

# Concerted Actions toward Healthy Ageing in ASEAN Countries

## To the editor:



Since the World Health Organization (WHO) formally launched the United Nation's Decade of Healthy Ageing (2021–2030) on the last International Day of Older Persons, October 1, 2020, the momentum for concerted global action seems to have been overshadowed by the ongoing coronavirus pandemic.

However, given the fact that the number of older people in the Asia–Pacific region is rising at an unprecedented rate, placing the region at the forefront of the global phenomenon of population ageing, it is vital for the regional governments to respond to this global initiative. While the proportion of people aged 60 or above in Southeast Asia was 9.8% in 2017, it is forecast to increase to 13.7% and 20.3% by 2030 and 2050, respectively.<sup>1</sup> Indeed, by 2035, all ASEAN (the Association of Southeast Asian Nations) countries will be considered as ageing societies, while Thailand and Singapore will become super-aged societies (i.e., more than 20% of the population is 65 years old or more).

The health issues older people face are diverse, such as non-communicable diseases, mental health issues, including dementia, and injuries and disabilities due to their declining functional ability. To achieve healthy ageing for all across the whole ASEAN region is, therefore, very challenging since there are wide inequalities in the infrastructure and systems necessary for delivering the health and social policies and practices needed to fulfill this goal. According to the World Bank classification, five countries in ASEAN can be considered to be in the category of low-middle income countries, three countries are in the upper-middle income group, and only Brunei and Singapore are high-income countries. In 2010–2015, life expectancy at birth within ASEAN ranged from 65.4 years old to 82.3 years old. When looking at the employment and educational status of older people, the Philippines ranked highest, while Indonesia excels in the domain of having an enabling environment for change.<sup>2</sup>

Regarding the strategic actions of healthy ageing within ASEAN, there is a mix of scenarios possible with each strategy. Combating ageism is considered one of the lowest priority problems in the region, with one indicator showing that the majority of older people – ranging from 60% to 80% of older adults – live with their children in line with the ingrained culture of filial piety in Asian societies. The other two strategies, i.e., long-term care arrangement and ensuring an age-friendly environment, are more recent strategies but still face issues, and ASEAN is lagging behind other regions in their take-up. The most significant provision of care within ASEAN countries is still provided by close relatives, typically without financial support; while a much smaller amount of long-term care is provided by limited national budget support, or by local government support or charity organizations; albeit this latter support is typically inadequate and not well organized yet in the region. In Thailand, a long-term care welfare program was formally set up in 2016. The main care providers are health volunteers in the local community, who receive a small monthly stipend. However, this system has gradually been undermined by many skilled caregivers moving to the private sector.

While there has been an increasing trend toward the encouragement of age-friendly communities and cities in high-income countries, an international study conducted among four ASEAN countries using WHO standards for measuring the perceived age-friendliness of an environment revealed a number of inadequacies in the current environments in terms of age-friendliness, with the five main ones being: “(1) participating in an emergency-response training session; (2) enrolling in any form of education or training; (3) having opportunities for paid employment; (4) involvement in decision-making about important political, economic, and social issues in the community; and (5) having personal care or assistance needs met in the older adult's home setting by government/private care services”.<sup>3</sup>

Lastly, aligning a health system to serve the needs of older people remains challenging. With the unique clinical features of older patients, namely, reduced body reserves, atypical presentation, multiple pathology, polypharmacy, and social adversity, the current organ-based healthcare systems that are widely implemented in ASEAN countries

are considered unsuited to older patients. Also, there is a severe shortage of geriatric clinics where comprehensive geriatric assessment is mandatory.<sup>4</sup>

Given all the above challenges, the Thai government proposed, at the 30<sup>th</sup> ASEAN Summit in Manila in April 2017, the establishment of a knowledge center to support evidence-informed policies, strategies, and guidelines on active ageing, with a view to implementing capacity development programs and so on within ASEAN. Consequently, the ASEAN Center for Active Ageing and Innovation (ACAI) was launched by the ASEAN leaders at the 35<sup>th</sup> ASEAN Summit on November 3, 2019, in Bangkok, Thailand. With the setting up of ACAI, the Thai government already allocated a ceiling budget of US\$ 5 million per year for 5 years to drive momentum in the region. In line with the United Nations proclamation of 2021–2030 as the Decade of Healthy Ageing, concerted

action within ASEAN under the platform of ACAI is highly needed and should now progress.

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