

Ageing

Keynote Session theme: “Ageing in the technological era”
Gerontech and Innovation Expo cum Summit
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Ladies and Gentlemen, Friends and Colleagues,

It is great to be here today with all of you – and I love how diverse the participants are, coming from private sector, entrepreneurs, government, health agencies, investors, community services. The fact that we are all gathered here, from across disciplines, is a testament to the fact that we collectively, as a community, share responsibility for healthy ageing.

Even though I have spent my career in public health, as a student I studied philosophy. I always found it fascinating that human beings, as a species, are unique in our ability to enhance our capabilities. We are not the fastest animals. Cheetahs far exceed our ability to run fast. But we can design cars and planes and rockets and we can move faster than we can on our own. Unlike an octopus – if we injure our leg, we cannot grow a new one. But we can manufacture prosthetics and walk and run and jump as if we had grown a new leg.

We are able, when we bring together our collective strengths, to solve complex problems in ways that enhance and extend our experience here on this earth.

It is exactly that kind of collective work that is needed for healthy ageing.

But, unfortunately, we’re just not yet doing it well enough.

We live in amazing times. In many regards, our collective health is strong. Today, for the first time in history, most people can expect to live into their sixties and beyond. And that is wonderful.

But it is, in many ways, only half the challenge.

We want to do more than survive – we want to thrive.

Living longer should mean that we have more time to engage in activities that we enjoy, and with people we enjoy. Yet this depends heavily on one factor: health.

Let us think back a few months. Earlier in April, WHO and its partners sought to raise awareness of the condition of depression, which was the theme of this year’s World Health Day. We estimate that 322 million people of all ages suffer from depression in the world, 54 million of which are in China alone. As with other illnesses and diseases, depression levies an unacceptably high burden on both the individual and society.

I mention this today because too many of those suffering from depression are elderly people – 7% of the elderly population. As people get older, their ability to do the things they love to do – having a conversation with friends, listening to music, playing in the park with grandchildren – tends to decrease. Their worlds shrink – physically, they are more limited and less independent. Socially, they can become isolated or feel that they are a burden on their friends and family who need to care for them.

In short, we are not doing our collective best to provide them with healthy ageing options.

First, we need to start by unleashing innovations in services and care that will meet the unique needs of older populations and strengthening long-term care. This includes ensuring affordable access to older people-centered services.

In Shanghai, for example, automatic bath machines have been widely introduced to community care centers. These machines can comfortably and safely clean the body of a disabled person in 5 minutes. Ongoing

technological development has led to a decrease in the cost of this machine which, in turn, has led to an increase in uptake. Previously, at least 3 care providers were needed to give one bed-ridden elderly person a bath – one to carry the patient, one to clean, and one to manage the water. But with this new technology, only one care giver is needed to quickly and safely bathe the elderly person.

There is a huge potential for wearable devices that can be worn like a watch that help elderly people stay independent and family and caregivers can keep track of what's happening. Detecting falls, or a rise in blood pressure and summoning help. Other devices like pillbox sensors monitor people with Alzheimer's and dementia from afar.

Furthermore, while just a few years ago the idea of driverless cars was firmly in the realms of science fiction, now they could be on the roads by next year. This could transform the lives of elderly people, some of whom are virtually trapped in their own homes because of poor or inaccessible public transport.

While there already exists a wealth of innovative technologies to enable the older population to maintain their health and retain their dignity, there are huge gaps in availability and access. And this is not just for the most advanced products. Gaps exist for access to many of most basic assistive devices, such as hearing aids or wheelchairs. That is why bringing such technologies fully to scale, utilizing local production, and removing many unnecessary regulatory barriers are recommended ways to close the gaps.

Beyond services, we need to think about systems. There is no doubt that innovative technologies can improve the lives of older people. But innovative thinking can also contribute to changes in the platforms for service delivery as well as the long-term sustainability of health systems.

A new tiered health system could serve the older generation better. Health systems that rely on hospitals alone cannot meet the challenges posed by a rapidly ageing society. And in places such as China where one has to stand in line for hours very early in the morning just to take a number to see a doctor, the task of receiving care is made all the more cumbersome, especially for older people.

In contrast, home-based or community care – as opposed to hospitalization or no treatment at all – can provide the elderly with improved care and a greater sense of autonomy, at a reduced cost to the individual and the health system.

And when combined with innovative technologies that can provide a frontline of defense – devices that measure gait regularity, medication reminders, mobile phone apps that track patient indicators, internet linked doctor consultations – we reduce the burden on health systems and help maintain individual autonomy, health, and happiness.

For example, just the other day I heard that Alipay is piloting No Cash Hospitals, to improve efficiency of the seeing-doctor process in hospital, decreasing the time spent in hospital so as to improve the rate of antenatal checks. It's this sort of innovative thinking that could basically turn the health system upside down.

Finally, it's not just about health care services, apps, and technology. It's also very fundamentally about our built environments – the physical space in which we live – and how they can promote, or prevent, healthy ageing.

Cities play a huge role in the health of all of us – and especially our ageing populations. Quite literally, the physical environment can ensure seniors stay engaged – or it can block them.

The local shops, markets, the coffee or tea bar, places where people can go and talk... We are underestimating the influence of these local environments have, particularly on the older generations.

One of the most charming things that I see almost every day in China is older people getting their daily exercise by dancing in public squares or practicing tai chi in the park. Likewise, many public spaces have exercise equipment available free of use – a true innovation that I would love to see replicated elsewhere.

Not only does this provide opportunities to be physically fit, it also affords participants the opportunity to socialize – something that is essential to maintaining good mental health during the later stages of life.

The problem, however, is that many cities are not built with health in mind.

For example, poorly designed roads and pedestrian infrastructure can turn what would otherwise be a simple, short walk to the park or a pleasant bicycle ride into a tragic event.

Pollution can turn what would otherwise be a wonderful outdoor exercise session into a potentially cancer-inducing activity.

And poor public transportation or lacking wheelchair access can turn a trip to see the doctor into an overwhelming challenge.

That is why we say it is not enough for only the health sector to be involved in the health policy making process. What we need is city planners, engineers, education, environment, and transportation departments, scientists, and innovators to be at the table too. And, of course, we need the input of civil society.

Ladies and Gentlemen,
Friends and Colleagues,

We are fortunate enough to have reached a stage of development and scientific and technological advancement in which the focus of health is no longer limited to death or disease or disability. Rather, we look forward to having a better life during the later stages of our lives.

Attainment of this objective is a sign of true progress in social and economic development. But it is nevertheless a big challenge for society.

We are now standing at a critical juncture. For the first time in history, the population of older people will soon outnumber that of young people. This demographic change will create massive challenges for health systems and national economies. And it will have an enormous impact on the lives of individuals, families, and communities.

It will take all of us, working across sectors and professionals and locations – to rise to the challenge. Let's get to work!