

MMS Bulletin #139

Ageing Societies and Health

The Global strategy and action plan on ageing and health A framework for coordinated global action to improve the health of older people across the Sustainable Development Goals

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For the first time in history, most people can expect to live into their 60s and beyond. This demographic shift can be viewed as an opportunity but requires a transformative shift in health policy and practice to ensure our societies are places in which you can live long and healthy lives. In May 2016, the World Health Organization Member States adopted a resolution outlining a Strategy and Action Plan to coordinate global action towards Healthy Ageing. This article discusses the Strategy and its development.



Ronald Avison teaches some pupils gardening skills at Old Moat Primary School, Manchester, United Kingdo. (Photo: Howard Barlow/ © WHO)

In almost every country, populations are living longer. For the first time in history most people can expect to live into their 60s and beyond, and those living into their 60s can expect to live on average another 20 years. This is a major achievement of public health, medicine and socioeconomic development, which deserves to be celebrated. These increases in longevity combined with declining fertility rates mean that by 2020, the number of people aged 60 years and older will outnumber children younger than 5 years. Often thought to be a demographic trend solely within the purview of high-income countries, ageing is also a growing phenomenon in developing countries. Even today, almost two-thirds of the 868 million people over age 60 live in developing countries (pdf), and by 2050, that number is expected to increase to 80% (pdf).

Although it is often assumed that increasing longevity is being accompanied by good health, the evidence suggests that older people today are not experiencing better health than their parents or grandparents. Some longitudinal research has suggested that the prevalence of severe disability may have declined in wealthy countries, but this trend does not appear to extend to less severe disability, and may even have stalled. Indeed, a hallmark of older age today

is the great diversity in health and functioning. Some 80 year olds may enjoy good physical and mental capacity, while others may be frail and require significant support for the most basic activities of daily living.

The social and economic opportunities that could exist if people can live both longer and healthier lives are enormous. At present these extra years of life are considered as an extended period of retirement but they could be used to reframe the traditional life-course narratives. For example adults may choose to start a new career at 40 or even 60, while younger people may choose to take time out to raise children or care for older relatives and then re-enter the workforce. The choice of retirement as a final endpoint may evolve into more fluid choices throughout the lifespan.

The Global strategy and action plan on ageing and health

In 2014, the 67th World Health Assembly called on the WHO Director-General to develop, in consultation with Member States, regional and country offices, and other stakeholders, a *Global strategy and plan of action on ageing and health*. The World Health Assembly recognised that while population ageing can be seen as a success story, it also calls on societies to adapt in order to maximize the health and wellbeing of older people. It acknowledged that the infrastructure in many countries is inadequate, and research to understand and support health of older adults falls far behind that of other population groups. It called for strong, coordinated, multisectoral action to shift our policies and practices to take best advantage of the opportunities that ageing societies present.



Ibrahim Plavši**ć**, Active Ageing group member Gnojnica, Lukavac, Bosnia/Herzegowina. (Photo: Alfred Mikus, Belarus/ © SRC)

The starting point for the development of the Global strategy was the first ever World report on ageing and health, released in 2015 by the World Health Organization. The Report brought together the best available evidence about the current health of older adults. It called for urgent public health action and set out a new comprehensive public health framework to enable all people to age in a healthy way. Healthy Ageing is defined as the process of developing and maintaining the functional ability that enables wellbeing in older age. Functional ability is determined by the intrinsic capacity of the individual (i.e. all of a person's physical, mental, and social capacities), the environments he or she inhabits (physical, social, economic, and others) and the interaction between these. In line with this framework of Healthy Ageing, the Report sets out what works to create health and long-term care systems and broader environments, which will enable older people to flourish.

The Global strategy and action plan on ageing and health based on the World report on ageing and health and developed in consultation with Member States, United Nations Organizations, technical and scientific experts, WHO staff, national and international partners including organization of older adults sets out a framework for coordinated global action.

Strategic objectives

The vision of the Strategy is a world in which everyone can live a long and healthy life. Goals over the next five years include implementing existing evidence to maximize functional ability, filling the evidence gaps and establishing partnerships to ensure a Decade of Healthy Ageing from 2020 – 2030.

These goals will be achieved through coordinated action by the World Health Organization, Member States and partners with a focus on five strategic objectives.

- I. Commit to action: Fostering Healthy Ageing requires leadership and commitment. To ensure that the political and operational platforms exist for effective multisectoral action, collaboration is needed between government and non-government actors, including service providers, designers, and academics.
- 2. Develop age-friendly environments: Age-friendly environments promote health, remove barriers, and provide support for people experiencing losses in capacity. They can ensure older people age safely in a place that is right for them, remain free from poverty, can continue to develop personally, and can contribute to their communities while retaining autonomy. Creating age-friendly environments requires collaboration and coordination across multiple sectors and with diverse stakeholders, including older people.
- 3. Align health systems to the needs of older populations: As people age, their health needs tend to become more chronic and complex. A transformation is needed in the way that health systems are designed to ensure affordable access to integrated services that are centred on the needs and rights of older people. In most care contexts, this will require fundamental changes in the clinical focus of care for older people, as well as in the way care is organized, funded, and delivered across health and social sectors.

- 4. Develop long-term-care systems: The number of older people requiring care and support is increasing worldwide. Every country needs to have an integrated system of long-term care. Each system should help older people maintain the best possible level of functional ability to allow older people to live with dignity and enjoy their basic human rights and fundamental freedoms.
- 5. Improve measurement, monitoring, and research: The current metrics and methods used in the field of ageing are limited, preventing a complete understanding of the health issues experienced by older people and the usefulness of interventions to address them. Focused research and improvement in measurement are critical to better understand and act on Healthy Ageing.

Urgent global action is needed to shift our societies to support healthy ageing, for the sake of the health and well-being of everyone. The *Global strategy and action plan on ageing and health* provides a framework for coordinated action for all of us to age in a healthy way.

References

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- Other references as cited throughout the article.



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