# The 11<sup>th</sup> ASEAN & Japan High Level Officials Meeting on Caring Societies **"Active Aging"** <sup>2</sup> December - 5 December 2013, Johne





# **Overall Summary**

The Eleventh ASEAN and Japan High Level Officials Meeting on Caring Societies under the theme of the "Current Status and Issues of Aging in ASEAN+3 Countries" was held from 3 to 5 December 2013, in Tokyo, Japan, hosted by the Ministry of Health, Labour and Welfare, the Government of Japan (MHLW).

With the aim of enhancing collaborative relationships in the area of social security between the ASEAN countries and Japan, officials in charge of health, social welfare, and employment policies shared views and had a valuable exchange of ideas to acquire relevant objectives for policy planning, derive useful lessons, and develop measures related to the theme of "Active Aging" and the needs of an aging society.

# Day 1: Tuesday, 3 December 2013

## **Opening Ceremony**

Dr. Kazushi Yamauchi, Director of International Cooperation, Minister's Secretariat, Ministry of Health, Labour and Welfare, Japan, gave an opening address, welcoming the participants to the meeting, thanking all those present and all those involved in the preparation of the meeting.

Ms. Shinako Tsuchiya, Vice Minister, Ministry of Health, Labour and Welfare, Japan. welcomed all representatives, honored guests, and participants for attending the meeting, expressing her condolences to the victims of the devastating typhoon in the Philippines. She presented the theme of the meeting, "Active Aging," noting that 25% of Japan's population



has reached an age of 65 years or older, and that many other ASEAN countries should expect to see a similar rise in the elderly population.



**Dr. Yamauchi** presented the predicted number of years required for the proportion of the aged population to double, defining active ageing as "the process of optimizing opportunities for health, participation, and security in order to enhance quality of life as people age," a list of measures that could be taken, and aging issues in ASEAN countries. Dr. Yamauchi then

provided details on how Japanese policies for aging developed, milestones of policies for the elderly, challenges currently being faced including the growing social security expenditure, the benefits and burdens of the social insurance and services cycle, and current efforts being made to provide an integrated community-based care system.

## **Panel Discussion 1**

Dr. Takao Suzuki, Director of Research Institute. National Center for Geriatrics and Gerontology, Japan, gave his presentation on "Universal Health Coverage as a basis for 'Active Aging' and Medical and Welfare Services. Health Promotion. and Disease Prevention," highlighting that it covers all citizens, allows for freedom of choice between medical



institutions, and is available for high quality at low cost. He commented on the relative health condition differences between age groups, covering common practices to prevent Sarcopenia as well as dementia in Japan, emphasizing the importance of the health of the brain.



**Ms. Ruth Pang**, Deputy Director, Population Health - 3P Networks, Regional & Community Health Division, Health Promotion Board, **Singapore**, gave a presentation on Active Aging in Singapore, stating that 1 in every 5 men would be 65 years of age or older by 2020, and that important goals would be for the introduction of higher quality medical

care and for seniors to remain employable for as long as possible. She presented plans for a "city of all ages" and commented on enhanced standards for nursing homes to be introduced by 2015, as well as a review of standards for home care and centre-based services.



Dr. Utung Suseno Sutarijo, Head/Director General of the National Institute of HRD and Empowerment, Ministry of Health, Indonesia, gave his presentation on "Moving Towards Universal Health Coverage in Indonesia," noting that 29 million people would be age 65 and older by 2020. He highlighted Indonesia's access to health care and strategies to

enhance policy framework, the current coverage of health insurance, measures being taken to increase social welfare for the elderly and current progress being made for a universal health coverage plan by 2019.

## **Panel Discussion 1**

Hayashi, Dr. Reiko Director. Department of International Research and Cooperation, National Institute of Population and Social Security Research. Japan, started her "The presentation on Role of Community for the Elderly based on the Long Term Care System," stating the majority of the elderly in Japan would be at home, either alone, with



spouses, or with family. She discussed the history of elderly care in Japan and stated that the number of people certified for long-term care support had been increasing.

**Prof. Myint Han**, Director General, Department of Food and Drug Administration, Ministry of Health, **Myanmar**, started his presentation with information on and activities taking place in the ROK-ASEAN Home Care Program, Older People Self Help Group, and the Myanmar Maternal and Child Welfare Association. He then provided details



on important programs in communities, including the Support Group for Elderly Doctors, Myanmar Medical Association, and home-based physiotherapy care project preparation, emphasizing the need for a stronger Asian policy.

H.E Chhay Vanna, Under Secretary of State and Head of the Secretariat. The Secretariat of Cambodian National Committee for Elderly, Ministry of Social Affairs, Veterans and Youth Rehabilitation, Cambodia gave a presentation on "Local Communities that Support Elderly," noting the government's policies on welfare for the elderly, and providing details on good practices, government policy towards OPA, and information on active OPA. He added lessons learned including the need to increase resources in the health sector, the need for more attention towards non-communicable diseases affecting older people,



to encourage further government commitment to provide social welfare, and to encourage more local research and analysis on the needs of the elderly.

**Mr. Seong Jae-kyung**, Senior Deputy Director, Division of Long-term Care Insurance Management, Ministry of Health and Welfare, **Korea**, gave a presentation on "Community-based Support for the Elderly," on a project to mobilize community resources and combine them into tailored services for long-term recipients in order to provide counseling and conduct needs



assessment on long-term care recipients, to create a network of public and private resources available in communities, and to strengthen cooperation between related organizations. He then covered the implementation and management of the project.



**Dr. Maria Teresita Somera Cucueco**, Executive Director, Department of Labor and Employment (DOLE), Occupational Safety and Health Center (OSHC), **Philippines**, gave a presentation on "Philippines Labor Issues of Older Workers," stating that the aging population of the workforce is a growing concern. She highlighted hypertension, muscular-skeletal

diseases, and Alzheimer's disease causing diminished endurance, especially in physically demanding occupations, noting that certain sectors like construction, maritime, or mining would discriminate against older workers and that this was why social protection becomes an issue. She then provided details on personnel planning, age friendly work design, and flexibility of a good work-life balance, concluding that older workers were assets and not liabilities, and that focus on prevention of disease and injury would be important.

# **Panel Discussion 3**



Mr. Takahiro Eguchi, Professor of Social Law, Faculty of Law, Kanagawa University, Japan, gave a presentation on the "Social Involvement and Contributions by the Elderly." providing details company, on government, and local support in the structure of employment measures for the elderly, and the basic policy of the government on employment measures

for the elderly in FY2013. He highlighted measures to promote employment for the elderly for the creation of an "ageless society;" to expand opportunities where the elderly could work in their communities and engage in activities that support society; and the legal obligation of the implementation of measures for securing the employment of elderly persons.



Ms. Dayang Rostinah POKSSP DP Hj Mohd Tahir, Deputy Controller of Pension, Department of Community Development, Ministry of Culture, Youth and Sport, Brunei Darussalam, presentation gave a on social development for the elderly, highlighting measures to promote elderly care such as providing free medical treatment, special fares for

public transport, and old age pension as well as a monthly financial assistance allowances. She noted challenges such as to ensure the sustainability of financial resources, to encourage people to practice living a healthy lifestyle, and to maintain a sustainable delivery of healthcare. Moving forward, Ms. Rostinah noted the need of support systems for those elderly who need long-term care, setting up laws for the elderly, and capacity building programs for NGOs and volunteers on social work.

## **Presentations by Collaborators**

**Ms. Anjana Bhushan** Technical Officer (Health in Development), Division for Health Sector Development, World Health Organization (WHO), Regional Office for the Western Pacific, gave a presentation on Aging and Health, stating that the aging of the population should be seen as a positive sign, but that although different countries are in different demographic transitions, the speed at



which populations are aging is increasing and as a result the window of time for action is shortening. She stated that there were four critical areas of action for which the WHO has developed a framework and noted that it was important not just to collect information but to use it and link it to policy-making; that moving forward will require political commitment; and strengthened partnerships across sectors, levels, and stakeholders.



Ms. Keiko Kamioka, Director, International Labour Organization (ILO), Office for Japan, gave a presentation on "Employment and Social Protection in the New Demographic Context," commenting on the impact that aging societies would have on economic development, poverty, and productivity, noting that social and income security, youth and lifelong employment, international labour

standards, and social dialogue would be important policy responses. Ms. Kamioka addressed key challenges of the demographic transition, such as a sustainable pension system or social protection for older workers. She concluded that policies to reinforce one another in employment, social protection, and economic development; long-term objectives and support throughout the lifecycle of one's working life; and policies to increase productivity should be implemented. She then noted actions that ILO could provide, such as research on employment and social protection.

Mr. Shintaro Nakamura, Senior Advisor on Social Security, Japan International Cooperation Agency (JICA), gave a presentation on "Making the 'Active Aging' Real: How can the development cooperation contribute?" presenting cooperation on universal health coverage, noting thematic papers, study programs, and technical cooperation projects. He then introduced LTOP in Thailand, a



project on long-term care service development for the frail elderly and other vulnerable people. Mr. Nakamura then shared ideas on how to move forward, including sharing experiences and knowledge of common challenges as well as solutions for different contexts.



## Day 2: Wednesday, 4 December 2013

Study visit to Shinagawa City, social welfare organization "Camellia," Silver Plaza Umewaka, and the Tokyo Metropolitan Foundation for Social Welfare and Public Health, facilities involved in providing health and welfare services.





Shinagawa City

Shinagawa City



Silver Plaza Umewaka



Tokyo Metropolitan Foundation for Social Welfare and Public Health



Camellia



Camellia

#### Day 3: Thursday, 5 December 2013

#### **Panel Discussion 4**

**Dr. Tomofumi Sone**, Director for Planning and Coordination, National Institute of Public Health, Ministry of Health, Labour and Welfare, Japan, gave a presentation on "Learning from the Approaches for Active Aging in Japan," providing details on an integrated community care system and detailing various long-term care services. He highlighted Japan's approaches to providing support to the elderly, including long-term care insurance, classification of the client's care-need level by national standards, and various options for both in-home and facility care. Mr. Sone then presented the leading causes of death in Japan,



noting the transition to a rise in lifestyle-related diseases including heart disease, cancer, and stroke. He added that the amount of cases of cancer has been increasing, highlighting that 50% of Japanese people have had at least one type of cancer and 30% of Japanese people have died as a result of cancer, stressing that quality of life becomes important when living with a long-term lifestyle-related disease.



**Dr. Faridah Abu Bakar**, Deputy Director, Family Health Development Division, Ministry of Health, **Malaysia**, gave a presentation on lessons learned from Shinagawa City, stressing that having a detailed database of the population, a development plan to integrate into the local government, the sustainability of a long-term care program, and holistic and

comprehensive health care plans for all levels of care were important. She expressed thoughts she had taken away from seeing the Camellia organization, finding it to be well-organized, well-integrated with the community, and having a young and well-trained team of care staff. She also noted that it was a public private partnership, funding being a key factor.



Mr. Sisavath Khomphonh, Deputy Director, Invalid, Handicap and Elderly Department, Ministry of Labour and Social Welfare, Lao PDR, gave a presentation with a list of good practices that they wanted to promote, such as first aid in the home and income generation programs. He highlighted key challenges for actions on aging and health, including the lack

of a comprehensive legislation on aging, the social security system having not been established in all provinces and districts, and a lack of social workers to provide services for the elderly. In order to solve these problems, he suggested that they continue to extend or establish the mechanism to promote elderly people at the district and village level, continue to extend the social security system into the provinces and districts where it has not been established, train more social workers to provide services for the elderly.

## **Panel Discussion 5**

Mr. Hideaki Nishizawa, Deputy Director, Long-term Care Insurance Planning Division, Health and Welfare Bureau for the Elderly, Ministry of Health, Labour and Welfare (MHLW), Japan, gave a presentation on "The of National Role and Local Governments in Japanese Long Term Care Policy," providing details on the structure of the long term care



insurance system. He then covered the roles of municipal, prefectural, and national governments, and spoke about the transition of long-term care service costs and insurance premiums. Mr. Nishizawa concluded his presentation by stating that the role

of municipal governments will be more important in the future, and that national governments can and should learn from trials of progressive municipal governments.

**Ms. Tran Thi Mai Oanh**, Deputy Director, Health Strategy and Policy Institute, **Vietnam**, gave a presentation on Vietnam's elderly care related policies, health service delivery system, and compared the public and private sector's quality of medical care. On the challenges in caring for the elderly in Vietnam, she stated that there was a shortage in the health workforce, and



that there was also a lack of medicine and medical equipment. Other challenges included the social security fund being at risk of breaking in the future, that there are a limited number of people in the social insurance scheme because the benefit rate is higher than the contribution rate; that compliance of private enterprises in the social insurance scheme for their labor force is very low; that long-term care facilities are limited in terms of quantity; and that even though caring for the elderly is mainly taken care of by the family, a lack of knowledge on health care is a problem.



Chanvit Tharathep, Dr. Deputy Permanent Secretary, Office of Secretary, Permanent Ministry of Public Health, Thailand, started his presentation stating that health literacy, access, quality, and cost needed to be improved, noting that they also have to take into account that demographics, technology, problems and demands will change. He went into detail about

the demographic change and imbalance of age structure, and then provided details on monthly allowance; improvement of quality of life; facilities to support the elderly and disabled; development of healthcare services, support, education, welfare, and careers; and using the elderly as a social force.

## **Panel Discussion 6**

**Dr. Yutaka Horie**, Deputy Assistant Minister for International Affairs, Minister's Secretariat, Ministry of Health, Labour and Welfare (MHLW), Japan, gave a presentation on the "Future Cooperation with and among ASEAN Countries for the Aging Population," questioning the participants on what they would do next and summarizing it with 5W1H.



Dr. Horie compared the aging rates as well as percentages of deaths of ASEAN+3 countries, adding that in Japan more than 89% of deaths are over the age 60, and 51% are over the age of 80. He also compared the pace of aging and the state of income in different ASEAN countries and emphasized health, security, and participation to be key components of cooperation between countries, such as service standards and regulations or an accessible and sustainable health system.



**Mr. Edgar Pato**, Director, Socio-Cultural Cooperation, ASEAN Secretariat gave his presentation on Initiatives of ASEAN in promoting an active aging society. On social welfare, Mr. Pato emphasized commitment in promoting social protection in ensuring optimal benefits, that ASEAN Member States adhere to the key principle that everyone is entitled to equitable access

to social protection, and that this is a basic human right. He highlighted social pension as a means of reducing poverty and promoting the inclusion of vulnerable sectors of society, promotion of self-help and health-seeking behavior as an alternative to lack of long term care services and financing, community involvement and support to the care of aging societies, focusing on strengthening policy formulation capacities of governments as they take on the lead role of addressing the challenges of population aging, and the establishment of an ASEAN Policy Network.



Dr. Shigeru Omi, President, Japan Public Hospital Group financed by Pension Health Insurance and Contributions/Regional Director Emeritus, World Health Organization (WHO), Regional Office for Western Pacific. gave his presentation, commenting that the prevention and control of diseases such as SARS and HIV has been a major area for

collaboration. He also agreed with the emphasis on women and commented that he did not think Japan has stressed this enough.

# **Developing Recommendations**

Following the panel discussions, the recommendations developed from the group discussions were presented for review, and the following comments from the participants were duly adopted by the meeting. Dr. Yamauchi made revisions to recommendations 1, 2, 4, and 11 and spoke about next year's meeting also being about aging, but questioned whether there were any other relevant issues for the agenda. Brunei Darussalam, Lao PDR, and Indonesia suggested issues on social protection as it affects many women and children and Cambodia proposed a focus on urbanization.



# Conclusion

In closing, Dr. Yamauchi expressed that it was a very intense and exciting meeting, that fruitful progress was made on the understanding of the Active Aging situation, and that the meeting had been a good opportunity to share views and discuss measures to tackle future challenges, and that there were a number of meaningful and valuable ideas on how to handle the needs of aging societies. He then thanked everyone for their participation, and brought the 11th ASEAN and Japan High Level Officials Meeting on Caring Societies to a close.



Ministry of Health, Labour and Welfare, Japan