



AGEING IN ASIA AND THE PACIFIC

Overview

Ageing in the Asian and Pacific Region: An overview

Trends in population ageing

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, although the timing and pace of this transition varies across the region. This process of ageing is reflected through the following trends:

An increase in the proportion of older persons

In 2016, approximately 12.4 per cent of the population in the region was 60 years or older, but this is projected to increase to more than a quarter—or 1.3 billion—people by 2050.¹ There are however variations across the region. As illustrated in figure 1, in East and North

Asia (which includes countries with significant ageing populations such as Japan and the Republic of Korea), over a third of the population is expected to be 60 years or older by 2050, whereas in North and Central Asia one in four persons will be 60 years or older.

Globally, the older population in less developed regions is growing faster than in the more developed regions. Therefore, older persons will be increasingly concentrated in the less developed regions of the world. By 2050, nearly 8 in 10 of the world's older population will live in the less developed regions.² This is especially pertinent for a region such as Asia and the Pacific, which comprises some of the wealthiest nations as well as some of the poorer countries in the world.

¹ United Nations ESCAP, Social Development Division. 2016 Population Data Sheet. 9 September 2016 revision.

² United Nations, Department of Economic and Social Affairs, Population Division (2013). World Population Ageing 2015. ST/ESA/SER.A/348.

FIGURE 1: PROPORTION OF TOTAL POPULATION AGED 60 OR OVER IN 2016 AND 2050 BY ESCAP SUBREGION



There is a linear relationship (although not causality) between GDP per capita and the level of population ageing (see figure 2), which shows that countries with higher incomes tend to be more advanced in the ageing process. It also shows that some countries became old before becoming rich, such as Georgia, Armenia and Sri Lanka with per capita incomes between \$3,500 and \$4,100 and a proportion of older persons between 13 and almost 20 per cent. Brunei Darussalam is a country that is rich but not yet aged with a per capita income of more than \$40,000 and a percentage of older persons at 7 per cent.

An increase in the pace of ageing (time taken to move from ageing to aged societies³)

The pace of ageing is also more rapid in the developing countries in the Asian and Pacific region and at a much earlier stage of development compared to developed countries, giving them limited time and opportunity to adjust to the needs of an aged society. For example, as

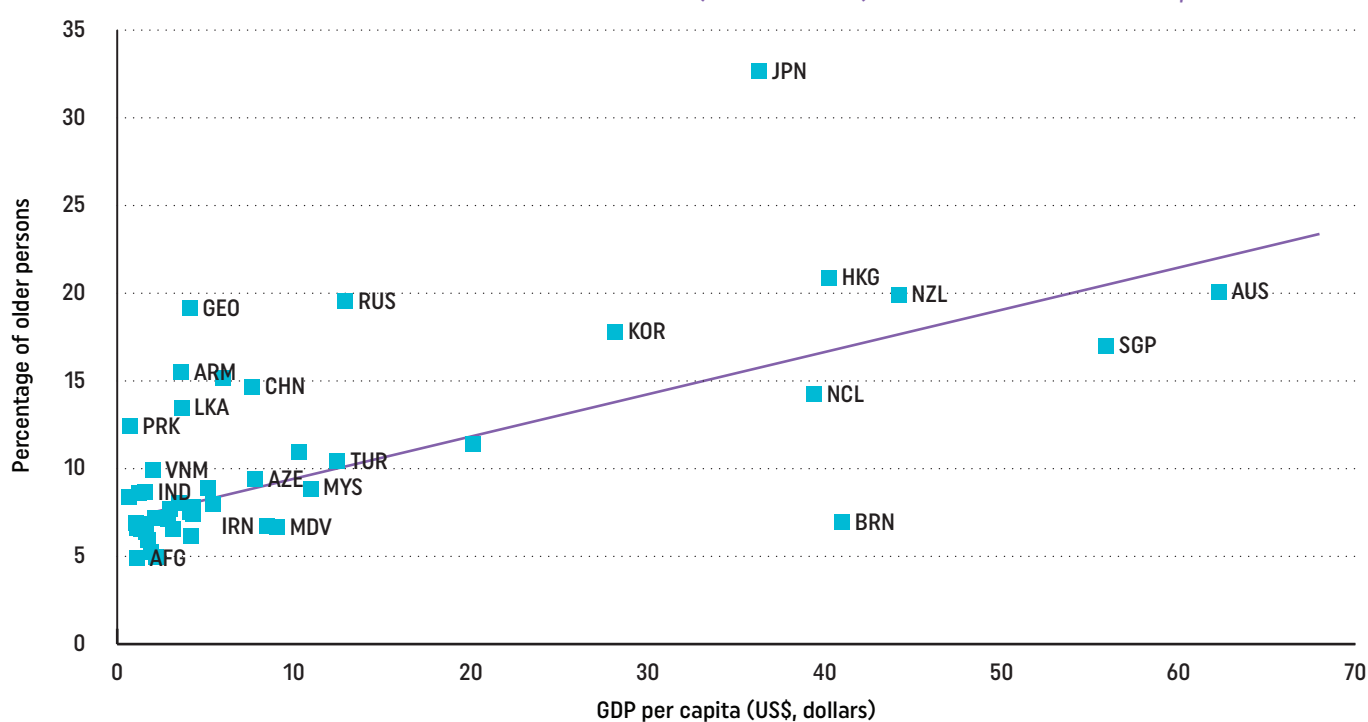
³ Ageing society has a proportion of 7–14 per cent older persons and aged society: 14–21 per cent.

shown in figure 3, France and Sweden took 115 years and 85 years respectively to move from an ageing to an aged society, whereas China is expected to make the transition in 25 years, Singapore and Thailand in 22 years and Viet Nam in only 19 years. The per capita GDP (current US\$) of France when it moved to an aged society in 1975 was \$12,514, and that of the US was \$48,112, whereas in Thailand, GDP per capita (in current USD) stood at \$5,977 in 2014.

Even in countries with low proportion of older persons, the absolute numbers of older persons can be quite significant

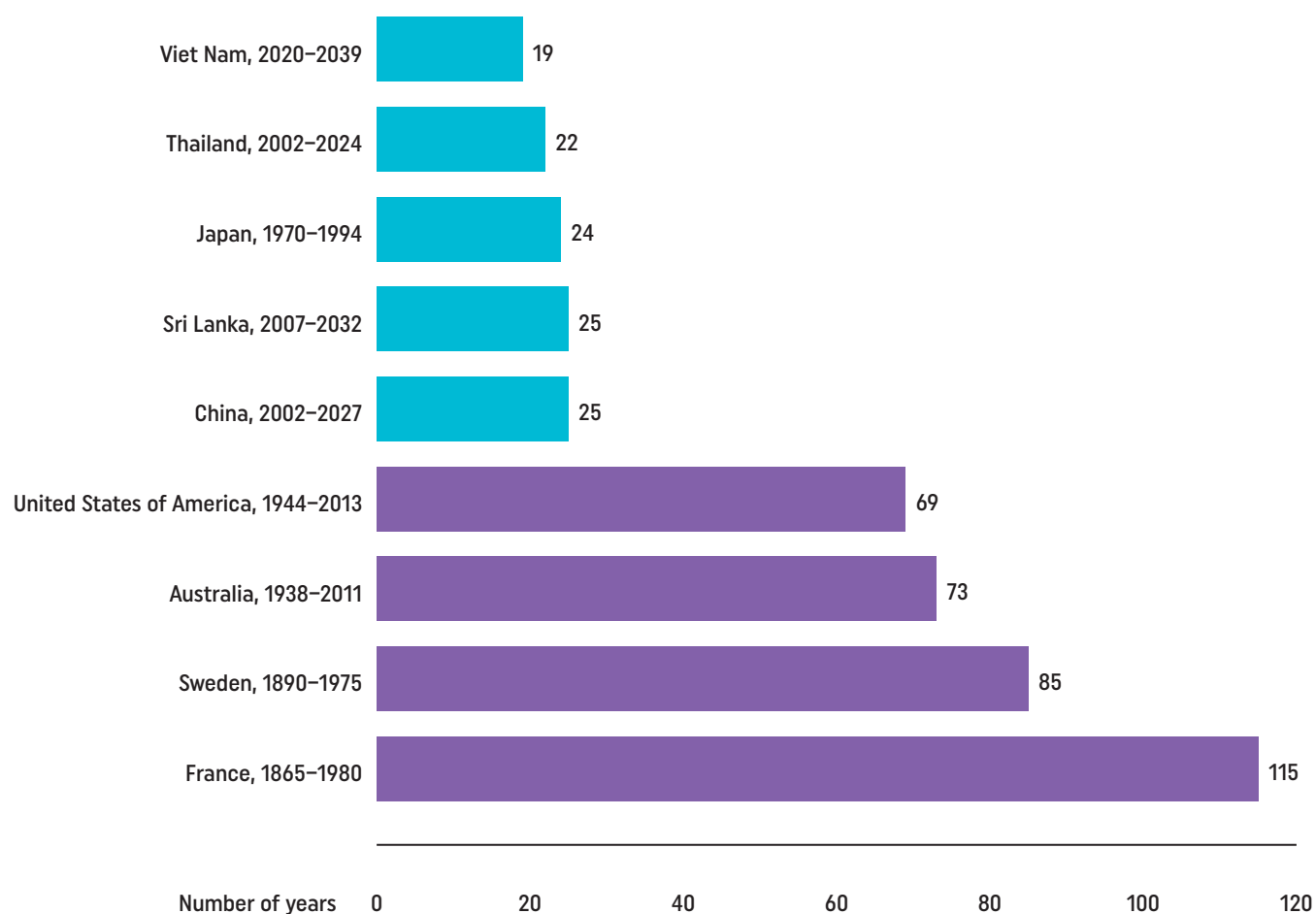
There are many countries in the region which have relatively larger proportion of youth populations, and still have the opportunity to reap the benefits of the demographic dividend. However, even these countries have a significant number of older persons. For example, the South and South-West Asia subregion had the lowest proportion among ESCAP subregions of persons aged 60 years and over at 8.7 per cent. In absolute terms, the number of older persons in that subregion is 168 million (2016), which accounts for 33 per cent of all persons over 60 years of age living in the ESCAP region

FIGURE 2: GDP PER CAPITA AND PERCENTAGE OF OLDER PERSON (65 AND ABOVE) IN THE ASIA-PACIFIC REGION, 2014



* Source: ESCAP calculation based upon ESCAP Statistical Database (2014)

FIGURE 3: TIME TAKEN IN YEARS TO MOVE FROM AGEING TO AGED SOCIETY



Source: ESCAP calculations based upon Kinsella and Gist (1995); UN Census Bureau (2005); and Viet Nam GSO(2010)

as a whole. This highlights the need for countries with relatively low proportion of older persons to also put in place appropriate policies and interventions to address their specific rights and needs, and to prepare for ageing societies in the future.

An increase in the proportion and number of the oldest old (persons over the age of 80 years)

The oldest old person, the number of people aged 80 years or over, in the region is also showing a dramatic upward trend. The proportion of the oldest old in the region in the total population 2016 was 1.5 per cent of the population amounting to 68 million people, which is 53 per cent of the global population over 80 years old. This proportion is expected to rise to 5 per cent of the population totaling 258 million people by 2050. Asia-

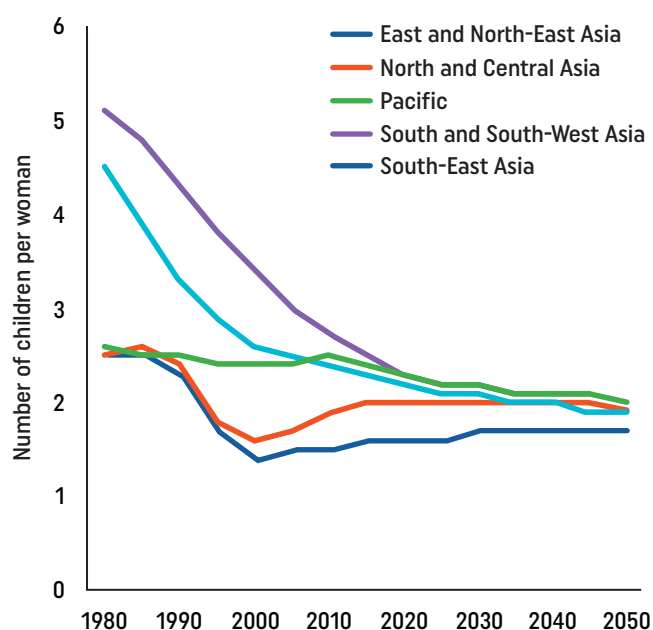
Pacific would have 59 per cent of the world population over 80 years of age compared to 53 per cent at present. This has serious implications for provision of appropriate health care and long term care, as well as income security.

The causes...

The drastic increase in the pace of ageing in the region can be attributed to two key factors, declining fertility rates and increasing life expectancies.

Rapidly declining fertility: The most precipitous declines in the region's fertility have been in the South and South-West, and South-East Asia subregions, with the fertility rates falling by 50 per cent in a span of 40 years.

FIGURE 4: TOTAL FERTILITY RATE BY ESCAP SUBREGION

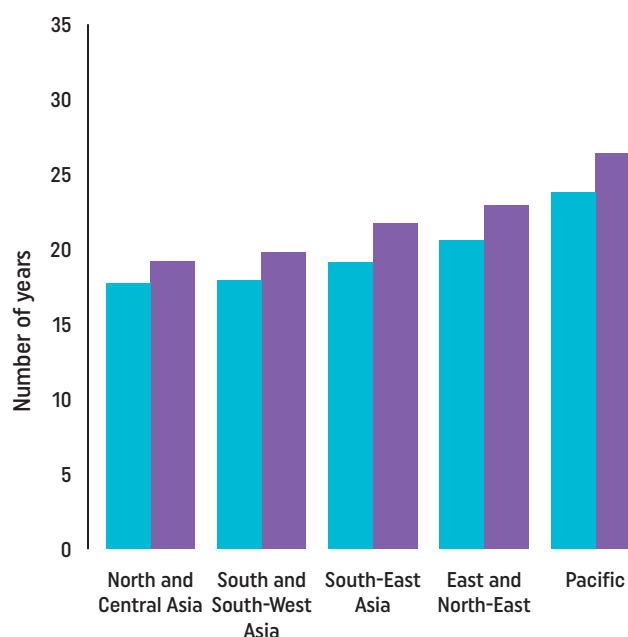


Source: ESCAP Statistical Database (2015)

Steadily increasing life expectancy: Due to improved living standards and access to health care and nutrition, life expectancy in the region has also shown a steady upward trend. On an average, the life expectancy in the region has grown steadily from 63.8 years for males and 67.1 for females in 1990 to the levels of 70.3 years for males and 74.5 years for females in 2016. Life expectancy at age sixty which is a more sensitive indicator of expected years of life after sixty is also showing a steady upward trend in all ESCAP subregions and is expected to reach or cross 20 years in four out of five ESCAP subregions.

These changing demographic structures pose significant developmental challenges in terms of economically supporting a rapidly growing population of older persons, protecting their rights and ensuring their health and well-being. However, there are also potential opportunities to be harnessed since older persons play critical roles in families, communities and in the society at large. Therefore, Asia-Pacific needs to be fully prepared for the onset of its future ageing societies as well as its multi-sectoral policy implications.

FIGURE 5: LIFE EXPECTANCY AT SIXTY (IN YEARS) BY ESCAP SUBREGION



- Life expectancy at age 60, 2010–2015
- Life expectancy at age 60, 2045–2050

Source: ESCAP calculations

Gender dimensions of ageing

There are also distinct gender dimensions to population ageing. The proportion of women in the population increases with age. Currently, there are 90.8 men for every 100 women above the sixty years, and 69.5 men for every 100 women over the age of eighty.

TABLE 1: LIFE EXPECTANCY BY GENDER (2015)

COUNTRY	LIFE EXPECTANCY	
	MALE	FEMALE
ESCAP	70.2	75.5
Japan	80.4	86.9
Republic of Korea	78.8	85.2
Russian Federation	64.6	75.9
Thailand	71.3	78.0

Source: ESCAP Statistical Database (2015)

In the Asian and Pacific region, women outlive men by at least four years on average. This difference is as high as 13.2 years in Republic of Korea and 12.7 years in the Russian Federation. Remarkably, as shown in table

below the gap between male and female life expectancy appears to be greater in high-income countries, which suggests that socio-economic factors intervene alongside the biological dynamics.⁴

FIGURE 6: PERCENTAGE OF POPULATION AGED 60 YEARS AND OLDER WHO ARE CURRENTLY MARRIED



Source: ESCAP population data sheet 2012

The gender disparity is also seen when we look at the proportion of males and females over 60 years of age, who are married. The proportion of married men over 60 years of age exceeds the proportion of married women over 60 years of age by as much as 43 percentage points in North and Central Asia, 42 percentage points for South and South-West Asia and 38 percentage points for South-East Asia.

When one takes into account the difference in the average age at marriage and the longer life expectancy of women, older women outlive their spouses on an average by a range of 4 to 10 years.

TABLE 2: LIFE EXPECTANCY, MEAN AGE AT MARRIAGE AND AVERAGE NUMBER OF YEARS A WOMEN LIVES ALONE AFTER A HUSBAND DEATH IN SELECTED ASIAN AND PACIFIC COUNTRIES

COUNTRY	LIFE EXPECTANCY		SINGULATE MEAN AGE AT MARRIAGE		AVERAGE NO. OF YEARS A WOMEN LIVES ALONE AFTER HUSBAND DEATH NO. OF YEARS
	MEN	WOMEN	MEN	WOMEN	
Indonesia	68.8	72.9	25.7	22.3	7.5
Myanmar	63.0	67.2	27.6	26.1	5.7
Philippines	65.4	72.2	27.0	24.4	9.4
Thailand	71.1	77.8	27.4	24.1	10.0
Timor-Leste	66.0	69.1	26.9	23.1	6.9
Bangladesh	69.9	71.5	25.4	18.6	8.4
Bhutan	67.9	68.6	25.4	22.8	3.3
India	64.7	68.2	24.8	20.2	8.1
Maldives	76.9	79.0	26.4	22.9	5.6
Sri Lanka	71.2	77.5	27.6	23.8	10.1

Source: ESCAP calculations based upon WPP

The gendered dimension of population ageing in relation to women's longer life expectancies and the consequent larger proportion of older women living alone after the death of their spouse can raise a number of concerning issues. Older women are less likely to have income security and are often discriminated against due to their limited access to resources and opportunities, including health care, adequate housing, social protection and legal justice. In cases of widowhood and divorce, this vulnerability is exacerbated even further and may also result in violence, neglect, abuse and other maltreatment.⁵

Although people are living longer lives, the causes of death and disability are changing from infectious to non-communicable diseases. The Disability Adjusted Life Year (DALY) is argued to present a more representative status of adult mortality, since it is the measurement of the gap between the current health status and an ideal health situation where the entire population lives to an advanced age, free of disease and disability.

4 World Health Organisation. 2014. World Health Statistics 2014. Geneva, Switzerland.

5 Begum, A. 2010. Ageing, Discrimination and Older Women's Human Rights From the Perspectives of CEDAW Convention

TABLE 3: COMPARISON OF LIFE EXPECTANCY AND HEALTHY LIFE EXPECTANCY IN SELECTED ASIAN AND PACIFIC COUNTRIES

COUNTRY	HALE AT 60	LE AT 60	YEARS OF DISABILITY AFTER 60	PERCENTAGE YEARS LOST
Australia	18.7	25.1	6.4	25.5
Bhutan	14.6	19.5	4.9	25.1
Cambodia	13.5	23.8	10.3	43.3
China	16.8	19.5	2.7	13.8
Fiji	12.3	17	4.7	27.6
India	12.6	17	4.4	25.9
Indonesia	14.3	17.8	3.5	19.7
Iran (Islamic Republic of)	15.3	19.9	4.6	23.1
Japan	20.3	26.1	5.8	22.2
Kazakhstan	13.2	16.5	3.3	20.0
Mongolia	12.1	16.3	4.2	25.8
Myanmar	12.5	16.6	4.1	24.7
Nepal	14.3	17.0	2.7	15.9
Pakistan	13.8	17.5	3.7	21.1
Philippines	14.0	17.0	3.0	17.6
Republic of Korea	18.3	24.0	5.7	23.8
Russian Federation	13.8	17.5	3.7	21.1
Samoa	13.7	18.9	5.2	27.5
Sri Lanka	16.2	19.6	3.4	17.3
Thailand	16.7	21.4	4.7	22.0
Viet Nam	16.7	22.4	5.7	25.4

Source: ESCAP calculations based upon Global Agewatch Index 2013

A comparison of the life expectancy after 60 years and the healthy life expectancy at 60 years shows that on an average a person over 60 years in the region loses almost 5 years or a quarter of his/her life span after 60 to diseases/disability. These figures have serious implications for the demand for income security, health care and long term care as the proportion of older persons, in particular, the proportion of population above 80 years grows rapidly in the region and life expectancies increase further.

The demographic transition towards an ageing society in the Asia-Pacific region has critical social, economic and political consequences. The old age support ratio, or the number of persons aged 15 to 64 years potentially economically supporting each person aged 65 years or over is a useful signifier of this trend. The ratio of people at working-age to older persons is decreasing sharply. It

is projected that the old age support ratio will decrease by about 60 per cent, from 8.4 workers for every older adult currently, to 3.4 to one by 2050 in the Asia-Pacific region. . As seen in figure 7, the greatest drop is seen in the South-East Asia sub-region from 11.1 workers per older person currently, to 4.2 to one by 2050, which also corresponds with the largest projected increase in the proportion of older persons in this sub-region.

Access to pensions

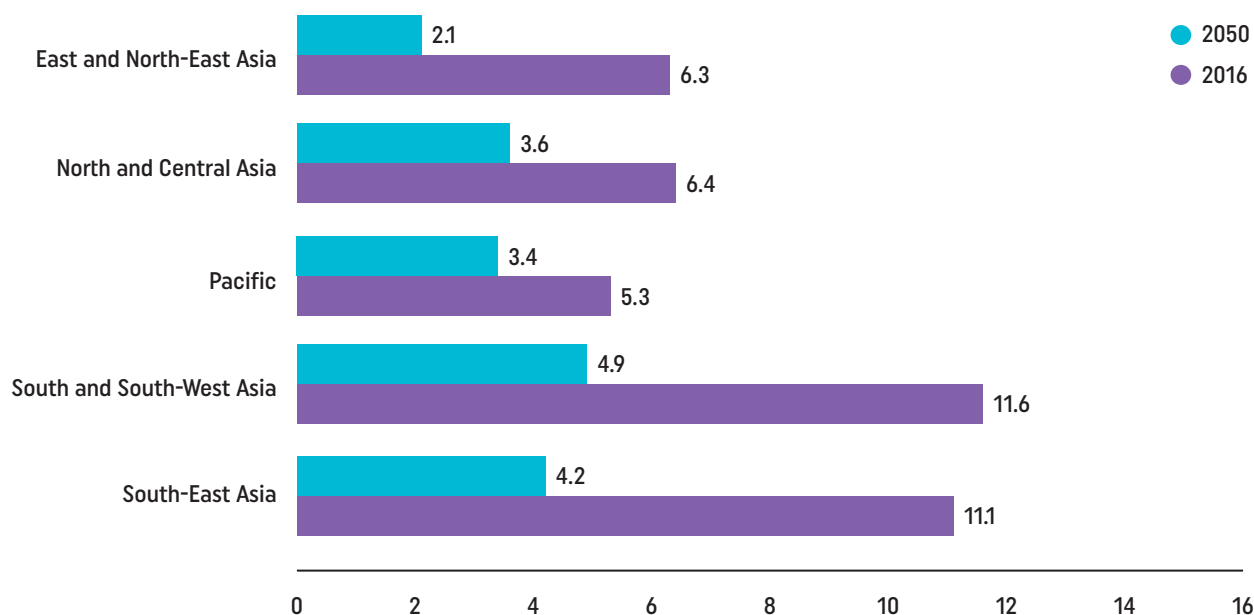
When the number of older persons grows faster than the working-age population (which is even shrinking in some cases), the old-age support ratio will naturally fall — in some cases drastically, such as in East and North-East Asia (see figure 7). The reduction of the support ratio has important implications for income security of older persons. Traditional systems rely on the family to support their ageing parents – both financially as well as providing care for those who need it. However, with smaller families, there will be fewer family members in working age to shoulder this responsibility. Declining support ratios also have implications on existing social security schemes, particularly pay-as-you-go pension systems, under which the contributions paid by current workers support the pensions of retirees⁶.

Establishing comprehensive pension systems and ensuring widespread coverage become essential in ageing societies. Pension systems not only prevent poverty of older persons, they also contribute to consumption smoothing and increase savings, which are important prerequisites for ensuring continued and sustainable economic growth in ageing societies. Pension systems also take away some of the burden of the working-population who also have to provide for the education of their children within the context of rising costs of tertiary education.

Generally, coverage of pensions is still low in the Asia-Pacific region, but there are subregional differences. While coverage is relatively good in countries of North and Central Asia as well of East and North-East Asia, it is low in South-East Asia and even more so in South and

6 UN (2013) *ibid* footnote #7

FIGURE 7: OLD AGE SUPPORT RATIO IN 2015 AND 2050, BY ESCAP SUBREGION



Source: UN ESCAP Population Data Sheet (2016)

South-West Asia. The record is mixed in Pacific island countries.

In many countries of the region, less than half of the working-age population has access to a contributory pension, whether through a mandatory or voluntary scheme (see figure 8). The percentage of those who are actually contributing — and are likely to receive a pension when they stop working — is even lower. In most countries of the Asia-Pacific region, less than a third of the working-age population contributes to a pension scheme, and in many countries, women are less likely to have access to a contributory pension scheme, primarily as a result of their lower rate of labour force participation. China has increased access to pension by increasing access to voluntary pension schemes.

Income security is an even more pressing issue for older women than it is for older men. Due to lower labour force participation, women's pension coverage is in most cases lower than men's. If women receive pensions, their pensions are likely to be lower than men's because women receive on average lower wages than men and they typically contribute fewer years than men to a pension fund. This is exacerbated by the fact that women's inheritance rights are limited in several countries.

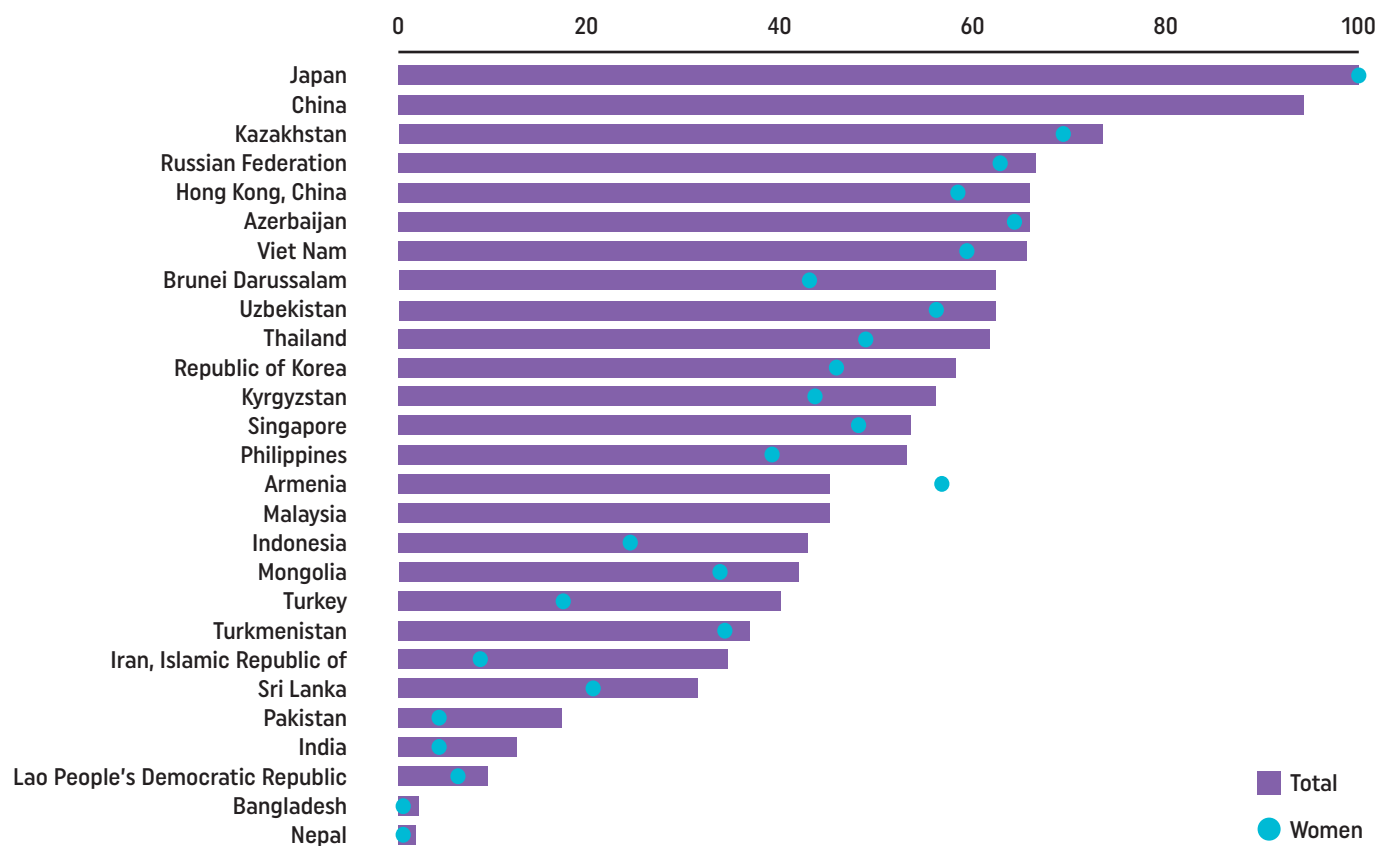
The sustainability of many pension systems is also at stake due to low retirement ages. Currently, the statutory age of retirement across the Asia and Pacific generally tends to be around 60 years. For instance, as seen in table 4, on the lower end of the spectrum, Samoa and Indonesia have a retirement age of 55 years, whilst countries such as Japan, New Zealand and the Maldives have extended it to 65 years for both men and women. Almost two thirds of the countries in the region have a retirement age for women that is lower than 60 years. This is of special note since recent research suggests that merely increasing women's labour force participation could maintain current economic support ratios until 2040.⁷ Additionally, measures such as increasing the age of retirement, promoting human capital investment,⁸ or liberalizing cross-border capital and labour flows⁹ are also potential policy responses to address the declines in labour productivity, due to the shrinking working-age population.

7 ECLAC. 2013. Turning Points and Policy Options A Look Towards 2040 and Beyond. Available at: http://www.eclac.cl/celade/noticias/documentosdetrabajo/4/51994/Folleto_Colombia_eng.pdf

8 Borsch-Supan, A. H. 2004. Global Ageing: Issues, Answers, More Questions. Michigan Retirement Research Center Research Paper No. 2004-084.

9 Menon, J. and Nakamura, A. 2009. Ageing in Asia Trends, Impacts and Responses. Asian Development Bank.

FIGURE 8: STATUTORY COVERAGE OF MANDATORY AND VOLUNTARY CONTRIBUTORY PENSION SCHEMES IN THE ASIA-PACIFIC REGION, LATEST AVAILABLE YEAR



Source: ILO, World Social Protection Report 2014/1

TABLE 4: STATUTORY RETIREMENT AGE, FOR SELECTED COUNTRIES (2015)

COUNTRY	MEN (YEARS)	WOMEN (YEARS)
Japan	65	65
Republic of Korea	60	60
Indonesia	55	55
Viet Nam	60	55
Maldives	65	65
Turkey	60	58
Georgia	65	60
Armenia	63	63
New Zealand	65	65
Samoa	55	55

Source: Global Population Ageing, UNPD

As a result of low pension coverage and in some cases low benefit levels, many older persons in the Asia-Pacific region still need to work, especially in developing countries. A sizeable proportion of older persons have

little choice but to work in the informal sector in jobs that are hazardous, insecure, low-paid and with no social protection. Data on employment in the informal sector is scarce and therefore the actual numbers of older persons who continue to work beyond 65 may be higher than the figures shown below in table 5.

Despite the fact that the older population is predominantly female, men still make up a large majority of the total labour force among older persons. However, the majority of countries in the region have experienced an increase in the labour force participation of older women between 1980 and 2010. Bangladesh, India and Japan were among the few countries where the participation rate of older women declined during this period. Additionally, it should be noted that the labour force participation rate of older women in this region remains much lower than in Africa, which suggests that cultural factors may have a role to play.¹⁰

¹⁰ UN (2013) *ibid* footnote #7

TABLE 5: PROPORTION OF OLDER PERSONS IN LABOUR FORCE AGED 65+, FOR SELECTED COUNTRIES (2016)

COUNTRY	MEN (%)	WOMEN (%)
China	28.3	18.1
Mongolia	14.0	9.4
Malaysia	35.4	12.1
Myanmar	41.3	26.2
Bangladesh	50.3	16.1
India	41.5	10.7
Russian Federation	15.1	9.5
Uzbekistan	20.6	8.0
Fiji	37.8	15.6
Papua New Guinea	55.4	52.4

Source: ESCAP population data sheet (2016)

In terms of living arrangements of the older population, some key observations have emerged from cross-national comparisons. These include the following: i) women in developed countries are much more likely than men to live alone as they age; ii) older men are likely to live in family settings, typically with a spouse; iii) there has been an increase in the proportion of the older population that is living alone in developed countries; and iv) both older men and women in developing countries usually live with adult children.¹¹

Despite the many challenges of population ageing, many countries in the region still have the opportunity to minimize the negative impacts of ageing. For example, a population concentrated at older ages and facing an extended period of retirement has the incentive to accumulate assets over time, which in turn, can contribute to a rise in national income. Research findings indicate that in more developed countries, older persons who live alone support themselves financially with their own labour earnings, income from their assets, and through public transfers.¹² Therefore, if appropriate labour market and other policies are established to allow for a productive absorption of the working-age population as well as the promotion of savings accumulation at younger ages, there is real potential to capture what is becoming known as the “second demographic dividend”.

11 Velkolf, V. 2001. Living arrangements and well-being of the older population: Future research directions. UN-DESA, New York

12 Mason, A. and Lee, R. 2006 Reform and Support Systems for the Elderly in Developing Countries: Capturing the Second Demographic Dividend, GENUS LXII (2) 11-35.

Legislation, policies and programmes on older persons

International Instruments Related to the Rights and Welfare of Older Persons

Even with the increasing importance of population ageing in the demographics of the region, older persons are often inadequately considered in policies and rights. A number of existing international human rights treaties have provisions for older persons — however, in practice, they have been insufficient in addressing the host of challenges faced by older persons today. Furthermore it has been argued that there is a gap in the international human rights system since there is no binding, universal human rights instrument focusing specifically on the rights of older persons.

Over the past few decades, certain “soft laws” have been developed in relation to older persons. These have made some reference to the rights of older persons but they are not considered legally binding. Such laws include the Vienna International Plan of Action of Ageing (1982)¹³, United Nations Principles for Older Persons (1991)¹⁴ as well as the Political Declaration and the Madrid International Plan of Action on Ageing, hereafter referred to as the Madrid Plan (2002).¹⁵

Although treaty bodies and special procedures are not binding, they do carry substantial weight in advancing international awareness on the rights of older persons. Certain treaty bodies have developed general comments specifically on the rights of older persons – for instance, the Committee on Economic, Social and Cultural Rights (CESCR) and the Committee on the Elimination of Discrimination Against Women (CEDAW). Others have mentioned the issue of older persons in general comments, as will be seen in the examples below. Recommendations in relation to the rights of older persons are less prominent in concluding observations and in individual complaints. However, CEDAW has addressed concerns of older women in most of its recent concluding observations and recommendations — starting with its general recommendation No. 27 in 2010.¹⁶

13 A/RES/37/51

14 A/RES/46/91

15 A/RES/57/167

16 CEDAW/C/GC/27

In addition, two Special Procedures mandate holders have issued thematic reports focusing on the rights of older persons—namely, the Independent Expert on human rights and extreme poverty on older persons and social protection in 2010¹⁷ and the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health in 2011.¹⁸ The Special Rapporteur on torture and other cruel, inhuman and degrading treatment and punishment has also underscored that older persons are among the most vulnerable in general detention facilities and in psychiatric institutions.¹⁹ Additionally, the Special Rapporteur on violence against women, its causes and consequences has noted the vulnerability of older women to violence.²⁰ The first Independent Expert on the enjoyment of all human rights by older persons was appointed in 2014. This Independent Expert is specifically tasked with identifying good practices and gaps in the implementation of existing international human rights instruments on older persons' rights as well as of the Madrid Plan.²¹ The first annual report of the Independent Expert on the enjoyment of all human rights by older persons was issued in 2014,²² providing preliminary views on the mandate, while the second annual report focused on autonomy and care of older persons in 2015.²³

The following sub-sections provide an overview of existing international frameworks in relation to the specific thematic areas that are focused upon in this publication.

Non-discrimination: There are provisions on non-discrimination in virtually all human rights conventions. However, there is no clear definition of older persons in international law. Statements related to the prohibition of discrimination based on “other grounds”, such as in the general comments of the CESCR²⁴, leave room for discretion but gravely, lack legal clarity. Thus, the impact of positive measures to eradicate age-based discrimination may be limited and thereby contribute

to continued “ageism” or stereotyping and prejudices against older persons.

Abuse, violence and neglect: Violence towards older persons can take the form of physical, emotional, psychological, financial or sexual abuse. The vulnerability of older persons in care facilities is highlighted by the Committee Against Torture (CAT), general comment No. 2, which declares that, “State parties should prohibit, prevent and redress torture and ill-treatment including, inter alia, in institutions that engage in the care of the aged.”²⁵ The Special Rapporteur on health also flagged the importance of complaints mechanisms in relation to the reporting of cases of violence against older persons as well as the need to train health workers to identify possible cases of abuse.²⁶ In addition, the Convention on the Rights of Persons with Disabilities (CRPD), article 16 recommends “age-sensitive” assistance and support for persons with disabilities and their families to prevent exploitation, violence and abuse.²⁷

Right to Health: The International Covenant on Economic, Social and Cultural Rights (ICESCR), article 12 refers to the accessibility, availability, acceptability and affordability of quality health services for older persons without discrimination.²⁸ The CESCR general comment No. 14 also emphasizes the value of an integrated approach in the delivery of health care for older persons, ensuring preventative, curative and rehabilitative health care.²⁹ Additionally, CESCR general comment No. 6, states that policies should take into account the health needs of the elderly “ranging from prevention and rehabilitation to care of the terminally ill”.³⁰

Right to Social Security: Old-age benefits are covered by CESCR (general comments No. 6³¹ and No. 19³²) which includes recommendations on compulsory old-age insurance, a retirement age that is flexible and the provision of non-contributory old-age benefits and other assistance for all older persons, within the limits of

17 A/HRC/14/31

18 A/HRC/18/37

19 A/HRC/13/39/ Add.5 para 237

20 A/ HRC/26/38/Add.2

21 A/HRC/RES/24/20

22 A/HRC/27/46

23 A/HRC/30/43

24 E/C.12/GC/20

25 CAT/C/GC/2

26 A/HRC/18/37

27 A/RES/61/106

28 A/6316

29 E/C.12/2000/4

30 E/1996/22, 20

31 *ibid*

32 E/C.12/GC/19

available resources. The Convention on the Elimination of All Forms of Discrimination Against Women, article 11 also prohibits gender discrimination in relation to social security, including during old age and in retirement.³³ Moreover, the Independent Expert on human rights and extreme poverty recognizes the importance of social pension schemes in progressively ensuring social security for all.³⁴

Related to social security is the concept of “climate displacement and human rights” emphasized by the Independent Expert on the enjoyment of all human rights by older persons.³⁵ Climate change disproportionately affects older persons and initiatives have been taking into account the specific needs of older persons when dealing with a changing climate. Such initiatives include the IASC (Inter-Agency Standing Committee) Operation Guidelines on the Protection of Persons in Situations of Natural Disasters, the Peninsula Principles of Climate Displacement within States, and the Sendai Framework for Disaster Risk Reduction 2015-2030, which was adopted at the Third United Nations World Conference on Disaster Reduction in Sendai, Japan in March 2015.

Right to work: The right to work is based on the principle of equality, including in remuneration and conditions of employment. The Universal Declaration of Human Rights (UDHR) article 23,³⁶ IESCR article 5(e) (i),³⁷ International Convention on the Elimination of Racial Discrimination (ICERD) article 5,³⁸ CEDAW article 11³⁹ and CRPD article 27⁴⁰ all make provisions for the right to work. However, the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, articles 1 and 7⁴¹ as well as CESCR general comment No. 6⁴² explicitly cite age as prohibited grounds for discrimination. The specific right to work and social security for older persons is also addressed by ILO Recommendation 131 on Invalidity,

Old-Age and Survivor’s Benefits⁴³, Recommendation 162 on Older Workers⁴⁴ and Recommendation 166 on the Termination of Employment.⁴⁵

Right to an adequate standard of living: An adequate standard of living includes access to quality food, housing and clothing. References to this right are made in article 25 of the UDHR,⁴⁶ article 11 of the ICESCR⁴⁷ and article 28 of the CRPD.⁴⁸

In relation to housing, the CESCR general comment No. 6, endorsed that, “national policies should help older persons to continue to live in their own homes as long as possible, through the restoration, development and improvement of homes.” Also, it noted that urban development planning and law needs to “provide older persons with a better living environment and facilitate mobility and communication through the provision of adequate means of transport.”⁴⁹ In addition, the Special Rapporteur on adequate housing, as a component of the right to an adequate standard of living, emphasized that priority in housing and land allocation should be ensured to disadvantaged groups, such as older persons.⁵⁰

Related to the adequate standard of living is the concept of “universal design” contained in the CRPD. This is relevant for housing as well as other goods and services since these aspects can facilitate an enabling environment for older persons with disabilities. Another associated issue is the right to property and inheritance, which is outlined in UDHR, article 17.⁵¹ Although this right applies equally to older persons, it is often not implemented in practice, particularly in the case of older women.

Towards a Convention on the Rights of Older Persons

The UN General Assembly established the Open-Ended Working Group (OEWG) on Ageing (OEWG) by resolution 65/182 in 2010. The mandate of the Working Group

33 A/RES/34/180

34 A/HRC/14/31

35 A/HRC/30/43

36 A/810,71

37 A/6316

38 A/6014

39 A/RES/34/180

40 A/RES/61/106

41 A/RES/45/158

42 E/1996/22, 20

43 R131

44 R162

45 R166

46 A/810,71

47 A/6316

48 A/RES/61/106

49 E/1996/22, 20

50 A/HRC/4/18

51 A/810,71

involves reviewing existing international frameworks on the human rights of older persons, identifying gaps and solutions to address them. As per the General Assembly Resolution 67/139, the OEWG on Ageing was requested to present a proposal containing: “the main elements that should be included in an international legal instrument to promote and protect the rights and dignity of older persons”.⁵²

Amongst the many advocates for an UN Convention on the rights of older persons, one of the most active is HelpAge International. This international NGO stresses the current lack of specificity in addressing the rights of older persons, which leads to a fragmented protection system. Additionally, there is a failure to address critical issues such as specific vulnerable groups of older persons, age-disaggregated data collection as well as the participation of older persons in the consideration of issues that affect them.⁵³

Therefore, a UN Convention on the rights of older persons is anticipated to: i) provide the necessary, legally binding protection of older persons’ rights under international law; ii) reframe the perception of older persons from welfare recipients to rights holders; iii) improve accountability through monitoring States’ actions towards older persons; and iv) provide a framework to guide age-sensitive policy-making.

Regional Initiatives on the Rights and Welfare of Older Persons

Despite the current lack of a specific international instrument on the rights of older persons, there has been progress at the regional level. In June 2015, the Organization of American States approved the Inter-American Convention on Protecting the Human Rights of Older Persons and it was immediately signed by the governments of Argentina, Brazil, Chile, Costa Rica and Uruguay.⁵⁴ The Convention is the first regional instrument of its kind in the world. Its purpose is to promote, protect and ensure the recognition and the full enjoyment and exercise, on an equal basis, of all human rights and fundamental freedoms of older persons, in

order to contribute to their full inclusion, integration and participation in society. For the Convention to enter in force, it must be ratified by at least two signatory countries. The African Union Commission has also drawn up a Draft Protocol to the African Charter on Human and People’s Rights on the Rights of Older Persons in Africa.⁵⁵ In February 2014, the Council of Europe adopted the Recommendation on the Promotion of Human Rights of Older Persons.⁵⁶

In Asia and the Pacific, the Macao Declaration and Plan of Action on Ageing was endorsed in 1999 by ESCAP member States and associated members. The plan defined seven major areas of concern on aging in the region namely: the social position of older persons; older persons and the family; health and nutrition; housing, transportation and the built environment; older persons and the market; income security, maintenance and employment; and social services and the community.

This was built upon further in the 2002 Shanghai Implementation Strategy, which is the regional strategy for the implementation of the Madrid Plan and the Macao Plan of Action on Ageing for Asia and the Pacific. The major recommended focus areas were identified as: (a) older persons and development; (b) advancing health and well-being into old age; (c) ensuring enabling and supportive environments; and (d) implementation and follow-up. In each area, key action points are identified to be undertaken at the regional and national levels.

The Association of Southeast Asian Nations (ASEAN) has also demonstrated that it prioritises the issue of ageing. In 2015, ASEAN Member States adopted the Kuala Lumpur Declaration on Ageing: Empowering Older Persons in ASEAN”. The declaration recognizes “that an increase in the proportion of older population will require adaption of health care and social support systems to meet this emerging challenge”. It fosters concrete actions towards the empowerment of older persons, including prompting “a shared responsibility approach in preparation for healthy, active and productive ageing”, and “promote intergenerational solidarity towards a society for all ages by raising public awareness on the rights, issues and challenges of old age and ageing”. It further promotes

⁵² A/RES/67/139

⁵³ HelpAge International. 2010. Strengthening Older People’s Rights: Towards a UN Convention.

⁵⁴ CAJP/GT/DHPM-37/12

⁵⁵ ACHPR Resolution 106

⁵⁶ Recommendation CM/Rec (2014) 2

strengthening research and information on ageing as well as strengthening human capital expertise to cater to the needs of older persons.

In 2004, at an ASEAN+3 Ministerial Meeting for Social Welfare and Development in Bangkok, a joint statement was made that, “We agree to focus efforts in developing policies and programmes to address ageing, as well as promote community-based approaches for delivering care and social services to the elderly and the disabled”.⁵⁷ Additionally, in 2010, during the 5th ASEAN GO-NGO Forum, the ASEAN made a series of recommendations, including mainstreaming ageing in national policies, improving the situation of older persons through diverse initiatives as well as enhancing existing information collection and monitoring mechanisms.⁵⁸

Emerging good practices from country case studies

National policies and legislation on older persons: Since the Madrid Plan in 2002, nearly all of the 30 countries in this study have developed a national policy or plan of action on ageing in order to mainstream the issue into other sectoral areas. The exceptions are Uzbekistan, Azerbaijan and Georgia but these countries indicate that developments towards introducing a national policy are under way. However, the obstacles to implementation still remain in terms of limited mechanisms and necessary budgets. The responses to the 2011 ESCAP Regional Ageing Survey rarely specified whether budgets were allocated for the implementation of the policies mentioned, apart from countries such as Australia and Philippines — as indicated in Table 6. A new ESCAP Regional Ageing Survey is currently underway.

TABLE 6: EXAMPLES OF COUNTRIES IN THE ESCAP REGION WITH NATIONAL POLICIES ON AGEING

COUNTRY	NATIONAL POLICY ON AGEING
Australia (budget)	Australian Local Government Population Ageing Action Plan, 2004–2009
Bangladesh	National Policy on Ageing, 2007
Mongolia	National Strategy on Ageing, 2009
Philippines (budget)	Philippine Plan of Action for Senior Citizens, 2011–2016
Russian Federation	Federal Programme, Older Generation 2002–2010

Source: Country fact sheet

In the region, there are also some examples of legislation addressing older persons. Table 7 highlights a sample from selected countries.

TABLE 7: EXAMPLES OF COUNTRIES IN THE ESCAP REGION WITH NATIONAL LEGISLATION ON AGEING⁵⁹

COUNTRY	NATIONAL LEGISLATION ON AGEING
China	Law of the People's Republic of China on Protection of the Rights and Interests of the Aged, 1996
Nepal	Senior Citizens Act, 2007; Senior Citizens Regulation, 2009
Sri Lanka	Protection of the Rights of Elders Act No.9, 2000
Thailand	Act on Older Persons, 2003
Viet Nam	Law on the Elderly, 2010

In a number of countries, even if there is no law referring specifically to older persons, there may be legislation on age-discrimination and long-term care. For instance, New Zealand introduced Social Security (Long-Term Residential Care) Regulations in 2005.

Therefore, there has been significant progress in developing policies, plans and strategies on ageing and/or older persons since 2002. However, the translation of these policies into practice or legislation is yet to be fully achieved across the region.

Social protection for older persons: Pensions are crucial as a source of income security in old age. As mentioned in Section 2, a majority of workers in developing countries work outside the formal economy and are often left exposed without social protection schemes — subsequently, they will enter old age without

⁵⁷ Available at: <http://www.asean.org/news/asean-statement-communiques/item/joint-statement-of-the-first-asean-plus-three-ministerial-meeting-for-social-welfare-and-development-bangkok>

⁵⁸ Available at: <http://www.asean.org/archive/documents/5th-GO-NGO-Recommendations.pdf>

⁵⁹ Ageing at a Glance. 2016 . Country Case Studies

a pension. However, increasingly, countries in the region are ensuring that measures are in place to address this important issue.

In this regard, Australia, Japan and New Zealand have all recently reformed their pension systems. In 2009, the Australian government approved its Secure and Sustainable Pension Reform (including an increase in maximum pension, a pension supplement that covers utilities and pharmaceuticals, a supplement for seniors which combines telephone and concession allowances as well as a work-bonus). Whereas, in New Zealand, the Superannuation and Retirement Income Amendment Act came into effect in 2005. The Republic of Korea implemented a comprehensive pension reform in 2014, granting access to the (tax-funded) basic pension to every older person.

Programmes which afford social protection for older persons, within the informal and formal sectors, can be a vital mechanism for reducing poverty. For instance, Viet Nam passed Decree 13/2010/ND-CP, which provides for a cash transfer programme that aims to reduce vulnerabilities and poverty in old age. In addition, the government of Fiji, through its Family Assistance scheme, offers a temporary allowance to destitute families and persons aged 65+ in order to supplement their income. During the period of 2007-2010, the Programme of Measures approved by Resolution of the President of the Republic of Uzbekistan, also proposed targeted social protection measures for older persons living alone, including the free provision of food packages.

Health and well-being of older persons: The Madrid Plan calls upon countries to: i) reduce “the cumulative effects of factors that increase the risk of disease and consequently potential dependence in older age”; ii) to develop “policies to prevent ill health among older persons”; and iii) to provide “access to food and adequate nutrition for all older persons”.⁶⁰

In the majority of the 30 case study countries, there is evidence of existing policies or programmes on healthy ageing. For instance, in 2004, Australia adopted the National Falls Prevention for Older People Plan. In

Indonesia, aside from its Law on Older Persons’ Welfare and the National Plan of Action for Older Persons (2009-2014), both of which refer to healthy ageing, the Government prepared: a media campaign on ageing and age-friendly primary health care centres (PHC); a manual for primary health care centre workers; and posters/leaflets on disease prevention and age-friendly PHC services. The Russian Federation and Viet Nam also have provision for community-level activities, such as learning centres to disseminate information on the prevention and control of diseases related to older ages.

In addition, a number of countries have ensured universal health access, especially for older persons. For instance, the Japanese government introduced the Advanced Elderly Medical Service System in 2008. In 2005, the Thai Ministry of Public Health introduced the Green Channel or Fast Lane which provides out-patient care for older persons. In Viet Nam, Circular 02/2004/TT-BYT provides for free health insurance for persons aged 90 years and over, whilst the Law on Elderly (2010) regulates that older persons are entitled to discounted payments for health services, even if they do not have health insurance.

The numbers of older persons with mental disorders, including depression and dementia, is on the rise.⁶¹ Specific provisions for mental health services are reported in some countries. In Australia, the Fourth National Mental Health Plan of 2009 stresses the importance of collaboration with aged-care agencies. Moreover, in 2004, a budget of \$70.5 million was allocated to make dementia a National Health Priority in that year and a further \$25 million has been allocated for education and training through the National Framework for Action on Dementia 2006–2010.⁶² In Japan, a 10-year campaign to understand dementia and build community networks was introduced in 2005. However, the majority of governments in this sample have not yet developed comprehensive mental health services for older persons.

Programmes to provide training of care providers and health professionals working with older persons’ are in place in some countries. For instance, in Malaysia, health personnel have been financially supported to attend

60 United Nations, Political Declaration and Madrid International Plan of Action on Ageing, New York, 2003, pp. 29-30

61 UNFPA and HelpAge. 2011. Overview of Available Policies and Legislation, Data and Research, and Institutional Arrangements Relating To Older Persons - Progress Since Madrid

62 *ibid*

short courses on older persons' care in Australia, United Kingdom, Singapore, Japan and Malta. However, studies show that there is also a need to bring about an attitudinal change amongst health and social care professionals as well as in the general population around the value of old age care.⁶³

Long-term care is another area which requires greater attention from policy-makers. As per data available from Japan, around 6 million older persons were registered for long term care at the various levels (Support 1 to care level 5). This is around 18 per cent of the population above 65 years of age. In the Republic of Korea, 686,000 older persons applied for LTC support in 2013, which comes to around 10.5 per cent of the population above 65 years of age. In Australia, about 12.8 per cent of the population above 65 years receives long-term care, while this figure is 15.5 per cent in New Zealand. However, these percentages could vary according to the threshold placed for the state to provide care and also be limited as per facilities available. Therefore, based on data from the above countries, it appears that 10.5 per cent to 18 per cent of the populations of selected countries above 65 years of age need and are receiving long term care in some forms. In developing countries from the region, accurate data is more difficult to source on the LTC needs of older persons. Some countries in the region conduct surveys to ascertain the demand for long term care. In China, surveys indicate that around 18.6 per cent of persons above 60 years of age need long term care. In India, NSSO surveys conducted in 2006 suggested that 8 per cent of older persons were confined to the bed, and this proportion increased to 27 per cent in older persons above 80 years of age. Another survey of older persons above 80 years of age revealed that 43 per cent had one or more ADL-related disability.

Thus, even from anecdotal and survey based data from developing countries is strong enough to suggest that a significant proportion from 8 to 18 per cent of the older persons have a need for long term care. Thus, in the Asian and Pacific region, more than 53 million persons above the age of 65 years are in need of long-term care. Out of this number it is estimated that a small fraction of this number, mainly in developed countries, have access to any form of long-term care support.

Long-term care needs would grow exponentially in line with the growth of population in the older age groups. More than 50 per cent of older persons above the age of 80 years would require long term care, and even in the age group of 75 years and upwards, a significant proportion would require long term care. With the proportion of "oldest-old" increasing almost three times by 2050, the proportion of older persons needing long term care may also go up by a significant proportion.

Participation of older persons in civic affairs and the labour market: The Madrid Plan refers to the inclusion of older persons and calls for changes in attitudes, policies and practices so that "a society for all ages encompasses the goal of providing older persons with the opportunity to continue contributing to society".⁶⁴

In Asia and the Pacific, some countries have implemented policies and programmes to promote the inclusion and participation of older persons in development. Examples of civic and cultural programmes which help to combat social isolation and support empowerment include initiatives in China, such as the Older Persons' Chorus Festival, the First National Sports Meeting for the Elderly and in 2008 and the Olympic Games for older persons.⁶⁵ Some governments also provide support for the establishment of senior citizens' centres or clubs. Thailand and Japan, for instance, provide subsidies or financial support for senior citizens clubs.

There is consensus that the participation of older persons in decision-making is required to ensure that the provisions made for older persons in various policies are implemented in practice. In some countries, such arrangements are established, such as in the case of the Senior Citizens Councils in Thailand and the National Council for Elders in Sri Lanka.

Governments are also called upon by the Madrid Plan to implement policies that increase the participation of working-age populations in the labour market and reduce the risk of dependency in later life. For example, in Indonesia, the Ministry of Manpower has established Work Centres to provide training in practical capabilities to workers in the informal sector, including older workers

⁶⁴ United Nations, Political Declaration and Madrid International Plan of Action on Ageing, New York, 2003, p.13, paragraph 19

⁶⁵ UNFPA and HelpAge. 2011. *ibid* footnote #63

⁶³ *ibid*

who still have desire to work and earn income. In addition, under the Employment Law of the Republic of Azerbaijan, the State Employment Service provided 201 persons older than working age with relevant jobs in 2010.

Enabling environments: The enabling environment needed to enhance the well-being of older persons is imperative in creating the “society for all ages”, envisaged in the Madrid Plan. The term “environment” includes not only the physical living environment of older persons such as housing and transport, but also, the political and social institutions and systems as well as the arrangements that can support and facilitate or obstruct lifelong development. In this light, the enabling environment also covers issues such as neglect, abuse and violence of older persons.⁶⁶

A number of countries in the region have adhered to the concept of “ageing in place”, which encourages older persons to remain in their own homes for as long as possible. The Government of Turkey promotes ageing in place by providing affordable public housing for older persons. The Government of China also promotes the construction of senior citizens’ lodging houses and barrier-free facilities in public spaces. In the Russian Federation, the examples come from the regional level, in response to the Federal Programme “Older Generation” (2002–2010). In Saint Petersburg, for instance, an initiative to install a panic button in the homes of older persons was introduced in 2007. Additionally, the Vietnamese Ministry of Transport and Communication has issued guidelines on making public transport accessible for older persons and persons with disabilities. Notably, the Strategic Plan of the Korean Federation for Care of the Aged (2010–2014) includes various components such as the supply of wheelchairs and walking sticks, construction of sloping ramps as well as installation of handrails and safety chains etc. to ensure the ease of older persons’ travel on public transport in the DPRK.

The Madrid Plan highlights the importance of recognising the risk of potential neglect, abuse or violence and eliminating all forms of elder abuse.⁶⁷ In this regard, in some of the countries in this study, the national policies

on ageing include an objective on the elimination of elder abuse — for instance, Thailand with the Older Persons Act (2003); Viet Nam with the Law on the Elderly (2010); and Japan with the Elder Abuse Prevention and Caregiver Support Law (2006).

Various programmes on elder abuse exist to raise awareness, campaign for its elimination, make provisions for legal support to older victims and conduct training for care professionals to detect elder abuse. The Aged Care Complaints Investigation Scheme in Australia is one example of an initiative seeking to eliminate elder abuse in care arrangements. Similarly, in China, legal assistance is given to senior citizens and in Japan, a reporting system for domestic and institutional abuse has been established at the municipal level.⁶⁸

⁶⁶ United Nations, World Summit for Social Development Copenhagen. 1995. Programme of Action of the World Summit for Social Development.

⁶⁷ United Nations, Political Declaration and Madrid International Plan of Action on Ageing, New York, 2003, p. 43

⁶⁸ UNFPA and HelpAge. 2011. *ibid* footnote #63

Conclusion and key recommendations

Notwithstanding the promising signs in addressing the rights and concerns of older persons in Asia and the Pacific, gaps still exist in three spheres, namely policy and legislation, data and research, as well as institutional arrangements.

There has been significant progress in developing national policies or action plans on ageing in the Asia and Pacific region. However, the critical challenge is the conversion of these policies into practice and ensuring its provisions are binding, with the introduction of respective laws and the allocation of requisite budgets. Although, in most countries, there have been efforts to provide space for ageing issues in governmental institutions, these designated bodies are rarely located in the “powerful” ministries, such as finance or planning. The issues of population ageing and the needs of older persons have been mainstreamed into a number of health and social development policies but some areas remain relatively age-blind - for example, family violence. Moreover, there is less evidence in developing countries of the systematic inclusion of ageing issues in the design and implementation of their poverty reduction policies.

Despite the availability of census data that is age and gender-disaggregated in a number of countries in the region, the analysis of this data is dependent on the existence of research institutions and the subsequent dissemination of policy implications to decision-makers, media and the general public. Generally, there appears to be a correlation between a country’s level of development, as well as its stage in the demographic transition, and the presence of national research institutes on ageing. In addition, further research is needed to inform policy, specifically on areas such as rights at the end of life, long-term care and palliative care.

Building on the above-mentioned findings, it is recommended that governments in Asia and the Pacific:⁶⁹

- 1** Develop and implement comprehensive policy frameworks to address the needs of older persons in line with the three pillars of MIPAA adopting an integrated approach;
- 2** Provide the financial and human resources as well as the institutional arrangements needed to implement national policies and plans of action on ageing;
- 3** Enhance the technical capacity of those bodies that are responsible for a coordinated and comprehensive government response to population ageing and its challenges integrated within national strategies to achieve the 2030 agenda for sustainable development and the related sustainable development goals;
- 4** Improve and build upon existing data sets and surveys at the national and regional level to inform sectoral policies on ageing;
- 5** Reorient health systems along to deliver comprehensive health care sensitive to the needs of older persons with the overall framework of universal health care coverage;
- 6** Include long term care as a specific component of policies and programmes to address the needs of older persons by adopting an appropriate mix of home-based, community and institutional care. It is critical to establish effective coordination between the long-term care systems and health systems;
- 7** Further strengthen mainstreaming of ageing into all sectors of public policy, particularly in relation to addressing the rise of non-communicable diseases and providing social protection for vulnerable, poor older persons.

⁶⁹ Adapted from:- UNFPA and HelpAge. 2011. Overview of Available Policies and Legislation, Data and Research, and Institutional Arrangements Relating To Older Persons - Progress Since Madrid

- 8** Develop policies to address the decreasing percentage of the working-age population and ageing labour forces by providing learning opportunities for all ages, increase productivity and increasing labour force participation as a whole;
- 9** Foster further transparency on government action and the respective budget allocations in relation to addressing the rights of older persons through establishing appropriate legal frameworks effective monitoring mechanisms;
- 10** Ensure the inclusion of the voice of older persons and older persons associations in policy-making processes, especially in those issues which affect them directly;
- 11** Share lessons learned and communicate good examples of policy implementation, legislative action, data collection and analysis, or the establishment of institutional arrangements in effectively addressing population ageing.

Definitions of terms

Population aged 60 or over (in thousands) (2013): De facto population persons aged 60 or over as of 1 July of the year for which the most recent data is available. Population data are presented in thousands.

Population aged 60 or over (in thousands) (2050): Projected population of persons aged 60 or over, based on knowledge about the current population size and structure and assumptions about future trends in fertility, mortality and migration. Population data are presented in thousands.

Share of persons aged 80 years or over (2013): Persons aged 80 years or over (the “oldest old”) as a percentage of the population aged 60 years or over in 2013.

Share of persons aged 80 years or over (2050): Projected share of persons aged 80 years or over in 2050, based on age-sex structure, fertility, mortality and migration.

Sex ratio of older persons (60+ and 80+): Number of males per 100 females in the population in the age groups of 60 and over, as well as 80 and over.

Life expectancy at age 60 (2010–2015): The average number of years of life projected for a hypothetical cohort of individuals, surviving to age 60 in 2010-2015 - assuming that age-specific mortality levels remain constant. It is expressed as years.

Life expectancy at age 60 (2045–2050): The average number of years of life projected for a hypothetical cohort of individuals, surviving to age 60 in 2045 - 2050 - assuming that age-specific mortality levels remain constant. It is expressed as years.

Proportion currently married aged 60+ (%): Percentage of persons aged 60 and over, who are married and are not divorced, widowed or separated. Persons in consensual unions or “living together” are also included in this category.

Proportion of older persons who are living independently or only with spouse, aged 60+ (%):

Percentage of persons aged 60 and over, who are living alone, or living solely with one's spouse.

Old age support ratio (2013 and 2050): Number of persons aged 15 to 64 years per person aged 65 years or over, based on population data in 2013 as well as on projections for 2050.

Proportion in labour force, aged 65+ (%): Percentage of persons aged 65 and over, who are economically active, as estimated and projected by the International Labour Organization (ILO).

Statutory retirement age: The minimum age at which people qualify for full retirement benefits.

Data sources

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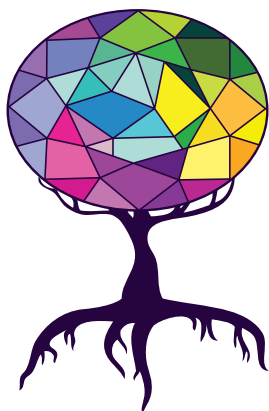
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For further information on this publication, please address your enquiries to:



Social Development Division

Economic and Social Commission for Asia and the Pacific (ESCAP)

United Nations Building, Rajadamnern Nok Avenue

Bangkok 10200, Thailand

Tel: 66 2 288-1513

Fax: 66 2 288-1030

E-mail: escap-sdd@un.org