

Around the World

WHO ICOPE Framework and Its Implementation in China: Advancing Holistic Elder Care

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Highlights:

- **Expanded ICOPE Framework for Holistic Aging Care** – The second edition of ICOPE (2024) enhances early detection and intervention across eight core domains, including cognition, mobility, nutrition, vision, hearing, depression, social support, and urinary incontinence.
- **ICOPE Integration into China's Aging Policies** – China has embedded ICOPE principles into national policies, with pilot programs in Beijing, Shanghai, and Chengdu focusing on community-based aging initiatives, long-term care insurance (LTCI), digital health innovations, and mental health support.
- **Challenges and Future Directions in Aging Care** – Despite progress, rural-urban disparities, stigma around urinary incontinence, and caregiving burdens remain key challenges. The WHO-China collaboration, through initiatives like the Capital Innovation Center for Healthy Aging (2024), aims to scale best practices, strengthen workforce training, and leverage AI-driven care coordination to ensure sustainable elder care solutions.

Introduction

The World Health Organization's Integrated Care for Older People (ICOPE) initiative, now in its second edition, represents a groundbreaking shift in addressing the complexities of aging populations. Designed to optimize older adults' intrinsic capacity—a composite of physical and mental reserves—ICOPE emphasizes early intervention across eight core domains: cognition, mobility, nutrition, vision, hearing, depression, social support, and urinary incontinence. This updated framework aligns with the WHO's Decade of Healthy Aging (2021–2030), prioritizing person-centered, community-based care to mitigate disability and enhance quality of life.

ICOPE's Multidimensional Approach

The second edition of ICOPE, released in 2024, expands its scope to address emerging challenges. Key innovations include:

1. **Comprehensive Screening Tools:** Validated assessments for early detection of declines in mobility (e.g., gait speed), cognition (e.g., mild impairment), and mental health (e.g., depressive symptoms).

2. **Social Support Integration:** Recognizing loneliness and caregiving burdens as critical determinants of health, ICOPE now incorporates strategies to strengthen familial and community networks.
3. **Urinary Incontinence Management:** A newly added domain addresses stigma and barriers to care, promoting dignity-preserving interventions.
4. **Cross-Sector Collaboration:** Shared care plans among healthcare providers, social workers, and caregivers ensure continuity and reduce fragmentation.

ICOPE in China: Policy and Practice

As of the end of 2024, there are 310 million adults aged 60 and above in China. Since 2022, pilot programs in Beijing, Shanghai, and Chengdu have integrated ICOPE principles into national aging policies:

1. Community-Based Active Aging Initiatives

Beijing's **Community Proactive Health Integration Program** exemplifies ICOPE's "intrinsic capacity" model. Leveraging WHO's ICOPE Screening Tool, community health workers conduct annual assessments of older adults, identifying risks such as malnutrition or hearing loss. High-risk individuals receive personalized interventions, including physiotherapy for mobility issues or cognitive training sessions. This aligns with China's **National Elderly Health Service System**, which prioritizes prevention over hospitalization.

2. Long-Term Care Insurance (LTCI) Integration

China's LTCI scheme, covering 49 cities by 2024, now incorporates ICOPE criteria to allocate resources. For instance, in Qingdao, older adults with moderate declines in intrinsic capacity qualify for subsidized home care services, reducing caregiver strain. This policy shift mirrors ICOPE's emphasis on **functional ability** over disease-centric models.

3. Digital Health Innovations

Mobile apps like "Health Aging China" enable real-time monitoring of ICOPE domains. Rural health workers in Sichuan use tablet-based tools to assess vision and depression, syncing data with tertiary hospitals for remote consultations—a vital solution for underserved regions.

4. Addressing Mental Health

ICOPE's focus on depression resonates with China's rising geriatric mental health burden. Pilot projects in Shanghai train primary care providers to use PHQ-9 screening tools, linking patients to social workers for psychosocial support. This bridges gaps in a system historically skewed toward physical health.

Challenges and Future Directions

Despite progress, hurdles persist. Rural-urban disparities in healthcare access, stigma around urinary incontinence, and overstretched familial caregiving networks demand targeted solutions. The WHO-China collaboration, exemplified by the Capital Innovation Center for Healthy Aging (established in 2024), aims to scale best practices through workforce training and AI-driven care coordination platforms.

Conclusion

China's adoption of ICOPE reflects a paradigm shift toward proactive, multidimensional elder care. By embedding ICOPE's principles into policy and technology, the country not only addresses its aging crisis but also contributes to global knowledge—particularly in low-resource settings. As the second edition of ICOPE gains traction, sustained cross-sector partnerships and anti-ageism advocacy will be pivotal to achieving WHO's vision of “a world where everyone can live a long and healthy life.”

References:

- WHO (2024). *ICOPE Guidelines, 2nd Edition*.
- Beijing Municipal Health Commission (2024). Report on Community Proactive Health Integration.
- National Health Commission of China (2023). *Long-Term Care Insurance Implementation Framework*.



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