

SILVER OPPORTUNITY

Building Integrated Services for Older Adults around Primary Health Care



INCREASED LONGEVITY: THE WORLD IS RAPIDLY GROWING OLDER



People aged 65 and older now outnumber children under 5.



By 2050, the older population is projected to double, to 1.5 billion.



Seniors could contribute more to society if health care systems met their unique health needs.



Primary health care (PHC) needs to be reimagined for older people and integrated with other forms of care, including community care and long-term care (LTC).

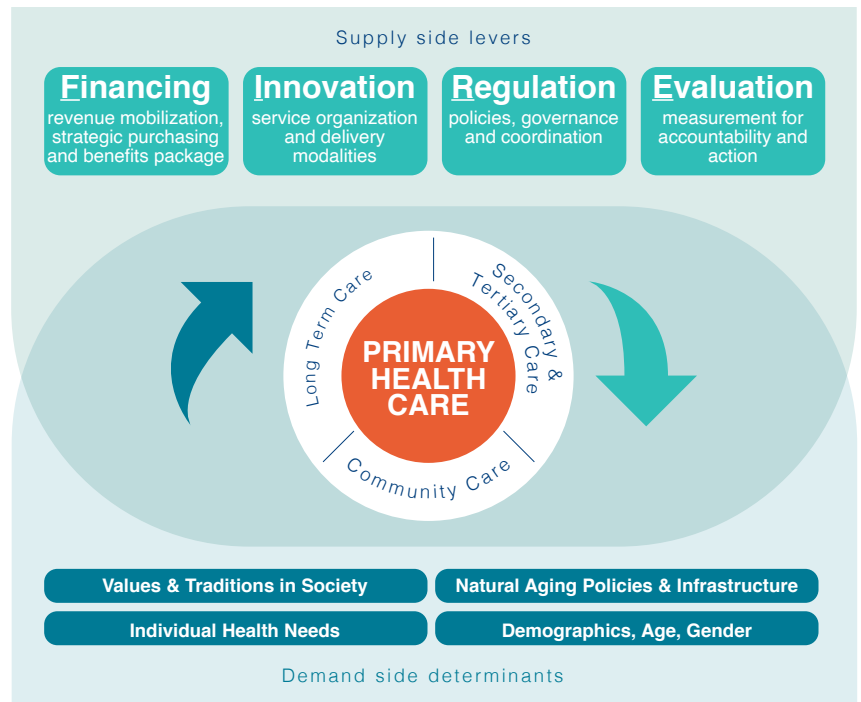
POPULATION AGING CALLS FOR HEALTH SYSTEM TRANSFORMATION

Drawing from global evidence and country experiences, “Silver Opportunity” presents an operational framework for countries to deliver age-responsive health systems anchored in PHC.

If governments succeed, they will dramatically improve older people’s health, strengthen social inclusion, and enable older people to live with dignity and autonomy. They will also be able to better control health and social care costs, lower government deficits, and spur economic growth.

LEVERS FOR AGE-RESPONSIVE HEALTH SYSTEM CHANGE: THE FIRE FRAMEWORK

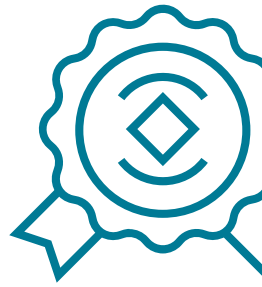
The book presents an original framework to show how core policy levers—financing, innovation, regulation, and evaluation—can transform PHC systems and uplift older people’s health.



The FIRE framework will help the world meet Sustainable Development Goal 3, which calls for “ensuring healthy lives and well-being **at all ages.**”

It will speed progress toward achieving Universal Health Coverage (UHC), in which all people have access to the health services they need, when and where they need them, and without financial hardship. Realizing the FIRE framework and UHC will yield a “triple dividend” for health systems and societies, enabling older people to thrive, contribute to families and society, and cost governments less for care.

The FIRE framework



Governments have a "silver opportunity" to improve older people's health by developing a whole-of-life approach to design health systems that meet seniors' needs by activating the four policy levers below.



FINANCING: MANAGING RESOURCES FOR PHC-LED SYSTEM CHANGE

- Leverage financing arrangements (e.g., provider payments) to encourage PHC gatekeeping and care coordination.
- Adopt universal coverage rather than age cutoffs, which worsen outcomes and raise long-term costs, for publicly funded health benefits.
- Regulate private insurance models to help balance access and benefits for patients, while encouraging care coordination and efficient referrals, as in China, Colombia, and Saudi Arabia.
- Leverage population aging trends to build support for public financing of health services and reduce out-of-pocket health spending.



INNOVATION: NEW TOOLS FOR THE AGING CHALLENGE

- Use individualized care assessments and planning to optimize home- and community-based services.
- Harness care management to strengthen integrated service delivery, as in Thailand.
- Engage and scale up multidisciplinary teams to deliver personalized LTC.
- Tap older people's knowledge, skills, and networks to implement community-based LTC, as in Cambodia, Indonesia, and Nepal.
- Explore partnerships to expand digital health ecosystems.
- Engage caregivers in the design and use of digital health tools.



REGULATION: LEVERAGING ELDER CARE TO ADVANCE HEALTH SYSTEM STEWARDSHIP

- Adopt a whole-of-government approach.
- Ensure regulatory flexibility to foster local decision-making and innovation.
- Balance regulation with incentives that reward strong performance and collaboration.
- Prioritize home- and community-based LTC to boost flexibility and control costs, as in Thailand.
- Look at other sectors beyond medical care to foster stewardship with a social lens, as in Japan.



EVALUATION: BETTER MEASUREMENT FUELS EFFICIENCY

- Obtain regular, reliable estimates of the number of older people with health challenges that prevent them from living independently.
- Use streamlined tools based on evidence to measure health care and LTC availability and quality.
- Harness diverse data sources for robust evaluation.
- Generate core utilization and facility data.
- Develop context-appropriate measurements for quality assessment.
- Provide detailed data on financing.

