





























KOBE PORTOPIA HOTEL



















A TIP FOR LONG JUMPS LIVES: Stay Vertical!

11 YEAR OLD TEACHER

ALGEBRA FOR AGING: IS 'X' = REAL?

ABOUT FUNCTIONALITY

Stay Vertical!

challenge with us, not for us!

MICHAEL BURT AND BRUCE ANTONIO

BRING GAMERS TO PEOPLE SCENE IS KEY TO HEALTHY AGING

IN ITALY

PARAGIVING IS NOT A NATIVE CONCEPT

TRADITIONAL ONE-WAY: MARRIAGE-SEEKING

CLASSICAL FROM MARRIAGE

CONCULATIONS

WE CAN BE MORE EFFECTIVE IN PROMOTING

WE CAN BE MORE EFFECTIVE IN PROMOTING

LAMP 2015

THE SOLUTION

THE SOLUTION

#GFIAP2015

DAY 1:

COMMUNITY-BASED MODELS -

Engaging members of the community



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DAY 1:

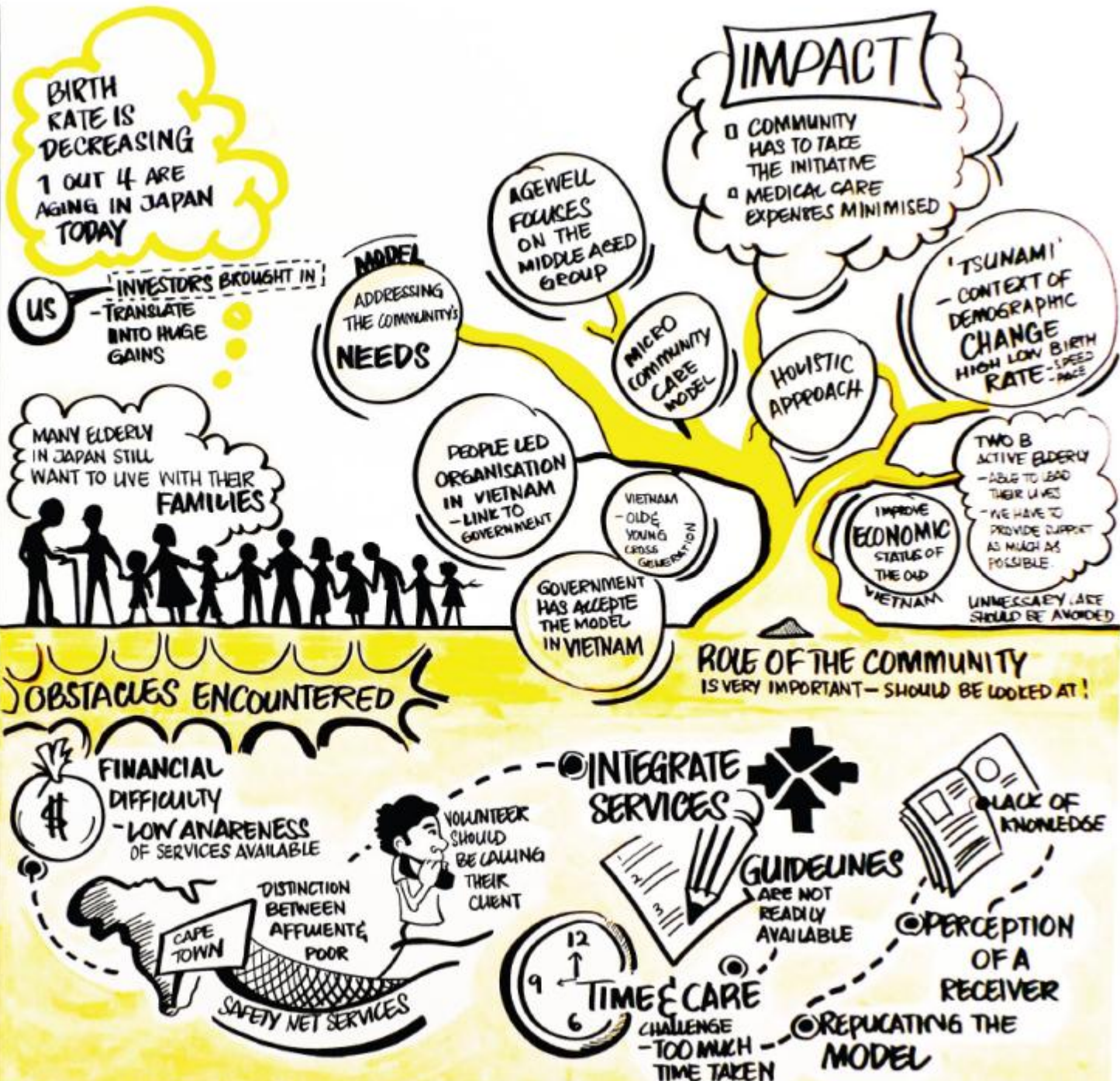
COMMUNITY-BASED MODELS-

Integrating health and social care systems

SKETCHPOST

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DAY 1:

INCLUSIVE &

people-centred design



SKETCHPOST



Tirka HUN

www.SketchPostStudio.com

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DAY 1:

TECHNOLOGY

assessments
for
IMPACT

SKETCHPOST

TIKKA HUN

TECHNOLOGY THAT DRIVE ...

TRANSFORMATIVE
IMPACT

IMPROVE
LIVES

REPRESENT
VALUE &
AFFORDABLE

GENERATE
USEFUL
INFORMATION

ENABLE
LIVING
INDEPENDENCY

SCALABLE &
SUSTAINABLE
AT
GOVERNMENT
& CONSUMER
LEVELS

ACTIONABLE
FOR OLDER
ADULTS &
PROVIDERS



UNDERSTAND
& CONSIDER
THE NEED
OF OLDER PEOPLE
INCLUDING DEMENTIA
PATIENTS

BUSINESS
THAT CONSIDER
THE NEED SELL
BETTER

OUR CHALLENGES

AGEING
IS SELDOM
INCORPORATED
IN PUBLIC
HEALTH POLICY

WE NEED
TO
COMBINE

TECHNOLOGY

MONEY
EQUITY
AFFORDABILITY

HEALTH
POLICY
MAKING



EXERCISE

2000
FREE
CLASSES



MONEY
SPENT IN
PREVENTION
HELP SAVE MORE

MAKE
GOOD
PITCHES

SHOW
EVIDENCE
OF SUCCESS

WE ARE AT A
VERY
EXCITING &
CHALLENGING
TIME

LEGALISE
A PROGRAMME
IN ORDER TO
SUSTAIN IT

CHECK
YOUR
ASSUMPTIONS



BEST PRACTICES

SOCIAL
& FUNCTIONAL
OUTCOME

GET THEM
(OLDER PEOPLE
AS WELL AS CARE
GIVERS) TO
INVOLVE IN
DESIGN

UNDERSTAND
YOUR MARKET
RIGHT

BETTER
INDICATOR
OR MEASURE



TECHNOLOGY
SOLUTION SHOULDN'T
BE LEAVE TO THE
RESEARCHER
ALONE

EQUITY
IN
TECHNOLOGY

CONTEXTS
MATTER



CREATE
OPEN
PLATFORM

WORK
ACROSS
SYSTEMS
TO FIND SOLUTION

THE SOLUTIONS

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DAY 1:

MEDICAL ADHERENCE:

Addressing patient, provider, & social factors

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DAY 1:

MEDICAL ADHERENCE

monitoring



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TO DIFFERENTIATE & MANAGE



Home Medicine Review



EXCITING POSSIBILITY FOR ACCESSIBLE CARE BUT MANAGING PATIENT EXPECTATION IS TRICKY

ACCORDING TO MY STUDY, IT'S IMPERATIVE



WE MAY HAVE TOOLS TO COMMUNICATE REAL TIME, BUT THEY'VE NOT BEEN Operationalised



POLYPHARM? 74,000 PILLS

AN AVERAGE BRIT CONSUMES IN A LIFETIME



CRADLE TO GRAVE, BRITISH MUSEUM



KIYOMI SADAMOTO
SUKOHAMA UNI. OF PHARMACY



TIMOTHY CHEN
UNI. OF SYDNEY

POLY PILLS?

ONLY 1/3 PATIENTS TAKE MEDS CORRECTLY!



BERNARD VRIJENS
MVA HEALTHCARE

REDEFINE Adherence

THERE'S INCREDIBLE NUANCE!



FACE-TO-FACE COMMS trumps technology

BASIC & FAMILIAR - NO MOBILES!

WE MADE A MACHINE PROCESSING PATIENT'S SELF-REPORTED DATA

SIMILARLY, BE WARY OF USING TECH AS SURROGATE FOR PROFESSIONAL Judgement!

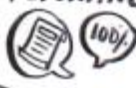
TO Electronically MONITOR PATIENTS

- IDENTIFY
- TRACE
- DISPENSE
- EJECT



DRUG DISPENSATION

BIASED SELF-REPORTING



LOSS OF DATA PRIVACY

POTENTIAL CONCERNS

THE PROBLEM OF REGULATION



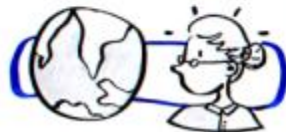
FOR PRECISION

& GUIDANCE





Day 2



Global Ageing

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1 John Beard
WORLD AGING & LIFE COURSE

STOP TELLING THE ELDERLY WHAT TO DO!
WE NEED TO BUILD AN AGE-INCLUSIVE WORLD!
NOT YET 70 IS THE NEW!

AGEING POPULATIONS HAPPEN INCREMENTALLY. NOT SUDDEN LEAPS. IN CONTEXT

Older people? ARE DIVERGE: IN BOTH INTRINSIC & FUNCTIONAL CAPACITY

WE'RE YOUR INVESTMENT, NOT ECONOMIC BURDEN!
HOWEVER, CORRELATED TO AFFLUENCE!

KEY ACTIONS

- #1 ALIGN HEALTH SYSTEMS
- #2 DESIGN LONG TERM CARE
- #3 CREATE AGEING ENV'S
- #4 IMPROVE PERFORMANCE MONITORING

GOAL: HEALTHY AGEING TO DEV. & MAIN TIPS: FUNCTIONAL ABILITIES, WELLBEING IN OLD AGE

THIS ENABLING

2 Somath Chatterji
WORLD HEALTH STATS & INFO SYSTEMS

THE HEALTH EPIDEMIC!

WE'RE LIVING LONGER BUT NOT NECESSARILY HEALTHIER!

MEH. DISEASE PREVALENCE BURDENED MUSCULO-SKELETAL AGED-MORBIDITY

COUPLED WITH FACTORS OF: COGNITIVE, ECONOMIC STATUS, SMOKE!

RESULTS IN: CO-MORBIDITY WHICH AGE OFF CHRONIC TOO

YEARS LIVED WITH DISABILITY CAPACITY

NONETHELESS THE COHORT EFFECT, BETTER SOCIALIZATION, BETTER AGING

SOCIAL NETWORKS CAN BE EFFECTIVE BUFFER

PHYSICAL (LEG PAIN, TENSION) MENTAL (LEG MEMORY LOSS) PSYCHOLOGICAL (LEG DEPRESSION)

Loneliness IS A DISEASE TOO

HOWEVER, ITS EFFECTIVENESS IS CORRELATED TO HOW WE FEEL.

WE NEED TO MAKE CONSCIOUS INVESTMENTS & NOT BE PASSIVE ACTORS OF fate!

WE NEED A Recipe For Ageing Well

3 (PUS) Bussarawan Itchanan
SINGAPORE MANAGEMENT U.

ASIA'S KEY PRIORITIES:

- ADEQUATE DATA INFRASTRUCTURE
- MONITORING SYSTEMS
- EVIDENCE-BASED POLICIES

ACCORDING TO MY STUDY OF AGING SURVEYS

COUNTRIES WITH MORE ELDERLY HAVE MORE AGING STUDIES (CHINA, THAILAND, PHILIPPINES)

COUNTRIES WITH LESS ELDERLY HAVE ALMOST NO AGING STUDIES

HOWEVER, WE CAN'T AFFORD TO BE COMPLACENT!

ALSO, WE'VE DATA GAPS

- 1 LONGITUDINAL DATA GAP
- 2 HEALTH DOMAIN DATA GAP
- 3 FAMILY CARE FOR ELDERLY'S DATA GAP

WE NEED MORE STUDIES ON AGING IN YOUNGER NATIONS

WE NEED PRECISION

EXPAND! DOCUMENT! COMMUNICATE!

COMPREHENSIVE RESEARCH ON DISABLED SHORT ONE TRAINING IS MUST

THIS

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Day 2

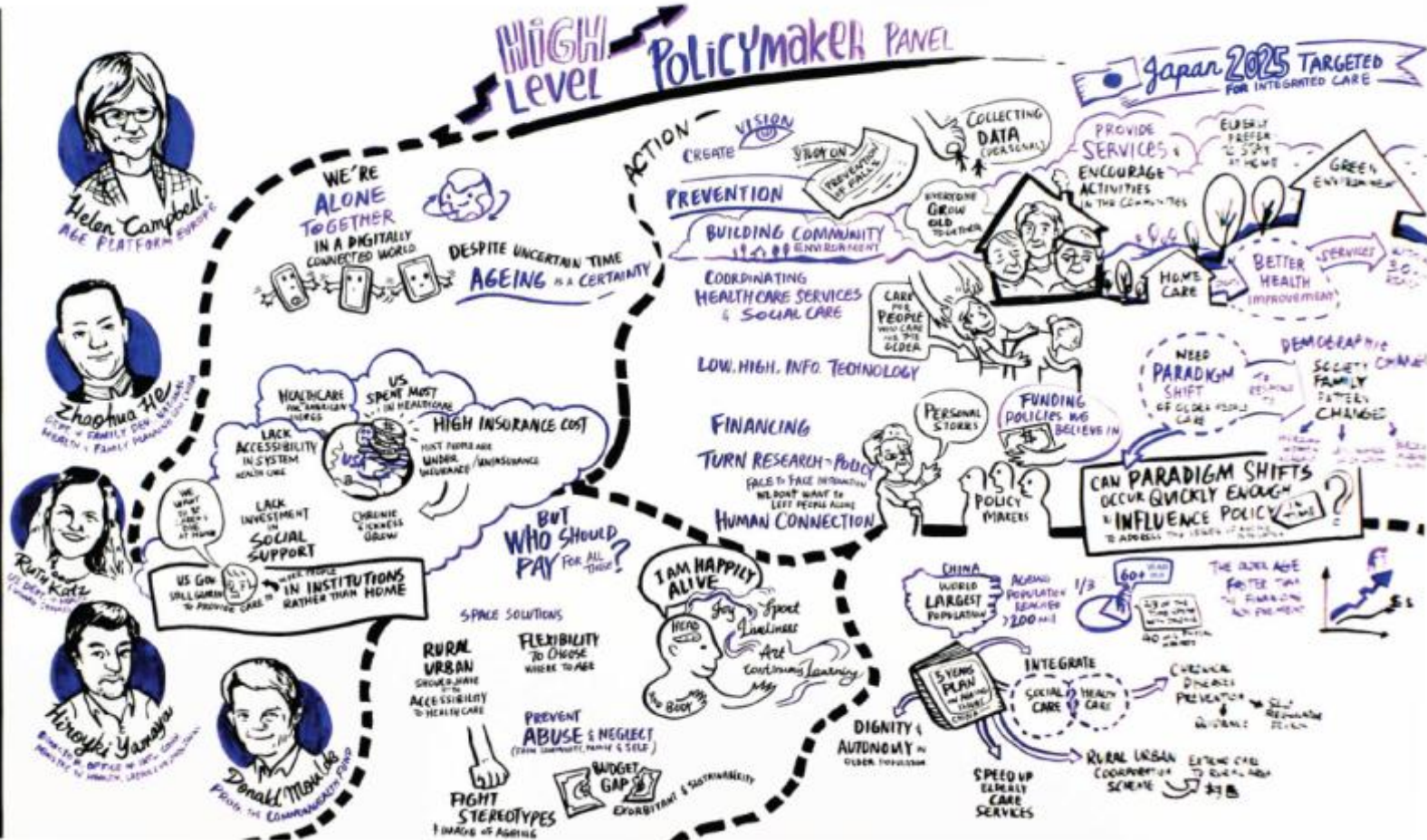
High level
POLICY-MAKER
Panel



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Day 2
How do
METRICS
Drive
Change

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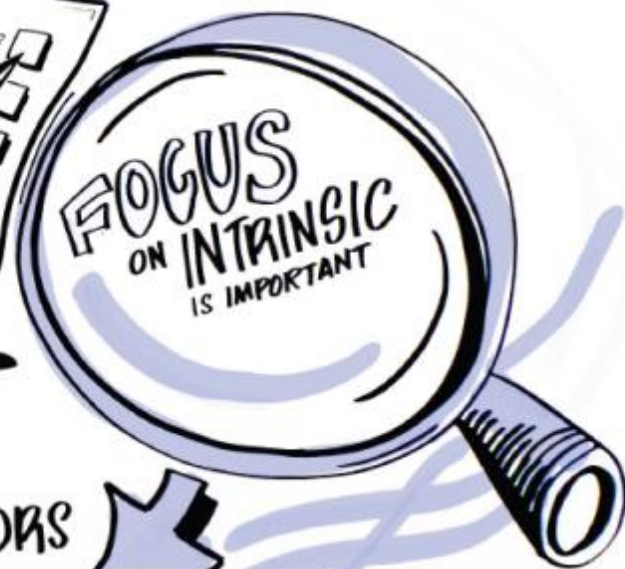
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DAY 2:

HOW SHOULD WE

assess
Healthy Ageing?

MORE QUESTIONS THAN ANSWERS



INCLUDE OTHER SECTORS IN
NON-COMMUNICABLE DISEASE & SUSTAINABLE GROUPS

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DAY 2: HOW SHOULD WE assess Health TECHNOLOGIES?

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YEEHUI

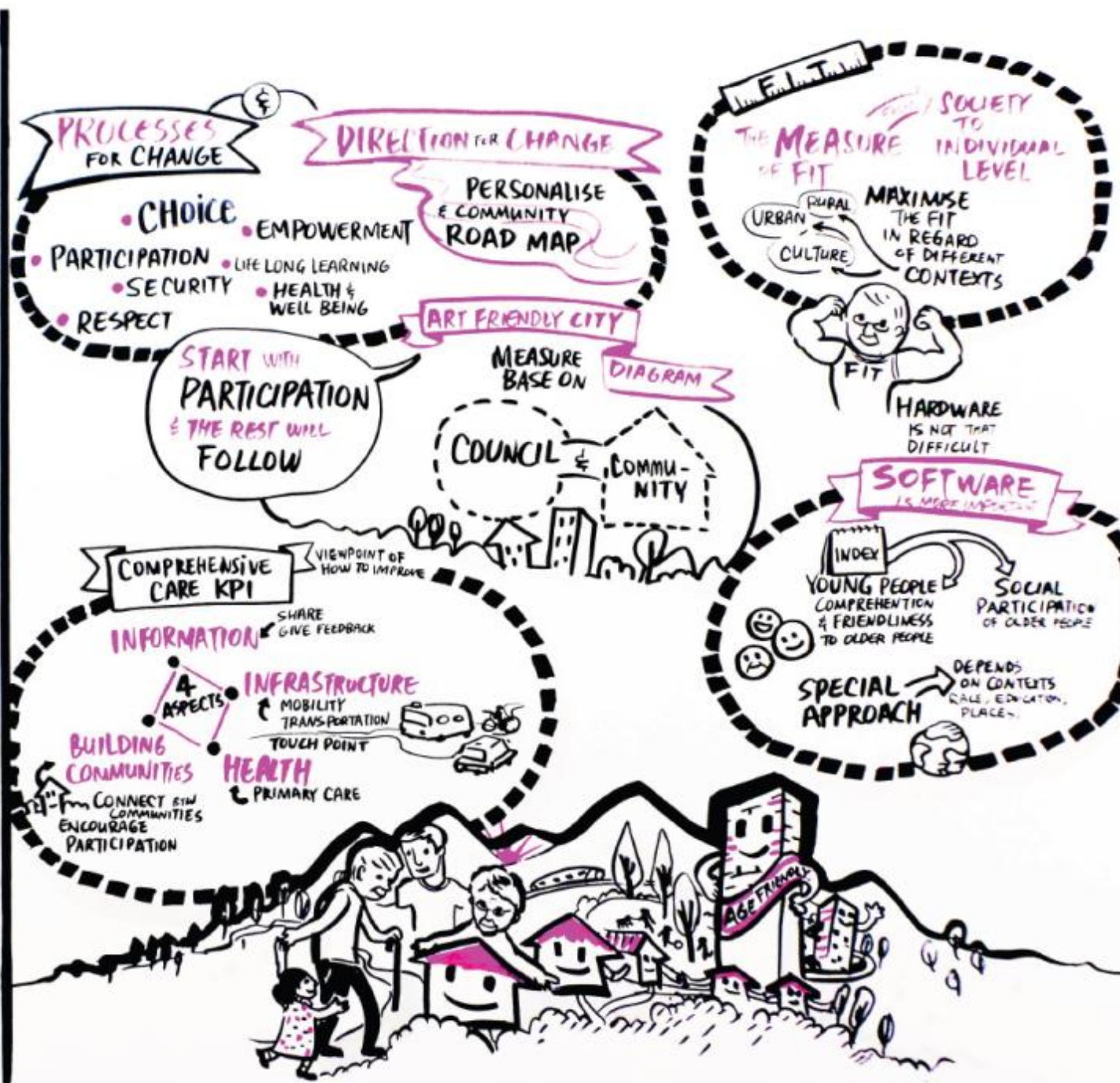
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DAY 2:
HOW SHOULD WE

assess
the age
friendliness
of communities?



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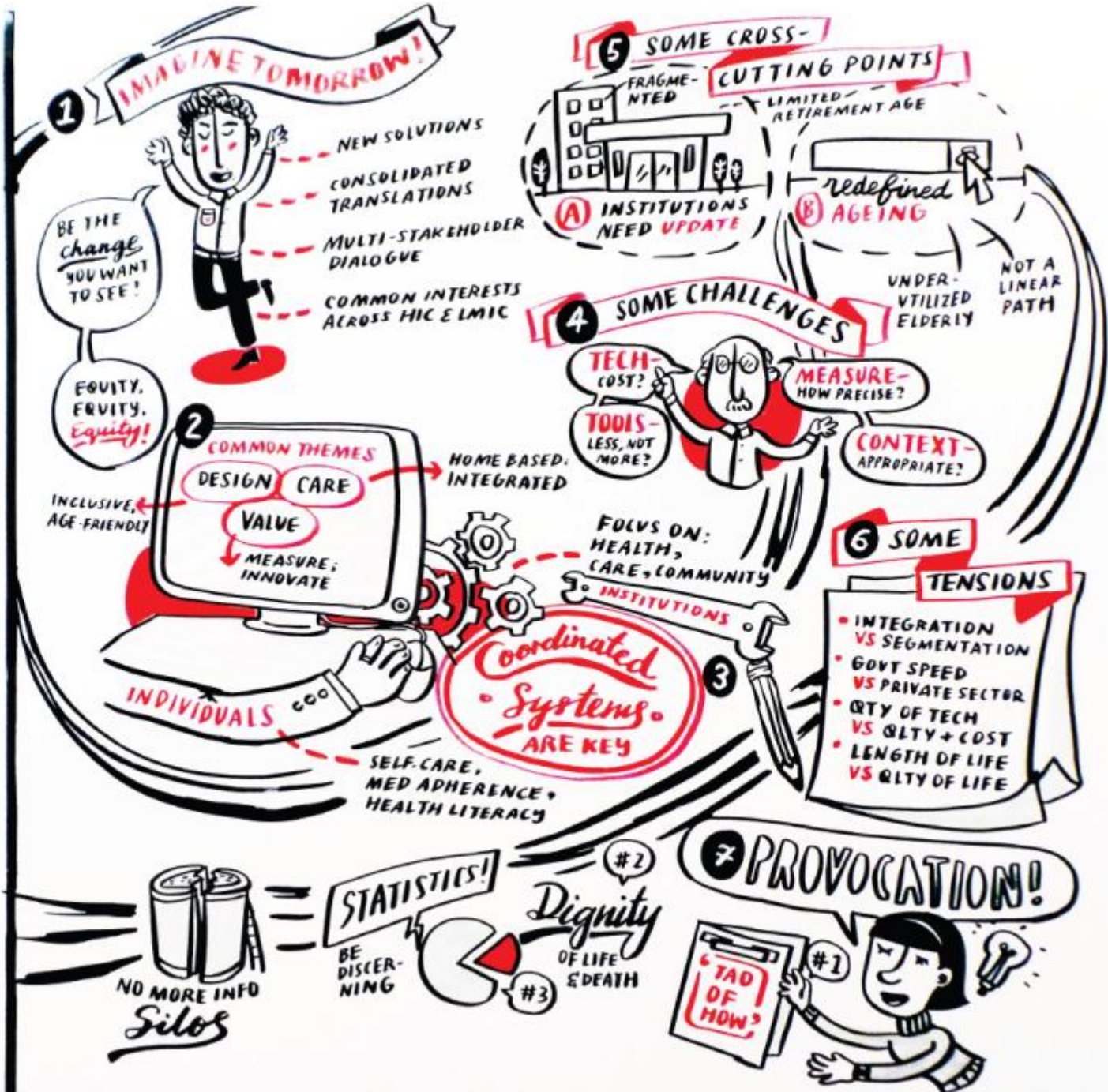
DAY 2:

KEYNOTES

By Andreas Heinecke



SYNTHESIS
By Alex Ross



#GFAP2015

Day 3
Enabling
Environments



#GFIAP2015

Day 3

INNOVATION
IN TECHNOLOGY
FOR AGEING
IN PLACE

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