Finally, Angelique Chan presents perspectives from Asia. Finally, Sarah Harper will serve as discussant.

POLICY RECOMMENDATIONS TO ENHANCE HEALTH AND HEALTH CARE OF OLDER PERSONS IN THE US

J.W. Rowe, *Columbia Aging Center, Columbia University, New York, New York*

The US health care system is unprepared to provide the medical, public health and support services needed for the future sick and frail elderly is also not investing sufficiently in keeping people healthy late in life. The US National Academy of Medicine has offered a series of evidence-based affordable policy recommendations in four specific areas: 1) development of new models of care delivery with a special emphasis on people with multiple chronic conditions; 2) strengthening the elder-care workforce by increasing the number of individuals with special geriatric expertise in the professional workforce and increasing the numbers and geriatric competence of all primary care and direct care workers; 3) fostering social engagement, including work for pay and volunteering, in late life; and 4) improving care for advanced illness and at the end of life.

This presentation will discuss the specific NAM recommendations.

GOLDEN AGING: PROSPECTS FOR HEALTHY, ACTIVE, AND PROSPEROUS AGING IN EUROPE AND CENTRAL ASIA

M. Bussolo, J. Koettl, E. Sinnott, *World Bank, Washington, District of Columbia*

Aging societies are not destined to experience stagnation or decline in living standards. The "Golden Aging" report shows that slower population growth offers some opportunities and not just challenges. By taking into account behavioral adaptation, the report finds that: (i) with improved longevity, people are increasing their labor participation at older ages; (ii) their skills do not inexorably deteriorate, but rather shift; (iii) firms can adapt and take advantage of the new demographic reality of an older workforce.

However, the behavioral changes that help reduce dependency and sustain productivity do not necessarily happen automatically. Bold adaptive action is needed across many policy areas, well beyond reforming the intergenerational transfer and pension systems. These encompass, among others, shifting health systems toward preventive care, primary care, and more diagnostics; reforming educational systems to bolster the cognitive skills needed for productive employment along longer working lives; and reforming labor market institutions to allow women to reconcile family and career goals and older people to work more flexible hours.

SUPPORTING SUCCESSFUL AGING IN SINGAPORE: RECENT POLICY INITIATIVE AND DIRECTIONS

A. Chan, *Duke-NUS Medical School, Singapore, Singapore*

Singapore is the most rapidly aging country in Asia. At present, 11% of the population is aged 65 and above and this percentage is projected to increase to 23% in 2030. In January 2016 the Singapore government announced the Action Plan for Successful Ageing in which ten areas for policy change were highlighted; employability, lifelong learning, senior volunteerism, health and wellness, social engagement

and inclusion, aged care services, housing, transport, public spaces, and research on aging. The Action Plan builds in a strong link between research and policy which puts Singapore in a unique position to evaluate policies and programs as they are implemented. To facilitate this linkage, the National Research Foundation has set aside up to \$200 million for a national innovation challenge on active and confident ageing. This paper will discuss some of the policy changes and current research being conducted under the Action Plan.

THE CENTRALITY OF PLACE

R. Finkelstein, *Robert N. Butler Columbia Aging Center, New York, New York*

Public policy is challenged to assimilate global aging. Income support policies for people who live longer than they can work are primary; health and social supports typically follow. These policy issues have been conceptualized as relationships between individuals and the state. The concepts of place and community are often neglected, increasingly important as globalization scatters generations as people move in search of opportunity. Institutions and policies must replace the role of family. Transportation systems must work for drivers and non-drivers and be accessible; public spaces should encourage social interaction across generations; places to walk and sit must be safe as people attend to daily needs; and communities need work, volunteer, education, and engagement opportunities for people of all ages. Housing is particularly complex and should allow families to live close to one another OR live well separately. By ignoring place, we have inadvertently made it more difficult to retain community.

SESSION 4735 (SYMPOSIUM)

GERONTOLOGICAL HIGHER EDUCATION AROUND THE WORLD: COMPETENCIES AND PROFESSIONS

Chair: E. Schoenmakers, *Fontys University of Applied Sciences, Eindhoven, Netherlands*

Co-Chair: J.C. Frank, *University of California, Los Angeles*

Discussant: J.D. Damron-Rodriguez, *University of California, Los Angeles*

With an ageing population worldwide, there is a need for professionals with specialized knowledge and skills in gerontology. Competency-based education (CBE) is a way to assure the development of a workforce that has obtained the know-how to serve older adults. CBE is increasingly recognized as the new pedagogy by accrediting bodies for higher education because of its clear definition of learning goals and accountability for outcomes. In this session, different perspectives on CBE and the consensus and difference in gerontology international competencies are presented. The Association for Gerontology in Higher Education (AGHE) developed a competency framework that can serve as a guideline for developing educational programs in gerontology, which is presented in the first presentation. These competencies, as well as others, are used to a different extent across the world. Educational program development are described and discussed from a European and Pan-American perspective in presentations two and three. Presentation 4