Future Cooperation with and among ASEAN countries for the Aging Population

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Deputy Assistant Minister for International Affairs, Minister's Secretariat,
Ministry of Health, Labour and Welfare, Government of Japan
Lesson Learned

& What to do
Lesson Learned

① **UHC** as a basis for “Active Aging”, Medical and Welfare services, Health Promotion, and Diseases Prevention.

② Local **Communities** that Support the Elderly

③ Social Involvement and Contribution by the Elderly: Social Participation

④ The roles of the Government in “Active Aging”
What to do next?
Active Aging
5W1H

- Why
- Who
- When
- Where
- What
- How
Why Active Aging is Challenge?
● Declining Working Generation
● Urbanization with declining Community strength
● Dominating NCD over infections disease
## Comparison of Aging-Related Indicators (ASEAN+3)

<table>
<thead>
<tr>
<th>Country</th>
<th>Aging rate 1990 (60+) (%)</th>
<th>Aging rate 2010 (60+) (%)</th>
<th>Prospect of aging rate 2025 (60+) (%)</th>
<th>Prospect of aging rate 2050 (60+) (%)</th>
<th>Total fertility rate</th>
<th>Life expectancy at birth</th>
<th>Labor-force participation ratio (60-64 year-old)</th>
<th>Per capita GDP (US$)</th>
<th>Income disparity ( Richest 10% to poorest 10%)</th>
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Source:  
1) UN: World Population Prospects: The 2010 Revision Population Database  
2) Statistical data of respective countries.  
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Sorted by the "shares of deaths 60+" Period: 2005-2010
UN World Population Prospects: The 2012 Revision
When
## Target Countries

| High Income Country | Rapid Aging 2025 aging rate ≥ 20% (60+) (2010→2025) | Moderate Aging 10% ≤ 2025 aging rate < 20% (60+) (2010→2025) | Young 2025 aging rate < 10% (60+) (2010→2025) |
|---------------------|-----------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------
| GDP per Capita: >10,000$ | Japan (30.5%→35.5%) | Singapore (14.0%→27.1%) | Republic of Korea (15.7%→27.2%) |
|                     | Brunei Darussalam (5.7%→12.1%) | | |

| Middle Income Country | Rapid Aging 2025 aging rate ≥ 20% (60+) (2010→2025) | Moderate Aging 10% ≤ 2025 aging rate < 20% (60+) (2010→2025) | Young 2025 aging rate < 10% (60+) (2010→2025) |
|----------------------|-----------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------
| GDP per Capita: >1,000$ | Thailand (12.9%→21.3%) | Malaysia (7.7%→13.1%) | Philippines (5.7%→8.9%) |
|                     | China (12.3%→20.2%) | Indonesia (8.2%→13.2%) | Lao PDR (5.9%→8.4%) |
|                     | Vietnam (8.4%→15.3%) | | |

| Low Income Country | Rapid Aging 2025 aging rate ≥ 20% (60+) (2010→2025) | Moderate Aging 10% ≤ 2025 aging rate < 20% (60+) (2010→2025) | Young 2025 aging rate < 10% (60+) (2010→2025) |
|--------------------|-----------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------
| GDP per Capita: <1,000$ | | | Cambodia (6.2%→9.5%) |
|                     | Myanmar (7.9%→13.0%) | | |

Source:
- UN: World Population Prospects: The 2010 Revision Population Database
Where
● Urban area → Social isolation and economic gap are more evident.

● Rural area → Scarce working generation tends to weaker community strength.
Cooperation Interface on Active Aging between Japan and ASEAN countries

- Empowering Community Strength
- Elderly Club Activities
- Volunteer Network
- Income Generation
- Expanding Elderly Employment
- UHC (accessible and sustainable health system)
- Income Security (public pension)
- Long Term Care Insurance
- Human Rights

- Service Standards and Regulation
- Qualified Human Resources
- Health Promotion Activities for NCD prevention
- Expanding Home Care Services
- Government Commitments to Securing Services

2013.10.30厚生労働省
第3回「国際的なActive Agingにおける日本の貢献に関する検討会」
How
Study Group for Japan's International Contribution to Active Aging

Chair: Dr. SHIGERU OMI
Regional Director Emeritus, World Health Organization for Western Pacific

- **Problem Identification**
  - Analyzing advantages and challenges in ASEAN countries on Elderly care
    - Health and Welfare services
    - Poverty and Income Gap
    - Difference of Urban and Rural area

- **Portfolio of Japan’s Experience**
  - Reorganizing knowledge and experience applicable to Asia
    - Historical Development
    - Community based health and welfare activities
    - Human Resource Development e.g. Caregivers training

- **Identification of Problems and Solutions**
  - Identifying appropriate solution for ASEAN countries from the viewpoint of utilizing both their potential strength and Japanese experiences.

- **Strategy Setting**
  - **Cooperation Approach for Government policies**
    - Measures for the development of elderly care/ policy
      - Model projects and System development
      - Capacity Development
      - Technical Support for Policy making
  - **Framework for International Cooperation**
    - Bilateral Approach
    - Regional/ Global Approach
    - Industry-academia-government Collaboration
    - Open Discussion Forum

- **Development of “User-oriented” Cooperation**

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*Chair: Dr. SHIGERU OMI, Regional Director Emeritus, World Health Organization for Western Pacific*

*2013.6.14 厚生労働省 第1回「国際的なActive Agingにおける日本の貢献に関する検討会’*
DATE: 9:30am-12:00am On 11th November, 2013

VENUE: ASEAN Hall, the ASEAN Secretariat

OPENING REMARKS:
1. H. E. Kimihiro Ishikane, Ambassador of Japan to ASEAN
2. Mr. Karry Maramis, Director for Cross-Sectoral Cooperation, ASEAN Socio-Cultural Community Department, ASEAN Secretariat

GUEST MAIN SPEAKERS:
1. Dr. Yutaka HORIE, Deputy Assistant Minister, Ministry of Health, Labour and Welfare of Japan, “Current status of population aging in Asia and a future direction of international cooperation on ‘Active Aging’”
2. Dr. Chanvit TARATHEP, Deputy Permanent Secretary, Ministry of Public Health of Thailand, “Aging Society in Thailand”
3. Dr. Mu’man NURYANA, Expert Staff on Social Impact Affairs, Ministry of Social Affairs of the Republic of Indonesia, “Inter-generational support flows and its implication to social policy toward active aging in Indonesia”
4. Dr. Dwini HANDAYANI, Associate Director, Demographic Institute, University of Indonesia, “The best practice of social welfare policy in ASEAN region, in the context of Indonesia’s situation and future direction”

OUTCOME:
The seminar overviewed the current situation of aging society in Asia, introduced on-going cooperative activities between ASEAN countries and Japan on this issue, and discussed further regional cooperation utilizing portfolio of experience and knowledge in those countries to address aging society and to achieve “Active Aging.”
International Cooperation in the field of the Elderly Persons between Thailand and Japan

Project on the Development of a Community Based Integrated Health Care and Social Welfare Services Model for Thai Older Persons (CTOP) (Nov. 2007 ~ Nov. 2011)

- Health and welfare community-based service models were developed at 4 project sites in accordance with the needs of the sites, for example,
  1) One-stop service such as health-check and welfare registration for the elderly people
  2) Community rehabilitation
  3) Prevention activities of high blood pressure
- Ownership of the communities was strengthened based on “user-oriented principles”.
- Guideline of developed services was disseminated nation-wide.


- Thai Service models of long-term care will be developed, taking Japanese models into consideration. Service models will be tested both in urban and rural areas and improved.
- Policy development of the sustainable care system in Thai society will be discussed.
- Human resource development will support the to-be developed models.
# Aging issues in ASEAN countries and Japan’s possible contributions

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<tr>
<th>Health</th>
<th>Issues in ASEAN countries</th>
<th>Japan’s possible contributions</th>
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</thead>
</table>
| Facility services | ✓ Secure the quality of services for the middle-income class  
✓ Standardize facility services  
✓ Develop facility services to rural areas | ✓ A variety of facility services developed  
✓ Past achievements in standardization (facility standards), “zero” body restraint and elder abuse prevention at three types of long-term care insurance facilities  
✓ Roles of facilities in the integrated community care system |
| Home services | ✓ Draw up a strategic roadmap towards development of home services  
✓ Develop and improve technical skills for each home services | ✓ History of service development (e.g. Gold Plan)  
✓ Development of various home services and staff training  
✓ Establishment of integrated community care systems |
| Measures against NCDs | ✓ Study and develop specific intervention schemes  
✓ Develop action plans and utilize statistic data | ✓ Initiatives of annual health-check and intervention for lifestyle improvement |

<table>
<thead>
<tr>
<th>Participation</th>
<th>Issues in ASEAN countries</th>
<th>Japan’s possible contributions</th>
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| Social participation | ✓ Promote initiatives by utilizing existing social capital  
✓ Identify the fragile elderly who may not be able to participate in the elderly clubs | ✓ Local residents’ activities organized at a small size  
✓ Basic checklist to identify the fragile (risky) elderly  
✓ Local initiatives for the integrated community care system |
| Measures for employment and livelihood | ✓ Encourage the elderly to actively participate in activities in order to secure caring resources in local communities | ✓ Employment of the elderly through “silver human resource centers”  
✓ Initiatives by local communities based on the elderly resources  
✓ Extension of retirement age |

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<th>Security</th>
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| Health security program | ✓ Extend health programs to the informal sector  
✓ Secure sustainable financing  
✓ Establish basic health services | ✓ Establishment and management of the universal health system  
✓ A variety of reforms for sustainable health system  
✓ Free access and expansion of health services |
| Income security for the elderly | ✓ Improve the coverage  
✓ Improve the take-up rate and manage expenditures (e.g. old-age welfare allowance)  
✓ Improve the saving ratio | ✓ Universal public pension  
✓ Universal income security program for the elderly (e.g. public assistance, old-age welfare allowance)  
✓ Variety of financial instruments, saving programs |
Thailand

● Why: Rapid Aging with declining community strength
● Who: Thailand
● When: 2007-2017
● Where: Community
● What: 1 Problem Finding
   2 Care Model
● How: JICA Project
• Why
• Who
• When
• Where
• What
• How

User-Oriented