

APEC Conference on Policies and Technologies to Promote Healthy Aging with Healthy Diet

Summary Report

APEC Health Working Group

June 2025



**Asia-Pacific
Economic Cooperation**



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Produced by
Health Promotion Administration, Ministry of Health and Welfare

For
Asia-Pacific Economic Cooperation Secretariat
35 Heng Mui Keng Terrace
Singapore 119616
Tel: (65) 68919 600
Fax: (65) 68919 690
Email: info@apec.org
Website: www.apec.org

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1. Conference Introduction

According to the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP), the Asia-Pacific region is moving towards an aging population. The aging society is an issue that every economy in the Asia-Pacific region will encounter, and nutrition plays a key role in the health of elderly.

To improve the nutrition of the elderly, Chinese Taipei has adopted measures to promote an age-friendly dietary environment. By referring to international practices and dietary trends, we have developed a manual on the quality of diet for the elderly through cross-ministerial collaboration, non-governmental organizations (NGO), and enterprises. We have also set up community nutrition promotion centers to provide more comprehensive nutrition services for the elderly in the community.

To keep promoting the concept of a healthy diet for the elderly, Health Promotion Administration (HPA) host the "APEC Conference on Policies and Technologies to Promote Health Aging with Healthy Diet", which was comprised of keynote speeches and discussions, and invited international experts, representatives of NGOs, and representatives of the APEC economies to participate in the conference. The conference focused on the topic of nutrition for the elderly , and the joint efforts to create an age-friendly healthy eating environment.



Preface

The "APEC Conference on Policies and Technologies to Promote Healthy Aging with Healthy Diet" was organized by the Health Promotion Administration, Ministry of Health and Welfare, Chinese Taipei. This conference was held on 26 March 2025 (GMT+8) in Chinese Taipei. The event engaged 18 experts and

attracted more than 200 people from 10 APEC economies, including Canada; Chile; Indonesia; Japan; Malaysia; the Philippines; Singapore; Chinese Taipei; Thailand; and Viet Nam.

Organizing the APEC Conference

The conference consisted of 1 keynote speech and 4 plenary sessions. The topics were as follows,

- Keynote Speech: Global Nutrition Issues and Challenge
- Plenary 1: Nutrition Development Strategy and Policy
- Plenary 2: Explore Healthy Aging Diet with Evidence-based Practice
- Plenary 3: Constructing Age-Friendly Environment and Healthy Diet with AI Applications
- Plenary 4: Experience Sharing from APEC Economies

2. Key Presentations Takeaways

Keynote Speech: Global Nutrition Issues and Challenge

- (1) Professor Mary R. L'Abbe from Canada outlined the significant "double burden" of malnutrition and chronic disease that Canada's elderly population has encountered. She revealed that long-term care menus frequently fail to meet key nutritional guidelines, such as the DRIs and Canada's Food Guide, even though they may already be more beneficial than the typical diets of the average elderly. She also emphasized the critical challenges in improving this, including cost barriers and the need to balance nutritional adequacy with resident preferences and quality of life. To address these issues, she suggested strategies such as assess to supplements and nutrient-dense foods.

Plenary 1: Nutrition Development Strategy and Policy

- (1) Ms. Rachel Ngo from Singapore outlined Singapore's multi-faceted approach to fostering healthy longevity in its rapidly aging "Blue Zone 2.0" population. It integrates the strategies of Chinese Taipei focused on preventive care and community support with targeted programs, impactful policies like Nutri-Grade, and the increasing use of technology to provide personal health information, nudge behaviours change, and enable precision public health for sustainable well-being.
- (2) Dr. Su-E Kuo from Chinese Taipei explained that significant population health and dietary challenges are being tackled through the establishment and expansion of dietitian-led Community Nutrition Promotion Centers, further bolstered by the recent 2024 Nutrition and Healthy Diet Promotion Act which provides a legal foundation for the "Healthy Taiwan" initiative focused on creating supportive environments, enhancing health literacy, and fostering cross-sector collaboration.

Plenary 2: Explore Healthy Aging Diet with Evidence-based Practice

- (1) Professor Koji Miura from Japan explained that Japan tackled undernutrition in the elderly by integrating patient-centered Nutrition Care Management (NCM) into its Long-Term Care Insurance. NCM has evolved to become mandatory training for medical students, and follow-up policies are also encouraged to move toward integrated care, including rehabilitation, nutrition, and oral health care. However, Professor Miura highlighted that undernutrition is still a persistent problem, mainly because NCM access remains limited in home care settings. Therefore, improving home care access was a crucial ongoing policy focus in Japan.
- (2) Professor Katsuya Iijima from Japan advocated for shifting the government-led

care to community empowerment through resident-led "self-help" and "mutual help" plan. He stressed that preventing frailty requires the integration of three dimensions: nutrition (including oral health), physical activity, and social participation. Additionally, success requires interdisciplinary collaboration, application of technology to bridge gaps, and programs such as employment for the elderly for continued community involvement.

- (3) Assistant Professor Feili Lo Yang from Chinese Taipei indicated that Chinese Taipei was revising nutrition standards (DRIs, food guides) for its rapidly aging population to prevent chronic diseases and promote healthy aging. Key updates included refining older adult age categories (65-74, 75+), increasing protein recommendations (1.2 g/kg) to prevent frailty/sarcopenia, and setting new Chronic Disease Risk Reduction levels (e.g., for sodium). She explained that those evidence-based changes aligned with WHO ICOPE principles.

Plenary 3: Constructing Age-Friendly Environment and Healthy Diet with AI Applications

- (1) Professor Ben-Chang Shia from Chinese Taipei highlighted aging challenges such as physical function decline and social isolation, and pointed out the need for age-friendly, inclusive environments. He detailed the potential of technology, especially AI (e.g., smart homes, telehealth, nutrition tools), to enhance the ability of the elderly to live independently. However, Professor Shia also emphasized the need to integrate these advancements into a holistic strategy while promoting physical activity, social connection, caregiver support, and ensuring ethical AI deployment.
- (2) Mr. Yoshimitsu Mori from Japan indicated that Japan's aging challenges (rising costs, health/isolation concerns) created a need for better care food solutions. He explained that the Japan Care Food Conference addressed the problem of inconsistent standards by establishing the Universal Design Food (UDF) system. UDF categorizes foods into four objective texture levels to unify the market and make it easier for customers to choose. Mr. Mori stressed that UDF aimed to provide safe, enjoyable, easy-to-eat options for all to achieve "Enjoyment of Eating for All", not just for the elderly, though there are challenges to be overcome in terms of cost, market size, and public awareness persist.
- (3) Dr. Nai-Wei Hsu from Chinese Taipei explained that Yilan County developed the "Health Stone Grant Alliance" to integrate health promotion, medical, and long-term care locally while facing challenges of a super-aged population and fragmented services. He highlighted their nutrition program as a key component, which successfully improved older adults' dietary habits and reduced malnutrition risk. Dr. Hsu also revealed Yilan's future strategy was to build the

"Lan Yang Health Cloud," an integrated data platform, to consolidate health information for holistic insights and to develop future AI-driven health strategies.

Plenary 4: Experience Sharing from APEC Economies

- (1) Mr. Luong Quang Dang from Viet Nam highlighted that Viet Nam's rapidly aging population posed significant challenges compounded by the lack of a dedicated elderly nutrition action plan at the economy-wide level and underdeveloped community nutrition services. Mr Dang recommended key actions such as creating related plans, implementing community screening, developing a specialized workforce, improving data collection, and enhancing multi-sectoral collaboration to improve older adults' dietary health.
- (2) Dr. Visaratana Therakomen from Thailand summarized Thailand's approach to its aging society, detailed its seamless integrated healthcare system spanning prevention to dependent care and highlighted specific nutrition policies such as a forthcoming elderly Food-Based Dietary Guideline and a tax on sugar-sweetened beverage. Dr. Therakomen also explained the use of health assessments supported by digital tools and the development of data systems for improved monitoring and policy-making.
- (3) Assistant Professor Hanis Mastura Yahya from Malaysia indicated that Malaysia has adopted the multi-sectoral policy approach guided by policy frameworks. To address the double burden issue of the aging population and malnutrition, she highlighted key activities such as the recent Malaysian Dietary Guidelines for Older Persons (2023) and community peer support programs, and disclosed the next nutrition action plan at the economy-wide level is being developed, while broader health system reforms through the Health White Paper to ensure sustainable and equitable healthy aging for residents.
- (4) Dr. Wen-Harn Pan from Chinese Taipei presented the foundational Nutrition and Health Survey in Taiwan (NAHSIT) as the primary evidence base for policies, highlighted its key findings regarding nutrient intake status such as Vitamin D insufficiency, low calcium intake and protein intake was associated with robustness in the elderly. Dr. Pan described how NAHSIT analyses identified healthy dietary patterns to prevent both frailty and cognitive decline, but still need the continuous community support for lasting behavioral change.

3. Outputs

Website and Program Book

To provide participants with a reference for the presentations, we compiled speakers' abstracts into a program book and slides on the website. The electric

program books and slides were made available via the following link,
 Link: <https://www.2025apechpa.org/download>.

Participation

The conference had 318 registered guests. The actual attendance at the conference was 245, and the conference participation rate was 77%. Table 1 provided the detailed background of participants. There were 10 APEC economies attending this conference, including Canada; Chile; Indonesia; Japan; Malaysia; the Philippines; Singapore; Chinese Taipei; Thailand; and Viet Nam. In total, we invited 18 representatives of APEC economies and experts to attend and share their experiences and successfully conducted an expert networking for further cooperation in the future. For the gender ratio, among all participants, there were 32% male and 67% female. Detailed information of the conference is shown in Table 2.

Table 1. Participants by background (Total Attendance: 245)

Background	Number	Percentage
Government Agencies	78	34%
Medical Institutions	63	28%
Academic Institutions (incl. schools)	60	26%
NGOs, NPOs	23	10%
Private Enterprises	14	6%
Others	7	3%
Total	245	100%

Table 2. APEC economies attendance and gender statistics (Total attendance: 245)

Economy	Male	Female	Prefer not to answer	Total
Total	78(32%)	164(67%)	3(1%)	245
Participants	67(30%)	157(69%)	3(1%)	227
Chile	1	1	0	2
Indonesia	1	0	0	1
Japan	1	1	0	2
Malaysia	0	2	0	2
The Philippines	1	1	0	2
Singapore	0	1	0	1
Chinese Taipei	62	149	3	214
Thailand	1	2	0	3
Speakers/Experts	11(61%)	7(39%)	0(0%)	18
Canada	0	1	0	1
Japan	3	0	0	3

Economy	Male	Female	Prefer not to answer	Total
Malaysia	0	1	0	1
Singapore	0	1	0	1
Chinese Taipei	7	3	0	10
Thailand	0	1	0	1
Viet Nam	1	0	0	1

Survey

To survey whether participants' knowledge has been enhanced after attending the conference, we asked participants to help fill in the questionnaire before and after attending. The pre-survey was collected together with the registration form, and the post-survey was collected after the conference. In total, we collected 288 pre-survey and 80 post-survey results.

Table 3. Results of Pre and Post-Surveys

Pre-survey

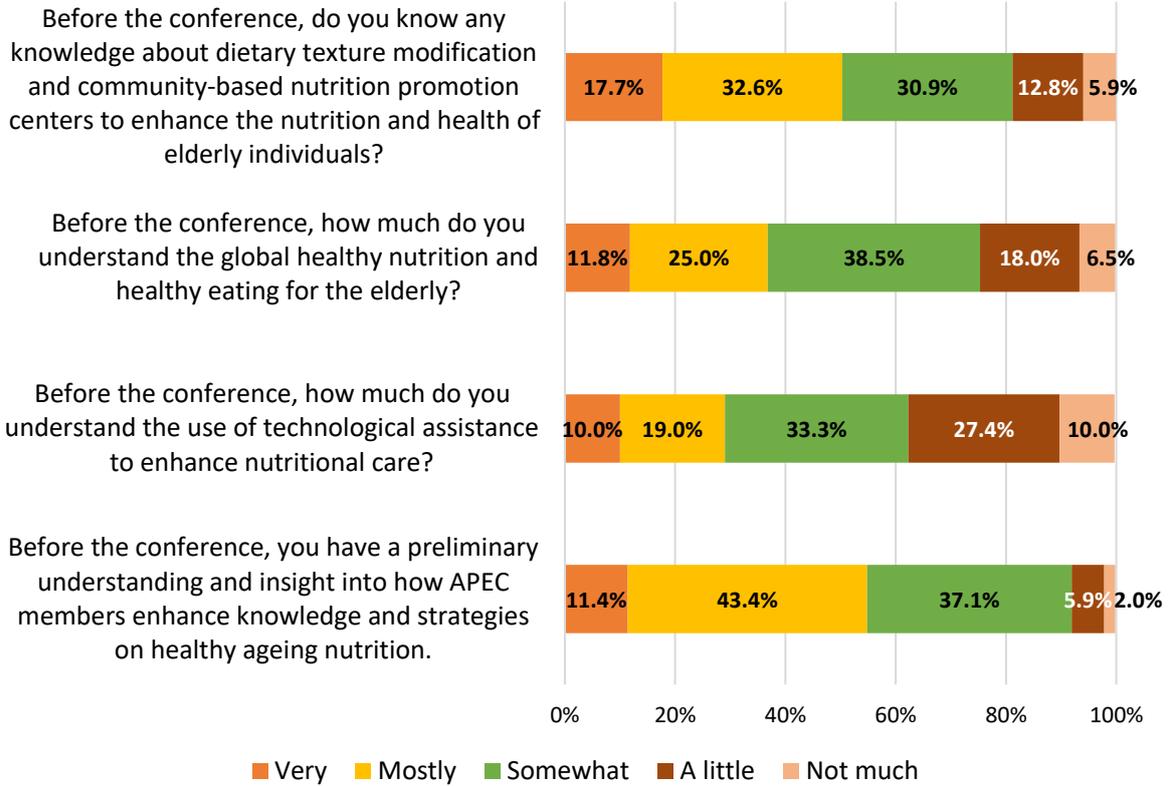
#	Question	Very	Mostly	Somewhat	A little	Not much
1	Before the conference, do you know any knowledge about dietary texture modification and community-based nutrition promotion centers to enhance the nutrition and health of elderly individuals?	17.7%	32.6%	30.9%	12.8%	5.9%
2	Before the conference, how much do you understand the global healthy nutrition and healthy eating for the elderly?	11.8%	25%	38.5%	18%	6.5%
3	Before the conference, how much do you understand the use of technological assistance to enhance nutritional care?	10%	19%	33.3%	27.4%	10%
4	Before the conference, you have a preliminary understanding and insight into how APEC members enhance knowledge and strategies on healthy ageing nutrition.	11.4%	43.4%	37.1%	5.9%	2%
5	"UN Decade of Healthy Ageing: Plan of Action 2021-2030" has pointed out that the elderly need to improve their own health through health	True: 72.2% False: 27.7%				

#	Question	Very	Mostly	Somewhat	A little	Not much
	promotion to be able to age with dignity. Do you know the interactive nutrition education to enhance elderly participation and cognitive abilities in your economy?					

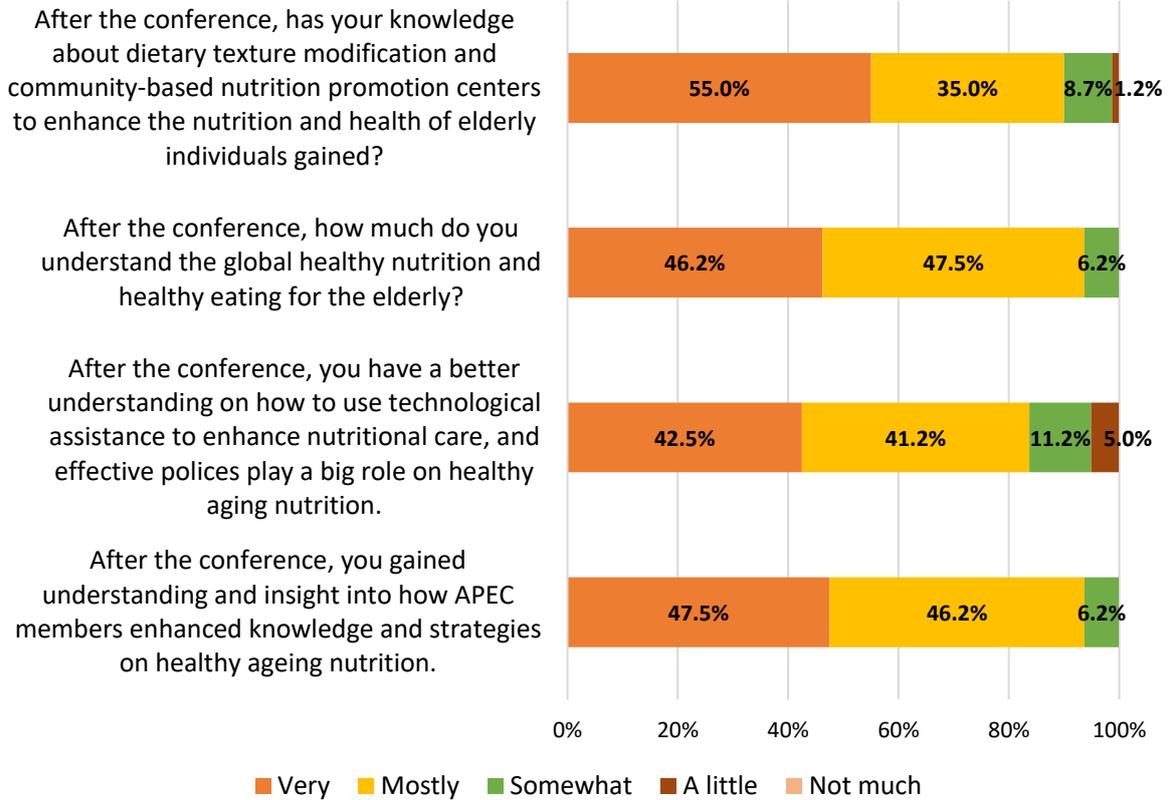
Post-survey

#	Question	Very	Mostly	Somewhat	A little	Not much
1	After the conference, has your knowledge about dietary texture modification and community-based nutrition promotion centers to enhance the nutrition and health of elderly individuals gained?	55.0%	35.0%	8.7%	1.2%	0.0%
2	After the conference, how much do you understand the global healthy nutrition and healthy eating for the elderly?	46.2%	47.5%	6.2%	0.0%	0.0%
3	After the conference, you have a better understanding on how to use technological assistance to enhance nutritional care, and effective polices play a big role on healthy aging nutrition.	42.5%	41.2%	11.2%	5.0%	0.0%
4	After the conference, you gained understanding and insight into how APEC members enhanced knowledge and strategies on healthy ageing nutrition.	47.5%	46.2%	6.2%	0%	0%
5	Do you think this conference provides the opportunity to collaborate with different professional fields?	True: 96.2% False: 3.7%%				

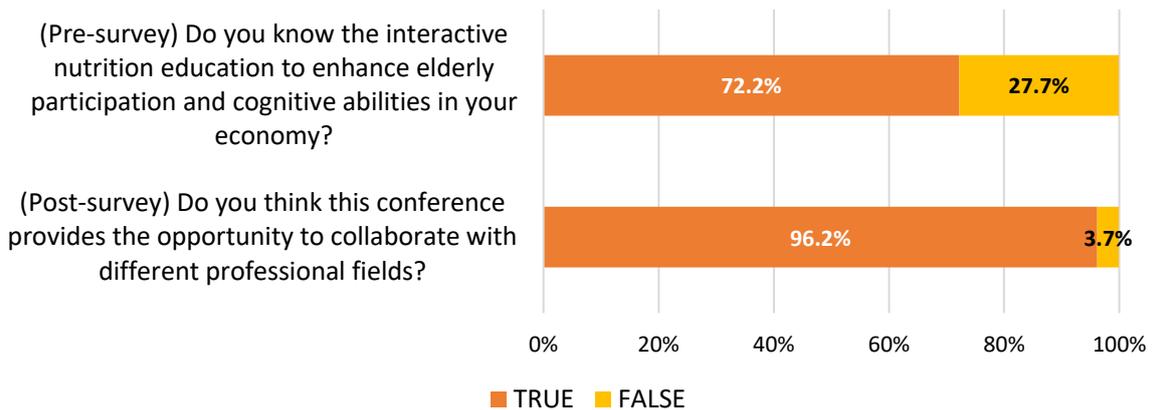
Pre-survey



Post-survey



True or false question



4. Conclusion, Key Findings and Recommendations

- There were a variety of strategies that could be implemented for nutrition challenges in the aging populations, for example, one approach focused on the

"double burden" of malnutrition and chronic disease, as well as specific nutritional inadequacies in long-term care facilities, emphasizing related cost and balance challenges. Another showcased a multi-faceted strategy at the economy-wide level integrating specific policies, community support, and technology for healthy longevity. A third emphasized establishing dietitian-led community centers supported by the legislative framework in Chinese Taipei and providing a foundation for future comprehensive initiatives. These examples illustrated varying focuses, including identifying care gaps, implementing integrated systems, and establishing legal/community frameworks.

- Key evidence-based approaches for healthy aging nutrition were explored during the conference. One approach was the evolution of formal Nutrition Care and Management processes integrated within long-term care insurance systems, highlighting not only patient-centered care but also persistent home care access challenges. Another approach involved strong advocacy for shifting towards community empowerment through resident-led initiatives focused on nutrition, activity, and social pillars, supported by collaboration and technology. A third approach detailed the systematic revision of the nutrition standards and guidelines to prevent chronic diseases and promote healthy aging.
- There was a high potential of AI and technology application to enhance the elderly's independence, for instance, through smart homes and telehealth. The discussion emphasized integrating such technologies within a holistic strategy that addressed accessibility, social inclusion, ethics, and innovation. Alongside technological solutions, the creation of standardized, texture-based food classification systems was detailed as a way to improve food accessibility and enjoyment for the entire population, while practical challenges such as cost and awareness were also noted. Furthermore, integrated community-based models linking diverse health and care services were introduced, showcasing successful nutrition programs and plans to build integrated data platforms designed for future AI-driven health promotion.
- In conclusion, diverse nutritional strategies for aging populations included initiating comprehensive plans, implementing integrated policies supported by digital tools, using multi-sectoral frameworks for reform, conducting surveys at the economy-wide level for evidence-based interventions, and collecting suggestions for addressing service gaps.