The Global strategy and action plan on ageing and health 2016–2020: towards a world in which everyone can live a long and healthy life

The Sixty-ninth World Health Assembly,

Having considered the report on multisectoral action for a life course approach to healthy ageing: draft global strategy and plan of action on ageing and health;¹

Recalling resolution WHA52.7 (1999) on active ageing and resolution WHA58.16 (2005) on strengthening active and healthy ageing, both of which called upon Member States to take measures that ensure the highest attainable standard of health and well-being for the rapidly growing numbers of older persons;

Recalling further United Nations General Assembly resolution 57/167 (2002), which endorsed the Madrid International Plan of Action on Ageing, 2002, as well as other relevant resolutions and other international commitments related to ageing;

Having considered resolution WHA65.3 (2012) on strengthening noncommunicable disease policies to promote active ageing, which notes that as noncommunicable diseases become more prevalent among older persons there is an urgent need to prevent disabilities related to such diseases and to plan for long-term care;

Having also considered resolution WHA67.19 (2014) on strengthening of palliative care as a component of comprehensive care throughout the life course;

Recalling resolution WHA64.9 (2011) on sustainable health financing structures and universal coverage, which calls for investing in and strengthening health systems, in particular primary health care and services, including preventive services, adequate human resources for health and health information systems, in order to ensure that all citizens have equitable access to health care and services;

Welcoming the 2030 Agenda for Sustainable Development,² which includes an integrated, indivisible set of global goals for sustainable development that offer the platform to deal with the challenges and opportunities of population ageing and its consequences in a comprehensive manner, pledging that no one will be left behind;

¹ Document A69/17.

Noting that populations around the world, at all income levels, are rapidly ageing; yet, that the extent of the opportunities that arise from older populations, their increasing longevity and active ageing will be heavily dependent on good health;

Noting also that healthy ageing is significantly influenced by social determinants of health, with people from socioeconomically disadvantaged groups experiencing markedly poorer health in older age and shorter life expectancy;

Further noting the importance of healthy, accessible and supportive environments, which can enable people to age in a place that is right for them and to do the things they value;

Recognizing that older populations make diverse and valuable contributions to society and should experience equal rights and opportunities, and live free from age-based discrimination;

Welcoming WHO’s first Ministerial Conference on Global Action Against Dementia (Geneva, 16 and 17 March 2015), taking note of its outcome, and welcoming with appreciation all other international and regional initiatives aimed at ensuring healthy life for older persons;

Welcoming also the World report on ageing and health,¹ that articulates a new paradigm of Healthy Ageing and outlines a public health framework for action to foster it;

Recognizing the concept of Healthy Ageing, defined as the process of developing and maintaining the functional ability² that enables well-being in older age;

Having considered the draft global strategy and action plan on ageing and health in response to decision WHA67(13) (2014), which builds on and extends WHO’s regional strategies and frameworks³ in this area,

1. ADOPTS the Global strategy and action plan on ageing and health;⁴
2. CALLS ON partners, including international, intergovernmental and nongovernmental organizations, as well as self-help and other relevant organizations:

(1) to support and contribute to the accomplishment of the Global strategy and action plan on ageing and health and in doing so, to work jointly with Member States and with the WHO Secretariat, where appropriate;

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² This functional ability is determined by the intrinsic capacity of individuals, the environments they inhabit and the interaction between them. Moreover, Healthy Ageing is a process that spans the entire life course and that can be relevant to everyone, not just those who are currently free of disease.


⁴ See document A69/17, Annex.
(2) to improve and support the well-being of older persons and their caregivers through adequate and equitable provision of services and assistance;

(3) to support research and innovation and gather evidence on what can be done to foster healthy ageing in diverse contexts, including increased awareness of the social determinants of health and their impact on ageing;

(4) to support the exchange of knowledge and innovative experiences, including through North–South, South–South and triangular cooperation, and regional and global networks;

(5) to actively work on advocacy for healthy ageing over the life course and combat age-based discrimination;

3. URGES Member States:

(1) to implement the proposed actions in the Global strategy and action plan on ageing and health through a multisectoral approach, including establishing national plans or mainstreaming those actions across government sectors, adapted to national priorities and specific contexts;

(2) to establish a focal point and area of work on ageing and health, and to strengthen the capacity of relevant government sectors to deal with the healthy ageing dimension in their activities through leadership, partnerships, advocacy and coordination;

(3) to support and contribute to the exchange between Member States at global and regional levels of lessons learned and innovative experiences, including actions to improve measurement, monitoring and research of healthy ageing at all levels;

(4) to contribute to the development of age-friendly environments, raising awareness about the autonomy and engagement of older people through a multisectoral approach;

4. REQUESTS the Director-General:

(1) to provide technical support to Member States to establish national plans for healthy ageing; to develop health and long-term care systems that can deliver good-quality integrated care; to implement evidence-based interventions that deal with key determinants of healthy ageing; and to strengthen systems to collect, analyse, use and interpret data on healthy ageing over time;

(2) to implement the proposed actions for the Secretariat in the Global strategy and action plan on ageing and health in collaboration with other bodies of the United Nations system;

(3) to leverage the experience and lessons learned from the implementation of the Global strategy and action plan on ageing and health in order to better develop a proposal for a Decade of Healthy Ageing 2020–2030 with Member States and with inputs from partners, including United Nations agencies, other international organizations, and nongovernmental organizations;

(4) to prepare a global status report on healthy ageing for submission to the Seventy-third World Health Assembly, reflecting agreed standards and metrics and new evidence on what can be done in each strategic theme, to inform and provide baseline data for a Decade of Healthy Ageing 2020–2030;
(5) to convene a forum to raise awareness of Healthy Ageing and strengthen international cooperation on actions outlined in the Global strategy and action plan on ageing and health;

(6) to develop, in cooperation with other partners, a global campaign to combat ageism in order to add value to local initiatives, achieve the ultimate goal of enhancing the day-to-day experience of older people and optimize policy responses;

(7) to continue to develop the WHO Global Network of Age-friendly Cities and Communities as a mechanism to support local multisectoral action on healthy ageing;

(8) to support research and innovation to foster healthy ageing, including developing:
   (i) evidence-based tools to assess and support clinical, community, and population-based efforts to enhance intrinsic capacity and functional ability; and (ii) cost-effective interventions to enhance functional ability of people with impaired intrinsic capacity;

(9) to report on mid-term progress on implementation of the Global strategy and action plan on ageing and health, reflecting agreed quantifiable indicators, standards and metrics, and new evidence on what can be done in each strategic objective, to the Seventy-first World Health Assembly.

Eighth plenary meeting, 28 May 2016
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