
Economic and Social Commission for Asia and the Pacific

Asia-Pacific Intergovernmental Meeting on the Fourth Review and Appraisal of the Madrid International Plan of Action on Ageing

Bangkok and online, 29 June–1 July 2022

Items 2 and 3 of the provisional agenda*

Review of progress and challenges in accelerating the implementation of the Madrid International Plan of Action on Ageing, 2002, in Asia and the Pacific

Consideration of key regional issues within the framework of the Madrid Plan of Action, together with emerging issues

Implementation of the Madrid International Plan of Action on Ageing, 2002, in Asia and the Pacific: a summary of the results of voluntary national surveys reported by member States**

Summary

The present information document presents a summary of voluntary national surveys on the implementation of the Madrid International Plan of Action on Ageing, 2002, by member States of the Economic and Social Commission for Asia and the Pacific (ESCAP). As of May 2022, 20 ESCAP member States had responded to the survey which focused on the three priority directions of the Madrid Plan of Action, namely (1) older persons and development; (2) advancing health and well-being into old age; and (3) ensuring enabling and supportive environments. In addition, the survey also covered legislation, coordination of policies, involvement of non-government stakeholders in policymaking, data, the effects of the coronavirus disease (COVID-19), digitalization and climate change. The document highlights achievements, challenges, good practices, and a way forward in implementing the Madrid Plan of Action in Asia and the Pacific. It is intended to inform deliberations during the Asia-Pacific Intergovernmental Meeting on the Fourth Review and Appraisal of the Madrid International Plan of Action on Ageing to be held in Bangkok and online from 29 June to 1 July 2022.

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I. Introduction

1. The Madrid International Plan of Action on Ageing, 2002, recommended systematic reviews of its implementation for achieving improved quality of life for older persons.¹ Thus, reviews and appraisals should be an integral part of implementing the Madrid Plan of Action.

2. Economic and Social Council resolution 2020/8 invited Member States to “identify actions they have taken since the third review and appraisal, with the aim of presenting this information to the regional commissions during 2022 and invites each Member States to decide for itself the actions or activities it intends to review; utilizing a bottom-up participatory approach.”²

3. The Council also invited Member States to consider collecting and utilizing a combination of quantitative and participatory qualitative data gathering and analysis and requested the regional commissions to continue to facilitate the review and appraisal exercise at the regional level.

4. In accordance with the Council resolution, regional commissions of the United Nations are reviewing the implementation of the Madrid Plan of Action in their respective regions for the fourth time in 2022. These regional reviews build on national reviews undertaken in 2021; together, the regional and national reviews will inform the global review to be carried out at the sixty-first session of the Commission for Social Development, to be held in 2023.

5. In this context, the Economic and Social Commission for Asia and the Pacific (ESCAP) drafted a voluntary national survey on the implementation of the Madrid Plan of Action in Asia and the Pacific in order to assist member States with their national assessments. The draft survey was first reviewed by members of the regional United Nations network of focal points on ageing³ and then presented to national focal points on ageing at a virtual consultation in May 2021.⁴ Representatives of 17 countries from Asia and the Pacific participated and provided comments on the draft survey. The survey was then finalized and issued in hard copy and online in June 2021.

6. By May 2022, the following 20 ESCAP member States had submitted their responses: Armenia; Australia; Azerbaijan; Bangladesh; Bhutan; Cambodia; India; Japan; Kazakhstan; Kyrgyzstan; Macao, China; Malaysia; Maldives; Mongolia; Philippines; Republic of Korea; Russian Federation; Singapore; Tajikistan; Türkiye (table 1). Of these 20 countries, ESCAP used the surveys submitted to the Economic Commission for Europe (ECE) by four

¹ Report of the Second World Assembly on Ageing, Madrid, 8-12 April 2002 (United Nations publication, Sales No. E.02.IV.4), chap. I, resolution 1, annex II, paras. 131 and 132.

² E/RES/2020/8.

³ The informal regional network of focal points on ageing is a networking group of the Asia-Pacific Regional Consultative Platform and is led by ESCAP.

⁴ For more information on the consultation, see: www.unescap.org/events/2021/first-informal-consultation-escap-member-states-asia-pacific-fourth-review-and-0.

countries.⁵ Together, these 20 countries represent about 45 per cent of the population 60 years or over in the Asia and Pacific region.

Table 1
Countries that submitted voluntary national survey on the implementation of Madrid Plan of Action by May 2022

<i>East and North-East Asia</i>	<i>North and Central Asia</i>	<i>South and South-West Asia</i>	<i>South-East Asia</i>	<i>Pacific</i>
Japan	Armenia*	Bangladesh	Cambodia	Australia
Mongolia	Azerbaijan*	Bhutan	Malaysia	
Republic of Korea	Kazakhstan**	India	Philippines	
Macao, China	Russian Federation*	Maldives	Singapore	
	Tajikistan*	Türkiye**		

Note: countries marked with * only submitted a survey to ECE; countries marked with ** submitted a survey to ECE and ESCAP.

7. The analysis of the responses focuses on the following topics: (a) definitions, mandates, institutional arrangements and data; (b) older persons and development; (c) advancing health and wellbeing into old age; (d) ensuring enabling and supportive environment; and (e) COVID-19.

8. Given that some countries only recently submitted their surveys and other surveys remain forthcoming, the presentation is not exhaustive and fully representative of the region, and the content of the present document will be updated and revised after the intergovernmental meeting in June/July 2022 as more surveys become available. For the full list of voluntary surveys, please see: www.population-trends-asiapacific.org/mipaa.

II. Summary of voluntary national survey findings

A. Definitions, mandates, institutional arrangements and data

9. Currently, 630 million older persons reside in Asia and the Pacific, projected to increase to 1.3 billion, or one in four people, by 2050. According to the survey responses, definitions of what constituted “old age” differed by country and by legislative and policy purposes within a country. In Bangladesh, Cambodia, India, Malaysia, and the Philippines, for example, older persons were legally defined as persons 60 years or over, whereas in Kyrgyzstan, it was

⁵ Based on the information provided in the surveys, where available, the following ministries took the lead in completing the surveys: Ministry of Foreign Affairs (Bhutan, Indonesia, Kazakhstan, Mongolia, Pakistan, the Philippines, Türkiye, Vanuatu), Ministry of Justice (Republic of Korea), Ministry of Labour, Employment and Social Security (Nepal), Ministry of Expatriates’ Welfare and Overseas Employment (Bangladesh), Ministry of Labour, Immigration and Population (Myanmar), Ministry of Interior (Tajikistan), Office of the Prime Minister (Tonga) and Ministry of Territorial Administration and Infrastructure (Armenia).

men 63 years or older and women 58 years or older. Bhutan, Maldives and Türkiye generally defined older persons as 65 years or over. Moreover, in some countries, the definition of “older persons” varied depending on the context. In the Republic of Korea, for example, the Act on Prohibition on Age Discrimination in Employment and Older Persons Employment Promotion defined older persons as those aged 55 years or older. For national dementia screening and long-term care insurance schemes, they were defined as those 60 years or over. Türkiye used 60 years or over for admittance to public nursing homes and 55 years or over for admittance to private nursing homes. Japan used 65 years or older for the census, 55 years for implementing the Act of Stabilization of Employment of Elderly persons, and 65 years or older for implementing the Act on Assurance of Medical Care for Elderly People. In Australia, there was no specific age to define an older person, but people 65 years or over were eligible for government-funded aged care services, or 50 years or older if the person identified as an Aboriginal or Torres Strait Islander person. In Azerbaijan, and according to the law that governs eligibility for social service, an older person was defined as 70 years or over.

10. This overview shows that there is no set definition of what constitutes “old age” in Asia and the Pacific. With longer life expectancy, “old age” does not necessarily correspond to a specific life span, and its meaning also changes in different societal settings. These observations, therefore, suggest a more fluid concept of “old age”. Closely related and as documented in the survey responses, some countries have therefore pursued a life-course perspective when addressing matters concerning ageing, such in the context of education, transfer of knowledge and training (see also section II.B.4). They have recognized that population ageing is connected to social structures, and to the opportunities and constraints that social groups experience over their life-courses.

11. Countries in Asia and the Pacific used different legislative instruments to promote and ensure the well-being of older persons and protect their rights. For example, in Malaysia and the Philippines, older persons were recognized in the constitution, guaranteeing equal protection of the law. According to the survey responses, almost all countries had some older persons’ welfare or senior citizens policy or act that calls for the protection of older persons from discrimination and for ensuring the provision of social and financial security, healthy ageing and full participation in society.

12. Gender and disability concerns of older persons were addressed in some of the laws, policies and action plans. For example, in the Philippines, provisions were made to protect female older persons from neglect, abandonment, domestic violence, abuse, exploitation and discrimination, as well as to support disabled older persons by providing accessible and affordable social and welfare services. In Cambodia, the National Action Plan 2018-2020 of the National Ageing Policy 2017–2030 included gender and disability concerns in all nine priority areas of the action plan. The Government of India was implementing a scheme entitled “Rasthriya Vayoshri Yojana”, which was intended to provide physical aids and assisted living devices to senior citizens with disabilities, free of cost. Türkiye’s 2020–2030 Ageing Vision Document addressed gender and disability concerns as they relate to the collection of data and information, long-term care and quality of life, specialized care services and facilities, social support and social assistance, life-long learning and education, economics of ageing and employment of older persons.

13. The Madrid Plan of Action calls for a participatory and bottom-up approach to policymaking. This includes promoting the establishment of older persons' associations (OPAs), the provision of information to OPAs so they can get involved in the policymaking process, to their representation in decision-making processes with equal participation of older women and men.⁶

14. Across countries in the region, older persons and their organizations were included in some form in the policymaking process. Kyrgyzstan, for example, involved OPAs and non-governmental organizations in the drafting of legislation pertaining to the provision of financial, social and social-medical assistance to elderly people and older persons with disabilities. In Bhutan, the Royal Society of Senior Citizens was involved in decision-making processes and monitoring activities concerning policies and programmes affecting older persons at the national level, and older persons were consulted regarding the actual implementation of programmes for older citizens at the community levels. Australia was in the process of drafting the new Aged Care Act, to come into effect in 2023, and planned to involve senior Australians and other stakeholders, including members of a new Council of Elders and the National Aged Care Advisory Council when drafting the new legislation. The Council of Elders was established in 2021 to provide a direct voice on older persons' issues to the Government. In Cambodia, representatives of OPAs were involved in an ad-hoc committee to monitor and evaluate the implementation of the National Ageing Policy (2017–2030).

15. Some countries reported that national governments supported OPAs financially, technically, and in policy terms. As of August 2021, the Government of Malaysia had established 143 activities centres for older persons, where older persons could engage in various activities, including religious and recreational activities, health screening and educational programmes. Australia, and Mongolia financially supported OPAs, and Cambodia and the Maldives provided technical assistance.

16. Establishing and implementing policies on older persons was important, but action plans and monitoring frameworks were equally important to ensure transparency, accountability and overall success in implementation. Across the region, only very few countries reported that monitoring and evaluation mechanisms were in place. In India, Malaysia and Singapore, external non-government partners, including older persons' groups, monitored national policies and action plans for senior citizens. In the Philippines and Kyrgyzstan, indicators were used to monitor and evaluate action plans, while in Singapore, additional surveys and in-depth interviews with older persons were conducted to find out if citizens saw evidence of policies being implemented, remained relevant and met the needs of older persons.

17. Countries reported that lack of age-disaggregated data continued to affect their work. For example, Cambodia expressed concern that lack of data affected the setting up of a social protection system. Türkiye reported on the need for both longitudinal and cross-sectional studies on ageing.

18. Some recent progress had been made to advance data collection. For example, Bangladesh had built a database on older persons who received old age allowances. The Government was advocating for prioritizing data collection on age, sex, and disability in the next census. In Bhutan, the National Statistical Bureau had developed an interactive platform to collect

⁶ United Nations (2002). Report of the Second World Assembly on Ageing, Madrid, 8–12 April 2002. Sales No. E.02.IV.4. New York.

age-disaggregated data on various social, economic and health areas for every district of the country. The Statistics Authority of the Philippines was advocating for collecting age-disaggregated data in censuses, national surveys and other statistical systems. In Australia, the Government expressed commitment to expanding and enhancing ageing-related data collection and research. The Australian Bureau of Statistics collected age-disaggregated data by five or ten-year age groups disaggregated to 105 years and over by individual year, while labour force data were reported up to 85 years and over.

19. A number of countries had also conducted stand-alone national surveys on population ageing and older persons, as summarized in table 2. In addition, there were labour force and household surveys, demographic and health surveys or multiple indicator cluster surveys, but they generally did not present data disaggregated by age for older persons.⁷

Table 2
Countries in Asia and the Pacific that mentioned available national-level data sets on population ageing (as of April 2022)

<i>Country</i>	<i>Name of survey</i>	<i>Latest year</i>
Australia	Survey of Disability, Ageing and Carers (SDAC)	2018
	The Household, Income and Labour Dynamics in Australia (HILDA)	NA
	The Australian Longitudinal Survey on Women's Health (ALSWH)	2021
Bangladesh	Survey on Population Ageing in Bangladesh*	2014
Bhutan	Baseline Survey for the Royal Society for Senior Citizens	2013
Cambodia	Survey of the Elderly in Cambodia*	2004
India	Study on Global Ageing and Adult Health (SAGE)*	2014
	Longitudinal Ageing Study in India (LASI), Wave 1*	2016-2021
	Kerala Ageing Survey 2nd set*	2019
Japan	Longitudinal Survey of Middle-aged and Elderly Persons	NA
	National Survey of the Japanese Elderly (NJSE), and Japanese Ageing and Health Dynamics (JAHEAD)*	2017

⁷ ESCAP (2021). Statistical indicators relevant to population ageing and age-disaggregated data in Asia and the Pacific, SDD Policy Paper 2021/03, available at: www.unescap.org/kp/2021/statistical-indicators-relevant-population-ageing-and-age-disaggregated-data-asia-and.

<i>Country</i>	<i>Name of survey</i>	<i>Latest year</i>
Kazakhstan	Determination of social well-being of elderly citizen	2017
	Generations and Gender in Kazakhstan	2018
	Study of quality of life, social well-being and social conditions of older people in Kazakhstan	2019
	Assessment of the socio-economic situation and needs of the elderly in Kazakhstan	2020
Malaysia	No specific ageing survey, but data available from various surveys, which are National Health and Morbidity Survey, Malaysian Population and Family Survey, and from the census as well as routine data on employment (for employment data of those age group 60-64)	2019
	National Registry System under the e-WEN (pilot project started in 2019)	2019
	Malaysia Ageing and Retirement Survey (MARS)	2018-2019
Maldives	Nationwide Assessment of the situation of elderly population (the survey report is planned to be submitted by February 2022)	NA
Philippines	Longitudinal Study of Ageing and Health in the Philippines	2018
Republic of Korea	National Survey on Senior Citizens	2020
	Statistics of Persons aged 65 or over	2020
	Korean Longitudinal Study of Aging (KLoSA)	2018
Singapore	National Population Health Survey (annually, and older persons 80 years or older are included)	2021
	Panel on Health and Ageing of Singaporean Elderly (PHASE)*	2009–2015

Source: ESCAP 2021/2022, Voluntary national survey on the implementation of the Madrid International Plan of Action on Ageing in Asia and the Pacific; responses collected and posted at: www.population-trends-asiapacific.org/mipaa/voluntary-national-survey-response and ESCAP 2021, Statistical indicators relevant to population ageing and age-disaggregated data in Asia and the Pacific, available at: www.unescap.org/sites/default/d8files/knowledge-products/SDD_policy_paper_2021_03_Stat_indicators_20211124.pdf.

B. Older persons and development

20. The first priority direction of the Madrid Plan of Action calls for older persons to participate fully in social and economic development of a country and to benefit from it. The major areas discussed under this section are: (a) work, employment, education and training; (b) income security, social protection and social security; (c) intergenerational solidarity; (d) rural development, migration and urbanization; (e) humanitarian and disaster relief from emergency situations.

1. Work, employment, education and training

21. Increasing employment opportunities for older persons is particularly relevant for countries with shrinking labour forces. In North and Northeast Asia, the share of older persons already exceeds that of children and youth. Soon, North and Central Asia, the Pacific, South-East Asia and South and South-West Asia will follow.

22. Countries reported that the statutory retirement age ranged from 55 to 65 years, except in Australia where there was no statutory retirement age (table 3). Also, in some countries, retirement ages differed by type of employment. Often the retirement age for women was 2 to 5 years lower than that for men.

Table 3
Statutory retirement age for selected countries in Asia and the Pacific by gender, 2018–2021

<i>Subregion and country</i>	<i>Statutory retirement age</i>	
	<i>Male</i>	<i>Female</i>
East and North-East Asia		
Japan	65	65
Republic of Korea	62	57
Mongolia	62	62
South-East Asia		
Cambodia	60	60
Malaysia	60	60
Philippines	65	65
Singapore	62	62
South and South-West Asia		
Bangladesh*	59+	59+
Bhutan**	56+	56+
India*	60	60
Maldives	65	65
Türkiye	60	58
North and Central Asia		
Armenia***	63	62.5

<i>Subregion and country</i>	<i>Statutory retirement age</i>	
	<i>Male</i>	<i>Female</i>
Azerbaijan	65	63
Kazakhstan	63	60
Kyrgyzstan	63	58
Russian Federation***	63.75	58.75
Tajikistan***	60+	55+
Pacific		
Australia	-	-

Source: ESCAP 2021/2022, Voluntary national survey on the implementation of the Madrid International Plan of Action on Ageing in Asia and the Pacific; responses collected and posted at: www.population-trends-asiapacific.org/mipaa/voluntary-national-survey-response and data from the World Social Protection Database (2020-2022), International Labour Organization (ILO).

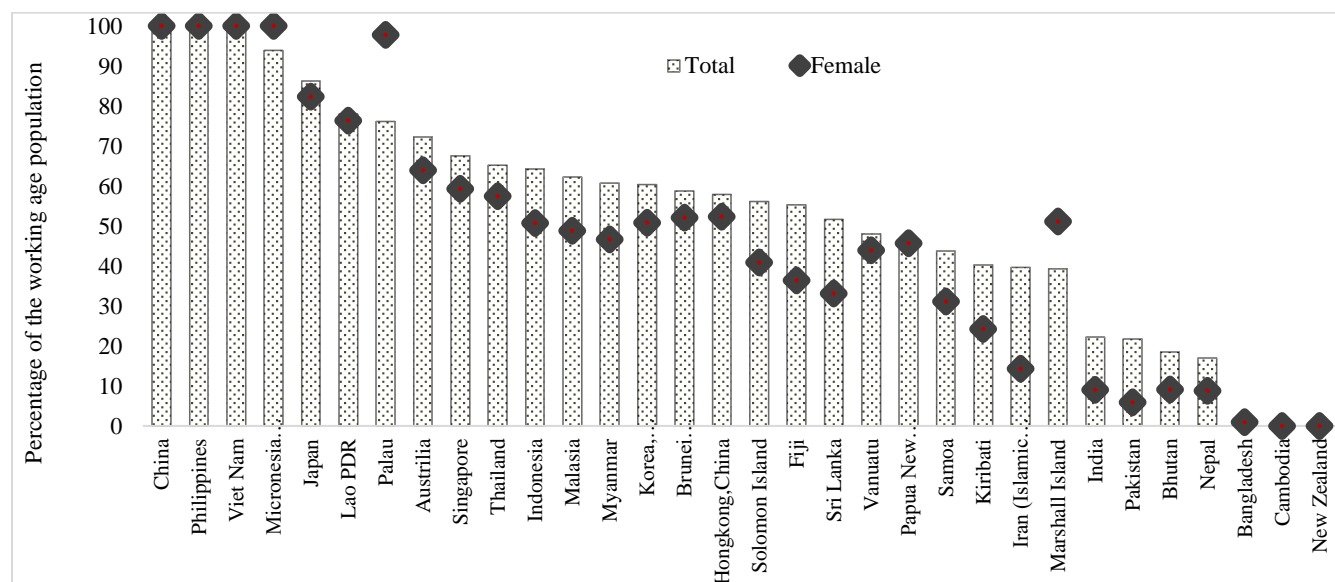
Note: * for government officers; ** for support and supervisory services; ***

23. The Governments of Australia, Cambodia, Japan, the Republic of Korea, Malaysia, Maldives, Mongolia, Türkiye and the Philippines reported significant achievements in re-hiring and re-skilling of older persons and finding employment for them beyond statutory retirement ages. For example, the Government of Japan subsidised companies that employed older persons beyond the statutory retirement age of 65 years. Mongolia had established a Senior Professional Advisory Development Programme that promoted older persons' participation in the labour market and ensured skills recognition. Japan and Türkiye implemented various training programmes for older persons to learn new skills and retain their productivity levels with age. Kazakhstan and the Russian Federation had developed 'silver universities' that offered training in computing, languages, and financial and legal literacy for pre-retirement and post-retirement older persons. In Australia, the Vocational Education and Training system supported people, including older persons, to up- or re-skill. In the Republic of Korea, senior community centres offered courses in digital literacy for their elderly. Through the Digital Spring Project, Türkiye was strengthening digital literacy among its older population living in long-term care institutions. Some countries had developed online platforms to share information with older persons, such as the “My Aged Care” platform in Australia which provided information about better, fairer and sustainable care for older citizens.

2. Income security, social protection and social security

24. Although most countries reported having some form of pension system in place, coverage of the population through contributory pensions often remained low and benefit levels varied (figure I). In many low-income countries of the region, the low coverage of the contributory pension scheme was connected to the high incidence of informal employment which left workers, particularly women, vulnerable to income insecurity and old-age poverty.

Figure I
Social protection legal coverage of contributory pensions, percentage of the working-age population (15–64 years), 2020 or the latest available year



Source: ESCAP compilation from International Labour Organization, World Social Protection Database, accessed in May 2022

25. Contributory pension schemes are labour-based, and since women's wage employment remains lower than for men in the region, legal coverage for women is significantly less than for the entire population.⁸ The gender wage gap between women and men also lowers their pensions.⁹

26. An overview of social pension schemes available in the region, and as reported in the survey, is provided in table 4.

Table 4
Social pension programme/scheme in Asia and the Pacific region, latest available data

Subregion and Country	Scheme	Eligibility	Amount	Number of beneficiaries	
				Total	Year
East and North-East Asia					
Japan	NA	NA	NA	NA	NA
Mongolia	Social welfare Pension	Means-tested	MNT 188,000 (USD 62.2) / month	3,595	2018
				3,595	2019
				3,855	2020
Republic of Korea	Basic Old age Pension	Means-tested	KRW 100,000 (USD 87) / month	4,640,000	2018

⁸ ILO. 2012. Global Employment Trends for Women 2012 (Geneva)

⁹ ILO. 2014. Global Wage Report 2014/15: Wages and income inequality (Geneva).

<i>Subregion and Country</i>	<i>Scheme</i>	<i>Eligibility</i>	<i>Amount</i>	<i>Number of beneficiaries</i>	
				<i>Total</i>	<i>Year</i>
South-East Asia					
Cambodia	NA	NA	NA	NA	NA
Malaysia	Elderly Assistance Scheme	Means-tested	MYR 500 (USD 120) / month	120, 496	2018
Philippines	Social Pension for Indigent Senior Citizens	Means-tested	PHP 500 (USD 10)/month	3,266,029 3,835,066	2020 2021
Singapore	Silver Support Scheme	Means-tested	SGD 180-900 (USD 135-675)/quarter	1 in 3 Singaporean aged 65+ ¹⁰	2021
South and South-West Asia					
Bangladesh	Old Age Allowance	Means-tested	BDT 500 (USD 6) / month	3,150,000	2018
Bhutan	NA	NA	NA	NA	NA
India	Old Age Pension Scheme	Means-tested	IDR 200 (USD 3) / month	20, 595, 274	2018
Maldives	Old Age Basic Pension	Pensions-tested	MVR 5,000 (USD 325) / month	16, 172	2018
Türkiye	Old Age Pension	Means-tested	TRY 126 (USD 43)	797,426	2021
North and Central Asia					
Armenia	NA	NA	NA	NA	NA
Azerbaijan	Social Allowance	Pensions-tested	AZN 240 (USD 141)/month	1,228,800	2021
Kazakhstan	State Basic Pension	Pensions-tested	KZT 11, 182 (USD 40) / month	1,964, 500	2018
Kyrgyzstan	Old-Age Social Assistance Allowance	Pensions-tested	KGS 1000-7000 (USD 15-105) / month	1,576	2021
Russian Federation	NA	NA	NA	NA	NA
Tajikistan	NA	NA	NA	NA	NA

¹⁰ In 2021, the Singapore's resident population above 65 years old was 639,000. Therefore, one in three is about 213, 000. www.msf.gov.sg/research-and-data/Research-and-Statistics/Pages/Singapore-Demographic-Resident-Population-Above-65.aspx.

<i>Subregion and Country</i>	<i>Scheme</i>	<i>Eligibility</i>	<i>Amount</i>	<i>Number of beneficiaries</i>	
				<i>Total</i>	<i>Year</i>
The Pacific					
Australia	Age Pension	Means-tested	Maximum fortnight rate for each member of the couple; AUD 729.30 (USD 540), for single; AUD 967.50 (USD 716)/fortnight	2.6 million	2021

Source: ESCAP 2021/2022, Voluntary national survey on the implementation of the Madrid International Plan of Action on Ageing in Asia and the Pacific; responses collected and posted at: www.population-trends-asiapacific.org/mipaa/voluntary-national-survey-response

27. Workers in the informal sector were often unable to participate in contributory pension schemes, so they had to rely on non-contributory pensions, such as universal social pensions, if they existed. Some countries had addressed the lack of pension coverage of workers in informal employment either through promoting formalization or ways to cover the informal sector with pensions. In Azerbaijan, for example, the Action Plan to Prevent Informal Employment included activities to legalize informal employment, strengthen administrative controls, and raise public awareness. In Australia, the informal sector was covered by superannuation pension plans with some exceptions. In India, the Provident Fund under the National Pension Scheme provided limited financial assistance to employees earning up to a certain amount. In addition, it provided special assistance under the Widow Pension Scheme and under the Disability Pension. In countries with social pensions, informal sector workers receive a social pension. Some other countries provide a means-tested minimum pension for poor older persons.

3. Intergenerational solidarity

28. Some Governments reported on fostering work and volunteering of younger and older persons in intergenerational settings. For example, according to the 2019–2025 Action Plan to Improve the Quality of Life of Older People in Kyrgyzstan, the Government had implemented a mentoring programme in companies and institutions to foster learning between older and younger persons. In Malaysia, the Government had set up Time Bank Volunteering Schemes for those who provided services to older persons. This scheme allocated time credits for the hours that participants spent providing services to older persons which could later be redeemed for goods and services traded through the time bank or provided through participating vendors. In Kazakhstan, the Ministry of Information and Social Development developed a Road Map for the Development of Volunteering for 2021–2023, which included the implementation of the Silver Volunteering project to involve older and younger persons collaborating in volunteering activities.

4. Rural development, migration and urbanization

29. Older persons in rural areas throughout the region have been particularly affected by poverty. Several countries responded to this challenge by implementing poverty-reduction programmes and other support mechanism. In the Philippines, for example, a Special Area for Agricultural

Development Programme aimed at increasing food production and the establishment of community enterprises in rural areas for the benefit of older persons. India had developed mobile medical units that provided medical care to older persons in remote areas.

5. Humanitarian and disaster relief from emergency situations

30. In emergencies and crises, older persons are among the most vulnerable, due to pre-existing health conditions, mobility issues and overall lack of social protection. However, older persons' needs are often overlooked in humanitarian crisis and even after disasters. In the survey, a few countries described measures to help older persons cope with emergency situations.

31. Australia, Bangladesh, Cambodia, India, Japan, Mongolia and the Philippines, for example, had included older persons in their national disaster management and humanitarian relief plans. A few countries had recognized the contribution of older persons to the reconstruction of communities following emergencies. For example, in India, the Guidelines of the National Disaster Management Authority guided local authorities in the mitigation of disaster in an approach based on community participation. Moreover, in coordinating and monitoring of disaster management plans, the role of older persons and locally respected elders was highlighted.

32. Only a few countries had recognized the contribution of older persons in climate change mitigation and adaptation. For example, in Mongolia, older persons participated in activities of different government entities at the national and subnational levels to counter climate change, such as tree-planting drives. The Council on the Aging Australia (COTA) had issued a position statement on climate change and advocated for participation of older Australians in policy and programme development concerning climate change. Macao, China had introduced the "Green Points Rewards Schemes" to raise awareness of environmental protection among residents. Collection points for recyclable waste material were set up in different places, including in elderly-oriented service institutions for the convenience of older persons.

C. Advancing health and well-being into old age

33. The second priority direction of the Madrid Plan of Action calls for full access for older persons to health care and services. It encourages the development of policies and programmes dedicated to preventing disease, promoting healthy living, providing rehabilitative and assistive care, and advancing mental and long-term care services. With advancements in medicine and improved living standards, life expectancy at birth in all countries in the region has increased. However, longer life does not always mean healthier life in old age. As people age, their health needs become increasingly complex and require specific responses. The major areas discussed under this section are: (a) universal and equal access to health care services; (b) long-term care, geriatric services and support to older persons with disabilities; and (c) mental health services.

1. Universal and equal access to health care services

34. During the last decade, much progress has been made in the region regarding universal health coverage. However, in some countries, coverage is still below the regional and global average (table 5).

Table 5
Universal health coverage index (SDG 3.8.1), 2019

<i>Region/subregion/country/ territory or area</i>	<i>UHC Service Coverage Index (SDG 3.8.1), per cent</i>	<i>Region/subregion/country/ter ritory or area</i>	<i>UHC Service Coverage Index (SDG 3.8.1), per cent</i>
Asia and the Pacific	70.4		
East and North-East Asia		North and Central Asia	
China	82	Armenia	69
Democratic Republic of Korea	68	Azerbaijan	65
Hong Kong, China	NA	Georgia	65
Japan	85	Kazakhstan	76
Macao, China	NA	Kyrgyzstan	70
Mongolia	63	Russian Federation	75
Republic of Korea	87	Tajikistan	66
South-East Asia		Turkmenistan	73
Brunei Darussalam	77	Uzbekistan	71
Cambodia	61	The Pacific	
Indonesia	59	American Samoa	NA
Lao People's Democratic Republic	50	Australia	87
Malaysia	76	Cook Islands	54
Myanmar	61	Fiji	61
Philippines	55	French Polynesia	NA
Singapore	86	Guam	NA
Thailand	83	Kiribati	51
Timor-Leste	53	Marshall Islands	62
Viet Nam	70	Micronesia	48
South Asia		Nauru	54
Afghanistan	37	New Caledonia	NA
Bangladesh	51	New Zealand	86
Bhutan	62	Northern Mariana Islands	NA
India	61	Palau	59
Iran	77	Papua New Guinea	33
Maldives	69	Samoa	53
Nepal	53	Solomon Islands	50
Pakistan	45	Tonga	56
Sri Lanka	67	Tuvalu	52
Türkiye	79	Vanuatu	52

Source: World Health Organization (WHO) (2022), available at: www.who.int/data/gho/data/indicators/indicator-details/GHO/sdg-3-8-1-primary-data-availability-for-uhc-service-coverage-index.

Note: The universal health coverage index is defined as the average coverage of essential health services.

35. As part of ensuring provision of affordable health care to older persons, some countries subsidized health care expenditures. In the Republic of Korea, for example, older persons (65 years or over) paid a smaller deductible when they visited hospitals or pharmacies as a result of the Outpatient Fixed Cost-Sharing Policy for Senior Citizens. In Kyrgyzstan, pensioners aged 70 years or over were entitled to free hospital admissions, free emergency dental care, and medication reimbursement ranging from 50 to 90 per cent of the costs, depending on the insurance plan. In Australia, several concession cards had been developed to assist older Australians with lesser incomes to get access to health care services and medicines at lower costs.

36. In Malaysia, the Senior Citizens Caring Programme Unit provided transportation services for older persons who did not have access to health care facilities or lacked the resources to pay for transportation. Furthermore, the Financial Assistance for Artificial Aids and Assistive Devices was established to provide assistive devices to older persons.

37. Many countries reported using digital technology in health care. For instance, the Republic of Korea developed a research project on care robots. Türkiye launched several health care systems based on ICTs to increase the availability, accessibility, and control of health care services for citizens. Australia introduced initiatives to increase digital health adoption, including workforce training, incentives for providers, and support for telehealth, recording of patient information and electronic prescriptions.

2. Long term care and geriatric services and support to older persons with disabilities

38. Long-term care enables older persons to receive the care and support they need in order to live a life consistent with their rights, freedoms, and dignity. It contains a variety of measures, including support for daily living activities at home, in community-assisted accommodation facilities and nursing homes. In Asia and the Pacific, most long-term care is provided at home by unpaid family members and friends, and many of the caregivers are women. Due to changing family and labour market patterns and a shift in cultural norms around care for parents, there is a widening gap between supply and demand in aged care throughout the region.¹¹

39. Some countries noted that they had implemented measures to increase the supply and the quality of long-term care services for older persons. In Australia, aged care systems offered three main categories of long-term care: in-home care (care in the home); residential care in aged care (nursing) homes; and short-term care such as respite care. In Türkiye, long-term care services included nursing homes, aged care and rehabilitation centres and elderly homes, which represented a community-based care model.

40. Several countries had strengthened long-term care services by integrating health and social care services. In Australia, a series of interventions to address problems at the interface between the health and aged care systems had been fully budgeted. Japan was building a system that integrated home medical and long-term care at the level of municipalities.

¹¹ Ibid.

41. Financing is a fundamental component of any long-term care system. It is key to defining who will be covered, what services are offered, and what people must pay out of pocket.¹² Some countries reported that their health insurance schemes covered long-term care costs. For example, the Japanese Long-term Care Insurance system, which was launched as a mandatory programme in 2000, provided benefits to older persons aged 65 years or over. In Singapore, the Government had introduced CareShield Life, a new compulsory long-term care scheme that would help families fund the care for their parents.

42. The Madrid Plan of Action calls on Governments to promote and support the full participation of older persons with disabilities in society. Survey results showed that only a few countries had universal plans and programmes on persons with disabilities. Some Governments were providing rehabilitation services and assistive technology to older persons with disabilities.

3. Mental health services

43. Globally, over 20 per cent of older persons 60 years or over suffer from a mental or neurological disorder.¹³ Among older persons these types of disorders generally refer to dementia and depression, which affect approximately 5 and 7 per cent of the world's older population, respectively. People with mental illness are often under- or mis-diagnosed, and the stigma associated with this condition causes people to be reluctant to seek help.

44. According to the survey responses, mental health issues of older persons had become a national priority in only a few countries. In the Republic of Korea, an integrated national system for dementia care was being developed, closely aligned with other health care systems. Additionally, all cities and districts across the country introduced Community Dementia Reassurance Centres where residents and dementia patients could receive diagnostic services and consultations, as well as take part in activities to train their cognitive abilities. In Australia, the National Dementia Support Programme provided psychological support for people living with dementia, and it also offered programmes for caregivers.

C. Ensuring enabling and supportive environments

45. Enabling and supportive environments are essential to ensuring that older persons live in dignity, security and safety. They encompass framework conditions such as participatory, transparent and accountable political systems, recognition of the universal, indivisible, interdependent and interrelated nature of human rights, as well as accessible and safe housing and living environments and care and support for caregivers, to name a few.

46. Low fertility and increased mobility in Asia-Pacific ageing societies are reducing both the willingness and the ability of adult caregivers to care for ageing parents and relatives. The lack of social protection and increasing inequality are increasing the risk of leaving older persons behind. Creating a more age-friendly environment means ensuring the inclusion of older persons in society as well as taking appropriate measures to prevent any abuse,

¹² Wyse & Walker, 2021, www.adb.org/sites/default/files/publication/691511/adb-brief-177-financing-long-term-care-asia-pacific.pdf.

¹³ WHO (2017), available at: www.who.int/news-room/fact-sheets/detail/mental-health-of-older-adults.

violence, or discrimination against them. The major areas discussed under this section are: (a) housing and the living environment; (b) care and support to caregivers; (c) neglect, abuse and violence; and (d) public recognition and images of ageing.

1. Housing and the living environment

47. Some countries reported that they had specific programmes through which they provided affordable housing to older persons, often to specific groups of older persons, such as those without families or experiencing financial hardship. For example, Türkiye implemented the "Second Spring" project between 2015 and 2019 through which 25 per cent of new affordable housing was set aside for retired people.

48. In other countries, programmes existed to help older persons renovate their homes to make them more age friendly. Singapore, for example, had the Enhancement for Active Seniors programme which subsidised the installation of ramps or slip-resistant floors in the houses of older persons. The New Community Care Apartment initiative which was implemented in 2021 aimed at expanding the continuum of housing options for seniors by integrating senior-friendly housing with care services that could be scaled according to care needs and social activities.

49. Several countries in the region prioritized ageing-in place. Malaysia, for example, had introduced guidelines at the national level in this regard. Cambodia also emphasized aging-in-place and reiterated that the family should provide the main safety network for older persons. The National Ageing Policy (2017–2030) emphasized the need for age-friendly infrastructures, such as toilets, walkways, public transit, and communications systems.

50. There were also initiatives to make public transportation available, affordable and accessible for older persons. After consulting with the public, the Land Transport Authority in Singapore introduced free concession cards for senior Singaporeans which allowed them to use public transport at a reduced fare, coupled with merchant benefits and privileges. The Turkish Government implemented the National Intelligent Transportation System Strategy which provided effective and safe transportation for older persons, children and persons with disabilities. In Cambodia, with support from China and Japan, bus services had been set up in cities that provided accessible public transportation for older persons free of charge.

2. Care and support for caregivers

51. In Asia and the Pacific, provision of care to older persons is mostly undertaken by the family or community. The majority of caregivers are women, who often bear the financial, physical and emotional costs of balancing work, household and caregiving obligations. Some countries reported offering support to caregivers, including through cash benefit programmes or training programmes, including certification and accreditation for informal and formal caregivers, including family members, nurses and other health care workers. In Australia and Türkiye, for example, a Carer Payment and Allowance system provided income support to persons looking after older persons, following certain criteria. In Mongolia, the Government organized several trainings for specialized nursing home staff. As an example of bilateral cooperation, Mongolia, supported by Japan, offered online training on the Japanese experience in elderly care for managers, social workers and nurses of specialised care services. In Singapore, the Ministry of Health and the Agency

for Integrated Care supported local recruitment and salary enhancements of caregivers. There were also subsidised training programmes for healthcare professionals. In Malaysia, certification of caregivers was offered through official programmes. In Japan, the Government had provided prefecture-level training for caregivers. In addition, some municipalities supported training for family caregivers and other caregivers through community support projects.

3. Neglect, abuse and violence

52. Creating age-friendly environments also involves promoting respect for older persons and social inclusion as well as preventing neglect, abuse, violence and discrimination. Some countries or areas responding to this survey had legislation aimed at preventing domestic violence, extending it to both genders and older persons. Both Singapore and Macao, China had laws that prevented and combatted domestic violence against older persons, or similar legislation that protected them from family and domestic violence. In Singapore, there were legal levers to address neglect, abuse and violence against older persons through legislation such as the Penal Code and the Vulnerable Adults Act. Australia, Malaysia, and Mongolia provided community legal services to older persons who had experienced abuse as well as training programmes for care providers on legal issues. Australia planned to increase the national budget allocation for the National Aged Care Advocacy Programme to strengthen the provision of information and education to prevent elder abuse.

53. Countries also reported having put in place services for victims of elder abuse, neglect and violence. In Singapore, for example, the Adult Protective Service under the Ministry of Social and Family Development was established in May 2015 to put in place programmes to protect vulnerable adults from abuse, neglect, or self-neglect. There were also centres which provided support to victims of elder abuse, neglect, and violence. The Government of Australia provided financial support to the Older Persons Advocacy Network to support training for health professionals on elder abuse. In addition, there was also the “ReadyToListen” training programme, which aimed to build the skills and capacity of residential aged care service providers to better respond to and prevent the sexual assault in residential aged care. The Mongolian Association for Elderly People, in cooperation with the International Legal Development Organization, was implementing a “Training and Qualification Project for Trainers and Consultants” to sensitize them towards detecting and addressing elder abuse.

4. Public recognition and images of ageing

54. Several countries reported that they were working towards increasing public recognition of older persons in society. The Singapore Government had launched campaigns to recognize and appreciate the contribution of older persons to society, and to work with all stakeholders to empower older persons to reach their full potential. In Kazakhstan, journalists were trained to avoid negative stereotypes and prejudices and fight discrimination vis-à-vis older persons. They were also encouraged to report on respecting the human rights of older persons, address ageism, and to ensure that older persons were portrayed positively. In the Philippines, the President had issued a letter of felicitation and a gift of 100,000 pesos to all Filipinos who had reached the age of 100, whether they live in the Philippines or abroad.

D. COVID-19 and older persons

55. The COVID-19 pandemic has affected all aspects of older persons' lives. They experienced higher rates of severe illness and mortality; difficulty accessing essential health services, testing and treatment; poverty and economic hardship; social isolation and ageism; and stress and anxiety because of isolation and loneliness during lockdowns.

56. During the pandemic, older persons, especially older women and older persons with disabilities, had less access to essential goods and basic services as documented by a number of ad-hoc surveys. According to a multi-sector rapid needs assessment conducted by HelpAge in Cambodia and a survey conducted by the Coalition of Services of the Elderly in the Philippines, for example, older persons reported to have eaten less quality food during the pandemic. Many of the respondents had also difficulty accessing medicines and health services, and they felt anxious and depressed. Based on the findings of the Singapore Life Panel study by the Singapore Management University's Centre for Research on Successful Ageing, older respondents reported a stark increase in feelings of isolation.

57. In the national voluntary survey, several countries reported on policies and programmes to support older persons during this difficult time. For example, the Australian Government had partnered with the private hospital sector to ensure the entire health system was focused on treating patients as required, including older persons. Protocols to guide jurisdictions in supporting older persons during the pandemic, including in long-term care facilities, had also been developed.

58. In Singapore, the Government set up a multi-ministry taskforce to coordinate a whole-of-government effort to combat the virus and put in place additional precautionary measures to safeguard the health and wellbeing of older persons in long-term care facilities. Additional precautionary measures were put in place in these facilities to protect residents and staff. These included vaccinations for residents and staff, enhanced infection control and prevention practices, and testing protocols for nursing home staff and residents. In Singapore, to protect the welfare for both home care staff and older persons, home care providers were advised to follow extra protection measures. Home vaccination teams were also deployed to provide easy access to COVID-19 vaccines for home-bound seniors. The Government also provided contactless delivery of meals on wheels for older persons. In Kazakhstan, COVID-19 telemedicine centres were established across the country to counsel and monitor individuals, including older persons, with probable or confirmed COVID-19 status. When Türkiye declared a partial lock-down for older persons aged 65 and over, 'Vefa Social Support Groups' were formed by the Ministry of Interior under the coordination of provincial and district governors to deliver medicines, food and provide social support. In Malaysia, the Government had set up a helpline, operated by counsellors and medical experts trained in the mental health field.

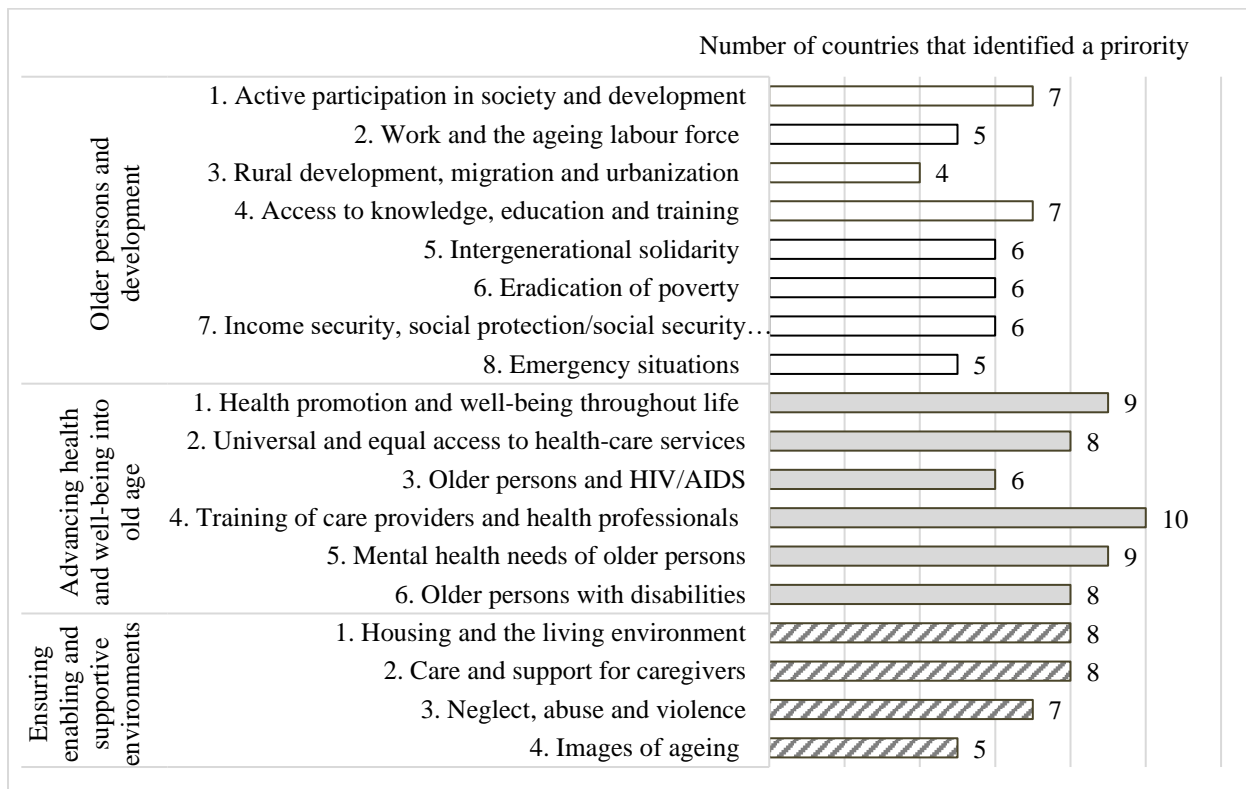
59. Older persons were prioritised for COVID-19 vaccinations in many countries of the region, such as in Macao, China, the Republic of Korea, Singapore and Türkiye. There were also communication campaigns aimed at older persons. Volunteers, general practitioners and family members were enlisted to educate older persons on the importance of COVID-19 vaccination, including booster shots. Mobile vaccination teams were deployed to locations near older persons' residences, including for home-bound senior citizens.

60. Several Governments also addressed the pandemic's economic impact on older persons. For example, in Türkiye, an economic stimulus package was introduced, including a mix of financial support, credit support and employment-related measures to help citizens and businesses during the COVID-19 crisis. The minimum amount for pensions was raised, and pension increases were directly deposited into the older persons' accounts. In Malaysia and the Philippines, the Government offered special cash payments to older persons in need of financial assistance. In Singapore, for the existing Silver Support Scheme, quarterly pay-outs were raised, starting in 2021. In Australia, besides financial support to older persons, the Government offered free daytime webinars to help improve the online skills of older Australians as they increasingly turned to the internet to access online services and connect with loved ones.

III. Conclusions and recommendations

61. The populations in many countries in Asia and the Pacific are ageing rapidly, and Governments have prioritized some of the objectives of the Madrid Plan of Action. Of the 20 countries that responded to the survey, 15 identified priority actions. As indicated in figure II, countries appear to prioritize health-related objectives, such as training of caregivers and health professionals and the promotion of health over the life course. Objectives related to "older persons and development" are also important, such as those on education and training and active participation in society. It is worth pointing out that issues related to "older persons in rural areas", "images of ageing" and "older persons in emergency situations" appear less important.

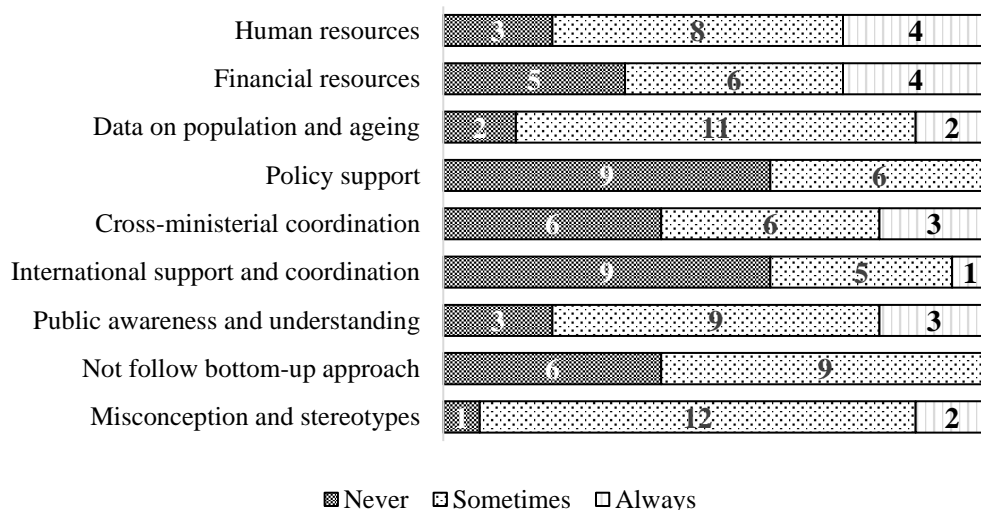
Figure II
Member State priorities for implementing the Madrid Plan of Action, by priority area and objective



Source: ESCAP 2021/2022, Voluntary national survey on the implementation of the Madrid International Plan of Action on Ageing in Asia and the Pacific; responses collected and posted at: www.population-trends-asiapacific.org/mipaa/voluntary-national-survey-response

62. Of the 20 ESCAP member States that responded to the survey, 15 identified the following top three challenges to the development and implementation of legislation with a focus on older persons: (a) misconceptions and stereotypes about population ageing and older persons; (b) lack of data at the national and subnational levels; and (c) lack of human resources dedicated to population ageing (figure III).

Figure III
Challenges to the development and implementation of legislation with a focus on older persons and population ageing based on the 2021/2022 ESCAP voluntary national survey on the implementation of the Madrid Plan of Action



Source: ESCAP 2021/2022, Voluntary national survey on the implementation of the Madrid International Plan of Action on Ageing in Asia and the Pacific; responses collected and posted at: www.population-trends-asiapacific.org/mipaa/voluntary-national-survey-response

63. Some of these challenges can be addressed by developing, strengthening and implementing comprehensive, human-rights based and integrated policy frameworks that mainstream population ageing into national development strategies and plans. Age-disaggregated data and research would be essential to inform policymaking. However, very few countries have put in place action plans and monitoring frameworks to help implement policies and assess their impact. There are also particular policy gaps in addressing gender equality and the needs of older women and older persons with disabilities.

64. In order to address some of the misconceptions and stereotypes concerning older persons and in order to strengthen healthy ageing strategies, governments should adopt policies and national action plans to prepare for and respond to population ageing throughout the life course. There are examples from the region in which re- and up-skilling of older persons, training in ICTs, and work environments in which older and younger people work together and learn from each other have contributed to older persons’ financial security, stronger intergenerational ties and ageing in safety and dignity. In some countries in the region, access to universal health care had improved over the life course, but long-term care and integrated care services remained underdeveloped.

65. To fight stigmatization, it is important to change the narrative of older persons requiring care and recognize them as agents of development. Some countries reported progress in this regard. For example, they had implemented mentoring programmes in companies and institutions to foster learning between older citizens and the younger generation. They had created groups of elders at the national or subnational levels which advised policymakers in mainstreaming ageing, and they had shown flexibility in extending or abolishing statutory retirement ages to allow older persons to be active in the formal labour markets for longer periods, if they so desired.

66. Ensuring that older persons age in safety, security and dignity requires adequate financial resources. As indicated in the surveys, several countries offered cash transfers to older persons. Although the number of countries providing a universal social pension is increasing, the majority provide means-tested transfers to older persons. Despite the importance of some of these transfers for the empowerment of older persons, particularly older women, the benefits provided are usually insufficient to cover costs of living, including health care costs.

67. Moreover, there is urgent need to address the financial situation of older persons active in the informal sector, including older women, older individuals with disabilities, and older migrants. The pension system in many countries tends to perpetuate income inequalities as it covers only the public and formal private sectors and offers only contribution-based benefits that have few redistribution elements. In order to expand pension coverage to the informal sector and ensure sustainability of pension funds, innovative solutions must be found.

68. In response to the lack of human resources dedicated to issues of concern to older persons, it is important to fully include them and their organizations in policymaking. Their experiences and voice are essential in guiding this work. Moreover, it is important to develop subnational and cross-sectoral action plans and programmes that address ageing in a holistic way. Ageing is a complex process with different dimensions. Although the growing number and share of older persons impacts policymaking at the macro level of societies, it is also the household, the neighbourhood or the community which are directly impacted. Support to caregivers, OPAs and families of older persons is equally important and complements policymaking at the macro level.

69. Since the third review and appraisal of the Madrid Plan of Action, countries have made progress in addressing the challenges and opportunities of population ageing in Asia and the Pacific. However, much remains to be done. The voluntary survey responses and this summary report constitute a wealth of data, information, policy examples, best practices, and methods of collaboration and partnership to advance the implementation of the Madrid Plan of Action in the region. The present document is intended to provide background information for the 2022 Asia-Pacific Intergovernmental Meeting on the Fourth Review and Appraisal of the Madrid International Plan of Action on Ageing.
