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WHO-ISG collaboration on assistive technologies for healthy ageing-in-place

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SYMPOSIUM PRESENTATION 7: OTHERS

WHO-ISG collaboration on assistive technologies for healthy ageing-in-place: A round table discussion

E. Aspnes, J. Bergschold, N. Charness, M. L. Fang, G. Gutman, Y. Hsu, W. Kearns, H. S. M. Kort, T. M. Raymundo, H. Nap, D. Zandi, W. Zhang

Purpose Assistive Technology (AT) is used at various points in the lifespan by those coping with either short-term or long-term impairments, which can involve living with chronic conditions and/or comorbidities. In the case of older adults, AT can support or compensate for the functional or cognitive declines that they are likely to face in later life. AT can be integrated as part of smart homes (see Figure 1 from van Dijken et al, 2006); and should be safe to use, effective, easy to access, affordable, and not seen as stigmatising. In addition, AT should support older adults to have a meaningful life while building self-esteem, and autonomy and promoting social participation and community engagement. For this roundtable discussion, we present and discuss a WHO-ISG collaborative project focused on *Assistive Technology for Healthy Ageing*. For this project, we consider applications and use AT not only from a medical standpoint but also situated within a social perspective in the context of Gerontechnology. Results and propositions according to the WHO-UNICEF global report on assistive technology were applied as a starting point for this project (WHO, 2022), prioritising the potential benefits to individuals, their communities, and society and with a focus on identifying potential barriers that may occur and how to mitigate them. **Methods** Operationalisation of the project is organised into three pillars and applies a mixed-methods research approach. Pillar I focusses on developing assessment criteria/evaluation metrics for safety and effectiveness of technology (i.e. acceptability, accessibility, integration and appropriate use) to support active living and ageing-in-place by conducting a scoping review. Pillar II builds on findings from Pillar 1 and categorises available AT for ageing-in-place, evaluates existing evidence on their implementation and use, and identifies gaps where further research and innovation are required, with a focus on emerging technologies. Pillar III is dedicated to promoting better international cultural and scientific exchanges between clinicians, scientists, technologists/engineers, and allied professionals on the development and use of AT (including digital assistive technologies) for healthy ageing with a focus on ageing-in-place. **Results and Discussion** AT is accessed and applied on an individual, community and societal level. At the individual level, AT can include traditional products such as canes, wheelchairs and walkers but also digital assistive technologies, highlighted in emerging systems. At the community level, various technologies can support community surveillance. At the societal level, AT has direct policy implications for supporting ageing-in-place. For the round table discussion, stakeholders and researchers are invited to share their findings and views on AT for ageing-in-place, including benefits, accessibility, affordability, usability, fit-for-purpose in daily life, procurement, and helping to identify barriers and facilitators for the future of AT for healthy ageing.

References

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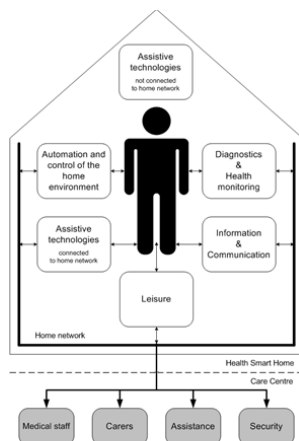
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Nations Children's Fund (UNICEF), 2022. License: CC BY-NC-SA 3.0 IGO, ISBN (WHO) 978-92-4-004945-1 (electronic version)

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Smart Homes Options including AT and Digital AT (van Dijken et al., 2006)