1).

The twenty-third goal is to 'improve the quality of education' (United Nations 1994, p. 1).

The twenty-fourth goal is to 'reduce the child mortality rate' (United Nations 1994, p. 1).

The twenty-fifth goal is to 'improve the health of the mother' (United Nations 1994, p. 1).

The twenty-sixth goal is to 'achieve universal access to basic services' (United Nations 1994, p. 1).

The twenty-seventh goal is to 'promote sustainable development' (United Nations 1994, p. 1).

the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.2 million (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase to 6.5 million by 2020, and the number of people aged 75 and over to 4.5 million (Office for National Statistics 2000).

There is a growing awareness of the need to address the health and social care needs of older people. The Department of Health (2000) has published a strategy for older people, which sets out the government's commitment to improve the health and social care of older people. The strategy is based on three main principles: (1) to improve the health and social care of older people; (2) to ensure that older people are able to live independently; and (3) to ensure that older people are able to participate in society.

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There is a growing awareness of the need to address the health and social care needs of older people. The Department of Health (2000) has set out a strategy for the NHS to meet the needs of older people. The strategy is based on the following principles: (1) to ensure that older people have access to the services they need; (2) to ensure that older people are treated with respect and dignity; (3) to ensure that older people are able to live independently; and (4) to ensure that older people are able to participate in the decisions that affect their lives.

The Department of Health (2000) has also set out a number of key objectives for the NHS to meet the needs of older people. These objectives are: (1) to improve the quality of life of older people; (2) to reduce the number of older people who are in long-term care; (3) to increase the number of older people who are able to live independently; and (4) to increase the number of older people who are able to participate in the decisions that affect their lives.

The Department of Health (2000) has also set out a number of key actions for the NHS to meet the needs of older people. These actions are: (1) to improve the quality of care for older people; (2) to reduce the number of older people who are in long-term care; (3) to increase the number of older people who are able to live independently; and (4) to increase the number of older people who are able to participate in the decisions that affect their lives.

The Department of Health (2000) has also set out a number of key challenges for the NHS to meet the needs of older people. These challenges are: (1) to improve the quality of care for older people; (2) to reduce the number of older people who are in long-term care; (3) to increase the number of older people who are able to live independently; and (4) to increase the number of older people who are able to participate in the decisions that affect their lives.

The Department of Health (2000) has also set out a number of key opportunities for the NHS to meet the needs of older people. These opportunities are: (1) to improve the quality of care for older people; (2) to reduce the number of older people who are in long-term care; (3) to increase the number of older people who are able to live independently; and (4) to increase the number of older people who are able to participate in the decisions that affect their lives.

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The Department of Health (2000) has also set out a number of key messages for the NHS to meet the needs of older people. These messages are: (1) to improve the quality of care for older people; (2) to reduce the number of older people who are in long-term care; (3) to increase the number of older people who are able to live independently; and (4) to increase the number of older people who are able to participate in the decisions that affect their lives.

The Department of Health (2000) has also set out a number of key conclusions for the NHS to meet the needs of older people. These conclusions are: (1) to improve the quality of care for older people; (2) to reduce the number of older people who are in long-term care; (3) to increase the number of older people who are able to live independently; and (4) to increase the number of older people who are able to participate in the decisions that affect their lives.

the 1990s, the number of people with a mental health problem has increased by 50% (Mental Health Foundation, 2000).

There is a growing awareness of the need to address the needs of people with mental health problems. The Department of Health (2000) has set out a vision for mental health care in the UK, which is based on the principles of recovery, self-help, and community care. The vision is to ensure that people with mental health problems are able to live full and meaningful lives, and that they are able to contribute to society.

One of the key challenges in achieving this vision is the need to ensure that people with mental health problems are able to access the services they need. This is particularly true for people who are homeless, as they often face significant barriers to accessing mental health services.

One of the main reasons why people who are homeless are unable to access mental health services is the lack of information. Many people who are homeless do not know where to go for help, or they do not know what services are available. This is often due to the fact that they are living in a transient situation, and they do not have a fixed address.

Another reason why people who are homeless are unable to access mental health services is the lack of resources. Many people who are homeless do not have the money to pay for mental health services, and they often do not have the resources to transport themselves to a service.

One of the ways in which we can help people who are homeless to access mental health services is by providing them with information. This can be done through a variety of means, including leaflets, posters, and websites.

Another way in which we can help people who are homeless to access mental health services is by providing them with resources. This can be done through a variety of means, including providing them with money to pay for services, and providing them with transport to a service.

One of the most effective ways in which we can help people who are homeless to access mental health services is by providing them with a combination of information and resources. This can be done through a variety of means, including providing them with a combination of leaflets, posters, and websites, and providing them with a combination of money to pay for services and transport to a service.

One of the challenges in providing people who are homeless with information and resources is the need to ensure that the information and resources are accessible to them. This is particularly true for people who are homeless, as they often do not have a fixed address, and they often do not have the resources to transport themselves to a service.

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One of the key challenges in achieving this vision is to ensure that people with mental health problems are able to access the services they need. This is particularly true for people who are homeless, as they often face significant barriers to accessing mental health services.

One of the main reasons why people who are homeless are unable to access mental health services is that they often do not have a fixed address. This makes it difficult for them to register with a GP, and it also makes it difficult for them to access community mental health teams.

Another reason why people who are homeless are unable to access mental health services is that they often do not have the resources to pay for transport to appointments. This is particularly true for people who are living in areas with poor public transport links.

One of the ways in which we can address these barriers is by providing mental health services in a way that is accessible to people who are homeless. This could involve providing services in a community centre, or it could involve providing services in a mobile unit.

Another way in which we can address these barriers is by providing support to people who are homeless, so that they are able to access mental health services. This could involve providing support with transport, or it could involve providing support with finding a fixed address.

It is important to note that these are just a few of the ways in which we can address the barriers to accessing mental health services for people who are homeless. There are many other ways in which we can address these barriers, and it is important to continue to explore these options.

One of the key messages from this paper is that we need to ensure that people who are homeless are able to access the mental health services they need. This is a challenge, but it is one that we must address if we are to achieve the vision for mental health care in the UK.

There are many ways in which we can address these barriers, and it is important to continue to explore these options. We need to ensure that people who are homeless are able to access the mental health services they need, so that they are able to live full and meaningful lives.

One of the key challenges in achieving this vision is to ensure that people with mental health problems are able to access the services they need. This is particularly true for people who are homeless, as they often face significant barriers to accessing mental health services.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.2 million (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase to 6.5 million by 2020, and the number of people aged 75 and over to 4.5 million (Office for National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of older people, and to ensure that they are able to live independently and actively in their own homes for as long as possible. This has led to a number of initiatives, including the development of age-friendly communities, and the establishment of age-friendly networks. These initiatives aim to create environments that are safe, accessible, and supportive for older people, and to provide them with the resources and services they need to live well in old age.

One of the key challenges in developing age-friendly communities is to ensure that the needs of older people are taken into account in all aspects of community planning and development. This requires a range of measures, including the provision of accessible housing, transport, and public services, and the creation of opportunities for older people to participate in community activities and decision-making.

Another key challenge is to ensure that older people have access to the resources and services they need to live well in old age. This includes access to healthcare, social services, and housing, as well as access to opportunities for education, employment, and leisure. It is essential to ensure that these resources and services are available to all older people, regardless of their income, social class, or ethnicity.

Finally, it is important to ensure that older people are able to live independently and actively in their own homes for as long as possible. This requires a range of measures, including the provision of accessible housing, transport, and public services, and the creation of opportunities for older people to participate in community activities and decision-making. It is essential to ensure that these measures are implemented in a way that respects the dignity and autonomy of older people.

In conclusion, the development of age-friendly communities is a complex task that requires a range of measures to be implemented. It is essential to ensure that the needs of older people are taken into account in all aspects of community planning and development, and to provide them with the resources and services they need to live well in old age. By working together, we can create environments that are safe, accessible, and supportive for older people, and ensure that they are able to live independently and actively in their own homes for as long as possible.

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