Strategies for creating an age-friendly city:
HONG KONG AS A CASE STUDY

Author: CUHK Jockey Club Institute of Ageing
Publisher: The Hong Kong Jockey Club
Website of Jockey Club Age-friendly City Project: www.jcafc.hk

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ISBN: 978-988-74589-3-7

Published in 2023
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Preface

The current United Nations Decade of Healthy Ageing (2021-2030), with its emphasis on functional ability (rather than presence or absence of diseases; or mortality), is particularly relevant for Hong Kong because it is an ageing society with the longest life expectancy in the world. One of the four strategies for healthy ageing is the creation of Age-friendly Cities. This approach is cross-sectoral, involving eight domains: Outdoor spaces and buildings, Transportation, Housing, Social participation, Respect and social inclusion, Civic participation and employment, Communication and information, and Community support and health services. The Hong Kong Jockey Club Charities Trust has taken a lead in starting this initiative in Hong Kong in 2015, in partnership with four universities, NGOs and local government and district councils in all 18 districts, all being now registered in the World Health Organization’s Global Network for Age-friendly Cities and Communities together with over 1,400 cities and communities all over the world. This book chronicles how this was done, the new knowledge arising from the project, comparison with other cities in the world, and finally sustainability of this concept and action arising from it that is so important for healthy ageing in an unequal world. Continual development depends on all of you, and most importantly older adults themselves in maintaining this momentum. This book tells you how.

Prof. Jean Woo
Director, CUHK Jockey Club Institute of Ageing
Co-Director, CUHK Institute of Health Equity
The origin of the global Age-friendly City movement

The Age-friendly Cities (AFC) movement was first promulgated by Dr. Alexandre Kalache of the World Health Organization (WHO) in 2005, in response to the twin demographic transitions in the 21st century of ageing and urbanisation (Kalache, 2016). The concept was built on the United Nations (UN) International Plan of Action on Ageing articulated in the Global Assembly in Madrid in 2002, which promoted active ageing as a policy framework, followed by guidelines for age-friendly primary care based on a study conducted in a wide range of countries by the WHO (WHO, 2004).

Subsequent development places an emphasis on functional capacity across the life course. The Vancouver Protocol (WHO, 2007a) for age-friendly cities and a document entitled Global Age-Friendly Cities: A Guide (WHO, 2007b) were published by the WHO, which provide useful reference to articulate age-friendliness as eight AFC domains under the urban context, namely Outdoor spaces and buildings, Transportation, Housing, Social participation, Respect and social inclusion, Civic participation and employment, Communication and information, and Community support and health services (Figure 1).

Central to this idea is to provide an enabling environment through a checklist of action points integral to the creation of social and economic well-being of older people. It also calls for a bottom-up process with older people as protagonists, as well as a top-down approach involving the public sector (i.e. government), civil society, educational institutions, and the private sector.
The WHO Global Network for Age-friendly Cities and Communities

To connect cities, communities and organisations worldwide with the common vision of making their community more age-friendly, the WHO further established the Global Network for Age-friendly Cities and Communities (WHO GNAFCC) in 2010. The Network provides a global platform for information exchange, experience sharing, and mutual learning.

Members of the WHO GNAFCC are not required to have achieved age-friendliness at the time of joining the WHO GNAFCC. However, they must commit to undertake a continuous process of improvement on age-friendly environment, and stay engaged and share their age-friendly practice with other members through the Global Database of Age-friendly Practices.

Since its inception with 11 members, this global network has grown to include 1,445 cities and communities across 51 countries as of May 2023, covering over 300 million people worldwide (WHO, n.d.). Furthermore, these AFC principles have evolved from cities to states to countries, and are being incorporated into a variety of settings. The concept of AFC is constantly evolving, accompanying the life course approach to healthy ageing in emphasising life-long learning, addressing health inequalities, and embracing a rights-based approach to social inclusion countering ageism.

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1 See https://extranet.who.int/agefriendlyworld/
The UN Decade of Healthy Ageing (2021-2030)

In 2015, WHO released the World report on ageing and health, which provides a new framework for understanding and fostering healthy ageing, built around the concept of functional ability. Healthy Ageing is the focus of WHO’s work on ageing between 2015 and 2030, and it also aligns well with all sustainable development goals (SDGs) proposed by the UN. The development of age-friendly cities and communities was identified as one of WHO’s ten priorities on fostering healthy ageing.

WHO (2015) defines healthy ageing as the process of developing and maintaining the functional ability that enables well-being in older age. Functional ability combines the intrinsic capacity of the individual, the environment a person lives in and how people interact with their environment (Figure 2).

The UN Decade of Healthy Ageing (2021-2030)2 emphasises a life-long approach to healthy ageing to achieve both longer and healthier lives, using a human rights approach observing universality and equity, and fostering older people’s well-being. It calls for four areas of action, including combating ageism, age-friendly environments, integrated primary care and long-term care (Figure 3).

Being the second action plan of the WHO Global Strategy on Ageing and Health (2016-2030), the UN Decade of Healthy Ageing (2021-2030) was launched in 2020. It targets a 10-year sustained and transformative multi-sectoral collaboration among governments, organisations and agencies, professionals and scholars, and private sectors, with older people at the core of the action plan on fostering healthy ageing.

Figure 3. Four action areas of the United Nations Decade of Healthy Ageing 2021-2030

2 See www.decadeofhealthyageing.org
AFC concept continues to evolve, and recent years have seen various critical evaluations of the concept from studies all over the world (Philips, Woo, Cheung, Wong, & Chau, 2019; van Hoof & Marston, 2021). Measurement of age-friendliness is crucial for monitoring and evaluating the progress of AFC initiatives and improvement in age-friendliness. The development of measurement tools and age-friendly indicators has attracted attention from researchers across different countries (Gan, Mahmood, Routhier, & Mortenson, 2022; Kim, Buckley, Burnette, Kim, & Cho, 2022; Silverstein et al., 2021). Various tools and checklists of AFC are available, covering various geographical scales (community vs individual), nature of measures (subjective vs objective) and targets (residents vs policymakers) (Kim et al., 2022).

Rémillard-Boilard et al. (2021) explored the goals, achievements and challenges of the AFC framework in 11 countries. A recurring theme is the need for emphasising the benefits to older citizens through meaningful citizen participation in the community encountered social exclusion that occurs in many societies (e.g. Chung, Kim, Auh, & Park, 2021; Dikken, van den Hoven, van Staalden, Hulsebosch-Janssen, & van Hoof, 2020; Joy, 2021; King et al., 2020), and highlighted by the WHO’s *Global Report on Ageism* (WHO, 2021a).

Previous work also reviews the benefits of AFC to tackle the challenges of ageing population. It has been well-recognised that the fit between the person and the environment is a vital component of successful adaptation in old age. In particular, the ecological theory of ageing (Lawton & Nahemow, 1973) suggests that older people consciously adapt themselves and their environments to achieve an optimal fit between their competence and surrounding.

Among these areas, creating age-friendly environments directly addresses the importance of an age-friendly city or community in fostering active and healthy ageing. Building age-friendly environments, both urban and rural, is recognised to be crucial to the intrinsic capacity of older people, as well as maintaining their autonomy, dignity and well-being. Specific actions, including supporting the inclusion of the voices of older people, promoting territory-wide programmes in age-friendly communities, taking evidence-based actions to facilitate intrinsic capacity, and evaluating the outcomes of these actions, are listed under this area of action.

Another action area highly relevant to an age-friendly community is ageism, which is the perceived stereotypes and discrimination directed towards others or oneself based on age. Ageism also imposes barriers to the development of good policies and programmes for older people, as it influences the way problems are framed, the questions asked and the solutions offered. To combat ageism, organising public education campaign has been recognised as a key action on changing how people think, feel and act towards age and ageing, and therefore creating an age-inclusive society.
This corresponds to the notion of “ageing-in-place”, attending to older people’s wish to stay in a familiar environment when they age (Rowles, 1994), and the establishment and maintenance of an age-friendly community has important implications to support older persons to remain independent and to age-in-place. Therefore, facilitating ageing-in-place by enhancing age-friendliness is also a widely adopted policy goal over the world, especially in rapidly ageing countries/regions (van Hoof & Marston, 2021).

More importantly, achieving age-friendliness could improve older people’s physical and psychological well-being. An inclusive and adaptive community with equal opportunities to access supportive facilities and services is essential for the development and maintenance of the intrinsic capacity of older people, which in turn reduces health inequity in society in the long run. In addition, an age-friendly environment does not only benefit older people, but also society as a whole. For example, a comfortable and safe community can be enjoyed by older people and other members of the community alike.

Figure 4. Benefits of AFC

- Create an enabling, accessible, inclusive and supportive environment for people of all ages to access to services and facilities
- Prepare cities and communities for demographic change that enables ageing-in-place
- Foster healthy ageing and reduce health inequalities
- Encourage bottom-up participation on creating an age-friendly environment
- Cultivate positive attitudes toward ageing, enhance inter-generational solidarity, and reduce ageism

At the same time, there is a growing body of literature that highlights the important role of geography, the built environment and urban planning, as well as the contribution of technology to achieving an age-friendly environment (Hsu & Bai, 2021; Marston, Niles-Yokum, & Silva, 2021; Marston & van Hoof, 2019; Priestman, 2019). A recent Lancet Commission highlights the importance of digital transformation for future health care and its potential for universal health coverage for all people (Kickbusch et al., 2021). Yet, declining ability accompanied with the ageing process for older people to use digital products must be taken into account to avoid digital exclusion based on declining physical and cognitive function as well as social gradient in equality of access.

The issue of sustainability is also being examined in various countries and is of particular importance when many governments are faced with austerity measures in the provision of health and social care. While the concepts advocated by the WHO have received widespread support, subsequent responses in many countries are challenged by the availability of funds and the development of a sustainable model.

Since this initiative depends on multiple sectors in society in addition to government policies, prioritisation is likely to be a major hurdle in the incorporation of the AFC concept into all facets of society. The prevalence of ageism, whether implicit or explicit, represents a major obstacle to be overcome for any society aspiring to the ideals of the AFC. Successful incorporation of AFC principles depends on widespread adoption by policy makers involved in all the eight AFC domains; raising awareness in civil society as well as the business community. Above all societal acceptance of the crucial role of citizen participation is of overriding importance.
The critical role of AFC for healthy ageing and health equity in Hong Kong

Ageing population in Hong Kong

Hong Kong is a Special Administrative Region of China, which had been a British colony for 156 years until 1997. The health and social care systems have been established under colonial rule, to follow that of the United Kingdom, except for primary care. The success of its preventive health services enables the population to have the longest life expectancy at birth in the world (World Bank, 2022).

Nevertheless, similar to many cities in the world, Hong Kong is facing a rapid trend of ageing population. The proportion of elderly population aged 65 or above in the total population of Hong Kong was 18% in 2019 and projected to be 31% two decades later (Figure 4). By 2039, about one in three people will be elderly aged 65 or above (Census & Statistics Department, 2020). Building an AFC is crucial for tackling the challenges of the ageing population, and to enhance quality of life as people age in Hong Kong.

Figure 6.
Ageing population in Hong Kong

The compactness and contrasting urban and open spaces also possessed many advantages for ageing people to live in Hong Kong. Although Hong Kong occupies only 1,100 square kilometres, about 40% is occupied by protected country parks, and therefore approximately 7.5 million people live in only about 25% of the area, making the population density the highest in the world. As a result, the city has distinctive features in terms of vertical living, high walkability, and easy access to country parks and nature trails.

Source: World Bank, 2022
Philanthropic approach on building AFC

The concept of the influence of the physical and social environmental factors as determinants of health, in addition to the role of personal social determinants of health such as lifestyle and socio-economic characteristics, began to be promoted in the early 2000s in a collection of essays from a transdisciplinary perspective (Woo, 2013). This collection represents a summary of the work of the Jockey Club CADENZA Project, a collaborative initiative with The Hong Kong Jockey Club Charities Trust (the Trust) that started in 2006. A detailed description to explore the age-friendliness of Hong Kong covering opportunities, initiatives and challenges may be found in Philips et al. (2019). These two bodies of work inspired by the WHO’s AFC philosophy, together with the AFC initiative from the Hong Kong Council for Social Service representing the territories’ non-governmental organisations providing community services for older adults, laid the foundation for a major territory-wide AFC initiative led by the Trust in collaboration with academia, non-governmental organisations, district councils, and business sector since 2015.

The Hong Kong Jockey Club Charities Trust is one of the world’s top ten charity donors and a major contributor to Hong Kong society through The Hong Kong Jockey Club’s unique integrated business model to channel surplus to charity. In recent years, donations followed certain strategic areas considered of top importance to Hong Kong society, complementing gaps that may exist in services provided by separate government departments. Promoting positive ageing and elderly care represents the Trust’s Elderly Strategy. It allows the development of concepts, and new services models, that normally would cut across many different departments and thus hampering possible development through the existence of silos.

Due to rapid population ageing, the societal response needs to be flexible, timely and transdisciplinary. With the amount of possible funding and the ability to harness multiple partners in society, the Trust is in the unique position of testing proof of concept strategies and models that contribute to healthy ageing. Sustainability may then be through incorporation into government service models, or non-governmental organisations using self-financing models.

Jockey Club Age-friendly City Project

With the aim of building an AFC which can cater to the needs of all ages and promote healthy ageing in Hong Kong, The Hong Kong Jockey Club has approved donations of HKD191 million to initiate and fund the Jockey Club Age-friendly City Project (JCAFC Project) since 2015, in partnership with four gerontology research institutes from local universities, namely Jockey Club Institute of Ageing of The Chinese University of Hong Kong, Sau Po Centre on Ageing of The University of Hong Kong, Asia-Pacific Institute of Ageing Studies of Lingnan University, and Research Centre for Gerontology and Family Studies of The Hong Kong Polytechnic University.

The JCAFC Project adopts a strategic approach consisting of bottom-up and district-based, evidence-based, and multi-sectoral collaboration to support 18 districts of Hong Kong in taking forward age-friendly initiatives, arousing public awareness and encouraging community participation in building an AFC. In the beginning the age-friendliness of each district was assessed by four gerontology research institutes based on the eight AFC domains, the results of which guided the drawing up of three-year action plans and district-based programmes in consultation
with District Councils and district stakeholders. Leveraging on the Trust’s strong network, a multi-sectoral collaboration was formed, consisting of 18 District Councils, corresponding District Offices and various government departments; partnership with four gerontology research institutes to engage professional sectors and the broader community; active involvement of more than 70 non-governmental organisations in building up an age-friendly momentum; and participation of over 380 companies/organisations from the business and public sectors in the form of the Jockey Club Age-friendly City Partnership Scheme (see Chapter 2), as well as the general public.

The ultimate objective of the JCAFC Project is to insert the concept of age-friendliness into all facets of society, such that the ultimate sustainability of the Project will hopefully be reflected in the improvement and continuing development in all eight AFC domains. Effectively the JCAFC Project is a good example of the recent concept of lateral public health, whereby important public health gaps in ageing population which are not met by the government in a timely manner or because of the difficulty of multiple departments working in a coordinated way, may be taken up by philanthropic organisations.

This book chronicles the various initiatives that have been carried out, describing the underlying rationale, the evaluation of the impact, and critically examines the sustainability of the movement and continuing development strategies for Hong Kong. This work represents for the first time the documentation of the needs of older adults; how well society is responding to these needs; and the evidence of effectiveness in responding to these needs. Hopefully, the Project will represent a major step forward in building a solid framework for continuing efforts towards the societal goal of healthy ageing, countering health inequalities and ageism.
Overview

With the aim of building an AFC which can cater to the needs of all ages and promote healthy ageing in Hong Kong, the JCAFC Project has adopted the WHO model that calls for a four-stage process of continuous improvement across the stages of engaging and understanding, plan, act, and measure to complete the age-friendly journey in all 18 districts since 2015. This chapter reviews the key approaches and strategies adopted by this 8-year project on pushing forward the age-friendly city movement in Hong Kong, and how the action areas of the UN Decade of Healthy Ageing (2021–2030) have been addressed by those strategies.

Box 1. Key approaches of the JCAFC Project

- An evidence-based approach to plan the age-friendly initiatives
- A bottom-up approach to foster the abilities of older people in the community
- Cross-sectoral collaboration and actions on building an age-friendly city
- Campaigns for tackling ageism in the society

An evidence-based approach to planning the age-friendly initiatives

To prepare for the continued ageing of the population in Hong Kong, there is a pressing need to assess the well-being of local older people to assist in formulating effective policies and intervention strategies to address this socio-demographic change in Hong Kong. Research and survey is one of the key approaches emphasised by the JCAFC Project to provide evidence for guiding project planning, implementation, as well as evaluation.
The AgeWatch Index for Hong Kong

At the beginning of the JCAFC Project, the Trust commissioned CUHK Jockey Club Institute of Ageing to develop a local AgeWatch Index to assess the elderly well-being in a comprehensive manner with locally significant indicators annually since 2014 for six consecutive years.

Based on 13 indicators in four domains (i.e. income security, health status, capability, and enabling environment) proposed in the Global AgeWatch Index, Hong Kong was ranked 24th among 97 countries and territories in 2014. In terms of the domains, Hong Kong performed well in enabling environment (rank 4th) and health status (rank 9th), average in capability (rank 33rd), but poor in income security (rank 75th) (Figure 7).

Figure 7. Rankings of AgeWatch Index for Hong Kong 2014

<table>
<thead>
<tr>
<th>Overall Ranking: 24</th>
</tr>
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<tbody>
<tr>
<td><strong>Enabling Environment</strong> (Ranking: 4)</td>
</tr>
<tr>
<td>Access to public transport</td>
</tr>
<tr>
<td>Civic freedom</td>
</tr>
<tr>
<td>Physical safety</td>
</tr>
<tr>
<td>Social connection</td>
</tr>
<tr>
<td><strong>Health Status</strong> (Ranking: 9)</td>
</tr>
<tr>
<td>Life expectancy at 60</td>
</tr>
<tr>
<td>Healthy life expectancy at 60</td>
</tr>
<tr>
<td>Psychological wellbeing</td>
</tr>
<tr>
<td><strong>Capability</strong> (Ranking: 33)</td>
</tr>
<tr>
<td>Educational status of older people</td>
</tr>
<tr>
<td>Employment of older people</td>
</tr>
<tr>
<td><strong>Income Security</strong> (Ranking: 75)</td>
</tr>
<tr>
<td>GDP per capita</td>
</tr>
<tr>
<td>Pension income coverage</td>
</tr>
<tr>
<td>Relative welfare of older people</td>
</tr>
<tr>
<td>Poverty rate in old age</td>
</tr>
</tbody>
</table>

Later, the AgeWatch Index was further expanded to the Hong Kong Elder Quality of Life Index (HKEQOL Index) in 2016. It includes tailor-made indicators for Hong Kong about the AFC concept proposed by the WHO and takes reference to the Global AgeWatch Index, using 22 indicators in the same four core domains (Figure 8).

The HKEQOL Index enables the trend analysis of the social and economic well-being of older people annually, as well as monitoring and evaluating local age-friendly initiatives. The significance of the HKEQOL Index for establishing local indicators to measure the quality of life among older people will be further examined in Chapter 5.

Figure 8. Indicators of the HKEQOL Index

3 The detailed reports on HKEQOL index can be found at www.jcafc.hk/en/Resources-Centre/Publications/Report-On-Hong-Kong-Elder-Quality-Of-Life-Index-And-AgeWatch-Index-For-Hong-Kong.html

Assessment on age-friendliness in 18 districts of Hong Kong

Conducting an age-friendliness assessment is another strategy adopted by the JCAFC Project to understand the needs of older people in the local community, and therefore to identify areas of improvement for future action and change. Supported by four university partners, the JCAFC Project conducted a baseline assessment study, comprising quantitative and qualitative methods, to assess the level of age-friendliness of eight AFC domains in 18 districts of Hong Kong from 2015 to 2017.

Overall, more than 9,700 respondents completed the questionnaire survey and over 700 participants joined the focus group interviews (91 focus groups in total) in 18 districts. Among the eight AFC domains, Social participation (4.29 out of 6) and Transportation (4.27 out of 6) scored the highest, whereas Civic participation and employment (3.87 out of 6), Housing (3.71 out of 6) and Community support and health services (3.67 out of 6) scored the lowest (Figure 9).

And approximately three years after the baseline assessments and the implementation of AFC initiatives under the JCAFC Project, final assessments have been conducted from 2018 to 2021 with a similar methodology to evaluate the latest level of age-friendliness in all 18 districts of Hong Kong and identify any changes or improvements. Compared to the baseline assessment, significant improvement was observed in six out of eight domains (except Social participation and Transportation) (Figure 9), which is highly encouraging.

The results of the baseline and final assessments provided the evidence for the JCAFC Project to engage with the stakeholders of local districts, e.g. District Councils (DCs)/District Offices (DOs), non-governmental organisations (NGOs) to discuss and develop the district-tailored action plans that addressed the lower scoring of the AFC domains, propose appropriate strategies and action steps on improving the age-friendliness in 18 districts, and evaluate the effectiveness of AFC interventions.
A bottom-up approach to foster the abilities of older people in the community

The bottom-up approach emphasizes empowering the older people to play a part in enhancing the age-friendliness of their community. This expresses the paradigm shift from a view of older people as service recipients to key actors in creating an age-friendly community.

AFC Ambassador Scheme

The JCAFC Project has launched the Ambassador Scheme since 2015 to recruit and provide training to older people to be AFC Ambassadors. The scheme aims at building the capability of older people with AFC knowledge and critical skills to spread AFC messages in the community and encourage bottom-up community participation by providing them with various opportunities for active participation in building an AFC. As of May 2023, over 2,750 AFC Ambassadors were trained to offer support to various programmes and events of the JCAFC Project to improve the age-friendliness of the city. They were empowered with knowledge, well-being and attitude change. The sustainable participation of this valuable group is significant for taking forward the AFC movement in the long run.

Developmental stages of AFC Ambassadors

The Asia-Pacific Institute of Ageing Studies of Lingnan University has compiled the Age-friendly City Ambassadors Training Manual (2021) to consolidate the experience of training ambassadors throughout the JCAFC Project. The AFC Ambassadors are empowered through three developmental stages, ranging from passive to active roles:

Figure 10. Ladder of AFC Ambassadors

Stage One: Participant

Stage Two: Facilitator

Stage Three: Executor

In the first stage, the older people were recruited and trained to be AFC Ambassadors through various types of training activities, such as workshops, classes, talks, exhibitions, and etc. They learnt basic concepts of AFC and its relationship to their daily life and community, as well as equipped with the knowledge skills to voice out and promote age-friendly message.
Stage two: Executor

In the second stage, the AFC Ambassadors were facilitated to transfer their acquired knowledge into practice. They assisted in conducting age-friendliness assessment in their respective districts, supporting the implementation of AFC programmes (e.g. home visit to the elderly in need), and conveying AFC messages to the public through various publicity activities (e.g. street booths and exhibitions). Their active participation also deepened their understanding of the AFC concepts and raised their sense of belongings to the community.

Stage three: Facilitator

In the final stage, the AFC ambassadors are empowered to share views and suggestions on AFC issues to relevant stakeholders for the improvement, such as being a guest speaker in AFC public forums and publicity events. They are also encouraged to propose ideas for AFC initiatives and promotion.

Cross-sectoral collaboration and actions on building an age-friendly city

The JCAFC Project leveraged the Trust’s strong network, and its neutral and philanthropic role to ignite cross-sectoral collaboration to spur AFC initiatives, and mobilise different sectors to join AFC movement in the long run (Table 1). This section will further examine how this cross-sectoral network has been engaged and formed under the case of the JCAFC Project.

Table 1. Multi-sectoral collaboration on building an AFC

<table>
<thead>
<tr>
<th>Partners</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academia (universities)</td>
<td>Collaborated with four gerontology research institutes of local universities to promote AFC movement across the city</td>
</tr>
<tr>
<td>District Councils</td>
<td>Engaged the local administration in all 18 districts to improve age-friendliness at district level through a systematic plan of actions and joining the WHO Global Network for Age-friendly Cities and Communities</td>
</tr>
<tr>
<td>Public and business sectors</td>
<td>Organised the Jockey Club Age-friendly City Partnership Scheme and industry-focused publicity campaigns to encourage public and business sectors to adopt age-friendly practices</td>
</tr>
<tr>
<td>Community organisations</td>
<td>Connected with over 70 NGOs and community organisations for implementing 140 age-friendly programmes across 18 districts of Hong Kong</td>
</tr>
<tr>
<td>Media</td>
<td>Partnered with different media (e.g. radio stations, print media, television and online media channels) to promote age-friendly messages</td>
</tr>
</tbody>
</table>
University partners

District support
At the beginning of the JCAFC Project, four gerontology research institutes of local universities were engaged as collaborating partners to provide support and advice to 18 districts of Hong Kong to launch an age-friendly movement (Figure 11). The university partners utilised their professional knowledge to conduct baseline and final assessments on age-friendliness in each district, monitor the progress of AFC initiatives and evaluate the impact of the overall project.

Figure 11.
Comprehensive Support Scheme for Districts

Knowledge transfer
Other than research and evaluation, the university partners also took up an important role to transfer the AFC knowledge to the community, such as providing training to older people as an AFC Ambassador, sharing the findings of age-friendly assessments to district stakeholders (e.g. attending the meetings of District Councils), as well as organising public education activities to facilitate the discussion on AFC in the community (e.g. press conference, public forums).

A series of public forums on the eight AFC domains were organised by four university partners from 2017 to 2020 in raising public awareness of age-friendly issues and potential areas for improvement. Government officials, public bodies, professionals, NGOs, the business sector and AFC Ambassadors were invited to be the speakers to discuss and exchange ideas on AFC topics. Exhibition and activity booths were also set up along the forums to facilitate the dissemination of age-friendly messages to the community members.

AFC Public forums
Since the beginning of the JCAFC Project, the university partners have organised press conferences regularly to share the latest research findings on AFC to the public and raised public awareness on the age-friendly issues, such as the Press Conference on “AgeWatch Index” were organised in 2015 and 2016 to report the trend analysis of the well-being of older people and identify areas for improvement with a view to turning Hong Kong into an age-friendly city.

Press conferences were also organised to announce the results of baseline assessment of age-friendliness in 18 districts of Hong Kong, in which the research team shared the common age-friendly concerns and suggested directions of action to enhance age-friendliness. For example, the Press Conference on “Elderly Employment” were held on 11 July 2017 to announce baseline assessment results on elderly employment and related AFC initiatives under the JCAFC Project.

Publications and sustainability deliverables
Based upon the research findings of the JCAFC Project, the university partners have compiled various types of research reports to highlight the current situations of age-friendliness in each district and the wellbeing of elderly in Hong Kong, as well as identify the areas for enhancing the age-friendliness for each AFC domain (Table 2). Those reports can serve as a useful reference on policy planning of age-friendly initiatives in Hong Kong.

| Publications and sustainability deliverables |
| Reports on Hong Kong Elder Quality of Life Index and AgeWatch Index for Hong Kong |
| 6 index reports and 4 topical reports on Enabling Environment, Health Status, Capability, and Income Security |
| Baseline Assessment Reports and Final Assessment Reports of age-friendliness in 18 districts |
| Total 36 reports, including 18 reports for baseline assessment and 18 reports for final assessment |
| Thematic reports on AFC domains |
| 4 reports on Community support and health services, Communication and information, Outdoor spaces and buildings, and Transportation |

Table 2. Research reports under the JCAFC Project
To maintain the age-friendly momentum and extend the positive impacts and AFC synergy sustainably, four university partners developed various types of deliverables for different stakeholders in taking forward the AFC movement in the long-run. Various manuals and guidebooks were compiled to provide practical guidance and share best practices on AFC for the government, policy makers and other stakeholders when designing and implementing age-friendly initiatives (Table 3).

Table 3. Manuals and guidebooks for different stakeholders

- **Age-friendly City Guidebook**
  - Provide practical guidance and useful resources for the design, implementation and evaluation of age-friendly initiatives

- **Guidelines for Hong Kong’s Members of WHO Global Network for Age-friendly Cities and Communities**
  - Provide step-by-step instructions for sustaining the membership of the WHO GNAFCC

- **Age-friendly City Ambassadors Training Manual**
  - Consolidate the experience of the JCAFC Project for training AFC ambassadors in the community

- **Age-friendly District Profiles (18 districts of Hong Kong)**
  - Share the research findings, practical experiences, concerns and recommendations relating to age-friendliness of each district

To facilitate the long term sustainability of AFC synergy, an online resource platform “**Age-friendly Port**” has been developed under the JCAFC Project. It covers contents on different topics, including district profiles, good practices in Hong Kong and worldwide, and research findings, and provides useful resources of all kinds, such as videos, booklets, articles, guides and mobile applications, etc., for the elderly, members of the community and different stakeholders to spur collaboration and advancement in building Hong Kong into an age-friendly city.

**Figure 12.**
**Age-friendly Port – online resource platform**

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3 The online resource platform “Age-friendly Port” can be accessed at [www.jcafc-port.hk](http://www.jcafc-port.hk)
Further engagement works include forming or delegating discussion platforms of Working Groups or Committees under each DC to regularly discuss the AFC issues and the progress of AFC initiatives in the action plan. The discussion platforms also serve as a bridge between different community stakeholders, including government departments, NGOs, gerontology research institutes and residents who are concerned with local AFC issues.

Additionally, the JCAFC Project provided support for each DC to join the WHO GNAFCC. At present, all 18 districts in Hong Kong have joined the WHO GNAFCC, and created a profile page on its website. As members of the WHO GNAFCC, they are required to fulfill their responsibilities for the continuous development of AFC and regularly submit age-friendly practices to the online Global Database of Age-friendly Practice.

Examples of district profile page on WHO GNAFCC website

The JCAFC Project assisted districts in building a framework to continuously improve the community’s age-friendliness. The sustainability of those momentum depends on the motivation of each DC to continue AFC work in the long term. The continuing development strategies will be further examined in Chapter 5.

6 The action plan developed for the 18 districts in Hong Kong can be accessed at: www.jcafc.hk/en/Resources-Centre/Publications/Action-Plans.html
NGOs and community organisations

NGOs and community organisations are another key partners in the districts to engage with older people and implement AFC initiatives. To address the age-friendly concerns identified from the baseline assessment findings in 18 districts, the Trust firstly devoted total funding of HKD1.5 million to each district for 3 years (HKD500,000 per year) for supporting NGOs and community organisations to implement district-based programmes (DBPs), which aimed to enhance one or more domains of AFC and build up momentum of age-friendly city at community level. A total of 140 DBPs were organised by nearly 80 NGOs and community organisations to improve age-friendliness in 18 districts, directly benefiting over 114,600 older people and the general public.

In response to the three domains with lower scores (namely Community support and health services, Housing, Civic participation and employment) in the baseline assessment findings of the JCAFC Project, the Trust further scaled up some successful DBPs to territory-wide programmes for implementation across the city to benefit more people and achieve greater impact. The Trust approved 7 territory-wide programmes organised by various NGOs and online media, which include walkability programme, home modification programmes, and publicity campaign “The New Olds”.

The major focus of DBPs and territory-wide AFC programmes are summarised into eight actions areas in the following pages.

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Action area 1: Community audit for improvement

Emphasised on the bottom-up approach on creating age-friendly environment in the community, some DBPs engaged with older people to conduct a community audit to assess the age-friendliness of outdoor environments, community facilities, and public transportation in their respective districts.

 Older people collected opinions from local residents through field visits and questionnaires, and consolidated the findings and suggestions on common AFC concerns in the community. Different types of publicity activities (e.g. district forums, roving exhibitions) were organised to share the results to relevant stakeholders and community members for raising concerns and improvement.

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Examples of DBPs in 18 districts of Hong Kong

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7 The summary lists of all DBPs and territory-wide programmes can be accessed at www.jcafc.hk/en/Project-Components/Comprehensive-Support-Scheme-For-Districts/District-Based-Programmes.html

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Action area 2: Foster intergenerational relations

To foster intergenerational relations and enhance the mutual respect and understanding between the younger and older generation, some DBPs organised different types of intergenerational activities to enhance their opportunities for interactions and collaborations.

Those activities included intergenerational workshops (e.g. photography skills, communication skills, and experiential activities), and intergenerational volunteer services (e.g. haircut service to the elderly in need; home visit to singleton/doubleton elderly). Publicity events (e.g. roving photo exhibitions, award presentation ceremony cum sharing session) were also organised to promote intergenerational inclusion and age-friendly culture to the wider community.

Examples of DBPs in 18 districts of Hong Kong

“LOVE IN PHOTO” Community Integration Project (Tai Po)
Fun with Elderly and Youth (Sha Tin)

Action area 3: Support digital inclusion for older people

The development of information and communication technology (ICT) has influenced many aspects of our daily life. Considering that many older people still faced difficulties in the use of ICT, some DBPs organised various digital inclusion initiatives to encourage wider adoption of ICT among older people.

For example, a series of ICT training workshops (e.g. smartphone, video production) and smart technology experiential activities (e.g. field visit to Gerontech and Innovation Expo cum Summit) were organised for the elderly to enhance their capability and interest in using digital technology, such as maintaining social contacts with others, and receiving community information. Publicity events (e.g. carnivals, game booths) were held to promote digital inclusiveness to different walks of lives in the community.

Examples of DBPs in 18 districts of Hong Kong

Smartphone Panacea (Wong Tai Sin)
APPS @ Kowloon City
Age-friendly Communication in Eastern District
Action area 4: Promote active ageing and elderly employment

In order to promote active ageing and encourage elderly employment, some DBPs organised a series of job training courses and experiential activities (e.g. site visit on the working environments, placement opportunities in different industries) to equip the young-olds and retirees with employment skills, such as job searching and interview skills, as well as enhance their confidence on re-employment.

Age-friendly job expos were also held to provide job information and invite employers to arrange job interviews for older people. Those initiatives enhanced the employment opportunities for the young-olds and retirees, and promote age-friendly culture to the employers.

Action area 5: Provide outreach services for elderly in need

In light of the inadequate social support and health services for the elderly in need, such as singleton and doubleton elderly, and elderly living in remote villages (e.g. Mui Wo, Pui O), some DBPs organised different types of outreach support services for those elderly to improve their quality of life.

For example, health stations were set up in the remote villages to provide basic health check-ups for the elderly, containing the assessments on eye health, stroke risks and heart conditions. Outreach village-based or home-based support services (e.g. home cleaning services, home-based health education) were organised for those elderly in need to improve their living environment and promote healthy living.
Action area 6: Enhance the awareness on self-care

In order to promote the concept of healthy ageing and encourage older people to establish a healthy lifestyle, different types of health education activities were organised to disseminate information on healthy lifestyle and self-care to the community members.

For example, health talks were held in the districts to enhance their understanding on chronic diseases and the ways of identification. A series of exercise class and workshops (e.g. healthy diets, nutrition) were organised to enhance their understanding and skills on self-care. Different types of publicity events (e.g. carnivals, game booths and exhibitions) were also held to promote the message of healthy ageing to the community.

Action area 7: Promote walkability for healthy ageing

To further promote healthy and active ageing, the walkability programme in Kwun Tong was scaled up to territory-wide programme - “Walk the City for Active Ageing”, organised by Christian Family Service Centre. It incorporated the concepts of “Healthy Walking”, “Community Guided Tour” and “Age-friendly City”, aiming to encourage the elderly to develop a walking habit to maintain healthy living. The territory-wide walkability programme recruited elderly people to design 12 walking routes across the city with district characteristics and suitable for the elderly, and trained young-olds aged 50 or above as “Walk Leaders” to assist in organising walking tours for small groups of elderly people in their respective communities on a regular basis. Electronic maps on mobile application for the walking routes were also developed to encourage the elderly to use ICT and promote age-friendly messages to the general public.
Action area 8: Home-modification support for elderly in need

In response to the keen demand for home modification, some DBPs provided home modification services for the elderly in need to enhance their home safety and build an age-friendly living environment. Successful DBPs on home modification in Tsuen Wan, Islands, Kowloon City and Kwun Tong were scaled up to be implemented across 18 districts of Hong Kong for promoting ageing-in-place.

The territory-wide home modification programme collaborated with occupational therapists/physiotherapists to conduct home assessment and intervention solutions for elderly people, and recruited volunteers and provided training to assist in home assessment and minor home modification works, such as installing home devices, home cleaning/tidy-up exercise, pest control, and etc. The programme also promoted the importance of home safety and age-friendliness through public education activities.

Public and business sectors

Jockey Club Age-friendly City Partnership Scheme

To encourage different community sectors to build an age-friendly city that can cater for the needs of all ages, the Jockey Club Age-friendly City Partnership Scheme has been organised in 2018, 2020 and 2022. The Scheme engaged different stakeholders, including business community, government departments and public sector, to adopt age-friendly practices and provide age-friendly products and services in Hong Kong.

Eligible companies and organisations receive a set of age-friendly certificate and stickers to recognise their efforts and inform the public of their contribution to promote an age-friendly culture. Special Awards (Table 4) have also been designed under the Scheme to recognise companies or organisations with outstanding performance. Over 380 companies and organisations from different sectors have joined hands in introducing age-friendly products, services and measures.
To recognise the awardees’ continuous efforts in encouraging elderly employment

To recognise the awardees’ contribution in providing accessible and well-maintained facilities which specifically cater for the needs of the elderly

To recognise the awardees’ efforts in introducing innovative age-friendly services or products so as to form a new business model

To recognise the awardees’ contribution in mobilising different resources (e.g. internal manpower, joint collaboration of business sector or non-profit sector) to launch age-friendly initiatives or practices

To recognise inspiring story developed under the awardee’s age-friendly initiatives that has a great impact on promoting an age-friendly culture in Hong Kong. This award is open for public nomination

The general public are invited to vote for their favourite age-friendly practice/activity/product/service on the Jockey Club Age-friendly City Project’s Facebook Fan Page

Industry-focused publicity campaigns

The JCAFC Project has organised industry-focused publicity campaigns to promote age-friendly culture to the target industries, covering shopping malls, transportation industry and catering industry, which have close association with the daily life of older people.

Age-friendly shopping malls

Supported by the Institute of Shopping Centre Management, the JCAFC Project has launched the “Charter for Age-friendly Shopping Malls” in 2022 to encourage shopping malls to provide visitors with a convenient and barrier-free environment, and to deliver quality and professional services through better attending to the needs of visitors at all ages. Participating malls must have fulfilled (or will fulfill) at least two criteria in each of the two areas: “Environment” and “Measures” (Figure 13). A total of 60 shopping malls across the territory have participated in the Charter. Besides, three Age-friendly Bazaars, joined by over 6,500 general public, were held to demonstrate the craftsmanship and talent of the elderly.

Figure 13.

Criteria for an “Age-friendly Shopping Mall”

<table>
<thead>
<tr>
<th>Environment</th>
<th>Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barrier-free access/ facilities</td>
<td>Training for staff to support different customer groups</td>
</tr>
<tr>
<td>Comprehensive safety measures</td>
<td>High-quality customer service</td>
</tr>
<tr>
<td>Clear signage and directions</td>
<td>Age-friendly management culture</td>
</tr>
<tr>
<td>Comfortable shopping space</td>
<td>Products and services that cater for all ages</td>
</tr>
<tr>
<td>Space planning that caters for all</td>
<td>Promote intergenerational harmony</td>
</tr>
</tbody>
</table>

Website of Age-friendly Shopping Malls: www.jcafc-shoppingmalls.hk
To raise the awareness of the transport and catering industries on the needs of the ageing population, the JCAFC Project has collaborated with media partner, Big Silver, to develop pamphlets on “Age-friendly Catering Industry” and “Age-friendly Transportation Industry”, and organised seminars for industry practitioners and AFC ambassadors to share local and overseas good practices in respective industries, and the needs of the elderly. The Television Broadcasts Limited (TVB) and Commercial Radio Hong Kong (CRHK) were also engaged to promote age-friendly initiatives in public transports and catering outlets through TV programme, radio programme and Facebook.

Media

Different media partners were engaged to utilise their networks to spread the message of age-friendliness to community members (including older people) with varying needs, interests and educational backgrounds.

Traditional media (e.g. radio, TV programme, print media) is an important channel to reach the wider public, especially for the older people who rely on the traditional ways to receive information. Online media provides opportunities for the JCAFC Project to promote AFC messages to the younger generation and young-olds. Various publicity campaigns collaborated with different media partners will be further examined in the next section.

Figure 14.
List of media partners
Campaigns for tackling ageism in the society

Combatting negative perceptions of ageing and raising public awareness of AFC is imperative to cultivate an age-inclusive society. The JCAFC Project has launched a series of publicity and public education initiatives through diversified channels and formats in promoting age-friendly messages to the wider public of different ages and with different backgrounds.

Publicity campaigns in partnership with radio stations

Radio is an important channel to reach the wider public, especially for the older people who rely on the traditional channel to receive information. Since the beginning of the JCAFC Project in 2015, Radio Television Hong Kong (RTHK) Radio 5 has been engaged as a media partner to incorporate age-friendly messages in its four radio programmes – “Elderly Academy”, “Magesenior”, “Stand by Me” and “Elderly Global Village” and organise community education activities such as age-friendly seminars and outreach activities to raise public awareness on AFC.

CRHK also introduced the concepts of AFC and the JCAFC Project in its programme “The Way We Are”. From June 2021 to October 2021, the JCAFC Project launched publicity campaigns at three radio stations, including RTHK Radio, CRHK, and Metro Finance, to introduce AFC concepts and outstanding age-friendly practices of the awardees of the City Partnership Scheme.

Publicity events and outreach activities

To raise the public awareness of AFC issues and promote age-friendly culture, various types of publicity events (e.g. forum, ceremony) and outreach activities (e.g. exhibition, road show, tram tour) were organised under the JCAFC Project. Some major publicity events and outreach activities are listed in the following pages.
• Organised **AFC Tram Tour** to promote age-friendly messages in May 2018

• Set up **street stations and exhibitions at different locations**, such as a three-day exhibition at Causeway Bay in November 2018, and the AFC booth at Gerontech and Innovation Expo cum Summit in 2018, 2019 and 2020

• Organised events to share the progress of the JCAFC Project and promote age-friendly message to the general public, such as the **Interim Event on Project Achievements** in September 2018

• Held **Age-friendly Bazaars** at three shopping malls in October and November 2022, where around ten NGOs and social enterprises were invited to set up stalls and arrange workshops to engage the community and promote age-friendly messages

• Organised the **Age-friendly CNY Mass Painting Event** in Lingnan University and invited more than 80 AFC Ambassadors to express their creativity by colouring the Drago Cavallo sculptures, as well as spread the messages of love and care through arts and foster intergenerational harmony in January 2023
Publicity campaigns through online media

The JCAFC Project has collaborated with various online media to promote age-friendly messages to the wider audience. Online media “HiEggo” has been engaged since 2020 to produce and broadcast two series of AFC videos (28 episodes in total) to introduce AFC concept and the 8 domains, AFC best practices, programmes and features in the 18 districts, as well as health topics related to the elderly.

Another publicity campaign “The New Olds”10 was launched in March 2021 in collaboration with online media “CTgoodjobs” to promote an age-friendly culture among employers, young-olds and retirees, as well as encourage employers to implement age-friendly practices through different channels, including videos to demonstrate the talents and potentials of the New Olds, articles and e-books to share age-friendly employment tips, a theme page on the CTgoodjobs website, and other community education activities.

Online engagement activities

The JCAFC Project has launched the Facebook Fan Page11 since March 2018 to promote the AFC messages to the wider public, attracting over 22,000 followers as of May 2023. Online engagement activities were also organised to facilitate public participation on tackling ageism and cultivating age-friendly culture. For example, the “Our City’s Story Award” under the City Partnership Scheme 2022 was opened for public nomination to encourage public participation and discover more inspiring stories of age-friendly initiatives. More than 130 inspiring stories were collected from the JCAFC Project Facebook Fan Page.

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10 Thematic page of “The New Olds” publicity campaign: www.ctgoodjobs.hk/events/jcafc-theneowolds

11 Facebook Fan Page of the JCAFC Project: www.facebook.com/HKJCAFC
Another example was an online writing contest and an online voting campaign initiated on the JCAFC Project Facebook Fan Page calling for innovative age-friendly initiatives and inviting the public to vote for their favorite initiatives under the City Partnership Scheme 2020. More than 220 creative ideas were collected and over 15,000 votes were received. The “Intergenerational harmony, inclusiveness & mutual help” service matching platform was selected as winner. It proposed to develop an easy-to-use online platform to match the needs of people of different ages with the services provided by other community members. Users can earn “points” after providing services which can redeem daily necessities, food and services.

Figure 15. **Champion of online writing contest for the most innovative age-friendly initiatives**

Another example of online engagement activities was a photo competition of “Energetic Moment of the New Olds”, which was organised under “The New Olds” Programme by “CTgoodjobs” in March 2021. The photo competition aimed to encourage the mass public to explore the energetic and active moments of the elderly. The winners were selected by judging panel and public voting. It received an enthusiastic response with over 230 submissions.

Winners of the “Energetic Moment of the New Olds” photo competition
Key impact of the JCAFC Project

The JCAFC Project has successfully built AFC into agenda of the government and local administrations that responds to the ageing needs. The Chief Executive’s 2016 Policy Address featured “Building an Age-friendly Community” as a specific policy focus and committed to directing resources towards building an AFC in Hong Kong. AFC concept was also adopted in Policy Agenda in 2016, 2017 and 2018. All 18 districts of Hong Kong joined as members of the WHO GNAFCC by 2019, showing commitment to enhancing the community’s age-friendliness in the long term. The social impact of the JCAFC Project has been described in detail in the JCAFC Project Evaluation Report (Chapter 4), which consists of five areas: capacity building of community on age-friendly momentum, enhancement of knowledge transfer, raising public awareness on AFC, strengthening cross-sectoral collaboration network to spur AFC initiatives, and gained international recognition and exchange with global experts (Figure 16).

Figure 16. Social impact for Hong Kong society

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Reviewing the sustainable impact

This chapter will further review the sustainable impact of the JCAFC Project, which will be examined based on whether the concept has been embedded into existing policies and operations so that what has been achieved by the JCAFC Project may become sustainable for Hong Kong society.

Capacity building of community

With a government policy directive to the DOs to join the WHO GNAFCC, funding support from the Trust and academic institutional expertise, local networks consisting of DCs/DOs, NGOs, and older people themselves (AFC Ambassadors) have been formed to take forward the AFC movement in Hong Kong. While this is an important first step, several considerations need to be taken into account for consolidating this local partnership, with a view to longer-term sustainability.

Firstly, the DC/DOs’ working agenda is currently very much influenced by politics, rather than local needs. A change in local leadership may also cause the disruption of the commitment to address the age-friendly agenda. It is uncertain what is necessary to keep AFC concepts as priority items on their agenda. Linking some AFC performance indicators of different districts, with data for comparison published territory-wide, may be one of the motivating factors.

Currently, older people have representation in the DC’s Committees in some districts but not all. For those which have included older people in these committees, it is uncertain whether participation remains at the “tokenism” level, rather than at the active or influential level (cf. American Association of Retired Persons). Furthermore, many of these older people belong to various local NGO community centres and are predominantly women. It is unsure how the needs of older men are represented in these committees.

NGOs make up the third point of this triangle. Their activities largely depend on funding, such as district-based programmes funded by the Trust under the JCAFC Project. It is uncertain whether such activities will continue upon the cessation of funding, even if the keen demand for those services are identified by the assessment on age-friendliness in the districts (e.g. home modification service for older people). DCs/DOs tend to rely on local NGOs for activities/initiatives relating to older people. It is difficult to identify the main driver for this group to continue. Hopefully, it will be older people themselves who will be more proactive in maintaining the AFC initiatives. In this regard, capacity building of the older people as AFC Ambassadors for the long term involvement is a very important first step.

Enhancement of knowledge transfer and raising public awareness on AFC

The second area covers the enhancement of knowledge transfer. The Project has produced a wealth of materials, covering a checklist assessment of AFC features by districts, gaps in service, best practice recommendations, resource toolkits, public forums on each of the eight AFC domains, as well as evidence-based policy recommendations. Multiple channels had been used for knowledge transfer, which involves media such as TV programmes, radio, magazines, online media, social media, and territory-wide publicity activities such as Jockey Club Age-friendly City Partnership Scheme. The target audience covers policy makers in different government bureaus, health and social service providers, business sector, and the lay public with an emphasis on older adults.

There is no doubt that all efforts have been directed at raising public awareness through all channels to a wide sector of the population. Over 4,764,000 viewership/engagement of general public were reached through a series of publicity and public education initiatives under the JCAFC Project as of May 2023 after. The challenge is to identify which of these knowledge transfer activities will take root, attain critical mass and momentum, and continue to develop building on these foundations.
It is likely that sustainability and incorporation of AFC concept into policy will vary depending on different AFC domains. In the domain of Outdoor spaces and buildings, AFC concept appear to be firmly established, in urban planning that takes into account age-friendly building design, senior living residences and open spaces that promote intergenerational activities. The inclusion of older people in co-design in many of these initiatives forms a basis for the AFC concept to be incorporated into continuing future developments. In contrast, user participation has not been emphasised in the design of gerontechnology products. Development in this area tends to be adoption of products from other countries, or local designs without consideration for unmet needs or applications and user feedback, limiting the market potential of such “inventions”.

**Strengthening cross-sectoral collaboration network and gained international recognition**

Cross-sectoral collaboration is clearly a prerequisite for building an age-friendly city, as shown in Chapter 2. All sectors need to have a common vision of the AFC concept, and its contribution to healthy ageing and health equity. This is especially important to Hong Kong, as it has the longest life expectancy in the world. Even if this has been achieved through knowledge transfer activities, continuation of such initiatives would depend on the policy of individual institutions and availability of funding. Interdepartmental barriers in achieving a single outcome are well known and not easy to overcome. However, concentrating on each domain separately that is clearly under one government department may be the best way to continue AFC initiatives. The relevant government departments may then work with various local players that are involved in individual domains.

Finally, international recognition is important, in conferring a sense of achievement, enabling sharing of good practice and mutual learning, as well as a sense of belonging to an international community. Such sentiments likely explain the impressive development of the AFC concept into the WHO GNAFCC consisting of 1,445 cities and communities across 51 countries in only 12 years. This WHO platform would be an important framework and motivation for the continuation of AFC work in Hong Kong. Using this platform the WHO has started to run education sessions for local leaders from various countries to exchange the experience on building AFC, as well as share best practice for case sharing.

For achieving longer-lasting sustainability, knowledge transfer activities need to reach the whole population rather than targeting mainly older adults, and at the same time really give older adults meaningful participation in local government. In this regard, Hong Kong society still has some way to go compared with other Western developed economies. Societal attitudes to older adults still tend to be paternalistic, contrary to the Western concepts of how the elderly are accorded respect in Eastern cultures.

Immediate impact beyond the completion of the JCAFC Project may be measured by the use of project materials (reports, guidebooks, videos, website, and etc.) in policy-making, service-related research, and service planning. In the short term, the AFC concept is likely to be able to develop further in the area of urban planning, building design and building management (to enable ageing-in-place), resilience to climacteric stress, and integrated health and social care models. Development in these areas is supported with funding from various sources, both public and private, building on some of the foundations laid by the JCAFC Project, in selected domains. An evaluation of longer-term impact would be of interest to assess the sustainability and/or growth of the AFC concept, ten years on. An evaluation tool developed as a result of the JCAFC Project that incorporates the WHO AFC indicators such as the HKEQOL Index could be used in population-wide surveys. Citizen participation in driving these development, supported by local government policy and funding as well as the private sector, would be key to sustainability.
International exchange and recognition

The JCAFC Project not only gained wide support from local stakeholders, but also emphasised on the exchange of knowledge and experience on building AFC with global scholars and experts. The JCAFC Project was presented at the Global Solutions Forum of the UN’s Sustainable Development Solutions Network in 2020 as one of the eight best sustainable solutions in the world in advancing the sustainable development goals (SDGs) through local initiatives. Building an age-friendly environment aligns well with the UN’s SDGs, especially the SDG3 “Good health and well-being”, SDG10 “Reducing inequalities”, and SDG11 “Sustainable cities and communities” (Figure 17).

Figure 17. Sustainable development goals mapped to the concept of AFC
The JCAFC Project was showcased at the 21st International Association of Gerontology and Geriatrics (IAGG) World Congress in July 2017 in San Francisco, where the research findings of baseline assessment studies on age-friendliness in Hong Kong were shared with other international scholars through poster presentation. The Congress attracted over 6,000 participants from more than 75 countries all over the world to exchange knowledge and experience in gerontology and geriatric field.

Besides, abstract titled “Exploring the philanthropic role on building age-friendly community: the case study of Jockey Club Age-friendly City Project in Hong Kong” was accepted for poster presentation on the virtual platform of the 22nd IAGG in June 2022. It presented the uniqueness of philanthropic model on building an AFC in Hong Kong to professionals from all over the world.

The JCAFC Project team held an exchange meeting with Korean delegation from Bucheon City in August 2017 in The Chinese University of Hong Kong to exchange views on building an age-friendly city in the Asian context. The delegation members included government officials, Council member, university professor, and representatives from senior welfare organisations.

Jockey Club Age-friendly City International Conference

To facilitate knowledge exchange and sharing of best practices on building an AFC locally and worldwide, the Jockey Club Age-friendly City International Conference titled “Age-friendly Cities 15 Years On: Origins and Best Practices Worldwide and in Hong Kong” was organised in hybrid mode with online and onsite participation in June 2021, which brought together government, business sector, academia, non-profit sector and social enterprises in Hong Kong and overseas. A recurrent theme that was raised was the power of AFC initiatives in mitigating health inequalities that occur with ageing and was important in the light of the UN Decade of Healthy Ageing (2021-2030).

In the opening plenary, Dr. Alexandre Kalache, President of the International Longevity Centre-Brazil, and co-director of the Age-Friendly Foundation, was invited to share the origins of AFC movement, the development of global network and its future directions. Another speaker, Mr. Leong Cheung, the then Executive Director, Charities & Community of The Hong Kong Jockey Club introduced the unique model of the JCAFC Project on building an AFC in Hong Kong.

Opening plenary

Details of the J CAFC International Conference can be found at www.jcafc.hk/conference
Two thematic sessions were arranged to facilitate the knowledge exchange between local and global experts on building AFC. In the first thematic session titled “Building an Age-friendly City for an Ageing Community: The Hong Kong Insights”, four gerontology research institutes of local universities presented the research findings on the JCAFC Project to review the effectiveness of AFC interventions on improving the age-friendliness of the local communities.

In the second thematic session titled “Advancing Age-friendly City: Cooperation and Participation towards Sustainability”, different professionals and experts from local and overseas were invited to share best practices in building an AFC. Ms. Winnie Ho, the then Director of Architectural Services Department (ASD), shared the experiences of ASD on integrating the views of older people to compose “Elderly-friendly Design Guidelines” for the industry in Hong Kong. Ms. Janice Chia, Founder and Executive Director of Ageing Asia, highlights the potentials of the silver market in Asia Pacific and the possibility to promote age-friendly business initiatives. Prof. Christopher Phillipson reviewed the experience of age-friendly programme in Manchester and the challenges to the sustainable AFC movement.

Establishing the knowledge base for AFC research

Using data collected under the JCAFC Project, more than 20 academic papers from the four participating gerontology research institutes of local universities have been published in international journals, contributing to establishing the knowledge base for AFC findings within the Asian context, and exchanging the knowledge and experiences to global experts. Some key themes for the well-being of the older people will be further examined in this chapter.

Positive impact of AFC intervention

Some papers using the data of age-friendliness assessment of local districts of Hong Kong describe how AFC interventions can improve age-friendliness over time (Amoah, Mok K. H., Wen, & Li, 2021; Chui et al., 2022). There have been few studies addressing this question in the past literature. Furthermore, there is limited understanding of how AFC can be achieved in a culture where older adults’ education level and civic engagement are low compared with Western societies, and where policy-making is top-down without the engagement of stakeholders (Chui, Chan, Tang, & Lum, 2020). Comparing scores of age-friendliness at baseline and follow-up three years from 2015 to 2018, AFC interventions were shown to have improved the districts’ age-friendliness among community-dwelling adults over time, and those with lower socio-economic status in terms of low education and low income benefitted most, providing evidence that promotion of the AFC concept may be regarded as a mitigating strategy for health inequalities (Chui et al., 2022).

\[\text{See full list of academic papers published under the JCAFC Project at } \url{www.jcafc-port.hk/en/resources-hub/journals}\]
Another insight is that the formation of trusted intermediaries under the JCAFC Project is important to link stakeholders in promoting AFC. In this case, the professional support teams from four local universities fulfil this role and are key to facilitating project implementation, and linking together the top-down and the bottom-up approach.

Another facet of the JCAFC Project was highlighted, as supporting older persons for positive engagements in realising productive ageing. Factors associated with productive engagement include social atmosphere, social provisions and the built environment. Perceptions of the key determinants differ between districts, highlighting the need for a district-based approach in guiding continuing efforts toward promoting age-friendliness in Hong Kong (Wen, Mok, & Amoah, 2021).

The shift in paradigm from a focus on individuals to the community in contributing to life satisfaction was also demonstrated in the JCAFC Project. It is evident that sense of community was found to mediate between the AFC domains and life satisfaction (Au, Lai, Yip, et al., 2020). Enhancement of supportive environments is key to ageing-in-place in the community. Involvement of the next generation (generativity) is also an important goal of the JCAFC Project. The mediation effects of achievement and altruism goal attainment between generative concern and positive emotion were examined using data collected as part of the JCAFC Project, and compared with the Czech Republic and Germany. The findings for all three locations were similar, showing that achievement goal attainment mediated between generative concern and positive emotion (Au, Lai, Wu, et al., 2020).

Addressing ageism

The harmful impact of ageism has been pointed out in the Global Report on Ageism published by the WHO recently (World Health Organization, 2021a). Negative stereotyping is a major contributor to ageism and is prevalent in Hong Kong (Woo et al., 2013). Negative age stereotyping has a negative impact on older people’s episodic memory and social participation moderates this impact. Data from the JCAFC Project support this hypothesis (Chan, Au, & Lai, 2020). Therefore promoting social participation as part of the AFC goals has the potential to be part of effective strategies to counter negative stereotypes related to ageing, which could indirectly slow down cognitive decline.

Using novel techniques is one of the ways to facilitate the bottom-up participation from older people and promote active ageing. Research on the local age-friendly programme (Chui, Chan, Tang, & Lum, 2020) reveals that the photo-voice method is an effective tool in capturing the views of older people with limited formal education that would have otherwise been difficult to articulate in words or in writing, and in enhancing their ability and willingness to participate in community affairs. Another project trained older volunteers to help carers of persons living with dementia using telephone-delivered psychoeducation combined with enhanced behavioural activation was initiated to create a group of paraprofessionals (e.g. generic mental health staff) to help with the sustainability of the programme (Au et al., 2019).
Impact of physical and social environments on the elderly well-being

The impact of physical and social environments on the physical and psychological health of older adults is highlighted by several publications. Wong, Yu et al. (2017) showed that higher satisfaction regarding Outdoor spaces and buildings, Transportation, Housing, Social participation, and Respect and social inclusion was significantly associated with increased odds of reporting good self-rated health by more than 20%. Those in the lower socio-economic groups (as represented by lower education and residents of public or subsidised housing) were less likely to report good self-rated health, even after controlling for neighbourhood characteristics. Perceived neighbourhood environment was positively associated with sense of community and self-rated health. Transportation and Respect and social inclusion were the two AFC domains most strongly associated with sense of community. The latter partly contributed to the relationship between neighbourhood environments and self-rated health, suggesting that self-rated health may be enhanced through the improvement of neighbourhood environments (Yu, Wong, & Woo, 2019).

Urban design is important in ensuring the walkability of the neighbourhood. Features such as land use mix-access, infrastructure and safety for walking, are all important factors in promoting well-being and reducing loneliness for older people living in the community (Yu, Cheung, Lau, & Woo, 2017). The relationship between the built environment and health was shown to be mediated by sense of community, contributing 14% of the total effect between outdoor spaces and mental health, and 44.8% of the total effect between buildings and physical health (Tang et al., 2021).

Woo et al. (2020) investigated the relationship between self-rated health with absolute monthly income and perceived financial sufficiency in a sample of older adults, which were recruited from five districts in Hong Kong. They found that self-rated health was associated with both indicators of financial status. The relationship between financial sufficiency and self-rated health remained robust after controlling for monthly income, which was evident among both men and women. The findings highlight the relevance of perceived financial status in shaping self-rated health in older people.

Analysing the same sample as in Woo et al. (2020), Lai et al. (2021) examined the role of sense of community on the relationship between socio-economic status and self-rated health. Interestingly, sense of community was found to moderate the relationship between educational attainment and self-rated health. They observed that, as the level of sense of community increased, the relationship between educational attainment and self-rated health became stronger. However, such a moderating role was not evident either for the relationship with monthly income nor financial sufficiency. These findings shed new light on the complex interaction between sense of community, socio-economic disadvantages and health.

Another study examined the experience of loneliness among older people using focus group interviews (Wong, Chau et al., 2017). They identified insufficient care for older people, a growing distance between them and society, and their disintegrating identity in society as primary sources of their loneliness. In response to their loneliness, older people were found to adopt a more passive lifestyle, attribute marginalisation and inequality to their old age, and develop negative feelings and attitudes towards ageing. These findings helped us understand the psychological phenomenon of loneliness in old age more comprehensively and bear implications for AFC policy and practice to address older people’s loneliness in urban settings.
Significance of local index for measuring the well-being of older adults

At the beginning of the JCAFC Project, publicly available data was gathered from Hong Kong to construct its AgeWatch Index, which had been devised as an indicator to compare the well-being of older adults worldwide, as an initiative of HelpAge International (Woo et al., 2020). Based on the methodology adopted for the construction of the Global AgeWatch Index, a scientific indicator for Hong Kong in comparison with other countries was available for the first time. This Index put a spotlight on domains where Hong Kong lags far behind other countries concerning its ageing population, in terms of income security (ranking 75 out of 97), as well as psychological health (ranking 79 out of 97), although it ranked first in physical health, by virtue of its longest life expectancy in the world (CUHK Jockey Club Institute of Ageing, 2014).

The use of this indicator was compared with other indicators of societal adaptations to ageing well (Woo, 2020b). Cultural adaptation was found to be relevant, particularly between Eastern and Western cultures. Soon after, the WHO promoted a set of indicators specifically for monitoring the age-friendliness of cities, which we incorporated into the constructs for the AgeWatch index, to form the new HKEQOL Index (CUHK Jockey Club Institute of Ageing, 2016). This index was then used to monitor the progress of the territory-wide JCAFC Project. Although positive changes were initially observed, the impact of the social unrest in Hong Kong in 2019, followed by the COVID-19 pandemic, overshadowed these improvements (Woo, Leung, Yu, Lee, & Wong, 2021).

The documentation of the trend in HKEQOL Index shows that while it may be used as a macro indicator that is able to reflect policies affecting the well-being of older people, it is also able to reflect the impact of societal unrest and pandemics, and that the latter may override the effect of existing ageing policies. In summary, it is important to incorporate societal indicators of ageing well to regular government collected statistics, that is effective tool for drawing attention of policy makers to examine causes and devise strategies for responding to rapidly ageing societies.
Overview

Adopting a bottom-up, district-based approach facilitating multi-sectoral collaboration, the JCAFC Project has played a unique position in adapting WHO’s age-friendly city framework into local context, and promoting AFC movement into all facets of society since 2015. The sustainability of AFC movement depends on widespread adoption of the AFC concept into multiple sectors in their services, products and practices, in addition to government policies involved in all of the eight AFC domains. This chapter will examine the issues of sustainability and the continuing development strategies for Hong Kong in the long run.

Citizen participatory model and the role of local government

Citizen participation is an active component of the JCAFC Project, in the formation of AFC Ambassadors and provision of training for auditing the age-friendliness of their neighbourhoods, as well as participation in AFC promotion activities. Many of these align with the first step in the cycle of citizen participation, i.e. running workshops or groups to explore needs and wishes, with feedback leading to the next step of planning. The goal is ultimately to complete the cycle, with planning leading to implementation and evaluation, with citizen participation at each step (Figure 18) (Arnstein, 1969).
The JCAFC Project mainly accomplished the first step. The development of subsequent stages in the cycle in Hong Kong varies according to domains. For example, the Architectural Services Department adopted this principle in the design of buildings and urban spaces, following The Chief Executive’s 2016 Policy Address to promote an age-friendly city, to initiate a series of initiatives that include the involvement of citizens in the design and production of the publication Elderly-friendly Design Guidelines in 2019 (Figure 19), and various examples of citizen participation were presented by the then Director of Architectural Services at the Jockey Club Age-friendly City International Conference in June 2021 (Ho, 2021). This Elderly-friendly Design Guidelines is applicable for the construction of new public buildings, and some private architectural firms have also followed it in developing new buildings.

Figure 19. **Involvement of older people in the Elderly-friendly Design Guidelines**

Importance of the sustainable district platform for ongoing civic participation

The progress of local government (District Councils) involving older adults by including them in relevant committees has been variable. However, one must be aware of tokenism, the lowest rung of the citizen participation ladder, that ultimately aspires to partnership and citizen control at the top (Figure 20) (Arnstein, 1969).

Although the aim of the JCAFC Project was for the DCs to engage older adults in improving their neighbourhoods, only a few had directly included older adults in a meaningful way. AFC programmes and activities were mainly organised by the project partners and NGOs, with funding from The Hong Kong Jockey Club Charities Trust. This may be a result of social unrest in 2019. Indeed, frequent changes in DC members in various committees and working groups have made effective communication between the DCs and the older adults difficult.
Therefore, it is equally important to ensure AFC is on the DCs’ agenda to maintain momentum and sustainability of the movement. The following case sharing of the Sai Kung District Council provides a good reference for other districts to create infrastructure support to facilitate bottom-up participation of older people in the long run.

**Case sharing: Sai Kung District Council**

To facilitate older people’s continual engagement and participation in the co-creation of AFC, it is important to develop infrastructure within district platform for their ongoing involvement. The Sai Kung District Council has set up the “Age-Friendly City Working Group” which includes representatives of older people and DC members as its members since 2015. Those elderly representatives have been nominated by elderly centres in the district. They are authorised to propose discussion items regarding AFC issues for the meeting agenda, and raise comments and improvement suggestions at the meetings.

For example, the Working Group continues to follow up the improvement of age-friendly facilities in Duckling Hill to create safe and comfortable hiking environment for all people. The views were shared to Home Affairs Department, and gained its support to construct a pavilion on Duckling Hill (Sai Kung District Council, 2023).

The need for anchor institutions

Anchor institutions are those organisations that play a vital role in their local communities, such as local authorities, universities, health care organisations and other non-profit organisations that may continue to drive the AFC concept and incorporate these concepts into their mainstream policies. Examples include the Architectural Services Department, Housing Society, Urban Planning Department, and social welfare sector and non-governmental organisations. Uptake by academia and related elderly service sectors are important in documenting unmet needs and developing evidence-based solutions. Involvement of philanthropy, businesses, as well as local governments is essential, and could be strengthened.

Local AFC Initiatives taken by anchor institutions

The Hong Kong Policy Innovation and Co-ordination Office supported a project to examine the effects of environment-related experiences on older person’s well-being in Hong Kong, involving academics from the Departments of Building and Real Estate, Urban Planning, and Geography and Resource Management, shortly after the beginning of the JCAFC Project. It collected data from older adults regarding the impact of the socio-spatial environment on psychological experiences and well-being, to identify planning strategies and environmental policies that promote well-being. This work resulted in recommendations for Hong Kong Planning Standards and Guidelines (HKPSG), to develop age-friendly cities and communities, following the principles of active ageing and age-friendly environments, to extend beyond the narrow scope of community centres to form a holistic integration of various facilities (transport, shops, clinics, open spaces, as well as community centres).
Various academic institutions also play a significant role on spurring cross-sectoral collaboration on building AFC in the long term. The Jockey Club Design Institute for Social Innovation (JCDISI) of The Hong Kong Polytechnic University has been very active in carrying out various social innovation projects using the citizen participation model to facilitate the development of age-friendly communities. For example, with support from Tung Wah Group of Hospitals, JCDISI collaborated with university students to carry out a study with a view to improving the services of the “Chan Un Chan Third Age Volunteers Centre cum Community Kitchen of TWGHs”. During the study, the team co-designed “The Toolkit for the Age-friendly Community Kitchen” as a reference for other similar community kitchens or elderly nursing homes, as well as to bring inspirations to the catering industry to confront the challenges of ageing workers.

The CUHK Jockey Club Institute of Ageing is actively pursuing community outreach initiatives, research projects and training programmes which contribute to overcoming the challenges brought by the ageing population in Hong Kong. Considering global warming resulting in extreme heat, which affects the health of older adults disproportionately, is predicted to have an increasing negative impact, and the urban heat islands are often superimposed on areas with larger number of elderly in the poorer districts, the Institute has launched the community outreach initiatives to raise the public awareness of the impact of extreme hot weather on the health of older people, and explore the possible community actions on mitigating those negative impact.

Another project “Jockey Club Community eHealth Care Project”\(^\text{17}\), initiated and funded by the Trust seeks to build up integrated health and social care in the community, an area which received relatively low ratings in the AFC baseline assessment. It is the first territory-wide elderly care support project, integrating health management technology, professional support and community care (Figure 21).

This has the potential to develop further using a personalised care plan model, embedded in existing health and social care infrastructures.

\(^\text{17}\) See more details at www.jc-ehealth.hk
Developing sustainable age-friendly programmes: A comparison with Manchester, United Kingdom

Manchester was the first city in the UK to join the WHO Global Network for Age-friendly Cities and Communities in 2010, focusing on developing age-friendly neighbourhoods working with community groups and businesses, as well as the formation of an age-friendly Older People’s Board consisting of residents aged 50 and over, with representation of a wide range of backgrounds, neighbourhoods and organisations.

The Board provides a critical voice for the Age-Friendly Manchester Programme. Currently, this includes employment and skills, ageing well, digital inclusion, and challenging ageism. These programmes bear many similarities to the initiatives of JCAFC Project (Phillipson, 2021). Challenges include the need for economic support, such that ageing-in-place may not be possible in the presence of economic and social decline. A lack of interest from private developers is also a challenge. Furthermore, there are greater inequalities within older cohorts with time. COVID-19 pandemic magnified these inequalities, accompanied by the government’s austerity policies and ageism and discrimination against older people.

These challenges may also be observed in Hong Kong, becoming more obvious during the fifth wave of COVID-19 pandemic in early 2022 when cases increased from a hundred to over 27,000 within a 4-week period. Data from the Senior Citizen Home Safety Association, a self-financed non-governmental organisation providing support to older people living at home, received a 40-fold increase in pandemic-related distress calls in the first two months of the fifth wave, of which at least half were subsequently tested to be pandemic positive. There was also an increase in calls regarding pandemic measures, vaccination bookings, and where to seek medical help for symptoms. This shows that the pandemic has affected many vulnerable older people in the community, many of whom lived alone (Chan et al., 2022; Cheung et al., 2022). Also during this wave, older people from residential care homes have been disproportionately affected, in terms of infection, hospital admission and mortality rates. This reflects longstanding inertia in the healthcare of older adults, particularly those residing in the institutional settings; in other words, the relatively low priority regarding aged care policies. Due to the geographic density of the Hong Kong population, there are no clearly demarcated deprived neighbourhoods, to demonstrate clear differences in susceptibility to infections, in contrast to the existence of such neighbourhoods in Manchester City.

The Manchester City response included development of new models of neighbourhood working where the collective organisation of older people was formed, supporting co-research by older people to identify issues and concerns within their community, as well as fostering community leadership inclusive of multiple generations. It also helps strengthen ties between different institutions, or anchor institutions such as academic and philanthropic foundations. Residential care homes need to be incorporated into such age-friendly strategies. The WHO framework for long-term care published in November 2021 would be very relevant in setting basic principles (WHO, 2021b).

It can be seen that while the Hong Kong initiative has many similar features to what Manchester City aspires to, the residential care sector still lags behind in terms of age-friendliness and the lack of effective strategies for COVID-19 vaccinations as well as care support. Promoting an age-friendly environment is called for as a key strategy in mitigating health inequalities in older adults. While it is encouraging that the Hong Kong age-friendly city movement has developed along similar lines to Manchester City, much needs to be done in terms of policy support as well as the formation of an organisation of older people themselves that are included in policy decisions relating to older people.
Age-friendly businesses

There is an erroneous but prevalent view in Hong Kong that there is no profitable market for senior consumers, as they have retired and may not have a steady income. This is contrary to the view in many Asian countries that there is a thriving business of longevity, as highlighted in the annual event organised by Ageing Asia. In fact, the rapid ageing of Asian countries has been promoted as creating huge market potential, ranging from USD2,610 billion in China, USD884 billion in Japan, USD269 billion in the South Korea and USD180 billion in India. The most immediate market opportunities are residential care facilities, home care services, manpower training for the care industries, senior housing communities for independent living, ageing technologies, assisted living, day care services etc (Figure 22).

Figure 22. Most immediate silver market opportunity in Asia (Top 10 areas)

In Hong Kong, while these are areas of most demand, they have also been the slowest to develop likely because of the high cost of land, as well as other housing constraints in a very densely populated region. The relatively small size of the population would also contribute to big businesses considering Hong Kong as too small to generate profit. The same observation may apply to insurance products such as health and long-term care insurance. Limited products are targeting long-term care in Hong Kong, while such products exist in China, Taiwan, Japan, and South Korea.

Nevertheless, at a local level, there are many opportunities for businesses such as transport, banking, shopping malls, and leisure facilities to modify the design to facilitate the increase in patronage, by carrying out simple things like providing seats and barrier-free facilities at shopping malls. Some companies and institutions are responsible for building accommodation, have started to incorporate AFC features in the design for senior living, as well as developing the Residential Design Guide for Healthy Ageing that would support ageing-in-place (Chinachem Group, 2021).

The JCAFC Project sought to increase awareness by organising the Jockey Club Age-friendly City Partnership Scheme to recognise contribution of companies and organisations from different industries on adopting age-friendly practices and providing products and services catering for the needs of elderly people. This has the potential to raise industries’ awareness of the concept of age-friendliness; however, it is uncertain whether businesses will view this as having market potential. Sustainability is assured if businesses view this as an important element of profitability.

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18 see www.ageingasia.com
Countering ageism

An important barrier to the creation of an age-friendly environment is the existence of ageism, which could permeate the fabric of society in a subconscious way. The WHO recently published the *Global Report on Ageism*\(^{19}\), drawing attention to the fact that ageism damages our health and well-being, being a major barrier to implementing policies on healthy ageing. The age-friendly movement provides a practical strategy to combat ageism. For example, older people are often ignored in the design of products, technology, housing and urban planning. The age-friendly movement promotes the need to actively include older people in the design and decision-making processes of end products, whether it is urban planning concepts, new housing, information technologies, or consumer product development. Older people’s participation is a prerequisite for the success of any innovation that purports to benefit older adults.

The COVID-19 pandemic puts a spotlight on ageism in Hong Kong, with respect to the low uptake rate of vaccinations. A prevalent societal view is that older people were being un-cooperative in vaccination uptake, thereby impeding the relaxation of pandemic measures such as travel restrictions. Strategies such as mandatory vaccinations of all living in residential care homes were mooted. In reality, older people were not being selfish. There were many barriers to receiving vaccinations. Over 100,000 older adults live alone, and some 80,000 live in residential care homes with significant physical and cognitive impairments. In the initial stages, the booking had to be online, and many did not know how to do it.

Secondly, there was a message that one needed to consult a doctor to see if underlying diseases were well controlled before vaccination. There is no well-structured public primary care system to administer vaccinations that cater for the needs of older people. Many found it difficult to book an appointment to consult a doctor in the public system, or may not be able to consult doctors in the private system. Allowing walk-in appointments at vaccination centres, vaccinations when they attend follow-up outpatient appointments for chronic diseases, creating mobile vaccination clinics, as well as various types of outreach vaccination teams all resulted in a significant increase in vaccination rates. This is an example of how the dependency needs of older people have been ignored and not understood by policymakers from the beginning. Further campaigns for enhancing the awareness of age-friendliness towards public sectors and different industries are required.

Influence of policies, politics, and pandemic

During the course of the JCAFC Project, we have attempted to use international indicators to monitor the impact of promoting age-friendliness on the health outcomes of the older population. Various indicators have been used for other populations, however some require adaptation to the local Chinese culture, and the inclusion of multiple domains other than medical and social, and incorporating the view of older adults themselves, are important. A composite indicator was created, taking into account the Global AgeWatch Index comparing 97 countries worldwide (Taipale, 2014), as well as the core indicators of AFC (WHO, 2015), to compile the HKEQOL Index serially over the course of the Project (CUHK Jockey Club Institute of Ageing, 2016) (Figure 23). During this time Hong Kong experienced social unrest in 2019 for 6 months, followed by the COVID-19 pandemic. The impact of these events has overshadowed any benefits that may accrue as a result of age-friendly policies.
Indeed it may be seen that external catastrophic events highlight how older people are yet again not taken into account in emergency responses. Thus from 2017-2019, various improvements in the composite indicator were observed accompanying the adoption of the WHO AFC principles by the Hong Kong SAR Government and DCs and the age-friendly initiatives under the JCAFC Project. However, indicators in most domains dropped markedly with these two events, showing that during such events, specific policies targeting older people may be needed to maintain well-being (Woo, et al., 2021).

There are examples of how government pandemic policies have resulted in adverse consequences for older people. Cessation of dementia daycare services resulted in increased caregiver stress in terms of both psychological and physical health, while persons with dementia experienced functional decline (Woo, et al., 2021). The health hazards of travel quarantine in terms of inactivity-induced sarcopenia and inadequate nutrition have also been documented (Woo & Yeung, 2021). Similarly, success in controlling pandemic comes at a cost for older people living in residential care settings (Woo, 2020a).

An Asian Group of Geriatricians summarised how policies must take into account the well-being of older people, where loneliness, reduced access to services, the decline in physical and cognitive function and increased dependency must be balanced against reduced transmission and overwhelming of health services, and not be overridden completely (Lim et al., 2020). This point may be debated, but at least pandemic policies should take older people into account as part of a risk-benefit analysis (that includes other factors such as mental health, economics and education), that is evidence-based, does not accentuate health inequalities, and be guided by ethical principles (Woo, 2021).

One interesting observation that emerged from the surveys under the JCAFC Project was that certain government policies and societal philanthropy targeting vulnerable people in terms of socio-economic status may have resulted in better health outcomes for those in the lowest compared with the higher strata, an example of how health inequalities may be mitigated. Comparing the findings of the baseline assessment on age-friendliness in 2017 and the final assessment in 2020-2021, a gentler social gradient of self-rated health and a smaller gap of health inequity amid the pandemic is observed. The data collection in the final assessment during COVID-19 captured the influence of the pandemic. A two-way ANOVA was performed to analyse the effect of COVID-19 and factors of socio-economic status (SES) on self-rated health.

The SES scores were derived from four variables including income, education, employment status, and residential type. A two-way ANOVA revealed that there was a statistically significant interaction between the effects of COVID-19 and SES (F(3, 9457) = 8.96, p < 0.001). The trend for self-rated health both before and during the pandemic increases with SES. During the pandemic,
The above analysis reflects that the HKEQOL Index and the assessment on age-friendliness developed by the JCAFC Project are effective tools for the trend analysis of the social and economic well-being of older people, as well as monitoring the impact of local age-friendly initiatives. In the long run, those measurements can be adopted by policy makers and local administrations to assist in formulating effective policies and intervention strategies to address the needs of older people and prepare for the continued ageing population in Hong Kong.

**Conclusion**

Since the AFC concept was first promoted by the WHO in 2005, it has been adopted by many countries and continues to shape various policies. Crucially, it provides a cornerstone from which ageing societies may achieve the goal of healthy ageing (Kalache & Kickbusch, 1997). This is all the more important with the added focus provided by the UN, which has declared 2021-2030 to be the Decade of Healthy Ageing. Recently a life course perspective has been incorporated into the age-friendly discourse, from age-friendly to longevity-ready cities (Wang et al, 2021). That paper argues that urban environmental factors exert their impact on healthy longevity throughout the life course, such that the effects observed in older ages reflect the cumulative impact. For example, exposure to urban air pollutants affects placental and newborn telomere shortening, leading to accelerated biological ageing, and in older life stages cognitive decline and increased risk of dementia; drinking water contaminants leads to an elevated risk of various chronic diseases; heat stress exposure has adverse impacts on psychological, and cognitive function and increases the risk of stroke and mortality; access to green spaces may increase air quality as well as promote social and physical activities with beneficial effects on physical and mental health.

Placed in this wider context, the AFC concept may be accorded higher priority for both policy makers as well as resident groups, ensuring sustainability. Various examples worldwide were provided in California (Bevan & Croucher, 2011; Facer, Horner, & Manchester, 2014; Kriss, Miki-Imoto, Nishimaki, & Riku, 2021; Newson, 2021). A common feature of these initiatives is the involvement of government at different levels, the private sector, and philanthropic organisations. An emphasis was placed on the development of resilience to climatic stress, predominantly the effect of global warming. The response to heat stress needs to take into account existing urban structures, and urban heat-mitigation measures, with both adaptive physical and social measures needed to be developed.
A key feature of longevity cities is the focus on reducing health inequalities throughout the life course, the impact of which is particularly prominent in old age, since older people, especially those in lower socio-economic positions, are particularly vulnerable. An advantage of placing AFC initiatives in this wider context could be a solution to the sustainability of AFC projects targeting older populations that tend to be limited by financial constraints. A longevity city approach will also be able to attract funding from research organisations, in supporting cohort studies examining the physical impact on healthy ageing, as well as local governments to monitor health inequalities, particularly in older age groups. Such approach would be important in achieving sustainability of the AFC concept through constant evolution and improvement.

The domain of Community support and health services deserves special mention since surveys and focus groups show that there is much room for improvement. The WHO concepts of integrated community care for older people (ICOPE) as a pillar of healthy ageing (World Health Organization, 2019) as well as the key pillars of a responsive long-term care system (World Health Organization, 2021b), have yet to be discussed in Hong Kong. Currently, health and social care systems operate under different government bureaus, and within health, there are separate community and hospital systems. All health services are directed towards the prevention and treatment of chronic diseases, with little attention paid to geriatric syndromes such as falls, poor memory, frailty, and sarcopenia in the primary care setting. Another project initiated and funded by the Trust has started to advocate for community integrated medical-social care as recommended by the WHO (Jockey Club Community eHealth Care Project, www.jc-ehealth.hk).

In the last analysis, insights from implementation science would contribute to the implementation of AFC policies, their sustainability and continuing evolution. Three types of power have been identified in implementation, building on the framework of exploration, preparation, implementation, and sustainment (Stanton et al., 2022). The JCAFC Project covered the first three and partially the fourth components of the framework. A consideration of the three types of power would facilitate future work in this area. Discursive power covers the definition of problems to be targeted by interventions; epistemic power influences whose or what knowledge is valued in decision making; and lastly material power covers resource allocation. It can be seen that in achieving and maintaining continuing development of the AFC goals or longevity-ready cities, sustained efforts from all sectors of society, including the citizens themselves, are needed.
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