

2015 INTERNATIONAL SEMINAR ON HEALTHY AGEING

Nanjing, China, 21–23 October 2015

The Nanjing Statement on Healthy Ageing adopted by the Participants on 23 October 2015

The Context

For the first time in human history, worldwide there is a rapidly ageing population.. With reduction in fertility and mortality in all ages, much of this demographic transition is being witnessed in low and middle income countries (LAMICs). Today, a child born in China is expected to live up to 65 to 75 years similar to that in most developed countries. Further, this achievement in increased life expectancy is largely due to overall development in all sectors of the society. However, one of the major public health concerns currently is whether increased life will be associated with good health and better quality of life.

The information and data presented in this seminar suggest that added life years are less likely to be accompanied by improved health or well-being. For many older people, health is not only the presence or absence of diseases. It is also related to their well-being and ability to meet the environmental challenges in day-to-day life.

This meeting has brought together experts who have shared possible ideas to address this anticipated predicament and improve the well-being of population across the life course. We have all agreed that potential ideas discussed in this meeting are essential for achieving Sustainable Development Goals (SDGs). Thus, renewed interest in healthy ageing among the public and policy audience will be the key driving factor in directing future policies (health/social) and overall development.

We the delegates, scientists and scholars gathered here in Nanjing, China from 21th to 23rd October, 2015, unanimously recognize and recommend that healthy ageing be accorded the highest priority in national health and development endeavors. Full health and continued access to quality health services are central to healthy ageing. The 3-day seminar has discussed the issues related to healthy ageing carefully from the demographic, health, and social transitions viewpoints.

We *concerned* that there is pressing need to adopt a new strategic policy and management options for effective delivery of accessible and quality services for healthy ageing.

We *strongly recommend* that the current national health policies have to be revisited and aligned with the paradigm of healthy ageing and hence may require substantial revamping of systems, capacity building, delivery channels and quality of delivery. We call upon the national governments to strive

sincerely to include plans that ensure delivery of quality social and health interventions with improved services to extend quality of life among the elderly cohorts.

We recommend for good planning and tracking of the elderly cohorts. Our observations reveal that with the rapid increase of the elderly – roughly 10 percent in the proportion of the population – they need to be dealt with great care and provided quality services to minimize the disease burden. Unless attended to in time and effectively, there could be adverse implications on the health system.

We noted that the elderly have a right to participate in the labor force with their vast resource pool of expertise and wealth of experience.

We recognized that physical and psychological well-being is synonymous with the health security of elderly people. Hence, opportunities should be created and maintained for all people including the elderly people to adopt healthy lifestyles for over all well-being and healthy ageing.

We deeply concerned that continuing healthcare services at the community level should be taken as a top priority in formulating policies to meet the goal of healthy ageing. Community response structures for the elderly population in Nanjing like the community-based integrated health care service and home care need to be replicated widely across the country. PPD member countries need to strongly recommend this, specially the psycho-social and mental health dimensions, in order to strengthen national responses to ageing. The characteristics of the community response approach in Nanjing include one stop services; target oriented and well planned medical care; best use of available medical resources and easier steps of treatment that are more economical for both clients and hospitals.

We acknowledged that promoting healthy ageing in Asia and African countries requires regional strategies and action plans in place. PPD's Global Commission on Ageing in collaboration with related partners will take a leadership role in conducting country assessments and developing country specific policies and action plans. The action plans will address the following issues:

- 1) Promoting integrated and person-centered care:
 - Improving human resources for health
 - Aligning health care delivery to match with older and persons with disability

- Improving access to assistive technology
 - Integrating health service with social and other care services.
- 2) Creating a long term care programme for dependent older people and family caregivers:
- Support intervention for family caregivers of care dependent older people
 - Promoting community respite care for older people.
- 3) Creating an aged friendly environment where everyone can grow healthy and contribute to overall development:
- Raising awareness among policy makers and key stakeholders
 - Mobilizing national leadership for investment in healthy ageing
 - Placing healthy ageing at the center of all developmental agenda
 - Breaking traditional mind set and building an enabling environment.
- 4) Supporting country specific healthy ageing policies in PPD countries.

There is an exigency to understand the health and social care priorities of ageing populations. Hence, country level data needs to be harmonized to make meaningful comparisons between countries. Moreover, good country examples and case studies from voluntary organizations need to be mapped and endorsed that will enable us to develop a specific policy and understanding on healthy ageing.
