Healthy Ageing 2021 Thematic Paper

Inspiration, innovation and impact. Three key drivers of change in healthy ageing.

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CONTENTS

Foreword

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UKRI Healthy Ageing Challenge Director, George MacGinnis

How do we change the narrative on ageing and show that improving how we age is not just a moral imperative but makes economic sense too? This is no small challenge, and the pandemic has meant that the past two years have made this even harder. Older people have been most affected, both by the disease and by the measures taken to protect them, resulting in social isolation, inactivity and fear.

The ultimate goal of healthy ageing is to make the most of the success that our longer lives present by helping to close the gap between how long we live and how much of that is spent in good health. This is hugely ambitious. There is no 'playbook' or clear formula for how this can be achieved. What we do have is a good grasp of the themes where there is potential to make a difference, coupled with a desire to forge closer connections between business and research to understand what really works.

There is hope. I take heart from being part of a growing global movement that sees fresh opportunities, not least because the disruption of the past two years has sparked a wave of innovation. The conference has helped us be inspired by those pioneers who are exploring new possibilities. Sharing the insights their experience brings is essential if we are to catalyse a whole new sector and make a difference at an entire population level.

The contents of this report show how wide ranging the agenda for the conference was. I would like to thank all those who contributed to making it a success, whether presenting, attending or being behind the scenes to make it all happen. Thanks also to the Longevity Forum for being the driving force behind UK Longevity Week.

I look forward to welcoming you back to our future events.

DAY 1

Inspiration, innovation and impact: Three key drivers of change in healthy ageing

Introduction

This report outlines key insights from the Healthy Ageing 2021 conference, themed around 'Creating societal change through inspiration, innovation and impact.'

The conference was delivered by the UKRI Healthy Ageing Challenge in partnership with the Centre for Ageing Better in November 2021, as part of [Longevity Week](#).

It brought together experts and thought leaders from across the healthy ageing domain to inspire new ideas, innovations and valuable connections that create both short-term impact and long-term societal changes to support an ageing population and economic growth.

Exploring the three main drivers

Conference attendees had the opportunity to hear and learn from authors, academics, entrepreneurs, policymakers and expert peers, speaking about three main drivers for change:

– **inspiration:** being motivated by the latest thought leadership, fresh ideas and making new connections

– **innovation:** getting insights from cutting-edge research and innovations in industry

– **impact:** seeing how award-winning projects are helping create a more age-friendly and profitable economy for all

Reflecting the breadth of areas covered by the healthy ageing domain, the conference aimed to bring to light solutions for a number of major cross-cutting topics, including social inequality, digital inclusivity and user-centred design, to ensure we all remain active, productive, independent and socially connected as we age.

In this paper, we share a summary of the conference sessions and some of the key learnings from the sessions held over the two-day event, so that anyone interested in healthy ageing can be inspired, see the latest insights and go on to make a real impact in their chosen area.

A challenge for all

The UK's population is undergoing a massive age shift. Within the next 20 years, one in four people will be over the age of 65. The keynote speakers who helped to launch the conference kick-started two days of discussion, debate and discovery aimed at ensuring we all live longer, healthier and happier lives across the generations, today and tomorrow.

Speakers

Sadiq Khan, Mayor of London – Welcome

Lucy Chappell, Chief Scientific Adviser to the Department of Health and Social Care – A Challenge for All

Heléna Herklots, Older People's Commissioner for Wales – Welcome

Key Address

In his welcome to the conference, Sadiq Khan said that he was committed to making London an age-friendly city, somewhere older citizens feel safe and secure, and where their voices are heard.

Lucy and Heléna shared these sentiments on a nationwide basis, speaking about the need to bring the focus back to healthy ageing, while stressing the importance of including the voices and experience of older people when addressing key challenges and needs.

There has already been a shift towards preventive health and emphasising a healthy lifespan, and this is welcome – because simply addressing disease in older people is not the same as supporting healthy ageing.

Inequalities remain a key issue. Considering areas such as risk prediction, understanding the evidence about what works currently, preventive interventions and modelling will help us understand the challenges and what needs to be done better.

However, these are not challenges that we should be addressing simply for older people. Throughout the life course, from childhood onwards, we can prepare for a better later life for everyone. By considering what we can do early to improve lives, we will avoid doing too little, too late.

The UN Decade of Healthy Ageing highlights four areas that are essential parts of healthy ageing: age-friendly environments, combating ageism, integrated care and long-term care. It's crucial that people are valued as they grow older and are not put into one homogenous group or negatively stereotyped.

Healthy ageing is about resilience; physical and mental health; our ability to be connected; and the relationships that we hold across generations. As keynote speaker Lucy Chappell said, "This is a challenge for all."

To watch or listen to the full keynote speeches, go to:

[Sadiq Khan](#)

[Lucy Chappell](#)

[Heléna Herklots](#)

Heléna Herklots, Chair to the Advisory Group for the UKRI Healthy Ageing Challenge, said:

"This is about the huge diversity of our ageing society and understanding the context of ageism. That's the backdrop that we must fight against in order to enable this Healthy Ageing Challenge, which has already made such great progress, to bring benefits for all of us as we age."

Sadiq Khan, Mayor of London, said:

"I want to make London an even better place to live. This means putting the welfare and wellbeing of older people at the heart of our efforts. Not just making London somewhere older citizens feel safe and secure, but ensuring their voices are heard. Whilst some good work is already underway, there's still clearly much more to do. We can and we must improve the lived experience of older people."

Lucy Chappell, Chief Scientific Adviser, Department of Health and Social Care, said:

"This is the time to recognise the huge effect of COVID on older people and bring the focus back to healthy ageing, particularly in terms of tackling inequalities. It's far bigger than a single sector in terms of health or social care and we really need to address how we make the cross-sectoral work happen, particularly across government."

Changing minds: Innovative ways to attract and engage new audiences

This session showcased a number of real-world examples of engaging older audiences creatively in the arts and attracting new older audiences to culture. Panellists discussed themes around digital access and the value of social connectivity.

Panel

Co-chair: Dr Helen Manchester, Associate Professor in Digital Inequalities and Urban Futures, University of Bristol and Principal Investigator for Connecting Through Culture As We Age: Digital Innovation for Healthy Ageing

Co-chair: Paul Clarke, Senior Lecturer in Performance Studies, University of Bristol and Co-Investigator on Connecting Through Culture As We Age: Digital Innovation for Healthy Ageing

Richard Misek, Senior Lecturer and Head of Graduate Studies (Taught), School of Arts, University of Kent

Lucia Arias, Manager, FACT Liverpool – The Foundation for Art and Creative Technology

Jonny Freeman, Professor of Psychology and Academic Lead for Knowledge Exchange, Goldsmiths University of London

Maddy Mills, Director, Entelechy Arts

Key issues

The panel described innovations that they had tried out during lockdown or had discovered during the COVID -19 pandemic, particularly in relation to attracting new audiences and the use of digital media. Key topics of conversation for this session were the importance of accessibility in designing participation in arts and culture, and the need for digital access and inclusion to be considered holistically throughout the creative process.

The panel agreed that the pandemic had sparked a transformation in engagement with arts and culture. They also noted how COVID-19 had shone a light on familiar barriers to engagement such as disability as well as previously unrecognised barriers such as geographic isolation. Digital or online arts and culture has the potential to address many of these exclusions, but it doesn't do so automatically.

While there is huge potential for digital communication to help transform engagement with arts and culture, much needs to be done to make digital content genuinely accessible and inclusive. The panel also touched on the importance of understanding what devices people have at home for access and inclusion.

Key messages

Much work remains to be done to find out what kind of digital programming works, particularly in making digital content genuinely accessible and inclusive.

To engage, you need to build a good relationship with your audience.

For a platform to be useful, people must want to use it; they need a device to use it on and its design must be user friendly.

Best practice

Richard Misek is currently leading a UK Arts and Humanities Research Council project entitled 'Digital Access to Arts and Culture Beyond COVID-19', in collaboration with Arts Council England. The project is researching the overarching ecologies around digital arts and cultural programming in terms of learning during and after the pandemic and the sustainability of some of those practices. He sees a huge potential for digital technologies to help radically transform engagement with arts and culture, in particular in supporting a shift from transmissive to participatory ways of engaging with art.

FACT delivered the 'Rituals of Loneliness' programme, which linked groups of young people with participants aged over 60 in an online space, giving them more freedom and a sense of friends spending time together.

Entelechy Arts delivered 'Gnomes at Home' and 'Rhythms of the Day' programmes to support digitally excluded people in south-east London. They provided them with resources to make their own windowsill displays and engage with their home environment via music.

To watch or listen to the full session, go to:

Day 1 Session 1
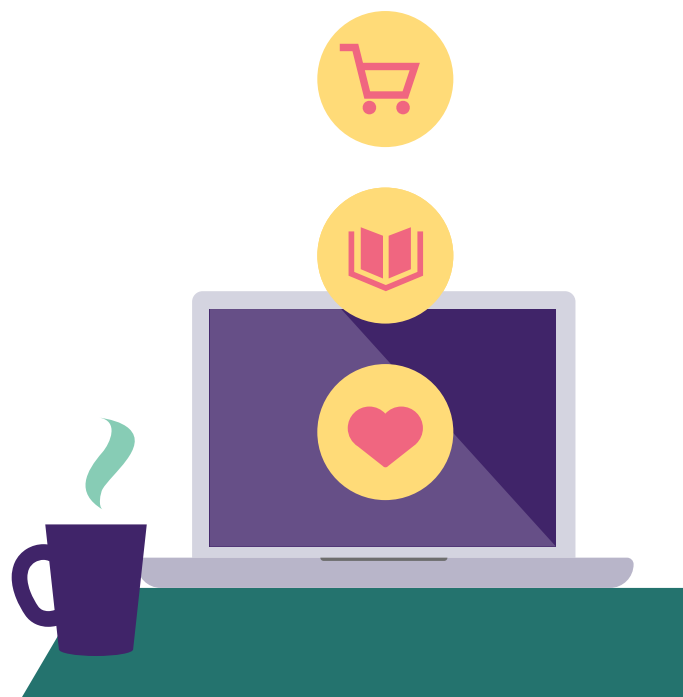
Richard Misek, Senior Lecturer and Head of Graduate Studies (Taught), School of Arts, University of Kent, said: "Around 65 per cent of online arts and culture audiences had never engaged with arts and culture online pre-pandemic."

Via Richard Misek, The Audience Agency, said: "Overall, online audiences so far have quite closely replicated physical audiences. If you do nothing, your audiences stay the same."

Maddy Mills, Director, Entelechy Arts, said: "Digital was a massive lifeline during the pandemic for so many people and I think we all know the important role that arts and culture had in helping people through what was such a catastrophic time."

Insights for innovators: Addressing dementia and inequalities

In this session, the panel discussed the importance of innovation in helping people enjoy a healthy later life through the levelling up of inequalities and cognitive health. It highlighted the leading role social scientists have and how business, academia, government and third-sector partners can work alongside them to drive innovation.

Panel

Judith Phillips, Deputy Principal (Research) and Professor of Gerontology, University of Stirling, and UKRI Research Director, UKRI Healthy Ageing Challenge

Linda Clare, Professor of Clinical Psychology of Ageing and Dementia, University of Exeter; leads the University's Centre for Research in Ageing and Cognitive Health (REACH)

Tom Scharf, Professor of Social Gerontology, Newcastle University; Director, Centre for Ageing and Inequalities; President, British Society of Gerontology

Key issues

The panel discussed the importance of:

– Putting good research evidence into practice in real-world settings

– Involving people with dementia in co-producing resources and initiatives.

They also considered how the onset of dementia could be delayed by enhancing people's lives throughout the life course, from promoting cognitive development in infancy to designing products or services that encourage a healthy lifestyle and support social connection in later life.

To address inequalities, an age equality audit process was suggested to look at how we can design products and services that meet the needs and aspirations of the many older people who may be on lower incomes, from disadvantaged communities, or marginalised groups.

Key messages

We need to reduce poverty throughout the life course, invest in education and skills, and provide universal access to good health and social care support.

We should focus much more research on the inequalities that affect particular groups within society, based on gender, sexual orientation, race and ethnicity, and social class.

We need a coordinated response to inequalities from: government, research, the community and voluntary sector, and business.

Innovators must engage with older people and people with dementia.

Innovations need to come up with solutions tailored to the communities they know. The ENLIVEN project, funded by the UKRI Healthy Ageing Challenge, thinks thinks about how those creative ideas can be captured and more widely adapted.

It's important for business and social science to talk, listen and learn from each other early in project development so they understand where they can align and offer mutual support.

Best practice

The IDEAL study of people with dementia found that people who felt they had accessible green and blue spaces nearby also had better wellbeing. We need to make sure that people can engage with these spaces in a meaningful, active way.

Innovators can help us start to think about what people can do, rather than what they can't do, or what people could do if certain barriers were removed.

There is a huge role for businesses to implement policies and procedures that support employees who are diagnosed with dementia at an early stage.

Employers can also take actions that support the health and wellbeing of their staff and help maintain people's cognitive health into later life.

To watch or listen to the full session, go to:

Day 1 Session 2

Transforming homes: Adaptable spaces for healthy places

This session focused on how the homes of an ageing population can be adapted for changing needs and how we can support everyone to install the aids and adaptations they need to promote wellbeing and reduce the costs of health and care.

Panel

Jeremy Porteus, Housing Learning and Improvement Network (LIN)

Dr Vikki McCall, Senior Lecturer in Social Policy and Housing and Deputy Associate Dean of Learning and Teaching for the Faculty of Social Sciences, University of Stirling

Erin Walsh, Director of the Built Environment, Connected Places Catapult

David Orr, Chair, Clarion Housing Group; chaired the recent Good Homes Inquiry

Naomi Kingsley, Chief Executive, London Rebuilding Society

Key issues

Transforming homes before a health crisis occurs, so our homes form part of sustainable healthy ageing solutions, is an important concept.

Planning for housing should proactively integrate relevant adaptations. It should focus on an inclusive living concept that looks at physical space and design, connections and relationships, social inclusion and equality.

The case for being more proactive in the way we understand and invest in adaptations makes commercial as well as social, moral and ethical sense. Although there is a very important role for specialist residential provision, most older people will live in their own homes in the community. If we start with an inclusive approach, then we are designing for everyone.

Key messages

We cannot level up without investing in affordable and decent quality homes where people can live strong, confident lives and engage with their community.

We need to consider how to give people the confidence and the ability to make changes themselves – so they are not fearful of bad workmanship, and are confident that finance is fair and affordable.

The incidence of living in homes that do not meet the Decent Homes Standard is highest in people aged 75 or over. It is critical for the health and wellbeing of all of us that we improve the quality of our existing homes.

For people on very low incomes, there is a lack of financial support to help them invest in their home, nor is there a national strategy to address this issue.

Best practice

[Connected Places Catapult](#) is directly testing adaptations with end users. The project uses stakeholder co-creation and system mapping to bring stakeholders together and achieve a holistic approach to housing challenges. An open call went out to businesses designing solutions. Test beds are being set up in Sunderland and Northern Ireland – 94 small and medium-sized enterprises have requested to test their solutions.

The [Good Home Inquiry](#) was commissioned and supported by the Centre for Ageing Better. Much of the research explored people's real-life experiences of living in their homes.

London Rebuilding Society delivers innovative finance to support people on low incomes who are excluded from access to finance. They are often older homeowners living in homes in serious disrepair. The organisation has received UKRI funding and support as one of the Healthy Ageing Challenge's Trailblazer projects for its 'Healthy Homes, Healthy Lives' programme to help people access funding for adaptations and improvements.

To watch or listen to the full session, go to:

[Day 1 Session 3](#)

Erin Walsh, Director of the Built Environment, Connected Places Catapult, said: "Within the next decade, 20% of us will be over the age of 65, rising to 25% by 2050. Around 80% of UK homes that we will live in by 2050 are already built."
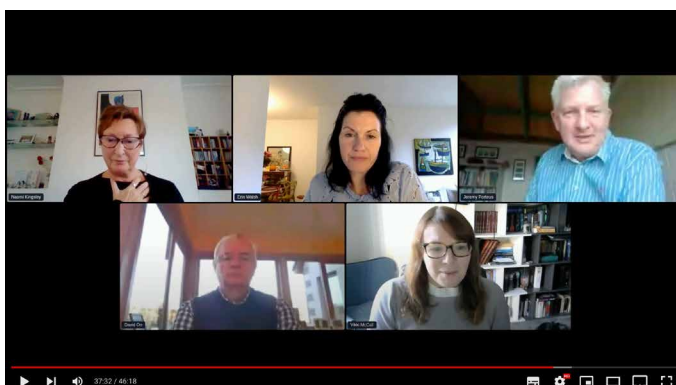
Shifting paradigms: How investing with purpose can be profitable

Placing purpose at the heart of strategy delivers high levels of social value and commercial success, and this conference session covered the opportunities and challenges this brings.

Panel

Nathan Elstub, Executive Chair, Impact Investment Committee, Nesta

Mary Bright, member of the senior leadership team, Head of Social Affairs Division and age adviser at Phoenix Group

Sanjay Lobo MBE, Founder, onHand

Trudie Fell, CEO and Co-Founder, BelleVie

Key issues

Businesses are able to engage with some of society's biggest challenges and make a positive difference. Defining a purpose provides them with:

– a sense of cohesion

– an understanding of what they are trying to achieve

– motivation to innovate through a focus on outcomes

For example, [BelleVie](#), a project funded by the UKRI Healthy Ageing Challenge, is piloting a marketplace to connect older people with third-party products and services. The marketplace leverages the organisation's unique insight into what will enable people to live their best life at home and the services that are available, and provides an additional income stream, for those businesess providing much needed products and services.

The panel discussed the practicalities for a mission-led business to balance the needs of different stakeholder groups such as:

– shareholders, who want a return on capital

– clients, who want the cheapest possible service

– volunteers, who want the best user experience

These needs may be conflicting, and sometimes the needs of one will take priority over the others.

The panel also discussed the need for investment in innovations that are outside the norm.

Best practice

Phoenix Group is the largest long-term savings and retirement business in the UK. It sees its purpose as enabling people to look forward to a sustainable life of possibilities. However, it must still deliver the expected financial returns, or it cannot deliver for customers, colleagues will not be engaged in supporting the company and it will not fulfil its projects and create a change in society.

Corporate volunteering (where staff are given time off to volunteer) was highlighted as generally unsuccessful, as only 5% to 10% of the funded time gets used (although it has provided mental health benefits and a sense of purpose throughout the pandemic). onHand, a project funded by the UKRI Healthy Ageing Challenge, has created an on-demand app to engage employees in local volunteering. The founders want volunteering through onHand to be as easy for people to use in their spare time as Netflix, Tinder or Deliveroo, bringing a volunteering experience into the 21st century and allowing people to dip in and out of volunteering when they have the time. With its supply of volunteers, onHand can help support the work of charities and keep the end beneficiary happy. It can also let businesses know how many missions their staff have completed, what charities they're supporting most, and what carbon reductions they're making.

BelleVie aims to use its business and tech skills to support fair employment and enable people to live longer in their own homes. The founders believe that people thrive – and do a better job – when they are more motivated at work. BelleVie wants to reinvent the future of care work by creating great jobs. The commitment to investors is to give a commercial return but also a social return on investment.
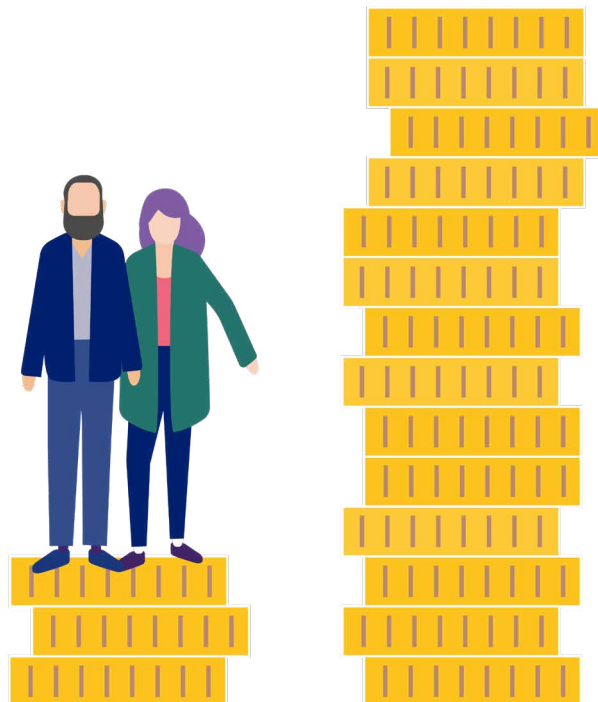
To watch or listen to the full session, go to:

Day 1 Session 4
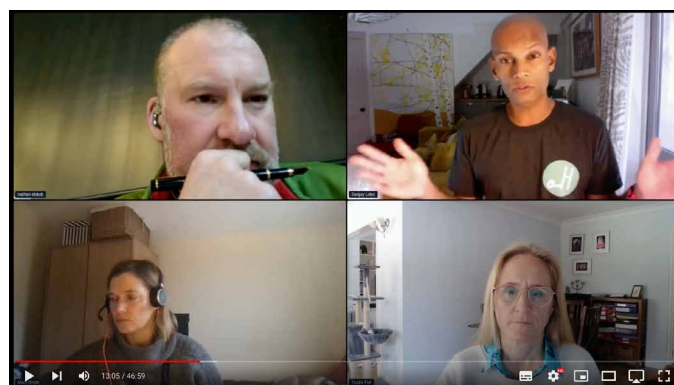
New models: What disruptors like Netflix can teach about healthy ageing

This session called on the panellists' experience within other industries to see what lessons can be learned about how new, potentially disruptive business models could be key to successful growth in the domain of healthy ageing.

Panel

[Ella Goldner](#)**,** Co-founder, Zinc

Alan Hunter, Co-founder, HBM Advisory

Eileen Burbidge, Partner, Passion Capital

David Huang, Co-founder and Managing Director, Bia Care

Key issues

The panel shared their personal experiences of introducing new business models within journalism, investment and online patient care. The aim was to consider the importance of business model innovation and the challenges and opportunities that it brings. For example, companies working in partnership with the NHS may need to consider its organisational structure and any potential barriers to new approaches, even though NHS teams are often open to innovation.

They also touched on whether industry disruptors actually change their business model, or if new service delivery methods simply resemble a change in business model, while the essentials remain the same.

Key messages

We should be prepared to challenge the received wisdom of our business and explore other opportunities.

People tend to dislike change, but if we can overcome that barrier, we can achieve impressive results.

We need a full understanding of our core product and its value. Think about what healthy ageing means, how to measure a product's user benefits, and be creative with business models.

Best practice

In 2010, The Times and The Sunday Times were the UK's first general interest publications to move from free access to a paid model for online news. Alan Hunter says that their online traffic immediately dropped by 98.5%. Some journalists were dissatisfied with this new model as their audience seemingly disappeared. However, by making it clear that the content was of value and therefore should be paid for, the publication was eventually able to increase the price as well as improve the product. People were willing to pay for online access, and journalists were more satisfied with the quality. Other media are now emulating this digital subscription model.

Eileen Burbidge feels that innovators sometimes receive more credit than they deserve when it comes to driving change. She believes that rather than developing new business models, companies looking to innovate will probably go back to old business models, but with better margins because of the lower cost of service delivery. For example, video rentals have been replaced by Netflix and similar services and gym memberships are being replaced by online content and home equipment. Even so, both still rely on the subscription/membership model, but for a service that costs less to deliver. She says that if we back the right entrepreneurs, they will evolve, iterate and respond appropriately when changes have to be made. Great business leaders can anticipate what will work for their segment.

Bia Care is a virtual menopause service. It has added group consultations to its services, where six to eight participants simultaneously meet online with a clinician and health coach. Bia Care's business model for group consultations was based on three main insights from research:

– **Accessibility:** group consultations can offer lower costs by sharing the clinician's time between six to eight people.

– **Efficiency:** group consultations allow more efficient sharing of general information,


delivering personalised care in a setting where the clinician does not have to repeat the same information with each individual.

– **Growth of community and connections:** Everyone taking part can hear the clinical advice and learn from each other's shared experiences. The patient becomes more involved in their own healthcare decisions and longer-term health.

The business model also supports greater patient retention, engagement, and better clinical outcomes.

To watch or listen to the full session, go to:

Day 1 Session 5
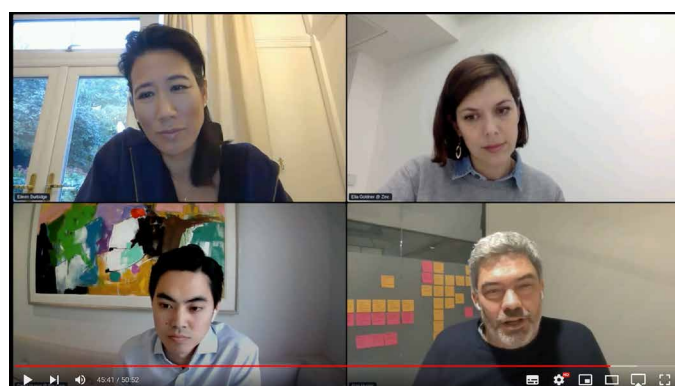
Revolutionising times: Innovating to support an ageing workforce

Nearly one third of the UK workforce is aged 50 or over, but employment rates drop after the age of 55. Around half of people stop work before reaching state pension age. This session focused on creating the right conditions for more older people to enjoy fulfilling work.

Panel

Chair: Yvonne Sonsino, Adviser to the Healthy Ageing Challenge fund and currently working on a global dialogue series 'Redesigning Retirement for the 100-Year Life' with the World Economic Forum

Linda McKie, Dean and Head of School of the School of Social and Political Sciences and Professor of Sociology and Social Policy, University of Edinburgh

Alistair McQueen, Head of Savings and Retirement, Aviva

Natasha Oppenheim, Chief Executive Officer of Experients, the sister brand of No Desire to Retire

Wendy Loretto, Professor of Organisational Behaviour and Dean, University of Edinburgh Business School

Key issues

The panel discussed the need for more companies to care about supporting older workers. They noted that the sooner they do, the more reward they will reap and the better it will be for the economy, for society and for individuals.

They highlighted the need to consider the evolving challenges people aged 50 and over face, such as starting families later in life and the growing effect of divorce on personal finances.

They also explored the expectations of younger people, who may believe that older people want to reduce their work commitments, even though some may want the opposite (for example, people who put their career on hold due to childcare responsibilities and who now want to re-ignite their skills).

The panellists recognised that different things matter to workers at different stages of life. They questioned how we can create an environment that attracts and retains the widest generational spread possible.

Key messages

Flexible working: make sure people aged 50 and over are aware of their right to flexible working, which, for example, may help them meet their caring responsibilities.

Build multi-generational teams with people of different ages at all levels of seniority. Look at how to bring older people into junior or mid-level roles.

Don't be afraid to support workers at specific stages of their careers or to tailor work for people aged 50 and over: this will also bring benefits for the wider workforce.

Look at your data: age bands, age groups, roles, promotion rates, gender, rates of pay and bonuses; and conduct equality checks.

Best practice

The University of Edinburgh is involved in a project supporting healthy ageing at work that hopes to revolutionise later work life stages. One aim is to co-design interventions with older workers to improve their health, looking at, for example, menopause, cognitive decline, early onset dementia and health issues that might arise from combining unpaid care with employment. Issues so far include: older workers worrying about raising health problems and some companies offering attractive health initiatives without tailoring them for the older workforce.

Aviva recognises that people aged 50 and over are a valuable asset. Older workers with long service tend to be very loyal and knowledgeable. Experience cannot be bought, it has to be learned and earned. Yet, over 30% of people are afraid that age is a barrier to opportunity. Aviva is now investing in that cohort for the long-term wellbeing of its organisation.

No Desire to Retire supports older people who are returning to work or staying in the workforce for longer. They help organisations become more age inclusive and recognise the benefits of a multi-generational workforce. They also help employers and workers to recognise their transferable skills.

The [Healthier Working Lives](#) programme, funded by UKRI Healthy Ageing Challenge, focuses on people aged 50 and over working in the residential care sector. It supports them to develop their ideas and make them scalable. A key concept is encouraging entrepreneurship by nurturing their business ideas.

To watch or listen to the full session, go to:

[Day 1 Session 6](#)

Wendy Loretto, Professor of Organisational Behaviour and Dean, University of Edinburgh Business School, said: "One in five older workers leaves the workforce before they're ready to because of health issues."

More than 500 providers manage 16,000 UK care homes employing around 650,000 people. 27% are aged 55 and over, but an increasing number are leaving.

All's well that ages well

There is a UK-wide mission to ensure people enjoy at least five more years of healthy independent life by 2035. This plenary session explored ideas from international thought leaders in the healthy ageing domain on the different approaches to achieving this shared goal.

Panel

Chair: George MacGinnis, Director, UKRI Healthy Ageing Challenge

Alana Officer, Unit Head, Demographic Change and Healthy Ageing, World Health Organization

Andrew Scott, Professor of Economics, London Business School and Co-founder, The Longevity Forum

Professor John Eu-Li Wong, Senior Vice President (Health Innovation and Translation), National University of Singapore (NUS) and Senior Adviser, National University Health System

Key issues

Advances in medicine and health care mean that more young people than ever before will become old. The panel discussed the new health imperative this creates – the need to age well.

To tackle healthy longevity, we need to look early in the life course at what leads to premature disability and premature death, as up to 60% of the factors are social, behavioural and environmental.

The panel agreed that while we have been successful at adding years to life, we have been much less successful globally at making those extra years healthy. There are also wide variations within and between countries. The panel was excited about the opportunities that the UN General Assembly's Decade of Healthy Ageing (2021-30) presents for political commitment, knowledge exchange, and a global collaboration of government, civil society, academics, researchers, private sector, and media practitioners.

The panel also raised the issue of how healthy ageing will have an effect on global economics. Many people withdraw from the labour force from the age of 50 onwards. If we are living longer lives, we need more resources, which presents a problem. The panel members believed that people working longer will boost GDP, and that economic arguments are key to securing the buy-in of finance ministers and central banks to this agenda.

Key messages

Robust societies need to address the five domains of wellbeing, productivity and engagement, security, equity, and cohesion. This requires a joint government and society effort.

Tackling ageism as individuals and societies will help us think more creatively about the second half of life and generate useful innovations that foster longer and healthier lives.
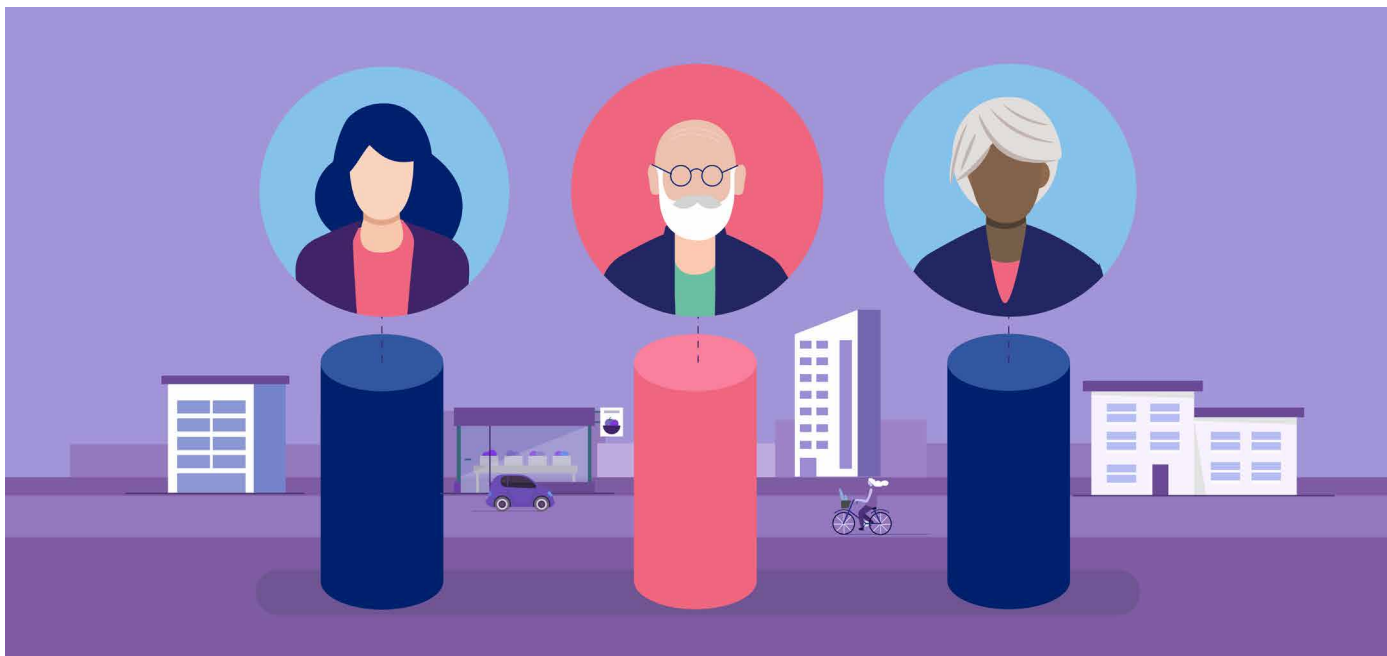
Best practice

A project in the Singapore health district of Queenstown is looking at the five domains described. The township has the demographics that Singapore will face in 2030: close to 25% of the estimated 100,000 population are already aged 60 and over and 80% live in public housing. As the district is redeveloped, the project aims to work with local agencies towards addressing issues, such as whether we can increase healthy and purposeful longevity, promote intergenerational bonding and support a community for all ages to allow people to age in place. For this initiative to be scalable across the whole of Singapore, it has to be sustainable, tangible and resonant with residents. The team will be working on preventive health and care delivery, aspects of purposeful longevity and the physical environment, including planning and design, technology, communication and engagement.

To watch or listen to the full session, go to:

Andrew Scott, Professor of Economics, London Business School and Co-founder, The Longevity Forum, said:
"If you could improve how you age and add just one more year of life, for the US economy it's worth something like $37 trillion, which on an annual basis works out at about 3.5% of GDP."

DAY 2

A global view on healthy ageing

Day two of the conference began with two keynote speakers discussing the opportunities for the UK in the global healthy ageing market. They considered what we know about how people actually think and behave that can support product, service and policy development in healthy ageing.

Speakers

Professor David Halpern, Chief Executive, Behavioural Insights Team

Dr Mike Short, Chief Scientific Adviser, Department for International Trade (DIT)

Key messages

Dr Mike Short announced the launch of the DIT paper [Healthy Ageing: Solutions to a Global Challenge](#), which recognises that some healthy ageing solutions are global in nature, and are areas in which the UK has some real strengths.

Mike presented a startling global statistic: by 2050, more than two billion people will be aged over 60 or around 22% of the global population.

Summarising the report's conclusions, he explained that:

– We need to look beyond specific conditions to a person-centred or citizen-centred approach.

– We need to acknowledge that technology has changed significantly and place it at the heart of the issues (e.g. using apps).

– Positive ageing matters: making sure we live healthier, longer, more rich lives.

– Integration is essential: we need agile processes that embrace both health and social care.

– We need to embrace data and make sure that data is in the right hands, shared with the right clinicians, and the relevant trusted bodies.

– We're entering a new era of senior living. More solutions are available now than ever before, and we need to address them from a global and an international perspective.

At the beginning of his thought-provoking talk, David Halpern referenced the part that psychology plays in relation to behavioural change in later life, highlighting that people continue to adapt, learn and develop psychologically throughout their entire lifespan. He pointed out that cognitive decline as we age is not inevitable, as demonstrated by the fact that older people with higher abilities retain these abilities for much longer.

His Behavioural Insights Team estimates that people in the UK lose roughly 10 years of their potential lives through recognised detrimental lifestyle choices such as smoking and drinking alcohol. The team also observes that wellbeing increases later in life in relation to life satisfaction, happiness and feeling worthwhile.

David also picked up on recent UK trends, such as the increasing distance between young and old people as older people retire to the countryside and younger people move to cities.

He noted that for sustainable behaviour change to occur, its stimulus needs to be easy, attractive, social and timely (EAST). These four factors are important to developing a product or innovation and to making sure that it is adopted.

Useful examples of behaviour change innovations from around the world include:

– cross-generational co-housing

– promoting social connections to address social isolation (often overlooked as a key determinant of physical and mental health) between older people and between the generations, through school-based programmes

– promoting physical activity with gamification, which triples day-to-day exercise using technologies such as Fitbits, which elicits comparison effects that motivate and increase activity when integrated into a social community.

David asked the attendees to consider how to create clarity by signalling whether a product of service is good or not. He suggested that a good idea would be to 'trip advise' everything, be it a care home or a product, so that good products break through.
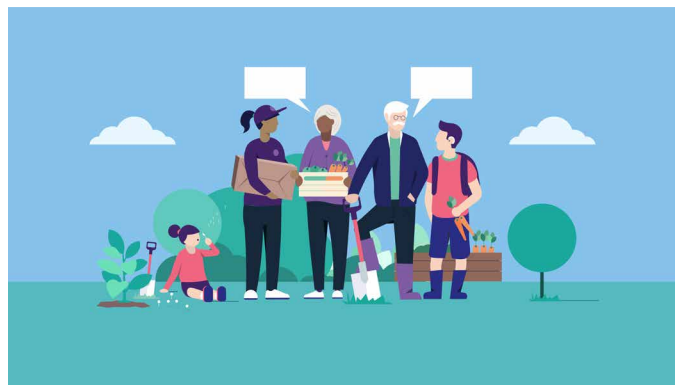
To watch or listen to the full session, go to:

David Halpern

Mike Short

Putting lived experience at the heart of innovation

This session focused on the latest approaches to embedding lived experience in every step of the innovation journey from concept to scale.

Panel

Chair: Professor Lynne Corner, Director of VOICE, UK National Innovation Centre for Ageing (NICA)

Ali Fawkes, Social Innovation Consultant, Humanly

Victoria McMann, Founder, Unforgettable Experiences, and Interim CEO, The Key

Rashmi Kumar, VOICE member

Sue Underwood, VOICE member

Key issues

This panel brought experts from academia, business and design together with people with 'lived experience'. They shared their experience of what is needed to age well and how these insights are used to develop innovative products, services and approaches. Different points of view were considered, from researchers and consumers to the investors who understand the commercial sense of engaging older people in co-developing innovations.

Discussions also covered whether research related to lived experience is funded appropriately and whether researchers need better training in best practice for calling on lived experience.

Key considerations

Hard to reach communities aren't actually hard to reach: they are often just left out or not understood. Researchers should interact with communities and community champions in the language they can understand.

Make sure that people can find places to share their lived experience and help co-develop products and services.

Siloed working practices in the NHS are a problem. Many research grants are for one-off issues such as Parkinson's, diabetes or osteoporosis, but the research does not cut across multiple conditions.

While it is often assumed that everyone has access to broadband and smartphones, Office for National Statistics data shows that older and poorer people have less internet connectivity.

Examples of engagement in action

Humanly, a design studio specialising in social impact, has tackled a wide range of complex social problems such as healthy ageing, mental health and dementia. They involve people with lived experience in every project throughout the whole process, starting with identifying the problem to be solved. They learn about people's lives and the context of a specific problem, then aim to solve it using co-created concepts and prototypes, which are tested to make sure the final product really works. Humanly has been working with the Centre for Ageing Better on employment support for people aged 50 and over in Greater Manchester.

Unforgettable Experiences, a project funded by the UKRI Healthy Ageing Challenge, provides live, online, creative, therapeutic artistic sessions. The sessions are aimed at older adults with memory complaints, mild cognitive impairments, dementia, and neurological conditions. To develop the service, the founders formed a lived experience group comprising people with different memory complaints and NHS professionals. They worked hand in hand in an iterative process and tested the service with potential users. The programme continues to consult with people who have lived experience to support continuous improvement.

VOICE members are often involved in research, sharing their lived experience and hopes for innovation. Rashmi says she found very little information for individual carers whose English may not be their first language, or where they may have learning or communication difficulties. Increased digital communication has definitely helped. Sue added that a lot of people, including funders, do not always understand the role of lived experience in research and how hard a task it can be to do properly.

To watch or listen to the full session, go to:

Day 2 Session 7
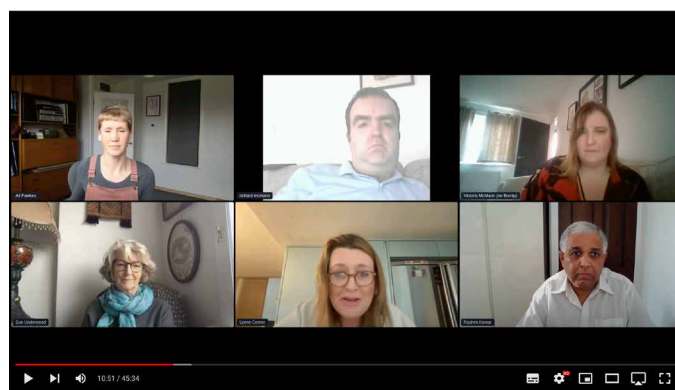
Emerging models: Leading the way in social impact funding

This session heard about investment models that aim to achieve social impact at scale and how market-driven innovation can accelerate products and services tailored for older consumers.

Panel

Chair: Mark Norbury, Chief Executive, UnLtd (an award-winning design studio specialising in human-centred design for social impact)

Alex Ramamurthy, Founder and CEO, Mirthy

Liz Dennis, Co-founder, The Filo Project

Laura Alexander, Income Generation Manager, Versus Arthritis

Key messages

The panellists discussed the relationship between evidencing impact and gaining finance for social innovation and social impact.

Panellists talked about social innovators, whose aims include behavioural, emotional and social change, tackling key issues and creating real impact by providing what older people want, such as greater social connections, wellbeing, productivity, and learning.

New approaches include financing innovations that fuel self-sustaining solutions that could grow in impact. Models should include qualitative and quantitative assessment so we can understand the lived experience as well as the measurable data. This approach will allow us to target investment and deliver the impact we want to see.

Best practice

Versus Arthritis targets leveraged investment to areas of greatest need, using insights from those lived experience people who are experts in their condition, as well as those professionals working in the condition area. The organisation is entirely funded by donations and has a strong investment portfolio. It funds research and offers direct support such as social care. Versus Arthritis is currently focused on sustainability and maintaining a reliable, predictable and sustained income. It chooses where to invest in research and innovation to ensure that its reserves and investment portfolio continue to grow.

The Filo Project provides care for people with early to moderate dementia in the South West. Its employees support groups of up to four people, collecting them from their homes for the day and bringing them back. Aims are to reduce social isolation and help people feel valued. The service is paid for: people either self-fund or are funded by the regional local authorities . The company feels that Somerset in particular is working in a very collaborative way, with social enterprises sat at the table alongside the local authority.

Mirthy offers events designed to bring like-minded people together to share interests and experiences, learn new things, and make new connections. The community has grown quickly to over 30,000 people, most of whom are aged 65 to 79. Mirthy, which completed an equity raising round a few months ago, says that equity investment comes with advice, access to talent and advisers, and ultimately, access to lots more capital. The company believes that its investors recognised that Mirthy's market is hugely under-served, given the millions of people who are more technology proficient than ever.
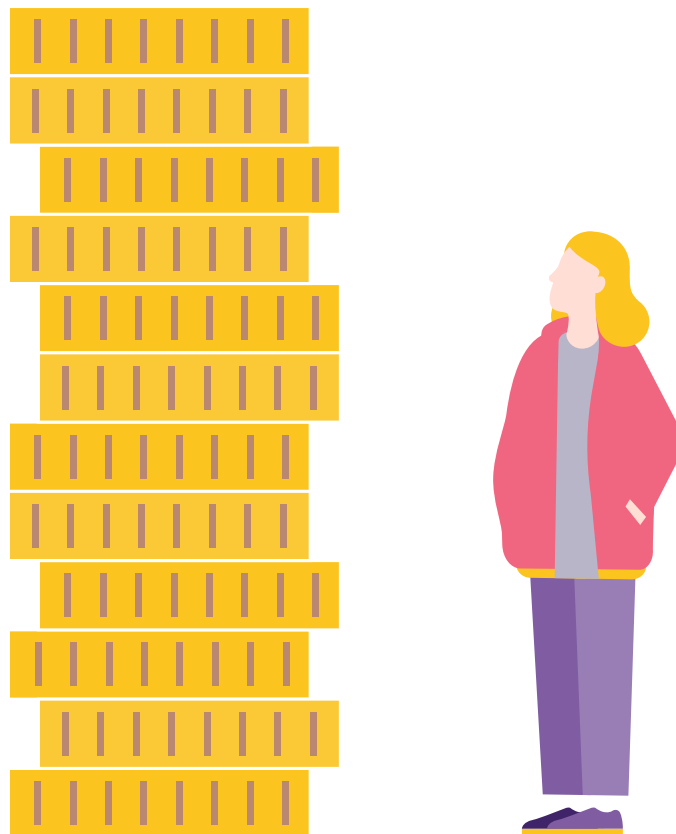
To watch or listen to the full session, go to:

Day 2 Session 8

New experiences: Opening up possibilities in ageing via creative industries

This session looked at how ground-breaking work in the creative industries can support healthy ageing. It covered research and commercial projects that are drawing on creative knowledge, immersive technology and design, to bring creative and cultural experiences to older people.

Panel

Chair: Andrew Chitty, Challenge Director – UKRI, The Audience of the Future

Shaun Allen, CTO, XR Therapeutics

Hannah Bradwell, Digital Research Fellow, University of Plymouth

Sarah Campbell, CEO, Play Well For Life

A new reality for older people

Immersive technology (known as XR) refers to a range of:

– augmented reality (AR), where the physical world is overlaid with digitally created data or imagery

– virtual reality (VR), where vision and hearing are completely separated from reality

The panel discussed the exciting potential to adopt these new immersive technologies to create compelling and engaging therapeutic and wellbeing experiences for older people.

Key messages

It is crucial for creative industries to work with researchers and social scientists to make sure they can design great experiences that people can access.

Traditional reminiscence activities, often used to help those with dementia, are labour intensive – digital technologies mean that we can support more people quicker.

Challenges include barriers such as: inequalities in access to digital connectivity; cost; business models and practicalities; building evidence to support the return on investment; and the essential need for activities and experiences to be multi-sensory.

Best practice

XR Therapeutics, funded by the UKRI Healthy Ageing Challenge, uses XR scenarios to treat children and young adults with phobias that are heightened because of conditions such as autism. They are now using the same techniques of creating scenarios in VR for older people who have phobias, especially post-COVID-19, for example, not wanting to go into a busy supermarket. Recent VR projects have shown that older people may not have been exposed to the technology but they have been 'blown away' by it.

The [Generating Older Active Lives Digitally (Goald) study](#), funded by the UKRI Healthy Ageing Challenge, from the University of Stirling in Scotland, supported by the University of Plymouth, is researching how older adults can engage with physical activities through digital means and intergenerational groups. It is using 3D scanning to make heritage locations accessible for those with mobility issues. This enables them to access health and wellbeing benefits through reminiscence, as well as providing activities and social spaces in which to interact with others.

[Play Well for Life](#) creates social games and immersive experiences to help people develop skills to lead happier, healthier lives. It focuses on experiences in games that create social connection and promote communication skills. It uses immersive technologies, in particular AR, to deliver more engaging experiences. One of the projects looked at how soundscapes can play a role for people with dementia and their family members.

To watch or listen to the full session, go to:

[Day 2 Session 9](#)

Innovative solutions: Addressing inequalities in health and care

People in the UK are now living longer in poor health and those from the poorest areas can spend up to 20 years with disabling health conditions. This session looked at new ways we can address health inequalities as we age.

Panel

Chair: Nuzhat Ali, National Health Improvement Lead in the Office for Health Improvement and Disparities at the Department of Health and Social Care

Rebecca Love, Co-founder, Vira Health

Emma Stone, Director of Evidence and Engagement, Good Things Foundation

Laia Bécares, Senior Lecturer and Co-Director, Centre for Innovation and Research in Wellbeing, University of Sussex

Veena Raleigh, Epidemiologist, King's Fund

Key messages

The panel highlighted the many dimensions to health inequality, from deprivation to geography and ethnic differences, with the onset of ill health occurring at younger ages in deprived and ethnic minority groups.

Discussions covered the actions needed to prevent people developing long-term conditions that lead to premature ageing, and how to help people better manage their own health.

Digital exclusion was among the factors the panel felt have a negative effect on healthy ageing, as it affects how people manage the wider determinants of health such as education, jobs, money, housing, social connections and loneliness.

Best practice

Laia Bécares leads a University of Sussex project that has found stark and persistent inequalities in health during later life after analysing over 20 years of survey data. While mainly characterised by socio-economic inequalities, the data reveals racism and racial discrimination at both an institutional and interpersonal level. Approaches to addressing health inequalities in later life need to tackle underlying socio-economic inequalities over the life course, including the role of racism in creating and maintaining socio-economic and health inequalities.

The Good Things Foundation digital inclusion charity focuses on providing people with the access, skills and confidence to use the internet safely. Digital inclusion can shape people's access to online health information and services, for example video consultations with GPs. Barriers can include low literacy, language, and citizenship status. Other channels should also be open to support people in taking their first steps to using the internet, such as providing support in community centres and other public places.

[Vira Health](#) is building digital health products for women in menopause. The aim is to address the factors that may affect a woman's ability to receive care, such as location and access to specialists, and whether she feels comfortable speaking to her GP. Vira Health is developing education, resources and support that can be accessed in confidence at any time . As the science develops, it will also be possible to support women in ways that recognise areas where menopause symptoms differ significantly, for example between different ethnic groups. Emerging science also shows that if menopause symptoms are left untreated, they can be related to disease in later life such as dementia, osteoporosis and heart disease, which is why they must be addressed.
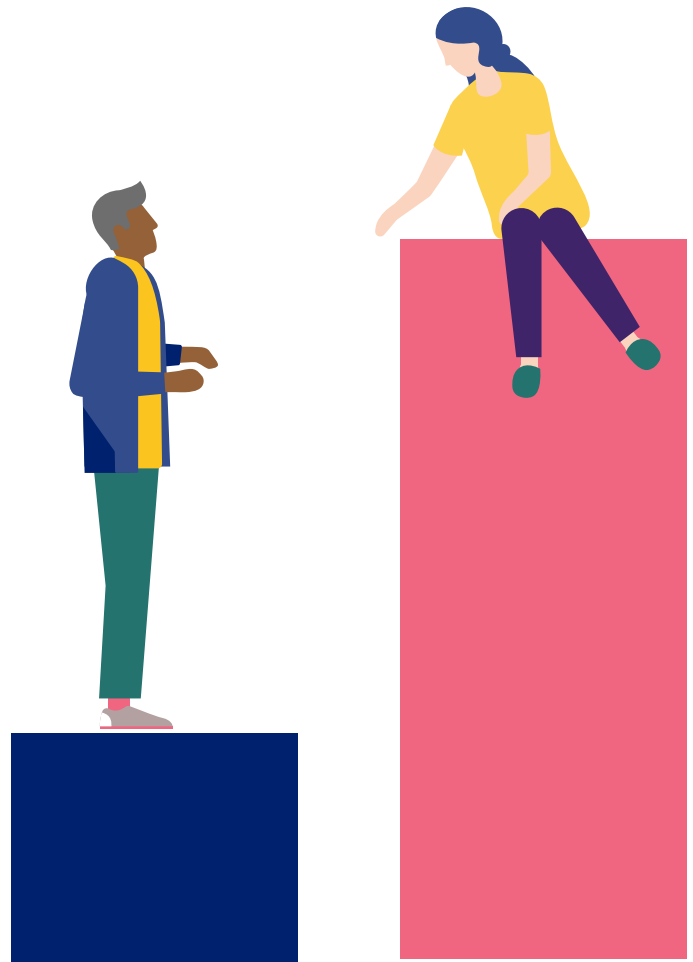
To watch or listen to the full session, go to:

[Day 2 Session 10](#)

Reimagining places: Creating a happy high street for all

In this session, the panel discussed the whole-community benefits of developing high streets and other public places such as town centres so they are more age friendly and inclusive. Professional illustrations depicting the reimagined high street of the future were created during the session, which are now available online.

Panel

Chair: Pam Smith, Chief Executive of Newcastle City Council (formerly Chief Executive, Stockport Counci)

Professor Leigh Sparks, Deputy Principal (Education and Students) and Professor of Retail Studies, University of Stirling

Vinita Dhume, Associate Director, Levitt Bernstein

Key issues

The panel session looked at a range of high street topics, among them how it is accessed, the facilities available, and how the space is designed. Panellists agreed that the high street should be there for all age groups, not just the younger generation. They also questioned whether there was currently any real focus on what people were looking for, such as the time to sit and relax, and a green space to enjoy.

Key messages

In the pandemic, a sense of localism became more important. People realised their local area had more to offer than they thought, with more vibrancy, activity and a sense of community.

Providing housing close to our town centres is vital for fuller day and evening activity, which can make it sustainable and help address anti-social behaviour.

How can we integrate green infrastructure and decarbonisation into high street development? Suggestions included planting more trees to support better mental health and addressing environmental risk by introducing green spaces, which can alleviate flooding. Providing more 'blue space' to provide places where people can sit and dwell was also suggested.

The high street can be a place where people can enjoy events and evening activities. For example, Stirling has had success with its Bloody Scotland festival, which is based around crime writing. We need to determine what will attract visitors but also build on residents' sense of heritage?

Better facilities will encourage more people to visit, such as improved toilet and baby changing facilities and more general seating so people can sit for a while.

Whose responsibility is high street development? It's not just being taken up by the private or public sector; communities are also getting involved. Aims include creating employment and providing activities for local people, and supporting independent and local businesses.

High streets are special places that are close to the local community's heart. If we put communities first, we will create wonderful places.

To watch or listen to the full session, go to:

By 2040, older consumers are predicted to spend £550 billion a year – that's 63p in every pound. Much of this will be spent on the high street, as long as it is a welcoming and inclusive place to be.

Fintech and finance for everyone: Ageing and inclusivity in financial services

This session explored how financial services and products can be made more inclusive to the benefit of not just older people but everyone using them.

Panel

Chair: Colum Lowe, Director, Design Age Institute

George Lee, Community Lead for the Design Age Institute

Andy Stuart-William, Head of Product and Communications, Curtis Banks

Julia Glenn, UKRI Healthy Ageing Challenge Design and Innovation Lead, Director/Trustee for Citizens Advice Bureau

Key issues

The panel discussed behaviour change during the pandemic and how people are now interacting differently with financial services by using a range of channels that meet different needs, including online, paper, telephone and chatbots. It was agreed that this has an effect on the costs of service delivery.

They said that fintechs may be able to react more quickly than the big banks in developing solutions for specific audience needs. Smaller, more creative, agile organisations can often develop ground-breaking ideas, but larger companies still have an important role to play in helping bring them to market.

The panel discussed how the concept of inclusive design can be used in financial services, where mainstream products or services are designed to be accessible to, and usable by, as many people as reasonably possible, without the need for special adaptation.

Key messages

The major challenges faced by individuals mirror the minor challenges we all face. Designing for 'extreme' user groups (those facing the most difficult challenges) makes products and services better for everyone.

The more that can be done in terms of inclusivity, the better the industry will be able to carry customers into older age.

The rapid digitisation of retail banking seems to have left older audiences behind. Innovators have opportunities to step in to solve these problems and mainstream financial services to step up.

Best practice

The [Design Age Institute](#) has developed a framework for talking about people and how they might change as they age, looking at different factors. This includes physical, mental and cognitive ability. It also covers the social aspect where, as we age, we can become isolated socially, and looks at changes in financial situations. A recent Institute survey showed that people's main financial concerns were around safety, accessibility, inclusivity and making digital processes intuitive – areas where current banking products and services are failing at the moment.

Citizens Advice: almost 40% of all advice given by Citizens Advice in the UK is related to money and financial services – a strong indication that they are inherently non-inclusive. The organisation shares all of its data in [Tableau](#) in the public domain, so innovators can access all of the shortcomings in information and difficult-to-untie knots in financial services, and use these insights for data-driven innovation in terms of finding solutions. In the context of an ageing sector, the work of Citizens Advice shows that the challenge is not that an ageing society is less able to get online, it is more that the process flow and online help platforms are not as inclusive as they could be.

To watch or listen to the full session, go to:

[Day 2 Session 12](#)
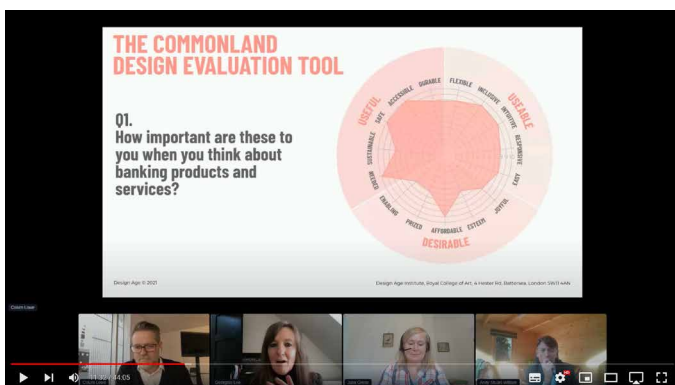
Chair: Colum Lowe, Director, Design Age Institute, said: "Over 50s already hold 70% of all household wealth. Around 70% of older adults are already online."

Julia Glenn, UKRI Healthy Ageing Challenge Design and Innovation Lead, Director/Trustee for Citizens Advice Bureau, said: "A recent survey of people aged 50 and over showed that 18% are unsure how to find out about their pension entitlement."

Local to global: Aspiration or realistic?

This plenary focused on how we can disrupt the healthy ageing market internationally and enable innovators to develop more effective services and products for people as they age by sharing best practices and ideas.

Panel

Chair: Dr Jane Barratt, Secretary General, International Federation on Ageing (IFA)

Jean Accius, Senior Vice President of Global Thought Leadership, AARP

Klaus Niederländer, Director, Ambient Assisted Living Association

[Dr Mike Short](#), Chief Scientific Adviser, Department for International Trade

Grace Chan, Business Director, Hong Kong Council of Social Service

Key issues

The panel was clear that the healthy ageing issue cannot be dealt with by one government or country alone. They said that while some solutions fit neatly into a high- and middle-income country, the question is how to scale up or adapt innovations to meet the demand of older people in lower- and middle-income countries.

Inclusion and serving the needs of everybody in the healthy ageing community was also highlighted as an issue. The panel considered the co-creation of solutions with communities, working from an 'asset mindset' rather than a 'deficit mindset' to leverage what they have rather than focusing on what they lack.

Key messages

Chair Dr Jane Barratt asked each speaker for a three-minute 'elevator pitch' on the session question. Here are some of their key thoughts:

We have to start to reimagine, rebuild and strengthen our societies in a way that meets the needs of an ageing population that is living much longer, but not necessarily in health. In the US, AARP has been working on age-friendly communities with multisectoral organisations and sectors. We know that there's a connection between where people live and how long they live. To be able to contribute, to be able to give back, to be able to connect with others, are critical themes for health and longevity that are transferable across the world. AARP's new report, '[Ageing Readiness & Competitiveness](#)', identifies innovations to close the gaps between how long people are living and the quality of life in terms of their health.

The [Active Assisted Living programme](#) has connected people and organisations, as well as emerging regional health and care ecosystems, to look at the challenges and opportunities of an ageing population. The focus was on developing digital-based solutions for ageing well. This programme was supported by 23 national and regional public funding agencies from 18 countries around Europe, Canada and Taiwan. Local to global has been a reality over the past ten years in terms of collaboration, networking, and building a strategic capacity for the global phenomenon of an ageing population, but the programme is still far from exploiting the gift of longevity.

The scope of the social challenge has to be heard by innovators. We also have to involve numerous stakeholders and cultivate a good social dialogue to hold all these stakeholders together. We need to extract good practice both locally and from overseas and maintain support for research and impact evaluations. When we talk about the [International Action Plan on Ageing](#), we talk about older people and development, health and wellbeing, and ensuring an enabling, supportive environment. These are not new to us, but we have a lot of new frameworks that we need to bring into our competencies.

It is absolutely key that whatever solutions we offer are trusted, available and cost effective. Much of the content on the internet is not age-friendly; we need a much bigger push from the content community to deliver more services and richer content to everybody. The technology we are offering needs to be looked at, not just through the lens of ageing, but also through that of diversity and broader inclusion. We are in the position where realism can be beaten by aspiration, if we adopt the technology in the right way.

AARP found that age discrimination cost the United States $850 billion worth of lost productivity in 2018

To watch or listen to the full session, go to:

[Day 2 Plenary Session](#)
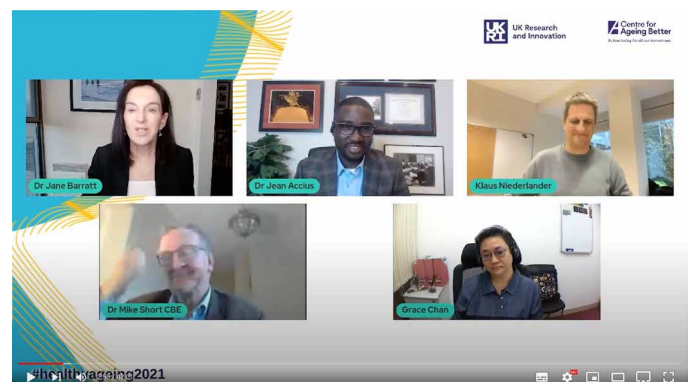
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Let's make ageing better.

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