



Opening Statement of  
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**Special Committee on Aging**  
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Chairman Nelson and Ranking Member Collins, thank you for inviting us to discuss the importance of U.S. investment in basic scientific and medical research to better understand and prevent age-related chronic diseases, the prevalence of which are exploding as our population ages.

I am joined by some of the country's finest scientists, representing our foremost research organizations, including of course Dr. Hodes from the National Institute on Aging itself. So I am honored to be able to moderate our panel. But before I turn it over to the experts, perhaps I might set the context of today's Roundtable on how and why population aging drives us to this urgent need for better, more effective research strategies toward understanding and curing non-communicable diseases. NCDs,

To begin, there is the simple but profound fact that this phenomenon we call population aging is emerging in our 21<sup>st</sup> century as the most seminal structural change the world has experienced since the dawn of the industrial age. It is, to be clear and direct, the demographic fact of a society where there are more of us we call "old" than "young". Standard & Poor's, the sovereign rating company put it this way in their 2010 report, *Global Population Aging: An Irreversible Truth*: "No other force is likely to shape the future of national economic, health and social public finances as the irreversible rate at which the world's population is growing older." Whatever we understood to be true about public policy in the 20<sup>th</sup> century must change. This transformation, moreover, requires a new social contract fit for our 21<sup>st</sup>-century demographic realities. Economic and social policies created in the 20<sup>th</sup> century will no longer apply; and worse, could well have deleterious effects. This is huge, and we have barely begun to assimilate its consequences, which is why, Senators, your leadership demonstrated today is so welcome.

As the Executive Director of the Global Coalition on Aging (GCOA), I represent the global cross-sector business voice on aging policy and strategy. Through research, public policy analysis, advocacy and communication, GCOA is working to ensure global aging is a path for fiscally sustainable economic growth, social value creation and wealth enhancement. From this perspective, I can tell you this is truly the global challenge of our time. To use the vernacular the media and global leaders seem to like, population aging is

indeed now on the list of mega-trends. And so, what we do here today and in the next two days will have impact not only in and for America, but globally, too.

The aging of the American population is not simply a matter of the baby boomers growing old and living longer. This is part of the equation, certainly, but of equal importance is the steady, parallel decline in birth rates. Taken together, these two demographic forces – longevity and low birth rates -- are creating a new structure of society with an unprecedented and historically new ratio of old to young that will be with us far beyond the current “baby boomer effect”, and well into our children’s’ children’s century.

Hence, population aging prompts questions that are far more fundamental than how to increase funding for this disease or that entitlement program. Indeed, population aging demands a fresh, innovative approach to policymaking where the incompatibility between 20<sup>th</sup>-century approaches and 21<sup>st</sup>-century demographic realities is fundamentally challenged.

But I am optimistic that we Americans actually know how to do this; to take huge challenges and find real solutions. Let me suggest three models that have been the basis for wealth creation and prosperity and driven by our unique sense of American optimism. They are models for how we can view today’s challenge of population aging.

The first is the creation of the national interstate highway network in the mid-20<sup>th</sup> century. American leaders recognized that investing in highways would connect regional economies to spur national economic synergy, and a federal-state partnership was formed to undertake the project. Despite plenty of political wrangling, the transcontinental network was built, and it laid the foundation for national economic development unparalleled before or since. It did not have to be. Yet it was done – and done in a way that connected excellent execution, vision, good ideas and ideals. We are better off as a nation for it. And, at its core, it happened through a deep understanding that spending on new transformative ideas should be viewed not as a cost but as an investment in our future – and that the price of not investing is far greater than the reverse. In its implementation it also showed what can be achieved through a comprehensive and integrated approach to public policy that broke down silos and generated cooperation, collaboration and excellence. My esteemed colleagues today will talk a great deal about this need of silo-busting and more comprehensive approaches for our research into the diseases of aging.

The second big American project is the steady, generous investments that we make in children. We do this in childhood education and in a stunningly progressive approach to immunization that have become rites of passage where it is now a part of the culture to be expected and welcome. It is the driving force behind enduring American success. And so too, we understand, intuitively, that investment in childhood immunization is not only good for the children, it is essential for a strong, successful and good America. Our children’s health as they age is an essential component of a healthy society. And so we invest. And we understand this spending not as a cost but as an investment. The returns by any standard – human and economic – are unfathomably huge.

A third American project was the Space Program into which we put trillions over the decades that have yielded us and the world countless benefits in technology, medicine and science. But at its core was the underlying notion that this was to be understood less as a cost and more as an investment. An investment as much in a set of ideas and a vision of the future, which has come to pass.

So, Mr. Chairman, I suggest this is exactly the situation we face today with the aging of our population. This huge shift, in ratio of old to young, brings us as a society to a moment where spending on research to find the solutions to the NCDs of aging can no longer be viewed as a cost, but must be seen as an investment. An investment in human capital. An investment in the national strength. An investment in our future. An investment for children, too. It will be worth it.

The profound shift in how we as a nation view the process of getting old will also come to be understood differently. It need not be a process of increasing dependence and disability as that part of life has historically been assumed to be, but ones that can be active, engaged, productive, and happy. Nor can we afford a view any different, as one-quarter of our total population will be 60 and over within the next two decades. It is not fiscally sustainable to continue thinking and acting as we did in the 20<sup>th</sup> century. The arithmetic just does not work. But at the center of this new vision for the growing number of those of us over 60 must be a healthier aging. It is a healthier aging to turn our 20<sup>th</sup> century miracle of longevity to a welcome and wonderful circumstance.

It is a big deal, and nothing short of a new social contract for all Americans. More old than young is demographically baked in for the next two generations. It may well be the condition for even longer, but it is certainly with us for our children and their children's lives. This is how these things work. And, therefore, a new way of thinking about how we do research to address the diseases of aging is for all America, young, old and unborn. We must find the cures for Alzheimer's, diabetes, cardiovascular disease and cancer – those NCDs that are the barriers to a healthy and active aging. And if those cures can better come through an innovative approach to the biology of aging then that is the path we ought to take.

We Americans have always had the capacity and imagination to make progressive public policies that anticipate emerging societal transformations. We did it with our highway system in the 1950s, we continue with how we approach education and health for children, and so too with our space program. It is a matter of self-interest and public interest perfectly colliding, which is precisely the crossroads the challenge – opportunity – of population aging presents us as a nation.