**附件1领域说明**

**Aims and Objectives**

The overall aim of this Programme is to enhance the evidence base on understanding and addressing health and social challenges facing ageing societies through interdisciplinary collaborations. UKRI and NSFC co-facilitated a workshop in late June 2019 at Peking University in preparation for this call. The workshop confirmed that Healthy Ageing is a major research challenge in the UK and China and that it is essential to harness inputs from disciplines both within and across the social and biomedical sciences.

* + Programme Objectives
* To commission joint UK-China research projects on understanding and/or addressing key health and social challenges facing ageing societies that take particular consideration of inequalities
* To encourage and support the development of innovative collaborations between social science researchers and biomedical scientists
* To take advantage of research strengths in the UK and China to make advances that would not be possible with researchers from the two nations working separately

And in doing so:

* Make novel contributions to the evidence base on healthy ageing
* Provide evidence for key stakeholders in policy and practice in the UK and China
* Create new and enhance existing interdisciplinary collaborations and partnerships
* Enhance capacity through the sharing of infrastructure and data, and opportunities for early career researchers.

**Innovative Approaches to Interdisciplinary Research**

A key objective of the Programme is to encourage the development of innovative interdisciplinary research groups and methods. The funders definition for interdisciplinary for this call, is the meaningful collaboration between social scientists and biomedical scientists.

All proposals must be from genuinely interdisciplinary teams, including both social and bio-medical science disciplines that contribute intellectually to the proposal. Different disciplines should be involved in the conceptualisation of the projects as well as carrying out the research. It is important that collaborations are meaningful, for example, if a discipline appears to have been added as a ‘bolt on’ to fulfil interdisciplinary requirements and is not integrated in any meaningful way, this would not be acceptable. Applicants are required to consider this carefully when assembling project teams, and the funders will consider this in the final assessment of proposals.

**Exemplars of the Social and Bio-medical Sciences working together to Understand and Address Health and Social Challenges**

Discussions with academics at NSFC-ESRC workshop generated the following examples of research areas where social and biomedical scientists can meaningfully work together to better understand and address health and social challenges for an ageing society. This list of exemplars is not exhaustive and we would welcome proposals outside of these areas.

* Ensuring adequate nutrition and physical activity with age *(e.g., how best to encourage individuals to engage in healthy lifestyle choices)*
* Creating and adapting age friendly environments *(e.g., accessible public and private buildings, transport links, outdoor spaces)*
* Prevention and treatment of age-related conditions *(e.g., dementia, osteoporosis, hearing loss, ability to undertake activities of daily living)*
* Ageing well with long term conditions and multimorbidities*(e.g., cognitive disabilities, transplant survivors, diabetes, the ‘oldest old’)*
* Sustaining intergenerational relationships with demographic changes *(e.g., adult offspring returning to live at home later on in life, left behind older people in rural areas)*
* Nurturing social and community engagement for older adults*(e.g., building and maintaining social networks through age friendly services)*
* Maintaining work, employment and economic security with age *(e.g., the physical ability to perform well at work, the benefits to an individual’s wellbeing of being employed)*
* Access to high quality service provision for older adults *(e.g., access to responsive and quality health and social care, understanding to what extent is there a need for an increase in the supply of services)*
* Age and disability friendly housing including physical and living arrangements *(e.g., affordable and accessible housing for older people, changing structure of household living arrangements and the implications on elderly care)*

**Ways of Interdisciplinary working**

Below are exemplars of ways to bridge conventional disciplinary boundaries to better understand and address health and social challenges faced by ageing societies include. This list of exemplars is not exhaustive and we would welcome proposals outside of these areas.

* Interdisciplinary collaboration to analyse existing data sources. Research on ageing and older people generates a wide variety of data, ranging from essentially qualitative assessments, through epidemiological and clinical measurement, to molecular measurements of biological markers. There is a growing need for research methods that can integrate data from diverse measures, which draw on many dimensions of individuals’ or groups’ social, cultural and biological background. There are a significant number of large data sets on ageing in the UK and China (e.g., ELSA and CHARLS) that would benefit from analysis from an interdisciplinary perspective.
* Interdisciplinary research on methods for integrating qualitative and quantitative studies on ageing has the potential to deliver significant added value from existing data sets, and to help foster a research culture in which these kinds of interdisciplinary topics can be more effectively addressed.
* Approaches for interdisciplinary knowledge exchange should consider theoretical and methodological challenges and opportunities: i) design for multiple end users; (ii) be explicit about why a particular approach to knowledge exchange is expected to deliver its outcomes; (iii) evaluate diverse outcomes; (iv) use evaluations as part of the process of delivering knowledge exchange; and (v) use mixed methods to evaluate knowledge exchange.

**Inequalities and other cross-cutting issues**

Inequality in later life is a major issue facing societies, as inequalities can influence health and social challenges (such as obesity, loneliness and mental health conditions). A focus on inequalities in this call is crucial to ensuring that no one is left behind. An enhanced understanding of how the intricacies of identities and inequalities across the life course (*e.g.*, gender, education, disability and living environment) impact peoples’ experiences of ageing, and play a role in producing or ameliorating inequalities across the life-course, could provide key insights into tackling inequality in later life. Discussions at our recent workshop confirmed the importance of a focus on inequalities in this call. For example, the widening gap in health and income inequality between the urban and rural. In addition, the workshop highlighted the need for applicants to consider literacy (health, financial, technology) and technology access.

**UK and China strengths**

Therecent NSFC-ESRC workshop identified a number of strengths that the UK and China can offer, respectively and jointly, in understanding and addressing the health and social challenges faced by ageing societies. Examples include:

* Expertise in China; local surveys, innovative pilot studies, fast technology development
* Expertise in UK; research ethics, end of life care, data resources
* Shared UK-China expertise in; cohort studies, cross-national comparative learning, reform of healthcare systems

We encourage all applicants to make the most of strengths across the two nations. Researchers in the UK may have expertise relevant to China’s challenges; researchers in China may have expertise relevant to the UK’s challenges; and the bringing together of mutual expertise across the UK and China may enable advances not possible when the nations work independently. We expect to fund a portfolio of awards that have benefits for both the UK and China, although benefits from each individual award need not offer exactly equal benefits to both nations.

When working across the two nations, applicants will need to demonstrate sensitivity to the differences in policy frameworks concerning ageing in the UK and China, for example different approaches to social security and insurance, along with social and cultural differences.