making health stick
a consumer formula

the Big Window in partnership with Saga Plc

September 2023
Healthy passivity in older age is no longer enough

It has to be active

Wellbeing

In 2026 (UK)

Pre-retired 65-74yrs Active Passive Supported

50-64yrs 7m 75-84yrs 85+yrs

13.1m 7m 5m 1.8m

the Big Window: Saga Over 50s UK segmentation study 2021
Generation experience is generation expectant

Key retirement phases

2026/7 outlook

- Individualist
- DC pensions
- Portfolio careers
- Digital generation
- Punk/ New romantics / Britpop

- The Older Gen X approaching 60

- Active
- Afluent
- Successful
- Rebellious
- Sexual freedom
- Rock

- 59 years = 14m

- Boomers
- 59-74yrs

- Passive
- The start of Silent Generation

- 78 years = 4m

- Silent Gen
- War-time
- Delerent
- Job for life
- Cautious
- 50s / early 60s music

- Supported
- 85+yrs

- Gen X 11m
- 50-64yrs
- 65-74yrs
- 75-84yrs
And this isn’t just a UK perspective; it is a global one.
People across in the UK are getting more used to feeling young for longer

With perspective on age perception less to do with affluence and more to do with outlook.

Dancing 'til you drop... Edgar, Cowan and Bunker (BBC World). World ESOMAR Conference, 2014.
Let’s talk more about the ’75 moment’

1. Gap between perceived and real age narrows
2. Likelihood of vulnerability increases
3. Engage in more ‘passive’ activities
4. Expect to spend much smaller proportion of retirement income

Oldest (75+ year old) age group the most likely to experience at least one of vulnerability indicators

- 45% up to 4 indicators
- 43% up to 3 indicators
- 44% up to 2 indicators
- 42% 1 indicator

FCA Financial Lives 2020 data
Our role is to help kick the ‘75’ moment into the long-grass

THE ‘75’ MOMENT

Active

Passive

Supported

Adaptive extension

Wellbeing

50-60yrs

60-80yrs

80yrs

85+yrs
It’s no longer about life-span

It’s not even about health-span

It has to be about full-span:
Living a longer, healthier and fulfilled older life
We know this means 3 critical C’s

These are the needs we must solve for…

1. Confidence
2. Connection
3. Contribution
Actively building positive age beliefs, enabling affiliation and cementing purpose

1. **Confidence**
   - We need to build belief that ageing can be a time to thrive and discover

2. **Connection**
   - We need to enable meaningful affiliation as part of discovery

3. **Contribution**
   - We need to support a sense of purpose and value
Introducing Spaces

Gillian Monaghan (CEO, Spaces)
Playing into the generational change

To create real engagement
The pathway to sustainable engagement in health and wellbeing

1. The Triallists
   - Work out who will 'trial' on an emotional level
   - Women

2. Trial Triggers
   - Work out what is going to trigger the trial
   - Life events

3. Affiliative Glue
   - Work out what is going to trigger the trial
   - ‘Buddies’

4. Addictive Goals
   - Work out what will sustain long-term behaviour
   - ‘Goal tracking’
To reiterate, don’t expect ‘the argument’ to do all the work

- **Utility**: Will this do me good?
- **Affect**: Can I imagine how I will feel if I know this?
- **Cognition**: Will this broaden my experience

Engage
Making health stick, in summary

1. Drive initiatives to encourage engagement with health initiatives at the *individual level*. Understand them at the intra- and inter-cultural level. Use 3Cs needs criteria when designing age/age-tech solutions.

2. Do not depend solely on rational-only measures of health engagement, decisions to engage are also driven by *emotional projections*.

3. Build health solutions using *human-centred design principles* and engage consumers throughout the development life-cycle, from needs-exploration to co-creation and UX testing.

4. Build engagement strategies that realise *who* is likely to lead good health and well-being behaviours and when their life triggers occur. Build *engagement around women* - our evidence suggests men will follow!

5. Focus on more than one measure of well-being, Drive towards a *‘fullspan’* measure to include: eudaimonic, evaluative and QoL constructs.
Making health stick, a HWB development model that is sustainable – it is built from consumer needs and behaviours

HCD build

Immersion in target consumer needs: Understand age-related needs and behaviours first and then build the products around them

Engagement strategy

When: key life triggers
Who: identify and engage triallists
How: drive emotional benefits and mechanics

Outcome measure built on needs

<table>
<thead>
<tr>
<th>Healthspan</th>
<th>Healthspan</th>
<th>‘Fullspan’ Euadaimonic, Evaluative</th>
</tr>
</thead>
</table>

Euadaimonic, Evaluative
What we ask of the UN in relation to ageing

1. A new ‘Ageing Population’ sustainability goal: Understand ageing in and of its own right, not through the lens of HWB, aimed maximising the positive potential of older adult

2. Develop universal measures of positive ageing which go beyond healthy life-expectancy: focused on ‘full-span’, not lifespan or even healthspan

3. Focus on women to lead the ‘healthy ageing’ movement. We know they are the key behavioural change agents and consumption trialists. They need to be at the centre of global health initiatives

4. Work with commercial consumer-facing organisations to ensure health initiatives use human-centred design principles and are capable of engaging at the individual level
making health stick
a consumer formula