Emily Evans

From: International Longevity Centre <events@ilcuk.org.uk>
Sent: 14 March 2025 12:45
To: Emily Evans
Subject: Your Friday three - 14 March 2025

ILC Friday three - 14 March 2025 View this email in your browser

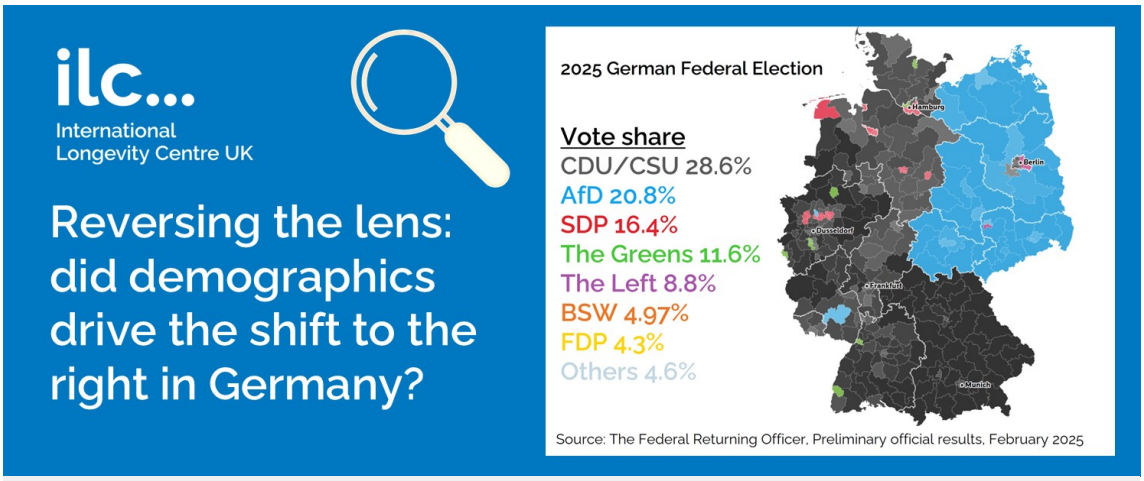
International Longevity Centre UK

Latest news

ILC Friday three

- Reversing the lens - did demographics drive the shift to the right in Germany?
- Immunosenescence - can we better prevent the risk of RSV as we age?
- Call for evidence - can you help with any of these three projects?

Reversing the lens – demographics and German democracy.



As the dust from the German elections settles and coalition negotiations begin, ILC's Head of Policy and Influencing, Lily Parsey, takes a closer look at how Germany's changing demographics influenced the results.

The election results reveal a striking shift in the country's political landscape, most notably a surge in support for the far-right Alternative für Deutschland (AfD), which doubled its vote share to become the second-largest party in the Bundestag.

This result has sparked widespread debate, with many questioning what has fuelled this rise – the war in Ukraine, the cost-of-living crisis, or a broader sense of disenfranchisement? One major factor that has come under scrutiny is demographics. Many blame younger voters for the decline in support for mainstream parties, with just one in four (25%) of 18–24-year-olds voting for the two parties that are now set to form the next government, and voters in the 30–44 age bracket contributing the highest share of votes to the far-right at 26%.

But is it really about age – or is there more going on?

While many have focused on age as a dividing line in this vote, it is important to note that a higher proportion of 18–24-year-olds (25%) voted for Die Linke (Left Party) than for the AfD (21%). And both gender and education levels are much stronger indicators of voting behaviour than age: men were 41% more likely to vote for the AfD than women, and people with a “basic” level of education were more than twice as likely to vote for the far-right as those with a “higher” level of education.

A lot has been written about the disenfranchisement of men – and particularly young men – in politics, including a recent op-ed in the UK’s *The Observer* newspaper.
As can be seen from the map above, the division between former East and West Germany is pretty stark. Despite years of investment and a solidarity tax (the so-called “Soli”) that West Germans pay to support the East, decades of inequality and slower economic growth in the East have left many feeling left behind. This division suggests that economic and social deprivation – rather than demographics alone – plays a crucial role in shaping political preferences.

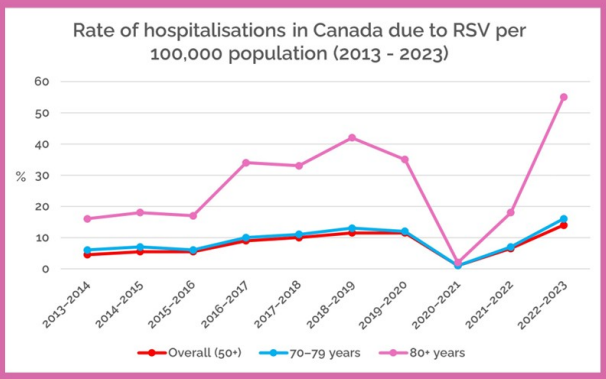
One of the more unexpected and underreported trends in this election was the movement of over 100,000 voters from the far-left Die Linke (Left Party) to the far-right AfD. Many of these voters may well be casting a "veto vote", driven by dissatisfaction with the status quo rather than wholehearted support for the far-right's agenda.

This disillusionment is compounded by a lack of confidence in the centrist parties, with young people especially feeling that their concerns – whether about the economy, the climate crisis or social justice – are not being adequately addressed by the political establishment.

But while it’s not all down to age, one thing is clear: mainstream parties across Europe must do more to engage with younger and disenfranchised voters. To remain relevant and counter the growing influence of the far-right, the more centrist parties must adapt their policies to meet the demands of a changing electorate and tackle the underlying issues of deprivation and frustration that have driven so many to the extremes of the political spectrum.

MORE HERE

Immunosenescence - preventing the risk of RSV as we age



The adult immunisation gap - RSV and immunosenescence

The UK Government's decision this week to exclude adults over the age of 80 from the respiratory syncytial virus (RSV) vaccine, has raised concern among health experts and campaigners. In a similar vein last year, the ILC expressed its disquiet and made recommendations for policymakers when adults over 65 were excluded from the COVID Spring Booster. ILC's research of over 15 years, consistently shows the benefits of broad adult immunisation coverage. We believe that the exclusion of older adults from the RSV vaccine, and all pertinent vaccines, requires urgent reconsideration.

The very young and older, more frail, adults are among the most vulnerable to severe RSV infections, and excluding people over 80 puts lives at risk. A UK study, between 1995 and 2015, estimated that among adults, approximately 487,000 GP episodes, 18,000 hospitalisations and nearly 8,500 deaths were attributable to RSV per average season. Of these, 79% of hospitalisations and 93% of deaths were in people aged 65 or older – and research in Canada illustrates that those over 80 are even more likely to become seriously ill. These numbers are staggering, especially given that RSV is a preventable disease. But, according to a House of Lords Library paper in 2022, the number of adult infections are frequently underestimated.

While the RSV vaccine may be available privately, it is expensive, costing approximately £245 per dose, unaffordable for many.

While vaccination is one of the most effective ways to support ageing imune systems, there's a flipside too. Immunosenescence – a topic that is often overlooked and underappreciated by policymakers. Perhaps the challenging nature of the word – immuno-se-ne-scence – makes it trickier to understand (let alone say, or spell), but put simply, it is the gradual weakening of immune function with age, leading older adults to become more susceptible to disease. Immunosenescence means we need our older adults to be vaccinated, but it also poses a risk to the effectiveness of immunisation. It reduces older adults' immune system response to vaccination, such that vaccine effectiveness in older age groups is generally lower than in younger age groups.

That's why we're working with CSL Seqirus to explore solutions and identify policies to address this challenge. Policymakers must act now to improve vaccine efficacy for older adults and ensure immunisation policies reflect the realities of an ageing society.

The ILC will continue pushing for better immunisation policies, both in the UK and across the world. We urge the Government to extend RSV vaccine eligibility, restore broader access to COVID-19 and flu boosters, and take immunosenescence seriously in future health planning.

We're holding a roundtable with experts in the field on addressing immunosenescence and improving adult immunisation in Europe. If you are interested in contributing to this discussion, please let us know via the button below.

MORE HERE

Call for evidence - can you help with any of these three projects?

ilc...
International
Longevity Centre UK

Three calls for evidence

Artificial intelligence and long lives

Health systems are bursting at the seams. Economic inactivity is at a record high. And our places and communities aren't adapted to long lives. Can artificial intelligence (AI) help us overcome some of these perennial challenges?

We want to think beyond robotics in care homes and diagnostics and explore ways can AI be truly disruptive when it comes to helping us achieve healthier, wealthier, more connected long lives. Questions include, but are not limited to:

- How can AI help us boost our overall wellness – including factors such as life span, health span, work span, income, environmental performance, and happiness?
- What roles should AI adopt, and in which sectors – from predictive models that futureproof policymaking to personalised health promotion plans, financial services, to social connection?

If you're interested in working with us on the role of AI in long lives, please get in touch here or via the button below.

Obesity and community care

Obesity a major contributor to ill health increasing risk factors for a range of conditions from heart disease to dementia and costs the UK health service more than £11 billion each year.

UKRI's Innovate UK is interested in hearing from you, on shaping new and innovative community-based care pathways to improve access to weight management services, including but not limited to the following roles:

- Digital providers, companies of any size, including SMEs and social enterprises, or public sector organisations providing weight management services
- Human-centred design experts or system integrators
- NHS funders (ICBs, health boards etc.) interested in piloting community-based models of weight management care
- Charities or voluntary groups with specific focus on obesity or obesity-related health conditions

To sign up for the upcoming sandpit event on 10 April or to find out more about getting involved see here.

Intergenerational approaches around the world

Intergenerational England (IE), in partnership with the Connecting Generations programme at the University of Southampton, are bringing together examples of intergenerational practices, policies and approaches from around the world to develop a Global Intergenerational Evidence Bank.

IE aim to build on its evidence base of how intergenerational interventions support people across generations, as well as develop evidence on specific approaches to public policies and programmes that can make a difference across a place or population.

You can contribute to the Global Intergenerational Evidence Bank, by submitting examples of intergenerational practice, policies or programmes here.

MORE HERE

The Friday three newsletter is generally sent out once a fortnight.

To keep up-to-date with ILC events throughout the year, please continue to check our website on a regular basis.

Please follow us on social media via the links below for our latest news and event updates. Help support these events and our independent analysis. Donate to ILC here.

Copyright © 2025 International Longevity Centre UK
The Foundry
17 Oval Way
London, SE11 5RR
United Kingdom
ILC-UK is a registered charity (no. 1080496) incorporated with limited liability in England and Wales (company no. 3798902).

Please click here to unsubscribe or update your preferences.