AgeNews

Sharing information to strengthen HelpAge Network

Issue 21 April 2017





In this issue of AgeNews, we would like to bring your attention to the recently launched report on income security, which discusses differences in Bangladesh, Nepal, the Philippines, Thailand and Vietnam. Read an article by author Charles Knox-Vydmanov, Social Protection Policy Adviser of HelpAge International. For this issue, we also interviewed Professor Dr Bazlul Haque Khondker, an economics expert with a wealth of knowledge on social pensions and population ageing in South Asia.

We also report on the successful closing of HelpAge's multi-country project on ageing in the ASEAN region (the AMCo project) funded by the EU which ended in January 2017. An Age Demands Action campaign on health was also one of the key events among network members.

We have been gradually moving towards an integrated HelpAge Asia Pacific Region, as I informed the audience of AgeNews in past issues. April marks the beginning of that merged region or hub for HelpAge. Needless to say, we are still completing the change, and some country offices are still immersed in the change process. We are now called the *Asia Pacific Regional Office*, based in Chiang Mai, Thailand, with four HelpAge International country offices in this region: Bangladesh, Myanmar, Pakistan and Vietnam.

With wider geographical coverage of our work, AgeNews will continue to bring you stories from various countries and provide space for discussing emerging issues related to population ageing in the region.

AgeNews is under construction – see you again with our new look in August 2017.

Eduardo Klien Regional Director Asia Pacific

Long-term care in Asia Pacific region: ADB-HelpAge network study

▶ Regional

Long-term care (LTC) is one of the key emerging issues for low- and middle-income countries (LMIC) in the Asia Pacific region as they experience rapid population ageing and changing family support structures. Current care support is characterised by informal care, particularly by family carers, and private care for those who can afford it. This will be insufficient for the future, because of the growing numbers of people aged over 80, multi-morbidities resulting from the non-communicable disease epidemic, and other concerns such as dementia. As a result, international bodies and national governments are beginning to focus on LTC.

An early step towards national LTC systems is under way through country diagnostic studies on the long-term care (LTC) systems in six countries in the region (Indonesia, Mongolia, Sri Lanka, Thailand, Tonga and Vietnam). The studies, being carried out on behalf of the Asian Development Bank (ADB) by HelpAge and its team of expert consultants, will deliver valuable assessments on the gaps and opportunities across four key components: **governance**, including policies and legislation and quality assurance and monitoring; **financing**, covering how care is financed and by whom, strategies for cost containment and establishing financial support mechanisms; **human resources and training**, referring to ensuring a skilled and sufficient workforce; and **service delivery**, which determines who provides services and encourages the development of a sufficient market for care supply and demand.

National consultation workshops will be held between April and June 2017 to ensure the engagement of key stakeholders in the content and use of the final versions of LTC systems. Capacity building workshops will then be held from June–December 2017, helping to carry forward the findings of the studies into action through national LTC policy and programme development.

(CL)

Prince Mahidol Award Conference (PMAC) 2017

▶ Regional

The Prince Mahidol Award Conference (PMAC) is held annually in Bangkok, Thailand, and is hosted by the Royal Thai Government. The theme for the 2017 conference, which was held on 29 January to 3 February was 'Addressing the Health of Vulnerable Populations for an Inclusive Society'. The conference gathered a large number of participants representing health economists, academics, government, international organisations, civil society organisations, international non-profit organisations and, following the theme of the conference, vulnerable groups.

Discussion focused largely on access to health care and health equity without stigmatisation and marginalisation of individuals, families and groups. Universal Health Care (UHC) was discussed in depth as a vital step towards inclusive healthcare, although UHC does not guarantee health rights. It is therefore important that countries find the best way to achieve minimum health care standards and to ensure that socio-economic determinants of health are fully considered and addressed.

The role of state representatives and their political commitment was highlighted as the key to inclusiveness and to ensure that 'no one is left behind' according to the 2030 agenda of Sustainable Development Goals (SDG).

Regional network focuses on women's financial security,

old age social protection

▶ Regional

The Regional Learning Network on Women's Financial Security in Old Age highlighted the increasing need for old age social protection in its 2nd Multipartite Regional Meeting on the Financial Security of Women in East and Southeast Asia held last year (10–11 October 2016). The meeting focused on presenting the impact of various national financial security programmes and social protection schemes on older women and sharing some innovative approaches in addressing the issue.

The network is a pioneering initiative by the International Longevity Centre Singapore of the Tsao Foundation that aims to bring together key policymakers from the 10 member countries and country partners of ASEAN Plus 3, relevant NGOs, policy think tanks and international organisations and leading academics, to bring attention to and action on the issue of financial security among older women. It aims to catalyse mainstreaming of gender in policy and program development; build public-private partnerships that will promote more effective policy-action translation in addressing the issue; promote networking and workgroups, learning exchanges and partnerships with broader regional organisations for advocacy; and initiate research collaborations for policy analysis and programme evaluation.

The regional network initiated a collaborative research project on women's impoverishment over the course of their lives. Country-level studies are being initiated simultaneously, and comparative analysis will also be attempted across all participating countries—Indonesia, Malaysia, Myanmar, the Philippines, Singapore, Thailand and Vietnam.



Recently, 16 participants who are research partners met at the "Strategic Advocacy Campaign Workshop" on 21–22 April 2017 in Chiang Mai, Thailand. The workshop had three key objectives:

- For each country to share the highlights of respective draft reports
- For the network to discuss the key direction for regional papers, and
- To develop plans for strategic advocacy at the country and regional levels.

The "Asia Women's Forum on Financial Security" was also formally launched as an online platform that will facilitate continuous learning among network partners as well as the public.

(MG)

For more information on the network and the regional meeting, visit www.asiawomen.org.sg. If you are interested in collaborating in the ongoing research or participating in future network initiatives, do get in touch with Ms Mary Ann Geronimo, at mbgeronimo@tsaofoundation.org.

Pakistan's first census in almost two decades

▶ Pakistan

Pakistan has embarked on a national census for the first time in 19 years. The process will take 70 days and is divided into two phases. The first phase was conducted from 15 March to 15 April and the second phase will be from 25 April to 25 May 2017. Nearly 120,000 specially trained government workers are involved in conducting this door-to-door campaign to count homes and individuals.

As Pakistan has not held a census since 1998, the country still uses figures from the previous census for planning development programmes.

With 190 million people in 2015 (estimated by the World Bank), Pakistan is the sixth most populous country in the world. According to data from the World Population Prospects, there are about 15 million people aged 60 and over living in Pakistan, which makes up 8 per cent of the total population.

The Minister of State for Information and Broadcasting, Maryam Aurangzeb, said: "Pakistan is ready for the sixth housing and population survey... As we all know, it has been 19 years since we last conducted a census. We all know how important the distribution of resources, evidence-based legislation and policy-making are for social service provisions in our country."

Officials also said the U.N. Population Fund has agreed to assign international observers to oversee the administration of the census, and final results are expected by the end of July.

With more accurate information, we expect to get a better understanding of the country's demography, which can translate into more appropriate policies on health, education, resources management, social services and, of course, on older people in the country.

(WR)

Regional programme on strengthening the civil society organisation (CSO) network on ageing completed successfully

▶ Regional

The head of operations for the European Union in Thailand, Mr Jerome Pons, inaugurated the closing meeting of the Regional Project Management Committee for the Project on Strengthening the CSO Network on Ageing as a Development Partner in Southeast Asia held in Chiang Mai. Participants were from Cambodia, Indonesia, Myanmar, the Philippines, Thailand and Vietnam. The objective of this meeting was to review, reflect and plan more effectively after completion of the project.

Mr Pons mentioned one achievement of this project to Citizen News Service (CNS), on the sidelines of the closing workshop, "While different countries may be at different levels of facing different ageing issues, every country will have to face the consequences of ageing on its own terms—there is no way one can get around that. CSOs working in different



countries will have to take up the issues that are relevant in their local context and come up with their own solutions to their specific problems. And this is the most important 'take home' message from this type of dialogue— It is up to their own people to deal with their own issues. We simply help them by putting in a little bit of capacity building so that they can engage with their own authorities and parliaments, to improve their own lives at the end of the day".

This regional programme was completed successfully and a stronger bond was built among the participating network members. As a result of this programme, we have been able to create a concrete collaboration and build our capacity for communications that HelpAge and its partners can take forwards to advocate policy changes for older people in the region.

(PN)

Cambodia's national health care policy and strategy for older people

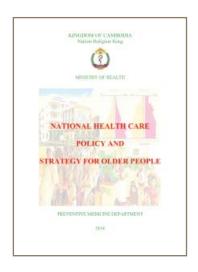
▶ Cambodia

Over recent decades, Cambodia has seen a significant increase in the life expectancy of its people. This increase has been largely due to significant developments in healthcare, brought about by a strong political commitment to improving the performance of the health system and increasing access to health services through the implementation of social protection schemes. There has also been considerable economic growth and poverty reduction, which has contributed to improved health of the Cambodian population.

These changes are contributing to both a demographic and epidemiologic transition in Cambodia. This is seen both in the steady growth in the percentage of people aged 60 years and over, and in the increase in the prevalence of noncommunicable diseases among adults.

On 14 February 2017, the Cambodian Ministry of Health launched the recently endorsed *National Health Care Policy and Strategy for Older People*. This new policy was developed through review and refinement of the 1999 National Policy and Strategies on Health Care for the Elderly and Disabled People.

The new policy includes a broad range of strategies and action plans to move the health system towards a comprehensive system of short-, mid- and long-term care for older people. This is in line with the current National Ageing Policy and the Sustainable Development Goals (SDGs). The new health policy was disseminated to ministries and departments responsible for its implementation, as well as to key stakeholders, including NGOs working in the health sector.



You can download the paper from: http://helpagecambodia.org/en/display/content/6_26_48

National level consultative workshops in Myanmar for development of national strategic plan on NCDs (2017-2021)

▶ Myanmar

Non-communicable Diseases (NCDs) are silent killers and they are becoming a major public health problem in Myanmar. According to the World Health Organization, around 59 per cent of deaths in Myanmar occur due to NCDs. Their prevalence is increasing because the lifestyle of people is changing very fast; people are eating more unhealthy food, they are doing less physical activity, and smoking and consumption of alcohol is increasing sharply.

In order to address NCDs with a comprehensive, multi-sectoral approach. a National Strategic Action Plan (NSAP) on NCDs (2017-2021) is being developed. The HelpAge International Myanmar office is supporting the Ministry of Health and Sports in developing the NSAP on NCDs through a thorough consultative process. In this process, HelpAge International and its partners in collaboration with the Ministry of Health and Sports organised two national



Hay Mar Hnin/HelpAge International

consultative workshops in Nay Pyi Taw on 16-17 February and 21-22 March 2017. Both workshops were attended by senior government officials.

The objective of the first workshop was to develop a framework for the national strategic action plan and discuss the current status of NCDs as well as ways of reducing their incidence in Myanmar. Based on the discussions, a draft national strategic action plan was developed. The objective of the second workshop was to discuss this draft national strategic plan and get feedback and further input from the concerned stakeholders.

Sessions were held in both workshops on advocacy and leadership for multisectoral action, health promotion. strengthening health systems and

monitoring, evaluation and research on NCDs. Based on the deliberations in both workshops, a national strategic action plan on NCDs for Myanmar is being developed based on the core values of equity, inclusiveness, accountability, efficiency and sustainability. The overarching principles of this national strategic action plan are geographical representation, primary health care, decentralised planning, a systematic approach, community engagement, multi-sectoral action, a life-course approach, evidence-based strategies, universal health coverage and a balance between population-based and individual approaches.

(TRJ)





The Asian Conference on Aging & Gerontology 2017

The Asian Conference on Aging & Gerontology (AGen) is a multidisciplinary conference to examine international issues relating to the ageing population worldwide. The conference will be held in Kobe, Japan from 8 to 11 June 2017 with the theme "East Meets West: Innovation and Discovery". It offers the chance for scholars and practitioners to exchange the latest ideas and approaches, attend workshops and interact with experts in the field.

The conference website is https://agen.iafor.org/



The 2017 Global Platform for Disaster Risk Reduction

Established in 2006, the Global Platform for Disaster Risk Reduction is the world's foremost gathering of stakeholders committed to reducing disaster risk and building the resilience of communities and nations. The next Global Platform will be held in Cancun, Mexico on 22-26 May 2017. It will be the first opportunity for the international community to review global progress in the implementation of the Sendai Framework for Disaster Risk Reduction which was adopted in Japan in 2015.

For more information, please visit http://www.unisdr.org/ conferences/2017/globalplatform/en

Myanmar

▶ Myanmar

On 16 March 2017, a forum to raise awareness among parliamentarians on Myanmar's National Universal Social Pension Scheme was held in Pyidaungsu Hluttaw. The government of Myanmar will be funding and rolling out the first National Universal Social Pension Scheme starting this June, providing a monthly cash transfer of K10,000 to all people aged 90 and above in the country.

Approximately 200 parliamentarians, representatives from various Ministries, Livelihoods and Food Security Trust Fund (LIFT), HelpAge International, Myanmar Ageing Network, the Older People's Federation and other civil society organisations participated in the forum to discuss the roles of parliamentarians and the implementation of the scheme.





The Union Minister, H.E. Dr Win Myat Aye, opened up with a speech about the objectives of the social pension scheme, highlighting the importance of active ageing and dignity for older people in Myanmar. He asked for advice from parliamentarians on rolling out the social pension scheme effectively and the formation of social protection subcommittees at a village level.

Dr. San San Aye, Acting Director General of the Department of Social Welfare, presented the rationale behind a universal social pension scheme in Myanmar, underlining the significant difference that a monthly transfer of K10,000 can make to the lives of older people. A video of a pilot social pension cash transfer programme from June 2015 to May 2016 was shown to the participants to enhance their understanding of the implementation of such a programme.

Parliamentarians discussed questions about eligibility, inclusion and exclusion errors, accountability issues and the formation of the social protection subcommittees. One of the ways to ensure that cash delivery is made to the right people is to raise awareness among the community through distributing cartoons about the pension (see below). One parliamentarian also commented on the importance of Older People Self-Help Groups (OPSHG) being involved in the sub-committee.

The forum ended with fruitful discussions and ideas from parliamentarians, which are very important to guarantee the effectiveness of the implementation of the scheme.

(PS)







How does growing older affect a person's income security in Asia?

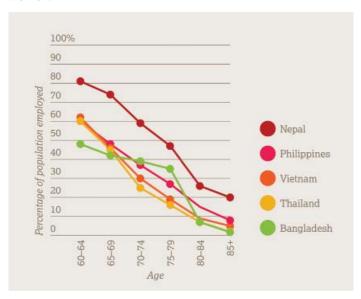
Income security in old age is becoming an urgent issue in the context of rapid population ageing. This is happening everywhere in the world, but the rate of change is at its fastest in Asia. However, until recently, comparative analysis to examine the situation has been relatively limited. To fill this gap, HelpAge International selected five Asian countries in which to study the income security of older people and launched a report in February.

Research was conducted with the support of the United Nations Population Fund (UNFPA) in five Asian countries: Bangladesh, Nepal, the Philippines, Thailand and Vietnam. The study paints a picture of three sources of income for older people: work, family support and social protection.

Overall, the report highlights the fact that populations across the region face real challenges in continuing to work into old age, and that families can't be expected to fill the gap on their own. The report suggests that improving both the coverage and adequacy of pension systems is the best way to maintain the dignity and wellbeing of older people, and also provide a boost to their families.

Working in old age

In all five countries, the likelihood of working is lower at more advanced ages, as are the hours spent in work. Major causes of lower levels of work for both sexes are the increasing prevalence of ill health and disability at more advanced ages, while family responsibilities are also a major reason for older women.



However, it is simplistic to characterise later life as a time of economic inactivity. A high proportion of older people continue working above the age of 60: figures are around 40 per cent in Bangladesh, the Philippines, Thailand and Vietnam, and 66 per cent in Nepal. Even at more advanced ages many older people still work.

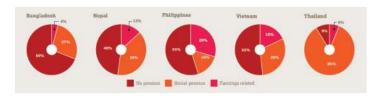
Income from family

Families play an important role in supporting older people. Most older people in the region either live with their family, or have children living in the same community. Transfers of cash or goods are also common: 79 per cent of older people in Thailand and 67 per cent in Vietnam report receiving income from family.

Nevertheless, there are strong indications that income from the family is often inadequate. In the Philippines, Thailand and Vietnam only around a third of older people consider contributions from their children to be their main source of income. Many of their families are also struggling with low incomes.

Social protection

In all the countries apart from Thailand around half of older people – or more – receive no pension at all. Each country has a pension system which combines earnings-related schemes with non-contributory social pensions. Total coverage of these pensions ranges from 30 per cent in Bangladesh to more than 90 per cent in Thailand.



Social pensions have made a major contribution to expanding coverage. Earnings-related pensions have struggled to expand coverage, while the social pensions introduced in the last two decades have been the main cause of success in expanding coverage.

Universal schemes are far more successful than meanstested schemes at reaching the poorest older people. In Bangladesh and Thailand, over half of the intended beneficiaries were incorrectly excluded by poverty-targeted schemes. By contrast, near-universal social pensions have been successful at reaching virtually all poorer older people.

Adequacy of social pensions remains low with the exception of Nepal. Benefit levels of social pensions in Bangladesh, the Philippines, Thailand and Vietnam are below the average for the region. Despite being the poorest country in the group, Nepal has the highest benefit level in absolute terms (US\$19), and relative to average incomes (31 per cent of GDP per capita).

Expenditure on social pensions remains low, which suggests that - with political will - there are affordable and sustainable options to expand coverage and adequacy. For example, expenditure on social pensions in Bangladesh, Vietnam and the Philippines currently represents only around 0.1 per cent of GDP. Even with rapid ageing of their populations, these schemes will remain very low in cost.

(CK & PM)



Work, family and social protection: Old age income security in Bangladesh, Nepal, the Philippines, Thailand and Vietnam

You can download the full report and infographic summary from http://ageingasia.org/eaprdc0045/

Following the launch of the report, a webinar presenting the findings was hosted on www. socialprotection.org. You can view the recorded webinar on YouTube: https://www.youtube.com/ watch?v=fk2iKH8Xs1g

Filipino civil society groups push for a universal social pension for senior citizens



▶ Philippines

In the seventh year of the social pension programme, the Coalition of Services of the Elderly (COSE) and the Confederation of Older Persons Associations of the Philippines (COPAP) is urging the government to expand social pensions by immediately providing PhP500 monthly to all senior citizens, and later on, increasing this amount to PhP1,500. A new report published by COSE and HelpAge International in February shows that a universal social pension scheme is feasible.

Other organisations, namely Social Watch Philippines, the Freedom from Debt Coalition and Dignidad have joined COSE and COPAP in pushing for a universal social pension that would close the gap in pension coverage of the Filipino elderly and reduce poverty and inequality in the country.

Noting that income poverty covers about one fourth of the population, while self-rated poverty about half, Dr Ma. Victoria Raquiza of Social Watch Philippines observed that, "either way, the Filipino poor, which includes older

people, is not a small or residual category. As such, it's high time we began to explore more universal, rather than just targeted, approaches."

A universal approach would cover all senior citizens while providing security, particularly for those in the informal sector, as compared to the current targeted social pension, which has proven to be highly inadequate.

The key benefit of a universal social pension is that all older Filipinos will be assured of a pension, ensuring dignity to those in their old age while also boosting a wider set of development outcomes.

"A PhP1,500 pension for all older people could lift almost three million Filipinos out of poverty, while it would also systematically reduce inequality in the long run." explained Aura Sevilla, co-author of the study and COSE Project Coordinator.

Other findings show that a universal social pension can reduce child labour, increase school enrollment, and help families to invest in livelihood activities.

(HG)

Please visit COSE website (http://www.cose. org.ph/) to download the full report on feasibility of universal social pension in the Philippines.

Interview

Take 5 minutes with Dr Bazlul Haque Khondker, Professor at the Department of Economics, University of Dhaka.

His areas of expertise include public and economic policy analysis, fiscal policy and taxation in relation to welfare, poverty reduction and social exclusion. He has worked with many international organisations such as the World Bank, UNFPA and IDRC.



What are some of the reasons that make social protection for older people so important, economically and socially?

A large number of older people are either poor or vulnerable to sudden change, and they enter into retirement without adequate savings or assets. In a competitive labour market, it becomes increasingly difficult for an older person to get work to supplement their savings or other income (including pension). Traditionally (at least in Asia), the family has been an important source of financial and material support for older people. However, a recent study by HelpAge International and UNFPA provides new evidence that there are limits to the support that older people can get from family and work. In this challenging environment, adequate social protection is very important for older people around the globe.

What are the current trends in South Asia on social protection?

The largest proportion of the world's poor and vulnerable population lives in South Asia. Yet spending on social protection there is low. From a World Bank study (2015)1, it can be concluded that net spending on social security as a percentage of gross domestic product (GDP) for South Asian nations between 2010 and 2014 was slightly above 1 per cent, while the average for developing countries was 1.6 per cent of GDP. The Asian Development Bank (ADB) constructed a 'Social Protection Index' (SPI) for 35 Asia-Pacific countries using 2009 data (ADB, 2013)2. The SPI was designed to help monitor progress on social protection as well as to facilitate cross-country comparisons. The ADB found that the overall average SPI for 35 countries for 2009 was 0.11. The SPI for South Asia (0.061) was lower than other

regions (Central and West Asia = 0.157; East Asia = 0.24; Southeast Asia = 0.095; and Pacific = 0.077). Given the low and inadequate levels of social protection, South Asian countries must increase spending as well as embark on a more comprehensive, inclusive and life-cycle based social protection system.

How do countries respond to the issue of population ageing, particularly at policy level?

The process and state of ageing is not homogenous across nations. A country is labeled as 'aged' when more than 10 per cent of the population is aged over 60. Almost all developed countries reached the ageing threshold long ago and have designed comprehensive support schemes (including pension) for their elderly population. Currently they are pursuing reforms using various schemes to achieve fiscal sustainability. However, in developing countries – where the average age is still young - the ageing issue has not yet attained the importance it deserves. Most developing nations will reach the 'aged' threshold somewhere between 2030 and 2050, depending on their fertility and mortality trends. Since most governments in developing nations usually have a short-term vision and focus on solving short-term challenges, their focus is on reducing the infrastructure gap, employment and



Waqas A Qureshi/ HelpAge International

income generation, and poverty reduction. However, I think developing counties should consider ageing as a priority and start preparing themselves to address the ageing issue.

How can civil society or the HelpAge network play a role in advocating for the provision of social protection by governments?

Governments around the world usually like to maintain the status quo on policy issues. It is not easy to motivate them. Moreover, there is a misconception that investment in social security is one-way traffic with very little or no impact on income and employment generation. However, recent studies tend to contradict these misconceptions. There is growing evidence that an effective social protection system not only helps reduce poverty but also leads to growth in income and employment. I think the best approach for civil society, including HelpAge International, is to push the social protection agenda strongly on the basis of evidence-based findings. They should also emphasise the high cost of doing nothing, which may eventually lead to social unrest and conflict.

You can read the full interview at http://ageingasia.org/resources/feautures/

Footnotes:

- 1. World Bank (2014), *The State of Social Safety Net 2015*, Washington DC, 2015.
- 2. ADB (2013), *The Social Protection Index:* Assessing Results for Asia and the Pacific, Manila, 2013.

Implementation of Vietnamese government Decree 1533 – National programme on ISHC replication 2016-2020

A further step: Announcement of Steering Committee

Last year, on 2 August, the Prime Minister of Vietnam officially approved the plan for the replication of the Intergenerational Self-Help Club (ISHC) model throughout the country (Decree 1533). The Vietnam Association of the Elderly (VAE) has since worked in collaboration with relevant ministries to implement the plan.

On 10 March 2017, the Vietnam Association of the Elderly (VAE) announced the decision to establish a Steering Committee for the National Programme on ISHC replication. The steering committee consists of nine members, including the Deputy Minister of the Ministry of Labour, Invalids and Social Affairs (MOLISA), the Deputy Minister of the Ministry of Health (MOH), the Deputy Minister of the Ministry of Information and Communication, the head of the Vietnam National Committee on Ageing (VNCA), the Chairman and Vice Chairman of the Vietnam Association of the Elderly (VAE), the Vice-Deputy of the Department of Science, Education and Culture and Society, Government Office.

By the end of 2016, there were over 1,057 ISHCs spread across 18 provinces of Vietnam. In 2017, this national plan aims to establish 146 more ISHCs and to establish another 2,500 ISHCs in 45 cities and provinces by 2020.

The VAE is cooperating with MOLISA, MOH and VNCA to implement Decree 1533. The VAE already has a Memorandum of Understanding (MOU) with MOLISA for the period 2014–2018 and is now working towards a MOU with the MOH for the period 2017–2020.

(LMH)

Rapid Intergenerational Self-Help Club (ISHC) replication in Vietnam

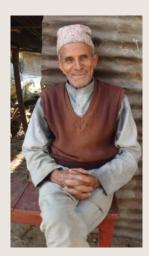
Thanks to a great effort in advocacy by the Vietnam ageing network, the ISHC model has been incorporated into policy not only at national level but also at the local level.

To implement Decree 1533, many provinces have started to establish new ISHCs. As a result, in the first three months of 2017, four provinces have already approved their ISHC replication proposal, including Yen Bai, Lao Cai, Ninh Binh and Dong Thap, increasing the number of provinces having approved ISHC replication to nine. Specifically, by 2020, Yen Bai target 35 ISHCs, Lao Cai: 25 ISHCs; Ninh Binh: 73 ISHCs and Dong Thap: 36 ISHCs. In addition, seven more provinces are waiting for their ISHC replication proposal to be approved by the provincial authority.

With more provinces pending approval of their ISHC replication proposal, it is expected that the number of ISHCs will increase rapidly in the coming years, which will provide care for and promote the role of older people so that they can have a cheerful, healthy and meaningful life.

(TBT)

Story of change – HelpAge intervention to the 2015 Nepal earthquake Story from the field



Shiva Prasad Lamichhane, 71 years old, is a resident of Ratamate-1, Nuwakot District, Nepal. He has three sons and four daughters, but they have their own families and live on their own. He is one of Nepal's earthquake victims.

"I had three houses before the earthquake, but now I don't even have one house to live in", he said.

Under the HelpAge earthquake response project, he and his wife received unconditional cash, health services and a transitional shelter.

"We bought clothes, medicines, and food with the cash grant of Rs.7500", he added.

"After my eye check-up in the health camp, I received a pair of glasses, which helped me to read the newspaper and calendar by myself, so I don't need to ask anyone else to help me".

Currently, he is living with his wife in the transitional shelter built with the support of HelpAge. Also, as an active member of the Transitional Shelter Coordination Committee (TSCC) formed by the HelpAge transitional shelter programme, he has a very positive attitude towards interventions by HelpAge.

"I am happy and thankful for the CGI sheets and kits provided to us for transitional shelter support. We cannot even buy these kinds of materials here."

(PR)

Immediately after the earthquake on 25 April 2015, HelpAge International Nepal initiated its 2015 Nepal Earthquake Response Project (NERP) to urgently address the needs of earthquake-affected older people. As part of emergency relief, unconditional cash grants were given to 10,516 older people in the 11 most-affected districts to meet their immediate basic needs.

Age Demands Action on Health: World Health Day

Age Demands Action (ADA) continues to encourage countries across the globe to challenge age discrimination and to take action for older people's rights. One of the key moments for the campaign this year was ADA on Health which took place on 7 April, World Health Day, with a focus on depression.

Depression is an illness characterised by persistent sadness and a loss of interest in activities that you normally enjoy, accompanied by an inability to carry out daily activities, for at least two weeks.

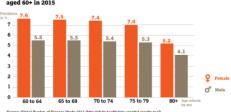
The total number of people living with depression in the world is 322 million and nearly half of these people live in South-East Asia and the Western Pacific (48 per cent)¹. Interestingly, a report by the WHO reveals that prevalence rates vary by age, peaking in older adulthood (above 7.5 per cent among females aged 55-74 years, and above 5.5 per cent among males)².

As well as the typical life stressors common to all people, many older people lose their ability to live independently because of limited mobility, chronic pain, frailty or other mental or physical problems, and require some form of long-term care. Older people are also more likely to experience events such as bereavement, a drop in socioeconomic status with retirement, or a disability. All of these factors can result in isolation, loss of independence, loneliness and psychological distress.

This year campaign partners across Asia took part in ADA on Health. This included Bangladesh, Fiji, India, Indonesia, Cambodia, Vietnam, Nepal,



Global prevalence of depressive disorders among people aged 60+ in 2015



Pakistan, Sri Lanka and Thailand. As well as meetings between government officials and older people, awareness raising through radio interviews, workshops and health screenings took place.

Meetings with decision makers and governments

- Bangladesh ADA representatives met with the Department of Social Services (DSS), while the key government agencies that are responsible for ensuring social services and protecting older people in Thailand and Cambodia also met ADA representatives.
- In Nepal, older people attended a
 meeting with the Ministry of Health
 and hosted an interaction programme
 on World Health Day with the Health
 Minister, the Secretary of Health and
 the Director General of the Department
 of Health. In Sri Lanka our partner also
 met representatives from the Ministry
 of Health and the Ministry of Social
 Services.

Raising awareness of depression

- Bangladesh created a human chain and hand-outs were distributed during their events.
- In Cambodia events took place on 7
 April in Banan district. The directors of the Provincial Health Department, the Transcultural Psychosocial Organisation, key government officials and local stakeholders participated. Campaigners from older people's associations made speeches and called for support for the campaign.
- In Indonesia, our partner hosted a seminar to raise awareness on depression for older people, caregivers and the media.



Health checks and screenings for older people

This year many of HelpAge's campaign partners also provided training for older people on the triggers of depression, identifying the symptoms, and coping mechanisms.

- In Bangladesh our partner organised a health camp where basic health check-ups and cataract screenings took place. Indonesia also conducted screenings on depression of older people and the findings were then presented to policy makers.
- Training sessions were held in Thailand and meetings between older people and homecare volunteers were arranged to raise awareness, allowing caregivers to share their knowledge with their communities.

(BH)

1 & 2. http://apps.who.int/iris/bitstream/10665/254610/1/WHO-MSD-MER-2017.2-eng.pdf?ua=1 p.8

Resources

Publications



Work, family and social protection: Old age income security in Bangladesh, Nepal, the Philippines, Thailand and Vietnam

HelpAge Asia Pacific



Older people's associations: a briefing on their impact, sustainability and replicability HelpAge Asia Pacific



Manual on establishment and management of intergenerational self-help clubs (ISHCs)

HelpAge International Vietnam Country Office



Feasibility of Universal social pension in the Philippines
Coalition of services of the

Coalition of services of the Elderly (COSE) and HelpAge International



Ageing in the Asian and Pacific Region: An overview

United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP)

The Asia-Pacific region is undergoing profound and rapid population changes. All countries in Asia and the Pacific are in the process of ageing at an unprecedented pace. This overview summarizes the current trends in the process of ageing, through discussions on gender dimensions, accessibility to pensions and legislation on older persons. Key recommendations for policy-makers are also put forward for future reference.

http://www.unescap.org/resources/ageing-asia-and-pacific-overview

Blogs

Our experience of using age- and sex-disaggregated data: HelpAge International share learning (http://bit.ly/2nGIHrc)

Charles Knox-Vydmanov, HelpAge International

Old age social protection in an ageing Asia: current trends and future directions (http://bit.ly/2nGUAxe) Hannah Goozee, International Policy Centre for Inclusive Growth (IPC-IG)

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HelpAge International helps older people claim their rights, challenge discrimination and overcome poverty, so that they can lead dignified, secure, active and healthy lives.

AgeNews aims to highlight issues of ageing and the rights of older people in Asia Pacific as well as share experiences of the network working with and for older people.

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