Newsmaker

Interview with Anna Dixon
Chief Executive, Centre for Ageing Better, UK

**AARP** How has the Centre for Ageing Better worked with the UK government to increase work/focus on aging policies and initiatives?

**Anna Dixon** The Centre for Ageing Better has been engaging with the UK government at senior levels to make the case for why an aging population should be seen as an opportunity.

You can see the impact of this in the way the government’s Industrial Strategy identifies aging as one of four “grand challenges” of our time. The Industrial Strategy is a government-wide initiative, being developed in partnership with the private sector, to shape the government’s approach to a whole range of issues, with the goal of boosting productivity by backing businesses to create good jobs by investing in skills, industries, and infrastructure.

So there’s huge momentum pushing businesses across the United Kingdom to innovate and to develop products and services that serve the needs and aspirations of an aging population — globally as well as in the United Kingdom. A large part of the Industrial Strategy focuses on the aging society, so it is a fantastic opportunity to integrate policy in areas such as health care, housing, and employment.

**AARP** What are some changes that the Centre for Ageing Better recommends the National Health Service (NHS) make to adapt to the United Kingdom’s aging population?

**AD** What’s needed is a focus on improving quality of life for longer, not just on increasing how long we live. Crucial to this will be focusing on prevention, delaying the onset and progression of chronic diseases, and slowing the rate at which people develop disabilities.

I think there is a tremendous opportunity for the NHS to engage in prevention activity to extend disability-free life years, particularly by targeting people in mid-life. For example, the NHS can play a central role in helping people stop smoking, be more active, reduce their alcohol consumption, and improve their diet. Health policy also needs to continue along its current path toward integration with care, both at a national level and in local authorities that have responsibility for many areas affecting public health, such as sanitation and transport infrastructure.

Prime Minister Theresa May recently announced that the UK government will make it its mission to “ensure that people can enjoy at least five extra healthy, independent years of life by 2035, while narrowing the gap between the experience of the richest and poorest.” This could be a great catalyst for change, not just in health but in housing and employment too.

**AARP** Can you describe some of the insights learned through the developments of the Centre for Ageing Better?

**AD** In our efforts to understand the things that really matter to people in later life, it’s clear that good health, financial security, a sense of meaning and purpose, and social connections are some of the most important.

Some of our earliest analysis showed just how diverse the aging population in the United Kingdom is. Not everyone experiences a good later life; there are significant social and financial inequalities in peoples’ quality of life. When we looked deeper, we found that disadvantage (for example, associated with race, gender, access to education, or opportunities for good-quality work) accumulates over time. Essentially, a lack of opportunity early on in life can have huge repercussions for our well-being as we age.

Another thing that needs to be understood is that many of the diseases and disabilities that people experience in later life are not an inevitable part of aging. Whether it’s a loss of mobility or an increase in frailty, there are things we can do to prevent these outcomes and to help people keep doing the things they want to do even when their health does decline. Not only does this benefit the individual, but it reduces pressure on health care budgets.

**AARP** The Centre for Ageing Better has a focus on taking a local approach to aging. What have been key developments or learnings from this initiative?

**AD** The strategic partnerships we have in places like Greater Manchester and Leeds, two of the largest urban centers in the United Kingdom, are crucial to our work.
Critical to the success of these partnerships is local leadership.

Partnerships like these are fantastic for helping us understand the systemic, long-term changes that are needed. They also allow us to help those areas to apply the evidence and to drive improvements across sectors from transport and urban planning to housing and health. For example, our partnership with local leadership in Greater Manchester enables us to shape approaches to developing and testing new ways of tackling worklessness and job insecurity among people over the age of 50.

By working with-and in-communities, we can learn from our collective experience and ensure that we effectively share evidence on what works to benefit people across the country.

**AARP** How has the growth of the UK Network of Age-friendly Communities increased innovation across your organization and the country?

**AD** We’ve worked to strengthen the Network from 12 to nearly 30 members since early 2017, and the list continues to grow. Membership of the Network allows communities to share learning and innovation with one another. It’s been hugely gratifying to see the Network expand to encompass a diverse range of cities and communities.

We’ve also been capturing case studies and examples, through which we can see the power of imitation as a way of spreading successful innovations. This in turn enables us to support communities to become more age-friendly and to improve the lives of the people living there.

An example of innovation spread is the “Take a Seat project,” which came from New York. The project has spread to UK cities including Manchester and Nottingham. It is spreading even further afield and has more than doubled in take-up since we began supporting it last year.

**AARP** With your new 10-year strategy, what do you foresee as being an important focus of the Centre for Ageing Better in the years to come?

**AD** This year, we launched “Transforming Later Lives,” our strategy to help everyone make the most of the social and economic opportunities presented by living longer and to support those people at risk of missing out on a good later life. Through this, we set out a long-term vision for change by acting on the interconnected and enduring societal issues that will make the most difference. Especially important is the need to intervene earlier, in midlife, rather than waiting until people enter later life.

To achieve our long-term vision by 2040, we have set four priority goals; the aim of our work over the next 10 years is for people approaching later life to do the following:

- Live healthier, more active lives, thereby reducing the risk of poor health and delaying the onset, progression, and impact of disease and disability.
- Remain in good-quality work for longer, boosting savings and delaying drawing pensions.
- Live in safe, accessible, and adaptable homes, and remain independent and active for longer.
- Live in communities where social relationships flourish, making it easier to build and maintain close connections as well as wider everyday contact.

**AARP** What are key aspects of your bold initiative to transform later lives?

**AD** By 2040, we want more people in later life to be in good health, be financially secure, have social connections, and feel their lives are meaningful and purposeful.

We will measure and track progress on these aims to be sure that our actions are making a real difference in people’s lives. The priority goals we have chosen are those where we believe we can make significant and long-lasting changes by sticking with them over time. The key to our success will be an open and collaborative approach, working with organizations and individuals who share our goals.

**AARP** Can you share any specific success stories or areas of work that are particularly inspiring?

**AD** For me, the biggest success has been the profound change in the narrative surrounding aging and the prioritization of this issue nationally. More and more communities are understanding the importance of adapting services to meet the needs of an aging population. Large employers are increasingly recognizing the importance of retaining and recruiting older workers. We have shown the life-changing impact that aids and adaptations in the home can have on a person’s well-being. Perhaps most exciting, the prime minister has made healthy aging a central pillar of the government’s policy agenda.

All of this is a step in the right direction, but we must remember that much of our success will not be measured until 10 or 20 years’ time, when we have brought about the systemic, long-term change required to achieve these bold goals.

Anna Dixon has more than 15 years’ experience of working at the interface of research, policy, and practice focused on health and care, including at The King’s Fund, the London School of Economics and Political Science, and the European Observatory on Health Systems and Policies.

She is a highly respected and well-known figure in health policy and has a successful track record of working at the highest levels of government to bring about positive change. Throughout her career, she has been committed to ensuring the voice and needs of the citizen and patients are at the heart of her work.

Anna joined Ageing Better in September 2015 from the Department of Health where she was Director of Strategy and Chief Analyst.