Healthy Aging in Asia: Recommendations from The U.S. National Academy of Medicine’s Global Roadmap for Healthy Longevity

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The Asia Health and Wellbeing Initiative (AHWIN)

• Launched in 2016 by the Japanese government
• **Aim:** to promote bilateral and regional cooperation that fosters sustainable and self-reliant health care systems in the Asian region
• **Goal:** to create vibrant and healthy societies where people can enjoy long and productive lives, and to contribute to the region’s sustainable and equitable development as well as economic growth

AHWIN Forum 2022

• **Theme:** Harnessing the Power of Technology for Healthy Aging in Asia
• **Focus:** regional efforts on data translation and health innovations, and designing of age-friendly cities that enable people to stay active and connected and foster solidarity among generations

• https://www.ahwin.org
Longevity: the immense success of the last century
Global Aging: Demographic Change

In 2050, ~18% of global population (1.6 B) will be 65+
In 2050, ~6% of global population will be under 5

Decrease in global fertility rate

Since the 1960s, total global fertility rates have been cut in half.

- World Bank, 2016
Countries in the West underwent a long, gradual shift from “aging” to “aged” societies, but countries in Asia will make that shift faster.

Asian countries are aging at different rates, but some will undergo that change with unprecedented speed.

- **France**
  - 1864 to 1979: 115 years to go from aging to aged

- **Sweden**
  - 1887 to 1972: 85 years

- **United States**
  - 1942 to 2014: 72 years

- **Asia Average**
  - 1942 to 2014: 23.1 years

*East and Southeast Asia

[https://www.ahwin.org/data-on-aging/](https://www.ahwin.org/data-on-aging/)
Demographic Change Impacts

In all countries the rate of population aging stands to fundamentally impact how families, communities, societies, industries and economies function

- Family structure and relationships
- Social infrastructure
- Social insurance and retirement programs
- Housing, transportation, and public space
- Chronic conditions: patterns and prevalence
- Health care delivery and financing
- Workforce size and composition
Are we prepared?

- Overall, very mixed levels of preparedness globally (CSIS Global Aging Preparedness Index; HelpAge International Global Age Watch Index)
  - Very few countries are prepared to both meet needs and seize opportunities of longer lives and are subsumed by the concerns about the old age dependency ratio.
  - Many countries that do well on one dimension of “aging preparedness” do poorly on the other…There are also few countries that score well on the multiple dimensions of aging preparedness.
  - While some countries and governments have begun to act and are starting plan for the long-term, too many have not.
  - Preparing financially, socially, and scientifically for longer lifespans is a global imperative.
• National Academy of Medicine. 2022. Global Roadmap for Healthy Longevity. Washington, DC:

• The National Academies Press. https://doi.org/10.17226/26144
International Oversight Board

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- **Andrew J. Scott**, London Business School
- **Eric Verdin**, Buck Institute for Research on Aging
- **Yaohui Zhao**, Peking University
The evidence supports potential for

Health span \approx \text{Life span}
The Cost of Inaction

• More people living with poor health, suffering, and dependence
• GDP that is lower than it would be with better health and full inclusion of older people
• Increased fiscal burdens on government
• Increased financial burdens on individuals and families
• Loss of contributions of older people to wellbeing of society
• Lost opportunities for people of all ages
SUSTAINABLE DEVELOPMENT GOALS

1. NO POVERTY
2. ZERO HUNGER
3. GOOD HEALTH AND WELL-BEING
4. QUALITY EDUCATION
5. GENDER EQUALITY
6. CLEAN WATER AND SANITATION

7. AFFORDABLE AND CLEAN ENERGY
8. DECENT WORK AND ECONOMIC GROWTH
9. INDUSTRY, INNOVATION AND INFRASTRUCTURE
10. REDUCED INEQUALITIES
11. SUSTAINABLE CITIES AND COMMUNITIES
12. RESPONSIBLE CONSUMPTION AND PRODUCTION

13. CLIMATE ACTION
14. LIFE BELOW WATER
15. LIFE ON LAND
16. PEACE, JUSTICE AND STRONG INSTITUTIONS
17. PARTNERSHIPS FOR THE GOALS

Health Longevity:
Definition of *Healthy Longevity Roadmap* report

• “The state in which years in good health approach the biological life span, with physical, cognitive and social functioning, enabling well-being across populations.”

• Foundation: preservation of *health for all* – into older ages.
Vision 2050 – for Individuals

• All people are enabled to have *long lives with health and function into oldest ages, and have agency in the creation of health*

• *Aging-associated needs* are well met, for long lives of dignity

• Healthy older people have *full opportunity to engage in meaningful and productive activities* that meet their goals, whether working for pay and/or bringing their social capital to contribute to societal and intergenerational well-being and cohesion and leave a better future

• Loneliness and isolation are not the default experiences of aging

• Young adults have greater intergenerational support and more job opportunities

• Adults of all ages are valued
Vision 2050 – *for Societies*

- Long health span and decreased health disparities are assets for nations and societies
- Intrinsic assets and goals of older people valued and enabled, with all-of-society benefits from their contributions in monetary and nonmonetary roles
- Younger people more successful, more jobs and less disaffection
- Enlarged workforce, stronger economy, increased ability to invest in human capital and public goods
- Enhanced social capital, with strengthened prosocial goals
- When older people thrive all people and economies thrive
- Equity, intergenerational cohesion, and decreased precarity within and between countries
Health is the outcome of a complex system
Global Roadmap for Healthy Longevity Domains

• Longevity Dividend
  - Work and retirement
    - Volunteering
    - Lifelong Education and Retraining

• Physical Environment
  - Housing
  - Public Spaces and Infrastructure
    - Safety
    - Transportation
    - Digital Technologies
    - Climate Change and Environmental Hazards

• Social Infrastructure
  - Prosocial Strengths of Older People
  - Ageism and Age Discrimination
  - Social Inclusion
  - Financial Security in Retirement
  - Digital Literacy

• Health Systems
  - Chronic conditions
  - Public Health
  - Health Care delivery
  - Long-Term Care
  - Health Care Workforce
  - Geroscience, Technology, and Big Data Innovation
Healthy Longevity

• Healthy longevity, or the lack thereof, is the result of the interactions of complex systems

• Multiple systems within society will need to be activated, transformed, and coordinated

• Innovation in any one sector will not lead to a transformation towards achieving healthy longevity

• Healthy longevity is about all aspects of life and requires an all-of-society and life course approach involving transformations in every sector of a nation
Relevant Actors

- Governments (international, regional, national, local)
- Nongovernmental and multilateral organizations
- Private sector (employers, unions, professional societies)
- Local and community organizations
- Researchers
- Individuals, families, and communities
Virtuous Cycle of Healthy Longevity

Healthy Longevity
- Individual & societal health & well-being
- Productive engagement

Equity
- Enablers

Social Compact
- Resource to support enablers

Capital
- Human
- Financial
- Social

Disrupters
- Ageism
- Disease
- Poverty
- Social determinants of health
- Pollution & climate
- Social & family conflict
- Inequity

Enablers
- Work
- Social
- Physical Env.
- Health Systems
How to begin?

• Invest in complex system’s initiating levers toward Vision 2050

• Recommendations for 2022-2027
Principles for Healthy Longevity

1. People of all ages, particularly older adults, reach their full potential to live life with good health, functioning, meaning purpose, and dignity.

2. Societies enable the best health and functioning that individuals at all ages are capable of attaining.

3. Societies reduce disparities and enhance equity within and among countries to realize the well-being and contributions of all people, including those of older ages.

4. The human, financial, and social capital of older people is realized for the benefit of all of society.

5. Societies use data and meaningful metrics to track the achievement of outcomes and guide decision making.
Global Roadmap for Healthy Longevity

• 8 Goals for 2050

1. Economic and social benefits generated by people living, working, volunteering, and engaging longer
2. Social Infrastructure, institutions, and business systems that enable safe and meaningful work and other community engagement at every stage of life
3. Education and training opportunities that promote participation in lifelong learning and growth
4. Social cohesion augmented by intergenerational connections and the creation of opportunities for purposeful engagement by older people at the family, community, and societal levels
5. Social protections and financial security that mitigate the effects of financial vulnerability at older ages
6. Physical environments and infrastructure that support functioning and engagement for people at older ages
7. Integrated public health, social service, person-centered health care, and long-term care systems designed to extend years of good health and support the diverse needs of older people
8. Quality long-term care systems to ensure that people receive the care they require in the setting they desire for a life of meaning and dignity
Global Roadmap for Healthy Longevity

• 9 Recommendations by 2027

3-1. Governments, in collaboration with the business sector, should design work environments and develop new policies that enable and encourage older adults to remain in the workforce longer.

3-2. Governments, employers, and educational institutions should prioritize investments in redesigning education systems to support lifelong learning and training. Governments should also invest in the science of learning and training for middle-aged and older adults. Specifically, employers, unions, and governments should support training pilots that allow mid- and older adults to retool for multiple careers and/or participate as volunteers across their life span through the development of incentives.

4-1. Governments should develop evidence-based, multipronged strategies for reducing ageism against any age group.

4-2. By 2027, all governments should develop plans for ensuring basic financial security for older people.

4-3. To improve financial security in retirement, governments and employers should develop strategies for increasing financial literacy and mechanisms for promoting pension contributions, self-funded pensions, and lifelong savings.
Global Roadmap for Healthy Longevity

• 9 Recommendations by 2027 (cont’d)

5-1. Design user-centered and cohesion-enabling intergenerational communities for healthy longevity.

6-1. To achieve the goal of the best possible health for older people, governments should over the next 5 years develop strategies for increasing investments in robust public health systems that can build and lead collective actions for promoting health at the population level and across the life course.

6-2. Shift health care systems to focus on healthy longevity.

6-3. Governments should work with health and long-term care systems and researchers to develop strategies for making available culturally sensitive, person-centered, and equitable long-term care. To the extent possible, strategies should honor people’s preferences about care settings, enabling them to age within their home or community where possible.
Governments and the private sector should partner to design user-centered and cohesion-enabling intergenerational communities for healthy longevity. Initiatives should include:

- at the city level, developing and implementing mitigation strategies to reduce the negative effects of the physical environment (e.g., air pollution, climate events such as flooding and hurricanes/typhoons) on older adults;

- at the neighborhood level, promoting and measuring the impact of innovation and policy solutions for healthy longevity, intergenerational connection, and cohesion;

- at the home level, updating physical infrastructure to address affordability, insufficiencies, and inefficiencies in housing stock, as well as support autonomy and social connection;

- making broadband accessible and reducing the digital divide (e.g., usability of and willingness to adopt technology) within the context of each community; and

- designing public transportation options, including solutions that address first-/last-mile transportation needs, that can be provided to companies, foundations, and local governments for implementation.
To achieve the goal of the best possible health for older people, governments should over the next 5 years develop strategies for increasing investments in robust public health systems that can build and lead collective actions for promoting health at the population level and across the life course.

- Investments in public health systems may require governments to rebalance investments in health care and public health.
- Public policies should create incentives for individuals, employers, and communities to engage in prevention and wellness activities.
- All countries should establish 5-year targets for preventive health and measure progress toward those targets.
Of Particular Interest to AHWIN 2022: Recommendation 6-2

Shift health care systems to focus on healthy longevity. To catalyze such a shift, actions to be taken by 2027 include the following:

- Health systems, in concert with communities and the people they serve, should adopt affordable, accessible, culturally appropriate models, including geriatric care models, for providing person-centered, integrated care for older people facing functional limitations, multimorbidity, frailty, and complex care needs.
- Governments should develop plans for aligning health care payment and reimbursement systems with healthy longevity outcomes.
- Health care systems should measure care outcomes based on patient goals and preferences and patient-reported outcomes.
- Relevant licensing and certification bodies should ensure that all health care providers receive training in how the physiology and psychology of aging affect diagnosis and treatment of older patients.
- Governments, professional societies, and health systems should provide incentives for developing and/or maintaining a geriatric workforce, including allied health workers, to focus on older adults with multimorbidity, geriatric syndromes, and declining physical and cognitive functioning.
- Governments, employers, health systems, and communities should empower citizens with the tools and data needed to manage their own health.
**Longevity Dividend of Healthy Longevity: Returns on Investment**

- **Health is an asset**: Increased workforce productivity and decreased disparities, medical care costs and vulnerability to pandemics due to greater health across life course.
- Economic returns on healthy longevity investments reaped into oldest ages.
- Older workers mean increased labor supply and fewer accidents.
- In many sectors, consumers value service by older workers.
- More jobs for young adults, and potential for mentorship by older people.
- Intergenerational teams more productive and innovative.
- Longer work lives can mean less burden on pensions and social security.
- Volunteering and caregiving by healthy older adults (e.g., nonmonetary activities) contribute significantly to GDP when value monetized.
- Capabilities and goals of older adults utilized well, bringing new human and social capital potential, at scale, to society.
- Increased GDP from the above, plus consumer products for older adults.
Thank you

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