WELTGESUNDHEITSORGANISATION **REGIONALBÜRO FÜR EUROPA**



ORGANISATION MONDIALE DE LA SANTÉ BUREAU RÉGIONAL DE L'EUROPE

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

High-Level Panel Discussion on Joining Forces for Solidarity Rome, Italy Friday, 17 June 2022

24 June 2022 Original: English

Opening Remarks

United Nations Economic Commission for Europe Ministerial Conference on Ageing Dr Natasha Azzopardi-Muscat, Director of Country Health Policies and Systems, World Health Organization Regional Office for Europe

- The WHO European Region is the region with the highest median age globally.
- Of course, there is much to celebrate about this. Before 2020, recent gains in life expectancy are all attributable to better health and lower mortality among the oldest age groups.
- But we stand at a critical juncture. If we don't take the right actions, these gains can potentially be lost.
- Recent estimates show us that life expectancy actually fell during 2020-2021, in 24 of 30 countries where data is available.
- So as we gather here today, we do so under somewhat grey skies.
- This is because the COVID-19 pandemic, in our Region and globally, although under control, is by no means behind us.
- And with a war in the midst of our Region, which is having a ripple effect in many countries in terms of refugee flows, food shortages, rising inflation, and an increasing pressure on health systems, the challenges we face today are many.
- The rising costs of living, with energy and food prices putting a strain on households across Europe and Central Asia, with an obvious effect on people's ability to pay for and access health care, should be a sounding alarm.
- I raise these issues today as we gather here, because these grey skies are particularly dauting for the older members of our communities, who

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often struggle with limited income and a limited ability to find alternatives.

- I raise these issues today because we, gathered here, have the chance to bring back sunlight and optimism and push these clouds away.
- We all know that COVID-19 has been particularly hard on the health of older people. No one can forget the tragic deaths that swept across long-term care facilities and hospitals in the first year of the pandemic.
- But we also know that the pandemic has challenged the mental health and well-being of older people in our communities.
- Fear of infection and death; isolation and distance from loved ones; grief; physical distancing. All these realities have taken a serious toll on older people's mental health, often leading to depression, anxiety and cognitive decline.
- Long before the pandemic, we at WHO Europe recognized the crucial importance of protecting people's mental health and decided to make mental health one of our four flagship initiatives. And the needs and realities of older people are at the heart of our flagship.
- In fact, WHO today released the World Mental Health Report. It is the largest review of world mental health since the turn of the century which draws on the latest evidence available and highlights why and where change is most needed and how it can best be achieved.
- We know that in 2019, around 13%, or 1 in 8, older adults aged 70 years and over lived with a mental disorder. About 7%, aged 65 years and over, live with dementia. We, at the WHO European Region, are addressing mental health of older people through the Pan-European Mental Health Coalition as part of our flagship.
- The health impact of the cost-of-living crisis has been real and tangible. People, including older people, have struggled to make ends meet and in some cases even to pay for the services and medicines they need.
- The concern is of course that state pensions haven't kept up with inflation and the prices of many essentials have risen well over inflationary rises.

- There is some evidence and news media coverage of older persons, even in the wealthiest of countries in Europe, having to choose between heating their homes or buying food, and this is before even considering their health needs.
- We know from WHO Europe's health financing work, that out-of-pocket payments for healthcare, and especially medicines, is a major cause of financial hardship.
- Out-of-pocket payments can push people into poverty or deepen existing poverty. And when health systems fail to provide adequate financial protection, people don't have the money to pay for medicines they need for their well-being.
- WHO encourages all national health financing systems to allow older people to access services when they are needed, and to protect them from financial catastrophe.
- With all this said, we are gathered here given our shared interest in brightening the skies, in working together to ensure that older people are better valued in, and cared for by, our societies.
- So, I have three asks of all of us.
- First, we need to prioritise the health and care needs of older persons.
 - This means that access to care and medicines should be a top priority for national health systems.
 - Our European Programme of Work, United Action for Better Health, is committed to making sure that older people are at the centre of national health planning.
 - Together with other UN agencies, we are moving forward with the Roadmap for a Decade of Healthy Ageing, an ambitious agenda that by 2030 is working to build a world where older people can live healthy and prosperous lives.
 - The Rome Declaration we will adopt during this meeting is in the spirit of the UN Decade and we hope that with this commitment we can make an age-friendly world a reality.

- **Second**, we must protect financing for health.
 - This was a lesson hard learned during the financial crisis of 2008 where, at least in the European Region, those countries that maintained heath spending and social safety nets were not just able to maintain health outcomes but recovered quicker.
 - We are now in a very similar position, where challenges such as war and energy and fuel crises are having an impact on health systems, causing governments to consider cutting back on health spending. This would be a mistake and would not only make us lose any gains made so far; it would put the health and well-being of our populations at serious risk. There is no recovery without investing in health.
- And finally, my ask is that as people and professionals we commit to working with decision-makers to build back, not just better, but fairer.
 And this means a real commitment to ensuring that older people are not left behind.
 - In their annual report of 2021, the charitable group HelpAge International put it in very stark terms:
 "The pandemic has also exposed ageism like never before. Older people have been separated and isolated, portrayed as weak and helpless and, their rights have been ignored."
 - We know what the solution is: investing in the health of older people is the right choice, not just for the individual, but for society as a whole.
- I know that these asks are already in line with the priorities of all of us gathered here today.
- But what I am really hoping for is that we can all work better together, in the spirit of collaboration and partnership.
- I'd like to recall the ten commitments made by governments at the last UNECE Ministerial Conference on Ageing in Lisbon, five years ago: The commitment to quality of life, independent living and health and wellbeing was singled out by many countries the one with the most achievements to celebrate, but also one with many challenges.

- COVID-19 and the cost-of-living crisis have no doubt been major setbacks.
- But I am sure this commitment is still alive and strong today.
- And from WHO's perspective, we look forward to working with all of you in making this a reality.
- So, it is in this spirit that I would like to thank our hosts, the Government of Italy, for hosting this conference and for all the thinking and work that has gone into the Declaration.
- Thank you.