

Healthy ageing and long-term care: which strategies for Europe?

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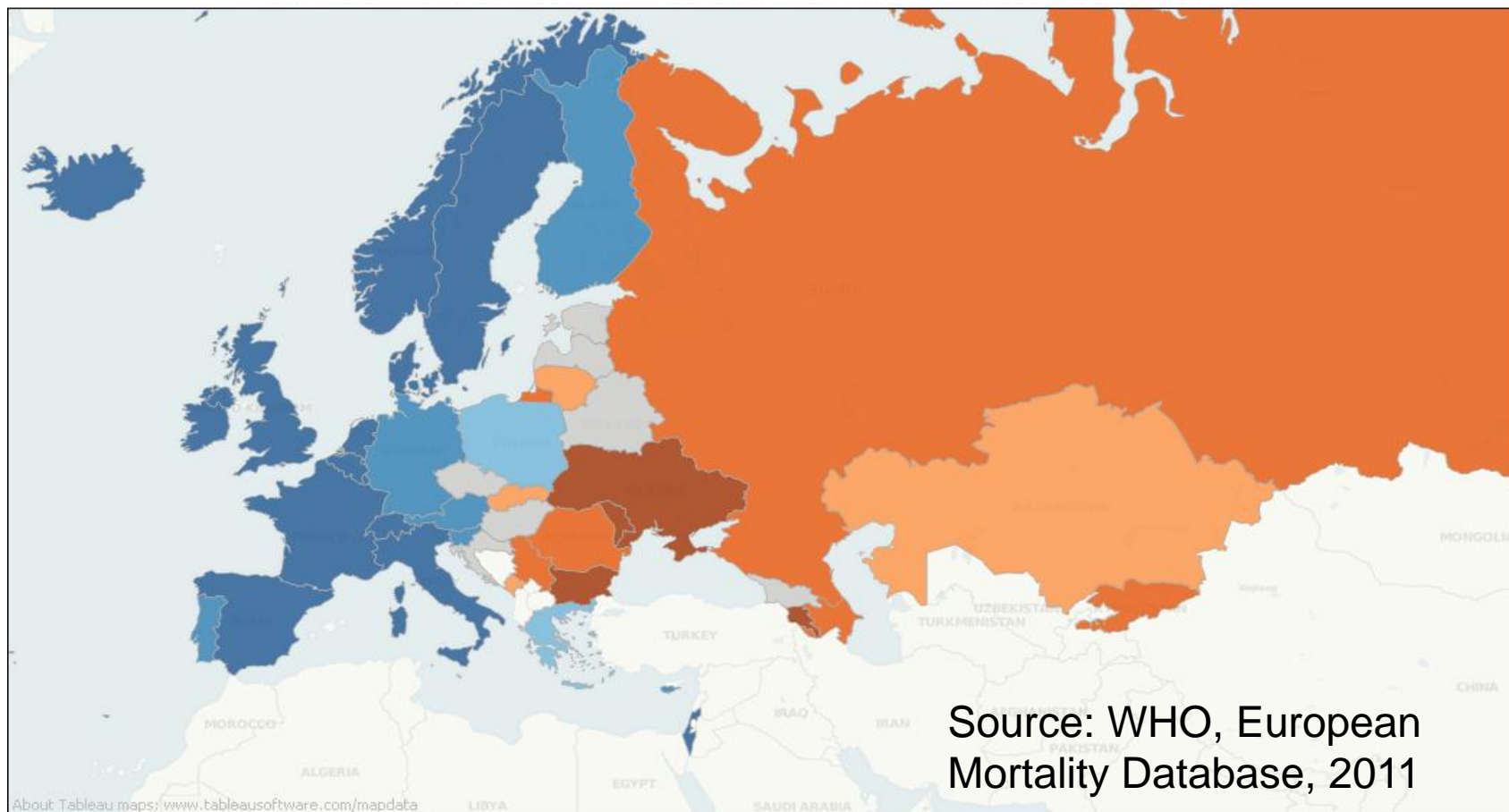
Active Ageing
Good health adds life to years



World Health Day 2012

EU Year of Active Ageing and Solidarity between Generations

Mortality from cardiovascular disease in the WHO European Region, female aged 75+, 2006-2010 (latest year available)



SDR, 75 years and over,
per 100,000

1.813 9.051



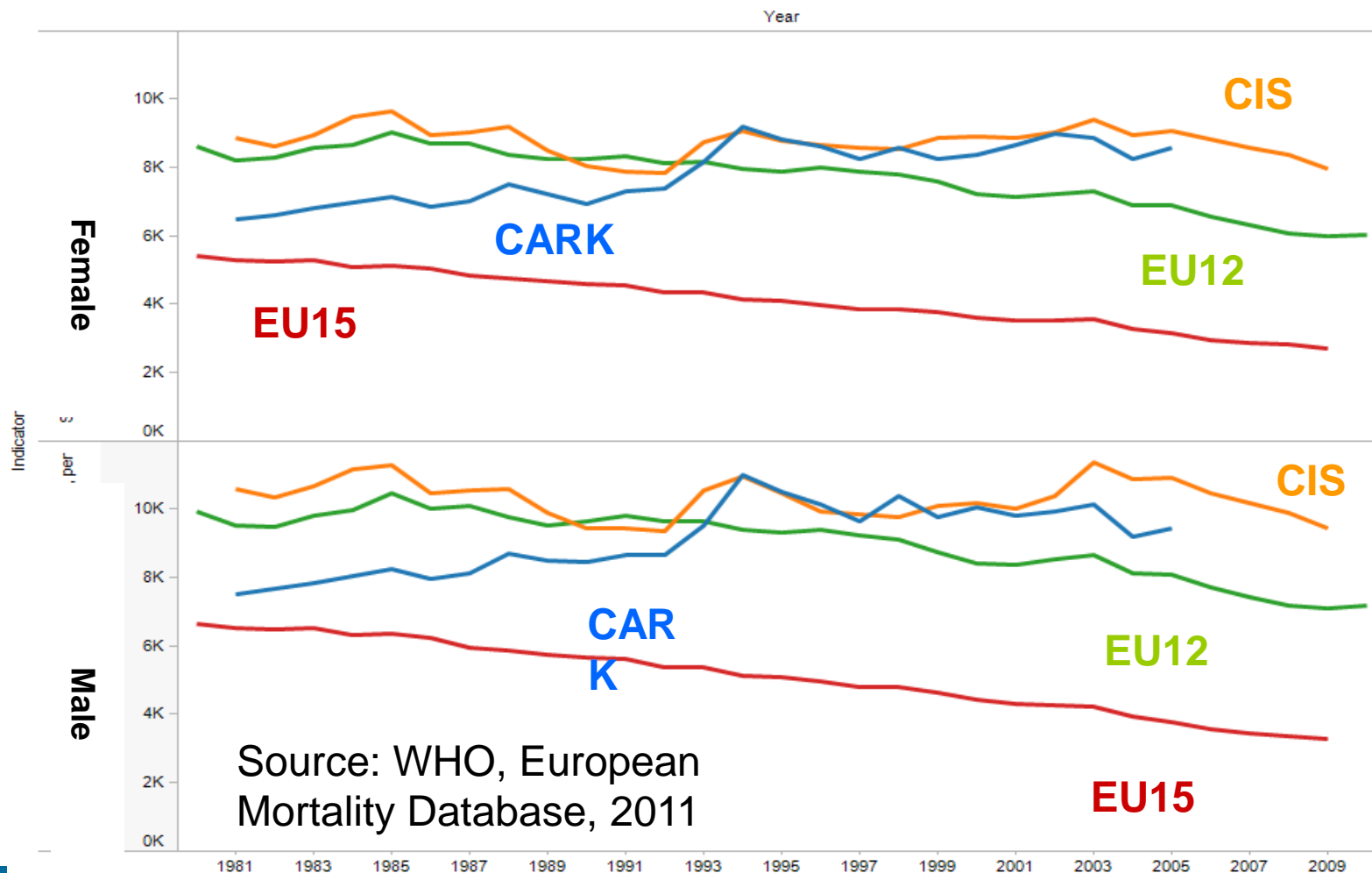
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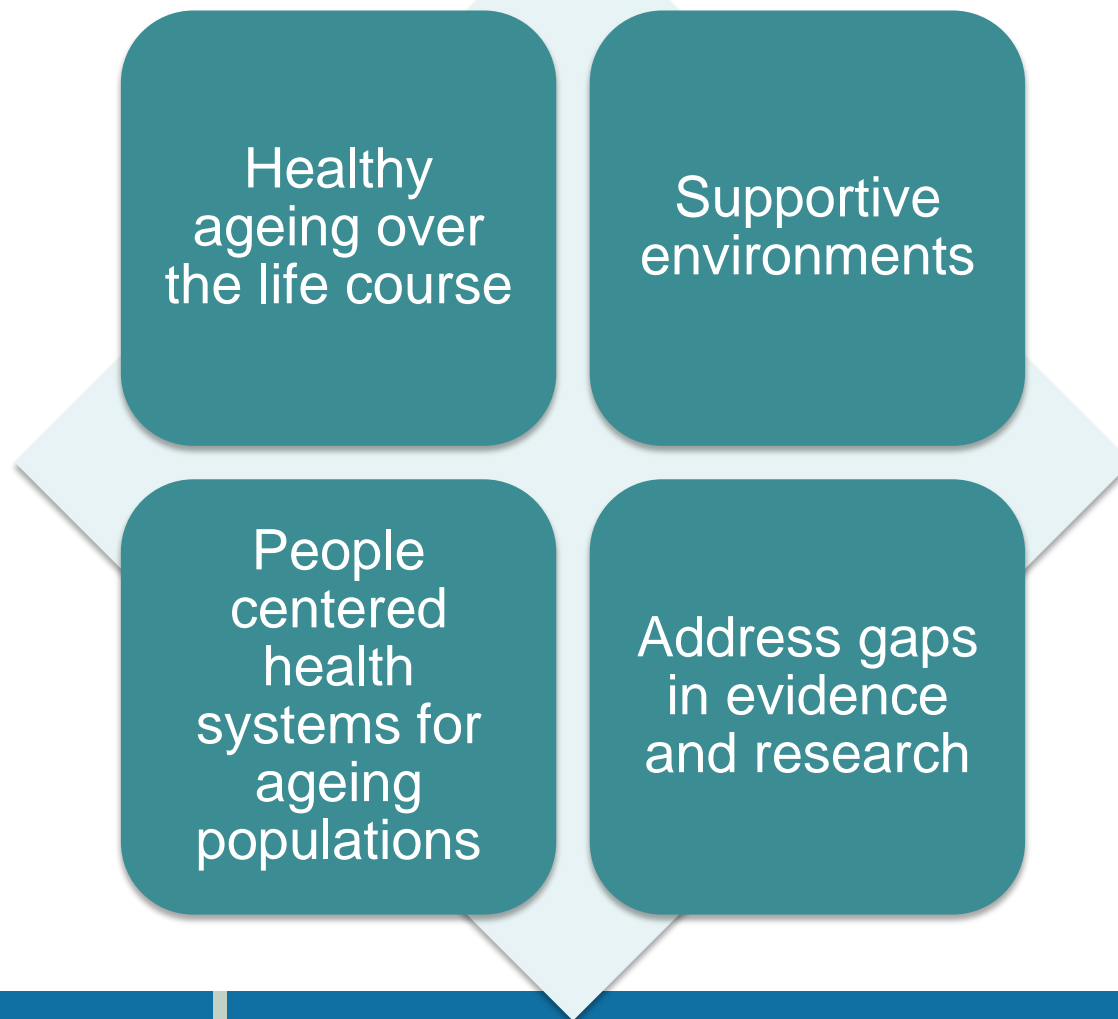
Presidency High-Level Conference
Healthy Ageing across the Lifecycle
Nicosia, Cyprus, September 5 – 6, 2012



Mortality trends from cardiovascular diseases in the WHO European region, ages 75+, by sex, 1981-2010

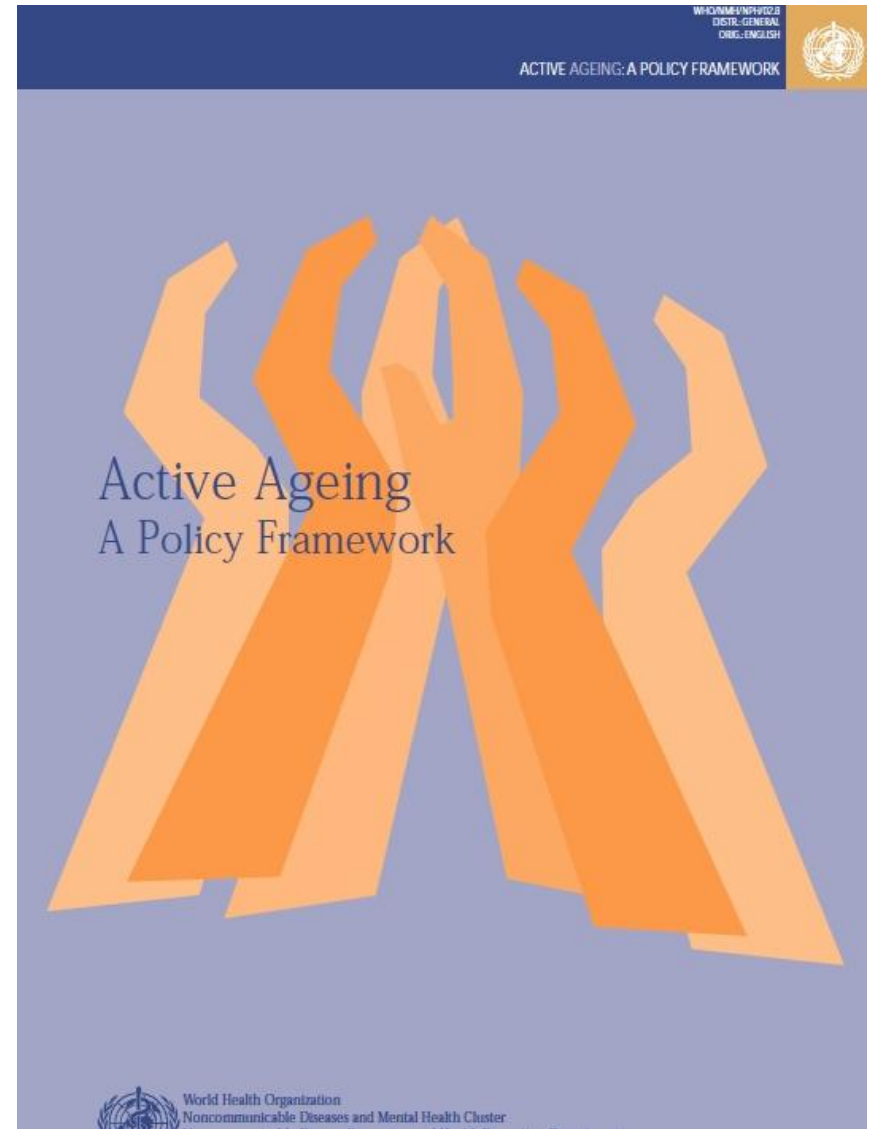


Four strategic areas for action



WHO tools and guidelines

- “Active ageing is the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age.”
- Postponement of retirement and an ageing workforce globally, only part of the story
- “Healthy ageing” and “active ageing” reinforce each other



Examples

Life course

- Links to noncommunicable diseases agenda and action plan
- Focus on 50+ and higher ages

Supportive environments

- Importance of local, cross-sectoral actions; long championed by “European Healthy Cities Network”
- “Healthy ageing profiles”: Indicators for planning, monitoring and evaluation

Burden of disease from noncommunicable diseases: mortality versus disability

Five main causes for burden of disease, people aged 60+

Years of life lost

Ischaemic heart disease

Stroke

Lung cancer

Colon & rectum cancer

Chronic obstructive
pulmonary disease

Years with disability

Dementia

Hearing loss

Osteoarthritis

Ischaemic heart disease

Stroke

Source: WHO (2008) Global burden of disease estimates, Geneva

Examples

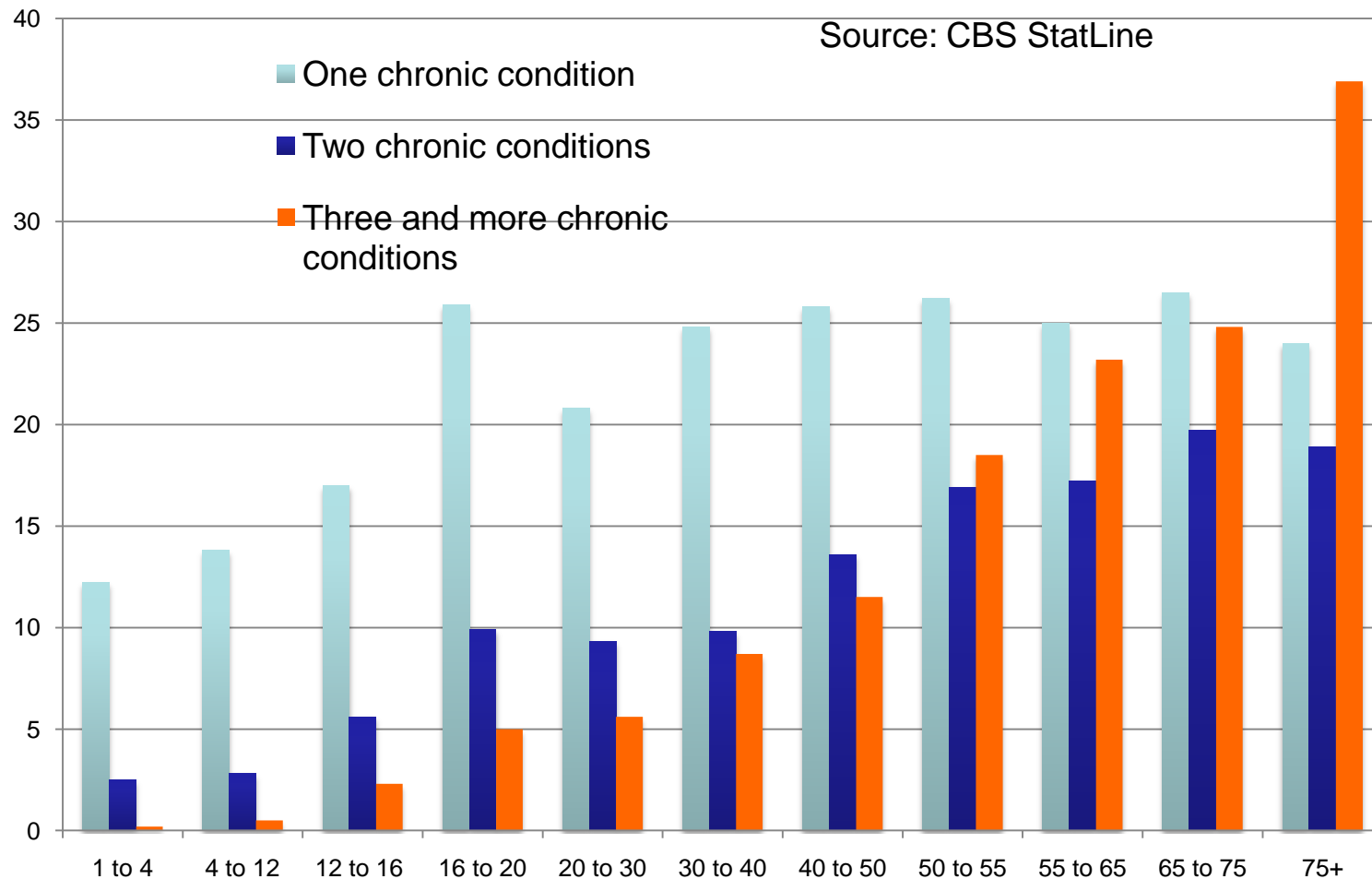
Health systems

- Improved services for people with (multiple) chronic conditions: a challenge for health-systems performance
- Public support to informal care and home care

Evidence and research

- Support to countries at early stages of formulating national policies for healthy ageing (e.g. on long-term care)
- Address gaps in evidence in cooperation with partner organizations

Prevalence of multiple chronic conditions increases with age: Netherlands



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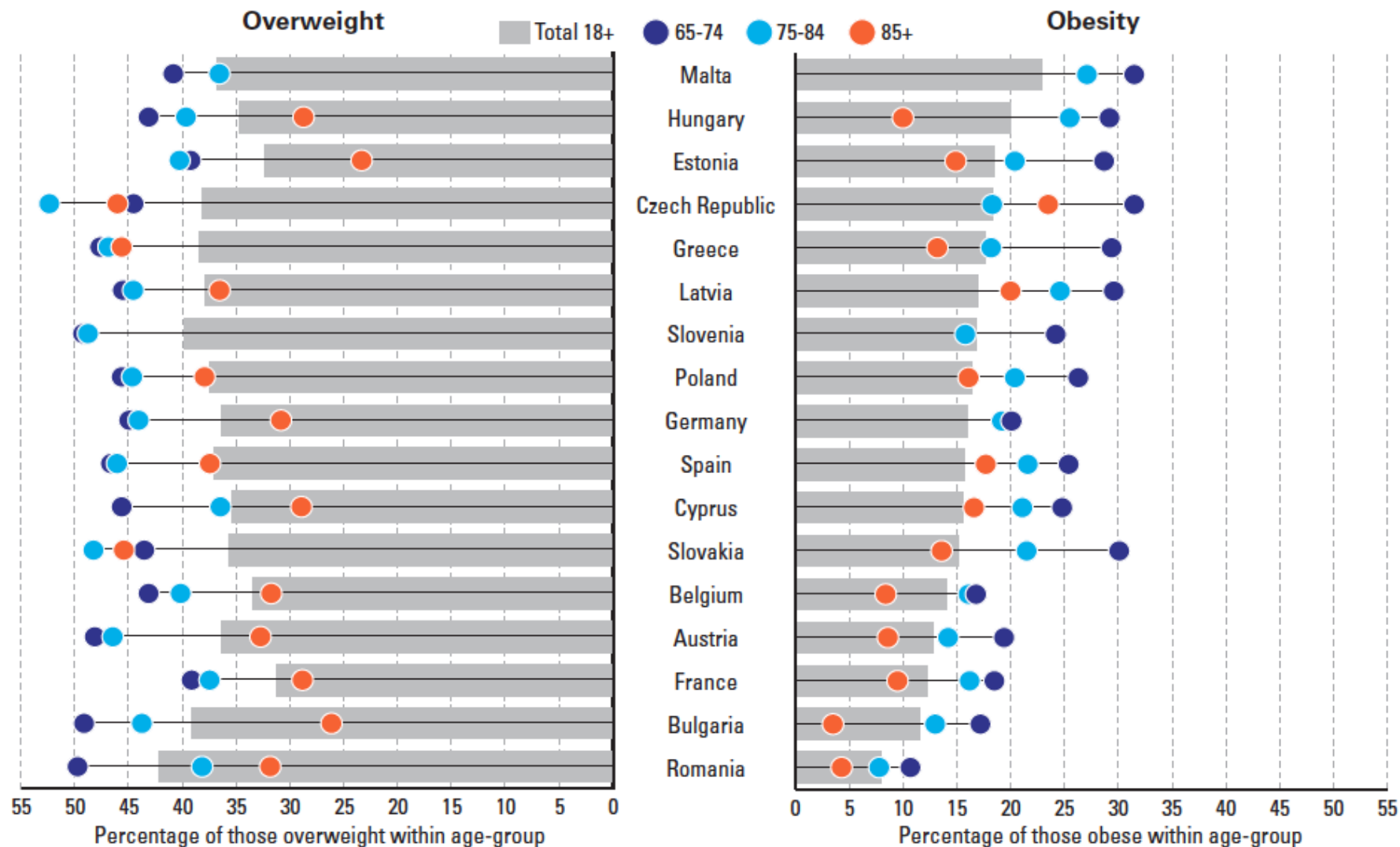
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Obesity over the life course

Fig. I: Share of the population that are overweight and obese, 2009 or latest year available

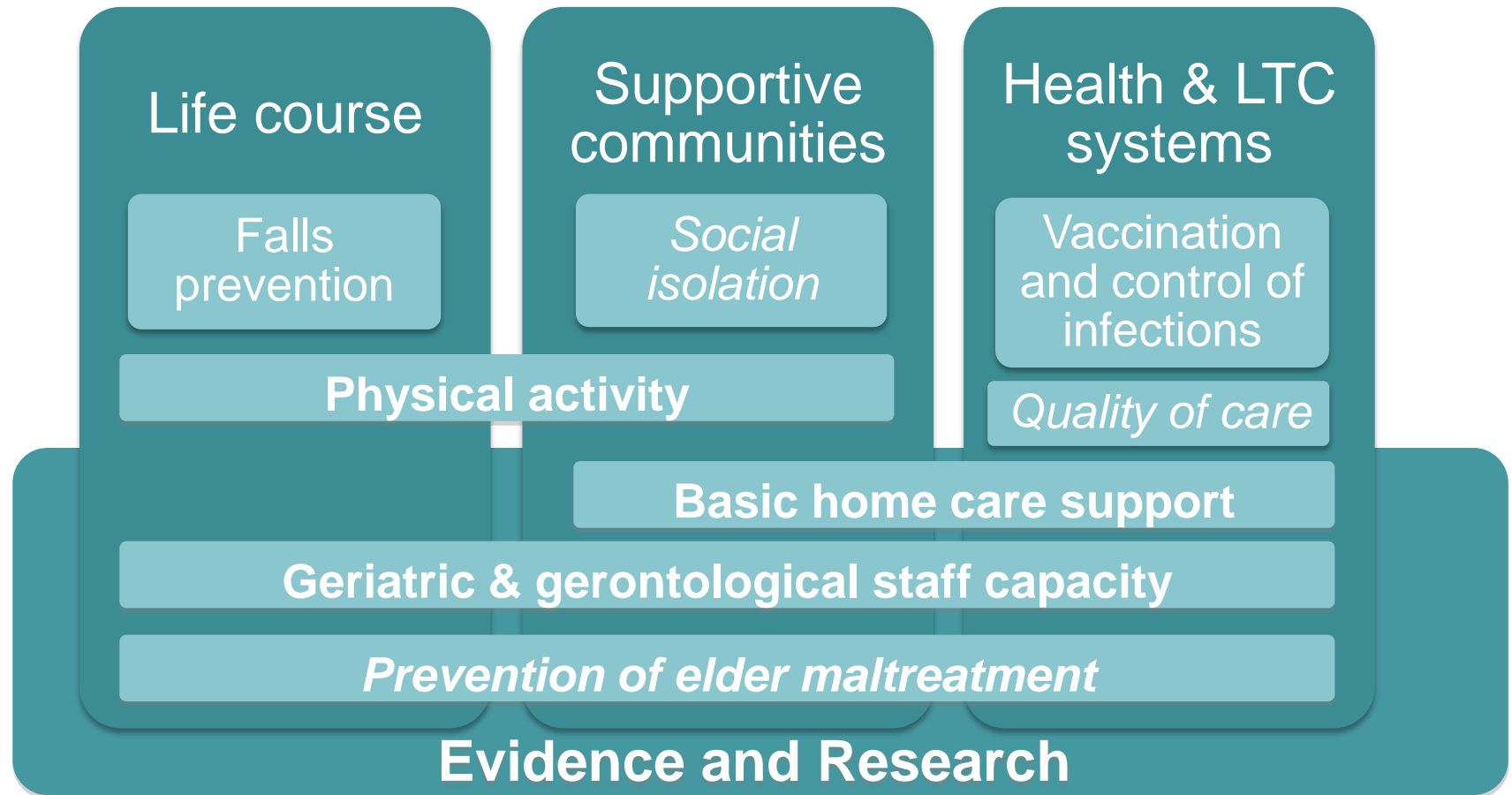


Priority interventions:

WHO Regional Office commitments

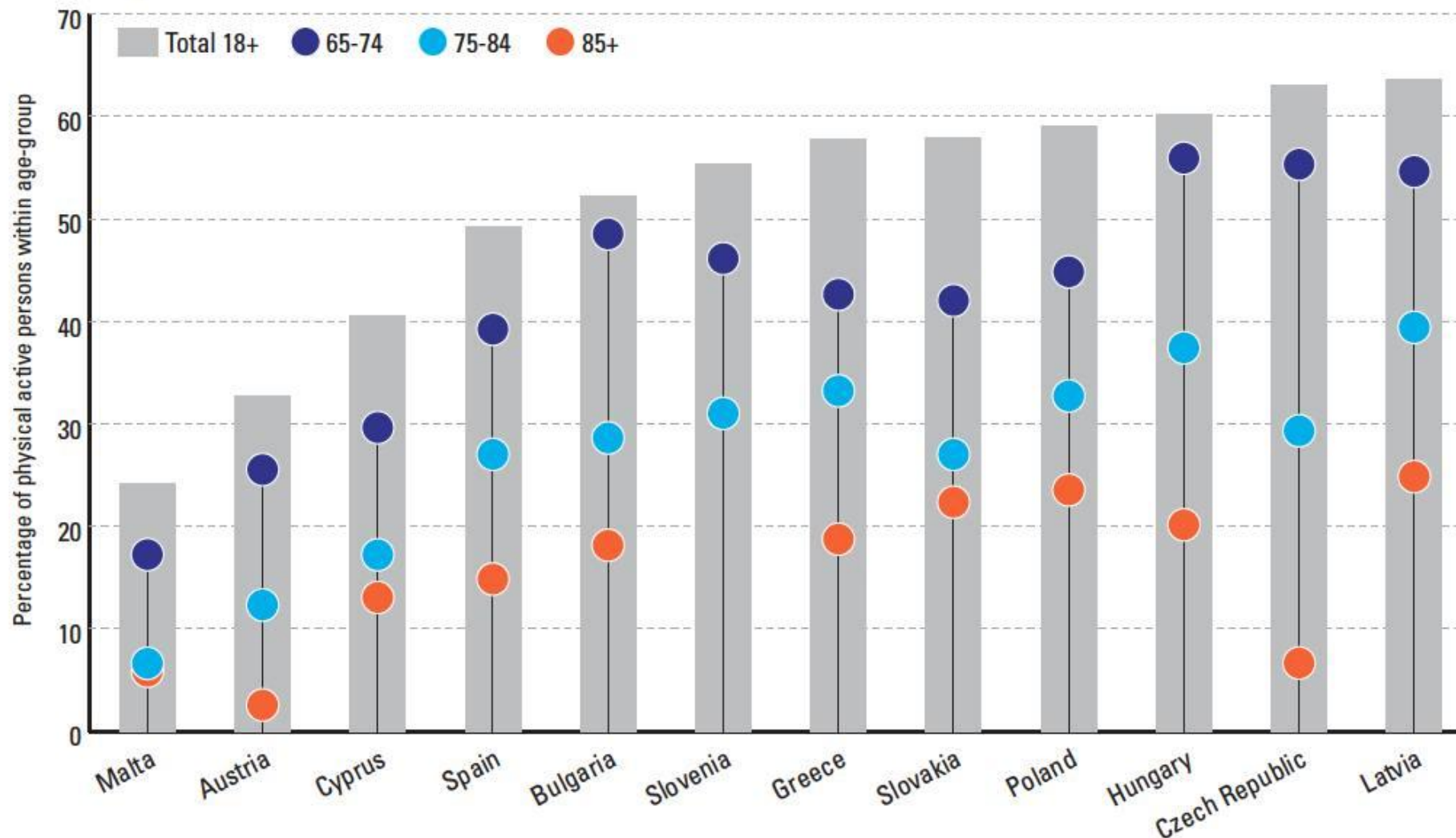
- **Achievable** progress within a limited time span
- **Relevant** for countries at different income levels and stages of demographic transition
- Mobilization of existing **WHO tools and expertise**
- Links to international and regional **policy frameworks and mandates**
- **Effectiveness and contribution to sustainability** of health and social care systems
- **Complementary with** actions of partners within Europe (e.g. European Commission, OECD, UNECE)

Mapping actions to strategic priority areas

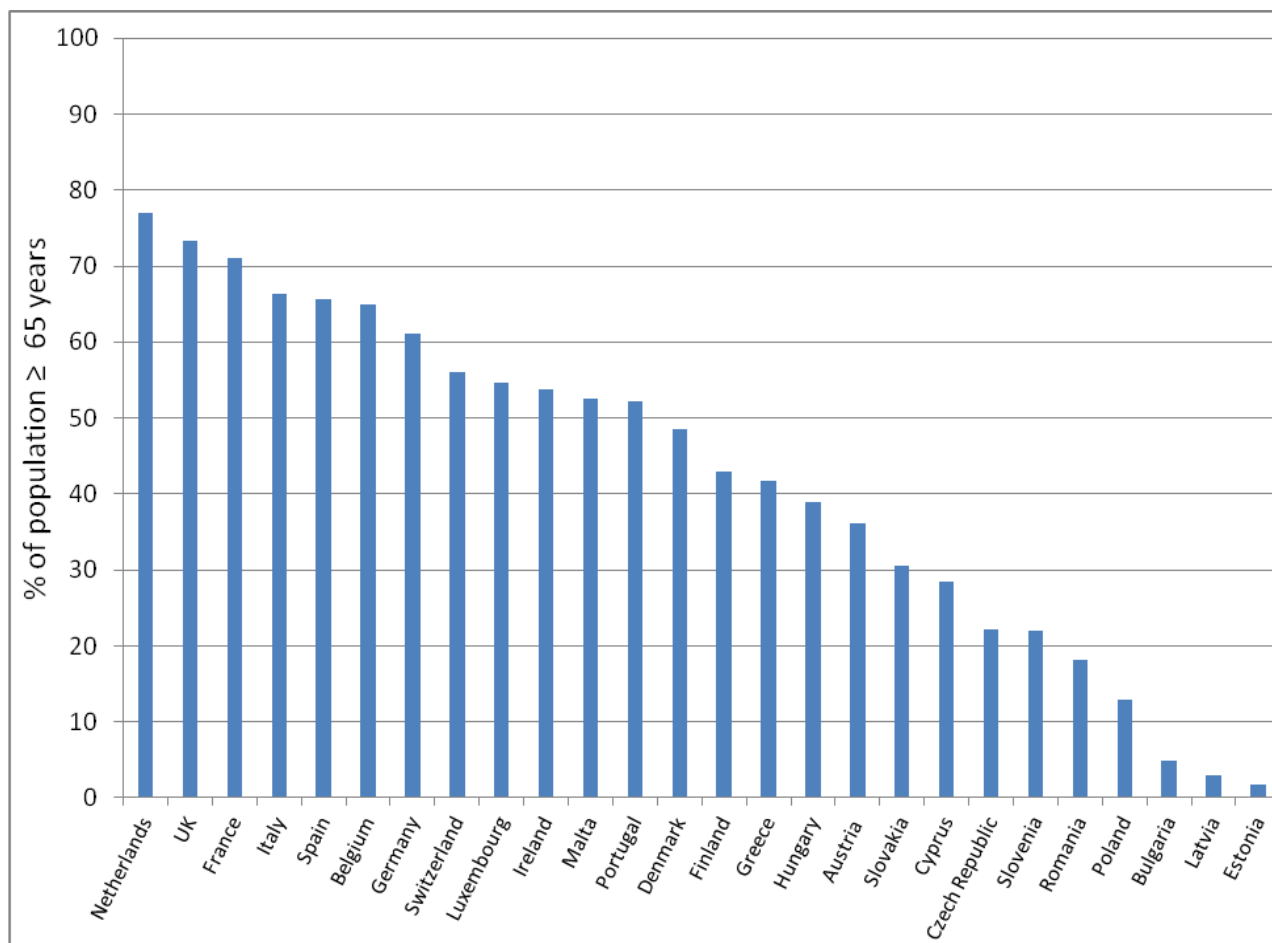


Physical activity declines with age

Fig. 1: • Share of the population that undertakes at least 30 minutes of physical activity per day (in percent), 2009 or latest year available

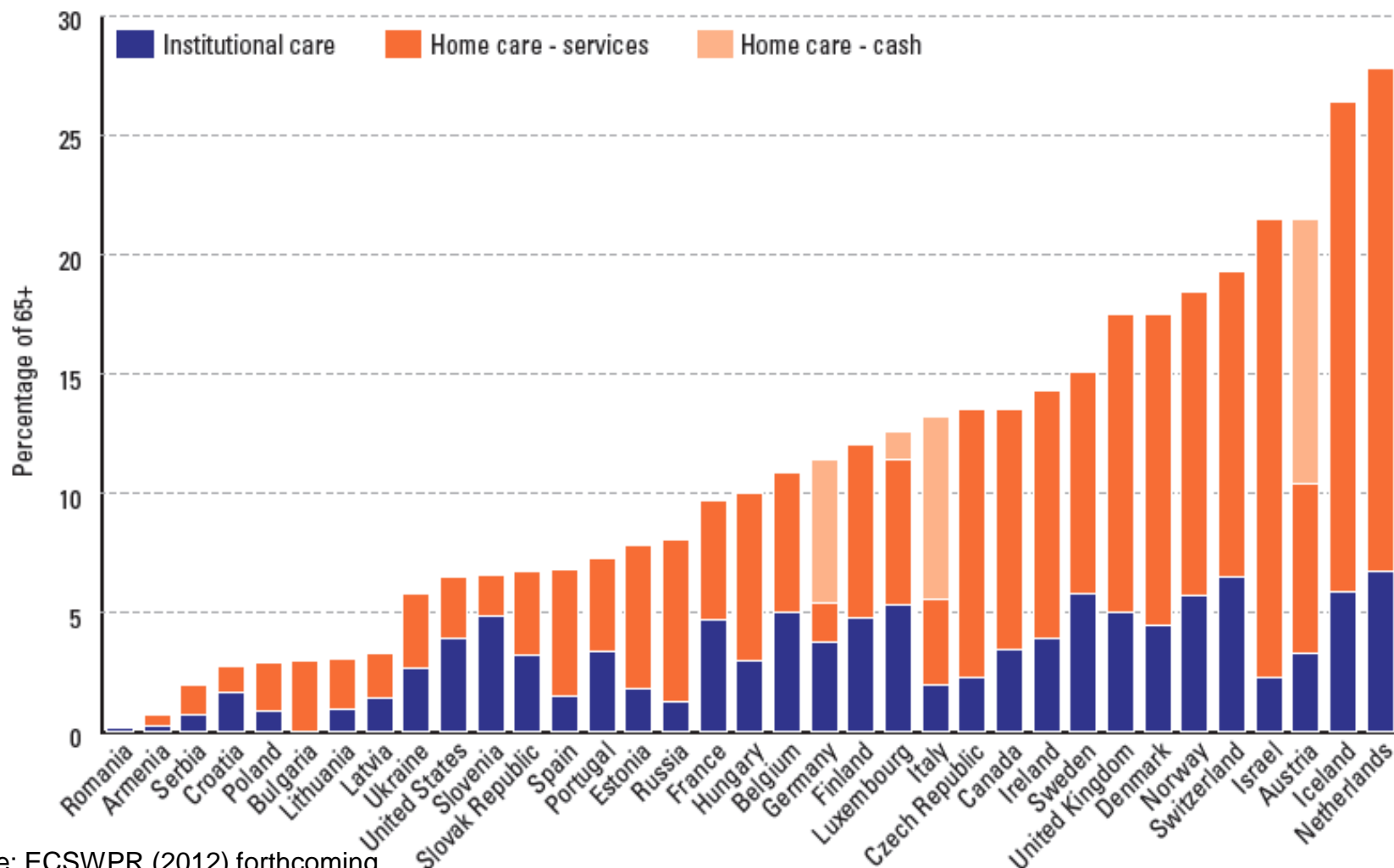


Influenza vaccination for people aged 65 and over



Sources: OECD Health Data 2011. Paris, OECD, 2011; European Health Interview Survey. Brussels, Eurostat, 2012.

Share of 65+ who receive LTC services



Source: ECSWPR (2012) forthcoming



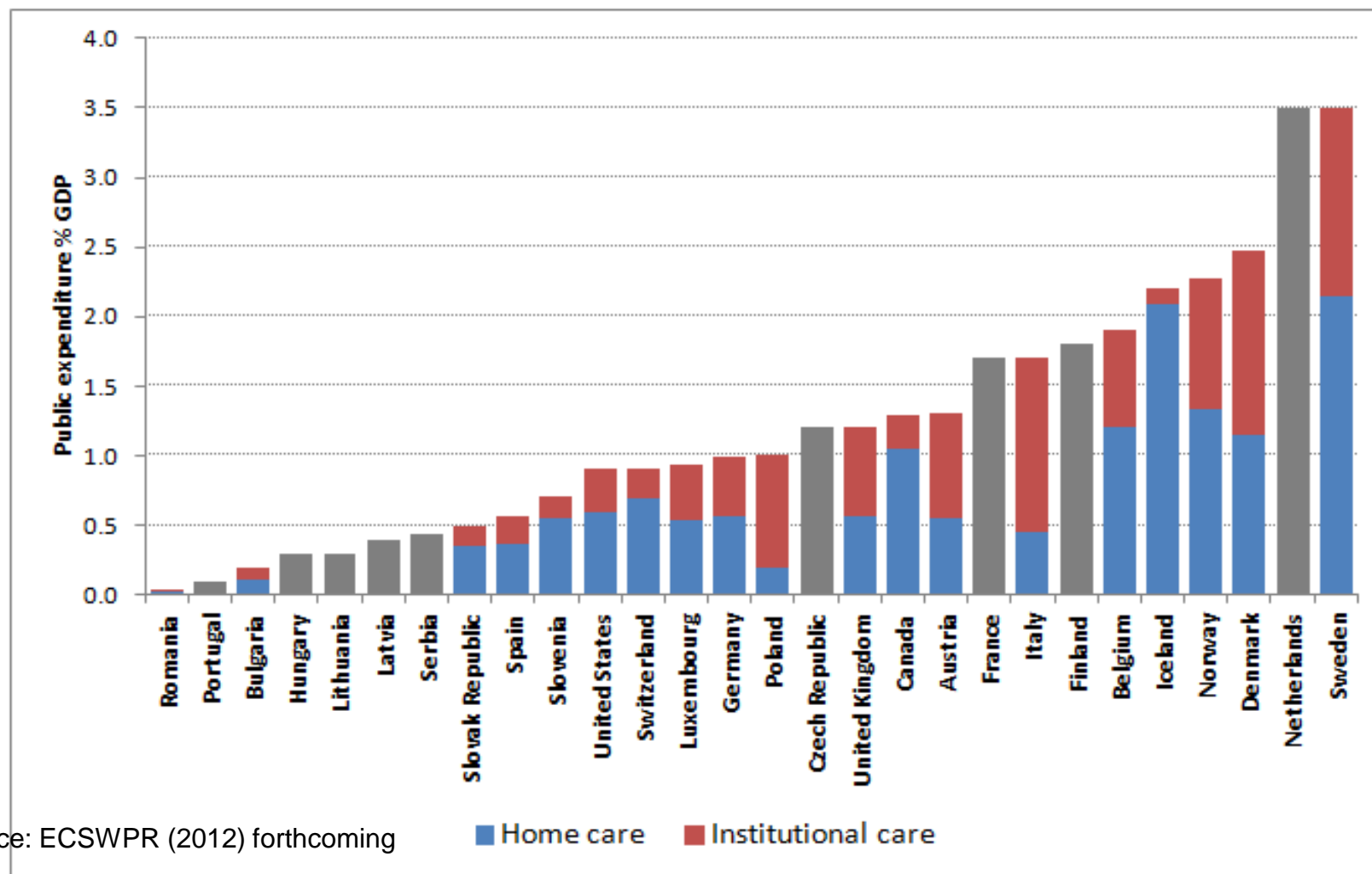
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Public spending on long-term care



Source: ECSWPR (2012) forthcoming

Thank you!

www.euro.who.int/ageing

