BANGKOK RECOMMENDATIONS 2026

Community-Led Approaches and Innovations for Better Care Systems, and Community Resilience toward an Inclusive Silver Economy

At a glance

Host

- **Department of Older Persons (DOP),** Ministry of Social Development and Human Security
- **College of Population Studies (CPS),** Chulalongkorn University
- **Ageing Innovation Expo Thailand** (by KRS Xpansion)

Co-host

Under the umbrella of Chulalongkorn University

- **Chulalongkorn University Platform for Ageing Research Innovation** (ChulaAri)
- **Labour Research and Coordination Research Unit** at College of Population Studies, Chulalongkorn University (CU-COLLAR)

- **United Nations Population Fund** (UNFPA)
- **United Nations Human Settlements Programme** (UN-Habitat)
- **ASEAN Centre for Active Ageing and Innovation** (ACAI)
- **Asian Development Bank** (ADB)
- **Alliance on Longevity in Asia-Pacific** (ALAP)
- **Tsao Foundation Singapore**
- **Foundation for Older Persons' Development** (FOPDEV)
- **ASEM Global Ageing Center** (AGAC)
- **Health Systems Research Institute** (HSRI)
- **National Health Security Office** (NHSO)
- **Chulabhorn Royal Academy**
- **National Institute of Development Administration** (NIDA)

COMMUNITY-LED APPROACHES AND INNOVATIONS FOR BETTER CARE SYSTEMS, AND COMMUNITY RESILIENCE TOWARD AN INCLUSIVE SILVER ECONOMY

6 - 8 MAY, 2026 Bangkok

Over 200 active participants from 15 countries

OBJECTIVES

"The Bangkok Recommendations" aim to advance community-led and integrated approaches for strengthening care systems, long-term care, and resilient ageing societies in the Asia-Pacific region and beyond. They promote coherent policy action linking healthy ageing, social protection, workforce development, sustainable financing, inclusive innovation, digital transformation, AI, and climate resilience.

The Bangkok Recommendations envision ageing societies in which people of all generations are supported by integrated, inclusive, rights-based, and sustainable systems that promote dignity, autonomy, participation, resilience, and wellbeing across the life course. They affirm that communities are not only beneficiaries of policy, but also active partners in translating national and regional commitments into locally responsive action. They promote community-led and people-centred approaches to prevention, long-term care, caregiver support, workforce development, sustainable financing, ethical innovation, climate resilience, and evidence-informed implementation. They also advance an inclusive silver economy that expands opportunities without deepening inequality, recognising older persons as rights-holders, contributors, workers, caregivers, community members, and co-producers of solutions, while strengthening intergenerational solidarity and shared responsibility across society.

A community-led approach refers to an approach in which communities are not merely consulted or mobilised to implement externally designed programmes, but are meaningfully involved in identifying needs, setting priorities, designing responses, delivering support, monitoring progress, and adapting solutions.

Innovation refers to the development, adaptation, and responsible use of new or improved ideas, practices, services, technologies, financing models, governance arrangements, and community-based solutions that generate public value and improve wellbeing in ageing societies

Community resilience refers to the collective capacity of communities, institutions, and local systems to anticipate, prepare for, withstand, respond to, recover from, and adapt to shocks and stresses, including disasters and pandemics, while protecting dignity, wellbeing, rights, and continuity of support for all people, especially those most at risk. It is the process of developing the capacity of place-based ageing communities to manage risk through collective action and the building of various community assets.

Guiding Principles

The Bangkok Recommendations are guided by ten principles:
(1) **Community-centred implementation**, translating ageing commitments into locally accessible systems for prevention, care coordination, long-term care, caregiver support, participation, resilience, and innovation.
(2) **Rights, dignity, and participation**, recognising older persons as rights-holders and active members of society.
(3) **Integrated and life-course care**, linking health promotion, primary care, rehabilitation, social care, long-term care, social protection, and community support.
(4) **Meaningful participation and co-production**, ensuring lived experience informs planning, delivery, monitoring, and accountability.
(5) **Equity and inclusion,** prioritising groups facing higher risks or weaker access to services.
(6) **Sustainability and scalability**, moving community-led models beyond short-term pilots.
(7) **Decent work, caregiver support, workforce protection, and strengthened care workforce wellbeing**, ensuring gender-responsive and protected care work.
(8) **Ethical, human-centred innovation**, ensuring accessible and accountable use of digital tools, AI, and AgeTech.
(9) **Age-friendly and climate-resilient environments**, supporting mobility, care continuity, and protection during shocks.
(10) **Evidence-informed policy and accountability,** using data, research, and learning systems to guide investment and improvement.

Future risks and Opportunities

Through the conference deliberations, the following key risks and opportunities were identified and recognised.

Key future risks:

- Rising care needs may widen community-based care gaps.
- Workforce shortages may weaken long-term care sustainability.
- Financing pressures may limit equitable access to care.
- Digital transformation may deepen exclusion without inclusive design.
- Climate risks may disrupt care continuity and wellbeing.
- Social isolation and ageism may weaken community trust.
- Life-course inequalities may intensify vulnerability in later life.

Key opportunities:

- Longevity can be positioned as a platform for inclusive social and economic innovation.
- Older persons can be recognised as rights-holders, contributors, and co-producers of future solutions.
- Community-led systems can become local platforms for integrated care, trust, and resilience.
- Digital transformation can support inclusive and human-centred care.
- Prevention and healthy ageing can be embedded across the life course.
- Intergenerational solidarity can become a practical resource for social cohesion and mutual support.
- The care economy can be professionalised as a foundation of decent work, gender equality, and local development.
- Age-friendly and climate-resilient communities can be advanced as shared public goods.

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Thematic Recommendations

Theme 1: Community-Led Care and Long-Term Care Systems

S : System

Community-led care and long-term care systems should provide accessible, coordinated, equitable, and sustainable support across prevention, care transitions, ageing in place, and caregiver support.

Top three prioritised proposed measure

- **Develop integrated community-led care models linking health, social care, long-term care, rehabilitation, mental health, social protection, and caregiver support.** Build coordinated, person-centred care across prevention, recovery, ageing in place, and transitions. (Rank 1)
- **Improve continuity of care across home, community, primary care, hospital, rehabilitation, and institutional settings.** Use care managers, shared protocols, referral tracking, and follow-up systems. (Rank 2)
- **Use data, digital tools, and assistive technologies to support—not replace—human-centred care.** Support referral, monitoring, emergency response, training, navigation, privacy, and trust. (Rank 3)
- **Strengthen community-level prevention, self-care, family support, and early intervention as part of community-led care and long-term care systems.** Promote healthy ageing, functional ability, social participation, caregiver self-care, and early intervention. (Rank 3)

- *Remark: The scores for the third-ranked measures are exactly the same. Therefore, there are four measures in total for this theme.*

Theme 2: Care Workforce, Standards, and Safeguarding

S : Safeguard

Care workforce systems should strengthen paid caregivers through fair remuneration, quality standards, competency frameworks, multidisciplinary coordination, safeguarding, registration, training, and digital support.

Top three prioritised proposed measure

- **Recognise and support informal and family caregivers through training, respite care, counselling, peer support, flexible work arrangements, and feasible financial or social protection measures.** Reduce burnout, improve care quality, and protect families from unpaid care burdens. (Rank 1)
- **Promote multidisciplinary collaboration among health workers, social workers, care workers, local governments, civil society, volunteers, and community-based organisations.** Link services, referrals, social prescribing, and community assets for coordinated care. (Rank 2)
- **Strengthen accredited international quality standards, accreditation systems, and service assurance mechanisms for community-based care to enhance quality, accountability, and workforce mobility.** Define minimum standards for safe, person-centred, accountable, continuous, and coordinated care. (Rank 3)

Theme 3: Sustainable Financing and Resource Mobilisation for Community-led Care

R : Resource

Sustainable financing should transform community-led care into reliable, equitable, scalable systems through pooled funding, caregiver support, workforce investment, financial protection, and accountable resource mobilisation.

Top three prioritised proposed measure

- **Establish a dedicated financial mechanism to recognise, compensate, and support informal caregivers and allowances subsidies, training and mental health support, pension and social protection.** Reduce the burden of unpaid care and protect vulnerable households from care-related financial hardship. (Rank 1)
- **Introduce a dedicated pooled fund for community-led care and services through public–private partnerships, including philanthropic contributions.** Finance home-based care, respite, assistive devices, coordination, and local innovation. (Rank 2)
- **Provide dedicated financing for care workforce capacity building, upskilling, and reskilling through public–private partnerships.** Invest in sustainable care workforce capacity, certification, supervision, and career pathways.(Rank 3)

Theme 4: Community Resilience, Age-Friendly Environments, and Climate Risk

R : Resilience

Age-friendly and climate-resilient communities should strengthen accessibility, continuity of care, social participation, digital inclusion, disaster preparedness, local governance, and protection during future shocks.

Top three prioritised proposed measure

- **Use inclusive digital and communication systems for early warning, alerts, care coordination, and social connection.** Support accessible alerts, health monitoring, service coordination, and non-digital communication channels. (Rank 1)
- **Strengthen intergenerational spaces and programmes that promote social participation, mutual support, and community cohesion.** Promote learning, digital inclusion, peer support, volunteerism, and mutual aid. (Rank 2)
- **Promote age-friendly housing, transport, public spaces, health facilities, markets, shelters, and community centres.** Treat accessible environments as core infrastructure for wellbeing and resilience. (Rank 3)

Cross-Cutting Enabling Factors

Cross-cutting enabling factors support implementation through an international obligation mechanism, ethical innovation, coordinated governance, inclusive partnerships, reliable evidence, accountability, continuous learning, and system-wide implementation capacity.

Enabling factor 1:
Innovation, Digital Transformation, AI, and the Inclusive Silver Economy.

Promote ethical, affordable, accessible, and human-centred innovation that improves care quality, inclusion, autonomy, participation, resilience, and public value.

Enabling factor 2:
Governance, Partnerships, and Implementation Mechanisms.

Clarify institutional roles, financing responsibilities, coordination platforms, accountability structures, and meaningful participation for sustained implementation across sectors.

Enabling factor 3:
Data, Research, Evidence, and Learning Systems.

Strengthen disaggregated data, implementation research, outcome measurement, and regional learning to guide policy, financing, implementation, scaling, and accountability.

KEY FOCAL POINTS IN ORGANIZING THE EVENT

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- Chayaporn Thatakian (Ms.)
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FOR MORE INFORMATION & THE FINAL REPORT & E-FILES

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