

20 April 2026

Session title: “Integrating Care for Older People through Age-Friendly Cities and Communities”

Workshop: Translating continuum of integrated care into AFCC Action

Date: June 15, Monday 14:00–15:30

Venue: Kursaal, Room 7 (capacity up to 40 participants)

lead organisers and focal points: WHO Yuka Sumi

Target audience: Municipalities, local governments, community organizations, health and care workers in primary care

Background and rationale

Supportive social and physical environments are critical to maintain functional ability in older age. Age-Friendly Cities and Communities (AFCC) provide a multisectoral framework for translating the principles of healthy ageing into local action across eight interconnected domains, including community support and health services, transportation, housing, social participation, respect and inclusion and communication. The WHO Global Network for AFCC demonstrates strong global commitment to improving environments that help older people “be and do what they value.” At the same time, the WHO Integrated care for older people approach (ICOPE) offers a structured framework to be adapted for assessing and managing declines in intrinsic capacity and empowering older people in primary care. Linking ICOPE with AFCC creates an opportunity to embed person-centred care within everyday community settings through meaningful engagement of local actors. Emerging examples show that integrating these approaches enhances early detection of needs, continuum of care, and culturally acceptable support, building trust relationship with community stakeholders. This session is grounded in the need to strengthen such synergies to achieve scalable and sustainable integrated care for older people.

Objectives

1. Highlight the central role of community engagement in both AFCC and continuum of integrated care, emphasizing how local involvement strengthens ownership, responsiveness, accountability and sustainability.
2. Demonstrate how the AFCC framework can support the implementation of ICOPE in primary care.
3. Showcase country experiences where integrated continuum of care is provided and supported by AFCC, illustrating the roles of municipalities, community groups, and nonclinical actors in delivering integrated care.
4. Identify opportunities for collaboration across sectors and stakeholders to scale up integrated, person centred care for older people through age friendly environments.
5. Encourage participants to reflect on enabling conditions and next steps for embedding ICOPE within AFCC initiatives in their own contexts.

Expected outcomes

1. Synergies and mutual reinforcement between continuum of integrated care and AFCC

Participants will develop a shared understanding of the strong synergy between AFCC and continuum of integrated care, recognizing how age-friendly environments create the supportive conditions needed for effective ICOPE implementation, while ICOPE, in return, offers concrete actions that reinforce the AFCC domain on Community Support and Health Services. Through practical examples, the session will illustrate this mutual reinforcement: AFCC infrastructure and community networks can facilitate ICOPE care pathway, while insights generated from person-centred assessments through ICOPE help municipalities prioritize age-friendly planning, strengthen service delivery, and design responsive community programmes.

2. Strengthened multisectoral collaboration and joint action plan

Participants will identify concrete opportunities for collaboration across health and social care workers, municipal services, and community groups to advance integrated care—leveraging AFCC processes such as participatory assessments and action planning to support ICOPE implementation and using ICOPE care pathway to inform and reinforce age friendly actions across multiple domains. Participants will also discuss mutual action points, outlining how communities can support continuum of care (e.g., basic assessment, health promotion, social care and support) within AFCC structures, while simultaneously using AFCC domains such as transportation, housing, and social participation for practical uptake of ICOPE recommendations and sustain functional ability

3. Strengthened networks and shared understanding of enabling conditions for Integrated continuum of care and AFCC ecosystem

The session will foster stronger connections among AFCC stakeholders, local governments, health systems including ICOPE implementors, NGOs, and community organizations, promoting a shared vision in which AFCC and ICOPE initiatives are designed and implemented collaboratively rather than parallel. Participants will also gain clearer insights into the governance structures, needs for capacity building, digital tools, monitoring systems, and community-engagement mechanisms required to support and scale a unified, sustainable ICOPE-AFCC ecosystem.

Draft agenda

<i>Time</i>	Session	Focus & guiding questions	Format / outputs
10 min	1. Setting the scene: Why AFCC–ICOPE integration matters	<ul style="list-style-type: none"> • Establish a shared understanding of healthy ageing as a community-wide responsibility • Position AFCC as an enabling platform and ICOPE as an operational pathway for person-centred care across health and social systems 	Short framing presentation Output: Shared language and conceptual alignment across sectors

25 min	2. Country experiences: AFCC enabling integrated care (Singapore, Brunei, Spain, Ethiopia)	<ul style="list-style-type: none"> • How municipalities and age-friendly initiatives support health and social services • How health sectors collaborate with community actors to ensure a continuum of care • How the AFCC domain “Community Support and Health Services” reinforces other AFCC domains 	Four short presentations (≈5 min each) Output: Concrete examples of governance, partnerships, and care pathways
20 min	3. Case study: Translating frameworks into local action	Using an 80-year-old woman persona: <ul style="list-style-type: none"> • What physical and social environmental barriers affect her functional ability? • Which sectors and services (health and non-health) need to be involved? • What community-led partnerships are critical for continuity of care? 	Small-group work with facilitators Template / flip chart Output: Identified barriers, actors, and practical integration points
25 min	4. Report back and plenary discussion:	<ul style="list-style-type: none"> • What opportunities exist for intersectoral collaboration at city/community level to integrate health services in AFCC? • What national-level support is needed to enable local action? 	Group report-back and moderated plenary Output: Shared enablers, and priority actions
10 min	5. Wrap-up and next steps	<ul style="list-style-type: none"> • Key takeaways on AFCC–ICOPE synergies • Practical next steps for participants to embed ICOPE within AFCC initiatives • Opportunities for continued collaboration and knowledge exchange 	Facilitator synthesis Output: Clear messages and forward-looking action points

Reference

[Integrated care for older people \(ICOPE\): guidance for person-centred assessment and pathways in primary care, 2nd ed](#)