



**First consultation of ESCAP member States on the Asia-Pacific Fourth Review
and Appraisal of the Madrid International Plan of Action on Ageing:
process, survey, data and policies**

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**Statistical indicators relevant to ageing
and age-disaggregated data in Asia and the Pacific***

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1. Introduction

The Asia-Pacific region is ageing rapidly. The percentage of people aged 60 years or over will increase from 13.6 per cent in 2020 to 24.9 per cent in 2050. There are challenges and opportunities related to these demographic shifts that require forward looking policies. These policies are needed to ensure inclusive and active ageing, and on sectoral issues such as access to health care and social care, income security, and continuing to benefit from the knowledge and contribution of older people as they age. Policies must to respond to the diversity within ageing populations, such as gender and location, and to the needs as expressed by older people themselves.

Good policies are informed by evidence. Official statistics play a crucial role in evidence-based policy making. To be relevant to the region, national statistical systems must be positioned to respond to priority issues related to ageing populations.

Statistics on ageing and older people have not been given sufficient priority in the past. As a result, data are not systematically produced, analysed, and disseminated by national governments. Earlier this year, in launching the Decade of Healthy Ageing 2020-2030, WHO observed that “three quarters of the world’s countries have limited or no data on healthy ageing or on older age groups.” The lack of data and analysis contributes to the invisibility and exclusion of older people.¹

Work is underway to support countries to fill these information gaps but there is much progress still to be made. The production and use of the relevant data need to be integrated in national processes. Statistical indicators provide a good starting point for enabling this. They clarify the policy priorities for ageing populations and provide a focus for data to be produced, published, and used in policy and decision-making.

A workshop convened by ESCAP in June 2019 explored the issue of data quality and needs. It concluded that a set of indicators, which could be turned into a dashboard and then a composite index is needed to support policymakers to act and identify priorities. This paper is the first deliverable in a series that will provide regional guidance and a statistical dashboard on population ageing in Asia and the Pacific. Building on analysis of the key elements of ageing policies and drawing from the work of expert groups in this space (e.g. Titchfield City Group, WHO, HelpAge), this paper explores and recommends a set of statistical indicators relevant to ageing and older people.

2. Identifying demand for indicators: international and regional commitments to improve data on ageing and older persons

National statistical systems face increasing demands to respond to needs for data on all sectors and issues pertinent to sustainable development. Data and statistics are crucial to identifying gaps and concerns, developing policy responses and to evaluating their implementation and tracking progress towards key goals. They play a role at every stage of the policy cycle, from advocacy to setting targets to designing responses and monitoring their impact.

¹ WHO. 2020. Decade of Healthy Ageing 2020-2030. https://www.who.int/docs/default-source/decade-of-healthy-ageing/final-decade-proposal/decade-proposal-final-apr2020-en.pdf?sfvrsn=b4b75ebc_5.

A range of data and statistical indicators on issues related to ageing and older persons are being produced by countries. Yet, there is no standardised set of indicators or guidance to countries in Asia and the Pacific as to what could be produced and used. Where data are collected, they are often not accessible, analysed or published, at least not in a form that supports their use by policy and decision-makers. While some data and indicators are already available through official databases, other important indicators must be identified and derived from existing surveys or administrative data. A barrier is that key data collections have an age cap that limits the utility of data for analysing the situation of older persons. In countries that have not conducted dedicated age-related surveys to bridge data gaps there is a paucity of age-disaggregated and age-related data.

The Madrid International Plan of Action on Ageing² is the global framework for policy action on ageing. Adopted in 2002, it provided a “bold new agenda” focused on the priorities of (a) older persons and development; (b) advancing health and well-being into old age; and (c) ensuring the existence of enabling and supportive environment. MIPAA is reviewed every five years and in early 2020, the United Nations Economic and Social Council released a report on modalities leading up to the fourth review in 2023. Noting that lack of data has been an ongoing issue in past reviews, it calls for the United Nations system “support national efforts to improve the availability of the necessary data, disaggregated by relevant factors, and the indicators required for the review and appraisal exercise by providing, upon request, technical assistance for national capacity-building.”³

Global frameworks for ageing

Madrid International Plan of Action on Ageing⁴

This is the primary global framework for work on ageing. Adopted by the international community in 2002, it is a commitment to action and sets out in which areas governments have agreed to focus on.

The MIPAA does not include recommended indicators per se, but it has several mentions of data, statistics and indicators that should be used to guide work on selecting indicators and developing capacity for ageing and age-disaggregated data:

Article 11

We emphasize the importance of international research on ageing and age-related issues as an important instrument for the formulation of policies on ageing, based on reliable and harmonized indicators developed by, inter alia, national and international statistical organizations.

48. (e) Develop, as appropriate and at all appropriate levels, age and gender-relevant poverty indicators as an essential means to identify the needs of poor older women and encourage the use of existing indicators of poverty so that the review is carried out according to age group and gender;

² Political Declaration and Madrid International Plan of Action on Ageing. 2002.

https://www.un.org/en/events/pastevents/pdfs/Madrid_plan.pdf

³ United Nations. 2020. Modalities for the fourth review and appraisal of the implementation of the Madrid International Plan of Action for Ageing, 2002 (E/CN.5/2020/4). <https://undocs.org/E/CN.5/2020/4>.

⁴ Political Declaration and Madrid International Plan of Action on Ageing. 2002. https://www.un.org/en/events/pastevents/pdfs/Madrid_plan.pdf

67. (i) Develop statistical indicators at all levels on common diseases in older persons to guide policies aimed at preventing further illness in this age group;

79. (a) Ensure and expand the compilation of HIV/AIDS data to allow for the assessment of the extent of HIV/AIDS infection in older persons.

119. Other crucial elements of implementation include: effective organizations of older persons; educational, training and research activities on ageing; and national data collection and analysis, such as the compilation of gender and age specific information for policy planning, monitoring and evaluation.

125. Other priorities for international cooperation on ageing should include exchange of experiences and best practices, researchers and research findings and data collection to support policy and programme development as appropriate; establishment of income-generating projects; and information dissemination.

129. Elaborating and using, as appropriate, comprehensive and practical tools for evaluation, such as key indicators, is also necessary to facilitate a timely policy response.

Sustainable Development Goals

Reflecting latest updates as at July 2020: Global indicator framework adopted by the General Assembly (A/RES/71/313), annual refinements contained in E/CN.3/2018/2 (Annex II), E/CN.3/2019/2 (Annex II), and 2020 Comprehensive Review changes (Annex II) and annual refinements (Annex III) contained in E/CN.3/2020/2.

The SDGs provide the overarching development framework that countries have agreed to work towards between 2015 and 2030. The goals are anchored with statistical indicators that all countries, regardless of their level of development, should be monitoring. However, such global frameworks are encouraged to be localized and countries may identify other indicators that are of national importance for monitoring sustainable development.

There are 18 SDG indicators that mention older persons and/or disaggregation by age:

1. Indicator **1.2.1** Proportion of population living below the national poverty line, by sex and age
2. Indicator **1.2.2** Proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions
3. Indicator **1.3.1** Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work-injury victims and the poor and the vulnerable
4. Indicator **3.3.1** Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations
5. Indicator **3.8.1** Coverage of essential health services
6. Indicator **5.4.1** Proportion of time spent on unpaid domestic and care work, by sex, age and location
7. Indicator **8.5.1** Average hourly earnings of employees, by sex, age, occupation and persons with disabilities
8. Indicator **8.5.2** Unemployment rate, by sex, age and persons with disabilities
9. Indicator **10.2.1** Proportion of people living below 50 per cent of median income, by sex, age and persons with disabilities
10. Indicator **11.2.1** Proportion of population that has convenient access to public transport, by sex, age and persons with disabilities

11. Indicator **11.7.1** Average share of the built-up area of cities that is open space for public use for all, by sex, age and persons with disabilities
12. Indicator **11.7.2** Proportion of persons victim of physical or sexual harassment, by sex, age, disability status and place of occurrence, in the previous 12 months
13. Indicator **16.1.1** Number of victims of intentional homicide per 100,000 population, by sex and age
14. Indicator **16.1.2** Conflict-related deaths per 100,000 population, by sex, age and cause
15. Indicator **16.2.2** Number of victims of human trafficking per 100,000 population, by sex, age and form of exploitation
16. Indicator **16.7.1** Proportions of positions in national and local institutions, including (a) the legislatures; (b) the public service; and (c) the judiciary, compared to national distributions, by sex, age, persons with disabilities and population groups
17. Indicator **16.7.2** Proportion of population who believe decision-making is inclusive and responsive, by sex, age, disability and population group
18. Indicator **17.18.1** Statistical capacity indicator for Sustainable Development Goal monitoring

Although indicators explicitly mention disaggregation by age, data collection is often age capped (e.g. data not collected from people age 65 and above) and disaggregated data on older persons is not readily available.⁵ The Titchfield City Group are driving work to better integrate age-disaggregation and ageing related data into the SDG framework.

There are other SDG indicators relevant to ageing that have been included in the set of recommended indicators outlined below.

Decade of Healthy Ageing 2020-2030

The WHO launched the Decade of Healthy Ageing in 2020, with the aim of bringing governments, civil society, international agencies, professionals, academia, the media, and the private sector together to take action to improve the lives of older persons.

One stream of work is to strengthen data, research and innovation to accelerate implementation. The decade calls Members States to action, including collecting, analysing and disseminating geographically disaggregated data to support communities to foster the abilities of older persons. Also, for integrated care and primary health, to “Collect, analyse and report clinical data on intrinsic capacity and functional ability in national contexts, disaggregated by age, sex and other intersectional variables.”

Global strategy and action plan on ageing and health⁶

Healthy Ageing is the focus of WHO's ageing related work. It replaces WHO's Active Ageing policy framework developed in 2002. WHO plans to release its Healthy Ageing baseline report in late 2020.

⁵ United Nations. 2018. Report of the United Kingdom of Great Britain and Northern Ireland on ageing-related statistics and age-disaggregated data (E/CN.3/2018/19).

⁶ WHO. 2017. Global strategy and action plan on ageing and health. WHO: Geneva. <https://www.who.int/ageing/WHO-GSAP-2017.pdf?ua=1>.

WHO released this global strategy and action plan in 2017, building on MIPAA as well as WHO's policy framework on active ageing. It includes a strategic objective to improve the measurement, monitoring and research on Healthy Ageing. Action to be taken by the Secretariat (WHO and other United Nations organizations) includes reviewing existing data sources, methods and indicators and sharing experiences in this within and between regions.

The plan identifies a range of progress indicators to monitor its implementation. As these are more process than outcome oriented, they are not included in the recommended set of indicators in section 6 below. They are, however, relevant to national efforts on ageing policies and action.

1. Number of countries with a focal point on ageing and health in the health ministry
2. Number of countries with national plans or strategies aligned to Healthy Ageing
3. Number of countries with a national multi-stakeholder forum or committee on ageing and health
4. Number of countries with national legislation and enforcement strategies against age-based discrimination
5. Number of countries with legislation or regulations that support older adults to obtain access to assistive devices on the WHO priority assistive products list
6. Number of countries that have a national programme to support activities in line with the WHO global network of age-friendly cities and communities
7. Number of countries with national policies in place to support comprehensive assessments of the health and social care needs of older persons
8. Number of countries that have a long-term care policy, plan, strategy and/or framework
9. Number of countries with cross-sectional, nationally representative, anonymous, individual-level data collected since 2010 on older adults and their health status and needs in the public domain
10. Number of countries with longitudinal, nationally representative surveys (cohort or panel) on older adults and their health status and needs in the public domain

Regional frameworks for ageing

Asia-Pacific Ministerial Declaration on Population and Development

Adopted by Ministers and representatives of ESCAP member states, this declaration was made in 2013 as a regional commitment to address population and development concerns. The Declaration contains 116 priority actions to ensure the effective implementation of the Programme of Action of the International Conference on Population and Development. Many are related to the ageing population and older people.

The Declaration itself does not include recommended indicators, but in 2020 member States endorsed the "Asia-Pacific Indicator Framework for Voluntary Monitoring of Progress towards the Implementation of the Programme of Action of the International Conference on Population and Development and of the Commitments Contained in the Asian and Pacific Ministerial Declaration on Population and Development" at the Sixth Session of the Committee on

Social Development, held 20 and 21 October 2020 in Bangkok and virtually. That indicator framework recommends 105 indicators spread across thematic areas, with one theme (G) being specifically on ageing. Looking across that whole framework, the relevant indicators are:

1. **KDI.1 Total population by sex, age and disability status**
 2. **KDI.5 Total fertility rate**
 3. **KDI.6 Life expectancy at birth, by sex**
 4. **KDI.7 Dependency ratio, total, child and older persons**
 5. **A.1 (SDG 1.1.1): Proportion of population below the international poverty line, by sex, age, employment status and geographical location (urban/rural)**
 6. **A.2 (SDG 1.2.1): Proportion of population living below the national poverty line, by sex and age**
 7. **A.3 (SDG 1.2.2): Proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions**
 8. **A.5 (SDG 10.2.1) Proportion of people living below 50 per cent of median income, by sex, age and persons with disabilities)**
 9. **A.6 ILO: Active contributors to an old age contributory scheme as a percent of the working age population by sex (%)**
 10. **A.7 (SDG 2.1.2): Prevalence of moderate or severe food insecurity in the population, based on the Food Insecurity Experience Scale (FIES)**
 11. **A.12 (SDG 8.5.1): Average hourly earnings of female and male employees, by occupation, age, persons with disabilities and migrant status**
 12. **A.13 (SDG 8.5.2): Unemployment rate, by sex, age, persons with disabilities and migrant status**
 13. **A.14 (SDG 8.10.2): Proportion of adults (15 years and older) with an account at a bank or other financial institution or with a mobile-money-service provider**
 14. **B.9 (SDG 3.3.1): Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations**
 15. **B.10 (SDG 3.4.1) Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease, by age and sex**
 16. **B.11 (SDG 3.8.1) Coverage of essential health services**
 17. **D.4 (SDG 4.3.1): Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex, age and disability status**
 18. **D.5 (SDG 4.6.1): Proportion of population in a given age group achieving at least a fixed level of proficiency in functional (a) literacy and (b) numeracy skills, by sex and age**
 19. **E.8 (SDG 5.4.1). Proportion of time spent on unpaid domestic and care work, by sex, age and location**
 20. **F.1 (SDG 3.4.2): Suicide mortality rate, by sex, age, geographical location, employment status, and disability status**
 21. **F.6 (SDG 16.1.3) Proportion of population subjected to (a) physical violence, (b) psychological violence and (c) sexual violence in the previous 12 months**
 22. **G.1 Distribution of households by type (one person, couple only, couple with children, single parent with children, extended composed of family members only, extended non-relatives present, member(s) with unknown relationship to household head), by age of household head**
-

23. **G.2 Percentage of households with at least one member aged 65 years or older**
24. **G.3 (SDG 1.3.1): Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, migrants, pregnant women, newborns, work-injury victims and the poor and the vulnerable (including rural/urban and population living in slums)**
25. **G.4 (SDG 10.2.1) Proportion of people living below 50 per cent of median income, by sex, age and persons with disabilities**
26. **G.5 (SDG 11.7.1): Average share of the built-up area of cities that is open space for public use for all, by sex, age and persons with disabilities**
27. **G.6 Percentage of persons aged 55-74 involved in training or education**
28. **G.7 Average age of withdrawal from the labour market**
29. **Countries that have rules, laws and policies supporting giving privileges to older persons (national legislation on older persons/protecting the rights of older persons)**
30. **H.8 (SDG 16.2.2): Number of victims of human trafficking per 100,000 population, by sex, age and form of exploitation**
31. **I.2 (SDG 11.2.1): Proportion of population that has convenient access to public transport, by sex, age and persons with disabilities**
32. **I.5 (SDG 11.5.1): Number of deaths, missing persons and directly affected persons attributed to disasters per 100,000 population**
33. **I.6 (SDG 11.7.2): Proportion of persons victim of physical or sexual harassment, by sex, age, disability status and place of occurrence, in the previous 12 months**
34. **I.7 Number of people displaced by disasters, by sex, age, disability status and geographical location**
35. **J.6 (Sendai B-1): Number of directly affected people attributed to disasters, per 100,000 population (compound indicator)**
36. **K.2 Per cent of all deaths that take place in the territory and jurisdiction in the given year are registered (death registration coverage)**

Asia Health and Wellbeing Initiative (AHWIN)⁷

Launched in 2016 by the Government of Japan, AHWIN promotes bilateral and regional cooperation on issues associated with health and wellbeing in the context of ageing societies. It draws from lessons learned in Japan (the most aged country in the world) to work across four pillars relating to provision of care, training care providers, developing a long-term care industry, and conducting policy research.

AHWIN provides an online data portal including the following indicators:

1. Percentage of population aged 65+
2. Total population aged 65+
3. Number of years for share of population aged 65+ to increase from 7 per cent (ageing society) to 14 per cent (aged society)
4. Life expectancy at 60
5. Health-adjusted life expectancy at 60
6. Number of people with dementia
7. Older age dependency ratio

⁷ Asia Health and Wellbeing Initiative. <https://www.ahwin.org/>.

3. Lessons learned from current data sources and practices

Official statistics on ageing come from a range of sources. Standardized household surveys and censuses typically collect demographic characteristics and information from older people enabling the production and analysis of relevant statistics. Also, administrative data maintained as a byproduct of processes (e.g. register for social protection payments) provide an often-underutilised source of data. Statistics from these sources are typically complemented by qualitative research and other sources of evidence, such as data generated through the work of civil society organizations, academic research, and analysis to inform development projects.

Data related to ageing can be generated from all the usual sources of official statistics, except those with an upper age range that does not include older persons (e.g. Demographic and Health Surveys typically collect data on women of reproductive age (15-49 years)). Few national statistical offices have a section of their website dedicated to data on ageing and/or older persons, and the range of thematic reports produced from a source like population and housing censuses would not usually include a report on ageing, even though it is an ideal opportunity to do so.

Dedicated surveys and data collection are needed to produce statistics on some aspects of ageing and older people that are not covered in other population-based surveys. The questions and methods used to collect data from older people also need to be carefully developed and tested to be appropriate to that population. For example, methods that have less reliance on recall over long periods of time as recall error becomes more likely the longer the period people are asked to remember details from. An example of a dedicated survey for older persons was the Survey of the Elderly in Cambodia conducted in 2004. This was designed to be sensitive to the needs and experiences of older people (aged 60 and above). The survey gathered information on things relevant to inclusive ageing but also considering the cohort of older Cambodians who would have lived through the political upheaval of the aftermath of the Pol Pot (Khmer Rouge) regime.⁸

Global initiatives to improve measures of ageing and age-disaggregated data

United Nations Titchfield City Group

The need for international standards on ageing statistics has been recognized by the highest intergovernmental body on official statistics: the United Nations Statistical Commission (UNSC). In 2018, the UNSC established the *Titchfield City Group on Ageing and Age-disaggregated statistics* – a group of experts in ageing statistics to further international work on developing standards in this area. The group began in 2015 with the support of HelpAge International and the United Kingdom’s Department for International Development.

“The overall objective of the proposed Titchfield Group is to develop standardized tools and methods for producing both data disaggregated by age and ageing-related data, and to encourage countries to do so, by playing a leading role in the development and communication of new standards and methodologies”.

UNSC, 49th session paper on Titchfield (para 26)

⁸ Knodel, J et al. Population Studies Center. 2005. Older Persons in Cambodia: A Profile from the 2004 Survey of the Elderly.

In their report to the UNSC one year later, in 2019, the Titchfield Group presented their five year work programme, which sets out six strands of work to be completed before 2023.⁹ This includes an assessment of current evidence and identifying gaps, and developing a conceptual and analytical framework for comprehensive information on older adults. The group will be integral in supporting United Nations members and partner to better integrate age-disaggregation and ageing-related statistics for the Sustainable Development Goals Indicator Framework.

The Titchfield Group last met in June 2019 in Daejeon, Republic of Korea.¹⁰ Outcomes of that meeting include agreement that 10-15 countries will be selected and approached to take part on stocktaking of age-disaggregated and ageing related statistics. This was planned to take place in 2020 but the COVID-19 pandemic has delayed progress until 2021.

Representatives from the Asia-Pacific region should be identified and consulted to ensure the work in this region through ESCAP is informed by and aligned to global developments in this area. The Titchfield Group may identify regional champions to take responsibility for engaging countries in their region. Sixteen countries from the Asia-Pacific region participated in the 2019 meeting with Statistics Korea hosting (Armenia, Australia, China, India, Indonesia, Japan, Kazakhstan, Republic of Korea, Mongolia, Pakistan, Philippines, Russia, Sri Lanka, Thailand, Uzbekistan, and Viet Nam).

WHO Consortium on Metrics and Evidence for Healthy Ageing

In 2017, WHO launched an International Consortium on Metrics and Evidence for Healthy Ageing. The consortium brings together 50 experts from all WHO regions including policy makers, civil society organizers and researchers. The group supports the development of a global report on ageing to be released in late 2020, including work to harmonize indicators across countries and improve the evidence base on healthy ageing. The report of the consortium meeting in October 2019 highlights the Titchfield City Group work to identify which SDG indicators are priorities for age disaggregation as key to informing global metrics for healthy ageing.¹¹

Surveys relevant to ageing

Health and Retirement Studies (HRS)

Health and Retirement Studies (HRS) are a family of population-based surveys to measure ageing longitudinally (same respondents interviewed at more than one point in time). Beginning in the United States in 1992, as at May 2020, 45 countries globally, including six from the ESCAP region (China, India, Indonesia, Japan, Republic of Korea, and Russian Federation), have conducted an HRS survey. A list of these and other dedicated surveys on ageing and older people conducted by countries in Asia and the Pacific are provided in the section below (Table 1).

⁹ Titchfield City Group on Ageing and Age-disaggregated statistics: Programme of Work, 2018 to 2023 (Background Document). <https://unstats.un.org/unsd/statcom/50th-session/documents/BG-Item4a-Titchfield-E.pdf>

¹⁰ Second official meeting of the Titchfield City Group on Ageing and Age-disaggregated Data. <https://gss.civilservice.gov.uk/events/second-official-meeting-of-the-titchfield-city-group-on-ageing-and-age-disaggregated-data>.

¹¹ WHO. 2019. WHO Consortium on Metrics and Evidence for Healthy Ageing – Peer Review Meeting of Contributors to the Global Baseline Report for Decade of Healthy Ageing. https://www.who.int/ageing/data-research/WHO_Consortium_on_Metrics_and_Evidence_for_Healthy_Ageing_Second_meeting_report_2019'12'01_unedited.pdf?ua=1.

The HRS have been compiled and harmonized for comparable analysis through the *Gateway to Global Aging Data*.¹² It provides survey metadata, harmonized data sets, publications, guidance and other resources related to the international network of Health and Retirement Studies. It provides support for cross-country data analysis, research and development of capacity for the measurement and use of data on ageing.

The platform is managed by the University of Southern California but involves a wide network of experts in Ageing Data from other universities in the Chile, Germany, Ireland, Italy, Japan, Malaysia, United Kingdom of Northern Ireland and Great Britain, and United States of America, as well as the RAND Corporation, OECD and WHO.

Strengths of the HRS approach is that the surveys have a large sample size and can be used to oversample minority groups to analyse the diversity of ageing experiences. The studies cover a wide range of topics and provide a rich data source for analysis. Another strength is that the survey methodology uses best practices to ensure high-quality data.¹³

Limitations of the HRS are that in covering many topics, the questions cannot explore issues in depth. Being developed and used over a long period of time, the HRS has changed slightly between waves and some topics have been discontinued. Implementing an HRS is a significant and complex undertaking requiring funding and national capacity that are challenging to obtain given competing priorities. The resulting dataset is large and complex and working with it requires good understanding of the survey and capacity for data analysis.¹⁴

National Transfer Accounts (NTA) Project

The National Transfer Accounts (NTA) Project uses data to complement the United Nations System of National Accounts and other economic and demographic indicators and shed light on development issues, including the social, political, and economic implications of ageing.¹⁵ It is a research programme that began in 2002 involving researchers from Brazil, Chile, France, Indonesia, Japan, Taiwan Province of China and the United States of America. Since then the members have grown steadily and, as at 2013, Asia-Pacific countries or areas included Australia, Cambodia, China, India, Indonesia, Japan, Philippines, Republic of Korea, Taiwan Province of China, Thailand and Viet Nam.¹⁶

The current NTA project in Asia is supported by the Asia Pacific Regional Office of UNFPA.¹⁷ It helps to draw out the policy implications of population dynamics in the region by improving the availability and quality of NTA data and strengthening the links between data analysis and policy response.

¹² Gateway to Global Aging Data, Produced by the Program on Global Aging, Health & Policy, University of Southern California with funding from the National Institute on Aging (R01 AG030153). <https://g2aging.org/>.

¹³ Gwenith G Fisher, Lindsay H Ryan, Overview of the Health and Retirement Study and Introduction to the Special Issue, *Work, Aging and Retirement*, Volume 4, Issue 1, January 2018, Pages 1–9, <https://doi.org/10.1093/workar/wax032>.

¹⁴ Gwenith G Fisher, Lindsay H Ryan, Overview of the Health and Retirement Study and Introduction to the Special Issue, *Work, Aging and Retirement*, Volume 4, Issue 1, January 2018, Pages 1–9, <https://doi.org/10.1093/workar/wax032>.

¹⁵ National Transfer Accounts Project. <https://www.ntaccounts.org/web/nta/show/>.

¹⁶ United Nations. 2013. National Transfer Accounts Manual: Measuring and Analysing the Generational Economy. UN: New York. <https://ntaccounts.org/doc/repository/NTA%20manual%202013.pdf>.

¹⁷ Sang-Hyop Lee at the University of Hawaii is the contact (leesang@hawaii.edu).

In 2014, the East-West Center (EWC) and the UNFPA Asia Pacific Regional Office (UNFPA APRO) launched a project to expand and update NTA analysis for 15 low- and middle-income countries in Asia. The project involved Bangladesh, Cambodia, China, India, Indonesia, Islamic Republic of Iran, Lao People's Democratic Republic (PDR), Malaysia, the Maldives, Mongolia, Nepal, the Philippines, Thailand, Timor-Leste, and Viet Nam.¹⁸

The NTA project has been a platform for building capacity to produce data and research on socio-economic development and demographic change. These data are valuable for policymaking, but they do not provide data across the range of issues relevant to inclusive and active ageing. The project has produced a *Manual for Measuring and Analysing the Generational Economy*,¹⁹ a training course and a strong network of practitioners in Asia and the Pacific and around the world. The NTA Network held its 13th international conference and first virtual meeting in early August 2020.²⁰

Composite Indices on Ageing

Asian Active Ageing Index

ESCAP commissioned development of an *Asian Active Ageing Index* based on the index developed for European countries through the United Nations Economic Commission for Europe (UNECE) and drawing from other indices such as the *Global AgeWatch Index*. Best practices in constructing a composite index were applied.²¹

The index is based on 22 indicators grouped under four domains as shown in Figure 1. Adjustments made to suit the regional context included removing some indicators and replacing with others considered more relevant. For example, political participation was replaced with participation in religious and care activities, and material deprivation (assets, holidays, etc) was replaced with home ownership. The weight of each indicator was also reviewed and adjusted.

¹⁸ National Transfer Accounts Bulletin, Number 12. December 2017.

<https://ntaccounts.org/doc/repository/NTA%20Bulletin%2012.pdf>.

¹⁹ United Nations. 2013. National Transfer Accounts Manual: Measuring and Analysing the Generational Economy. UN: New York. <https://ntaccounts.org/doc/repository/NTA%20manual%202013.pdf>.

²⁰ National Transfer Accounts: NTA2020 Agenda.

<https://ntaccounts.org/web/nta/show/Documents/NTA2020%20Agenda>

²¹ Zaidi, A and Um, J. 2019. The Asian Active Ageing Index: Results for Indonesia and Thailand. ESCAP Social Development Working Papers 2019/05. https://www.unescap.org/sites/default/files/WP%202019-05_Active%20Ageing%20Index.pdf

Figure 1 The elements and indicators used to calculate the Asian Active Ageing Index

Overall Index	Asian Active Ageing Index			
Domains	Employment	Social participation	Independent living	Capacity / enabling environment
Indicators	Employment rate 55-59	Voluntary activities 55+	Physical exercise 55+	Remaining Life Expectancy (RLE) at age 60
	Employment rate 60-64	Care to child / grandchildren 55+	Access to health insurance or health benefit 55+	Share of Healthy Life Expectancy (SHLE) at age 60
	Employment rate 65+	Care to older adults 55+	No ADL difficulties for 55+	Mental well-being 55+
		Civic and religious activities 55+	No IADL difficulties for 55+	Subjective well-being 55+
			Relative median income 65+	Social connectedness 55+
			No poverty risk 65+	Physical safety 55+
			Home ownership 55+	Use of ICT 55+
				Educational attainment 55-74

The *Asian Active Ageing Index* was produced for two countries where data were readily available: Indonesia and Thailand. Data was mainly extracted from ageing-related surveys, family life surveys, and data from national statistical office reports and databases. The results highlighted some key differences in the activities of older persons in Asia and the Pacific compared to European countries:

- High employment rates among the older population due to economic incentives or necessity rather than desire to continue working
- Older persons in Indonesia and Thailand providing support to their families by taking care of grandchildren and family members. High participation in religious and civic activities may have led to low levels of volunteer work
- Varying risks of poverty with older persons in Indonesia being at higher risk than those in Thailand
- Older people living longer and pension income falls short of what they need
- Older people, particularly women, have often limited formal education limiting their employment and training opportunities and shaping their information needs

The index was initially considered to be used as one of the tools for monitoring the MIPAA and other commitments to sustainable development. As an index, would have to be supported with country-specific analysis of healthy and active ageing and supplemented with a dashboard of statistical indicators. The paper concluded that the availability of age-disaggregated data is low and recommends that countries strengthen their statistical systems to ensure age-disaggregation and age-related data are being produced. Because of the low data availability, the index is currently not considered as one of the tools for the Fourth Review and Appraisal of the Madrid International Plan of Action on Ageing.

Active Ageing Index

The United Nations Economic Commission for Europe (ECE) supports its member States to monitor their commitments to the Madrid International Plan of Action on Ageing through the *Active Ageing Index*. The index comprises twenty-two indicators grouped under four elements:

1. Employment
2. Participation in society
3. Independent, healthy, and secure living; and
4. Capacity and enabling environment for secure and active ageing.

The tool, consisting of a set of indicators, index and dashboard is considered a “good monitoring tool because it was easy to understand, allowed visualization, and provided robust evidence to policymakers.”²²

Figure 2 The elements and indicators used to calculate the UNECE Active Ageing Index



Source: Active Ageing Index project. <https://statswiki.unecce.org/display/AAI/Active+Ageing+Index+Home>

Source: United Nations Economic Commission for Europe. 2018 Active Ageing Index: Analytical Report (ECE/WG.1/33), 2019.

²² ESCAP. 2019. Report on the Workshop on Developing Tools to Measure Inclusive and Active Population Ageing. Workshop on "Developing Tools to Measure Inclusive and Active Population Ageing" held on 27-28 June 2019 in Bangkok, Thailand.

The indicators used to produce the *Active Ageing Index* come from standardised surveys conducted by all countries in the European Union: European Union Labour Force Survey (EU-LFS), European Union Statistics on Income and Living Conditions (EU-SILC), Eurostat ICT Survey, and the European Quality of Life Survey (EQLS). A mandatory and managed approach to official statistics in Europe puts these countries in the relatively unique position of having a large amount of harmonized data that can be used for producing measures such as the *Active Ageing Index*.

The process to develop this index has been well-resourced and highly participatory. It was developed through a group of experts, which has since evolved into the *Titchfield City Group* described below. The group developed the approach, conducted national seminars on data collection and further workshops to present and discuss the results.

As mentioned above, the *Active Ageing Index* has been tested in Asia and the Pacific and produced for two countries – Indonesia and Thailand, where data was sufficient to do so. Even then, the index needed to be adapted to reflect data availability compared to EU countries with 19 indicators under four domains. Aside from highlighting the lack of accessible and comparable data in the region, the index proved a valuable tool for highlighting gaps. It was calculated separately for men and women and this showed important gender gaps when comparing between the two countries.²³

Global Age Watch index

The *Global Age Watch Insights* report by HelpAge International and AARP, was launched in 2013 and published annually until 2015. It provides an excellent example of a compilation of statistics that paint a picture of inclusive and active ageing to the degree possible, given data availability and other constraints. The indicators included in that tool are:

1. Population (number)
2. Percentage of population aged 0-14 years, 50+, 60+ and 80+
3. Life expectancy at birth, by sex
4. Life expectancy at age 60, by sex
5. Healthy life expectancy, by sex
6. Years lived with disability, by disease and age group (15-49, 50-69, 70+ years)
7. Causes of death, by type and age group (15-49, 50-69, 70+ years)
8. Prevalence of major depressive disorders by sex and five-year age group
9. Self-harm mortality rate, by sex
10. Prevalence of physical, sexual and psychological violence, by sex and age
11. Health insurance coverage
12. Out-of-pocket health expenditures as % of household budget and per capita
13. Alzheimer's and other dementias, by sex and five-year age group
14. Universal Health Coverage
15. Financial protection
16. Long-term care and support

Data were sourced from international databases including the UN World Population Prospects, Institute of Health Metrics and Evaluation, WHO Global Health Observatory and the ILO.

²³ ESCAP. 2019. Report on the Workshop on Developing Tools to Measure Inclusive and Active Population Ageing. Workshop on "Developing Tools to Measure Inclusive and Active Population Ageing" held on 27-28 June 2019 in Bangkok, Thailand.

Lessons learned from the compilation of this index are valuable for work on a dashboard of indicators and potential index for Asia and the Pacific. One is data availability was a significant issue. Also, the index lacks the extent of indicators envisaged on violence and abuse, political participation, economic and cultural life, access to adequate housing and other, which could not be included because of data limitations. There were 98 countries not included in the index due to lack of data.

It proved useful for advocacy and attracting media attention. Policymakers and national data providers have called for the index to better reflect diversity within the ageing populations and to be accompanied by specific policy recommendations.²⁴

4. Data availability

A mapping of data sources related to ageing, conducted in the Asia-Pacific region by HelpAge International in 2015, found that an increasing number of countries are conducting dedicated surveys of older persons. This was associated with increasing population ageing in those countries and hence the rising demand for data on the issue. Despite this, the findings on data gaps were clear. With the exception of Thailand, there is a significant lack of longitudinal studies of older-aged populations, which are costlier and harder to analyze, but provide invaluable data. There are also gaps in health, employment and retirement statistics, income, caregiving and support for older persons, and elder abuse.

The study found that accessibility to ageing survey data varied significantly between countries and data was mostly 'tightly guarded'. DHS and census data was found to more accessible but not including as much that is relevant to issues facing older persons and not timely in its dissemination.²⁵

Specialized surveys on ageing have been developed and implemented in the Asia-Pacific region. At the time of writing, fourteen countries had conducted or were planning some kind of national or sub-national survey on ageing (Table 1).

²⁴ Global AgeWatch Blog. Global AgeWatch Insights 2018. <https://www.helpage.org/global-agemwatch/about/global-agemwatch-index-version-20/#:~:text=Global%20AgeWatch%20Index%20was%20launched,people%20at%20the%20global%20level>.

²⁵ Knodel, J. and Teerawichitchainan, B. 2015. Data Mapping on Aging in Asia and the Pacific: Analytical Report. HelpAge International and United Nations Population Fund (UNFPA) Asia and the Pacific Regional Office. <https://www.refworld.org/pdfid/55c9e6ee4.pdf>

Table 1 Countries in Asia and the Pacific that have conducted or are planning a dedicated or module survey on ageing

Country	Name of the Survey	Latest year conducted
Bangladesh	Survey on Population Ageing in Bangladesh	2014
Brunei Darussalam	National Study on Elderly Persons in Brunei Darussalam (NSEP)	Survey in planning
Cambodia	Survey of the Elderly in Cambodia	2004
China	China Health and Retirement Longitudinal Study (CHARLS)	2015
India	Study on Global Ageing and Adult Health (SAGE) Longitudinal Ageing Study in India (LASI), Wave 1 Kerala Ageing Survey 2nd set	2014 Project duration 2016-2021 2019
Indonesia	Indonesia Family Life Survey (IFLS)	2012
Japan	National Survey of the Japanese Elderly (NJSE), Japanese Ageing and Health Dynamics (JAHEAD)	2017
Malaysia	Malaysia Ageing and Retirement Survey (MARS)	2018-19
Maldives	Demographic and Health Survey	2009
Myanmar	JAGES survey Myanmar Myanmar Ageing Survey (MAS)	ongoing 2012
Philippines	Longitudinal Study of Ageing and Health in the Philippines	2018
Singapore	Panel on Health and Ageing of Singaporean Elderly (PHASE)	2009, 2011, 2015
Thailand	Panel Survey on Health Ageing and Retirement in Thailand (HART)	HART Wave 3 conducted in 2019
Viet Nam	Viet Nam Ageing Survey	2011, 2019

Source: information compiled by Social Development Division, ESCAP, April 2020. Additional information for Malaysia based on June 2019 workshop report.

The mapping exercise conducted by HelpAge International in the Asia Pacific region in 2015 found that there was "...considerable variability in the accessibility of ageing surveys across and within countries". Data access tends to be limited to researchers or within the national statistical office, although accessibility is improving. The HRS studies in China, India, Indonesia and Thailand were found to be comparable, but not the data collected through other ageing surveys in these countries.²⁶

Traditional sources of data

Further to ageing surveys, traditional sources of data should be used for producing statistics on ageing and older persons. These include:

²⁶ HelpAge International and AARP. 2018. Global AgeWatch Insights: The right to health for older people, the right to be counted.

- Population and Housing Censuses (PHC)
- Labour Force Surveys (LFS)
- Household Income and Expenditure Surveys (HIES)
- Time Use Surveys (TUS)
- Demographic and Health Surveys or Multiple Indicator Cluster Surveys (DHS or MICS)

The table below provides the latest year for each data source, including ageing surveys, providing a snapshot of data availability across the region. It shows good coverage for population and housing censuses (green shading indicates conducted in the last five years), which provide valuable socio-demographic information and living conditions of people of all ages. The DHS and MICS surveys also have good coverage in the region, but these surveys, along with many other standard population-based surveys, currently exclude older people. If a questionnaire module on ageing and older persons became available, these established survey programmes could provide a big step forward in increasing the regular production of ageing and age-disaggregated data.

Table 2 Availability of relevant household surveys and censuses for producing ageing statistics

Country	DHS or MICS	PHC	LFS	HIES	TUS	Ageing Survey
Afghanistan	2015 (2020)			2017		
Armenia	2015-16	2011 (2020)	2018	2017		
Azerbaijan	2006 (2021)	2019	2011			
Bangladesh	2019 2017-18	2011 (2021)	2017	2016-17	2012	
Brunei Darussalam		2011 (2021)	2019			
Bhutan	2010	2017	2012	2000	2007-08	
Cambodia	2014 (2020)	2019	2012	2017	2003-04	2004
China	1995	2010 (2020)		1988	2008	2012
Cook Islands		2016	2019	2016	1998	
Fiji	(2020)	2017	2016	2019	1987	
Micronesia, Federated States of		2010 (2020)		2005 2020		
Georgia	2018	2014 (2024)	2019		2020	
India	2015-16 (2019-20)	2011 (2021)	2018	2014-15	1998-99	2019 (2016- 2021)
Indonesia	2017	2010 (2020)	2019		2005	
Iran		2016 (2021)	2018		2009	
Japan		2015 (2020)			2011	2017
Kazakhstan	2015 (2021)	2009 (2020)	2013			

Country	DHS or MICS	PHC	LFS	HIES	TUS	Ageing Survey
Korea, Republic of		2010 (2020)	2019		2014	
Democratic People's Republic of Korea	2017	2019				
Kiribati	2018-19	2015		2019	2001-02	
Kyrgyzstan	2018	2009 (2020)	2018		2010	
Lao, PDR	2017	2015			2008	
Maldives	2016-17	2014 (2024)		2016		
Marshall Islands	2007	2011 (2020)		2019		
Malaysia		2010 (2020)	2011	2009-10	2003	
Mongolia	2018	2010 (2020)	2019	2002-03	2011	
Myanmar	2015-16 (2020)	2014 (2024)	2019			2012
Nauru	2007 (2020)	2011 (2021)		2013		
Nepal	2016 (2019) (2020)	2011 (2021)	2017		2010	
Pakistan	2017-18	2017	2018	1993	2007	
Palau		2015		2014		
Papua New Guinea	2016-18	2011 (2020)		2009-10	1998	
Philippines	2017	2015 (2020)	2019	2012	2000	2018
Samoa	2014 (2019-20)	2016 (2020)	2017	2008	2017	
Singapore		2010 (2020)				2015
Solomon Islands	2015	2019		2013	1985	
Sri Lanka	2006-07	2012 (2021)	2018		2016	
Thailand	2015-16 (2019)	2010 (2020)	2019		2015	2019
Tajikistan	2017	2010 (2020)	2009			
Turkmenistan		2012 (2022)				
Timor-Leste	2016	2015	2016	2011-12	2007	
Tonga	2012 (2019)	2016 (2021)	2018	2020	2018	
Turkey	2013 (2018)	2011 (2021)	2018	2012	2006	
Tuvalu	(2019-20)	2012 (2022)		2016	2013	
Uzbekistan	1996	1989 (2022)				
Vanuatu	2013	2016 (2020)		2010 2019	1999	

Country	DHS or MICS	PHC	LFS	HIES	TUS	Ageing Survey
Viet Nam	2013-14 (2020)	2019	2019	2010-11	2004	2019

Note: Some of the time use surveys are not nationally representative. The age ranges they cover varies but does, in many cases, includes older persons.

Sources: DHS Programme (<https://www.dhsprogram.com/what-we-do/survey-search.cfm>); MICS Surveys (<https://mics.unicef.org/surveys>); Pacific Community (<https://pacificdata.org/data/organization/spc-sdd?tags=demographic-surveys&tags=health-surveys>); United Nations 2020 World Population and Housing Census Programme (<https://unstats.un.org/unsd/demographic-social/census/censusdates/>); ILO Central Data Catalog (<https://www.ilo.org/surveyLib/index.php/catalog>); and ILO and UNDP. 2018. Time-use surveys and statistics in Asia and the Pacific: A review of challenges and future directions (https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/documents/publication/wcms_630892.pdf).

Other sources of data

Non-government organizations (NGOs) supporting older persons could be a largely untapped source of valuable data. At the Workshop to Develop Tools to Measure Active and Inclusive Ageing in Asia and the Pacific in 2019²⁷ it was noted that these organizations could be used to collect self-reported data on the well-being, including health, of older persons.

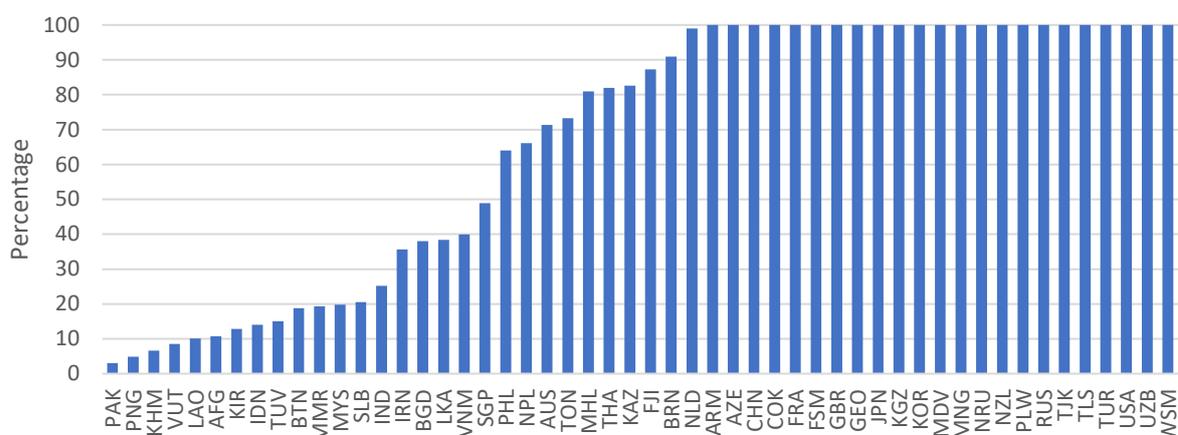
International databases can be more efficient than drawing on national estimates, but this is another area where compromises are likely. Many publicly available international databases have estimates produced by expert agencies (e.g. United Nations Population Division, International Labour Organization) that differ from national estimates and may be lagging national sources. On the other hand, national estimates can lack direct comparability to each other or to these international approaches, discouraging the use of mixed sources and resulting in further limiting of data availability.

Availability of SDG indicators

Ageing is clearly a development priority and yet there has been no international or regional high-level commitment that sets out how it should be measured and monitored for effective policy responses. Evidence-based frameworks, such as the Sustainable Development Goals, have largely left ageing and older people out, with only 18 indicators that mention age as a characteristic and only one of these referring specifically to older persons (SDG Indicator 1.3.1). As a gauge of data availability for SDG indicators that are relevant for ageing and older persons, a check of the global database (<https://unstats.un.org/sdgs/indicators/database/>) reveals that coverage is high for SDG Indicator 1.3.1 for ESCAP member and associate member states. Although, all values are based on estimates produced by the International Labour Organization (ILO). Data are typically recent (dated between 2014-2019) and most countries have more than one data point providing some time series. Only two countries have no data for this indicator in the global SDG database: Democratic People's Republic of Korea and Turkmenistan.

²⁷ Held 28-29 June 2019 in Bangkok. More information can be accessed at: <https://www.unescap.org/events/asia-pacific-workshop-developing-tools-measure-inclusive-and-active-population-ageing>.

Figure 3 Proportion of population above statutory pensionable age receiving a pension (SDG Indicator 1.3.1), ESCAP member and associate member States, latest value



Note: Country names are expressed as three-letter country codes (<https://unstats.un.org/unsd/tradekb/knowledgebase/country-code>).

Source: United Nations Global SDG Database (<https://unstats.un.org/sdgs/indicators/database/>). Accessed 11 August 2020.

5. Recommended statistical indicators

Statistical indicators are a logical starting point to focus the production and use of statistics on any issue. When based on international standards and recommended practices, they provide a robust measure that can be used to identify gaps, motivate action, and to track progress over time. Adopting an agreed set of statistical indicators around development issues, such as ageing and older people, provides a framework for the statistical system and for policymakers to work together on ensuring the needed data are collected, analysed and produced, and that they are made available to those who need to use them in policy processes.

What is a statistical indicator?

A statistical indicator is a measure of something at a point in time, or place or thing. It is a summary measure of a key issue or phenomenon.

Examples of indicators include total fertility rate – the average number of children woman in a certain country or place have in their lifetime (from 1.0 in South Korea to 4.5 in Afghanistan²⁸). Another example is the percentage of older people with a bank account (from 100 per cent in New Zealand to 18 per cent in Afghanistan²⁹).

Indicators can be used to show relative performance – compared to another country or to show change over time. On their own, indicators are not all that meaningful. But when taken together and, especially combined with contextual information and interpretation, they provide a powerful view and evidence base.

²⁸ World Bank Data: Total fertility rate. <https://data.worldbank.org/indicator/SP.DYN.TFRT.IN>.

²⁹ World Bank Data: Account ownership at a financial institution or with a mobile-money-service provider, older adults (% of population ages 25+). <https://data.worldbank.org/indicator/FX.OWN.TOTL.OL.ZS>.

Sustainable Development Goals indicators

The Sustainable Development Goals (SDGs) and their associated targets and indicators provide a high-level and overarching framework of indicators for the key issues pertaining to global development. Yet only a small number of the 240 indicators are relevant to older persons. Recognizing this gap, the Decade for Healthy Ageing 2020-2030 identifies 28 SDG indicators across 11 Goals required for healthy ageing:

1. 1.3.1: Proportion of population covered by social protection “floors” or systems, by sex, distinguishing children, unemployed people, older people, people with disabilities, pregnant women, newborns, people with work injuries, the poor and the vulnerable
2. 1.4.1 Proportion of population living in households with access to basic services, distinguishing older people
3. 1.4.2 Proportion of total adult population with secure tenure rights to land, legally recognized documentation and who perceive their right to land as secure, by sex and type of tenure, also distinguishing older people
4. 2.1.2 Prevalence of moderate or severe food insecurity in the population, also distinguishing older people
5. 2.3.2 Average income of small-scale food producers, by sex and indigenous status, also distinguishing older people
6. 3.4.1: Mortality from cardiovascular disease, cancer, diabetes or chronic respiratory disease, including adults aged ≥ 70 years
7. 3.4.2: Mortality rate from suicide, by age and sex across the lifecourse
8. 3.8.2: Proportion of population with a large share of household expenditure or income on health, also distinguishing households with older people
9. 4.4.1: Proportion of young people and adults skilled in information and communications technology, by type of skill, also distinguishing older people
10. 4.6.1: Proportion of population in each age group who have achieved at least a fixed level of functional literacy and numeracy, by sex
11. 5.2.1: Proportion of women and girls aged ≥ 15 years who have ever had a partner who have been subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age
12. 5.2.2: Proportion of women and girls aged ≥ 15 years who have been subjected to sexual violence by people other than an intimate partner in the previous 12 months, by age and place
13. 5.4.1: Proportion of time spent in unpaid domestic and care work, by sex, age and location, as a basis for provision of public services, infrastructure and social protection policies
14. 8.5.1: Average hourly earnings of female and male employees, by occupation, age and disability status
15. 8.5.2: Unemployment rate, by sex, age and disability status
16. 8.10.2: Proportion of adults ≥ 15 years with an account at a bank or other financial institution or with a mobile money-service provider
17. 9.1.1: Proportion of rural population who live within 2 km of an all-season road, also distinguishing older people
18. 10.2.1: Proportion of people living at $< 50\%$ of median income, by sex, age, also distinguishing older people and people with disabilities.
19. 10.3.1: Proportion of population who reported personal discrimination or harassment in the previous 12 months on the basis of grounds of discrimination (age) that are prohibited under international human rights law

20. 11.2.1: Proportion of population that has convenient access to public transport, by sex, age and disability status, also distinguishing older people
21. 11.3.2: Proportion of cities with direct, regular, democratic participation of civil society in urban planning and management, also including older people or their representatives
22. 11.7.1: Average proportion of the built-up area of cities that is for public use, by sex, age (including older people) and people with disabilities
23. 11.7.2: Proportion of persons who were victims of physical or sexual harassment in the previous 12 months, by sex, age, disability status and place of occurrence, in the previous 12 months
24. 16.1.3: Proportion of population subjected to physical, psychological or sexual violence in the previous 12 months, including older people
25. 16.1.4: Proportion of population that feels safe walking alone in the area in which they live, including older people
26. 16.7.1: Proportion of population who consider decision-making to be inclusive and responsive, by sex, age, disability status and population group, distinguishing older people
27. 17.8.1: Proportion of individuals using the Internet (disaggregated by age)
28. 17.18.1: Proportion of national sustainable development indicators with full disaggregation relevant to the target, in accordance with the fundamental principles of official statistics

These have been integrated into the recommendations below for monitoring ageing in countries across Asia and the Pacific.

Recommended indicators for monitoring MIPAA in Asia and the Pacific

Based on the findings above and guidance from experts in this field, the following set of indicators is recommended (Table 3). They are structured around the themes of the MIPAA. Being almost 20 years old, MIPAA themes do not always map to new and emerging priorities, such as the need to address a wider range of communicable diseases in light of the COVID-19 pandemic. Consideration should be given to any gaps that may exist due to structuring the indicators in this way.

This set of indicators is intended to be a starting point for adopting a regional approach to support policymakers to understand the multidimensional aspects of ageing, identify gaps and issues, and monitor priorities and policy responses to addressing the needs and rights of older people and ageing populations in Asia and the Pacific. They go beyond identifying rates of ageing and characteristics of ageing populations to also reflect the quality of life of older persons. They are selected with consideration to likely data availability although a detailed assessment has not been completed at this stage. It is likely that some indicators will not be publicly available. In that sense, the framework is, in part, aspirational, encouraging national statistical offices and systems to analyse existing data sources and produce the indicators most relevant to the issues in this region.

Table 3 Recommended indicators on Ageing for countries in the Asia-Pacific region, by MIPAA issue areas

Theme (MIPAA)	Indicators
Key demographic indicators	<ol style="list-style-type: none"> 1. Total population by sex, age and disability status 2. Total fertility rate 3. Median age 4. Number and Percentage of the population aged 60+, 65+, 80+ 5. Life expectancy at birth, by sex 6. Life expectancy at age 60, by sex 7. Healthy life expectancy at birth, by sex 8. Healthy life expectancy at 60, by sex
Active participation in society and development	<ol style="list-style-type: none"> 9. Proportion of individuals who own a mobile telephone, by sex and age (SDG 5.b.1) 10. Proportion of individuals using the Internet (disaggregated by age) (SDG 17.8.1) 11. Percentage of older persons living alone, by sex 12. Percentage of older persons represented in parliament 13. Proportion of cities with direct, regular, democratic participation of civil society in urban planning and management, also including older people or their representatives (SDG 11.3.2)
Work and the ageing labour force	<ol style="list-style-type: none"> 14. Average hourly earnings of female and male employees, by occupation, age and disability status (SDG 8.5.1) 15. Unemployment rate, by sex, age and disability status (SDG 8.5.2) 16. Proportion of population aged 60+ in employment 17. Whether a mandatory retirement age is in place or not 18. Average age of withdrawal from the labour market 19. Percentage of older persons participating in volunteer activities
Rural development, migration and urbanization	<ol style="list-style-type: none"> 20. Percentage of the population aged 60 or over living in urban areas 21. Proportion of rural population who live within 2 km of an all-season road, also distinguishing older people (SDG 9.1.1) 22. Number of older persons in rural areas receiving a pension
Access to knowledge, education and training	<ol style="list-style-type: none"> 23. Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex, age and disability status (SDG 4.3.1) 24. Secondary school completion rate, by five-year age group 25. Proportion of population in each age group who have achieved at least a fixed level of functional literacy and numeracy, by sex (SDG 4.6.1) 26. Percentage of persons aged 55-74 involved in training or education 27. Proportion of young people and adults skilled in information and communications technology, by type of skill, also distinguishing older people (SDG 4.4.1)

Theme (MIPAA)	Indicators
Intergenerational solidarity	28. Countries that have rules, laws and policies supporting giving privileges to older persons (national legislation on older persons/protecting the rights of older persons) 29. Proportion of total government spending on essential services (education, health and social protection) (SDG 1.a.2) 30. Whether any public programme, media campaign or other is in place to foster intergenerational solidarity
Eradication of poverty	31. Proportion of population below the international poverty line, by sex, age, employment status and geographical location (urban/rural) (SDG 1.1.1) 32. Proportion of population living below the national poverty line, by sex and age (SDG 1.2.1) 33. Proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions (SDG 1.2.2) 34. Proportion of population living in households with access to basic services, distinguishing older people (SDG 1.4.1) 35. Proportion of total adult population with secure tenure rights to land, legally recognized documentation and who perceive their right to land as secure, by sex and type of tenure, also distinguishing older people (SDG 1.4.2) 36. Prevalence of moderate or severe food insecurity in the population, also distinguishing older people (SDG 2.1.2)
Income security, social protection/social security and poverty prevention	37. Average income of small-scale food producers, by sex and indigenous status, also distinguishing older people (SDG 2.3.2) 38. Active contributors to an old age contributory scheme as a percent of the working age population by sex (%) 39. Proportion of adults aged 60+ with an account at a bank or other financial institution or with a mobile-money-service provider (based on SDG 8.10.2) 40. Proportion of population above statutory pensionable age receiving a pension (SDG 1.3.1) 41. Proportion of people living below 50 per cent of median income, by sex, age and persons with disabilities (SDG 10.2.1)
Emergency situations	42. Number of refugees disaggregated by sex and age 43. Whether or not existing disaster risk reduction strategies include the specific needs of older persons 44. Number of deaths, missing persons and directly affected persons aged 60+ attributed to disasters per 100,000 population (SDG 11.5.1)
Health promotion and well-being throughout life	45. Mortality from cardiovascular disease, cancer, diabetes or chronic respiratory disease, including adults aged ≥ 70 years (SDG 3.4.1) 46. Causes of death, by sex, and age group

Theme (MIPAA)	Indicators
	47. Percentage of the population who does not smoke, by sex and age group 48. Percentage of the population engaged in regular physical activity, by sex and age group
Universal and equal access to health-care services	49. Coverage of essential health services (SDG 3.8.1) 50. Percentage of older persons whose care needs are met 51. Density of residential long-term care facilities (per 100,000 population) 52. Proportion of population with a large share of household expenditure or income on health, also distinguishing households with older people (SDG 3.8.2) 53. Out-of-pocket expenditure on health as percentage of total health expenditure
Older persons and HIV/AIDS	54. Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations (SDG 3.3.1)
Training of care providers and health professionals	55. Number of universities, colleges, training institutions etc. providing gerontology and geriatric studies 56. Per cent of all deaths that take place in the territory and jurisdiction in the given year are registered (death registration coverage)
Mental health needs of older persons	57. Suicide mortality rate, by sex, age, geographical location, employment status, and disability status (SDG 3.4.2) 58. Proportion affected by depressive disorders, by sex and age-group 59. Availability of funding for dementia national plan
Older persons and disabilities	60. Years of Healthy Life 61. Disability Adjusted Life Years 62. Percentage of countries reporting national regulations / legislation to support access to assistive devices
Housing and the living environment	63. Distribution of households by type (one person, couple only, couple with children, single parent with children, extended composed of family members only, extended non-relatives present, member(s) with unknown relationship to household head), by age of household head 64. Percentage of households with at least one member aged 65 years or older 65. Average share of the built-up area of cities that is open space for public use for all, by sex, age and persons with disabilities (SDG 11.7.1) 66. Proportion of population that has convenient access to public transport, by sex, age and persons with disabilities (SDG 11.2.1)

Theme (MIPAA)	Indicators
Care and support for caregivers	<p>67. Proportion of time spent in unpaid domestic and care work, by sex, age and location, as a basis for provision of public services, infrastructure and social protection policies (SDG 5.4.1)</p> <p>68. Labour force participation rates, by age group and sex</p>
Neglect, abuse and violence	<p>69. Proportion of women and girls aged ≥ 15 years who have ever had a partner who have been subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age (SDG 5.2.1)</p> <p>70. Proportion of women and girls aged ≥ 15 years who have been subjected to sexual violence by people other than an intimate partner in the previous 12 months, by age and place (SDG 5.2.2)</p> <p>71. Proportion of population subjected to (a) physical violence, (b) psychological violence and (c) sexual violence in the previous 12 months by sex and age-group (SDG 16.1.3)</p> <p>72. Proportion of persons victim of physical or sexual harassment, by sex, age, disability status and place of occurrence, in the previous 12 months by sex and age group (SDG 11.7.2)</p> <p>73. Proportion of population that feels safe walking alone in the area in which they live, including older people (SDG 16.1.4)</p>
Images of ageing	<p>74. Number of older persons associations (OPA) in a country</p> <p>75. Proportion of population who reported personal discrimination or harassment in the previous 12 months on the basis of grounds of discrimination (age) that are prohibited under international human rights law (SDG 10.3.1)</p> <p>76. Proportion of population who consider decision-making to be inclusive and responsive, by sex, age, disability status and population group, distinguishing older people (SDG 16.7.1)</p> <p>77. Proportion of national sustainable development indicators with full disaggregation relevant to the target, in accordance with the fundamental principles of official statistics (SDG 17.18.1)</p>

Composite index on ageing in Asia and the Pacific

The Workshop to Develop Tools to Measure Active and Inclusive Ageing in Asia and the Pacific in 2019 examined existing composite indicators on ageing (described above), their advantages and disadvantages as well as a possible set of indicators to measure active and inclusive ageing. The report discusses advantages and disadvantages of a composite index, as well as the opportunities of having a lot of indicators. In the case of an index, stakeholders specified that the methodology should be clearly documented, it should not create additional reporting burden for countries, and it should be used as a policymaking tool within countries rather than for ranking and comparison between countries.

It was also concluded that attempting to develop a new index for Asia and the Pacific would require significant resources and would depend on consistent data availability. The experiences

in other regions and attempting to calculate existing indexes in Asia and the Pacific suggests this would be a major piece of work. The benefits an index has over a simple dashboard with available relevant indicators is unclear.

The agreed way forward is to develop a template of ageing policies and a dashboard of related indicators that draws on data that are publicly available.

6. Conclusions

A monitoring framework with a set of agreed indicators would facilitate monitoring progress in implementation of the MIPAA and would support countries in their policy-making as well as regional cooperation. An agreed set of indicators would also support national statistical systems to boost capacity for producing, analysing and disseminating age-related data. Currently available data lack comprehensiveness and comparability limit monitoring of progress in implementation of the MIPAA and lead to missed opportunities for countries themselves to identify their strengths and areas for further policy development.

Five years on from the adoption of the SDGs, which is anchored to the promise of 'leaving no one behind,' there remain untapped opportunities for filling this void.

The process of the Fourth Regional Review of the MIPAA is an opportunity to agree on a set of standard indicators as a starting point. With indicators in place as a target for producing relevant data, the United Nations system can better support capacity development for measurement, monitoring and research on ageing. The Decade of Healthy Ageing 2020-2030 and ongoing efforts to support SDG monitoring and reporting provide impetus for increasing work to improve ageing and age-disaggregated data.

The next steps for this initiative are to work with several countries in the region to test the recommended indicators and capture the findings and lessons learned.
