



**World
PT Day
2025**



Advocacy toolkit

**Healthy ageing –
the role of physiotherapy
and physical activity**



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Physiotherapy**

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Healthy ageing – an ageing population

The global population¹

In **2019**
1 billion

were aged 60+ years



By **2030**
1.4 billion

will be aged 60+ years



By **2050**
2.1 billion

will be aged 60+ years



The number of persons aged 80 + years is expected to **triple** between **2020 and 2050** to reach **426 million**

The pace of population ageing is much faster than at any time in history



Global impact of falls

#2

Falls are the **second** leading cause of unintentional **injury deaths worldwide**²

37.3 million falls each year are severe enough to require medical attention²



Adults over **60 years old** are at the greatest risk of fatal falls²



Falls prevention matters

Falls are a leading cause of injury around the world among older adults, often resulting in serious consequences such as fractures, loss of independence, and even death. Understanding how to prevent falls can help people stay safe and maintain their quality of life.^{3,4}

Exercise is key to fall prevention – physiotherapists are experts in prescribing individualised exercise programmes to help improve strength, balance, coordination, and flexibility.

Global impact of frailty

Around **12%** of people globally aged **50+ years** are diagnosed as having frailty; and around **46%** as being **pre-frail**, however the prevalence of frailty varies throughout the world.⁵

Physiotherapy can help

Physiotherapy can help older people be as active as possible – **people who are more active are up to 41% less likely to have frailty.**⁶

A physiotherapist can develop exercise programmes to gradually increase the resistance and intensity to prevent and treat frailty. This will help to prevent muscle loss (sarcopenia) and increase aerobic and lung capacity.⁶

Healthy ageing – an ageing population

World Health Organization: Promoting physical activity for older people: a toolkit for action

The following text is taken from the World Health Organization (WHO) publication: Promoting physical activity for older people: a toolkit for action⁷

[page 6] As life expectancy around the world increases, the importance of healthy ageing and preventing avoidable falls and injuries becomes an increasingly important economic issue. It is estimated that 4–5 million deaths and US\$ 27 billion in direct public health care costs per year could be averted if the global population were more active. This combination of an ageing population, growing prevalence of diseases among older people and a decline in physical activity with age highlights the need for investment in physical activity programmes and services for older people.

Evidence demonstrates that well planned physical activity programmes and services for older people can improve well-being, quality of life, intrinsic capacity and functional ability. In general, physical activity can also help to prevent and manage a range of NCDs such as type-2 diabetes and cardiovascular disease. More specifically, physical activity and structured exercise may also reduce the rate of falls by as much as 23% in older people, which can significantly reduce the risk of injury, including those that may result in hospitalization.

Older people make important contributions to society as family members, care givers, role models, volunteers, and as active participants in the workforce. If countries invest in physical activity programmes and interventions for older people, societies will reap the benefits as these individuals will be able to live longer and healthier lives.

[page 16] Evidence suggests that effective physical activity programmes for older people can be offered in a variety of formats, delivered in different settings, and help increase physical activity. To increase effectiveness, the goals, needs, interests of older people should inform the adaptation of the design and delivery of the programme or service to suit local contexts and outcomes (e.g. to improve balance, prevent falls). By placing older people at the centre of the decisionmaking process, age-friendly cities and communities can ensure that older people's voices are heard and that they are meaningfully engaged in the delivery of such programmes or services.

[page 17] **Multi-component exercise**

Multi-component exercise is specifically designed to develop balance, aerobic capacity, strength, and coordination with the aim of:

- reducing the risk of falls and preventing fall-related injuries;
- maintaining and promoting locomotor capacity;
- maintaining and strengthening cognitive capacity, bone mineral density, body composition, cardiometabolic indicators, muscular strength, cardiovascular fitness;
- maintaining independent mobility.

Healthy ageing – an ageing population



UN Decade of Healthy Ageing (2021–2030)

The following text is taken from the Decade of Healthy Ageing platform⁸

Today, too many people around the world experience worse health than they should because of unsupportive environments that prevent them from maximising their later years. The UN Decade of Healthy Ageing (2021–2030) aims to give everyone the opportunity to add life to years, wherever they live.

The Decade is a collaboration of diverse sectors and stakeholders that focuses on changing how we think, feel, and act towards ageing; cultivating age-friendly environments; creating integrated and responsive health care systems and services; and ensuring access to long-term care for older people who need it.

Combatting ageism: changing how we think, feel, and act around age and ageing is crucial to foster healthy ageing.

Cultivating age-friendly environments: working with the global community to create better places in which to grow, live, work, play, and age. Cities and communities have a key role in enabling people to live longer and healthier lives while fostering fairer and more sustainable societies.

Providing integrated care: treating the person and not just their individual diseases, so that we can better manage chronic conditions, maintain physical and mental capacity, and prevent care dependency. Equitable and affordable access to good quality, person-centred health care is key for fostering healthy ageing.

Ensuring access to long-term care when we need it: make sure that we all have the care and support required to live with dignity, meaning, and rights. Access to quality long-term care can enable older people to be and do what they value for as long as possible.

WHO recommendations⁹

To meet the goals of the Decade, WHO recommends countries provide an integrated continuum of care, which:

- is person-centred, appropriate, affordable, and accessible, focusing above all on supporting every person to meet their needs and preferences and fulfil their goals
- integrates health services across disciplines and specialities to guarantee every person receives the full range of health care they need without getting lost between separate services and programmes
- integrates health and social care, ensuring every person has seamless access to both short- and long-term care across clinical settings, care facilities, their local communities, and their homes
- cares for the carers, valuing their contributions, providing adequate support, and ensuring equity – including for informal caregivers such as family carers, who are disproportionately women
- holds national governments accountable for providing care, in close collaboration with local governments, civil society organizations or the private sector, as appropriate.

The role of physiotherapy in healthy ageing

The life course approach

Ageing is often linked to health conditions like dementia and frailty, as well as many chronic diseases, and the risk of developing them is shaped by experiences throughout life. Preventing age-related health conditions involves addressing risk factors at different life stages, including childhood, young adulthood and midlife. Physical activity and exercise has a key role in providing immediate and long-term health benefits at these different life stages. Physiotherapists can advise on how to adopt a healthy lifestyle throughout life, and offer treatments and exercise plans to meet changing needs.^{10, 11, 12, 13, 14, 15, 16, 17, 18, 19}

How physiotherapy can help prevent frailty

Physiotherapy can help people be as active as possible – people who are more active are up to 41% less likely to have frailty.⁶

A physiotherapist can develop an exercise programme which gradually increases the resistance and intensity to prevent and treat frailty. This will help to prevent loss of strength and muscle (sarcopenia) and make people fitter by increasing their aerobic and lung capacity.⁶

A physiotherapist will also work with other members of a health team, such as medical doctors, occupational therapists, nutritionists and counsellors, to find the right services and treatment.

How physiotherapy can help prevent falls

Exercise is key to fall prevention – physiotherapists are experts in prescribing individualised exercise programmes to help improve strength, balance, coordination, and flexibility. Exercises should be challenging, but safe and progressed as they become easier.²



How to build an advocacy case: example 1

INSURANCE NOT COVERING PREVENTATIVE PHYSIOTHERAPY SERVICES

Introduce the issue: what is the issue or problem that you are trying to solve?

- In some countries prevention services for people who are at risk of becoming pre-frail or frail are not reimbursed by insurance.

Intended beneficiaries: who is being impacted by the issue or problem?

- People at risk of becoming prefrail or frail.
- Physiotherapists and other health care providers that would provide the preventative service.

What is the potential solution/desired outcome?

- Inclusion of physiotherapist services for prevention of frailty for people at risk in insurance schemes and any applicable health law.

Key stakeholders: who can make or influence the desired action?

- Insurance companies
- Policy makers

Establish your coalition: who should advocate with you? Patients, administrators, other health professions, etc?

- Patients
- Carers
- Health professionals

What are the benefits of achieving the desired outcome? This can include patient or population outcomes, improved efficiency or effectiveness in the health system, reduced costs, etc.

- People at risk of becoming frail will receive preventative services.
- Physiotherapists and other health care providers will be reimbursed/paid for their services.

What are the risks of not achieving the desired outcome? Potential negative consequences to patient/population or health system, cost implications, etc.

- The prevalence of frailty continues to increase.

Why does this issue need to be addressed now?

- High incidence of frailty in aging population.

The statistics and recommendations in this document and the information sheets will strengthen your advocacy efforts by highlighting the importance of the role physical activity and structured exercise in preventing frailty, and how physiotherapists are uniquely placed to offer advice.

How to build an advocacy case: example 2

FREQUENCY OF FALLS IN A CARE HOME

Introduce the issue: what is the issue or problem that you are trying to solve?

- Frequency of falls of care home residents, particularly those who are very agitated and moving around during the night when there are a limited number of carers available.

Intended beneficiaries: who is being impacted by the issue or problem?

- Care home residents are at a higher risk of falling if they do not work on their coordination and balance on a regular basis.
- Care home staff when managing falls during night shifts

What is the potential solution/desired outcome?

- Set up regular falls prevention courses in your local care home to reduce the risk of falls.

Key stakeholders: who can make or influence the desired action?

- Care home administration can allocate funds to set up regular falls prevention programmes.

Establish your coalition: who should advocate with you? Patients, administrators, other health professions, etc?

- Physiotherapists, nurses and carers who are overwhelmed by the number of falls they have to deal with.
- Patients' families who are concerned that too many sedative medications are prescribed to keep care home residents moving around less.
- Care home administrators who are interested in keeping their care home residents safe and as mobile as possible.

What are the benefits of achieving the desired outcome? This can include patient or population outcomes, improved efficiency or effectiveness in the health system, reduced costs, etc.

- Reduce the number of falls in the care home population.
- Less injuries/emergencies in care homes if falls can be prevented.
- Reduce workload on care team and families/carers.
- Reduce the number of patients requiring sedative medications if they can move around safely.

What are the risks of not achieving the desired outcome? Potential negative consequences to patient/population or health system, cost implications, etc.

- Increasing number of falls and subsequent injuries/emergencies in care homes.
- Increased workload for the care home staff having to manage falls.
- Overuse of sedative medication to prevent care home residents from moving around.

Why does this issue need to be addressed now?

- This situation is not getting any better – the earlier the programme is introduced, the quicker the impact can be seen.

The statistics and recommendations in this document and the information sheets will strengthen your advocacy efforts by highlighting the importance of falls prevention.

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Endnotes

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