SDGs and Population Ageing

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Addressing Population Ageing in the Middle East and Sub Saharan Africa

SDGs and Population Ageing

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Ensure voice of older adults’ drives vision and strategic intent

Gloria Caande, 73, Vice President of Pilkan Community Senior Citizens’ Association, Commonwealth, Manila

Supported by HelpAge International & the Coalition of Services of the Elderly (COSE) in The Philippines
Shape international instruments and collaborations to engage and be inclusive of older adults

Madrid International Plan of Action on Ageing (MIPAA) 2002

Goal 2 promotes participation, non-discrimination and social inclusion of older adults

Within Agenda 2030, SDG3 aims to ensure healthy lives and promote wellbeing for all, at all ages.

Leave no one behind requires countries to pay attention to health inequalities and act on health inequities

Equity a key principle

Set up a Decade for Healthy Ageing aligned to the SDGs
WHO Global strategy and action plan on Ageing and Health 2016-2020

1. National Commitment
2. Age friendly communities and environments
3. Health Systems aligned to older adults needs
4. Long term care systems
5. Monitoring, research and evidence
Ensure evidence drives comprehensive actions
1. Morbidity, Mortality – count older adults – leave no one behind

2. Healthy Ageing – make SDGs inclusive of older adults – so they can be & do what they value

3. What can be done -- at scale – we need your expertise
At every age: global healthy life expectancy
Life expectancy minus Years lived with "disability" (YLDs)

IHME data, 2018
But not all people are living longer nor in good health.

Life expectancy at birth, 194 countries, by sex

Sadana et al. 2016
Cardiovascular disease mortality rate, global, 10 sub-causes, 23 age groups, both sexes, 2017

Goal 3 - Health
3.4 By 2030, reduce by one third “premature mortality” from noncommunicable diseases through prevention and treatment and promote mental health and well-being

- cardiovascular disease, cancer, diabetes or chronic respiratory disease

[SDG 3.4.1] includes deaths between 30 and 70 years of age
Titchfield City Group on Ageing and Age- Disaggregated Data

WE NEED TO BETTER DOCUMENT & REPORT MORBIDITY AND MORTALITY AT ALL AGES
2. Healthy ageing
Healthy Ageing - what is it?

Two Components (Sen’s capabilities approach)

- **Functional ability** reflects the interaction between individuals’ intrinsic capacity and the environment they are living in.

- **Intrinsic capacity** is determined by many factors, including underlying physiological and psychological changes, health-related behaviors and the presence or absence of disease – “within the skin”
The environment they are living in

Goal 1. End poverty in all its forms everywhere – for all men and women;
Goal 2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture including for older persons;
Goal 3. Ensure healthy lives and promote well-being for all at all ages through universal health coverage including financial risk protection;
Goal 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all;
Goal 5. Achieve gender equality and empower all women and girls;
Goal 8. Promote sustained, inclusive and sustainable economic growth, full and productive employment and **decent work for all**;
Goal 10. **Reduce inequality** within and among countries, by promoting the social, political and economic inclusion of all, irrespective of age;
Goal 11. Make cities and human settlements inclusive, safe, resilient and sustainable by providing universal access to safe, inclusive and accessible green and public spaces, *in particular for older persons*;
Goal 16. Promote peaceful and inclusive societies for sustainable development, provide access to **justice for all** and build effective, accountable and inclusive institutions at all levels.
Healthy Ageing trajectories over the life course

High and stable capacity  |  Declining capacity  |  Significant loss of capacity

Functional ability

Intrinsic capacity

World Report on Ageing and Health 2015
Healthy ageing – unpack it

**Intrinsic Capacity**
- Cognitive
- Psychological
- Sensory
- Neuromusculoskeletal
- Voice and speech
- Cardiovascular
- Haematological
- Respiratory
- Immunological
- Digestive
- Metabolic
- Endocrine
- Genitourinary
- Reproductive
- Skin, hair and nails

15 potential sub domains

**Functional Ability**
- Learning and applying knowledge
- Communication
- Mobility
- Self-care
- Domestic life
- Interpersonal interactions and relationships
- Major life areas
- Community, social and civic life

8 Potential sub domains

**Environment**
- Products and technology
- Natural and built environment
- Support and relationships
- Attitudes
- Services, systems and policies

5 potential sub domains
Distribution of intrinsic capacity score
(WHO world population standard, 50+, both sexes)

Source database: SAGE, WHO, wave 1, cross sectional data
Mobility, a sub-domain of Functional Ability
Distribution of functional ability (LASI 2018)
(Shift women’s distribution to be equal to men’s)
3. What can be done - at scale
Population Ageing
- understand pathways to healthy ageing
- what, where & how to intervene
- evaluate impact
- share results

Healthy Ageing

Systems, built environment, other interventions

Strengths, exposures, vulnerabilities

Biologic and Social stratification

Root or structural determinants

Closing the gap in a generation
Some determinants of Healthy Ageing: systematic review of 65 longitudinal studies focusing on individuals (Krajl et al. 2018)

I. Stratification
   - Age
   + Education, Income

II. Biological
   - High BMI
   + Better Grip Strength

III. Behavioral
   - Smoking
   + Physical Activity
   + Healthy Diet

IV. Psychological
   - Negative life events

V. Abilities
   + Social support/contact, participation
Only 4 countries that are not high income with published studies included (Krajl et al. 2018)
TO ACHIEVE SDGS
WE NEED TO
ANALYSE,
SYNTHESIZE, TEST
& SCALE UP WHAT
CAN BE DONE

http://globalageing.cochrane.org/
What to do? Potential life course interventions to enhance intrinsic capacities

From Yoav Ben-Shlomo, WHO Life Course meeting, June 2017
## Where to act: layers of influence and entry points for action to optimize functional ability

<table>
<thead>
<tr>
<th>Areas of Actions</th>
<th>Example responses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I. Community and household level</strong></td>
<td>informing &amp; meeting expectations of vulnerable or excluded communities</td>
</tr>
<tr>
<td><strong>II. Health and social services delivery level</strong></td>
<td>Improve design of programs to increase access &amp; effective services – preventive and treatment; pool funding mechanisms</td>
</tr>
<tr>
<td><strong>III. Health sector policy and strategic management level</strong></td>
<td>Reshape national program guidelines and their implementation, approaches to report on causes, inequities and consequences</td>
</tr>
<tr>
<td><strong>IV. Public policies cutting across sectors, including health in all policies</strong></td>
<td>Support MoH and other ministries to better contribute to sector-wide strategies from pro-health equity perspectives</td>
</tr>
<tr>
<td><strong>V. Global level</strong></td>
<td>Better international alignment</td>
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</tbody>
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Travis et al. 2004 (LANCET)
How to act: to enable national and local actions

**Good news**: Increase in public policy research, and demonstrated government interest in promoting equity in health policies across the life course

**But:**
- review of 2700+ studies: most focus on advocacy and problem description, rather than implementation and evaluation of actions
- some acknowledge that WHO policy recommendations on "what to do" are not sufficient to prompt government action - need more on the "how to do" it

Embrett & Randall 2014 (SSM)
GLOBAL STATUS 2018 in 194 COUNTRIES

1. Number of countries with a focal point on ageing and health in the health ministry

112

2. Number of countries with national plans or strategies on ageing and health (to be determined if aligned to healthy ageing)

88
Colombia Adulto Mayor - Life course Programme - Intersectoral
(Source: Hessel et al. 2018)
Global Strategy and Action Plan

5 Strategic objectives

1 National commitment & action

2 Age friendly environments

3 Aligned health services

4 Long term care systems

5 Measurement, monitoring & research

State of Qatar, 11 Healthy Ageing initiatives

National Health Strategy 2018-2022

HA1 population based surveys – needs assessment
HA2 increase health literacy
HA3 services that promote healthy active ageing
HA4 programs to improve mobility
HA5 comprehensive geriatric assessment
HA6 easy accessibility of services
HA7 community rehabilitation and geriatric services
HA8 continuity of care
HA9 integrated home care service
HA10 monitor and address cognitively impaired population
HA11 compassionate end of life care

Ministry of Public Health
A place to start: address inequities

People living in institutions 70.5%
People living at home 35.8%

Netherlands. Prevalence of untreated tooth decay in permanent teeth among adults residing in long term care homes before and after the Gerodent programme (N = 381), compared to the Western European average (Source: Janssens et al. 2018)
Where we are – 2020

Global baseline – levels and distribution - Intrinsic capacity, functional ability, enabling environments and other important indicators linked to WHO’s new GPW13 such as care dependence, healthy life expectancy, in 194 countries

- new analysis of existing nationally representative data
- data from new nationally representative surveys
- informed by case studies on information generation & use
- best estimates for countries without data, and plan for strengthening national health information

Where we want to be – by 2030

Goal alignment, targets and Indicators – alternative projections towards potential targets
Scenarios to support planning & investments to optimize impact on peoples’ lives

How are we going to get there - working together

What can be done (reflecting systematic reviews, norms in key areas, country experiences evaluated as good practice) : existing or new interventions and what it takes to scale these up to reach all older adults - including better knowledge translation for impact in countries

Research and innovation agenda where new knowledge on what and how is needed
Contributions sought on what can be done – background papers for journal publications and evidence base for policy dialogues

- Who should be involved – institutions and people

- Milestones & Timeline
  - Draft for peer meeting – 9-10 October 2019
  - Highlight for report – December 2019
  - Updated draft for submission – March 2020
  - Publication – October 2020
THANK YOU

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