

## Summary of documents and policy frameworks

### Active Ageing : a policy framework, Geneva 2002 WHO

The policy framework is intended to inform discussion and the formulation of action plans that promote healthy and active ageing. The main sections of the publication are:

- Global ageing: a triumph and a challenge
- Active ageing: the concept and rationale
- The determinants of active ageing: understanding the evidence
- Challenges of an ageing population
- The policy response.

### The Madrid International Plan of Action on Ageing 2002

The Madrid International Plan of Action on Ageing and the Political Declaration adopted at the Second World Assembly on Ageing in April 2002 mark a turning point in how the world addresses the key challenge of “building a society for all ages”.

The Madrid Plan of Action offers a bold new agenda for handling the issue of ageing in the 21st-century. It focuses on three priority areas: older persons and development; advancing health and well-being into old age; and ensuring enabling and supportive environments. It is a resource for policymaking, suggesting ways for Governments, non-governmental organizations, and other actors to reorient the ways in which their societies perceive, interact with and care for their older citizens. And it represents the first time Governments agreed to link questions of ageing to other frameworks for social and economic development and human rights, most notably those agreed at the United Nations conferences and summits of the past decade.

### WHO Age-Friendly Cities Guide 2008

The Age-friendly Cities Programme is an international effort to help cities prepare for two global demographic trends: the rapid ageing of populations and increasing urbanization. The Programme targets the environmental, social and economic factors that influence the health and well-being of older adults.

In 2006, WHO brought together 33 cities in 22 countries for a project to help determine the key elements of the urban environment that support active and healthy ageing.

The result was *The Global Age-friendly Cities Guide* which outlines a framework for assessing the “age-friendliness” of a city. A core aspect of this approach was to include older people as active participants in the process.

The guide identifies eight domains of city life that might influence the health and quality of life of older people:

1. outdoor spaces and buildings;
2. transportation;
3. housing;

4. social participation;
5. respect and social inclusion;
6. civic participation and employment;
7. communication and information; and
8. community support and health services.

## **Health 2020: a European policy framework supporting action across government and society for health and well-being**

Health 2020 is the new European health policy framework. It aims to support action across government and society to: “significantly improve the health and well-being of populations, reduce health inequalities, strengthen public health and ensure people-centred health systems that are universal, equitable, sustainable and of high quality”.

The policy framework is evidence-based and peer-reviewed. It makes the case for investment in health and creating societies where health is valued. It details the ways that good health benefits all in society. Good health is vital for economic and social development and supports economic recovery.

It gives policy-makers a vision, a strategic path, a set of priorities and a range of suggestions about what works to improve health, address health inequalities, and ensure the health of future generations. It identifies strategies for action that are adaptable to the many contextual realities of the WHO European Region.

Health 2020 is the product of an extensive two-year consultation process across the Region and beyond, and was adopted by the 53 Member States of the Region during the sixty-second session of the WHO Regional Committee for Europe in September 2012

## **Zagreb Declaration for Healthy Cities**

This Declaration expresses the clear and strong commitment of political leaders of cities in Europe to strengthen and champion action on health, health equity, sustainable development and social justice. It celebrates and builds on 20 years of knowledge, experience and public health accomplishments of the European Healthy Cities movement. It highlights continuing action and value priorities and identifies new challenges, evidence and approaches, such as outlined in the final report of the Commission on Social Determinants of Health, for cities to address and adopt as they work to protect and enhance the health and well-being of all their citizens. It reviews plans and priorities for Phase V (2009–2013) of the WHO European Healthy Cities Network and national healthy cities networks in Europe and identifies how regional and national governments and WHO can support and benefit from these approaches.

## **Taking forward the Strategic Implementation Plan of the European Innovation Partnership on Active and Healthy Ageing**

In order to reach the European Innovation Partnership on Active and Healthy Ageing's goal of adding two healthy life years by 2020, the Strategic Implementation Plan focuses on three main areas of life events: prevention, care and cure, and independent living.

Five specific actions have been identified to be launched in 2012:

- ▶ Innovative ways to **ensure** patients follow their prescriptions – a concerted action in at least 30 European regions;
- ▶ Innovative solutions to prevent falls and support early diagnosis for older people;
- ▶ Cooperation to help prevent functional decline and frailty, with a particular focus on malnutrition;
- ▶ Spread and promote successful innovative integrated care models for chronic diseases amongst older patients, such as through remote monitoring. Action should be taken in a number of EU regions;
- ▶ Improve the uptake of interoperable ICT independent living solutions through global standards to help older people stay independent, mobile and active for longer.

In addition, networking and knowledge sharing on innovation for age-friendly buildings, cities and environments will be pursued. In a nutshell, the Steering Group invites the European Commission to address barriers to innovation and to foster a more effective use of EU funding to tackle the healthy and active ageing challenge.

In the future, these actions will be complemented by actions in other EIP areas, such as health literacy, patient empowerment, personalised health management, prevention and early diagnosis of functional and cognitive decline, and extending active and independent living through open and personalised solutions.

Notably, the EIP's notion of innovation is inclusive, including technological, process, organisational and social forms of innovation. The principal goal is to encourage stakeholders to deliver innovative care solutions that put older people in the centre of their actions.

#### **Action Group D4: Innovation for age friendly buildings, cities and environments**

Action D4 will create an age-friendly environment in the European Union by 2020 achieved through greater participation, collaboration and age-friendly innovation.

Inspired by the WHO age friendly cities initiative and further complemented by the use of ICT, the Action Group will launch a network of cities/regions/municipalities committed to deploying innovative approaches to make their living environment more age friendly.

The main targets of the Action Group on Age friendly environments (D4) are:

- to draw on the WHO age-friendly initiative, as well as on innovative work in public transport, ICT, smart cities, to establish a cooperation agreement, including a

covenant of major cities/regions/municipalities and a "seniors of innovation" initiative, bringing together innovative experiences, or analysis and re-use.

- Accelerate standardisation and interoperability of required devices, systems and services by involving major supply and demand side actors and pooling demands in 2013.
- Developing comprehensive common guidelines for innovation in support of age friendly environments to facilitate their replication, in cooperation with the WHO, building on the experience of at least 25 regions/cities/municipalities.