GLOBAL ROADMAP FOR HEALTHY LONGEVITY

GOAL 1. ECONOMIC AND SOCIAL BENEFITS GENERATED BY PEOPLE LIVING, WORKING, VOLUNTEERING, AND ENGAGING LONGER

GOAL 2. SOCIAL INFRASTRUCTURE, INSTITUTIONS, AND BUSINESS SYSTEMS THAT ENABLE SAFE AND MEANINGFUL WORK AND OTHER COMMUNITY ENGAGEMENT AT EVERY STAGE OF LIFE

Recommendation 3-1: Governments, in collaboration with the business sector, should design work environments and develop new policies that enable and encourage older adults to remain in the workforce longer by

- providing legal protections and workplace policies to ensure worker health and safety and income protection (including during periods of disability) across the life course;
- developing innovative solutions for extending legal and income protection to workers participating in alternative models of work (e.g., gig economy, informal sector);
- increasing opportunities for part-time work and flexible schedules; and
- promoting intergenerational national and community service and encore careers.

GOAL 3. EDUCATION AND TRAINING OPPORTUNITIES THAT PROMOTE PARTICIPATION IN LIFELONG LEARNING AND GROWTH

Recommendation 3-2: Governments, employers, and educational institutions should prioritize investments in redesigning education systems to support lifelong learning and training. Governments should also invest in the science of learning and training for middle-aged and older adults. Specifically, employers, unions, and governments should support pilots that allow middle-aged and older adults to retool for multiple careers and/or participate as volunteers across their life span through the development of such incentives as

- grants or tax breaks for employers to promote retaining and upskilling of employees (e.g., apprenticeship programs, retraining of workers in physically demanding jobs to enable them to engage in new careers in less demanding jobs);
- special grants to community colleges and universities for the development of innovative models that target middleaged and older students to support lifelong learning; and
- grants to individuals for engaging in midcareer training.

GOAL 4. SOCIAL COHESION AUGMENTED BY INTERGENERATIONAL CONNECTIONS AND THE CREATION OF OPPORTUNITIES FOR PURPOSEFUL ENGAGEMENT BY OLDER PEOPLE AT THE FAMILY, COMMUNITY, AND SOCIETAL LEVELS

Recommendation 4-1: Governments should develop evidence-based, multipronged strategies for reducing ageism against any age group by

- collaborating across sectors—for example with local governments, industry, and nongovernmental organizations (NGOs)—to launch public information campaigns that highlight the value of older people to society;
- developing public and private partnerships to create programs, connected intergenerational communities, and innovative models that enable all people to contribute to society; and
- developing legal protections for the rights of older people and ending age-based segregation and discrimination (e.g., legal barriers related to housing, policies that discourage work at older ages).

GOAL 5. SOCIAL PROTECTIONS AND FINANCIAL SECURITY THAT MITIGATE THE EFFECTS OF FINANCIAL VULNERABILITY AT OLDER AGES

Recommendation 4-2: By 2027, all governments should develop plans for ensuring basic financial security for older people.

- For countries without retirement income systems, introduce support for older people with no or subsistence-level income.
- For countries with emerging retirement income systems, increase security for low-income older people.

• For countries with robust retirement income systems, identify evidence-based models for strengthening financial security across the life course.

Recommendation 4-3: To improve financial security in retirement, governments and employers should develop strategies for increasing financial literacy and mechanisms for promoting pension contributions, self-funded pensions, and lifelong savings.

GOAL 6. PHYSICAL ENVIRONMENTS AND INFRASTRUCTURE THAT SUPPORT FUNCTIONING AND ENGAGEMENT FOR PEOPLE AT OLDER AGES

Recommendation 5-1: Governments and the private sector should partner to design user-centered and cohesion-enabling intergenerational communities for healthy longevity. Initiatives should include

- at the city level, developing and implementing mitigation strategies to reduce the negative effects of the physical environment (e.g., air pollution, climate events such as flooding and hurricanes/typhoons) on older adults;
- at the neighborhood level, promoting and measuring the impact of innovation and policy solutions for healthy longevity, intergenerational connection, and cohesion;
- at the home level, updating physical infrastructure to address affordability, insufficiencies, and inefficiencies in housing stock, as well as support autonomy and social connection;
- making broadband accessible and reducing the digital divide (e.g., usability of and willingness to adopt technology) within the context of each community; and
- designing public transportation options, including solutions that address first-/last-mile transportation needs, that can be provided to companies, foundations, and local governments for implementation.

GOAL 7. INTEGRATED PUBLIC HEALTH, SOCIAL SERVICE, PERSON-CENTERED HEALTH CARE, AND LONG-TERM CARE SYSTEMS DESIGNED TO EXTEND YEARS OF GOOD HEALTH AND SUPPORT THE DIVERSE HEALTH NEEDS OF OLDER PEOPLE

Recommendation 6-1: To achieve the goal of the best possible health for older people, governments should over the next 5 years develop strategies for increasing investments in robust public health systems that can build and lead collective actions for promoting health at the population level and across the life course.

- Investments in public health systems may require governments to rebalance investments in health care and public health.
- Public policies should create incentives for individuals, employers, and communities to engage in prevention and wellness activities.
- All countries should establish 5-year targets for preventive health and measure progress toward those targets.

Recommendation 6-2: Shift health care systems to focus on healthy longevity. To catalyze such a shift, actions to be taken by 2027 include the following:

- Health systems, in concert with communities and the people they serve, should adopt affordable, accessible, culturally appropriate models, including geriatric care models, for providing person-centered, integrated care for older people facing functional limitations, multimorbidity, frailty, and complex care needs.
- Governments should develop plans for aligning health care payment and reimbursement systems with healthy longevity outcomes.
- Health care systems should measure care outcomes based on patient goals and preferences and patient-reported outcomes.
- Relevant licensing and certification bodies should ensure that all health care providers receive training in how the physiology and psychology of aging affect diagnosis and treatment of older patients.
- Governments, professional societies, and health systems should provide incentives for developing and/or
 maintaining a geriatric workforce, including allied health workers, to focus on older adults with multimorbidity,
 geriatric syndromes, and declining physical and cognitive functioning.
- Governments, employers, health systems, and communities should empower citizens with the tools and data needed to manage their own health.

GOAL 8. QUALITY LONG-TERM CARE SYSTEMS TO ENSURE THAT PEOPLE RECEIVE THE CARE THEY REQUIRE IN THE SETTING THEY DESIRE FOR A LIFE OF MEANING AND DIGNITY

Recommendation 6-3: Governments should work with health and long-term care systems and researchers to develop strategies for making available culturally sensitive, person-centered, and equitable long-term care. To the extent possible, strategies should honor people's preferences about care settings, enabling them to age within their home or community where possible. By 2027, countries should take first steps toward enacting strategies by implementing

• pilot programs to identify effective, accessible, affordable, and scalable models for delivering long-term care services and supports; and models for providing financial and technological support, training, and career pathways for informal caregivers as well as the paid long-term care workforce.

To read the full report, please visit: https://nam.edu/longevityroadmap/

