Aging in the Americas: A Multi-Country Discussion

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Abstract

What is the message? Aging in the Americas is putting increasing pressure on Latin American nations, their public and private sectors, as well as on families, caregivers, and the aged themselves. This is a function of not only the growing number of elderly, but the significantly increasing longevity of this population and the associated quality of life.

What is the evidence? High-level roundtable participants in six countries, Argentina. Brazil, Chile, Colombia, Costa Rica, and Mexico, convened in person in their countries and then gathered virtually to discuss and develop initiatives associated with increased longevity and quality of life.

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Introduction

Aging in the Americas is becoming a critical issue impacting healthcare systems, indeed impacting entire economies in the region. To explore this challenge in depth, and in a multi-country format, the University of Miami Center for Health Management and Policy hosted

simultaneous roundtables in six Latin American countries, Argentina, Brazil, Chile, Columbia, Costa Rica, and Mexico, bringing together more than fifty leaders from various sectors of these healthcare ecosystems. The purpose was to promote collaboration and the exchange of ideas, best practices, and experiences to help co-create a viable future for healthcare systems. A key area of focus was to find ways to adjust and adapt these systems to prepare for a future in which life expectancy continues to increase.

Prior to the event, all participants received online training on Purpose Launchpad [1], an open framework that leverages state-of-the-art innovation methodologies to support the generation of new initiatives, such as startups and new products, and to evolve existing organizations to make a positive impact.

Setting the stage for the roundtable discussions were introductory remarks by Mauricio Ortiz, president of Boston Scientific for Latin America and sponsor of the program, and keynote addresses by Julio Frenk, MD, PhD, President of the University of Miami and former Minister of Health of Mexico; Alex Azar, former United States Secretary of Health and Human Services; Josè Cordeiro, coauthor of "The Death of Death," [2] and founder of the not-for-profit organization Purpose Alliance; and Francisco Palao author of the book "Positive Impact" [3].

Each country's roundtable discussions led to a proposed initiative associated with a specific objective to help create "the healthcare system of the future in Latin America, thereby improving the quality of life and promoting greater longevity in its entire population by the year 2030." After the individual country roundtables discussed their respective initiatives, they presented these to the entire group during a virtual meeting.

Argentina: A Virtual Health Assistant

The roundtable discussion revolved around different stakeholder communities, including patients with diabetes, individuals with mental health issues, and elderly populations, with a special focus on people living alone and lacking social support systems. Participants addressed the provision of healthcare through both public and private healthcare systems, NGOs, patients and their families, healthcare professionals, and payers.

With the objective of improving the patient experience, reducing costs, improving access, and

promoting the prevention of illness and injury, the roundtable participants proposed the development of a technological tool that uses a gaming platform to encourage patient compliance. With an integrated multilingual medical record, universal access to prescriptions, and the use of big data and data interoperability, they identified the opportunity to develop specific and unique patient profiles.

Brazil: Educating for a Better Life

The roundtable discussion in Brazil incorporated the experiences of the 2016 Olympics in Rio de Janeiro, allowing for the focus on the hospitable nature of the Brazilian people and an emphasis on well-being and quality of life through sports. By focusing on a five-year timeframe, roundtable participants agreed to prioritize vulnerable communities and the three million low-income families lacking access to healthcare. To address the issue, participants emphasized the need for a collaboration among university medical schools, healthcare researchers, health facilities, health education organizations, the medical equipment sector, and the pharmaceutical industry.

The group agreed to develop a wellness ecosystem to provide community education, highlighting prevention, to achieve advanced longevity and quality of life. The methodology incorporates the broad spectrum of health system stakeholders including the government and its regulatory agencies, the department of health, patient-focused agencies, health-focused academic institutions, the health insurance industry, medical equipment companies, and the pharmaceutical industry. The initiative involves the development of an integrated primary healthcare core structure that includes both physical care elements and mental health considerations. The system would utilize big data to identify areas of need that require strengthening to improve the quality of life with resultant health prevention and promotion campaigns.

Chile: Conscious Health

The Chilean expert roundtable identified multiple communities with significant medical and health needs associated with a lack of access to information – from the elderly and financially disadvantaged to the youngest and unborn, a function of future parents lacking knowledge about health and the importance of prevention. Given this wide focus, the team chose to concentrate on the young and financially disadvantaged and individuals living in remote regions

of the country. They determined that stakeholders who could deliver solutions include healthcare providers, medical suppliers, payers, public systems, and healthcare startups.

The roundtable participants came up with a health interoperability methodology to create a prevention mindset by connecting stakeholders such as providers, suppliers, private and public payers, and health technology startups. The anticipated result is to use individuals' personal data and personal experiences to create incentive programs to motivate the adoption of healthy living habits. The technology is there, but patients' privacy is a concern. A younger population segment should be the focus as they are generally unaware of prevention and the impact on healthy aging.

Colombia: Caregiver's Caregiver

The Colombian team reflected on needs of the elderly that go beyond medical requirements. Specifically, they focused on often neglected services such as social therapies and exercise facilities and discussed whether there was a contradiction between the desire to live longer and the quality of a longer life. The consensus was that a longer life comes with a greater need for, and expanded concept of, the "caregiver." Family members and other caregivers require a need for knowledge, education, and training on managing longevity. Responsibility for developing this culture of awareness and care must involve academia, healthcare and scientific organizations, healthcare and provider organizations, social services, insurance providers, trainers, the young, and overlooked segments of potential support such as entrepreneurs and urban planners.

The initiative that arose from these discussions was the creation of an ecosystem of social support services for caregivers providing care to older adults. This has been an area of significant and often ignored social need, both in terms of the physical health and the mental and emotional health of the caregiver. Self-care for the elderly is an area of focus. New technologies, big data analytics, information, scientific research, and technical knowledge are all elements to make this effort scalable. Five areas were explored:

- **Education:** Customized to each patient and caregiver, education promotes the adoption of new technical and emotional skills, attitudes, and methods; an important component is peer-to-peer interaction to allow for experiential learning.
- **Solution Center:** A focus on social services specific to each case.

- **Supportive Community for Caregivers:** Peer support for caregivers to help alleviate pressure.
- **Elderly Roadmap:** Allowing the elderly to sustain themselves through planning, monitoring the evolutionary progress, and offering feedback to allow for greater control of the individual's length and quality of life.
- **Chat GPT for the Caregiver:** Rapid and up-to-date information to support the ability of the caregiver to perform support services. The roundtable team emphasized the need for widespread and universal access to these resources.

Costa Rica: Platform for Decentralizing Health Data

The Costa Rican team discussed whether to focus on the responsibilities of the public sector or on strengthening the private sector, including entrepreneurship and the private provision of services. Roundtable participants agreed on a continued significant role for the public system, including national, regional, and local government sectors, as well as for the social security system, which collects and maintains much of the critical population health data. Participants also supported the involvement of private sector stakeholders, including academia, the scientific research sector, private insurers, and healthcare-released startups. Placing the primary focus on vulnerable populations was a recurring theme among the various country roundtable discussions.

Participants identified as an important need the development of a "Platform for Decentralizing Health Data" to create algorithms and dashboards to guide prevention and early detection of disease processes, allowing for prioritizing and focusing on population needs. Focused on enhanced longevity and quality of life, important data would be accessible through centralized platforms. Data would be accessed through Social Security and public and private health systems and would include medical imaging, biopsies, and other test results, as well as other forms of important medical data, using encryption to ensure patient privacy. The data would be made available to the scientific community, academia, and healthcare startup companies to identify potential opportunities and risks at the local community level and, in turn, to create individualized health solutions. The platform would allow for early detection, concentrating on conditions such as hypertension, overweight, and clinical obesity, as well as other diseases or precursors to future disease processes, utilizing algorithms and allowing for early interventions. The objective is to establish public policies, education, and prevention campaigns to improve the

quality of life for millions of people in Latin America by 2030.

Mexico: Artificial Intelligence to Create Healthy Habits

The roundtable participants – a heterogenous group including multispecialty physicians, biomedical engineers, medical insurers, academicians, government officials, health system CEOs – were focused on building consensus. The discussion revolved around whether to focus on three specific diseases: diabetes, heart disease, and cancer. Social security and financial security were also discussed as areas impacted by longevity and quality of life. In addition, participants indicated that chronic degenerative diseases in the lower end of the socioeconomic spectrum should be the focus. Support should come from households, educational institutions beginning as early as preschool, the food industry, clinics focused on aging and its aesthetic, the government sector, clinical laboratories, and professional areas including psychiatry, sociology, geriatrics, biomedical engineering, and the bench sciences. Participants agreed that data collection and analytics are critical elements of successful policymaking, that the government cannot be indifferent to health policy issues, and, as such, that the interrelated roles of public and private health care entities are of importance.

Artificial intelligence (AI) was identified as a methodology to provide guidelines specific to each individual patient. One priority is to focus on individuals with a risk of a disease, including younger individuals with chronic degenerative diseases, and individuals from marginalized socio-demographic and financially challenged groups. The government is a significant stakeholder. The roundtable members cited as a potential target a hypothetical individual, Enriqueta, a 22-year-old indigenous woman from the Sierra of Oaxaca. Given that she is from a vulnerable group, her access to social media and the internet occurs in the public square. The intent would be to improve Enriqueta's quality of life through continuous monitoring aimed at improving health. A digital AI platform would personalize the promotion of a healthier lifestyle. The platform as indicated here would also be able to detect health and psychosocial risks.

Reflections

Common themes emerged in individual country roundtable initiatives: a focus on patients, not only current patients but also potential future patients and caregivers; longevity and quality of life among the elderly; and a consensus that to achieve health, one must start at a significantly

younger age. Further, the participating healthcare leaders emphasized the additional focus on vulnerable socio-demographic and financially challenged populations. Prevention and education are key. Public and private partnerships are critical. Government, private insurers, healthcare providers, academia, scientific think tanks, and start-up companies are all critical stakeholders. The use of big data, data analytics, and AI are all important to develop algorithms and to develop individualized prevention protocols, educational tools, and when needed, treatment protocols all the while being aware of the need to protect patient privacy. Ultimately, the healthcare leaders agreed on the importance of developing individualized and population-focused improvements in the length of life and quality of life in Latin America.

References

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