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Feature – Asia-Pacific on Ageing Fast Track : Greater Regional Effort for Knowledge Transfer in Ageing - Policies and Practices

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Madrid International Plan of Action on Ageing (MIPAA) in its 10th year of implementation

Asia-Pacific on Ageing Fast Track : Greater Regional Effort for Knowledge Transfer in Ageing Policies and Practices

The world's population is rapidly ageing, are all countries geared up to withstand the impacts brought by the demographical changes? 2002 marked a historical moment for the ageing world, when the Madrid International Plan of Action on Ageing (hereafter "MIPAA") was adopted by 159 countries worldwide at the Second World Assembly on Ageing held in Spain. Countries pledged their commitments to building a society for all ages by means of institutional arrangement, policies and programmes. The document sets out objectives and priority areas in dealing with the ageing population, which serve as guiding principles to policymakers and service providers. 10 years since MIPAA was adopted in 2002, how much progress have countries made since then? How far are countries from the goals established in 2002? APIAS was commissioned by the United Nations Economic and Social Commission for Asia and Pacific (hereafter "UNESCAP") to conduct a regional analysis of ageing policies and programmes for countries in Asia and Pacific region to feed into the global review of the 2nd cycle of MIPAA implementation.

The ageing Asia-Pacific and the reviewing of MIPAA

Asia is the home of two most populated countries in the world – China and India, the region will age at an unprecedented pace, where the 438-million older persons recorded in 2010 will triple to 1.26 billion by 2050 and becoming the region with the largest number of older persons in the world. Countries in the Asia-Pacific region vary greatly in terms of economic, social, cultural and political developments which further complicate the challenges brought by the demographic change.

In 2002, 159 countries in the world pledged commitments to the Madrid International Plan of Action on Ageing (MIPAA) at the Second World Assembly on Ageing, in response to the opportunities and challenges brought by the population ageing as well as to promote a society for all ages through policies and services. MIPAA provided guidelines for governments to address key ageing issues.

To assess countries' progresses since 2002 and to move forward with MIPAA in the coming 5-year implementation cycle, the second global review and appraisal of MIPAA have begun in different regions and will be concluded in 2013. APIAS was appointed as the regional consultant agency by the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP) to look into countries' institutional arrangement, legislation, policies and services for ageing or older persons.

APIAS collected information on national mechanisms, legislations, policies, programmes and services related to ageing or older persons by means of self-administered questionnaire survey. The questionnaire translated MIPAA into operational items and was distributed to all member states and associate members of UNESCAP. As at January 2012, 24 countries and areas in the region, including Armenia, Australia, Bangladesh, China, Georgia, Hong Kong, Indonesia, Japan, Republic of Korea, Macao, Malaysia, Maldives, Mongolia, Myanmar, New Zealand, Papua New Guinea, Philippines, Russian Federation, Samoa, Sri Lanka, Thailand, Turkey, Uzbekistan and Viet Nam, participated in the exercise. The survey inquired four main areas of work, including (1) institutional arrangement on ageing; and the three priority areas of MIPAA – (2) Older Persons and Development, (3) Advancing Health Into Old Ageing, and

(4) Ensuring Enabling and Supporting Environment for the Older Persons.

National coordination and policy framework

Most surveyed countries have established either a focal agency or a coordinating body as an instrument to mainstream ageing into government action and also to oversee issues concerning ageing or older persons. It ranges from a more permanent government structure at the ministerial level to a single-agency or inter-agency/committee on ageing, or a division or a branch or a function of the implementation department. The wide range of coordinating body in these countries shows the different strategies used to tackle the needs of older persons in specific countries and areas.

Australia and New Zealand have made specific institutional arrangement and set up offices that dedicated to ageing issues or older persons. The Office for Senior Citizens in New Zealand operates on its own budget and the Minister for Senior Citizen is tasked to take the leadership to steer, to direct and to coordinate interdepartmental strategy, manpower and resources in dealing with issues surrounding ageing and older persons. Data shown countries/areas are moving inter-departmental, inter-agency and inter-ministerial approach in its establishment to ensure government respond appropriately and coherently to the challenges of ageing. One-third of surveyed countries/areas, more commonly seen in developing economies, the responsibilities for ageing issues are not clearly ascribed to a coordinating body but being subsided into governmental departments on health, social welfare, labor issues and alike. A number of countries such as Bangladesh, Hong Kong and Indonesia have established councils, committees or commissions that serve as advisory bodies to governmental institution and to coordinate the planning and development of various programmes and services for the older persons.

Legal instruments are essential when coming to the assignment of resources to the issues of ageing in policy formulation and implementation. It is equally important in promoting and protecting the rights of older persons. A majority of respondent countries/areas either have overarching legislation enacted specifically for older persons in the region or have policies or plans on ageing set out.





Older persons and development

The participation of older persons in decision making will ensure the provisions in age-specific policies are designed to and implemented for the needs of older persons. Countries/areas have distinctive measures not only to ensure voices of older persons are heard but also to allow them to actively participate in the process of policy making and/or decision making at different levels. The voices of older persons are infiltrated by means of membership in high-level consultative body to community-level committee that advises policy-making and its implementation and evaluates service provisions. New Zealand government has launched a nation-wide Voluntary Community Coordinators Program which now has 44 coordinators. The coordinators will consult older persons in their local communities and gathering information through their connections and older persons' organizations and feed into the Office of Senior Citizens to provide government agencies with an older persons' perspective in policy development and service evaluation.

MIPAA recognized the importance of having social protection and social security for all people which is a very complicated subject that appears in various forms and means – to name a few, such as pension, health insurance, disability insurance, minimum income for older persons with no other means of support – but serving the same purpose. Pensions are important source of income in old age. The pension system in developed economies tended to be more developed, of wider coverage. Universal coverage retirement protection for older persons, meaning a flat-rate benefit to all retirees (provided that they meet the criteria on age and the length of required residency) is only available in a few countries/areas in the region.

Social protection and social security system in many countries and areas in the Asia-Pacific region, especially the developing ones, have a rather short period of development, leaving a majority of workers either enter old age without a pension or work outside the formal economy. Efforts were being made in most countries and areas to ensure a social floor for everyone, ensuring a basic income regardless if he/she has continued to a scheme in his/her working years except Myanmar. Albeit being comprehensively developed, the pension systems in developed economies such as Japan, New Zealand and Australia, have been recently reformed to keep up with the increasing number of aged population with ever-changing needs so as to stay strong against the criteria suggested by the World Bank: (1) Adequacy; (2) Affordability; (3) Sustainability; and (4) Robustness. A few

countries and areas in the region provide long-term care insurance to citizens. However, it should be noted that each country has their distinctive social protection or social security systems which might be highly dependent on their socio-economic and cultural circumstances.

In the area of increasing elderly employment opportunities, unlike other countries and areas which mainly provide training programmes or modify the laws of retirement age, Korea, Philippines, Vietnam, and Macao are exceptional in a way that they provide substantial support to help older persons to continue working or to run their own businesses.

Advancing health and wellbeing into old age

Healthcare costs most money in ageing societies. Only a part of the responding governments have provided medical subsidies to cover public health services, and only Japan and South Korea have provisions for long-term care to their citizens. The countries and areas either adopt a universal health care scheme that every citizen including elderly can be fully or partially subsidized by their government, or they utilize preferential arrangements that free health care services can be offered to the older adults who have met the age and other requirements. For instance, Macao has set the age requirement at 65. Although most countries and areas in the Asia-Pacific region cannot yet follow their more developed counterparts such as Australia, Japan, South Korea and New Zealand which have a well-established health care system to deliver a continuum of services at various levels for the elderly, countries like China and Indonesia have shown efforts in promoting primary care and ensuring access to services.

In the area of geriatric and gerontologist training for health care providers, most surveyed countries/areas are prone to have either tertiary education institutes to provide diploma-/degree-level courses – a more theoretical-based and academic approach – or have local units to provide tailor-made in-house service training, as characterized by short-term, skill-based, goal-orientated approach). Countries like China, New Zealand and Australia operate geriatric and gerontology using a life-long learning approach under the vocational training category. Competency is clearly articulated into qualification framework with built-in career ladder. This is explicated in Australia's Aged Care Workforce Fund that provides a continuum of basic to advanced level of training and education which encourage people to enter the elder care workforce at different levels with well-defined job description.

In the promotion of self-care in older persons and involving of older persons in the development of social and health care programmes, most surveyed countries/areas recognized the importance of promoting self-care in older persons and have relevant initiatives in place. New Zealand has pioneered a seamless care service model (an integrated service delivery model) to support older people to live at home. To promote rehabilitation in home environment, the government is collaborating with community therapy service provider and specialist geriatric medical care professionals to supply education and training to the patients, care-giver and family members. Australian government, under the National Health Reform Agreement, has seen putting much effort into strengthening consumer engagement and their voice in health care services. Legions of work have been done in building health literacy, fostering community participation, and empowering consumers especially to make fully informed decisions on choice of aged care services. All these actions are seldom viewed in other countries.

Ensuring enabling and supportive environments

The concept of "ageing in place" is the core concept that encourages governments to introduce measures to enable older persons to continue living in their own homes. Only a few surveyed countries or areas have specific policies to enable older person to remain in their own homes such as Hong Kong, Thailand, New Zealand and Macao. One-third of them were however seen investing great effort into the provision of homes for the older persons, from public housing to residential homes. In Korea, Philippines and Japan, laws and regulations were passed to govern the supply of housing units for the older persons. Developing countries such as Armenia and Uzbekistan with economies still in transition, rapid demographic ageing is taking place in a context of continuing urbanization where a large number of persons are ageing in isolation in rural areas, being left alone, without adequate transportation and support systems.

The provisions of affordable and accessible transportation to older persons were seen in 18 surveyed countries/areas by means of concessionary/free fare or/and priorities seats on public transports to older persons. Australia and New Zealand offers travel concession or free discounts to older persons through an income-tested membership. The membership includes an array of business discounts on top of transportation, which removes the financial barrier of using public transport and facilities where older persons access to essential services and encourages participation in recreational and leisure activities. Legal enforcements were found in Korea, Japan, Philippines, Thailand, Vietnam, Sri Lanka and Japan to guide and to ensure barrier-free and easy access facilities to old persons.

Well-coordinated formal and informal care with well-trained caregivers ensures a continuum of care and services for older persons. Measures to develop training programmes for formal and informal caregivers were found in most surveyed countries/areas. Evidence shows trainings were mostly carried down by specialized institutions or universities targeting formal caregiver, whilst little effort was found on training up informal caregivers. Concerning accreditation system for care training, only China and Hong Kong have such establishment. Neither accreditation systems allow portability of qualified local trainees to work in other Asia-



Pacific countries or areas. Philippines have developed a similar model enforced via educational bureaucracy.

MIPAA recognizes the risk of potential neglect, abuse or violence and calls for action to eliminate all forms of elder abuse by creating support services to address the problem. It is noted that demographic and economic challenges in Asia-Pacific region give rise to abuse, which usually happens within the family against older women. Only a few surveyed countries/areas have specific legislations to protect older persons against any form of abuse. Efforts to address the problem in form of public education, training for frontline professionals and non-professionals, research, provision of counseling service, shelter and financial assistance to victims were seen in Hong Kong, Korea, Samoa, Macao, Russia, Indonesia, New Zealand and Australia.

Towards society for all ages through regional cooperation

It is assuring to learn that most countries and areas in the Asia-Pacific region have paid close attention to the ageing situation and have taken initiatives and measures of various magnitudes to tackle the emerging challenges. Yet, as a non-binding document, MIPAA lacks an independent monitoring and accountability mechanism to ensure systematic review of implementation. This might be one of the factors explaining the slow progress in relation to some areas, the disparity of issues prioritized and outcomes achieved from country to country, area to area.

10 years have passed since the MIPAA was adopted. Greater and concerted efforts are needed for all policymakers to foster a society for all ages, considered the ageing features peculiar to the region, where countries age at wide range of pace. Japan, Australia and New Zealand have entered a super-aged era and they are more experienced in tackling demographical changes through legislation, administration, policy and service. By transferring relevant knowledge, experience and know-hows to countries and areas, which are or will be experiencing the demographic changes, they can opt for more effective, efficient and flexible solutions to population ageing.

APIAS hoped that the research findings and analyses can be of help as a reference to the countries and areas participating in the Asia-Pacific Intergovernmental Meeting on the Second Regional Review and Appraisal of the Madrid International Plan of Action on Ageing in 2012. The experiences concluded in the reviews may contribute to the drawing up of more effective policies and programmes on ageing and thus provide older persons a better world to live in.