

AARP INTERNATIONAL

THE JOURNAL

2016

Reweaving the Fabric of Society



FINANCIAL RESILIENCE

Age-Friendly Vision for Taiwan
Jobs for Korean Boomers
Retirement Careers for Women



HEALTH SECURITY

A Legacy of Care
Surprising Effects of Ageism
The Under-Connected
Ecosystem of Elders
Brain Health



LIVABLE COMMUNITIES

A New Measure of
Age-Friendliness
Age-Friendly Indicators:
A New Guide
Re-Framing Issues in Aging
The EU Covenant

BUSINESS OF AGING

Seeing a Need for Change
Improving Retirement
Readiness
Heyday for Older Koreans

AARP
Real Possibilities

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Executive Director, Aegon Center for
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Minister of State for Family,
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In April 2014, Laurence Rossignol was nominated by the Prime Minister Manuel Valls to be part of his government. She received her current appointment in 2015 and is committed to reforming policies for the elderly in France.

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12 FEATURE

MILLENNIALS SHAPE AGING

Paul Irving

Chairman, Center for the Future of Aging,
Milken Institute

If demography is destiny, then millennials, currently in their late teens to mid-30s, will inherit the challenges and opportunities of a rapidly aging world. With its creativity and ability to tackle complex problems, the millennial generation could be the one to solidify new ideas and norms to improve longer lives.

40 HEALTH SECURITY

A LEGACY OF CARE

H.M. Queen Silvia of Sweden

Founded in 1995 on the initiative of H.M. Queen Silvia of Sweden, the nonprofit foundation Stiftelsen Silviahemmet seeks to improve the quality of life for persons affected by dementia and for their families. Her Majesty discusses her work through Silviahemmet and the legacy she has helped achieve there.

80 BUSINESS OF AGING

SEEING A NEED FOR CHANGE

Neil Blumenthal

Co-Founder and Co-CEO, Warby Parker

Warby Parker is a transformative lifestyle brand that offers designer eyewear at a revolutionary price. The company's co-founder and co-CEO shares his thoughts on the importance of socially-conscious businesses like Warby Parker in creating positive changes for people, including the elderly, all over the world.

IN THIS ISSUE



40

\$ FINANCIAL RESILIENCE

28

Age-Friendly Vision for Taiwan

An Interview with Premier Mao Chi-Kuo of the Republic of China

31

Jobs for Korean Boomers

The Baby Boom Generation Faces Challenges in an Aging Korea

BY HENRY KIM

36

Retirement Careers for Women

Meeting Expectations for Post Work Life

BY CATHERINE EARL

39

Collaboration on Age-Friendly Banking

BY BRADLEY SCHURMAN

HEALTH SECURITY

40

A Legacy of Care

An Interview with H.M. Queen Silvia of Sweden



59

45

Surprising Effects of Ageism

Addressing the Negative Consequences of Age Stereotypes

BY HANNAH J. SWIFT

49

The Under-Connected Ecosystem of Elders

Using Technology to Turn Crisis into Opportunity

BY LILIAN MYERS

54

Brain Health

AARP Launches New Global Collaborative

BY SARAH LENZ LOCK

56

Global Innovations

De Hogeweyk: An Innovative "Dementia Village" in the Netherlands

LIVABLE COMMUNITIES

58

Evaluating Age-Friendly Progress Around the World

BY NATALIE TURNER



80

59

A New Measure of Age-Friendliness

AARP's New Livability Index

BY JANA LYNOTT

63

Age-Friendly Indicators: A New Guide

Assessment and Monitoring are Key in the New WHO Guide to Age-Friendly Communities

BY MEGUMI KANO AND

PAUL ROSENBERG

65

Re-Framing Issues in Aging

A Framework in the UK Helps Cities Develop Age-Inclusive Programs

BY SOPHIE HANDLER

67

Case Studies in Aging

Insights into Global Age-Friendly Needs

74

The EU Covenant

A European Network Supports Age-Friendly Goals

BY ANNE-SOPHIE PARENT

78**Global Innovations**

HenPower: Using Animal-Assisted Therapy to Engage Seniors

**BUSINESS OF AGING****80****Seeing a Need for Change**

Warby Parker's Successful Mission-Driven Business Model Helps Older People Everywhere

BY NEIL BLUMENTHAL

84**Improving Retirement Readiness**

Greater Longevity Makes Retirement Reform a Necessity

BY ALEX WYNAENDTS AND CATHERINE COLLINSON

88**Heyday for Older Koreans**

Cigna Korea Creates a New 50+ Membership Program

BY BENJAMIN HONG

90**Growing Older in Australia**

Business Opportunities Abound in an Aging Australia

BY PHILIP TAYLOR AND MICHAEL O'NEILL

92**The AARP Innovation Fund**

Spurring Private-Sector Investment in Innovative Products and Services

BY SCOTT FRISCH

94**Global Innovations**

Project Romeo Gives Robots a Role in Caregiving

DEPARTMENTS & FEATURES**5****From the Editor****8****A New Vision for Living and Aging in America**

An Excerpt from the Forthcoming Book, *Disrupt Aging*

BY JO ANN JENKINS

12**Millennials Shape the Future of Aging**

Teens to 30-Somethings Are Uniquely Poised to Revolutionize the Aging Experience

BY PAUL IRVING

16**Challenges Facing Older Women**

Addressing the Pressing Need for Global Gender Equality and Women's Empowerment

BY PHUMZILE MLAMBO-NGCUKA

19**Shifting the Aging Paradigm**

The French Government is Deeply Committed to Improving the Lives of its Aging Citizens

BY LAURENCE ROSSIGNOL

23**The Nonprofit Sector in an Aging World**

How Nonprofits Are Working to Solve the Aging Challenge

BY TOM WRIGHT

26**AARP on the Scene****96****Untapped Opportunity****in Aging**

Older Workers — the Ultimate Answer to America's "Retirement Problem"

BY DAVID ROTHKOPF

98**The Future of Accessibility Innovation**

Winning Entry from the FP Global Demographics Student Essay Contest

BY FILIP BOROVSKY

100**The Promise of Aging**

Reweaving the Fabric of Society

BY DEBRA B. WHITMAN

104**Spotlight: Kirk Douglas**

About the Cover: Realizing the promise of aging requires no less than reweaving the fabric of society. The string represents the idea of recasting our outlook and approach to aging. The head is symbolic of both the individual and all of society, and a reminder that these pressing global demographic changes will affect each and every one of us. The image was conceived and produced specifically for AARP and this edition of *The Journal*.

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There is a demographic revolution occurring...

Josh Collett

VICE PRESIDENT FOR INTERNATIONAL AFFAIRS, AARP

Think about this—nearly two out of every three people who have ever lived to age 65 are alive today! Consider that many in the medical science community believe the first human who will live 150 years is alive today. There is a demographic revolution occurring and we are all pioneers on how we evolve our societies to account for this new reality.

Until recently viewed as a phenomenon primarily affecting developed nations, population aging is now recognized as a global issue affecting all nations and all peoples, offering both serious challenges and rewarding opportunities. I believe we can now say without credible contradiction that global population aging has become a transformative issue that is underway and advancing rapidly.

By the year 2030, globally, there will be more adults age 60 and over than children under 10 for the first time in history. At mid-century, 22 out of every 100

people on earth will be age 65 and over. But already today, changing demographics are a key determinant in major geopolitical decisions, seen in the European refugee crisis and China's social policy, for example. And we have seen very positive steps. The inclusion of references to age and older persons in the Sustainable Development Goals Agenda adopted by the United Nations demonstrates increased awareness and promising progress.

The issues are too complex and too important for any one sector — government, for example — to address the challenges and seize the opportunities. Every sector needs to be better functioning and better coordinated, each fulfilling specific functions and making unique contributions.

For its part, AARP, a social change organization with a membership of nearly 38 million people age 50 and over, is evolving to enhance the lives of older

people in ways that benefit society. We are disrupting aging, challenging outdated beliefs and sparking new solutions. Globally, we are engaging all sectors in all regions to elevate discussion on the interconnected nature of aging and foster a new approach. We aim to change the conversation and transform the experience of aging.

In this edition of *The Journal*, our distinguished contributors examine how the trend is developing and what needs to be done to keep it moving in the right direction. How, for example, will our cities be transformed? What roles will technology play? What will the world's workforce look like?

AARP CEO Jo Ann Jenkins gets our discussion started with an excerpt from her new book, *Disrupt Aging: A Bold New Path to Living Your Best Life at Every Age*, in which she states that to think of population aging as a crisis is "absolutely and fundamentally wrong." She calls for getting rid of outdated beliefs and stereotypes about aging and offers a new framework for measuring success in the form of "Four Freedoms of Aging:" to Choose, to Earn, to Learn, and to Pursue.

In the Big Picture, we hear from global thought leaders from different sectors on fresh approaches for the path ahead.

■ Paul Irving, Chairman of the Milken Institute's Center for the Future of Aging, suggests that the technology-savvy millennial generation has a golden

opportunity to shape the future of aging in a positive way.

- Phumzile Mlambo-Ngcuka, UN Under-Secretary-General and Executive Director of UN Women, suggests that treatment of older women could be an indicator of the success of the recently adopted United Nations Sustainable Development Agenda.
- Laurence Rossignol, France's Minister of State for Family, Childhood, Elderly People and Adult Care addresses how France is working to extend autonomy of older people and engaging policy makers and all stakeholders to "build a society adapted to aging."
- Tom Wright, CBE, Group CEO for Age UK, discusses the role of the nonprofit sector in addressing issues of population aging, such as giving an effective voice to people and working collaboratively to provide information and support, spur innovation, and address product and service gaps.

The Financial Resilience section highlights opportunities for staying engaged in later years, critical for healthy aging and beneficial for society.

In an exclusive interview with AARP International, Premier Mao Chi-kuo of Taiwan outlines how his government has engaged various stakeholders to develop a White



Globally, we are engaging all sectors in all regions to elevate discussion on the interconnected nature of aging and foster a new approach.

Paper on Aging Society, aimed at ensuring that all people age in supportive environments. Another article is by Henry Kim, COO of Korea's Senior Partners Inc., who relates the unique challenges of increasing labor force participation among Korean baby boomers in a nation where the retirement age has been 55 and most workers have been "forced out" of their jobs by age 52.

On Health Security, we feature how information exchange and a focus on care can address challenges associated with dementia.

We are honored to have H.M. Queen Silvia of Sweden answer questions about the nonprofit foundation she founded to improve the quality of life for persons affected by dementia and their families. Further on this topic, AARP's Sarah Lock describes the Global Council on Brain Health (GCBH), launched by AARP in 2015. The GCBH brings together leading global experts to share research and provide consumer-friendly

information on brain health, showing what works, and what doesn't. This section also looks at lesser-known consequences of ageism, and at how mobile technology can facilitate greater social interaction and combat isolation.

As age-friendly communities further emerge as a universal model for developing great places for people of all ages, our Communities section examines methods and tools for measuring age-friendliness and also features case studies on low-to-middle income areas.

Jana Lynott, of AARP's Public Policy Institute, provides an overview of the AARP Livability Index, a groundbreaking tool that assesses every neighborhood in the United States on the services and amenities that affect people's lives. We feature articles from the WHO on their new publication to help cities measure their age-friendliness and from Manchester on the United Kingdom's evaluation framework for communities. Anne Sophie Parent of Age Platform reports on European Union efforts to make age-friendly environments a reality.

We also feature the results of a pilot test of the WHO evaluation guidelines as applied to two "slums" in Nairobi, Kenya and present a case study of La Plata, the capital city of Buenos Aires Province. And we look at the unique challenges and opportunities of introducing age-friendly principles and policies in rural areas using the state of Maine as an example.

In this edition, we introduce a new section, the Business of Aging,

which addresses the increased focus of the private sector on aging issues and the potential that this offers.

Warby Parker co-CEO Neil Blumenthal reports on how his company's efforts to provide eyeglasses in the developing world can increase productivity and self-sufficiency and states that "businesses will become increasingly mission-driven as the pace of change speeds up."

Other companies are meeting the new demands. Aegon, a Dutch-based financial services company, is addressing the increasing need for individuals and families to play a greater role in saving and preparing for a long retirement. Cigna Korea has developed a membership program that has an emerging new direct-to-consumer channel offering such benefits as discount services for health checkups and free samples from top market players to its customers.

Civil society is also playing its part. National Seniors Australia (NSA), a consumer lobby for older Australians, describes how NSA is collaborating with the superannuation industry, healthcare providers, and the retail sector in order to better meet the needs of older people.

AARP is proud to report on our continuing commitment to spur business engagement and investment in innovation. Scott Frisch, our Chief Operating Officer, announces the first-of-its-kind AARP Innovation Fund which is devoting \$40 million over three years to provide start-up capital to companies around the world that

develop products and services that improve the lives of people age 50 and over and their families.

Speaking of family, we are privileged to feature Kirk Douglas in our Spotlight section. As he celebrates his 99 birthday, Mr. Douglas reflects on his parents, his 62 year marriage, and recent travel to celebrate a grandson. Kirk and Anne Douglas have funded "Harry's Haven," named after his father, an Alzheimer's unit at the Motion Picture & Television Fund's retirement home.

We close this edition of *The Journal* focused on the untapped potential offered by population aging and on the imperative to adapt.

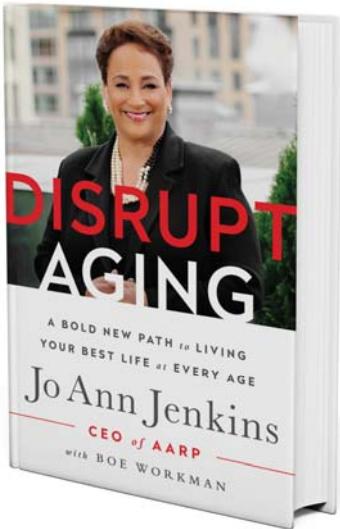
David Rothkopf, the CEO and Editor of the FP Group, discusses how the growth of our cadre of most experienced workers represents a "massive" opportunity, rather than a threat to our society. Older workers will bring their experience to the global marketplace in ways that previously were impossible.

In her column, Debra Whitman, AARP's Executive Vice President and Chief Public Policy Officer, looks at the need to recast the issue of aging and implores world leaders to acknowledge and capitalize on the successes of longevity. She notes, "Realizing the promise of aging is about no less than reweaving the fabric of society."

As you'll see in *The Journal*, there are ongoing efforts to embrace the new realities resulting from demographic change. There is more to do and we cannot miss this opportunity. ●

A NEW VISION FOR LIVING AND AGING IN AMERICA

Jo Ann Jenkins | CEO, AARP



This article is an excerpt from Jo Ann Jenkins' forthcoming book, *Disrupt Aging: A Bold New Path to Living Your Best Life at Every Age*, published by PublicAffairs and due to be released in April 2016.

"You can never plan the future by the past."
—Edmund Burke

I first stepped onto the stage at AARP's Ideas@50+ national member event in San Diego in September 2014 to deliver a keynote address urging the 8,000 attendees to disrupt aging. Since then, the response has been overwhelming. It turns out that this is a message that people aged 50 and over have been waiting to hear. People across the country, from all walks of life, have been sharing their experiences with me and telling me that although they don't want to age the same way their parents did, they aren't sure what to do about it. They are anxious to change the conversation in our society, and in some cases, to start having the conversation. They want more choices for how to live when they get older. They want new and better solutions to help them age with independence, dignity and purpose. They are ready to chart a new course. So am I.

I wrote this book to provide a pathway for those who are 50 and over and to create a new vision for all

generations for living and aging in America. I can no more identify with my parents' experience of aging than my own kids can identify with mine. It's just different. Sometimes I play this little game when I hit certain milestones in my life—like birthdays, sending my kids off to college, attending their graduations, etc.—I think back and try to remember my parents as they experienced those same milestones. What was my mom like when she was 57? What were my parents doing when I graduated from college? How did they view their lives at various milestones along the way? It can be a real eye opener and really makes me realize how much things have changed from their generation to mine.

The way we are aging today is dramatically different from how it was a generation, even a decade ago. Yes, we are living longer and in better health, but it's much more than that. We haven't just added more years to the end of life, we've extended middle age and, in essence, created a new life stage that has opened up a whole new world of possibilities for how we live and age. And, we're just beginning to understand the full range and depth of those possibilities. We live today during a time when people age 60 and over outnumber children 15 and under. Demographers predict that more than half the children born today will live to 100. And, some believe that the first person who will live to the age of 150 has already been born.

This is an incredibly exciting time. Many organizations and companies that five or ten years ago had no interest in aging issues and didn't even want to acknowledge aging, are now engaging and becoming part of the broadening conversation. Ten years ago, we had to practically beg celebrities to appear on the cover of AARP The Magazine. Now, we are approached constantly by stars who want to be on the cover. Entrepreneurs and innovators are creating an incredible array of products and services targeted to people 50 and older. Advances in research and technology are driving innovation in virtually every field of endeavor that affects our ability to live well as we age. Science is making longer lives

We need to get rid of the outdated beliefs and stereotypes about aging and spur new solutions so more of us can choose how we want to age.

possible. Now we have to figure out what we're going to do with them.

Even as all of these exciting developments are changing the way we age, most conversations around aging still view it as a problem to be solved. And the solutions are all an effort to avoid the national crisis that is the aging of America. It's a premise that is absolutely and fundamentally wrong, and millions of people are proving it wrong every day. The conversation can't be about how to avoid a crisis, it needs to be about how to take advantage of the opportunities we have so we individually and as a nation can thrive.

Our culture, institutions, social supports and infrastructure have not kept up with the advancements in the way we age that science, technology and innovation have made and continue to make possible. That's what the conversation is about. We need to get rid of the outdated beliefs and stereotypes about aging and spur new solutions so more of us can choose how we want to age. That means replacing old models that don't work with new ones that do and updating those that do work so they

continue to work in the future. That's what disrupting aging is all about.

Aging's Four Freedoms

On January 6, 1941, the eve of the United States' entry into World War II, President Franklin Delano Roosevelt stood before a joint session of Congress to deliver his annual State of the Union address. In that speech, Roosevelt argued for an end to the isolationist policies that grew out of World War I and offered a new ideology based on Four Freedoms: Freedom of Speech, Freedom of Worship, Freedom from Want and Freedom from Fear. Roosevelt's Four Freedoms became a rallying cry to garner public support for America's involvement in World War II. They resonated with the American people as a statement of the country's underlying values, and to this day, Roosevelt's Four Freedoms still ring true as the basic values that define American life and examples of American exceptionalism.

In much the same way that Roosevelt's Four Freedoms inspired America to wake up and realize what was happening in the world and to act, I have identified the Four Freedoms of Aging that will define a new vision for living and aging in America and inspire us to disrupt aging, making that vision a reality.

Freedom to Choose how and where you want to live as you age.

When it comes to aging, there is no one-size-fits-all solution. If you want to follow a traditional path to retirement, you should be able to do that. If you want an active, engaged life, you should have options to pursue

I have identified the Four Freedoms of Aging that will define a new vision for living and aging in America and inspire us to disrupt aging, making that vision a reality.

that as well. Whether you want to continue living in your own home as you get older, move to a retirement community, or live in an institutional setting, those options should all be available to you. It's all about having options available that allow you to choose how you live and age.

Freedom to Earn. A key part of the retirement model that most of us have grown up with is freedom from work. Today, a key part of extended middle age is the freedom to work. Many of us want or need to continue earning a living and are searching for ways to make a difference in society through the work we do. This requires reimagining work and breaking down both social and institutional barriers that stand in the way.

Freedom to Learn. Our world is changing so quickly. New technologies, new ways of communicating with each other, new ways of receiving and processing information—it's hard to keep up. If we want to

stay engaged, involved and productive during our extended middle age and beyond, we need to keep learning. If we want to continue working, we need to keep learning in order to keep our job skills up to date. We need to keep learning to avoid isolation. We need to keep learning for our own personal fulfillment and simply to enjoy life. But let's face it, the opportunities for us to keep learning diminish as we get older. In many cases, they're just not there. As we disrupt aging, we will break down the barriers and create new opportunities to learn as we get older.

Freedom to Pursue Happiness by discovering and fulfilling your purpose. This is what it's really all about. Our longer lives give us an extraordinary opportunity to become the people we have always wanted to be. No longer burdened by many of the day-to-day stresses that consumed our lives as we were climbing the corporate ladder and

raising our kids, many of us are using our extended middle age to turn inward and focus on finding and fulfilling our purpose in life. We have the power to reimagine our lives, to change its course and find new ways to find fulfillment.

Civil rights leader A. Philip Randolph keenly observed, "Freedom is never given; it is won." So, if we're going to win at attaining Aging's Four Freedoms, we have to work together to create a society where we have access to the care, information and services we need to lead healthier lives with independence and dignity; where we have the financial resources and opportunities to match our longer life spans; and where we are seen as an integral and inspirational asset to society.

Winning these freedoms begins with each of us. We can't afford to sit on the sidelines and wait for someone else to win these freedoms for us; we have to do it for ourselves. It's time to tell our stories—what we believe and what we can do. So, in conversations with your family and friends, what beliefs will you challenge? We need to change both the culture and the infrastructure of aging—the systems, programs, products and services that we encounter every day. In your life and in your work, what solutions will you spark? In everything that you do, think about what new possibilities you can create for yourself and others. What will you do to disrupt aging?

Disrupt Aging is our rallying cry to create a new vision of living and aging in the 21st century. Our new

vision is of a world in which aging is not about decline; it's about growth. It doesn't present only challenges; it creates new opportunities. And older people are not burdens; they are contributors.

I truly believe that age and experience can expand life's possibilities for every member of our society. When we disrupt aging and embrace it as something to look forward to instead of something to fear, we can begin to discover our real possibilities for becoming the person we always wanted to be and build a society where all people are valued for who they are, not judged by how old they are. ●



Jo Ann C. Jenkins

Jo Ann C. Jenkins
CEO, AARP

MILLENNIALS SHAPE THE FUTURE OF AGING

Paul Irving | CHAIRMAN, CENTER FOR THE FUTURE OF AGING, MILKEN INSTITUTE





With its creativity and ability to tackle complex problems, the millennial generation could be the one to solidify new ideas and norms to improve longer lives.

There's a movement afoot to disrupt aging—to change hearts and minds about the possibilities of longer life. From the streets to the boardroom, to the halls of political power, an enlightened conversation about the future is beginning to take shape. Change is rarely easy, but, in the United States and other places with aging populations, there's an evolving recognition that it's time to cast aside outdated expectations and define people by who they are—not by how old they are.

If demography is destiny, then millennials, currently in their late teens to mid-30s, will inherit the challenges and opportunities of a rapidly aging world—a landscape that anticipates a near doubling of the over-65-years-old population between 2010 and 2050. Now representing nearly a fourth of the US population and at 1.8 billion strong worldwide, the millennial generation could be the one to solidify new ideas and norms to improve longer lives. Its ability to tackle complex problems already has delivered profound social innovations and advances in such domains as

transportation and health care. That same creativity may soon change aging across the world—for the better.

As today's aging generation adapts to a world of challenges and opportunities afforded by increasing longevity—a new normal—it may ultimately be the millennial generation that successfully shapes a new life course.

Unique Skills and Characteristics

Millennials possess the education, tech know-how, diversity, and ease with information access and dissemination that puts them in the position to rethink and revolutionize the aging experience. As members of the so-called Selfie Generation, which is often criticized as self-absorbed, millennials have in fact used technology to improve communication, mobility, and opportunity in ways that are crucial for aging adults to maintain their independence.

As sharing-economy success stories like Uber and Airbnb transform the global marketplace, millennial entrepreneurs continue to develop new products and services for the rapidly expanding longevity economy. From social networks and autonomous cars to wearables and digital health tools, millennials are dreaming up innovations that will transform and improve millions of lives.

Longer Lives

Aging populations today enjoy a life expectancy that is nearly double what it was just over a century ago. With the prospect of many more years of life than their parents and grandparents had, millennials will have more time for work, recreation, learning, and purpose. This continuing dynamic, the result of life-extending advances in science and sanitation, will dramatically affect every aspect of society—from business, education, and health care to politics, civic institutions, and culture.

Millennials should take the initiative in the developing culture shift, one that recognizes the proven benefits of older workers.

Genomic research will push ahead, seeking to unlock the secrets of radical life extension, and that possibility alone should motivate younger adults to think about what aging will look like as their own lives progress.

Millennials also know that science doesn't sleep, and that means they'll be parenting a new generation with the prospect of even longer lives.

Health and Wellness

Thanks to their standing as the most educated generation ever, millennials are poised to experience better personal health in later life than their parents did. With access to vast information about nutrition and the powerful effects of exercise, this younger generation increasingly takes a personal interest in their health. Half of US millennials fear loss of physical agility and self-reliance more than financial insecurity later in life, according to research by the market research company Nielsen.

Scientific innovation, accelerated disease cures, and personalized medicine will enable longer health spans. But millennials face a major challenge—tackling the obesity epidemic. If not arrested, obesity, with its skyrocketing costs, will

continue to burden the economies of aging societies across the world.

Environment and Well-Being

Beyond physical health, the emerging “livable cities” movement provides millennials with opportunities to expand urban features that influence better aging. The World Health Organization’s initiative for age-friendly cities has spread to 33 countries, and institutions ranging from AARP to the Milken Institute actively promote improvements in infrastructure, amenities, and culture to ensure that cities become more effective places to serve the needs of residents of all ages.

As more leaders embrace livable-community concepts, the millennial generation will have greater access to healthful activities, like bicycling, walking, and social engagement. Conveniences for older people will include transportation options, social service networks, learning opportunities, and diverse housing alternatives.

Work and Education

Millennials will almost certainly continue the developing trend of working later in life, due to economic need and a desire for ongoing challenge and contribution. Fortunately,

studies associate the stimulus of working with well-being and enhanced health for older adults.

Millennials’ flexibility and comfort with new and diverse environments will serve them well as the old model of working for one company and in one career fades. They will head back to school at times—to learn new skills for career switches and to enjoy educational opportunities during added years of vitality. Steeped in computing ease and already well educated, millennials will readily adapt to the growth of open-source learning.

At the same time, this younger generation will inherit a persistent challenge: ageism, with its heavy costs to individuals and societies. Research confirms that older people’s emotional stability, reliability, wisdom, and experience improve productivity and work environments. But these merits still await a frontier of acceptance, hampered by unfounded bias and misperceptions. Millennials should take the initiative in the developing culture shift, one that recognizes the proven benefits of older workers. They will experience multigenerational workforces in their careers and be positioned to build acceptance and appreciation of older workers—changes that will benefit them directly as they age.

Financial Security

A key element to well-being for older adults is financial security. Millennials came of age during the Great Recession, with poverty and unemployment rates higher than what Gen-Xers and baby boomers had at this stage of life. Yet the Pew Research Center finds that millennials are financially optimistic and ambitious, and while most don’t feel

they earn enough to support their desired lives, roughly 8 in 10 think they'll get there in the future.

Still, millennials carry massive student debt that far exceeds that experienced by earlier generations at the same age; and more than half of millennials say they are living paycheck to paycheck, unable to save for the future, according to Wells Fargo. It is not yet clear whether they will attain the financial health that so importantly contributes to physical and emotional well-being in older age.

Purposeful Aging

A key aspect of well-being for older adults is the definition of purpose in their lives—fulfillment of the urge for meaningful engagement and beneficial contribution. Purpose improves mental and physical health, and it correlates with greater productivity, creativity, and resilience. As the benefits of purposeful aging become more widely understood, millennials will be more inclined than earlier generations to define their purpose and act on it through volunteerism, mentoring, and other meaningful activities.

Millennials already volunteer more than past generations did. In 2013, 20 percent of adults under 30 volunteered, the Corporation for National and Community Service states. That compares to 14 percent of young adults in 1989, an analysis of Census Bureau data shows. The National Alliance for Caregiving and AARP found that nearly a quarter of caregivers today are between the

ages of 18 and 34. This trend is likely to grow with the prevalence of incapacitating illness like Alzheimer's and the aging of the baby boomers.

Millennials also are philanthropic and are known for valuing experiences more than possessions, a trait that also happens to characterize older adults. Roughly 8 in 10 millennial employees and managers among 2,500 surveyed in small and large firms made charitable donations in 2014, according to an Achieve LLC study sponsored by the Case Foundation. With these priorities and values, millennials may well usher in a new era of meaning and purpose as they enter their later years.

The Future

One can only imagine what breakthroughs might further boost life spans, and the pathways to solving the challenges of chronic disease, ageism, and financial insecurity remain uncertain. But aging is changing, and a new and hopeful narrative is being written. Millennials—with their big numbers, bold ideas, and longer lives—will be powerful participants in that process, with opportunities large and small to set a new course and improve lives. The movement to disrupt aging is building, and the millennials, heeding the call to action, will shape the future. ●



Paul Irving

Paul Irving is chairman of the Milken Institute Center for the Future of Aging and distinguished scholar in residence at the USC Davis School of Gerontology. Author, speaker and recognized leader in the field, Irving previously served as the Institute's president, an advanced leadership fellow at Harvard University and CEO of a prominent law and consulting firm.

CHALLENGES FACING OLDER WOMEN

Phumzile Mlambo-Ngcuka | UN UNDER-SECRETARY-GENERAL AND EXECUTIVE DIRECTOR, UN WOMEN



In September we witnessed the launch of the most ambitious universal effort since the United Nations Declaration of Human Rights in 1948. The 2030 Agenda for Sustainable Development was adopted with 17 global goals (SDGs) for a more sustainable, equitable world. There are gender-equality targets throughout the agenda as well as Goal 5, which specifically focuses on gender equality and women's empowerment.

The goals are deliberately universal and inclusive, explicitly covering "all ages." It is important, however,

that we recognize—and differentiate between—the challenges faced by women at different stages of their lives. Over the first half of the current century, the global population ages 60 years and older is projected to double, reaching 2 billion by 2050. Women will continue to make up a larger share of this population and will outlive men in nearly all countries. In the developed world, women outlive men by a margin of 4 to 10 years; in the developing world, 58 percent of older people are women.



The 2030 Agenda for Sustainable Development lays out a set of ambitious and important global goals that target gender equality and women's empowerment.

Although life expectancy is higher for women, many are unable to enjoy their later years because they struggle to meet their basic needs. A lifetime of inequalities has led to older women experiencing some of the world's lowest literacy rates. Many older women suffer significant health inequities, enjoy fewer human rights, and have less financial security, with fewer savings and assets to support an adequate standard of living in older age.

Gender, aging, and poverty are interrelated. Throughout a woman's lifetime, her socioeconomic status is rooted in a division of labor that assumes her primary involvement in society to be in reproductive labor, unpaid household work, and caregiving. This perpetuates unequal power relations in the home and means that women earn less and save less for their elderly years. The cumulative effects of this disparity across a woman's life render her particularly vulnerable to poverty, discrimination, violence, and marginalization in old age. Globally, only about half of people above the retirement age enjoy access to a pension. In most countries, women are less likely than men to receive one, and where they do, their benefit levels are usually lower than those of their male counterparts. In the United States, female caregivers lose an estimated \$324,000 in wages and Social Security benefits as a result of uncompensated caregiving. Cumulatively, the total estimated aggregate of lost wages, pension, and Social Security benefits for these caregivers is nearly \$3 trillion.¹

This "care burden" is currently one of the most serious restrictions faced by women globally. An estimated 66 percent of caregivers are female, and they spend 50 percent more time providing care than do male

caregivers. In addition, caregiving needs have become multigenerational, meaning that it is not just children but parents who need care later in life. By 2050, the world will have almost 400 million people who are 80 years or older, making it the first time in history that the majority of middle-aged adults will have living parents, according to the World Health Organization.

Uncompensated caregiving activities often restrict women's mobility, educational attainment, and skills development, which in turn limit their employment and earning opportunities. When women actively participate in the labor market, many have no option but to take low-wage jobs, or they are relegated to part-time employment with few benefits and little security.

In addition to these economic inequalities, many political, legal, and health care structures have a detrimental impact on the financial security and well-being of older women. In some countries, inheritance laws and practices discriminate against women, so that daughters inherit half as much as their brothers, and mothers less than their children. Widows can be faced with social exclusion, have no rights, and lack social protection. In societies where a woman's identity and economic worth are seen as inextricably tied to those of her husband, the experience of domestic violence and neglect can continue even once women become widows.

There is a critical need to address violence against older women. Yet, for many developing countries, data on violence against women are measured only for women of reproductive age: 15 to 49 years. This gap in data collection by the Demographic and Health Surveys reinforces the stereotype of women's value being linked to reproductive function. It is therefore important to introduce ways to measure violence beyond this age group in order to ensure that all women are counted and that the appropriate responses are developed.

The number of older persons in need of long-term care is expected to grow significantly in all countries. Studies reveal that, globally, the majority of countries do not provide any long-term care protection. More than 48 percent of the world's population lacks coverage by national health care legislation. Most of these people are older women, which is a particularly concerning fact given that nearly half of women over 75 years of age are living alone.

If not addressed, the feminization of aging has the potential to become one of the biggest challenges to gender equality of this century; therefore, these

issues need targeted action by governments and international organizations.

The first step that can be taken to support older women is recognizing unpaid care work. This means enacting policies to extend social protection, especially social pensions, to everyone who does not qualify for a contributory pension—whether because they have worked in the informal economy or had interrupted histories of paid work as a result of their care obligations. Governments must also support unpaid care work through better public services and investments in basic infrastructure.

We also need social policies designed specifically with rights for women—of all ages—in mind, as well as macroeconomic policies that create stable economies and support the realization of human rights. We need to provide child allowances to support families as well as noncontributory pensions to ensure women's income security in old age.² In the United States, there is a need to realize the vision of the Elder Justice Act, part of the Affordable Care Act, to protect seniors from those seeking to take advantage of them.

We need to amend laws that discriminate against women with regard to property and inheritance rights; create for older women employment opportunities as well as adequate employment benefits; and support paid family care leave. We need to educate health care providers to address the specific needs of elderly women, provide mental health services that target older women, provide long-term care coverage for women, and ensure that we include older women in programs to prevent gender-based violence.

Finally, we need to fully implement the 2030 Agenda for Sustainable Development in order to tackle the root causes that lead to old-age discrimination, through

- Ending extreme poverty;
- Extending social protection to all;
- Ensuring inclusive and equitable quality education;
- Promoting sustainable economic growth;
- Providing full and productive employment for all;
- Making cities and public spaces safe for women; and
- Promoting peaceful and inclusive societies.

The treatment of older women is a priority issue that affects us all and might serve as an indicator of our success in living out the aspirations of the new agenda. The goal and promise of the SDGs are a remarkable opportunity for our global community to work together, recognizing the changing demographics and taking action to create conditions in which all women will thrive. We at UN Women are committed to help create this reality. ●

¹ MetLife, The MetLife Study of Caregiving Costs to Caregivers, (2011), retrieved January 2015 from <http://www.caregiving.org/wp-content/uploads/2011/06/mmi-caregiving-costs-working-caregivers.pdf>

² Progress of the World's Women 2015 – 2016. UN Women - <http://progress.unwomen.org/en/2015/>

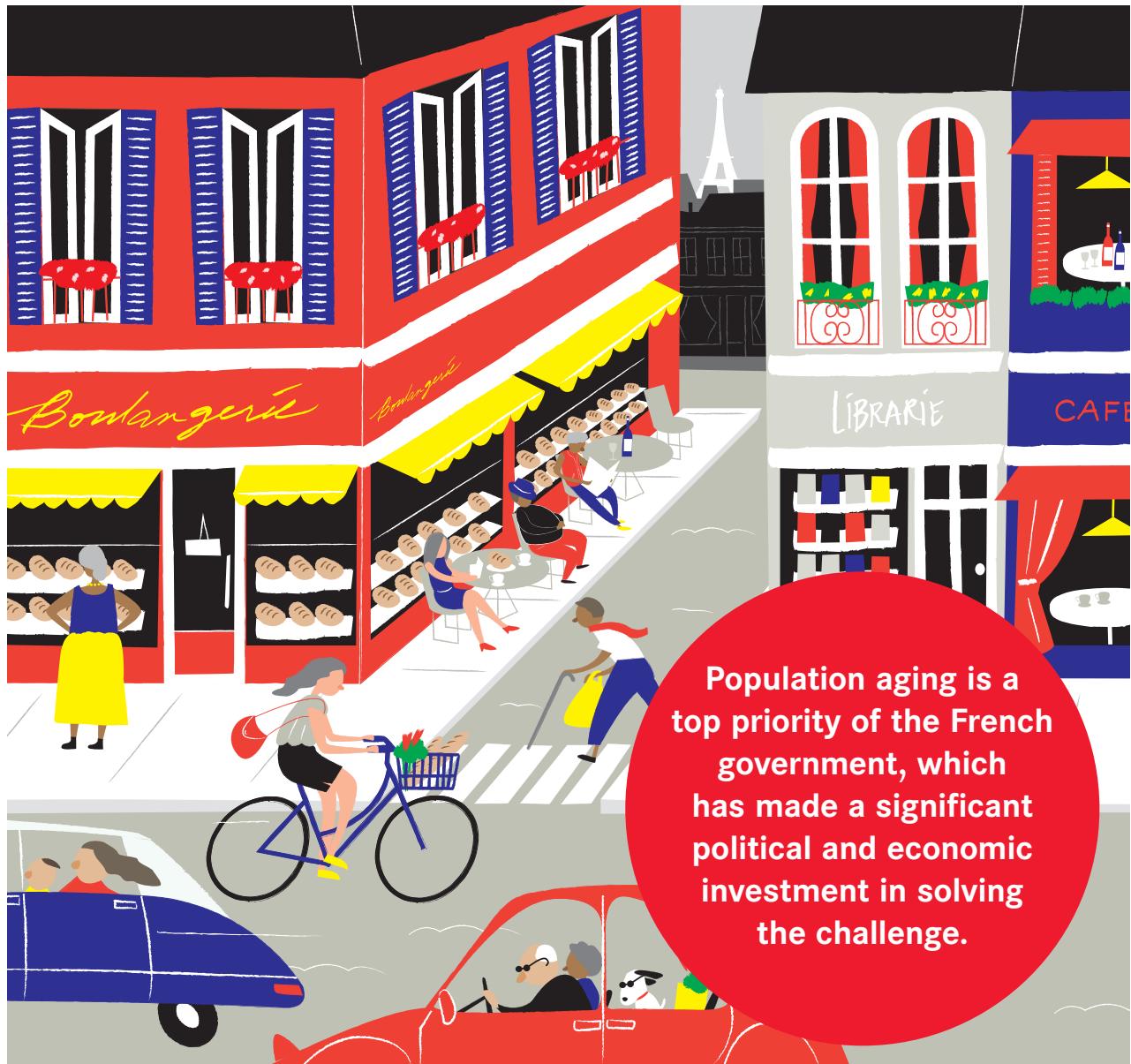


Phumzile Mlambo-Ngcuka

Phumzile Mlambo-Ngcuka is United Nations Under-Secretary-General and Executive Director of UN Women. She was sworn into office on 19 August 2013 and brings a wealth of experience and expertise to this position, having devoted her career to issues of human rights, equality and social justice. Ms. Mlambo-Ngcuka has worked in government and civil society, and with the private sector, and was actively involved in the struggle to end apartheid in her home country of South Africa.

SHIFTING THE AGING PARADIGM

Laurence Rossignol | MINISTER OF STATE FOR FAMILY, CHILDHOOD, ELDERLY PEOPLE AND ADULT CARE, FRANCE



Population aging is a top priority of the French government, which has made a significant political and economic investment in solving the challenge.

An increasing share of the French population is now living longer. In 2020, over a third of the population will be more than 60 years old, and, in 2060, there will be three times as many people who are 85 years old and older as there are now.

Yet France is not an aging society. As the Minister of State for Family, Childhood, Elderly People and Adult Care I would like to stress this important nuance. France is a society that is built, and that continues to build itself, on the basis of a balance of generations. And indeed, the fertility rate in France is the highest in Europe.

Above all, that an increasing share of the population is growing old signals progress. It is the outcome of a society in which the necessary conditions for everyone to live longer are not only created but also strengthened.

Caring for the most fragile of our citizens calls for comprehensive national solidarity. Every year, France devotes more than 21 billion euros to offer appropriate adult care provision.

And, indeed, declining autonomy is a major challenge for our society—particularly for policy makers. If living longer is important, what we ultimately strive for is living longer in good conditions. This means being in good health and enjoying a way of life that is respectful to both human dignity and to an individual's goals. The piece of legislation submitted by the government, regarding society's adaptation to aging, promotes precisely that.

Thus, we act to favor autonomy of elderly people, to enable them to stay active—and this is true even for the most vulnerable of citizens, who likewise need to retain a sense of personal agency. Increased frailty should not entail resignation. I do not mean that we should

"decide for them what to do"; rather, we should "make it possible for them to do, enable them, give them the capacities to do." This is the very basis for a society in which positive treatment is fostered.

Through the legislation mentioned above, the government initiates not only a genuine change in the framework we use to consider aging but also a change in the paradigm, which reflects a strong political commitment. When addressing aging, three main objectives are set: anticipating the decrease of autonomy so as to delay it as much as possible; bringing support to those facing a loss of autonomy; and engaging the whole society into accommodating the changes brought on by aging.

Individuals who are facing such a loss of independence expect to be supported and to have their needs met. Since 2001, the "individualized benefit for autonomy" (allocation personnalisée d'autonomie) helps elderly people ages 60 and older who are suffering from a loss of autonomy to pay for the adult care they receive either at home or in residential care. At a time when most people wish to grow old in their homes, the government has chosen to devote an extra 350 million euros to upgrade this benefit, thereby improving the professional support elderly people receive in their homes.

But we also decided to support informal carers. Indeed, the help brought by families and relatives when providing home-based care, often on a daily basis, is essential. Thus, the legislation will have their status—carer or caregiver—recognized. This is needed, because their strong commitment sometimes has negative impacts on their own health and wellness.

Therefore, carers will be able to enjoy a new right: the right to rest. In practical

terms, this means additional financial help that could pay for, say, a temporary day care center or an increase in the professional home-based care provided.

In this field, the government considers everyone older than 60—not just those facing a decreasing autonomy. Indeed, only 20 percent of 85-year-olds have an identifiable loss of independence. This tells us that losing individual autonomy is not inevitable: we can act to prevent, anticipate, and delay it. We should give ourselves the capacities to do so, by identifying and handling the very first indications of frailty.

In order to best meet multiple and changing needs, we need to favor a lateral and cross-divisional approach that also entails a greater coordination of all the stakeholders involved. This is a real challenge, but it is necessary to build platforms for cooperation and exchange so as to get rid of the existing barriers between the different participants.

Hence, from now on, each territory will host a “conference of the funding partners” (conference des financeurs), which puts together all the stakeholders in charge of preventive actions locally. They will agree on a program of actions whose purpose will be to ensure that each and every elderly person, no matter where he or she may live, can benefit from prevention.

These conferences will rely on the Strategy to Prevent the Loss of Autonomy, which includes pieces of advice for both professionals and the elderly people themselves. Topics vary widely from food, planning of care, housing, and so on.

These conferences will also have credits made available so as to make it easier for elderly people to access assistive technologies for their homes. Indeed,

We chose to engage all stakeholders and public policy makers to build a society adapted to aging, a society in which elderly people are fully included.

sometimes a mere grab-bar in the shower can prevent a fall—and we know that a fall can lead to a decreased autonomy.

We chose to engage all stakeholders and public policy makers to build a society adapted to aging, a society in which elderly people are fully included. Indeed, and because old age should not be a restraint, it is the whole of the culture surrounding elderly people that needs to be rethought.

In order to do this, public mobilization is needed, and elderly people themselves are asked to contribute to the definition of public policies. Locally, elderly people will be able to be members of county committees, thereby contributing to the elaboration of public policies in a wide field of competences: health and social policies, of course, but also housing, transport, culture, and so on.

I aim to open up governance mechanisms of public policies so as to bring different generations to speak to each other. Indeed, different generations often face similar issues: the fight against social isolation, the fight to promote accessibility or to protect informal carers, and so on. Hence, we are setting up at the

Every generation is involved with the challenges brought on by aging and is thus incentivized to act.

national level a “high council” that will allow different individuals from all walks of life (young adults, those in middle age, and elderly people) to exchange between them and to be active contributors to the definition of public policies.

We are engaging with the whole of society in order to find socially innovative answers to the challenges brought on by aging.

Aged care professionals are at the heart of the system, and I strongly support, for instance, the development of services that encompass both home-based care and facility-based care. Indeed, they offer a better quality and clearer support service to the users, they overcome isolation from which professional carers suffer, and they enable managers to run their organizations more efficiently. Actors from the “silver economy sector” are also fully engaged in the change of framework described earlier. The aging of individuals entails an evolution of uses and customs, which, in turn, leads to a boost in innovation. The government is therefore proactive in trying to develop the silver economy sector—particularly as it is a source for both improved quality of life for elderly people and creation of jobs for everyone.

Finally, every generation is involved with the challenges brought on by aging and is thus incentivized

to act—and to develop new policies. Social isolation has been identified as a determining factor in the process behind declining autonomy. Hence, we support the development of a national mobilization against the isolation of elderly people. This initiative is composed of intergenerational teams that meet with elderly people, particularly those who live in remote areas. Beyond its direct preventive impacts, this action is crucial to enable each and every one of us to feel responsible for the well-being of others.

Population aging is a priority of this government, which works so that France lives up to the challenge. The budgetary context is tight, and yet this government has made a strong and important political choice with 650 million euros devoted to our society’s adaption to aging. The legislation carrying this aim, which was postponed for many years, marks a significant milestone in the collective commitment to meet the needs of those facing a loss of autonomy. I am sure that it will result in improving the daily lives of our older counterparts. ●



Laurence Rossignol

Laurence Rossignol was appointed Minister of State for Family, Childhood, Elderly People and Adult Care in June 2015. In April 2014 she was nominated by the Prime Minister Manuel Valls to be part of his government. She has been fighting since to reform policies designed for the elderly people in France, and a new piece of legislation on the matter she introduced at the National Assembly has just been enacted.

THE NONPROFIT SECTOR IN AN AGING WORLD

Tom Wright | GROUP CEO, AGE UK



The nonprofit sector is uniquely poised to contribute its experience and expertise to influence major international policy to improve the lives of aging people.

We are seeing a clear increase in longevity across the globe, with life expectancy at age 60 increasing, particularly in high-income countries. By 2050, in every region except Africa, a quarter or more of the population will be ages 60 and older. According to the United Nations, around the world generally, higher numbers of older people are a certainty in the short to medium term.

While this information is great news, it presents challenges. For example, we are increasingly surviving

infectious diseases, but we are living longer with long-term chronic conditions (or noncommunicable diseases). This does not have to be the case, however. With better diet, more exercise, and a reduction in smoking and alcohol consumption, the risk factors for many chronic conditions can be substantially reduced. This is true for dementia and cognitive decline too, and it is why Age UK and Age International (Age UK's international arm) have joined forces with AARP as founding members of the Global Council on Brain Health ("Council"). We intend that the Council will provide expert but accessible public information around perhaps the biggest frontier of health: brain health.

The UK is no stranger to the present trend of living longer with related challenges. One in five people is already over age 60, and that cohort is set to increase from 14.9 million in 2014 to 18.5 million in 2025. The media often portrays this growth as a "crisis" and older people as a "burden" on society. But the truth is that an aging population can be a great benefit—provided the right policies are in place.

In the UK, older households spend £145 billion a year, and among older people there is considerable resilience and a spirit of independence. Older people also contribute significantly to society. They are valued members of their communities and account for many of our volunteers and caregivers.



The impact of a degree of austerity on public services in the UK means that older people are increasingly being left to rely on their own resources without the information and support they need. Nonprofit organizations, such as Age UK, play a vital role in filling these gaps and in maximizing the opportunities that an aging society brings.

Like many other nonprofits, one of our core purposes at Age UK is giving an effective voice to the people we represent and work for, campaigning and influencing on their behalf with local, regional, and national decision makers. We provide a wide array of services, both independently and in partnership with public services, giving a voice to the excluded; fostering capacity, agility, and flexibility; joining up services around the needs of the individual; and leveraging the contribution of volunteers.

A service we are very proud of at Age UK is our information and advice. We offer support and guidance on age related issues through Age UK's free national phone service, its website, extensive range of guides and face-to-face through

local Age UK partners. At a time when public services are stretched or simply nonexistent, access to good, trustworthy provision of this kind is more important than ever to older people and their families, and demand for it is increasing.

The fact that nonprofits start with the people they exist to serve—reflecting their voices and needs—is crucial. Many governments have recognized this and espouse a policy of “co-production of services.” To achieve the best outcomes, nonprofit organizations must be included as equal partners from the outset and given an opportunity to shape the agenda. Involving nonprofits in service delivery isn’t about making a service cost-free; it is about doing things better, not necessarily cheaper.

Another area where nonprofits play a vital role is in scaling up innovation. This is where networks such as Age UK's can come into their own—providing a test bed for innovation, supporting the smaller organizations in their networks and projecting their voices, highlighting best practices, and reproducing successful pilots.

A good example is Age UK's integrated health and care model, which health and social care partnerships are currently piloting in areas across the country. The model brings together clinical commissioning groups—the physician-led groups responsible for planning and designing local health services, local government, acute and community health providers—with local Age UKs. They work together and develop a joint vision to improve outcomes for older people, and they save money in the health and social care system, primarily by reducing avoidable unplanned hospital admissions. The model was originally piloted in Cornwall, England, and has so far achieved a 34 percent reduction in non-elective admissions, a 20 percent increase in well-being for older people, and an 8 percent reduction in the use of social care.

Community is important to many older people, and nonprofits can help enable social action through establishing and supporting local groups and forums that give members a powerful voice. Nonprofits also benefit greatly from

There continues to be a gap between what is provided and what older people say is right for them, and nonprofits are well placed to bridge this gap.

the willingness of older people to volunteer and make an active contribution to civic and community life. When older people engage in this way, it often improves their physical and mental health. In addition, volunteering helps combat loneliness and brings communities together.

Since 2012, Age International and Age UK have partnered with the World Health Organization (WHO) to develop and pilot a knowledge translation framework on aging and health. The framework identifies key health issues from data and policy reviews, site visits, and interviews. The results are then compared with evidence from other health interventions, with the aim of identifying recommendations for policy and practice. This model was piloted in Ghana in 2013 and in China in 2014–15. Country assessment reports were then produced for each project and meetings held between government officials, academics, and international experts, including WHO, Age UK, and Age International. These meetings provided valuable opportunities to discuss how to promote healthy aging, integrate health and care, and develop new ways to address long-term care needs.

This collaboration is an example of how the nonprofit sector can contribute its own and its networks' experience and expertise to major

international policy development and, in the process, learn lessons for the United Kingdom from very different contexts.

Finally, in terms of aging, nonprofits also have a role in addressing, through social enterprise, product and service gaps in the market. Age UK has more than one million customers, and we are proud of the products and services we offer because they are tailored to the needs of older people. We believe that older people should be able to obtain products that suit their needs throughout their later lives. Although private-sector providers are focusing on older people now more than ever before, this market is still largely overlooked in the United Kingdom. There continues to be a gap between what is provided and what older people say is right for them, and nonprofits are well placed to bridge this gap.

Longevity is to be celebrated, but we are living longer with long-term conditions and not necessarily with the health or financial security we would like. Through providing a voice, information, advice, support, services, and innovation, and—crucially—by working with public services, the nonprofit sector has a hugely important role, both in meeting the challenges and in leveraging the opportunities of global aging. ●



Tom Wright CBE

Tom Wright is Group Chief Executive of Age UK, the leading charity and social enterprise supporting people in later life. Tom also chairs the Richmond Group, a coalition of leading health charities, is Chair of the Fuel Poverty Advisory Group within the Department of Energy and Climate Change, and a Trustee of Go ON UK, the digital skills charity.

AARP ON THE SCENE

"Global demographics will look very different in coming decades – those that prepare will have a competitive advantage."

Josh Collett

VICE-PRESIDENT FOR INTERNATIONAL AFFAIRS, AARP
IDEAGEN EU LEADERSHIP 2030 SUMMIT IN NEW YORK



1 2015 AARP-UN Briefing Series on Global Aging speakers (l-r) Debra B. Whitman, Chief Public Policy Officer, AARP; Lloyd Russell-Moyle, Deputy Organising Partner, UN Major Group Children and Youth; Kathy Greenlee, Administrator and Assistant Secretary for Aging, Administration for Community Living (ACL), U.S. Department of Health and Human Services; Magdy Martinez-Solimán, Assistant Secretary-General, Assistant Administrator and Director, Bureau for Policy and Programme Support, United Nations Development Programme; Myrna Blyth, Senior VP and Editorial Director, AARP; H.E. Macharia Kamau, Ambassador, Permanent Representative Republic of Kenya to the UN; Jeannine English, President, AARP; Melanne Verveer, Executive Director, Institute for Women, Peace and Security at Georgetown University; Josh Collett, Vice President for International Affairs, AARP; Rosemary Lane, Senior Social Affairs Officer, Focal Point on Ageing, Division for Social Policy and Development, UN Department of Economic and Social Affairs

2 Myrna Blyth, Editorial Director, AARP Media at the OECD Forum panel on "Pensions – Are we saving enough for our future?" June 2015, Paris, France.

3 Debra Whitman (right) AARP's Chief Public Policy Officer joins 2015 Global Thinker Panelists to address Bridging the Demographic Divide during Foreign Policy's annual Transformational Trends day program. December 2015, Washington, D.C.





4 2015 International Day of Older Persons speakers (l-r) Debra B. Whitman, Chief Public Policy Officer, AARP, Muhammad Yunus, Founder, Grameen Bank; Laureate, Nobel Peace Prize; Kathy Greenlee, Assistant Secretary for Aging; Administrator for Community Living, U.S. Department of Health and Human Services; Catherine Russell, Ambassador-at-Large for Global Women's Issues, U.S. Department of State; Washington, DC, October 2015



5 Bradley Schurman, Senior Advisor from AARP, moderates session exploring innovative caregiving models from On Lok (US), Age UK (UK), and Taiwan during Aging Innovation Week, October 2015, Taipei, Taiwan

6 Josh Collett speaks at the 2015 Ideagen EU Leadership 2030 Summit in New York, along with Megan Bettilyon, PMP, Senior Manager of Planning and Operations, Global Good

7 Sarah Lenz Lock, Senior VP for Policy AARP at Dementia Forum X, May 2015, Stockholm, Sweden



AARP International @AARPIntl • 1 Dec 2015

To solve the world's problems, we need everyone to play a role, including the young and the old. #ttrends15 #aging #youth @DebAARP

 **JoAnn Jenkins @JoAnn_Jenkins • 27 Apr 2015**

Sharing the stage w/ impressive panelists at #MIGlobal, discussing a Legacy of Purpose for Longer Lives #DisruptAging

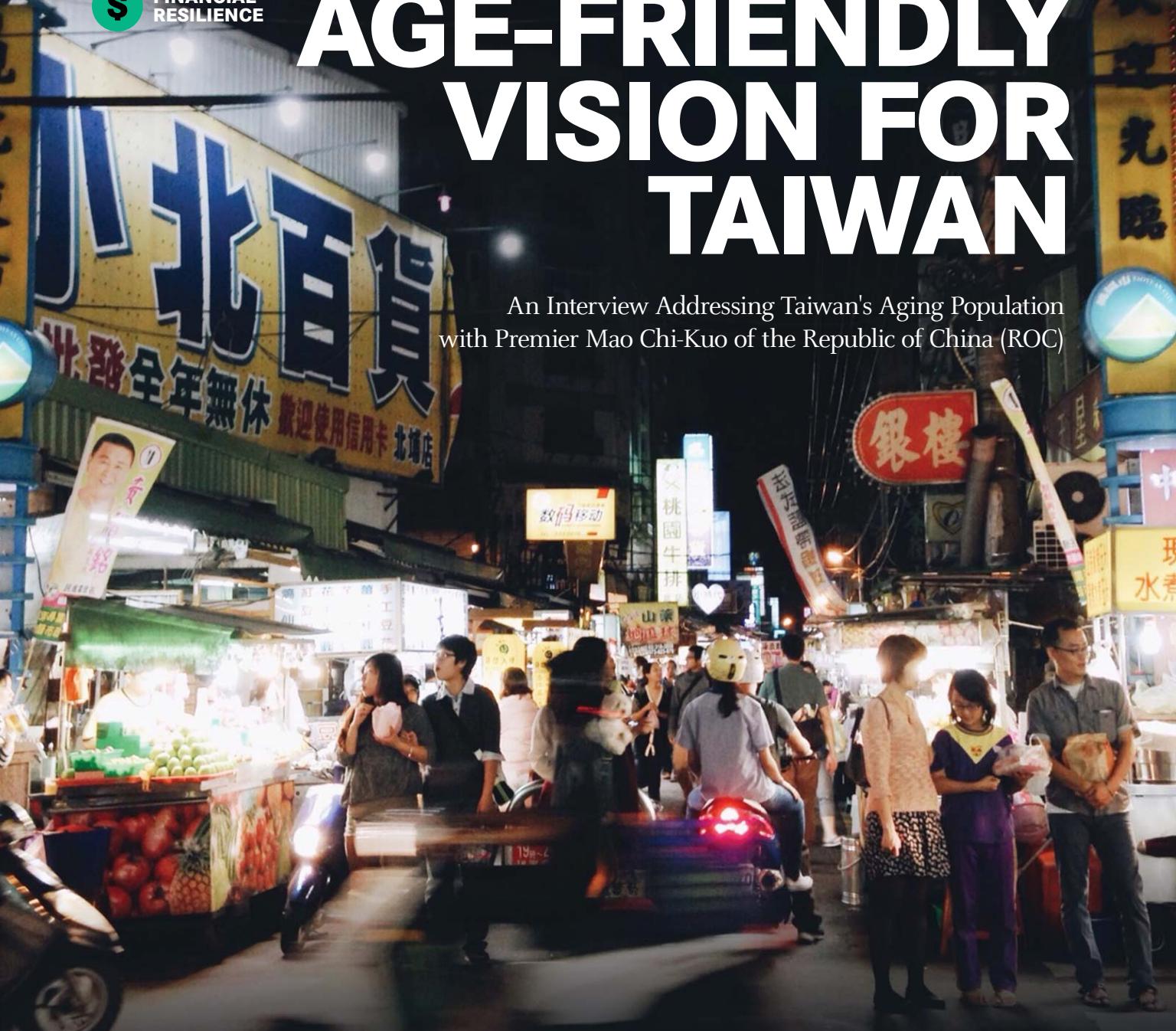




FINANCIAL
RESILIENCE

AGE-FRIENDLY VISION FOR TAIWAN

An Interview Addressing Taiwan's Aging Population
with Premier Mao Chi-Kuo of the Republic of China (ROC)



Taiwan has taken aggressive and innovative steps to tap the opportunities of an aging society, as well as address the challenges presented by demographic change.

Leaders in the government have done this through various forms of research and legislation over the past year that will continue well into 2016 and the future. Leaders in the private-sector — both private non-profit and for-profit — have supported or invested in new models that will help people live

longer, independent and successful lives. In October 2015, AARP's Bradley Schurman had the opportunity to sit down with one of the architects of the new Taiwan, Premier Mao Chi-kuo, during a visit to the island nation. The following is an excerpt from our conversation at the Executive Yuan.



Taiwan is one of the fastest-aging countries in the world. Could you talk about the Taiwan government's approach to address the challenges emerging from this aging society?

We have introduced three fundamental systems to support Taiwan's aging society.

1. White Paper on Aging Society: Taiwan will become a "super-age" society by 2025, meaning that one in five individuals will be 65 years old. The White Paper on Aging Society will shape the development of policies so that our citizens are healthy and happy, and engaging in an age-friendly environment.

2. Programs to transform the long-term services and support system:

- Develop a long-term care workforce.
- Launch a long-term services network.
- Accelerate the integration of the long-term care system.
- Further the integration and application of the IT system.
- Support the development of innovative and integrated care.
- Set up a working committee in preparation of the launch of the long-term care insurance bill.

3. Long-term care insurance bill: The long-term care insurance bill was drafted and sent to the Legislative Yuan(Branch) in June 2015. The Executive Yuan anticipates that the passage of this bill will create a social insurance system to support the delivery of diverse long-term services, to ease the burden of family members caring for their elders and disabled, and to ensure the quality of long-term care.

Could you share why the government is preparing to issue the White Paper on Aging Society as well as your vision for and anticipated outcomes of its release?

To address the issues emerging from the aging society, the government has taken several measures in the past. In May 2015, the Long-term Care Services Act was passed, and the draft of the long-term care insurance bill was sent to the Legislative Yuan in June 2015. Executive Yuan formally issued the White Paper on Aging Society in October 2015, and the paper will provide a policy framework for developing quality care for the disabled and the elderly.

In 2014, Executive Yuan began to compile the White Paper and invited leaders from government, academia, social welfare, health care organizations, and corporations to participate in open discussions to develop the framework of the White Paper. Our vision is that people of all ages are healthy and happy, and engaging in an age-friendly environment. Specifically, the paper outlines four goals we would like to accomplish through various government programs:

1. Health: Increase healthy life expectancy and reduce disability.
2. Happiness: Caring for seniors won't become a burden to the family.
3. Vitality: Increase social participation of seniors and elevate their self-esteem.
4. Friendliness: Build an age-friendly environment to ensure quality of life.

Over the past year, I spent much time visiting various senior care organizations across Taiwan, and I am most impressed by the support network each community

has built to allow for aging in place. In Taiwan, we have approximately 2,400 community care stations to offer health promotion, meals, companionship services, and so on. It is my hope that community would be at the core of the service network to ensure aging in place. The seniors—whether healthy or disabled—could remain in the community and receive diverse services via community care stations, day-care centers, and so on. I truly believe a community-based service network would be a critical foundation to meet the challenges of an aging society.

The labor-force participation rate for older workers is relatively low in Taiwan compared with other countries. Could you share your strategy and give us some examples of how you would like to increase labor-force participation for older adults?

In the past, “older person” was defined by chronological age. Today we need a different perspective of aging, especially in the area of social participation and employment. I think there are a few areas where government could play a role:

1. Establish new role models and values.
2. Create incentives for corporations to hire older workers.
3. Review and modify current policies and regulations to increase labor-force participation of older adults.

Taiwan is home to many large technology firms. Could you share your thoughts on building smart cities and how Taiwan could leverage its technological advancements to support aging in place and enable seniors to remain active in the community?

This year, Executive Yuan released the Smart Internet White Paper, and I believe the use of technology supports aging in place. Taiwan should leverage its strengths in Information and Communications Technology, and there are areas where the government should focus moving forward:

1. Application of big data to support health promotion and aging in place: Taiwan has a national health insurance program, and we have collected comprehensive data sets. A thorough analysis of such data sets will help identify key areas on which to focus in order to support aging in place and health promotion.
2. Use of technology to help the development of industry focused on aging: Improving effectiveness would decrease the costs of delivery of elderly care services. We would support the adoption of technology, such as telehealth communication technologies, to facilitate effective delivery of services for the aging. ●



Mao Chi-kuo

Mao Chi-kuo is the current Premier of the Republic of China (ROC). Before entering politics, he pursued an academic career. He held various government posts before becoming Minister of Transportation and Communications in 2008.



JOB FOR KOREAN BOOMERS

Henry Kim | CHIEF OPERATING OFFICER, SENIOR PARTNERS INC

"You think the office is like a battlefield? Don't ever quit until they force you, because it's much worse outside."

The line above relates a common problem that Korean baby boomers face. It comes from a popular soap opera *Misaeng*, which showed the joys and sorrows of an average office worker. The story was originally written as a web-based serial cartoon, but as it became more and more popular, it was eventually made into a soap opera in 2014. (It was so successful that its sequel will be produced in the near future.) To further expound on the quote above, it means that maintaining your position at work is as dangerous as surviving a war, but starting something on your own, outside the office, often leads to failure.

That's right. The boomers in Korea are in a desperately dangerous situation where they must choose between a "battlefield" or "hell."

Since the Korean War ended in a truce in 1953, Korea generally has been about eight years behind the path that the global world took. Those who were born between the years 1955 and 1963 are called baby boomers (7.2 million).

The time has come when the boomers will exit the workforce all at once. The eldest of the boomers (born in 1955) retired in 2010 at the regular retirement age of 55. Since the 1960s, Korean seniors have been very grateful to be retiring at the age of 55, as active longevity was the key factor in deciding the retirement age. Corporations

The boomers in Korea are in a desperately dangerous situation where they must choose between a "battlefield" or "hell."

thought that retaining workers while they were healthy saved medical costs and improved productivity; however, even as individuals' active longevity extended, the retirement age stayed the same. This discrepancy has been going on for 50 years. The government passed a new law that, depending on the size of the workplace, the retirement age would be extended in stages from 55 years old to 60 years old, starting 2016. Yet a study conducted by a private enterprise shows that the actual retirement age is at 52 years, which is well below the official retirement age. The workers are practically being forced out, and this is why it is said that working until the retirement age is at least as difficult as surviving

KEY ANTICIPATED DEMOGRAPHIC CHANGES IN KOREA BY 2017

1. The number of people actively contributing to the economy will start to decrease for the first time ever

2. Seniors (aged 65+) will start to outnumber children (aged 14 and under) for the first time ever

3. Korea will become an Aged Society: Seniors (people aged 65+) will grow to 14% of the total population

a war. Furthermore, the boomers can't take the deep humiliation from being forced to step down from the monumental work that led the miraculous economic growth of the nation decades ago.

If you can choose to leave, why wouldn't you escape from the "battlefield"? Because what awaits is "hell."

If an employee does not find another job upon retiring, starting a new business is another way to make a living. Sadly, this alternative is also associated with bad images like "hell." According to the data collected by Global Entrepreneurship Monitor (GEM), among the start-ups that are 42 months or less old, 36.5 percent were created to make the least living and 51.1 percent were to increase the income level ("opportunity pursuit"). While such "opportunity pursuit" cases may seem to account for many more start-ups, those "making a living" cases are significantly higher in Korea than in developed countries. The average proportion of the "make a living" start-ups of the 26 innovation-driven economies selected by GEM was 18.2 percent.

Confronted with a lack of good-quality jobs and a social safety net, boomers who are pushed out of their workplace have no choice but to start low value-added service businesses. There won't be any problem if boomers can sustain these start-ups, but according to the Small and Medium Business Administration, the survival rate of the lodging/restaurant business (the most popular type of start-up) after 5 years is only 17.7 percent. No wonder people call it "hell" outside the "battlefield."

"Dear Captain of Titanic, steamships heading west are reporting icebergs, blocks of ice, and an ice field at 42 degrees north latitude and 49 to

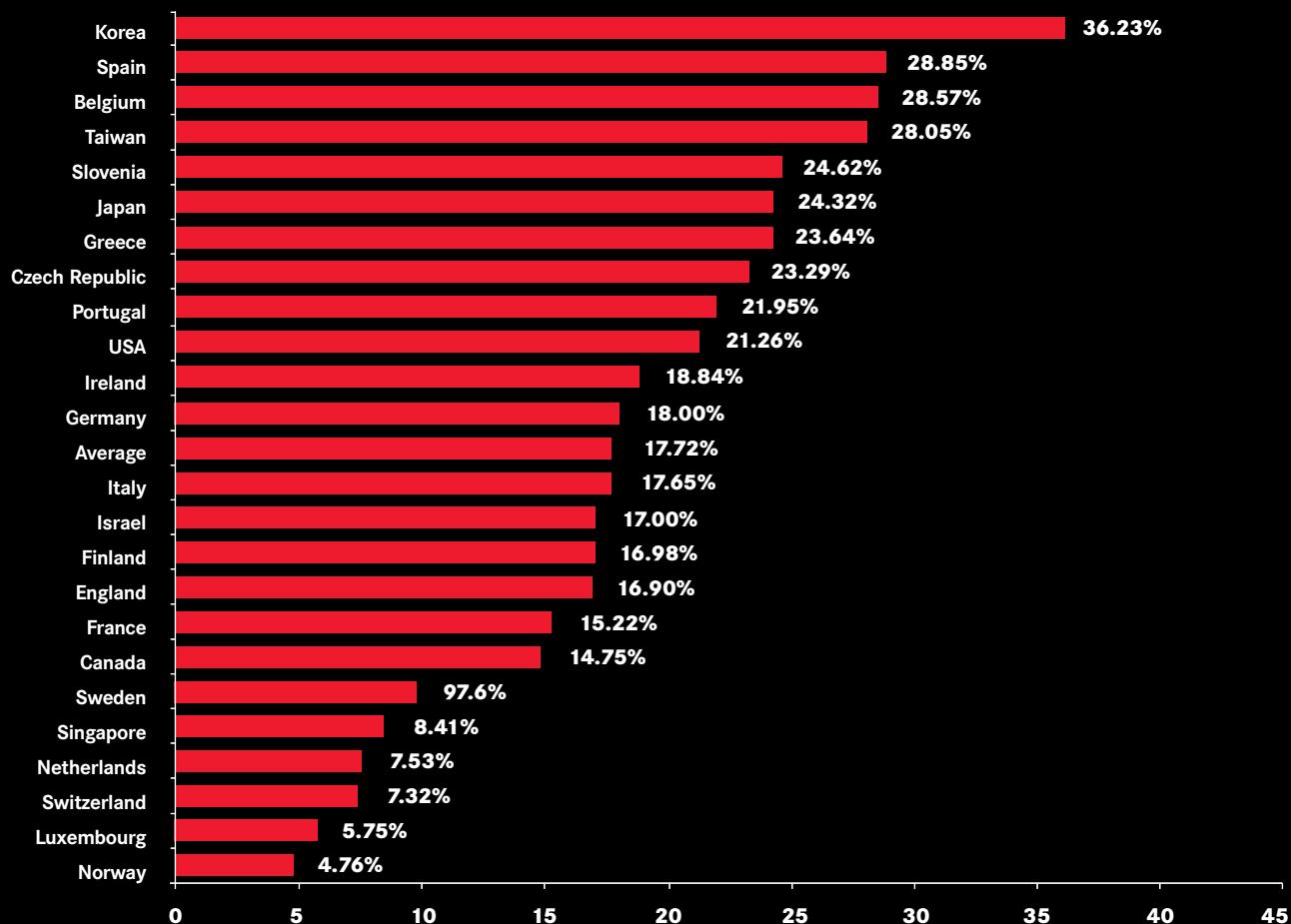
51 degrees west longitude," wrote the captain of the Caronia to the Titanic in 1912. Although the Titanic disregarded such serious warning about icebergs, this urgent situation was not completely unpredictable. The stewards said, "Not even God himself could sink this ship" and assured everyone that the Titanic would never sink, but it did.

Korea can project highly reliable future forecasts through the "demographical map," and this map boasts a warning sign that says, "Look out for the year 2017 and be prepared!" A big change is about to take place in stages. First, economically active people will start to decrease; this group has been increasing ever since the beginning of official demographic statistics. Second, people who are 65 years old and older will outnumber those who are 14 years and younger for the first time. Third, Korea will enter an "aged society" status, which means that people who are 65 and older will account for more than 14 percent of the total population.

The whole world seems to be in the midst of a similar situation with regard to aging, but this unavoidable situation appears to be happening more rapidly in Korea. What's notable is that even though aging began relatively late in Korea, it is making the fastest progress in the world. If the Olympics were to have aging as sport, Korea would undoubtedly win gold medals until 2035. Thus, Korea is expected to experience a considerable change in the future. Taking a cue from how the Titanic ignored Caronia's telegram, Korea should comprehensively prepare for the foreseeable future.

One of the main reasons for the ongoing recession of the world

**FIGURE 1. PERCENTAGE OF START-UPS CREATED
IN ORDER TO MAKE A LIVING (AS OF 2013)**



**FIGURE 2. SURVIVAL RATE OF START-UPS
BY INDUSTRY (AS OF 2012)**

Industry	Year One	Year Two	Year Three	Year Four	Year Five
Wholesale/Retail	55.3%	41.7%	34.3%	29.3%	25.6
Lodging/Restaurant	55.0%	37.5%	27.2%	21.9%	17.7%
Book/Media/ Information	61.8%	46.0%	35.1%	29.0%	27.1%
Education/Service	57.7%	42.3%	34.7%	29.4%	25.4%
Art/Sport/Leisure	55.3%	37.1%	24.5%	18.2%	14.7%

Confronted with aging, older workers should be able to pass down their know-how to younger generations; dream and prepare for a hopeful retired life; and add more value to the workplace by more deep-rooted loyalty to the employers.

economy is the decrease in what is called “effective demand.” When the core labor force leaves the workplace, a sharp decline in productivity and a weakening of consumers’ purchasing power take place simultaneously. And a decrease in job opportunities—due to economic downturn—leads to an inevitable struggle between the older generation who are still at the workplace and the younger generation who are trying to enter the labor market.

Korean boomers clearly understand the current situation. They do not want to retire and wish to continue working beyond the general retirement age. The words that best describe them are “Neveretiree,” “amortality” (living agelessly), and “dystopic” (not optimistic about future). The philosophy they have about “career” is also concrete. To boomers, career means “existence” (I am alive), “value” (I am of use), “life” (I live by the time/hour), and “survival” (what I do helps make a living).

Is there any solution to resolve this unfortunate condition, where Korean boomers cannot work even though they want to? It is true that this condition is way too broad and complicated to be handled with

just a few individuals’ wisdom or insight. But we should neither give up nor simply try to avoid it. With limited knowledge and experience, and based on personal experience in the senior industry since 2007, I would like to humbly suggest the following recommendations.

First, decent jobs for Neveretirees should be provided. When private corporations cooperate with the government, solutions will be found. But if the boomer problems are left to be solved by politics alone, then there is a risk that impractical performance measures will be forced on the situation and no problems will be solved. Thus, it is necessary to have the boomers get involved with developing senior-related policies in the first place.

Second, education for “life modeling” is seriously needed. While the boomers have been thoroughly trained to contribute to others (workplace, public, etc.), they never had a chance to really think about their own futures. Systematic and sustainable education—which gives more meaning to life, opportunities to find suitable jobs that fit the purpose of life, and chances for self-improvement—are needed most.

Although it is important to recognize successful stories of few retirees, it is also essential to have more general and objective evaluation and recovering time for all. It may make more sense to establish a solid foundation for the boomers to pave their own way rather than recklessly expanding personalized services to meet various individual needs.

Third, globally widespread “age management” should be correctly implemented. Confronted with aging, older workers should be able to pass down their know-how to younger generations; dream and prepare for a hopeful retired life; and add more value to the workplace by more deep-rooted loyalty to the employers. Through this model, new jobs that embrace the boomers’ knowledge and experience will be created. And it will spur cooperation of different generations instead of competition.

However, this does not mean that all economic agents sit idly and act passively. Some are making very active problem-solving efforts and consequently getting remarkable results. One key example is the establishment of “Encore School Instructors” and “Golden Year

Planners” who are trained by Senior Partners Inc., a senior training specialized company.

While brainstorming programs for preliminary retirees, Senior Partners Inc. came to agree that such programs would make more sense to be taught by retired seniors with sufficient knowledge and experience. So, we began to train senior instructors through the “Encore School Instructor” training program. These senior instructors already had enough experience, but they needed more sophisticated information and training programs to deliver their lifelong accumulated know-how more effectively to help preliminary retirees redesign the postretirement life. The total number of the 128 senior instructors consists of “Encore School Instructors,” who guide through life remodeling; “Restart Instructors,” who advise in more depth on adapting to a new lifestyle after returning to farm/home; “Life Journal Instructors,” who help write and publish autobiographies; and “Employment Course Instructors”, who not only help write resumes and cover letters but also hold mock interviews. These senior instructors gave 1,525 hours of lecture last year, and 1,797 hours as of September this year.

The “Golden Year Planner” is another example of how the Korean government is creating brand-new jobs to increase job opportunities for

seniors. These planners are experts who provide information and consulting services to seniors on emotion, health, finance, career planning, and death to help seniors map out their golden years. Senior Partners Inc., a government-prequalified instructor, gave 492 hours of training to train 29 planners, who are playing pivotal roles in pioneering new jobs.

While such results are inspiring and heading in the right direction, we cannot deny that these opportunities are given only to a limited amount of people, and they need to be spread more publicly.

The boomers in Korea achieved a miracle like no others have, and they are faced with an unprecedented challenge that no one has ever experienced. But these are people who unbelievably created a new era of prosperity after a devastating colonial time and a burning fire of the war, so I strongly believe that the boomers will solidly overcome this present challenge. And because we are a part of this global world, I dearly hope that everyone will cheer for the Korean boomers. And I wish that wise solutions will be shared among one another so that we all may grow and prosper together. ●



Henry Kim

Henry Kim is the Chief Operating Officer of Senior Partners Inc., an expert in life-long learning, working to enhance the quality of life of the Korean seniors. He graduated from Yonsei University in 1985, majoring in economics, and started his career in major securities firms (Daewoo and Kyobo) as a marketing manager, an online business manager, and a marketing strategies director. He joined Senior Partners in 2007, and has been actively making the difference in seniors' lives.



FINANCIAL
RESILIENCE

RETIREMENT CAREERS FOR WOMEN

Catherine Earl | RESEARCH FELLOW, FEDERATION UNIVERSITY, AUSTRALIA



PHOTO:ISTOCK BY GETTY IMAGES

The deficit of quality part-time jobs for skilled older workers is a significant deterrent for extending working lives in line with current public policy.

A current policy objective across aging nations is the promotion of “active aging.” This recognizes valuable later-life contributions made by older persons. However, as noted by Alan Walker, it involves participation and well-being across the life course but is primarily focused on employment.¹ This narrowness potentially clouds how educated professional women who are over age 50 experience leisure in post-work life.

Certainly, retired school teachers and university lecturers express a work-oriented identity, labeling themselves as “career women” and describing their careers as continuous like a man’s, even when they took breaks for childbirth, caring, or sabbatical.

Interviews with these professional women reveal that they do not suffer in making retirement transitions; rather, they flourish. They do so by applying a self-managing career development approach to post-work activities, such as volunteering, unpaid caring, and household labor, and sometimes paid work.

Their activities offer personal fulfillment and a way to maintain

skills and competencies. These reflect systematic and purposeful pursuits of a “serious leisure” career, as outlined by Robert Stebbins, that derive feelings of dignity and self-worth; personal, intrinsic, and physical rewards; specific knowledge and skills development; and comradeship, sociability, and friendship.²

Retirement as a self-managed career offers professional women freedom to decide what to do and how to do it, which paid working did not allow due to restructuring, increasing demands, added evening and weekend work, or less predictability. For these women, retirement is “a relief” and “a new life.”

Anabel’s story draws attention to the abruptness of retirement transitions for professional women. Although she expected to “ease” herself into retirement, she did not: Anabel stopped work completely. Initially, she had searched for paid work, but, despite being a skilled professional with recent workforce experience, she found no suitable employment. She says, “I thought that my skills and my experience would, you know, not be in demand, but would be valuable, would be

valued by others, but I don’t think that they are.”

The deficit of quality part-time jobs for skilled older workers is a significant deterrent for extending working lives in line with current public policy.

Other significant deterrents center on health management and caring responsibilities. Rowena’s story highlights that health prevention, health management, and caring for family are among the most important issues affecting how retired professional women use time.

After choosing to “consciously withdraw” from employment, Rowena faced putting things for herself “on hold” to care for her acutely ill partner. She substituted caring for him and her own chronic health condition for “the buzz” of working. Coping with health is part of the suite of purposeful activities in a retirement career. She says, “It didn’t stop me...I have to take those impediments in my stride.”

Jane’s story reminds us that retirement is a dynamic process and that interests evolve. Jane experienced an abrupt and unexpectedly premature exit from the full-time

position where she had worked continuously for 34 years, to care full time for her mother who suffered from Alzheimer's. After 3 years, Jane's mother became violent and went into professional care. Jane faced the challenge of a late-career job search, then a transition from that encore career into volunteering. She recently decided to quit unpaid working. She says, "I've become sort of just happy being at home and, you know, having coffee and lunch and things like that. I don't feel the need to—what's the word?—sort of validate my existence by doing all this community work."

Unlike other professional women who experienced an abrupt work-to-retirement transition, Jane's late-career changes were more blurred, involving transitions from one purposeful pursuit to another.

Current interpretations of active aging focused on paid work are too narrow and should be broadened beyond extended labor force participation to recognize various productive activities, including unpaid care, volunteering, and personal health prevention strategies.

As things stand, paid work is not an attractive option for retired professional women. Many do not expect to work; if they are relatively financially secure, they do not need to continue working. Yet their ongoing engagement and participation confirms that if they wished to work, they would be able to do so.

It is noteworthy that these highly educated and skillful professionals do not actively continue in

paid employment, leaving a potential pool of labor that is not being accessed by employers.

Although it is assumed that older workers desire flexibility in reduced or nonstandard working hours, professional women indicate a preference for autonomy and greater control over decision making. The availability of quality jobs for older workers may meet their needs.

Thus, policy makers must respond to challenges presented by the working-longer imperative in terms of specific groups of older workers' expectations for post-work life. Measures may include promoting structured programs aimed to utilize retirees' skills and funding coaches to support people managing retirement careers. ●

¹ Alan Walker, "Commentary: The Emergence and Application of Active Aging in Europe," *Journal of Aging and Social Policy* 21, no. 1 (2009): 85.

² Robert Stebbins, "Serious Leisure and Well-Being," in *Work, Leisure and Well-Being*, edited by J. T. Haworth (London: Routledge, 1997), 119.

Acknowledgment

This research is part of a large project, "Retiring Women: Understanding Older Female Work-Life Transitions," funded by the Australian Research Council and three industry partners. The research team administered a large survey in 2013 and 2014 to older women (over age 50) in the public sector ($n = 1189$) and the university sector ($n = 1287$), and carried out follow-up semistructured telephone interviews in 2014 with 12 older women who identified in the survey as not being in paid employment and not looking for work—that is, they are fully retired. The survey was analyzed using SPSS and the interviews using Nvivo. An earlier version of the paper was presented at IAGG2015 Chiang Mai, Thailand, October 19, 2015.



Catherine Earl, PhD

Catherine Earl, PhD, is a social anthropologist who researches transformations of work and welfare, gender and social change, and the rise of Asian middle classes. She is a research fellow at Federation Business School, Federation University Australia.

AARP and Age UK Collaborate on Age-Friendly Banking



AARP and Age UK have teamed up to improve banking practices for older people. The transatlantic collaboration is working to identify the major concerns among older people in terms of the financial services sector—and the best practices being utilized to address their needs and wants.

Older people report a range of challenges using banking and payment systems. Physical limitations and unfamiliarity with technology can make banking difficult. The term “age-friendly banking” means banking services that are accessible to individuals as they age.

The rapidly growing aging population is putting pressure on banks to make their services age friendly. Older people compose a significant percentage of bank clients, so banks have much to gain from improved accessibility to their services. Banks can expect to benefit from the competitive advantage an age-friendly reputation bestows. One of the insights of age-friendly

banking is that if a bank can provide good service for its older or vulnerable customers, then it can provide excellent service for all.

The banks whose age-friendly designs are featured in our joint report have received a positive and enthusiastic customer reception for their service innovations. Customers appreciate being understood and treated as individuals.

Banks that are early adopters of age-friendly design will achieve a competitive advantage. In the longer term, the banking industry as a whole will see its reputation improve.

AARP and Age UK’s joint report highlights case studies from their research on fighting fraud and financial exploitation, enabling caregivers and creating an age-accessible culture.

*Bradley Schurman
Senior Advisor, AARP International*

*David Steele
Policy Adviser Financial Services, Age UK*



The full report can be found online at:
[www.aarpinternational.org/
agefriendlybanking](http://www.aarpinternational.org/agefriendlybanking)



HEALTH
SECURITY

A LEGACY OF CARE

An Interview with H.M. Queen Silvia of Sweden on
Improving the Quality of Life for Dementia Patients



PHOTO: ROSIE ALM, THE ROYAL COURT



1 H.M. Queen Silvia delivers the Dementia Forum X keynote address.

Founded in 1995 on the initiative of H.M. Queen Silvia of Sweden, the nonprofit foundation Stiftelsen Silviahemmet seeks to improve the quality of life for persons affected by dementia and for their families. The Silviahemmet care philosophy supports this mission through the cornerstones of person-centered care/symptom control, family support, teamwork, communication, and relationships.

Among its many programs, Silviahemmet runs a dementia day-care center at Drottningholm, next door to the royal palace; educates nurses and assistant nurses in cooperation with Sophiahemmet University College; and, in partnership with the Karolinska Institute, enrolls physicians in master's level courses in dementia care. Following in the tradition of the nurses being known as 'Silvia Sisters', these first "Silvia doctors" received their titles from H.M. Queen Silvia in May 2015.

Silviahemmet also co-founded the Swedish Dementia Center, a national competence center for

dementia, which focuses on spreading throughout Sweden research, knowledge, and best practices in the field. H.M. Queen Silvia is still the working chairperson of the foundation to this day, often visiting the facilities and taking part most of its graduation ceremonies and events.

With the help of Swedish Care International, AARP International was able to ask Her Majesty some key questions about Silviahemmet and the legacy she has helped achieve there.

- 1 Silviahemmet certification ceremony at the Pauvres Honteux elder care home in Stockholm

Could Your Majesty describe the background of the foundation Stiftelsen Silviahemmet and why this was important to you?

It began with my mother; at first I had no idea that she was suffering from dementia. Our father protected her, so my siblings and I did not notice anything. She was a little forgetful but worked very well socially. It was when my father died and she was without his support that we more and more began to notice her dementia. I first saw it when she once came to visit Stockholm; something was not right. It could be simple things that she had difficulties with—for example, to organize things, to pack a bag.

At the time, this was 20 years ago—knowledge about dementia was poor. No comprehensive education in the field of dementia existed at this time. That is why the idea to found Silviahemmet and to train nursing assistants in specialized care in dementia was conceived. Today, Silviahemmet has become a center of excellence in the field of dementia care and education.

Why does Your Majesty believe education and training are so important in dementia care?

Caring for a person with dementia is not the same as caring for an



intellectually healthy elderly person; it requires training and knowledge. I know that many families find this [level of care] very demanding, and I myself know from experience that one is always concerned. It requires so much of the caregivers, like care, patience, and love. And I know there is a great sadness to see the person you love fade away more and more. Therefore, greater knowledge of dementia has become a mission for me, and I hope that it will be widely recognized that this is a disease that must be shouldered by the entire society.

What achievement of Silviahemmet is Your Majesty most proud of?

I think that the general change in terms of awareness, discussion, care, and research compared with when the Silviahemmet was founded is the greatest achievement. I have seen the shift from unawareness to acknowledgement. Today in Sweden there is specialized

training available to assistant nurses, nurses, and doctors. This is a result of a unique cooperation with Sophiahemmet University and the University Karolinska Institutet.

That is something I am personally very proud of. But there is also greater understanding of the complexities that affect everyone touched by dementia, including families and caregivers.

As an innovator yourself, what advice and encouragement would you give to people in the United States and around the world who would also like to improve life for their family members with dementia and others in their community?

The most important thing is to see the person, not the disease. Also to encourage families and friends to be present in the lives of those diagnosed with dementia. Above all, we need to talk more about it as an illness and how it affects both those who are ill and their family members.

A few years back, a scholarship for nursing students, for which students apply with innovative ideas for the care of elderly and dementia patients, was launched in Your Majesty's name. What does Your Majesty find most interesting about the Queen Silvia Nursing Award and its outcomes?

The Queen Silvia Nursing Award is a way to encourage nursing students to study and learn more about dementia, to be curious, and to bring their own perspective to research that can further our knowledge of the disease. The aim is to support young, driven people with creative ideas that can question convention in how we care for the elderly and dementia patients.

When Silviahemmet was founded, some of the specialized practices were new and challenging to care institutions that were used to doing things in a certain "old fashioned" way. But sometimes new ideas and creativity are needed to make progress.

I think we have succeeded in increasing the interest in dementia care, and I am very pleased that nursing [those] patients with dementia has now a higher status.

The first Dementia Forum X, a global executive meeting to discuss the challenges of the demographic change and the development of dementia, took place in Stockholm in May 2015 under Your Majesty's patronage. What was the most important outcome of that event?

The conference included stakeholders from across society: cabinet ministers; ambassadors; and leading actors in dementia care, geriatric



SWEDISH CARE INTERNATIONAL

As interest for the queen's foundation grew outside of Sweden, mainly due to Her Majesty's extensive world travels, Swedish Care International (SCI) was founded to facilitate taking Silviahemmet's programs and training international.

Since its founding, SCI has directly trained well over 100,000 professionals and family caregivers around the world through courses based on the Silviahemmet program, tailored course material, and online training. Currently, SCI training is available in Japan, South Korea, Germany, China, the Netherlands, Poland, and Great Britain, with new markets added each year.

Among SCI's most widespread initiatives are its smartphone applications—Dementia Support, Elderly Care, and Memory Box!—which are available to download free of charge. These apps are currently used by tens of thousands of individuals in over 125 countries worldwide, and they are available in 12 languages.

- Dementia Support aims to support family and caregivers of those living with dementia. It contains information and inspiration on how to uphold a good and purposeful existence, and it offers tips on how to simplify daily life.
- Elderly Care contains information on how to relate to your loved ones and how to cope with the different impairments that may occur with age.
- Memory Box! was created to serve as a memory aid and a conversation inspiration to support relatives and caregivers of those living with dementia. This app uses music, photographs, and written tips based around 20th-century topics and events.

To download the apps go to www.sci.se

care, finance, society, and politics. Everyone, from politicians to business leaders, were able to share ideas about how to engage in and take responsibility for the upcoming global challenges of an aging population and the issue of dementia. It was a wonderful experience to feel such great commitment and to listen to the lively discussions on these particular issues.

Swedish Care International works with the internationalization of Silviahemmet's education and training, and is today present in eight countries around the world. Why does Your Majesty think it is important to share this work internationally?

From experience and travel I know that caregivers around the world are doing their utmost, but without knowledge and proper training it is very difficult to provide the best possible care. I therefore think it is important to share our experiences and best practices internationally so that others may benefit from the work of the Silviahemmet Foundation.

What does Your Majesty believe are the most important lessons that countries around the world can learn from Sweden and from the experiences that Silviahemmet has accumulated?

One of the cornerstones of Silviahemmet's care philosophy is having the appropriate approach. This is very essential. Silvia Sisters are trained to communicate, build,

and nurture relationships. It is important to get to know every single person and support them in their individual difficulties—not to rush, but to do things in a pace that works well for the person.

Your Majesty has also been involved in projects to develop high-tech solutions for the elderly and those afflicted by dementia. How will—in Your Majesty's opinion—technology be a part of creating a dementia-friendly society?

The challenge with the growing elderly population demands new ideas and solutions, and therefore technology and creative actors in the care sector have an important role to play. Technology can be of much help to those who care for dementia patients; it can also be an inexpensive and accessible source of support and information in parts of the world where access to specific information regarding dementia is scarce. An example of this are three free-of-charge smartphone apps, Memory Box, Dementia Support and Elderly Care, that we launched together with a group of partners. These apps have been downloaded by thousands of people in over 100 countries. ●

For more information about Silviahemmet, go to www.silviahemmet.se/en/.

For more information on Swedish Care International and its apps, go to www.sci.se.



H.M. Queen Silvia of Sweden

Queen Silvia of Sweden is the spouse of King Carl XVI Gustaf and mother of the heir apparent to the throne, Crown Princess Victoria. In 2011, Silvia became the longest serving queen of Sweden. She is well known for her numerous charitable pursuits, including her commitment to helping those affected by dementia.

SURPRISING EFFECTS OF AGEISM

Hannah J. Swift | CENTRE FOR THE STUDY OF GROUP PROCESSES,
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In the United Kingdom and across Europe, we have established that ageism is the most commonly experienced form of prejudice.

Nearly 50 years ago, Robert N. Butler introduced the term “ageism” to describe prejudice toward older people, old age, and aging as “a form of bigotry we now tend to overlook”—so has anything changed nearly 50 years on?

In the United Kingdom and across Europe, we have established that ageism is the most commonly experienced form of prejudice^{1,2}. In fact, across 28 countries assessed in the 2008–2009 European Social Survey (ESS), a higher percentage of respondents (34 percent) reported that they had experienced prejudice due to their age than prejudice due to their gender (24 percent) or race or ethnicity (16 percent)².

Despite this clear evidence that ageism is a significant societal

problem, a review we conducted for the UK Government Office for Science revealed ageism is surprisingly under-researched.³ For example, a title search of the term “ageism” in Google Scholar produced far fewer hits than did similar searches for “sexism” or “racism” (see figure 1). Although the volume of ageism research has gathered pace relative to other types of prejudice research over the past 45 years, ageism is still a long way behind in absolute volume.

This article highlights some of the lesser-known negative consequences of age stereotypes that permeate society. But first, it examines some of the psychological processes underpinning ageism that older people may face by revealing how

people use and apply the category labels “old” and “young.”

Who Are You Calling Old?

In many cultures the life course is generally segmented by age thresholds to mark changes such as participation in education, work, and parenthood. These age thresholds are important social markers and organizing factors in society, which are reinforced by legislation, norms, and customs. But they can vary between cultures and countries (for example, age of consent, voting age, retirement age). However, an important implication of these thresholds is that they provide a system of categorization that immediately creates the potential for generalization, stereotyping, and discrimination. This

FIGURE 1. NUMBER OF GOOGLE SCHOLAR HITS FOR DIFFERENT PREJUDICES SINCE 1969

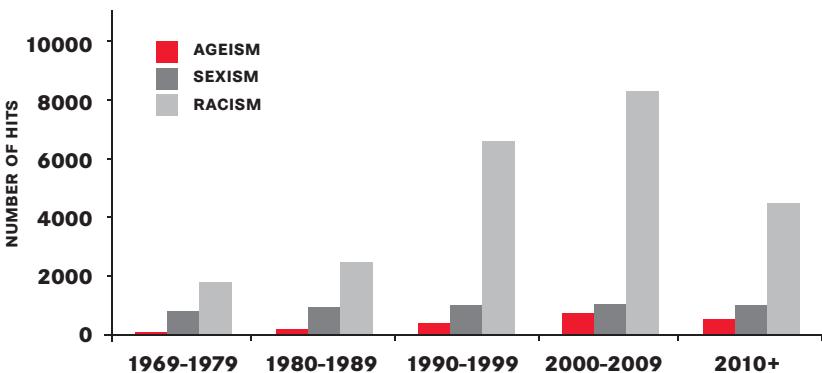
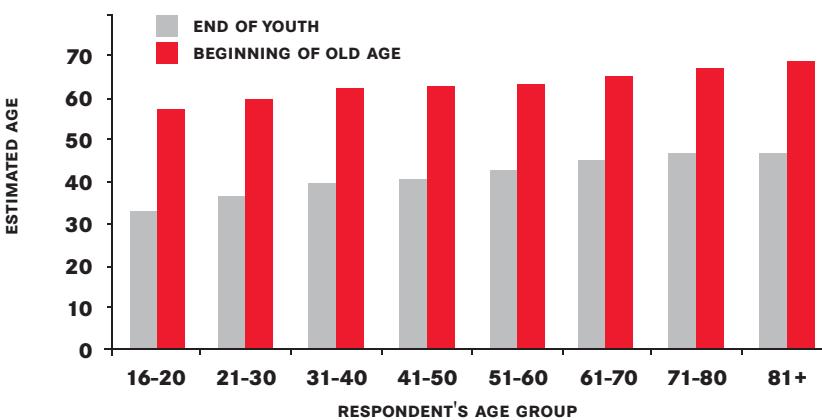


FIGURE 2. ESTIMATES FOR THE BEGINNING OF OLD AGE AND FOR THE END OF YOUTH BY RESPONDENT'S AGE



is because when people categorize others, they psychologically exaggerate similarities among members within a category and exaggerate differences from members of other categories.

In the case of age, the application of thresholds is likely to reinforce perceptions that all “older people” share similar stereotypic characteristics. An important initial finding from our research was to establish the variability and fluidity in people’s definitions of “old age” and “youth.” For example, ESS

respondents’ estimates of the ages at which youth ends and at which old age begins are shown in figure 2 and reveal that people’s perceptions of these boundaries vary according to the respondent’s own age.

In conjunction with this psychological tendency to shift the category boundaries as one gets older, we also found that people’s perceptions of age boundaries differed greatly across different European countries (see figure 3). For instance, in the UK a person is likely to be regarded as “old” when

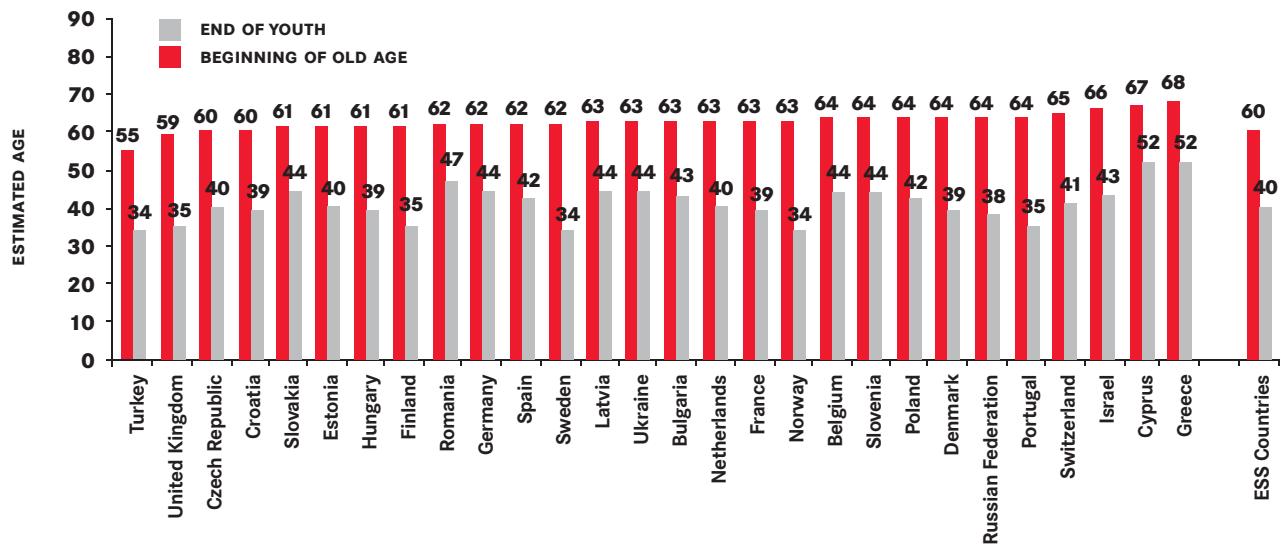
he or she reaches 59 years of age, but in Greece a person would typically not be considered old until age 68.

This suggests that strong cultural frames or norms also affect these perceptions. We are currently investigating what drives these national differences, having already ruled out explanations in terms of national differences in life expectancy, retirement age, inequality, productivity⁴. What is clear is that even the simple categorization of other people as young or old is affected strongly by one’s own age, in conjunction with the social context.

Pity You Reached Old Age

Age categories are more than labels—they are also imbued with both negative and positive meanings that denote status and power. They are also associated with stereotypes and expectations, which form the basis of prejudice and discrimination. The most common negative stereotypes relate to older adults’ competence, whereby physical and cognitive functioning is assumed to decline with age. Other commonly held perceptions are that older people lack creativity; that they are unable to learn new skills, unproductive, and a burden on family and society; and that they are ill, frail, dependent, asexual, lonely, and socially isolated. Common positive stereotypes define older people as wise, generous, friendly, moral, experienced, loyal, and reliable. However, these positive images are unlikely to be sufficient to prevent discrimination. This is because of the general mixed combination of perceiving older people to be less competent (negative), but warm and friendly (positive) generates emotional reactions that result in a paternalistic form of prejudice in

FIGURE 3. ESTIMATES FOR THE BEGINNING OF OLD AGE AND FOR THE END OF YOUTH BY ESS COUNTRY



Age categories are more than labels—they are also imbued with both negative and positive meanings that denote status and power.

which older people are more likely to be pitied and patronized.

Consequences of Age Stereotypes

The inevitability of aging means that stereotypes that were once focused on "other" older people ultimately become applied to the self. This "self-stereotyping" causes people to restrict their horizons because they see themselves as "too young" or "too old" to pursue certain activities or roles. Stereotypes can also have a detrimental impact on an

individual's self-image, confidence, self-esteem, health, and abilities.

Some of our experiments have explored the consequences of the fear or threat people experience when they feel like they might confirm a negative age stereotype (a well-researched phenomenon known as stereotype threat). In these experiments people ages 60 and over were asked to complete a cognitive test (for example, of math or memory ability). However, for half of the participants, we introduced stereotype threat simply by

telling them that their performance would be compared with the performance of younger participants. We predicted that the mere inclusion of the comparison with "younger people" would be sufficient to invoke old-age stereotypes and to produce anxiety about underperformance. Consequently, we expected those who experienced the threat manipulation to underperform on these tests. In four studies, we found that the threat significantly degraded performance compared with the control conditions (in which participants were told they would be compared with "others"), and this difference was partly accounted for by participants' increased levels of anxiety due to the threat⁵. These effects even extend to physical strength. In another study of participants ages 67 and over, we found that the threat manipulation reduced their grip strength (measured by a hand dynamometer) reduced by as much as 50 percent⁶.

We recently conducted a meta-analytic review of all the available studies of age-based stereotype threat. This established that the effect of stereotype threat on older adults' performance is reliable and robust⁷. This finding has significant practical implications across many domains, because many of the tasks measured are used as indicative measures of an individual's cognitive and even physical ability and functionality. For example, any time an older person is subjected to a selection or diagnostic test (whether for medical diagnosis or occupational selection), implicit or direct age comparisons may harm his or her performance. Age-based stereotype threat is just one example of the ways that age stereotypes can be consequential. In another study, we (and others, for example, Levy et al., 1999–2000) found that triggering negative old-age stereotypes even outside the perceiver's conscious awareness can be sufficient to reduce his or her motivation for a longer life. However, the wider point is that age-based prejudice is a substantial challenge for society as well for as individuals, and it is an area that should be increasingly prioritized for research and intervention.

If you would like to learn more about our research, please visit <http://eurage.com/> or our blog at <https://grouplab.wordpress.com/>. ●

- ¹ D. Abrams, T. Eilola, and H. Swift, "Attitudes to Age in Britain 2004–08," Department of Work and Pensions, Research Report No. 599. Crown, 2009.
- ² D. Abrams, P.S. Russell, M. Vauclair, and H. Swift, *Ageism in Europe: Findings from the European Social Survey* (London: Age UK, 2011).
- ³ D. Abrams, H.J. Swift, R.A. Lamont, and L. Drury, "The Barriers to and Enablers of Positive Attitudes to Ageing and Older People, at the Societal and Individual Level" Foresight Government Office for Science, accessed 2015, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/454735/gs-15-15-future-ageing-attitudes-barriers-enablers-er06.pdf.
- ⁴ D. Abrams, C-M. Vauclair, and H. Swift, "Predictors of Attitudes to Age in Europe," Department of Work and Pensions, Research Report No. 735. Crown, 2011.
- ⁵ H.J. Swift, D. Abrams, and S. Marques, "Threat or Boost? Social Comparison Affects Older People's Performance Differently Depending on Task Domain," *Journal of Gerontology B: Psychological & Social Sciences* (2013). doi: 10.1093/geronb/gbs044.
- ⁶ H.J. Swift, R. Lamont, and D. Abrams, "Are They Half as Strong as They Used to Be? An Experiment Testing Whether Age-Related Social Comparisons Impair Older People's Hand Grip Strength and Persistence," *British Medical Journal Open* (2012). doi: 10.1136/bmjopen-2012-001064.
- ⁷ R.A. Lamont, H.J. Swift, and D. Abrams, "A Review and Meta-Analysis of Age-Based Stereotype Threat: Negative Stereotypes, Not Facts, Do the Damage," *Psychology & Aging* (2015). doi: 10.1037/a0038586.



Hannah J. Swift

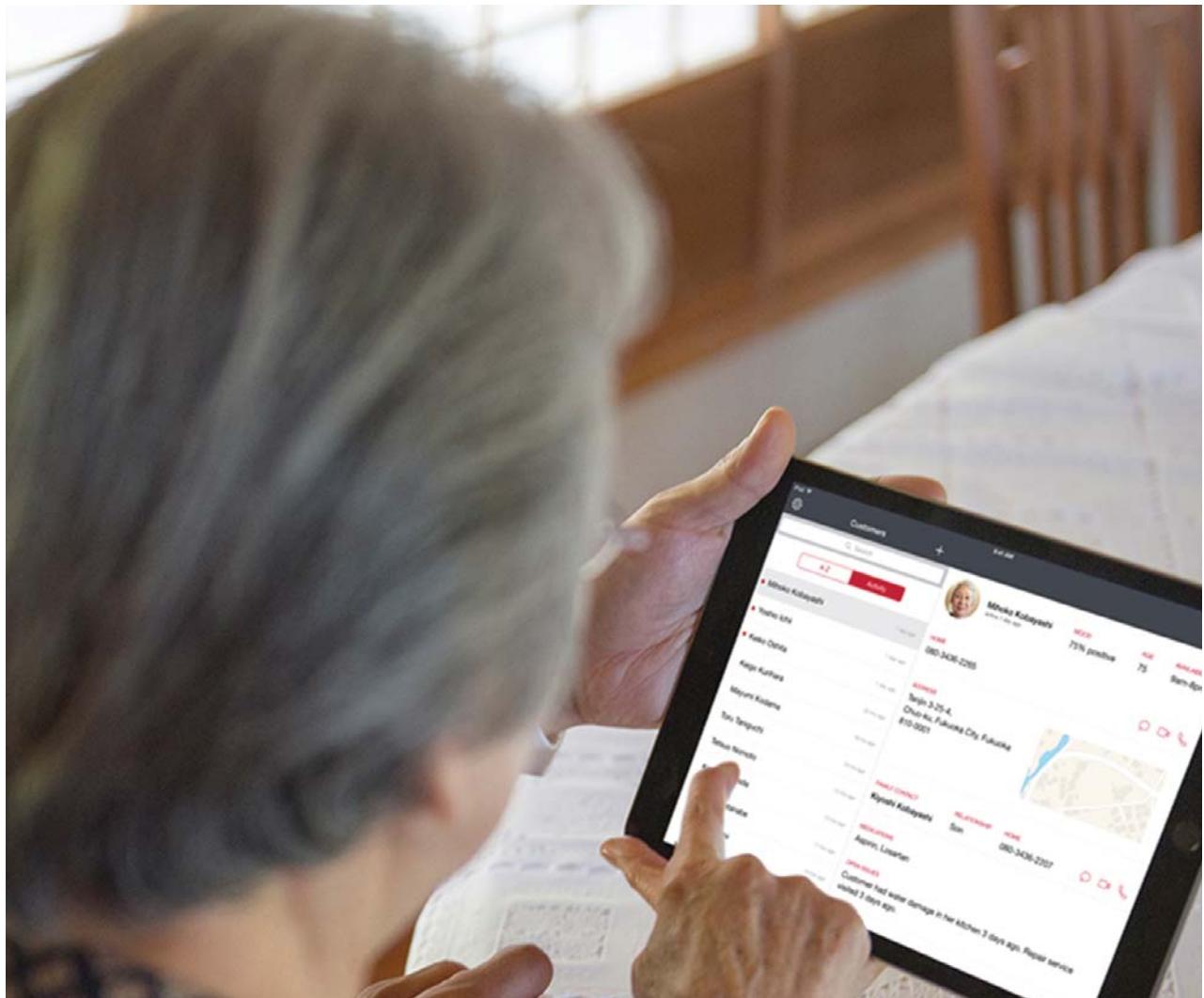
Hannah J. Swift is a research fellow at the School of Psychology, University of Kent. Her research focuses on ageism, attitudes to age and age stereotypes, and it has been disseminated widely to academic and policy audiences. She is a core member of EURAGE, which contributed to the design and analysis of the "Ageism" module in the European Social Survey.



HEALTH
SECURITY

THE UNDER-CONNECTED ECOSYSTEM OF ELDERS

Lilian Myers | LEADER, APPLE + IBM GLOBAL AGING INDUSTRY PORTFOLIO





¹ Japan Post, Apple, and IBM announced a pilot app for Japanese seniors, aging in place at home, informed by more than five years of research at IBM's Tokyo Research Labs

Technology can be a vital tool to turn crisis into opportunity and to fill a void in the lives of seniors caused by changes in both policy and social structures.

All but a few regions of the world are approaching the seismic shift in which the working population is outnumbered by those in retirement. Health and social systems are burdened with costs of longer lives, and there is desperation to curb the imbalanced ratio of working people to retirees. The effects are already evident for many countries where austerity moves aimed at economic recovery have forced the reduction of social program spending for all

citizens. In spite of this, technology can be a vital tool to turn crisis into opportunity and to fill a void in the lives of seniors caused by changes in both policy and social structures.

The rise and fall of social connection

Ask any gerontologist or geriatric nurse what happens during patient appointments, and the response is likely to be, "Chatting, listening to patients talk about their children or grandchildren, their frustrations, their joys, their fears." Similar comments can be heard in other health settings frequented by seniors who use time in, say, cardiology offices, pharmacies, and hospitals less for discussions of health conditions and more for socializing.

Social interaction is a known factor for preserving good health and mental acuity. In fact, 75 percent of health is determined by social, environmental, and behavioral factors; only 20 percent is influenced by medical care; and a meager 5 percent is attributable to genetics, according to the World Health Organization. The natural increase of social spheres that begins with family and extends as one's family grows was once sustained through multi-generational living arrangements even after

spouses and peers passed away. Today, as families become smaller and urban migration continues, social circles are shrinking and a new era of mature aging is emerging—one that can be largely solitary—that threatens to erode the life expectancy gains of the last half-century while also pushing on the frequency and severity of medical interventions, in turn driving up costs.

Mobile technology as a unifying force

Among younger generations worldwide, online, and especially mobile, technology has become an everyday channel for social interaction. In the United States, those over 65 are unique, in comparison to their global contemporaries, in that they may be considered the first generation of digital seniors, who used some form of technology for much of their working lives. They were also acquiring computers at the start of the internet age and had low cost access to broadband service.

But of the 77 percent of US seniors who use cell phones today, only 18 percent are using smartphones, according to a Pew Research survey. And it is important to consider that the key decision maker or influencer in cell phone acquisition for or by those seniors is likely to have been an adult child. Pew's research further indicates that at 27 percent, US seniors are adopting tablet and eReader devices at a substantially higher rate than smartphones. When considered together, the results stimulate questions as to whether or how seniors might take up use of mobile devices to enhance or retain an otherwise shrinking social sphere as a means to stave off declines in health and well-being.

Sensible mobility for analog seniors

Researchers at IBM's Tokyo Research Lab set out to shed light on what makes devices most useful for seniors in the country that is home to both the world's fastest-aging population and the world's largest population of centenarians. Over a period of 5 years, the researchers studied how social, physical, experiential, and health-related factors influenced ability

and affinity for use of mobile devices of all types and sizes.

The research found that even simple tasks are challenging and that the less familiar the device or interface, the less confident and willing the user. A key finding in the research was a consistent misalignment of eye and finger target coordination evident among many study subjects. Similarly, individuals with hand tremors were uniformly unable to align to a target location. Interaction designed into almost all mobile user interfaces, such as tapping, turned out to be among the most difficult tasks for subjects to perform, but dragging motions were much more achievable. Overall, participants expressed a preference for using voice commands and natural language interactions with devices, and they needed audible cues as to where the devices were physically located in a room.

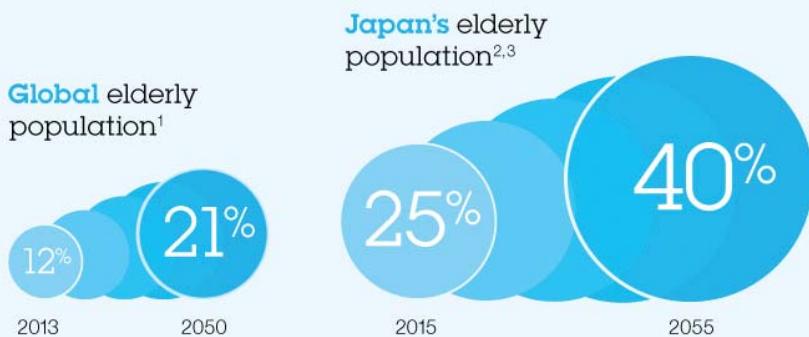
The conclusions were applied to a solution announced jointly by Japan Post, Apple, and IBM as Japan Post's next evolution of its senior Watch Over service, which began a tablet pilot deployment in October 2015 with 1,000 seniors in two prefectures.

The view is different from wherever you sit—but the goal is the same

Keeping the elderly well, able, happy, and at home longer benefits everyone. Seniors themselves are finding that working longer may be a necessity brought on by the need to financially support younger generations or to support themselves through rising life expectancy, which, according to the United Nations, will increase 351 percent for those 85 and older between 2010 and 2050.

With longer lives come complications. One of my own elders generally termed the nature of aging as a collection of maladies and afflictions—physical and psychological. The upside of advanced years can be a general willingness to say anything, not holding back an opinion. The downside can be angst driven by a changing world and debilitating loneliness. A recurring theme in those chats with service providers is a general fear that one's

Our aging populations



IBM, Apple and Japan Post are reimagining elder care in Japan. To learn more, go to ibm.biz/BdXjFA

¹ UN World Aging Population Report
² The silver market phenomenon marketing and innovation in the aging society (2nd ed.)
³ Statistics Bureau of Japan

children might judge them incapable of continuing to live alone.

Societal expectations for support of elders means many children suffer their own afflictions of guilt, worry, and even cycles of avoidance and resentment. But regardless of how children feel about the responsibility, it doesn't remove the concern for health and well-being of someone they love.

An enterprise response—turning crisis into opportunity

Organizations around the world are turning their attention to this new era in aging with innovative ways to engage, enable, and support the needs of seniors. Some organizations are taking this on as a social mission, others as a commercial opportunity in a huge and growing market.

Japan Post is one of many postal services turning attention to seniors, in part, as a means of diversifying interests in a world where postal mail is less and less common. In the

spring of 2014 Belgium's bPost began piloting a partnership with municipal-level social support NGOs for postal route carriers to make regular calls on low-needs seniors, allowing skilled case workers to stay focused on higher-needs individuals. Similarly, Jersey Post, in the Channel Islands, has been offering subscriptions to seniors and their families for postal carrier check-in services almost as long with enough success to gain interest from island social and health services to augment private subscriptions.

Public, private, and nonprofit health and social services organizations around the world are looking at new ways to convene a trusted network of resources to connect the dots for seniors and their families. This includes insurance companies looking to stave off rising death benefit payouts that in the United States rose by nearly 20 percent from 2010 to 2014, according to the Insurance Industry Institute. It also includes

Seizing on this greenfield opportunity will require a reimagining of routine home and personal services, as well as easily accessible information that keep seniors connected to the world beyond their garden gates.

financial services companies, security services, and local and online merchants wanting a foothold in this new and growing demographic. There is a rush to reorient people and to enable seniors, wherever they live, to age in place.

Those entities and new ecosystems will likely be required to respond to concerns of far-away children or governmental health services sponsors to ensure adherence to medication regimes and interactive communications with those seniors to visually ascertain status. Seizing on this greenfield opportunity will require a reimagining of routine home and personal services, as well as easily accessible information that keep seniors connected to the world beyond their garden gates.

The challenge—revolutionary thinking, evolutionary ecosystems

The opportunity to use technology to engage seniors—even analog

seniors—in interactions that keep them safe, active, and, in turn, mentally and physically well may be as complex as acts of public policy or as simple as equipping them or their caretakers with the right mix of devices and services. Either way, bold moves by governments, enterprises, and even communities, through which we create new partnerships and move rapidly to support our aging population, will help us get closer to arriving at the right formula for managing the coming era of the aged. •



Lilian Myers

Lilian Myers leads IBM's Aging product portfolio in the Apple+IBM Partnership program announced in 2014. Lilian joined IBM from 25 years of executive responsibility for products, marketing, strategy, and internationalization in healthcare technology, ecommerce, and health insurance companies. She was awarded a US Patent in 2013 for technology that connects consumers to their health benefits and providers through mobile devices.

BRAIN HEALTH

AARP Launches New Global Collaborative

Sarah Lenz Lock | SENIOR VICE PRESIDENT FOR POLICY, AARP

With more and more people living longer all around the world, the need for clear, trustworthy information on brain health is greater than ever.

It's no surprise that adults are very interested in maintaining their brain health as they age. As people reach their 40s and 50s, they begin to think about how they will stay sharp through their expected increased years of life, and that interest only becomes stronger as they mature. With more and more people living longer all around the world, the need for clear, trustworthy information on brain health is greater than ever.

That is why the Global Council on Brain Health (GCBH), an independent collaborative of scientists, doctors, scholars and policy experts was convened by AARP and launched in October 2015. GCBH members will distill the latest scientific advancements in brain health research to reach consensus on what works and what doesn't. Their recommendations will be based on the foremost thinking from around the

world and the GCBH will issue white papers, scientific reviews and other research in order to share reliable information as widely as possible. AARP founded the GCBH in partnership with Age UK, which is the United Kingdom's largest charity dedicated to helping everyone make the most of later life. AARP and Age UK have worked together on numerous public policy projects and will ensure that the Council's recommendations have a global reach.

How the GCBH Works

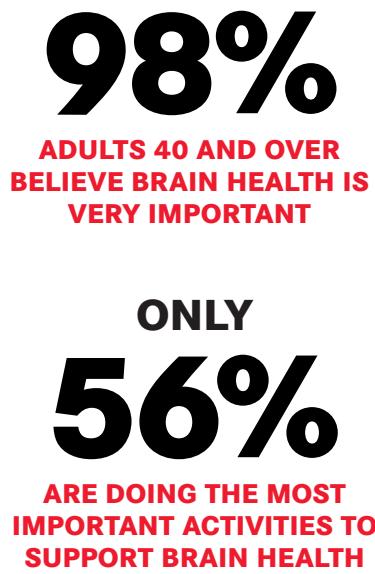
The GCBH will operate as a hub-and-spoke collaborative to address the many factors that can impact brain health. A governance committee from around the world serves as the hub. The governance committee leads issue specialists — "the spokes" — in examining priority issue areas, including: physical exercise, mental

engagement, diet, sleep, stress levels, socialization, medications and supplements. A list of the current governance committee can be found at www.GlobalCouncilOnBrainHealth.org, but the GCBH will be reaching out to other eminent experts around the world as they grapple with the all the different issues which play a role in maintaining good cognitive health.

Conclusions reached by the GCBH will reflect the latest thinking on which lifestyle interventions work, what doesn't, and where evidence is insufficient to make a conclusion. This will provide practical, up-to-date information on brain health which AARP and Age UK will make available to a wide audience through their education and outreach efforts.

Growing interest coincides with growing information and the need to make sense of it all

The GCBH will build on the 2015 Institute of Medicine's (IOM) landmark report, "Cognitive Aging: Process in Understanding and Opportunities for Action," which examined the impact of aging on brain functions and was co-sponsored by AARP. We determined that there was an ongoing need to provide information about actions individuals can take to reduce their risk of mental decline. In sum, the GCBH will focus on priorities identified



by scientists, the popular press and AARP surveys to provide guidance on what to do as the science evolves.

AARP's latest survey on brain health conducted in September 2015, found that although virtually every adult age 40 and over (98%) believes it is important to maintain or improve their brain health, only about half (56%) are doing one of the two most important activities to support their brain health—engaging in exercise and eating a healthy diet. Moreover, there are major disconnects between what people think is good for their brain health, what they do for their brain, and what scientific research has actually proven is effective. The GCBH's work aims to have a major impact by providing trusted information and recommendations that empower people to take positive steps to maintain and improve their brain health.

AARP's commitment to brain health

AARP has a longstanding commitment to empowering people to

improve and maintain their health. We see promoting and supporting brain health as a critical component of living well. Since the 1990's, AARP has been working in collaboration with many other groups to help inform people about brain health. But in 2015 and in the future, we've stepped up our focus on improving cognitive health. AARP is implementing cross-enterprise initiatives as a strategy to create major impact to improve the public's brain health. The GCBH is an example of AARP's collaboration with external partners, whose work we hope to infuse in all that our organization does to maximize the potential for improving people's brain health as they age. Whether it's AARP's communications or our international work, our Stay Sharp membership effort or our innovation and technology initiatives, our policy or advocacy, our research or caregiving efforts, or in bringing high quality products and services forward to create impact and relevance through social entrepreneurship, AARP is committed to bringing the best information that science has to offer to people as they age.

The GCBH brings together thought leaders to work together to translate critical scientific information on brain health into simple actions for people can take every day. Our overriding goal is to help people apply the latest scientific insights to boost their cognitive health and live their best lives. We are dedicated to improving people's understanding of the steps they can take to help stay sharp throughout their life. ●

For a summary and timeline of this work go to www.GlobalCouncilOnBrainHealth.org



Sarah Lenz Lock

Sarah Lenz Lock is AARP's senior vice president for policy, where she helps position AARP as a thought leader addressing the major issues facing older Americans. Ms. Lock helps to develop AARP's public policy positions to support and maintain AARP's social mission.

De Hogeweyk: An Innovative “Dementia Village” in the Netherlands

“Here you can be yourself. You can be human, not just a person with dementia.” –Yvonne Van Amerongen

Yvonne Van Amerongen is the cofounder of De Hogeweyk, an innovative “dementia village” in the Netherlands that doctors, researchers, and caregivers are coming from all over the world to study. De Hogeweyk is a care facility that is designed to look and feel like an all-inclusive village; it is for the elderly in need of nursing care and particularly for those living with dementia. Van Amerongen states, “This place is open. [The residents] can go to a restaurant. They can go for a cup of tea.” Residents are able to roam freely within the village and make use of the shops and services. People will use money if they still understand how to use it. If not, they have an understanding with the family that will pay the bill. Although friends and family can visit freely, movement in and out of De Hogeweyk is secure. The village is maintained with real gardeners, bartenders, waiters, and cashiers throughout the 4-acre facility. In the past De Hogeweyk has drawn some criticism due to the belief that the village tries to create a staged reality for its residents. However Van Amerongen disputes this, noting that “everything here is real. I do my shopping in the supermarket now and then, it is as normal a supermarket (though small) as any other”.

Some would contend that in fact “normal” is exactly what De

Hogeweyk is aiming for. It does this by creating an open environment conducive to social engagement and by setting up unique living accommodations. Six to seven residents live together in houses themed according to previous lifestyles and interests, such as Stedelijk (urban), Goois (aristocratic), Ambachtelijk (for craftsmen/women), or Christelijk (religious). According to Van Amerongen, “The people you live with should be people who could be your friends—people you would pick to live with, people who probably have the same ideas... same values. That’s normal. But it is hard to be normal (with dementia).” The lifestyles are modelled on those in the Dutch society and as described by Netherlands based lifestyle research company, Motivation who worked with De Hogeweyk to help them understand the lifestyles of future residents.

Van Amerongen herself was fed up with the “norm” of current dementia care after years as the care manager of a nursing home herself. Upon news of her father’s sudden death, “one of the first things [she] thought was, ‘Thank God he never got to be in a nursing home.’”

That sentiment is echoed by many caregivers. “This is perfect for my wife. I visited five other places before this,” says one man who moved his wife of 60 years into the innovative facility. De Hogeweyk residents enjoy expansive social programming with

more than 25 clubs that focus on baking, music, or arts and crafts. It is a holistic approach to nursing home care. De Hogeweyk cares for 152 people at a time, and has been at or near maximum capacity since it opened its doors in 2009. There is a waiting list, and demand is high.

Dr. Habib Chaudhury of Simon Fraser University in California noted that “these villages have the potential to simulate the daily lives of people from when they were younger through various activities in the home and neighborhood. Villages can provide a much wider range of movement, compared to a typical dementia care unit.” Although anecdotal evidence suggests that the experience of De Hogeweyk is largely positive (and still others have suggested such benefits as better sleep, increased physical exercise, and reduced reliance on medication), evidence is limited. Chaudhury also notes: “It would be important to see if such a neighborhood environment has any beneficial effect in behavior, functional ability, and cognition.”

In the meantime, De Hogeweyk is inspiring communities across the world to reevaluate their models of dementia care.

For more information, visit:
hogeweyk.dementiavillage.com/en

Gibert Ruiz, Intern
AARP Office of International Affairs



1 Hogeweyk was designed by Dutch architects Molenaar&Bol&VanDillen, but it was the brainchild of Yvonne van Amerongen, a caregiver who has worked with memory patients for decades.

2 Residents can maintain their grocery shopping routine at the Hogeweyk Super.

3 The all inclusive 'village' offers facilities such as a restaurant, a bar and a theatre.

4 The village has streets, squares, gardens and a park where the residents can move freely and safely.



Evaluating Age-Friendly Progress Around the World

There has never been better recognition globally that the places where people live are critical to maintaining and improving their health, well-being, and prosperity over a lifetime. The year 2015 saw the United Nations launch an ambitious new set of global development goals to improve the lives of people across the planet. Among these 17 Sustainable Development Goals is one that aims to improve “the health and well-being of all people at all ages” and another that seeks “to make cities and human settlements inclusive, safe, resilient, and sustainable.” Prioritizing the health of people as they age and the quality of their environments is essential to gains in living standards. The World Health Organization’s (WHO) 2015 World Health and Ageing Report goes further by highlighting the role of age-friendly cities and communities in maintaining the health of people as they grow older. WHO has subsequently made the pursuit of age-friendly communities one of five strategic issues to be tackled in its upcoming Global Strategy on Ageing and Health.

Separately, AARP and WHO have spent decades identifying the important changes needed in the built and social environments to help people age in place. In 2012, the agencies joined forces when AARP became a US affiliate network of WHO’s Global Network of Age-Friendly Cities and Communities. The AARP Network of Age-Friendly Communities now has a membership of over 70 communities and covers more than 35 million

Americans—a growth of more than 1,000 percent in under 4 years.

Yet, despite increasing momentum, we see that challenges remain for cities and communities to become great places to live for all ages. In 2016, it will become increasingly important for those involved in this work to measure progress and demonstrate success—something that will be critical to the sustainability of affiliate networks as well as those initiatives at the local level.

There is a saying in AARP state offices that “if you’ve seen one community, you’ve seen one community.” The diversity in the types and sizes of age-friendly communities in the United States brings particular challenges. How do you evaluate the outcomes in a city of 7 million, compared with a town of 1,500? Can we compare a rural community with no bus route with an inner city with little access to green spaces, and how do we factor in the preferences of the older adults living in those communities?

The articles in this section highlight both the evaluation tools and the resources being developed in the United States and elsewhere, as well as the differences among and within communities that these tools need to address. Having featured high-profile, age-friendly cities in the past—such as Boston and Philadelphia in the United States and Manchester in the United Kingdom—the following article from Maine provides an illustration of the great work being undertaken to address the particular

features and needs of rural and small communities.

Globally, the differences within and among countries are even more stark. WHO’s Global Network of Age-Friendly Cities and Communities contains over 250 communities in 33 countries, including those of high, middle, and low income. The articles from La Plata, Argentina, and Nairobi, Kenya, illustrate that improving outcomes for older residents requires government commitment—as well as the passion and dedication of civil society to keep pushing for its support. And, in the case of the slums of Nairobi, a new paradigm of age-friendliness needs to take into account the basic human needs of all residents, such as sanitation, alongside the other eight domains set out in WHO’s age-friendly framework. In a relatively short time, the AARP and WHO networks have achieved a great deal of momentum and commitment to creating livable communities that will last a lifetime, in the United States and across the globe. We look forward to the next chapter as it continues to adapt to account for vast differences in people’s lives and environments.

Natalie Turner

Senior Policy Advisor, AARP International

A NEW MEASURE OF AGE-FRIENDLINESS

Jana Lynott, AICP | SENIOR STRATEGIC POLICY ADVISOR, AARP PUBLIC POLICY INSTITUTE

The Livability Index is a groundbreaking tool that scores every neighborhood and community in the United States for the services and amenities that affect people's lives the most.

As the year 2015 came to a close, AARP celebrated the enrollment of three new members to its Network of Age-Friendly Communities (AFCs). These additions brought the network total to 72 jurisdictions, both large and small, that encompass a combined population of more than 35 million people. While these are laudable numbers for a nearly 4-year-old program, success will be measured not by the number of communities enrolled but by whether local leaders are able to create positive change in the lives of residents who span the age

spectrum. The AARP Livability Index is one tool that leaders can use to assess their performance.

AARP built the Livability Index to catalyze community conversations around what action is needed for America's communities to become more livable for people of all ages. Its audience includes local elected officials and other leadership from the public, private, and nonprofit sectors, as well as individual residents.

The Livability Index is a groundbreaking tool that scores every neighborhood and community in the United States for the services and amenities that affect people's lives the most. Using more than 50 national sources of data, the index provides the clearest picture yet of how well a community meets the current and future needs of people of all ages.

The Livability Index was designed by experts at the AARP Public Policy Institute (PPI), with guidance from a 30-member technical advisory committee, which boasts expertise in both policy and data analysis across the range of subject areas evaluated by the index. PPI and its contractor, ICF International, worked with this committee first to identify the attributes of community livability and then to determine the specific metrics, policies, and supporting data that could measure those attributes. The selection of attributes was also informed by a national survey of more than 4,500 Americans ages 50 and older about the aspects of their communities most important to them.

The Livability Index measures 60 indicators (40 quantitative metrics and 20 policies) spread across 7 categories of livability: housing, neighborhood,

CONNECTING THE AARP LIVABILITY INDEX AND THE AARP NETWORK OF AGE-FRIENDLY COMMUNITIES



HOUSING

Affordability and access

AGE-FRIENDLY NETWORK DOMAIN:
Housing



TRANSPORTATION

Safe and convenient options

AGE-FRIENDLY NETWORK DOMAIN:
Transportation



HEALTH

Prevention, access, and quality

AGE-FRIENDLY NETWORK DOMAIN:
Community and health services



OPPORTUNITY

Inclusion and possibilities

AGE-FRIENDLY NETWORK DOMAIN:
Respect and inclusion
Civic participation and
employment



NEIGHBORHOOD

Access to life, work, and play

AGE-FRIENDLY NETWORK DOMAIN:
Outdoor spaces and buildings



ENVIRONMENT

Clean air and water



ENGAGEMENT

Civic and social involvement

AGE-FRIENDLY NETWORK DOMAIN:
Social participation
Respect and social inclusion
Civic participation and
employment
Communication and information

transportation, environment, health, engagement, and opportunity. These categories of livability closely align with the 8 domains of age-friendliness used by the World Health Organization as shown in the figure to the left.

The Livability Index is most powerful when used in combination with other local data and experience. For example, the index can identify which neighborhoods in the community have the highest incidence of fatal traffic crashes. Additional data are required to identify the exact location of those crashes and contributing factors. Similarly, users can map household walk trips and visually see how walk rates vary from one neighborhood to the next, but only residents can paint an accurate narrative of their experience as they try to navigate local streets and crosswalks.

The Livability Index can be used to draw attention to both local and national policy issues. County-level map layers can help people better understand the shocking geographic-based inequities across the United States today. Simply pan the map from north to south—from Minneapolis, Minnesota, to Baton Rouge, Louisiana—using any number of indicators, and it's clear very quickly just how much location matters: as you move the map changes color from predominantly green (to show locations with good performance) to predominantly red (poor performance). Poor performance on such measures such as access to exercise opportunities and healthy foods, smoking rates, and crime rates tend to correlate with perhaps the most significant quality-of-life indicator yet—life expectancy.

There are several challenges to measuring age-friendliness or livability. One is definition. In an acknowledgment of personal preferences, we designed a “Customize Your Score” feature, which allows users to adjust the weights applied to the seven categories of livability. For example, my father—who was raised on a farm and still resides just outside a small town in the Midwest—tells me, “As long as I can safely drive and have my health, I don’t want to be able to look in my neighbors’ windows.” He enjoys lowering the weight given to the “neighborhood” and “transportation” categories and watching his personalized score rise. Because we know access to public transportation and proximity to other services will matter when it’s time for him to hang up the car keys, the “official AARP score” that he could print to share with his city council does not change.

A second challenge is that data are not always available at the most meaningful geographic scale. For instance, many of the nationwide health data in the United States are, at best, at the county level. With more localized data on such indicators as smoking, obesity, voting, and social engagement, we could more effectively target investments to those neighborhoods that need them most.

USING THE LIVABILITY INDEX

IN WASHINGTON, DC

“The AARP Livability Index offers residents access to well-researched, easily understood scores to compare their own neighborhoods with other locations. Like DC, any Age-Friendly Community aspirant can use AARP’s Livability Index to augment its data baselines and further engage residents in making changes in their own lives and neighborhoods. With an overall score of 58 out of 100 for all of DC, the AARP Livability Index verified issues needing improvement, which were addressed in the 2014 Age-Friendly DC strategic plan. The AARP Livability Index underscored that some DC neighborhoods fare better than others. More and more residents, Mayor Muriel Bowser’s entire administration, and numerous academic and stakeholder organizations are making changes expected to elevate AARP Livability Index scores across the city by 2017. Improving Livability Index scores in neighborhoods and DC’s overall score are expected to be among the outcome measures DC presents in 2017 to show that it should be welcomed among the world’s age-friendly cities.”

-Gail Kohn, Washington, DC,
Age-Friendly City Coordinator



1 The sun shines on an AARP sponsored active living workshop in Macon-Bibb, Georgia

2 Puerto Rico volunteers put their heads together to solve community walkability

A third challenge is how to incorporate complex data analysis into an interactive Web design platform that welcomes the most casual visitor yet is powerful enough to stimulate action that will result in community change. To address this issue, we designed the Livability Index like an onion, where users first see a snapshot of their total and category scores and then are able to open layers of additional detail, such as metric and policy definitions, links to original data sources, and links to how-to resources and research.

The AARP Livability Index offers those engaged in age-friendly communities work a performance snapshot for 60 indicators of livability. The index can be an educational tool for community dialog, and it can be used to help inform a community's baseline assessment as well as track progress over

time. Because of the index's ability to dive down to the neighborhood level for a majority of metrics, it can serve as a reality check that helps ensure that those who are most vulnerable benefit from planned and executed interventions.

But the Livability Index should be only one of several inputs to this evaluation process. Through public engagement, AFC leaders may identify valued metrics not available through the Livability Index, or they may have access to better local data on a given metric. Most importantly, local residents should be tapped to help interpret the data and prioritize future direction. ●

To visit the AARP Livability Index: Great Neighborhoods for All Ages, go to livabilityindex.aarp.org

Share your thoughts on the Livability Index on twitter @AARPpolicy@JanaLynott#LivIndex



LIVABLE
COMMUNITIES

AGE-FRIENDLY INDICATORS: A NEW GUIDE

Megumi Kano and Paul Rosenberg | WHO CENTRE FOR HEALTH DEVELOPMENT, KOBE, JAPAN

The aim of the new WHO guide is to encourage the practice of assessment and monitoring, and to enable cities to set targets and policy using evidence.

The World Health Organization (WHO) promotes the creation of age-friendly environments through its global Age-Friendly Cities and Communities (AFCCs) initiative. WHO launched its first guide on the topic in 2007 and then WHO initiated a Global Network of AFCCs in 2010, which has now expanded to more than 250 cities and communities in nearly 30 countries and includes as an affiliate the AARP Network of Age-Friendly Communities.

In an effort to further support the Global Network and similar efforts, WHO Centre for Health Development in Kobe, Japan (WKC), has developed a new guide that helps cities and communities measure their age-friendliness. The aim is

to encourage the practice of assessment and monitoring, and to enable cities to set targets and policy using evidence. It is also a way to enhance collaboration between governments, researchers, nonprofits, and other stakeholders concerned about our health and well-being as we age.

The guide identifies a set of core indicators as well as supplementary ones. The core indicators include two measures of “equity,” five measures of an “accessible physical environment,” eight measures of an “inclusive social environment,” and a measure of “well-being.” The equity indicators are essential to ensure that everyone enjoys the benefits of an age-friendly environment. The physical accessibility indicators



mainly concern mobility and access to public spaces, buildings, and housing; the social inclusiveness indicators focus on opportunities for participation in various realms of social life—whether it be for work, recreation, or local decision making.

Developed over a three-year period, these indicators were based on the eight domains of an age-friendly city that were introduced in the first guide, desk research, guidance from international experts, and consultations with city officials and

community representatives from different parts of the world. Several factors were considered in selecting the indicators. Technical aspects, such as measurability, validity, and replicability of the indicator, were examined. Equally important were the pragmatic aspects, such as social acceptability and ease of data collection, and whether the indicator could be linked to specific actions.

In the final stage of developing the guide, 15 diverse communities, including 3 from the United

States, participated in a global pilot study. They used the guide to collect preliminary data on the core indicators and discussed them in their communities. Government statistics, community surveys, field observations, and focus group discussions were used, often in combination, to assess the indicators. In nearly all cases, multiple government and community organizations—as well as the older residents themselves—were engaged in the effort. Some of the common challenges were the difficulty in finding or accessing good data, and then analyzing them. Once the assessments were completed, some communities faced political barriers to implementing the related follow-up actions. Despite the challenges, all pilot sites found this exercise to have multiple benefits. It not only produced a significant amount of useful information but also helped build awareness, collaboration and momentum within the community to make further progress in creating an age-friendly community.

The new indicator guide is available on the WKC website. It is hoped that the indicators set out in the guide will stimulate thought and action at the local level, which collectively will contribute to moving forward a relevant agenda at the global level. ●

¹ Link to Age-Friendly World web site: <https://extranet.who.int/agefriendlyworld/>.

² In alphabetical order of country: La Plata (Argentina), Banyule (Australia), Hong Kong (China), Shanghai (China), Dijon (France), New Delhi (India), Tehran (Iran), Udine (Italy), Nairobi (Kenya), Tuymazy (Russia), Bilbao (Spain), Fishguard and Goodwick (UK), Bowdoinham (US), New Haven (US), and Washington, D.C. (US).

³ Link to WHO Kobe Center's web page on Age-Friendly Cities: http://www.who.int/kobe_centre/ageing/age_friendly_cities/en/.



RE-FRAMING ISSUES IN AGING

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The Research and Evaluation Framework for Age-Friendly Cities (“Framework”) is the United Kingdom’s first practical resource for cities looking to develop age-inclusive programs and initiatives. It was produced in 2014 as part of the ongoing work of the UK Network of Age-Friendly Cities.

Intended as a practical, readable document, the Framework is a basic foundation for understanding the key issues involved in developing age-friendly cities. With key facts, evidence reviews, and summaries for each of the World Health Organization’s (WHO) age-friendly domains, the Framework provides a critical context to age-friendliness. It also contains links to toolkits and resources as well as recommended practical next steps that cities can take as they devise, deliver, and evaluate their own age-friendly initiatives.

Born out of a unique nonprofit partnership between age-friendly Manchester (the UK’s first age-friendly city), the Manchester Institute for Collaborative Research on Ageing, the University of Manchester, Keele

**Produced in 2014,
the Framework is the
United Kingdom’s
first practical
resource for cities
looking to develop
age-inclusive
programs and
initiatives.**

University, and the Beth Johnson Foundation, the Framework is the product of specific needs within the urban aging agenda: (1) the need to provide tools and resources, like this Framework, that can draw local authorities together; (2) the need to build dynamic working relationships between researchers, policy makers, and practitioners; and (3) the need to articulate a contemporary account of aging that is rooted in social research but relevant to local action.

The Framework attempts to provide that contemporary account that can better enable cities to put into place age-friendly strategies that will make a meaningful difference over the long term. It provides a basic foundation for understanding the different dimensions of the age-friendly city, but it also highlights certain themes that are not always so visible in public debates on age-friendliness.

There is an explicit attempt within the Framework, for instance, to acknowledge the often-overlooked dynamics of multiple exclusion, experienced in older age, and to advance programs and strategies that actively address the disproportionate impact that social exclusion, deprivation, and socioeconomic disadvantage have on an individual's aging experience. It offers new perspectives on particular domains, too: it challenges cities to think about the domain 'outdoor spaces and buildings', for example, as going beyond the bricks and mortar of spaces, streets, and buildings. It also urges cities to think about strategies and initiatives that age-friendly cities can start to implement that acknowledge the social dynamics of urban space and the particular way in which older people use and can be empowered to remake urban space.

The Framework's section "On Age-Friendly Evaluation" looks at ways of approaching evaluation in alignment with the WHO's cycle of continual improvement. This section includes

a series of templates that allow cities to follow a step-by-step approach for measuring the progress of initiatives across each domain (each template provides cities with a more realistic snapshot of the success and experiences learned from age-friendly programs initiated within each of the WHO domains). Accompanying these templates is a reflective commentary that looks more broadly at the purpose and nature of evaluation: the different scales at which age-friendly evaluation needs to take place (from citywide to neighborhood level, to the individual and the street) and the spectrum of measures that evaluation needs to involve (from quantifiable to qualitative data that might include subjective data, ethnographic measures, anecdotal evidence, and visual data). Most important, it highlights how processes of participation and the active involvement of older people themselves are integral to the process of age-friendly evaluation.

Such "mixed methods" constitute a key part of the Framework's approach. It is an attempt to balance out the way in which, historically, certain kinds of metrics have tended to favor and give more weight to particular domains—at the neglect of others. As the Framework argues, there is a need to give equal status to each of the age-friendly domains, to be mindful of the kinds of measures that are valued and given weight within evaluation processes. This more holistic approach to evaluation, along with the Framework's critical narrative will, it is hoped, allow cities to gain a more integrated picture, both of the city and of its older residents' lived experiences. ●

The Research and Evaluation Framework for Age-Friendly Cities can be found at www.micra.manchester.ac.uk.



CASE STUDIES IN AGING

Gaining Insights into Age-Friendly Needs
By Examining Communities Around the World

NAIROBI, KENYA

INSIGHTS FROM OLDER SLUM DWELLERS

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In November 2013, the Aging and Development of the African Population and Health Research Center (APHRC) set out to pilot test WHO's AFC evaluation indicators in two informal settlements, or "slums"—Korogocho and Viwandani in Nairobi, Kenya—where APHRC runs the longitudinal Nairobi Urban Health Demographic Surveillance System. A focus on slums is of key importance in thinking about AFC in sub-Saharan Africa (SSA): a large majority of the region's urban residents live in such informal neighborhoods, and the number of older slum dwellers in particular is rising sharply.

A first aim of our study was to "measure" the age-friendliness of the two slums by populating the AFC indicators with relevant existing or newly collected data.

A second, critical aim was to generate an understanding of older slum residents' own priorities and needs regarding life in their communities. Based on this data, we then examined to what extent the current AFC indicator's eight domains indeed reflect older slum dwellers' central concerns—and what additional or alternative domains may be required to capture them.

Our results offer important insights on two levels. On one level, they bring to the fore the acute age-unfriendliness of the two localities, as assessed by AFC indicators. They show a starkly unfavorable physical environment characterized by poor neighborhood walkability and severely limited accessibility of public spaces, buildings, transportation vehicles, and stops. Therefore, these (so far) largely neglected features of the urban slum infrastructure deserve more explicit attention in addition to the commonly cited ills, such as over-crowding. Profound deficiencies also exist in the social environment within which older slum residents' lives unfold. Of particular concern are the widespread lack of access to economic security and essential health services, and the limited engagement in sociocultural activities among older residents. Against this background, our finding that only a third of older slum residents report a good quality of life is unsurprising. A further, critical insight regards the existence of clear—in parts,



¹ The rooftops of one of the Nairobi slums

marked—disparities in well-being and opportunities within the older slum population: between men and women, between the older-old and younger-old, and between the relatively better- and worse-off. As is so often the case, gender emerges as the most pronounced axis of inequality, with older female slum dwellers disadvantaged in key domains but possessing some advantage in their engagement in social groups.

On a second level, our findings show clearly that the current set of indicators must be modified and expanded to encompass the priority concerns of older adults in SSA informal settlements—and, thus, to offer a framework that meaningfully captures the “age-friendliness” of such slum communities. To be sure, most of the existing indicator domains — aside from “accessibility of public spaces and buildings” and “engagement in volunteer activity”— do strongly reflect the key needs of older adults in the two communities;

however, these residents’ most urgent concerns often relate to aspects of the domains that are not reflected in existing indicators, thus suggesting a need for additional or alternative measures. Furthermore, there are elements of the physical and social slum environment that are of utmost significance to older residents but that are not part of the present AFC domains. Such critical dimensions, which would need to be included in an “age-friendly slums” framework for SSA, are (1) the basic quality of housing and sanitation facilities, (2) good local governance, and (3) the prospects for children and youth.

Taken together, the outcomes of our study not only underscore the need for forging an “age-friendly slums” endeavor in SSA, they also offer a framework to guide it. ●

LA PLATA, ARGENTINA

CHAMPIONS FOR CHANGE

Nélida Redondo and Silvia Gascón
ISALUD University

Argentina is experiencing advanced demographic change. As a result, the age of its population is increasing, although it will differ among the many jurisdictions of the country. According to the 2010 population census, 10.2 percent of Argentina's population was older than 65 years, and those older than 80 years of age represented 2.1 percent (INDEC, 2014).

La Plata is the capital of the Buenos Aires province, the most extensive and prosperous province in the country, which provides 31.7 percent of Argentina's total GDP (MECON, 2014). The city of La Plata is located in the humid pampas, 56 kilometers southeast of the city of Buenos Aires (CABA), capital of the Argentine Republic. La Plata has an older population than the national and provincial average, and a greater proportion of its total population older than 80 years of age.

La Plata, along with 32 other cities, participated in the first round of the World Health Organization's (WHO's) Age-Friendly Cities (AFC) project in 2006. ISALUD, a private university in La Plata, was involved in the city's AFC project from the beginning, and was part of the team that attended a second WHO meeting in Vancouver in April 2006. ISALUD was also in charge of carrying out the La Plata AFC research, which helped to inform the WHO's Guide to Age-Friendly Cities published in 2007 and in turn provided the baseline assessment which informed the city's AFC action plan that same year.

Since the beginning, ISALUD has worked with La Plata's Elder Network (Red Mayor in Spanish) to implement the improvement set out in the action plan. The Elder network is a nonprofit, nongovernmental organization (NGO) made up of volunteers who fight for the rights and interests of city's older residents.

- 1 Red Mayor (elder network) and ISALUD are two of the NGOs championing an age-friendly La Plata



To help advance the work, an AFC "group of champions" was set up within the Elder Network. This smaller team was made up of Elder Network volunteers who then assumed the project leadership and promoted group protests, lobbying, and social activism with the objective of creating age-friendly spaces in the city.

In 2009, two years after its creation, the implementation of the action plan gained momentum when the local government administration changed. At the same time ISALUD created a training and volunteering leadership education project, which allowed the "group of champions" within the Elder Network to improve its management capacity and skills.

One of the weaknesses that emerged during these past eight years is that the AFC project was not incorporated formally into La Plata's local government structure, nor owned by any single department. Each improvement was pushed by NGOs. However there are more positive signs in recent years. La Plata's town council has taken a more active role in taking the action plan forward, and the Buenos Aires provincial ombudsman has also showed specific interest in championing the plan at the provincial level.

A report issued by the La Plata Public Administration Ministry in 2013 detailed the improvements made in the city since 2007. One of the most common complaints made by older people and other groups has not been



- 1 La Plata volunteers campaign for a more accessible city for all ages
- 2 La Plata City Hall and Moreno Plaza



fully addressed yet: the repair of sidewalks and the construction of ramps on the curbs have only been partially dealt with. And bicycle lanes to reroute the bicycle traffic that can endanger pedestrians have not been created. Problems with public transportation have not been fully resolved—in particular, vehicles lack adequate accessibility features for older riders, and drivers are often unfriendly and disrespectful toward older people. Another unresolved problem is safety. Crimes against the elderly are increasing

in La Plata as part of a nationwide increase in crime. Retirees can become targets because they keep savings at home. While the local and provincial governments are trying to take actions to stop this increase, no initiatives are focused on older people. While advances were made in the center of the city in transportation and improvement of sidewalks and crossings, neighborhoods on the outskirts have not done so well.

In 2014, La Plata participated in the WHO Kobe Centre project to

validate the newly developed AFC core indicators. Being part of the pilot in La Plata offered an invaluable opportunity to promote the AFC program to authorities, government employees, and organizations of the city, each of which needed to be approached to provide data and many were not aware of the AFC project or plan. As a result the Buenos Aires provincial ombudsman will be creating a survey to include questions to older people and about the age-friendliness of their city to supplement the gaps in the data.

In Argentina, as well as in other middle-income countries, the institutional weaknesses in government agencies constitute an obstacle for the advancement of the AFC project. In La Plata and elsewhere, the involvement of NGOs has proved invaluable. Not only for pushing forward change at the grassroots level, but in providing visibility to the impact of demographic aging on everyday life in cities. It also allows the continuity of the project when changes in government take place. ●

Additional Resources:

INDEC (National Institute for Statistics and Censuses), “National Population and Housing Census 2010,” accessed 2014, <http://www.indec.gov.ar>

MECON (National Ministry of Economy and Public Finances), “Buenos Aires Province,” accessed 2014, <http://www.mecon.gov.ar>



PHOTO: LUKE HAYWARD

MAINE, USA

LEARNING FROM RURAL COMMUNITIES

Peter Morelli

Co-Chair, Building Age Friendly Communities Committee, Maine Council on Aging and Manager of AARP Maine's Age- Friendly Communities program

The concept of building age-friendly communities is spreading quickly in US cities and towns, as residents and local leaders want to ensure that they are prepared for the growing aging population. As of December 2015, 72 communities nationwide have joined the World Health Organization (WHO)/AARP Network of Age-Friendly Communities. Many of the early adopters were in urban centers, but the movement is spreading quickly to rural states such as Maine, where five small communities and Portland, the state's largest city, are members of the network. The rural implementation of the program reveals issues and policy approaches helpful for the success of age-friendly programs elsewhere.

It should not be a surprise that Maine residents and policy makers are looking to create communities where residents can age in place. The state is, by one measure, the oldest in the country, with a median age of 44. Maine struggles to retain and attract young persons. People

¹ The village of Bethel, Maine, looking toward the White Mountains.

over 65 currently account for 15 percent of the state's population, and that figure will grow to 25 percent or more by 2025. The state is also among the most rural; even its largest cities aren't considered urban/metro by most measures.

The demographic destiny of the state has been a topic of significant public discussion over the past few years. The Maine Aging Initiative of the Maine Council on Aging has highlighted the issues older Mainers face if they want to age in place: transportation, housing, and isolation have been identified as major concerns. The WHO/AARP age-friendly approach to livability issues has been featured widely in discussions on these issues.

AARP Maine Director Lori Parham in 2013 began introducing towns and cities to the WHO/AARP Network of Age-Friendly Communities approach and the eight domains of livability. In cooperation with the Maine Association of Area Agencies and with assistance from the John T. Gorman Foundation, Parham was able to realize the September 2013 publication *Building a Collaborative Response to Aging in Place: A Guide to Creating an Age-Friendly Maine, One Community at a Time*¹.

A second early milestone occurred in June 2014, when the town of Bowdoinham (population 2,889) joined the WHO Global Network of Age-Friendly Cities. There, the age-friendly planning initiative grew out of the town's comprehensive planning process and

its Advisory Committee on Aging, which leads the program. The group quickly identified Patricia Oh, a local woman with both a professional and academic interest in aging, as a project leader. She has shared age-friendly Bowdoinham's experience widely in Maine and internationally.

The John T. Gorman Foundation's interest continued beyond the publication. The foundation worked with Parham to fund a grant that allows AARP Maine to retain a consultant who provides technical assistance to towns pursuing age-friendly planning efforts, with an emphasis on low-income areas.

An early finding of the AARP age-friendly work was that small communities have difficulty finding the resources to do a community age-friendly plan. The John T. Gorman Foundation (and AARP internal resources) came to the rescue with resources that allow AARP Maine to make small direct grants to those communities that are starting on an age-friendly plan. Most use the funds for a required community survey. The initial one-year grant to support the work in Maine was extended for a second year.

In the smaller towns, many differences from the larger cities have emerged. Small Maine towns often have very few employees, and they are typically devoted to administration, road maintenance, and public safety. Other community affairs, such as recreation and social services, are often organized by committees with no or limited



1 "The Mailing Crew" prepare the Bowdoinham Public Library's Age-Friendly Library survey to go out to over 700 residents age 60 and over

2 Participants at the first Annual Aging Well(ness) Fair get chatting about recreational activities Bowdoinham

3 "Madam B" enthralls a young audience with their healthy fortunes at the Celebrate Bowdoinham event

government affiliation. Local nonprofits play a critical role.

In Paris (population 5,187), the committee behind the Strategic Plan For Market Square decided that improving the community for local seniors should be part of its economic development strategy. It heard about the AARP age-friendly network, sought town approval, and conducted a Paris age-friendly plan with a major survey of residents.

In Bethel (population 2,607), a volunteer committee emerged from senior college sessions on aging issues. A group of a dozen capable volunteers has been endorsed by the town but functions quite independently from it. The committee realizes the importance of contributing to town policy making, and a key member has joined in the town's comprehensive planning process.

With its health clinic, schools, and shopping, Bethel is recognized as a service center for even tinier towns. It is part of a five-town school administrative district. Next door, Newry, with a population of 330, has an interest in the age-friendly initiative, and its select board has voted its support. (A select board exercises limited governance authority in the New England town meeting system, where all adult residents are the legislative body.) A completely independent effort makes little sense, so AARP is working with a Newry activist and the Bethel committee to consider how to incorporate Newry into the Bethel effort, which may become regional.

The AARP Maine office uses WHO and AARP publications in providing technical assistance to Maine's age-friendly network communities; however, some of the material is more suited to larger communities. The smaller towns welcome the rural emphasis of the Public Health Agency Canada's publication Age-Friendly Rural and Remote Communities: A Guide². It is basically a guide to gathering data in the eight domains.

Transportation is an example of a domain in which solutions almost always differ between smaller communities and urban centers. In most of the rural and isolated communities in Maine there has never been — and will never be — scheduled public transportation. While systems exist for medical rides, trips for groceries and personal services are almost always made by personal vehicle. The policy solution has been a patchwork system of formal or informal volunteer ride networks.

Bowdoinham is the only small Maine town that has begun to implement its plan, which identified five ways the town could become more age-friendly: (1) provide readily available information about community events and access to services, (2) develop transportation alternatives, (3) improve access to public buildings and community-wide events, (4) create a central gathering place for older residents to meet for lifelong learning as well as social and recreational opportunities, and (5) help residents to find

affordable home repair and renovation services.

Many of the recommendations have been implemented, including accessibility improvements to the Town Office and to a waterfront park, where many town events are held. The volunteers have created the Shipmates Senior Center, a place for older residents to gather, in space donated by a church. The aging committee now sponsors many lifelong learning and social and recreational opportunities for residents, and distributes a monthly calendar of activities, events, and information about services. A new volunteer driver program called Rides INC (Rides In Neighbors' Cars) provides door-to-door rides.

If Bowdoinham's early success is matched by other rural communities in Maine, the United States, and elsewhere, then age-friendly's rural diffusion should be coming soon to a town near you. ●

¹ http://maine4a.org/image_upload/FINALREPORT.pdf, accessed January 14th, 2016.

² http://www.phac-aspc.gc.ca/seniors-aînés/alt-formats/pdf/publications/public/healthy-sante/age_friendly_rural/AFRRC_en.pdf, accessed January 14th, 2016.

THE EU COVENANT

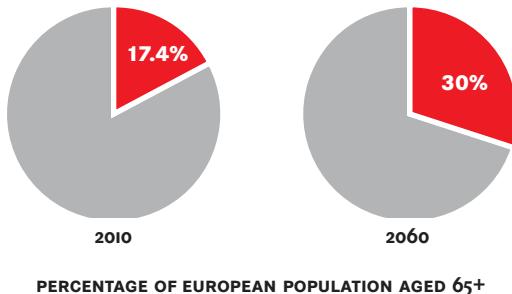
Anne-Sophie Parent | SECRETARY GENERAL, AGE PLATFORM EUROPE

We need to bring the EU's health and long-term care infrastructure into alignment with the projected increase of aging and elderly citizens.

In Europe, as in other parts of the world, significant changes are expected in the population age structure: in the coming decades, the total number of people ages 50 and over will increase sharply. As life expectancy at birth is expected to continue to increase—thanks to better living conditions, hygiene, and health care—so is, unfortunately, the number of years at the end of life expected to be spent in poor health or with functional limitations. In

the European Union (EU), average healthy life expectancy has actually started to decrease in recent years: from 2010 to 2013, on average, women saw a decrease of 1.1 years and men a decrease of 0.4 years. Therefore, we need to act to support active and healthy aging, and we need to bring the EU's health and long-term care infrastructure into alignment with the projected increase of aging and elderly citizens.

EUROPE'S AGING DEMOGRAPHICS



Since 2008 and inspired by the World Health Organization's (WHO) holistic approach to active aging, AGE Platform Europe (AGE) has been promoting age-friendly environments as the best way to help Europe overcome this unprecedented demographic challenge, through empowering older people to remain actively engaged in the labor market and in their communities for as long as possible. Our multifaceted actions include combating age discrimination and promoting the concept of "age-friendly environments" in all realms of life: employment, transport, the built environment, urban planning, health and long-term care services, mainstream goods and services, and many others. This concept is sometimes called "design for all." It means taking concrete action at all levels of government to: (1) remove barriers that prevent people—of any age—who experience functional limitations from participating on an equal basis with other citizens; and (2) enable everyone to age in better health and live independently for longer. AGE members strongly believe that age-friendly environments will not only improve quality of life for our aging populations but also will help lower the pressure on public health and care budgets, create new jobs, and boost the "silver

economy"—thus enabling our societies to better cope with aging in ways that are sustainable and fair to all generations.

AGE has used both the European Year 2012 on Active Ageing and Solidarity between Generations (EY2012) and the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA) to raise awareness of the need to adopt and promote the concept of age-friendly environments across the EU, right down to the local level. While the EY2012 helped convince policy makers and leaders to take action in the field, the EIP-AHA provided a unique opportunity to mobilize a wide range of stakeholders — namely, local and regional authorities, research centers, civil society organizations, and industry — to commit to working together to develop innovative age-friendly solutions to support longer, healthier lives.

Until now, many pilot solutions to support active and healthy aging have been developed in various areas of the EU, but they have remained isolated and not scaled up, not even in their own countries. This means that their impact in addressing the European demographic challenge has been limited. Apart from a very few countries that have a national program on aging (often limited to health and/or long-term care), the various governance levels that need to work together to support age-friendly environments have not coordinated their actions. There has been no structure at the EU level to synchronize local, regional, and national actors willing to support age-friendly environments. Local or even national authorities do not have the capacity to link up with a wide range of actors in other countries; only an EU organization or authority can do that.

This is why — in 2013, with a large consortium of 29 partners and in response to a call for proposals launched by the European Commission — AGE submitted a funding

By helping local and regional authorities in particular to meet their demographic challenges in innovative and sustainable ways, the covenant is expected to play an important role in reducing geographical inequalities and in contributing to increased healthy life expectancy in Europe.

application to set up a thematic network of age-friendly environments and launched a Covenant on Demographic Change. Together, we wanted to create the necessary political and technical framework to bring together local and regional authorities — and other stakeholders — willing to develop smart and innovative age-friendly environments. Our project, called AFE-INNOVNET thematic network for age-friendly environments, was selected for funding, and over the past two years we have expanded the network to some 350 stakeholders, developing guidelines and tools to help public authorities build their capacity to promote and implement age-friendly environments and sharing examples of good practice that can inspire others. We have also worked very closely with the WHO, in particular its Regional Office for Europe, which has developed some practical guidance for

adapting the WHO Age-Friendly Cities and Communities Guide to the European context.

Launched officially on December 7, 2015, the EU Covenant on Demographic Change was established as an international nonprofit association under Belgian law. It is open to all interested parties — that is, local, regional, and national authorities, as well as civil society organizations, industries, research centers, and universities — based in an EU country or in a country associated with the EU HORIZON 2020 program that voluntarily commit to making age-friendly environments a reality in their communities and to sharing their experiences with other covenant members. Its vision is based on the 2013 Dublin Declaration on age-friendly cities and communities; its purpose is to support longer healthy and active life years by pooling and sharing the knowledge and expertise of the

WHO on age-friendly environments and by enabling interested parties to learn from each other's experience.

By helping local and regional authorities in particular to meet their demographic challenges in innovative and sustainable ways, the covenant is expected to play an important role in reducing geographical inequalities and in contributing to increased healthy life expectancy in Europe. Given the huge potential of Information and Communications Technology (ICT) and social innovation in supporting age-friendly environments — and by helping to mobilize local and regional actors who can pick up such solutions and deploy them across the EU — the covenant will also support healthy competition among Europe's silver economy actors.

The covenant will largely work virtually and will seize all relevant opportunities at EU and national levels—such as the Committee of the Regions' annual open days, EU presidency events, peer reviews, and so forth—to organize meetings and foster exchanges between its members. It will seek to become the EU affiliate program of the WHO Global Network of Age-Friendly Cities and Communities and feed into the WHO's Age-Friendly World online platform. ●

AGE Platform Europe (AGE) is a European network composed of 150 organizations directly representing more than 40 million seniors in the European Union (EU). AGE aims to voice and promote the interests of

the 190 million citizens ages 50+ living in the EU and to raise awareness of the issues that concern them most. AGE was established in 2001 to give a voice to older people in relevant EU policy debates through the active participation of their representative organizations in the platform's governing bodies and expert groups. Since its creation, AGE's work has been funded by grants from EU programs and membership fees paid by its member organizations.

AGE's vision is that of a society "for all ages" based on solidarity and cooperation between generations, a society where everyone is empowered to play an active part in society and enjoys equal rights and opportunities in all stages of life regardless of age, sex, race or ethnic origin, religion or belief, social or economic status, sexual orientation, physical or mental condition, or need for care.

For more information, visit www.age-platform.eu



Anne-Sophie Parent

Anne-Sophie Parent is Secretary General of AGE Platform Europe, a EU network representing directly 40 million people aged 50+ across the EU-28 which she has been leading since 2002. AGE aims to voice and promote the interests of the 190 million inhabitants aged 50+ in the European Union. Ms. Parent sits on various advisory committees set up by the European Commission: European Pensions Forum, European Health Policy Forum, member of the Advisory Board of Assisted Ambient Living Joint Programme, of the More Years Better Lives Joint programme, Financial Services Users' Group, Steering Group of the European Innovation Partnership on Active and Healthy Ageing.

HenPower: Using Animal-Assisted Therapy to Engage Seniors

"Next to blindness, loneliness is the worst thing you can have; it is a big affliction. It can destroy a lot of people. I know because I have been through it. At 87, hens are the biggest thing in our lives." –Ossie Cresswell, "hensioner"

When a predominantly female nursing home in the United Kingdom was challenged to more effectively incorporate male residents into the programming, the staffers started paying attention. Traditional nursing home activities like dancing, bingo, and arts and crafts were not engaging male residents. "A staffer noticed a dementia patient constantly referring to 'his girls,' and discovered he was referring to hens he used to keep in his youth," recalled Douglas Hunter, director of the project Equal Arts (a nonprofit aimed at improving the well-being of aging populations through creativity and art). What began as a simple way to get male residents more involved culminated in a social engagement project with far-reaching influence for all of the residents.

The HenPower project aims to get the elderly more socially engaged by involving them in the feeding, raising, and caring of hens. Resident volunteers develop a connection with each other in a way that they were not able to before the introduction of the hens. Known as "hensioners," participants not only benefit from the positive health effects associated with this sort of activity, but some go on to become advocates for HenPower across the country. Alan Richards began as a skeptic, claiming the hens would only "make a mess and attract foxes and vermin." After just a few months with the hens, Alan was speaking to schools and attending national conferences to promote

HenPower. "He went from a critic to one of our greatest spokespeople," Hunter remarked. "He's even won a Point of Light award from the Prime Minister for his work promoting the project."

Commenting on the project, one hen-keeping volunteer stated, "I mean, I used to see him [referring to another community member] just to say 'Good morning,' and now I class him as a personal friend. I've made a lot of friends through HenPower—not just in this scheme, but other places. I've made a lot of friends and it gets me out of the house." The social benefits were reported by nearly everyone involved in HenPower. Loneliness and isolation can be detrimental, with reports of loneliness being the health equivalent of smoking 15 cigarettes a day (Holt-Lunstad 2010).

Brenda, a participant in HenPower, was suffering from a severe bout of depression following the death of her cat of 12 years. Perhaps most devastating, though, was the fact that Brenda realized that she lacked the capacity to care for a personal pet. She found solace in hen keeping. During a school's visit to the hens, Brenda suggested a calendar with photographs of the children and the hens to raise funds. She claimed, "I feel that I was really listened to and that I was able to make a contribution. It might not have been much, but for me it was really important." Brenda became even more involved with the hens and found herself being social again, and her depression improved almost instantly.

A study on HenPower done by Northumbria University in 2014 found that the project combated loneliness and the loss of autonomy. The challenge of creating meaningful social engagement in communities of older persons is not new—nor are the benefits of animal-assisted therapy. Dogs, cats, and other animals have been used to combat the symptoms of loneliness, post-traumatic stress disorder, dementia, and similar conditions.

Parts of hen keeping can be physically demanding, but even residents who lack the ability to assist with the manual labor can find a part to play. A few of the spinoff activities include swapping ideas about caring for the hens, collecting the eggs to sell, painting pictures of hens, or simply being outside in the garden to enjoy their presence. Chicken-inspired artwork has become very popular with many residents. “We’re designing things with the chickens; we’re making flags at the moment.... We’ve got people on sewing machines, and we’ve got the arts and crafts and design thing,” described one volunteer. The evaluation by Northumbria University found HenPower to be “improving the health and well-being of older people, reducing depression and loneliness in older people, and reducing the need for antipsychotic medication.” Innovative projects like Henpower are changing and improving the way that we approach aging. ●

For more information, visit:
<https://equalarts.org.uk/>

*Gibert Ruiz, Intern
AARP Office of International Affairs*



1 Now in more than 40 care homes, HenPower creatively engages older people in arts activities and hen-keeping to promote health and wellbeing and reduce loneliness

2-3 The ‘Hensioners’ have found such fulfillment in keeping chickens that they not only look after them but even organise a hens ‘roadshow’ and take birds into other care homes and schools.



BUSINESS
OF AGING

SEEING A NEED FOR CHANGE

Neil Blumenthal | CO-FOUNDER AND CO-CEO, WARBY PARKER



PHOTO: ESTHER HAVENS

I knew from firsthand experience that it was possible to manufacture high-quality glasses for far less than the going market rate.

In a world that is changing faster than ever before in human history, we navigate an unbelievable amount of uncertainty and ambiguity. This holds true for minor things (They're upgrading iPhone software? Again!?) and major things (entire industries are dying and whole new industries are being born). The people best prepared to broker ambiguity and uncertainty are those who are passionate, because they are the ones who will find a way to get things done — and thrive — regardless of the obstacles before them.

Passion, of course, isn't the only ingredient for thriving; one must also know where his or her strengths lie. Over the course of my own work life, I've come to define "success" as just that: the point where a person's passions and strengths intersect. I've also found that people are more likely to encounter that point at a mission-driven organization — that is, an organization with a clearly articulated determination to do good in the world.

Six years ago, I was a business school student at The Wharton School of the University of Pennsylvania. One of my friends, Dave Gilboa, lost a pair of glasses. When he went to buy a replacement pair, he was startled at how hard it was to find a stylish, high-quality pair of prescription glasses that didn't cost as much as a round-trip ticket to London. We were on student budgets, and nobody in my group of friends was exactly jetting off to Europe on casual jaunts, so this was not only a startling problem but a practical one. Why was it so difficult to acquire such a basic tool for living?



1 Above: The Author and his fellow Warby Parker co-founders. From left to right: Jeffrey Raider, Dave Gilboa, Andrew Hunt, Neil Blumenthal.

2 Left: A seamstress in India wearing her new glasses

After classes, during late-night Thai food dinners and over beers at the local pub, I talked to Dave and our two close friends, Jeff Raider and Andy Hunt, about the glasses problem. On a pragmatic level, it made no sense — after all, glasses had been invented 700 years ago, so the technology wasn't exactly arcane. I also knew from firsthand experience that it was possible to manufacture high-quality glasses for far less than the going market rate.

Before enrolling at Wharton, I'd worked as the director of a nonprofit called VisionSpring. VisionSpring's mission is to distribute affordable glasses to people in the developing world — and not only to distribute the glasses but also to train entrepreneurs in low-income communities to give eye exams, educate their communities about eye health, and help customers obtain a pair of glasses that would help them learn, work, and contribute to their communities. I knew firsthand that the problem of vision impairment is huge: 703 million people worldwide could have their vision restored with a pair of glasses, and 90 percent of people living with uncorrected vision are in the developing world.



PHOTOS: ESTHER HAVENS

I also knew that the opportunity was huge. A pair of glasses can increase an individual's productivity by 35 percent and her monthly income by 20 percent. It makes intuitive sense: many jobs in developing nations — from weaving to farming — are reliant on good vision. A pair of glasses is an incredibly simple intervention that can make an enormous and immediate impact.

One example that comes to mind involves two brothers in their sixties that I met in Bangladesh. Toti and Omprakash Tewtia did everything together. They started a farming business together and raised their families together. (Between the two of them, they now have 15 grandchildren.) When I met them, the Tewtia brothers had three generations living in their homes — kids everywhere, playing and laughing. It was a lively scene.

As they grew older, their vision began to decline. When the highlight of your day is reading to your grandchildren, this is more than just

an inconvenience. Storytime began ending in headaches, and eventually stopped altogether when the brothers couldn't see well enough to read. When they were able to access eyecare and glasses, they were not only able to reinvigorate the nightly storytime, but they were also better able to identify pests on their crops and find treatments that would increase their yield.

Back home, my three friends and I spent hours trying to unravel the problem. Those conversations are what led us to launch Warby Parker, a company that would produce amazing prescription eyewear at affordable prices — \$95, including prescription lenses — while distributing a pair to someone in need for every pair sold. We started the company in 2010, and today we're proud to have distributed well over 1 million pairs to people in need.

We're often asked how it's possible — or, rather, how it could possibly make "good business sense" — to do

this. My response is that it wouldn't make good business sense not to do this. If the smartest and most talented people are drawn to work for companies that align with their values, then how could a company without strong values ever hope to thrive in a tumultuous economy? People who are passionate will do whatever it takes to get the job done, and these are exactly the kinds of employees a company needs now more than ever.

Although we built the buy-a-pair, give-a-pair model into our business from its very inception, we knew that it wasn't enough. My three cofounders (yep, those same guys from Wharton) and I put our heads together and mapped out a plan for how we could make Warby Parker a business that would make us excited to come to work every day. Coming from the world of nonprofits, I knew how important it was that my work feel meaningful, and my cofounders felt the same way. The ultimate goal: carve out a place that would never,





I believe that businesses will become increasingly mission-driven as the pace of change speeds up.

1 Community Empowerment Solutions entrepreneurs arranging glasses for sale in Guatemala

2 Toti and Omprakash Tewtia

3 A glasses customer in India

ever tempt us to hit the snooze button when we woke up at 7 a.m.

Out of those initial intentions grew our stakeholder-centric framework, which holds that every decision we make at Warby Parker must take our four stakeholders into account: customers, employees, the environment, and the community at large. When it comes to customers, we rely on the old golden rule and strive to treat them the way we'd want to be treated (this includes small things, like free shipping and returns, and big things, like delivering exceptional value and über-well-trained customer experience associates). When it comes to employees, we build a work culture that nurtures curiosity, rewards creativity, and provides endless learning opportunities (classes, training sessions, book clubs, speakers, and beyond). Warby Parker employees also engage with our communities on a local level — volunteering at like-minded organizations — and also on

a macro level, ensuring that our factories are audited by a reliable third party to guarantee fair working conditions. And finally, when it comes to the environment, we don't mess around: Warby Parker is one of the only carbon-neutral eyewear brands on earth.

Although it sounds simple to adopt a stakeholder-centric philosophy, it is actually fairly radical in the corporate world, where, legally, the shareholder has primacy. But I don't think it will remain an anomaly much longer. When my co-CEO Dave and I interview corporate job candidates — and we still interview each one — we hear, again and again, that the reason people want to work at Warby Parker is our mission. I believe that businesses will become increasingly mission-driven as the pace of change speeds up. Companies that hope to survive in an uncertain world will have to prove themselves worthy of the talent they attract. ●



Neil Blumenthal

Neil Blumenthal is a co-founder and co-CEO of Warby Parker, a transformative lifestyle brand that offers designer eyewear at a revolutionary price, while leading the way for socially-conscious businesses.

IMPROVING RETIREMENT READINESS

Alex Wynaendts | CEO, AEGON

and

Catherine Collinson | PRESIDENT, TRANSAMERICA INSTITUTE
EXECUTIVE DIRECTOR, AEGON CENTER FOR LONGEVITY AND RETIREMENT

What is certain is that the need for individuals and families to play a greater role in saving and preparing for a long retirement is only set to increase.

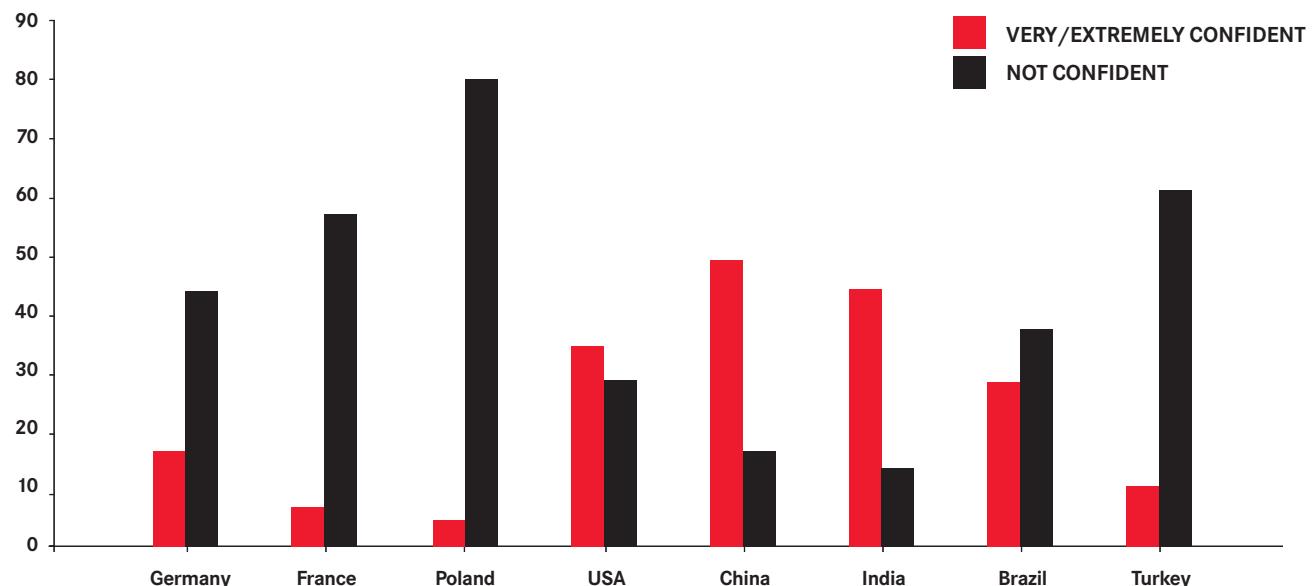
Today, people are living longer than at any other time in history. While this gift of increased longevity is a cause for celebration, it also poses profound and far-reaching challenges for society. Retirement can now last 25 years or more; combined with global population aging, this situation is putting a severe strain on retirement systems around the world.

How reforms will be implemented to ensure the sustainability of government pensions and benefit programs is uncertain. What is

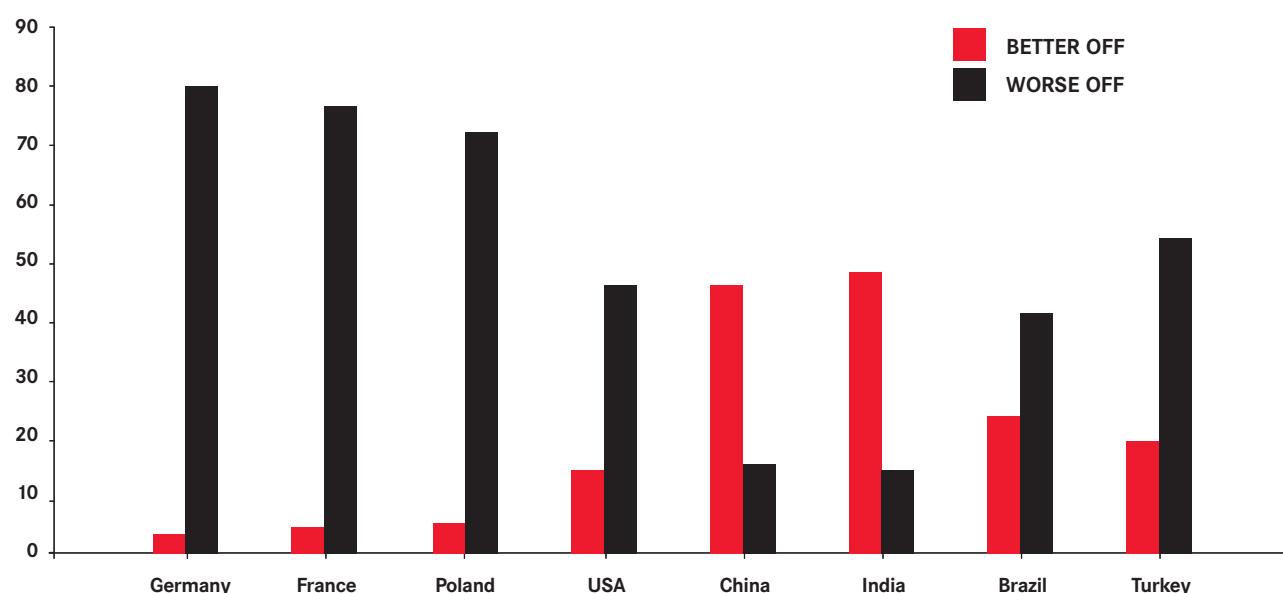
certain is that the need for individuals and families to play a greater role in saving and preparing for a long retirement is only set to increase. At the same time, this shift in responsibility is also creating unprecedented opportunities for financial services companies to meet customer needs.

Aegon exists to help people achieve a lifetime of financial security. But helping customers address their financial future can be challenging, and the reality is that retirement and pensions are not things people think about on a daily basis.

HOW CONFIDENT ARE YOU THAT YOU WILL BE ABLE TO FULLY RETIRE WITH A LIFESTYLE YOU CONSIDER COMFORTABLE?



DO YOU THINK THAT FUTURE GENERATIONS OF RETIREES WILL BE BETTER OFF OR WORSE OFF THAN THOSE CURRENTLY IN RETIREMENT?



This research is frequently referenced by the media, and informs public policy makers on matters related to enhancing workplace benefits and retirement security.

The extent of this lack of interest and understanding about preparing for retirement differs by country, with our research showing “retirement readiness” is highest in India and lowest in Japan.

We are passionately committed to creating and sharing value for our customers, our local communities, and the global community. To fulfill this role we need to draw insights from across the world, and for this reason we established two research organizations to help inform a global dialogue on aging, longevity, and retirement security: Aegon Center for Longevity and Retirement, based in The Netherlands; and Transamerica Institute®, a nonprofit private foundation comprising Transamerica Center for Retirement Studies® and Transamerica Center for Health Studies®, based in the United States. Plans are also under way to launch the Mongeral Aegon Longevity Institute in Brazil in 2016.

Aegon Center for Longevity and Retirement and Transamerica Institute's research and outreach are firmly rooted on two basic principles. First, that there is no such thing as an “average” individual or family.

Second, that everyone deserves the opportunity to make informed decisions about matters that can improve their health and wealth and, ultimately, to enjoy a secure retirement. This research is frequently referenced by the media, and informs public policy makers on matters related to enhancing workplace benefits and retirement security. It also serves as a basis for educational outreach activities in countries where Aegon has a presence.

Aegon Center for Longevity and Retirement and Transamerica Center for Retirement Studies conduct annual surveys to assess retirement-related expectations and levels of preparedness, provide demographic segmentation analysis, and offer recommendations to help people improve their retirement outlook. The Aegon Retirement Readiness Survey, now in its fourth year, encompasses workers, retirees, and homemakers in 15 countries around the world, spanning the Americas, Europe, Asia, and Australia. The Annual Transamerica Retirement Survey, one of the largest and longest-running surveys of its kind in the United States, includes

workers, employers and, for the first time in 2015, retirees.

An important research study published by Aegon's Center for Longevity and Retirement is the Retirement Readiness Survey 2015: Inspiring a World of Habitual Savers. Its main finding is that there exists a cohort of workers who are well prepared for retirement — the so-called habitual savers. These workers, who always make sure they are saving, are also more active in planning for retirement, and are more likely to describe themselves to be in better health than those not saving for retirement. This finding highlights an opportunity to convert non-savers into habitual savers, thereby improving their financial situation and potentially their quality of life in retirement. For some individuals, a higher discretionary income can inspire increased saving. For others, simply making it more convenient to save through availability of employer-sponsored retirement plans and automatic features can help bring about positive change.

The 16th Annual Transamerica Retirement Survey offers a unique perspective about Americans during their working lives and into retirement, and has been the source of a number of publications. One of them, Retirement Throughout the Ages: Expectations and Preparations of American Workers, reveals the generational differences, issues, and opportunities of workers in their 20s, 30s, 40s, 50s, and 60s and older. Workers in their 20s and 30s, in particular, have strong savings rates but need to learn more about investing for retirement. “Financially frazzled” workers in their 40s are largely disengaged from the subject of retirement at the very age when they should be

fully focused. Workers in their 50s and 60s are planning to work past the age of 65 to address savings shortfalls but are without a backup plan if forced into retirement sooner than expected. Another publication, *The Current State of Retirement: Pre-Retiree Expectations and Retiree Realities*, illustrates the effects of the shifting retirement landscape, together with the challenges faced by age 50+ workers and retirees, such as inadequate savings, employment issues, and the need to make difficult lifestyle tradeoffs in order to help ensure that their savings last their lifetimes.

A major implication of global population aging is the increasing need for caregiving and for caregivers. Aegon Center for Longevity and Retirement and Transamerica Institute, together with Aegon and Transamerica, collaborate with other nonprofits and academic organizations focused on caregiving and aging, including Global Coalition on Aging, Leyden Academy on Vitality and Ageing, Milken Institute's Center for the Future of Aging, ReACT Coalition, Stanford Center on Longevity, and WISER. In collaboration with MIT AgeLab, Transamerica published *The Caregiver's Guide to Financial Planning in the Shadow of Dementia*, which deals thoughtfully with what is, of course, a very sensitive topic.

No single entity alone — be it employers, governments, nonprofits, social enterprises, or financial institutions — can solve all the challenges around global aging and financing retirement. We, for our part, play an

important role through conducting research and developing the right products. The solution, however, lies in working together, and we are enthusiastic participants in this global debate. ●

Aegon is an international life insurance, pensions, and asset management company with businesses in over 20 countries in the Americas, Europe, and Asia. Aegon employs 28,000 people and serves millions of customers worldwide. www.aegon.com

Aegon Center for Longevity and Retirement is a collaboration of experts assembled by Aegon, with representation from Europe, the Americas, and Asia. Its mission is to conduct research, educate the public, and inform a global dialogue on trends, issues, and opportunities surrounding longevity, population aging, and retirement security. www.aegon.com/thecenter

Transamerica Institute® is a nonprofit, private foundation dedicated to identifying, researching, and educating the public about retirement, health coverage, and other relevant financial issues facing Americans today. Transamerica Institute comprises two divisions: Transamerica Center for Retirement Studies® and Transamerica Center for Health Studies®. Transamerica Institute is funded by contributions from Transamerica Life Insurance Company and its affiliates, and may receive funds from unaffiliated third parties. For more information about the institute, please refer to www.transamericainstitute.org.



Alex Wynaedts

Alexander R. Wynaedts is CEO and Chairman of the Executive and Management Board of Aegon, a leading provider of life insurance, pensions and asset management operating in more than 20 markets internationally. Appointed to his current position in 2008, he has spent over 30 years in international finance and insurance.



Catherine Collinson

Catherine Collinson is President of Transamerica Institute, a nonprofit, private foundation dedicated to conducting research and educating the public about retirement, health coverage, and other relevant financial issues facing Americans today. With two decades of retirement industry experience, she has become a nationally recognized voice on retirement trends. She also serves as Executive Director of the Aegon Center for Longevity and Retirement. In 2015, she joined the Advisory Board of the Milken Institute's Center for the Future of Aging.

HEYDAY FOR OLDER KOREANS

Benjamin Hong | CEO OF CIGNA KOREA (LINA)

The senior landscape is changing rapidly. According to the recent report from the World Health Organization, the number of people ages 60 and older is expected to double by 2050 — a figure influenced by rising life expectancy and declining fertility rates. The aging population in Korea is one of the fastest growing in the world — the percentage of elderly (those persons over age 65) was 13.1 percent in 2015, and that percentage is expected to grow 37.4 percent by 2050.

Although aging presents a great burden for existing models of social support, it also represents a triumph of new opportunities for the silver economy. Aging populations have strong needs for healthy lifestyle and social activities that are currently unmet. Half of the retired population lacks a clear idea of how to spend their lengthened lifespans after retirement, primarily due to lack of support systems and information.

For the 50+ age group in Korea, Cigna Korea¹ ambitiously started a membership program/service that provides a communication platform to support members' active senior days, with a goal to become the eminent brand for that group.

Confronting recent insurance industry challenges (i.e., strengthened regulations, severe market competition, changing customer behavior), Cigna Korea recognized a way for it to differentiate itself. After a mass database leak in 2014, customers became concerned, and regulations were strengthened around privacy information. A need for an independently owned database acquisition platform — as opposed to relying on a third-party mass database exchange — was found to be a crucial factor as the next growth model. To support customers to make the purchasing decisions themselves, Cigna Korea had to hold a stronger brand, offering differentiated benefits to support their choice. This is how we came up with the idea of an engagement platform for the age 50+ population.

For the 50+ age group in Korea, Cigna Korea ambitiously started a membership program/service to support members' active senior days.

Heyday² offers its members owned and curated content, good and services provided via affinity partners and is developing customized insurance plans. To enforce Heyday's position in holistically supporting its members' well-being — social well-being, lifestyle and travel, and financial security — we will continue to build membership benefits to enhance members' experience and interaction with Heyday.

For Cigna Korea, Heyday is an emerging new DTC (Direct To Customer) channel to secure its own membership base, reducing potential risks around privacy information, and to serve as a platform to acquire loyal and qualified prospects cost-effectively.

Heyday is a new initiative with great customer-engagement potential. (1) Heyday offers discount services for health checkups and free samples from top-market players. (2) Heyday's owned media — its online contents platform as well as its offline magazine



1 Members receive *Heyday*, a life care magazine for the 50+.

2 Heyday coordinates diverse offline events such as "Heyday Camp," a program that provides stress relief to mental health workers.



— provides meaningful engagement with sponsors and key opinion leaders in the country. (3) Heyday coordinates diverse offline community events for target's healthy life, for social contribution and participation. (4) In partnership with Korail, Korea's official train business line under Ministry of Land, Infrastructure, and Transport, Heyday offers member-exclusive transportation cards. The Korail deal includes transportation passes and parking lot and car/bicycle sharing discount services.

Cigna's corporate vision is "to help the people we serve improve their health, well-being, and a sense of security." To execute Cigna's business focus for customer centricity, Cigna Korea developed Heyday, which creates new value and contributes to a healthy society. Heyday is off to a good start and aspire for Heyday to grow as an eminent brand for the 50+ Koreans. ●

¹ Cigna Korea(LINA) is part of the Cigna Corporation, a global health service company with more than 220 years of experience, holding more than 86 million customers in over 30 countries. Cigna Korea is a life insurance company in Korea, with expertise in innovative products and TM business with sustainable growth.

² Heyday is a membership program/service Cigna Korea offers for the age 50+, to support the well-being of members holistically in health, social well-being, lifestyle and travel, and financial security.



Benjamin Hong

Ben Hong as CEO of LINA(Cigna Korea) has successfully led years of business growth and expansion as an innovative market leader. He brings 30 years of diverse, multi-national business experience in the financial services industry, including Sun Life Financial, MetLife, and Prudential, with a primary focus on the global insurance marketplace. Ben attended Baruch College, The City University of New York, USA, where he earned a Bachelors of Business Administration degree in marketing management and a Masters of Business Administration degree in Finance.

GROWING OLDER IN AUSTRALIA

Philip Taylor and Michael O'Neill | NATIONAL SENIORS AUSTRALIA

As Australia ages, the social and economic challenges—and the oft-overlooked business opportunities—are obvious.

According to Australia's national anthem, we, its people, "are young and free," but increasingly ours is an aging society, with potentially profound economic and social implications. Australia's demographic landscape is set to alter dramatically. Its population is predicted to rise from 24 million today to 40 million by the middle of the century. As noted by the Australian federal government in its 2015 *Intergenerational Report*¹, Australians are living longer, having one of the longest life expectancies in the world. The report considers what Australia's population will look like in the middle of this century. Life expectancy at birth is projected to reach 95 years for men

and 97 years for women by mid century, compared with 82 and 84 years today. Remarkably, there are projected to be 40,000 Australian centenarians by 2050. The proportion of the population ages 65 to 84 years is projected to more than double, from 3 million today to 7 million, and those over 85 years old are projected to represent 5 percent of the population, or nearly 2 million. Also of note, the Australian workforce is getting older. For instance, workforce participation among those ages 65 and older is projected to increase markedly, from 13 percent presently to 17 percent. Therefore, as Australia ages, the social and economic challenges—and the oft-overlooked business opportunities—are obvious.

This gargantuan shift in the demographic profile of Australia will alter the nature of advocacy on behalf of older people—from serving the needs of, arguably, a disadvantaged minority to representing the interests of an increasingly vocal majority with considerable social and economic influence. National Seniors Australia (NSA) is the consumer lobby for older Australians and the fourth-largest

organization of its kind in the world. It is almost 40 years old and boasts more than 200,000 members, 140 branches, and 70 employees. Its core mission is to further the interests of citizens ages 50 and older and to create a better place for all Australians to grow old in. As a membership organization, NSA is able to influence government policy at both the state and federal levels. NSA undertakes considerable advocacy on behalf of Australia's "over 50s" in diverse areas of public policy, such as health care, social security and tax reform, and labor market policy. It also has an active research program—jointly funded by NSA and the Australian government—that tackles issues of importance to older Australians. The outcomes of this research have included the development of online tools to (a) support individuals as they plan for their retirement, (b) help employers in managing an aging workforce, and (c) measure the economic and social contribution of older Australians.

NSA's activities increasingly emphasize the opportunities presented by population aging. According to the Australian government's Intergenerational Report: "Harnessing future opportunities to support innovation, adopt new technologies, facilitate foreign trade and investment, and foster competition can boost future productivity growth and living standards." NSA believes that greater industry attention to designing products and services with older people in mind could not only contribute to economic growth but also, importantly, change how

growing older is viewed by society. Older people already exert considerable power as consumers, with the "silver dollar" contributing enormously to the Australian economy; as the population ages, this influence will only increase. NSA is collaborating with the superannuation industry, health care providers, and the retail sector in order to help them better meet the needs and aspirations of older people, and plans much more work in collaboration with industry. For instance, as one of the region's major economies, Australia is well placed to contribute to increasing the well-being of older people living in our neighboring nations. Therefore, NSA is planning work that will consider the potential role of Australian business in meeting the needs of aging Asia.

A changed perspective on population aging—from one centered on a crisis of welfare to one that considers the potential economic and social opportunities—shifts the debate from dependency in old age to active contributions to society. There remains important work to be done in support of vulnerable older Australians, of whom there are many, but by focusing on how business can better serve the older consumer, NSA believes that a change in perceptions of older people will follow. ●

¹ The Treasury (2015), 2015 *Intergenerational Report*, Commonwealth of Australia.



Philip Taylor

Philip Taylor is director of research at National Seniors Australia, the consumer lobby for Australians aged 50 and over. He has held several senior university positions. He has a PhD in Applied Psychology from Cranfield University.



Michael O'Neill

Michael O'Neill is the chief executive of National Seniors Australia. Before joining the organization in 2006, he headed up representative bodies in the agricultural and mining sectors. Michael has an economics degree from the University of Queensland.

THE AARP INNOVATION FUND

Scott Frisch | CHIEF OPERATING OFFICER AND EXECUTIVE VICE PRESIDENT, AARP

AARP needed to do all we could to become an effective outside force to encourage needed investment.

Isaac Newton's first law of motion tells us that a body at rest will remain at rest unless acted on by an outside force. We believe that our first-of-its-kind AARP Innovation Fund will provide the outside force needed to spur private-sector investment in innovative products and services focused on improving the lives of people ages 50 and older as well as those of their families.

We all know the world is aging. Think about this: of everyone who ever lived to age 65 since the dawn of humans, two-thirds are walking the earth today! By 2050, 22 out of every 100 people on earth will be ages 65 and over. By 2030, the number of Americans 65 and older will have nearly doubled to some 72 million—that's 1 in every 5 of us. One in 3 Americans will have celebrated their 50th birthday.

What too many have yet to realize, however, is the fact that the way people are aging is also changing dramatically here in the United

States and throughout the developed world, thus creating among those who are ages 50 and older vast new needs and interests — along with vast new opportunities for private enterprise.

Better nutrition, medical care, and lifestyle choices are offering us an opportunity for an additional 25, 30, or more years of being independent, active, and creative. It really is no exaggeration to say that a whole new life stage is being added to our lives between middle age and what we used to think of as "old age." But we will need more solutions and options to help get us there, and today we're not seeing enough private-sector investments and innovations that are focused on our 50+ populations.

We decided that the interests of our members would not allow us to sit back and wait. AARP needed to do all we could to become an effective outside force to encourage needed investment.

The AARP Innovation Fund will provide startup capital to innovative companies. We are partnering with JP Morgan Asset Management in this initiative and will be committing \$40 million to the fund over 3 years. We are focusing the fund on three health care-related areas.

Health care is an area where the needs of our 50+ populations and the opportunities for investment converge. Our 50+ citizens will be searching for new and better tools and technology to help them stay healthy, independent, and productive as they age. Many of the innovations necessary to meet the needs of our 50+ populations are only in the early stages of development — or do not yet exist.

Here in the United States, our 50+ community accounts for \$3.1 trillion in consumer spending, and \$1.6 trillion of that amount is on health care. Health-technology products and services could benefit as many as 160 million consumers



1 AARP CEO Jo Ann Jenkins (left) and Kathy Rosa, Managing Director and Portfolio Manager, Private Equity Group, JP Morgan Asset Management (right) at the launch of the AARP Innovation Fund

and represent \$30 billion in new revenue over the next 5 years, according to a Parks Associates report¹.

Specifically, the three health care-related areas of our focus are the following:

- Aging at Home — Development of products and services that use technology to enable older adults to continue living in their homes safely and affordably, such as: home sensor activity tracking; hearing and vision health; mobility assistance; meal plan, delivery, and cooking solutions; social communities; and physical augmentation devices.
- Convenience and Access to Health Care — Advancement of products and services that enable 50+ consumers to adopt positive health behaviors, such as: telemedicine, consumer diagnostics, and consumer care transparency tools.
- Preventative Health — Expansion of the market for products and services that help 50+ consumers prevent the onset of serious health conditions, such as: diet and nutrition management, stress and emotion management/therapy, fitness apps and programs, integrated health engagement incentives, and cognitive and brain health.

JP Morgan Asset Management's Endowments and Foundations Group and Private Equity Group have been designated to review potential investment opportunities. AARP then reviews each recommendation to ensure that it meets the three investment themes and complies with AARP's public policies. AARP also has the opportunity to recommend companies to JP Morgan for its evaluation. Companies in the fund's portfolio have access to AARP's knowledge and distribution channels.

The recipient of the first investment made by the AARP Innovation Fund, announced in December 2015, was One Medical Group, a US leader in technology-enabled primary care. In addition to operating physical locations, One Medical Group uses broadband and mobile technology to give its members virtual access to health care providers and resources through features such as same-day appointment booking, prescription renewals, messaging, and digital dermatology. One Medical will use the investment to expand its digital health offerings.

Companies from around the world are eligible. For more information, visit the AARP Innovation Fund website at www.aarp.org/innovationfund. ●

¹ AARP and Parks Associates, Health Innovation Frontiers Report, September 2014



Scott Frisch

Scott Frisch, AARP's Chief Operating Officer and head of the Operations & Finance Group, is responsible for AARP's financial activities, information technology (IT), human resources services, data and analytics, and administrative and support services. He ensures that the operational and financial infrastructure of AARP runs smoothly and efficiently.

Romeo Cares for Juliet? French Led Project Gives Robots a Role in Caregiving

An often-noted future challenge of demographic change is the gap created by a decreasing labor supply for caregiving jobs and an increasing demand for workers in the sector. In the US, for example, the number of direct caregiver jobs is projected to increase by 21 percent by 2022, while the number of likely workers will be constrained and lower.

In addition to improvements in medicine, the reorganization of work, and the development of services for older persons, robotic applications may contribute to a better, safer life for older persons and could help to reduce pressure on caregiving structures and their employees.

Robots are already common in modern industrial production chains, and this trend is now shifting toward the service sector. According to the World Robotics Survey 2015, global sales of privately used service robots will reach about 35 million units by 2018. Within this growing sector, the market for robotic assistance for people with support needs is expected to see a substantial increase within the next 20 years; it already grew by 542 percent in 2014 alone.

One example of this progress in robotics is the collaboration among 16 international specialist-robotic firms and institutes that are working on the project “Romeo.” It is led by French company Aldebaran Robotics, which already has two advanced service robots on the market: Pepper and NAO.

Pepper, a social robot in a young humanoid shape (almost 4 feet tall), is designed to engage in conversation and to recognize and react to people's emotions. At 52cm, Nao is smaller, but it mimics humanlike movement—unlike Pepper, which rolls on wheels. Pepper has had some success in the customer service market, and NAO has worked well as an education engagement tool.

Romeo aims to combine the practical side of NAO's humanlike movement and Pepper's emotion detection

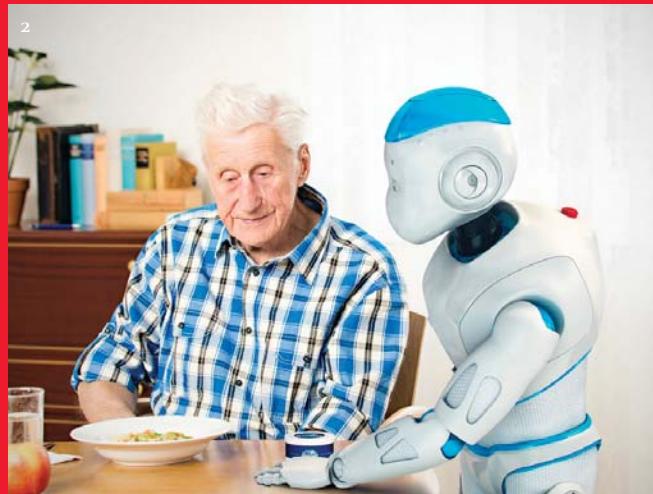
ability, and to match both robots' communication abilities. The result should be a 140 cm-high biped humanoid robot in a silver-blue friendly design; it will be able to walk, talk, and socially interact with people and react to their feelings and moods. In summary, Romeo's purpose is to assist in a variety of tasks, including providing general companionship, suggesting activities for people to do, and reminding people to take medicine or to keep daily appointments. It is also being designed to help with housework, pick up dropped objects, serve food and drinks, or even assist with cooking. If successful, Romeo could help older people to feel secure—it is able to call for help if needed—and to live independently.

However, Romeo also highlights the technological boundaries of such a project. According to Rodolphe Gelin, chief scientific officer of Aldebaran, the main challenge in the development process is a reliable and balanced walk, which is based on the increased size of the robot and its inertial consequences. Additionally, social acceptance by users is key for interactive companion robots. Current tests showed that user skepticism in the beginning diminishes after using the robot. A new evaluation focused on older people is currently in development.

Currently, Romeo is just a research development platform, though results of the Romeo tests would lead to even more advanced versions of NAO and Pepper. This is just one of many steps toward increasing the role of technology to assist with caregiving. However, as the developers make clear, Romeo and its offshoots shouldn't replace human workers; they should provide additional assistance when human caregivers aren't able to be around full time. The developers believe that a robot could never fully replace human interaction—and it should not try to do so. ●

For more information, visit: <http://projetromeo.com/en>

Jan Wilhelm Ahmling, Intern, AARP Office of International Affairs



- 1 Aldebaran robots (l-r) Nao, Romeo, and Pepper
- 2 Romeo's purpose is to assist in a variety of tasks, including providing general companionship, suggesting activities for people to do, and reminding people to take medicine or to keep daily appointments.

THE UNTAPPED OPPORTUNITY IN AGING

David Rothkopf | CEO AND EDITOR, THE FP GROUP



Rethinking our views on issues like retirement age and the distribution of social benefits will help to create a system adapted to the new reality.

Sometimes political inertia can be our friend. For decades it has been next to impossible to have a rational conversation about retirement health care finance in the United States—the subject was both too big and too sensitive for polarized political parties to discuss constructively. The problem grew as Americans aged and the funding deficits inflated.

Then, something remarkable happened: progress. Thanks to advances in medicine, improved health care, and new technologies, it has become clear that aging Americans, like older populations everywhere, are now on the verge of becoming one of the most powerful new economic forces on the planet. Rather than retiring,

older workers are positioned to bring their unequaled experience to the global marketplace in ways that were once impossible.

New technologies and the shift from a manufacturing to a service economy mean that, rather than retiring, older workers can now continue to add value for many more years, thus contributing to economic growth in ways unanticipated by economists—growth that could, in fact, help pay for the retirement health care needs of others. Actually, it is not inconceivable that older workers could be the ultimate answer to America's "retirement problem."

In 2000, there were 35 million Americans over the age of 65; today, there are nearly 50 million. By 2030, it is estimated there will be more than 70 million. Although citizens in this age range may have been viewed as a burden on the economy in the past, today it is reasonable to see them as a potential new workforce of tens of millions—a national resource that can enable us to actually capture and take advantage of accumulated experience that in the past was simply disappearing with retirement. Further, through telecommuting, even those for whom mobility is an issue will be able to contribute in meaningful ways. New programs embracing older workers as trainers can add value to existing businesses. Older workers pursuing entrepreneurial opportunities is also a growing likely contributor to the economy: in 2014 alone, 35 percent of new businesses were started by people over 50.

Naturally, older Americans who continue to work not only generate economic growth but also provide a growing tax base that can help offset retirement health

care costs. We also know that working longer is shown to aid in positive physical, mental, and cognitive health. And of course, they will be consuming more. The result is a win-win.

Of course, such an adjustment requires that the political classes who have avoided addressing these issues—even when they loomed primarily as threats—be open to discussing how the growth of our cadre of most experienced workers represents a new opportunity. It means rethinking our views on issues like retirement age and the distribution of social benefits so that a system adapted to the new reality is both more equitable and more fiscally responsible.

Further, as careers expand in duration from what was common at the end of the 19th century—perhaps 25 to 30 years—to what may be twice that, we will have to consider the need to rethink the nature of education. Lifelong learning is the best way to ensure that every generation—not only the young—have the tools to compete and to contribute to society.

Tensions may be part of this inertia as well. Younger workers may feel that they are being edged out of opportunities because workers who might have once left the workforce do not. They may also resent the idea of reverse agism, where their lack of experience is seen as an even greater burden (especially as some older workers offer less-expensive labor to companies because they are working part time or have different expectations and needs).

In the past, discussing even a simple common-sense question like “Should our Social Security retirement age be adjusted to reflect the



1 Presenting Foreign Policy's 2015 Transformational Trends and Global Thinkers

massive changes in life expectancy that have taken place since the system was established?” was considered a kind of third rail in US politics. The inability to address this issue has taken a toll and has created a generation of Americans confused and concerned about what they can expect in the future.

Now that new developments offer massive upsides as well as challenges, perhaps it will be less contentious—better yet, it should stimulate creativity among policy makers. While this idea seems like an oxymoron in our current political environment, as noted above, the private sector is not waiting to adapt. And as it sees the opportunities being created and develops new models and modalities of work, history suggests that the private sector will drag the political class into the future with it.

There is no reason to expect that this will be an easy transition. But both history and progress suggest that it is a transition that will come whether we are prepared for it or not. ●



David Rothkopf

David J. Rothkopf is CEO and editor of the FP Group, where he oversees all editorial, publishing, events, and other operations of the company, which publishes *Foreign Policy* magazine. He is also the President and CEO of Garten Rothkopf, an international advisory company specializing in global political risk, energy, resource, technology and emerging markets issues based in Washington, D.C.

The Future of Accessibility Innovation: Improving Quality of Life Through New Technology

The 2015 FP Global Demographics Student Essay Contest, underwritten by AARP, invited college and graduate students from around the world to participate in an intergenerational discussion about the opportunities presented by a rapidly aging world. Dozens of students from nearly every continent shared their ideas with FP. The winning essay is presented below.

The development of accessibility innovation products and services is the greatest opportunity presented by the aging trend to the global community. Not only is the market opportunity tremendously attractive, but the resources available to entrepreneurs and innovators — ranging from start-ups to small- and midsize enterprises to multinational corporations — to develop products and services aimed at people with disabilities have never been better. Age directly correlates with disability: As overall personal health declines with the development of acute and chronic diseases, such as diabetes, arthritis, cardiovascular diseases, and respiratory problems, disability rates increase. Seniors with a mobility disability may have difficulty walking up and down stairs, standing in one spot for prolonged periods, or moving from one room to another. Agility disabilities include difficulty bending down, dressing or undressing, getting in and out of bed, or grasping small objects. Hearing and vision disabilities include problems hearing or seeing other people, even in close contact. The primary goal and benefit of accessibility innovation products is to allow the aging global population to continue participating in the social and cultural life of their local community.

The major categories that present the greatest market opportunity for accessibility innovation are educational/instructional devices, hearing impairment

devices, vision and reading aids, and mobility aids. There are numerous products already on the market that are designed with accessibility standards in mind. Handheld computers and tablets, sensory integration devices, learning software, training software, scanning/reading pens, and speech-recognition software all assist seniors with digital learning.

Sophisticated hearing aids with digital microprocessors for audio impairment, and Braille translators, displays, screen magnifiers, and speech recognition tools for the visually impaired, are increasingly common. Home lifts, stair climbers, and door openers can be found in most seniors' homes and retirement residences. Innovation in this industry is driven largely by private sector research laboratories and nonprofit institutions, which continuously develop new products.

Leading American accessibility institution MIT AgeLab USA in Cambridge, Massachusetts, has recently unveiled the Age Gain Now Empathy System (AGNES), a robotic suit that can be worn and has been calibrated to approximate the motor, visual, flexibility, and strength requirements of a person in their mid-70s within retail, transportation, home, community, and workplace environments. Another example is the renowned iDAPT Centre for Rehabilitation Research-Toronto Rehabilitation Centre, which has focused on winter-footwear injuries related to falling on ice or

snow, a growing problem as the population ages. Toronto Rehab has designed winter boots and anti-slip devices with specialized insoles that enhance balance by heightening sole sensation for seniors. These novel, sophisticated products are the result of countless hours of research, studies, and testing, but as the number of elderly people approaches 2 billion globally, the growing demand means that more labs and institutions, with greater funding, will be required to keep pace with changing needs.

Besides needing shorter timelines for implementation in the future, accessibility products are also needed in developing countries, which are acutely underrepresented; they must be made more affordable to elderly people who do not have sufficient disposable income; and they must be produced using economies-of-scale production principles. Komodo OpenLab is an ideal example of what a feasible accessibility firm can look like in the future. Komodo develops inclusive technologies to facilitate the daily lives of people with disabilities. The company's first product, Tecla, developed through open-source collaboration, involves a set of operating system tools that helps make mobile devices more accessible.

Tecla allows people with disabilities to control their mobile device using interfaces they are already familiar with, such as wheelchair-driving controls or adapted switches. The set consists of a hardware component, sold online at a reasonable price, which makes it possible to connect switches or wheelchair driving controls to the mobile device and subsequently interact with a software component.



¹ Filip Borovsky, FP's Global Demographics Student Essay Contest Winner with Debra Whitman, Chief Public Policy Officer, AARP (left) and David Rothkopf, CEO and Editor, The FP Group (right)

This software app can be downloaded freely using a smartphone or tablet.

Tecla's global success can be attributed to several key factors. The first is that it is a very specialized, niche product that very few firms produce, but it can be transferred across the general accessible-technology market. A second factor is that Komodo OpenLab steers around funding agencies and marketing firms that decide whether a product is necessary or desirable, directly targeting the actual end user and consumer.

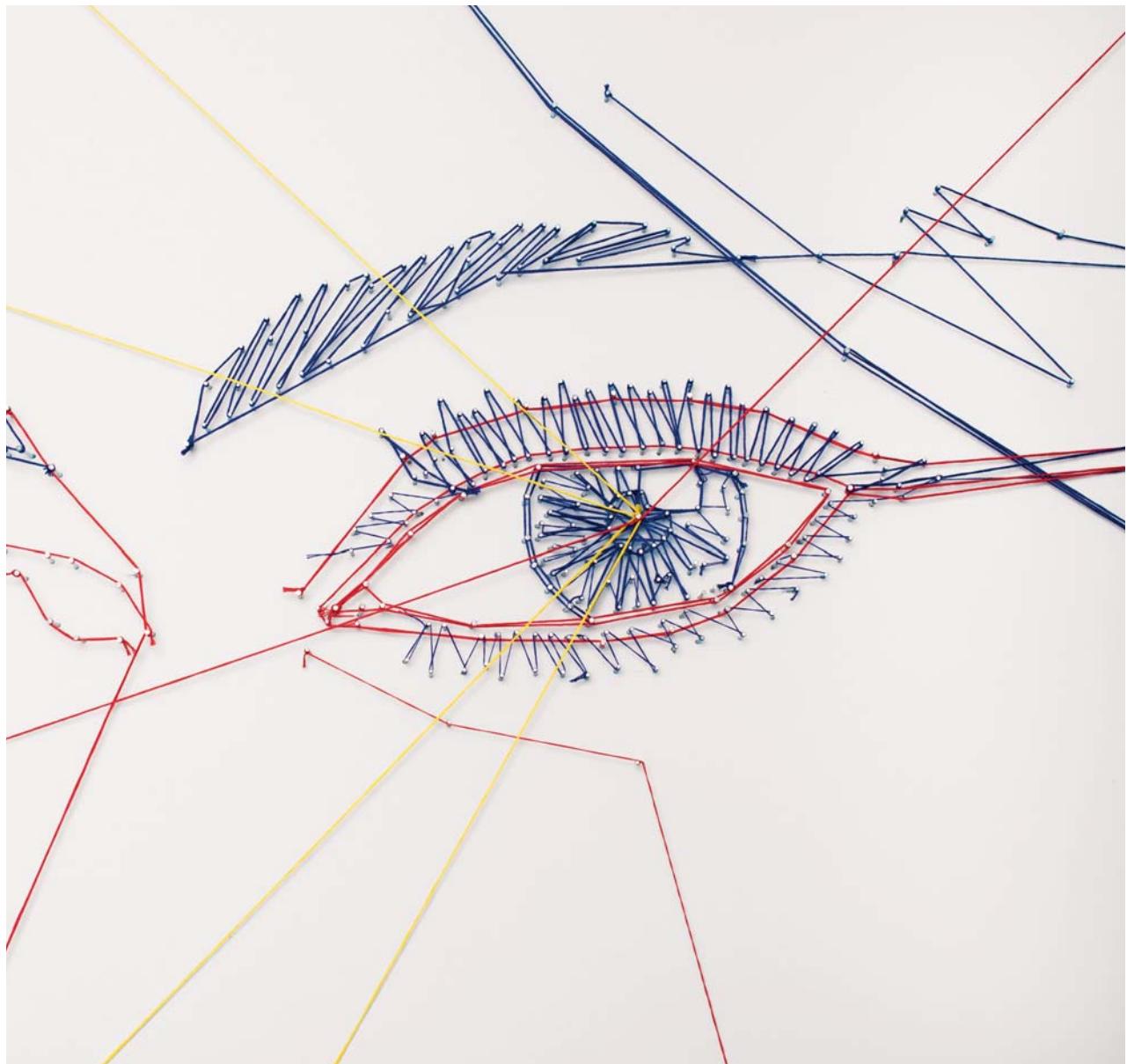
Investing in accessibility innovation for an aging population is not only a morally and ethically appropriate public policy, but it's the smart thing to do for the future. People

with disabilities are highly motivated to spend money in areas that significantly improve their quality of life or that contribute to their independence and social connectivity. Many seniors with disabilities have significant disposable income, as they no longer care for children and may already own a home. The potential value of designing and creating innovative products and services that address the needs of people with disabilities makes it a massive market opportunity. ●

Filip Borovsky, Winner, FP Global Demographics Student Essay Contest and Undergraduate Student, Munk School of Global Affairs at the University of Toronto

THE PROMISE OF AGING

Debra B. Whitman | CHIEF PUBLIC POLICY OFFICER, AARP



At least six months before the big day, my children start looking forward to their birthdays. They know that with each passing year, they not only will get a delicious cake, they also will have more opportunities and responsibilities. But that same perspective of growth and possibilities too often is lost as we age, and aging is viewed as a “problem” with which we must deal.

But aging is not a problem. It is a wonderful opportunity. In the last century alone, for much of humanity, life has been extended by 35 years or even more. And by the year 2030, globally, there will be more adults age 60 and up than children under 10. Nations have no choice but to start planning for longevity.

Yet our society has not adapted. Policymakers have not yet devised the kinds of supports and options that make sense for longer lives, and individuals do not yet know how to arrange their lives to make the most of these added years. However, if we view individual and population aging through the lens of growth and possibilities, we have much to gain.

Importantly, we need vision: Realizing the promise of aging is about no less than reweaving the fabric of society. We need to imagine new ways to work together for everyone’s benefit. This means rethinking social systems that too often isolate the old from the

Importantly, we need vision: Realizing the promise of aging is about no less than reweaving the fabric of society.

young, that fail to reap the benefits of intergenerational collaborations, and that assume older people cannot contribute.

In our vision, social policy should promote wellness, engagement and productivity throughout the lifespan. People of every generation should have the opportunity to interact and work together. Experience should be valued and utilized for everyone’s benefit.

Retirement should not be the end of an individual’s productive life. For a great many people with the ability and desire to stay active, retirement is an outdated concept that no longer makes sense. Whether as a paid employee or unpaid volunteer, many older individuals want to be productive and meaningfully engaged.

This cannot happen unless societies address harmful and misguided attitudes about what it means to be old. We have named racism as an evil. We have identified sexism as an injustice. Ageism

So the evidence is compelling: Societies should do more to capture the benefit from all that older individuals have to offer, and not just in the workforce but in all walks of life.

is equally dehumanizing and unfair, yet it is tolerated far too often. Societies will benefit by forcefully rejecting age-based prejudice and taking advantage of all that people have to offer. Stereotypes of dependent older people — and practices that foster dependence — are harmful not only to individuals but to larger communities.

If we continue to tolerate ageism in the workplace, we are robbing ourselves of the potential gains from embracing experienced employees. These workers pay back their organizations with skill, institutional knowledge, maturity and reliability. Employers should play a leading role in recasting the issue of aging by recognizing the value of experience and taking steps to optimize it, such as by encouraging mentor-mentee relationships and teamwork across generations.

Fortunately, there is a growing list of employers who have established the business case for supporting experience in their ranks, and AARP is encouraging such organizations through our program of Best Employers International. Winners have come

from many regions and economic sectors. What they share is a recognition that meeting the needs of older employees, such as through flexible work schedules, fitness programs and good health care benefits, helps them maintain a competitive edge.

Research backs this up. Studies have shown that age-diverse teams can be more productive, often bringing out the best in all workers. And the benefits of an older workforce can actually provide a boost to national economies. According to the U.K. Department of Work and Pension, if their nation's labor force were to stay on the job one year longer on average, Real Gross Domestic Product would grow 1% over a six year period.

So the evidence is compelling: Societies should do more to capture the benefit from all that older individuals have to offer, and not just in the workforce but in all walks of life. Countries need to do a far better job of capturing the insights and learnings that only come from experience.

Public policies should play an important role here, but often,

they are fragmented or misguided. Instead of targeting separate policies on the young and old, countries should adopt a more holistic, life-course approach that recognizes that supports in childhood can have a beneficial effect throughout life. For example, access to education and health care in youth typically benefits individuals and society for many years in the form of longer and healthier lives.

And these kinds of supports should not just stop at a certain age. Consider something as basic as education. Societies can do much more to support learning as a lifelong endeavor, and they will be rewarded with a more productive older population.

Policymakers also should focus more on the gap between the healthspan — the period of life in which people are fit and active — and the total lifespan, which may include later years in which individuals contend with serious chronic conditions. Our goal should be to ensure that the healthspan can endure almost as long as the lifespan.

Globally, we are overdue in recasting the issue of aging. World leaders need to wake up to the fact that population aging is a defining feature of life in the 21st century and develop new ways of thinking.

We need creativity. Technical innovations have changed the way we work and play, but social innovations can have an equally big impact on our lives. Realizing the opportunity aging presents to the individual and to their community requires creative solutions, innovative thinking, and a willingness to challenge the status quo around not only work and play, but also issues like housing, transportation, and social interactions.

This is a serious issue, because aging affects everything. Yet the challenges related to the demographics will remain intractable until we discuss solutions and think about the world's changing age makeup in a whole new way.

The most effective strategies will involve everyone — and help everyone. Real solutions will benefit all generations. ●



Debra B. Whitman

Dr. Debra Whitman is AARP's chief public policy officer, leading policy development, analysis and research, as well as global thought leadership supporting and advancing the interests of individuals 50-plus and their families. She oversees AARP's Public Policy Institute, Research Center, Office of Policy Integration and AARP International.

She is an authority on aging issues and has extensive experience in national policymaking, domestic and international research, and the political process. An economist, she is a strategic thinker whose career has been dedicated to solving problems affecting economic and health security, and other issues related to population aging.

SPOTLIGHT

KIRK DOUGLAS

**NAME:** Kirk Douglas**THOUGHTS ON TURNING 99:**

I celebrated my 99th birthday on December 9, 2015, surrounded by family, friends, and Anne, my beautiful wife of 62 years. What a lot of history I have lived through in nearly a century. In 1916, women still couldn't vote. I was four when the Nineteenth Amendment finally passed. Today, I am encouraged to see female Presidential candidates!

CURRENTLY READING: I have been immersing myself in the letters that my wife has saved over our long marriage for a new book I am working on. I am amazed that she kept so many letters I wrote her and even letters she wrote to me. There are letters from my friends like John Wayne, Frank Sinatra and Lauren (Betty) Bacall. There are many from royals and statemen, and every president from JFK to Barack Obama. It will be the fourth book I've written since turning 90!

RECENT TRAVELS: My last trip was to attend my grandson Dylan's Bar Mitzvah, but it has to be something as special as that to budge me from my comfortable homes in Beverly

Hills and Montecito (Santa Barbara).

VIEWS ON IMMIGRATION: My parents—illiterate Russian Jews fleeing pogroms—built new lives in the small upstate New York factory town of Amsterdam. All of their children were born in the land of opportunity. It pains me to see politicians today fomenting hatred towards people they consider “others.” I was and remain a great admirer of John F. Kennedy, who wrote the bestselling “A Nation of Immigrants” to explain the benefit of adding people from many ethnicities and backgrounds to the American melting pot.

FAVORITE TRAVEL MEMORY: Of course, I was constantly on the go in the past, making films all over the world. But the traveling I treasure most were my trips to numerous countries at my own expense as a goodwill ambassador for the United States Information Agency (USIA). I met with world leaders; I wandered unofficially in rural areas; I talked with students and their teachers at schools and universities. For this, I received the Medal of Freedom, America's highest civilian honor, from President Jimmy Carter.

WORK WITH THE ALZHEIMER'S UNIT AT THE MOTION PICTURE AND TELEVISION FUND CAMPUS:

Years ago, Anne and I funded “Harry’s Haven,” named after my father who didn’t have the disease. We wanted to create a safe environment and a pleasant one for families visiting their loved ones. All in all, we’ve donated \$45 million to the MPTF for various projects because it takes care of people in the entertainment profession—and not just the successful ones. “Harry’s Haven” will be incorporated into the new Kirk Douglas Care Pavilion which breaks ground in 2016.

ALL-TIME FAVORITE ROLE: I am probably best known as Spartacus, but my favorite movie of all was “Lonely Are the Brave.” It was written by my friend, Dalton Trumbo, who also wrote “Spartacus.” He and his family suffered greatly. He defied the House Un-American Activities Committee by refusing to accept the Committee’s right to know his political affiliations and those of his friends. This was during the Communist witch hunt years known as the “Red Scare.” Studios imposed a blacklist and demanded a signed loyalty oath from anyone employed there, yet everyone knew that writers such as Dalton Trumbo were continuing to work under phony names and at reduced compensation. I am very proud that I was able to put Dalton’s true name on “Spartacus” which helped break the blacklist.

ADVICE TO TEENAGE SELF: Looking back at my remarkable life, I would tell my teenaged self to keep pursuing the dream of acting, because sometimes dreams come true if you work hard enough. I would tell him that coming from nothing was a great advantage, because there is only one way to go—up. ●



AARP aims to help people live longer, healthier, more financially secure and productive lives by identifying the best ideas and practices on key policy issues. We convene international opinion leaders and policy makers to share their expertise and develop research on health and long-term care, older workers and retirement income, and livable communities. Through our international program, AARP fosters this global collaboration and, in the end, acts as a collaborator and catalyst to governments and decision makers in all sectors to help address and favorably shape the social and economic implications of aging worldwide.

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