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Current State of Research on Social Inclusion in Asia and the Pacific: Focus on Ageing, Gender and Social Innovation (Background Paper for Senior Officials Meeting and the Forum of Ministers of Social Development for the Asia-Pacific Region, 20-23 March 2017): Executive Summary

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Introduction

Countries in the Asia Pacific are undergoing population ageing accompanied by declines in both fertility rates and mortality rates. Population ageing has several significant consequences. An ageing population places a greater burden on the country’s resources and the healthcare system. In addition, the old-age dependency ratio rises, resulting in greater pressure on the younger generation to provide for the growing older population.

Older persons continue to face various forms of discrimination in different sectors in society. That they tend to have less savings and more health issues compared with younger persons reinforces their vulnerability. Because they are a vulnerable group in many societies, it is imperative for governments to ensure that older persons are included in policymaking. Social inclusion of the elderly is critical in communities as it facilitates equal opportunity to financial security, appropriate and affordable healthcare, and active ageing as older persons engage in activities of their choice.

This report provides a review and analysis of the current state of research on ageing, gender and social inclusion in the five sub-regions of the Asia Pacific. It also provides a review on how countries in the region have through social innovation adopted social inclusiveness at the national and sub-regional policymaking levels. Social innovation in this case refers to new ideas (products, services and models) that meet social needs and create new social relationships or collaborations that enhance society’s capacity to act for the benefit of every individual.

The objective of reviewing the current state of literature on ageing, gender and social innovation is to alert policymakers to the research gaps to be filled in order to inform relevant policies to facilitate the social inclusion of older persons at every level in society and, in turn, engender inclusive development. In this regard, building inclusive societies calls for social innovation in knowledge and policies.

The research covered in the chapters in this report includes published literature and documents produced by academics, multilateral and international organizations, and non-governmental organizations (NGOs) made available in printed format and on the Internet.
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Findings from Current Research

Research which explicitly deals with cross-cutting issues related to ageing, gender and social innovation in the Asia Pacific countries tends to be largely fragmented. The lack of research attention on the connecting threads across the areas of ageing, gender and social innovation is mostly a result of the lack of funding. In particular, multilateral organizations have been actively engaged in collecting data at the regional and country levels. However research on ageing, gender and social innovations has not had a decisive influence on policymaking.

The research on ageing and gender tends to be fairly rich and comprehensive, some of which examines social inclusion although not necessarily explicitly. The research on social pensions in South Asia and Southeast Asia has found that coverage tends to be low or uneven, indicating the lack of social inclusiveness as well of older persons, especially women. The implications for women are particularly dire, especially among widows, as women tend to be financially dependent on their spouses. Education is also key to social inclusiveness but in reality that women have less education compared with older men reinforces their marginal status in society which becomes reinforced especially if they are unable to find employment because of the lack of relevant skills. The research in the Pacific found that as women over 60 years are less educated and mostly engage in livelihood activities in the informal sector, it is likely that they have little or no income. Additionally, without the support of family, community and government, women are more likely to fall into poverty.

The social inclusion of older women in policies and programmes related to care receiving are especially important especially because women are more likely to be in need of carers because of living longer than men as well as living longer years in disability. Rural older women were also found to be worse off than their urban counterparts in terms of their health outcomes, aside from tending to live alone and being socio-economically disadvantaged which increases their vulnerability. It was also found that women are less care-seeking because of having less savings. Disability and illness affect older women’s capacity to be gainfully employed in livelihood activities. At the same time, they require healthcare services that can be costly, which in turn increases their dependence on family members. There is very little evidence to show that policies are gender-sensitive and are socially inclusive of older women and their healthcare needs, especially since being financially worse off than older men makes it more difficult for them to access appropriate healthcare.

The research also covers women’s livelihood and the challenges they face. In spite of older women wanting to work, they continue to face several barriers such as the shortage of suitable work, lack of necessary educational and skill qualifications, and employer discrimination.

Research on the rural elderly in Southeast Asia shows their increasing vulnerability as
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Children migrate for work in the cities/towns or abroad. Studies have found how older women are more likely to live alone since they outlive men and are more dependent on kin support structures for their wellbeing. There is some research to show their coping mechanisms, if no children are available to help them.

In the research from South Asia, “active ageing” has been recognized in research and policymaking as an important concept to meet the challenges and maximize the opportunities of living longer by improving the quality of life as people age. However, interventions to foster active ageing will need to focus on social inclusion and participation in all aspects of life by maximizing opportunities for health, participation and security.

There has been substantial research on women in relation to their employment status, educational level and urban/rural residential status with the aim of facilitating social inclusiveness among these groups. Much less is known about older women among ethnic minority groups and migrant communities.

The research has also highlighted the fiscal implications arising from population ageing such as healthcare spending and long-term care. Adaptive actions to support government policies on active, healthy and meaningful ageing are critical. These include reforming the healthcare system with a focus on preventative medicine, primary nursing and deeper diagnosis; reforming the education system to facilitate development of cognitive skills required for efficient work with a longer employment duration; and reforming labour market institutions so as to reduce older women’s vulnerability. Moreover, the establishment, implementation and sustainability of pension schemes to cover older women remains to be a major challenge.

Social Innovations to engender Social Inclusiveness

- Adjusting the pension system to account for longevity and inflation and instituting multiple health and long-term care reforms such as home- and community-based services. (Japan)
- Volunteer work schemes have given a new lease of life to some former teachers and other public servants who were retired early. (Fiji)
- Creation of ‘men’s sheds’ in neighbourhoods to facilitate elderly men’s interactions and relationship building based on socialization activities such as carpentry, joinery and other hobbies to prevent depression. (Australia)
- An innovative state-civil society model of care which utilizes volunteers from the local community trained to identify problems of the chronically ill and to intervene effectively with active support from a network of trained professionals (India)
- Legislating family care to make it legally binding for children and heirs to provide monthly maintenance to older parents. (India)
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- In cases of physical and mental abuse, a platform to which the elderly can reach out was created to reach out to the elderly who do not have anyone else to turn to for help. (Philippines)

- Recognizing and facilitating the active involvement of older persons by raising awareness of the roles older persons and people with disabilities can play in their families and communities during emergency responses. (Philippines)

- Healthcare programmes for the destitute provided at all government hospitals and health centres so that older persons above 60 and above can access free medical services. (Thailand)

- Tax incentives and subsidies have been enforced to encourage families to care for the elderly. (Singapore)

- Legislating family care so as to prevent older men from abandonment by their children since they have weaker social networks than older women. (Singapore)

Recommendations

**General**

- Member States of the Asia Pacific will support a two-year pilot research project as well as related knowledge brokering activities on the themes of ageing, gender, social inclusion and social innovation.

- At least US$ 300,000 need to be mobilized to support MOST research on ageing, gender and social inclusion over a period of two years.

- Governments, corporates and civil society organizations should aim to bridge the gap between research and policymaking in the areas of ageing, gender and social inclusion in the next two years.

- A culture of evidence-informed policymaking and advocacy in the areas of ageing, gender and social inclusiveness should evolve.

- National and regional level data bases and analysis should include practices that represent the best fit in social innovations.

- Member States should aim to develop cross-national, multidisciplinary and longitudinal research on the long-term interrelationships among changing family structures, work, health and economic status for evidence-informed policy responses and policy choices on ageing by building the capacity of research centres and institutes through collaboration and the collection of comparative, harmonized, standardized and readily accessible data over the next two years.

**Sub-regional based**

- Research has found that the rural elderly, female and the oldest old tend to suffer from poverty much more than their urban counterparts. Studies should
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be conducted among these groups to inform policies on pension, medical and long term care services and insurance, and investment and social security coverage to bolster policies and programmes. (East Asia)

- Research on social care funding, sustainable home- and community-based long-term care systems, and improved services for the elderly, and the role of telecare in services for older people to meet the needs of the elderly should be supported. (East Asia)

- Research to empower younger people and women in early life stages so that they are better protected in old age should be strengthened. Specifically in the next two years, research on the following areas should be stepped up: women in the workforce, pension schemes, and a focus on healthcare from hospital care to primary care. (East Asia)

- Member States should conduct a study on the reliability and comparability of national data with international standards and the obligations of governments to track the situation of the elderly with a focus on women, and the improvement of their living conditions, pensions, the elderly support programmes, including disabled older persons. (Central Asia)

- Research should extend to cover older women, in particular older women with disabilities and rural older women since these groups of women tend to have limited access to healthcare. (Central Asia)

- Member States should channel funds into building the research capacity of younger researchers specializing in social science degrees so that they can pursue research on ageing. (Pacific)

- Research on interventions to foster active ageing should focus on social inclusion and participation in all aspects of life by maximizing opportunities for health, participation and security. (South Asia)

- Research should explore women’s need to engage in paid employment in old age in response to the growing numbers of women joining the old age cohort. (Southeast Asia)

- The role of pension systems should be researched further, especially how they would generate the social inclusion of older persons, especially older women who have worked in the informal sector. (Southeast Asia and South Asia)

- Research attention should be paid to how senior citizens’ organizations and clubs might meet the needs of older women, especially the need of older persons from the rural areas because of rural-urban migration of female family members. (Southeast Asia)

- There should be research on how older women might benefit from medical health insurance schemes especially since older women have less education than older men and are more likely not to have engaged in paid employment
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and thus are left to struggle to have to pay for healthcare services because of inadequate savings. (Southeast Asia)

- There should be research on the prevalence of mental health issues including depression among the elderly, especially women since they make up a growing proportion of the elderly and suffer greater morbidity compared with older men. (Southeast Asia)