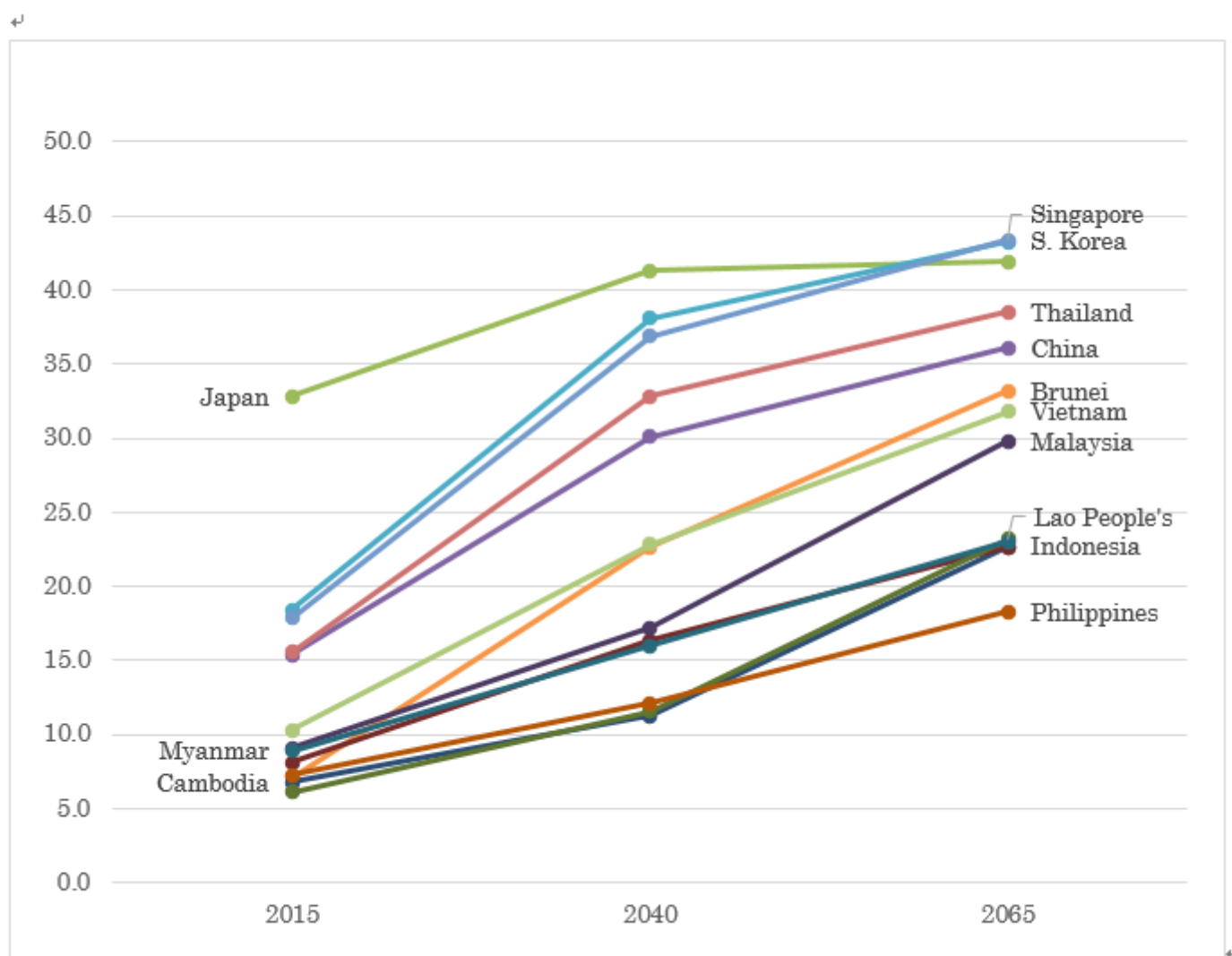


Longitudinal Study on Ageing and Health in ASEAN

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Presentation at
Ageing Population and Health:
The Longitudinal Study and
the Role of Population Collaborations
in Community Based Care for Older People
Hanoi, Viet Nam, Dec. 12, 2019

Figure 1. Proportion of those aged 60 and above in Selected Asian Countries in 2015, 2040 and 2065



Issues to be considered in Aging countries

- Economic well-being of older adults: Pension/social welfare program
- Physical and psychological well-being of older adults: Health insurance (including dental)
- Social well-being: Family/kin relationship--Long-term care
- Need to plan now not later: In many developed countries, aging started after economic development were achieved. However, current developing countries, aging is starting without economic development.

Health as an important factor of well-being

- Causes of aging: low fertility, low mortality and migration
- Longevity: decreasing mortality rates among older adults—increasing life expectancy (Human Achievement but need to be ready)
- Effect of increasing life expectancy
 - More years of needs for economic well-being
 - More older adults with chronic conditions
 - More needs for long-term care
 - Increasing number of oldest-old
 - Less availability of long-term caregiver by family members (decreasing TFR)

ERIA Project on Longitudinal Study of Aging and Health in ASEAN Countries

- Longitudinal Study of Aging and Health in the Philippines
- Longitudinal Study of Aging and Health in Vietnam

Why “Longitudinal Survey”?

- Examine change over time
 - aggregate measures of change for population
 - individual change: incidence, recovery (health transition)
- Establish causation
 - investigate risk factors for change over time
- Why two countries?

Population & % 60+ in Asian countries

Country	Population (mil)	% 60+	Longitudinal survey
China	1397.0	15.4	yes
India	1309.1	8.9	yes
Indonesia	258.2	8.1	yes
Japan	128.0	32.8	yes
Philippines	101.7	7.3	baseline
Vietnam	93.6	10.3	baseline
Thailand	68.7	15.6	yes
Myanmar	52.4	8.9	yes/no
South Korea	50.6	18.4	yes
Malaysia	30.7	9.1	baseline
Cambodia	15.5	6.8	no
Lao People's	6.7	6.1	no
Singapore	5.5	17.9	yes
Brunei	0.4	7.1	no

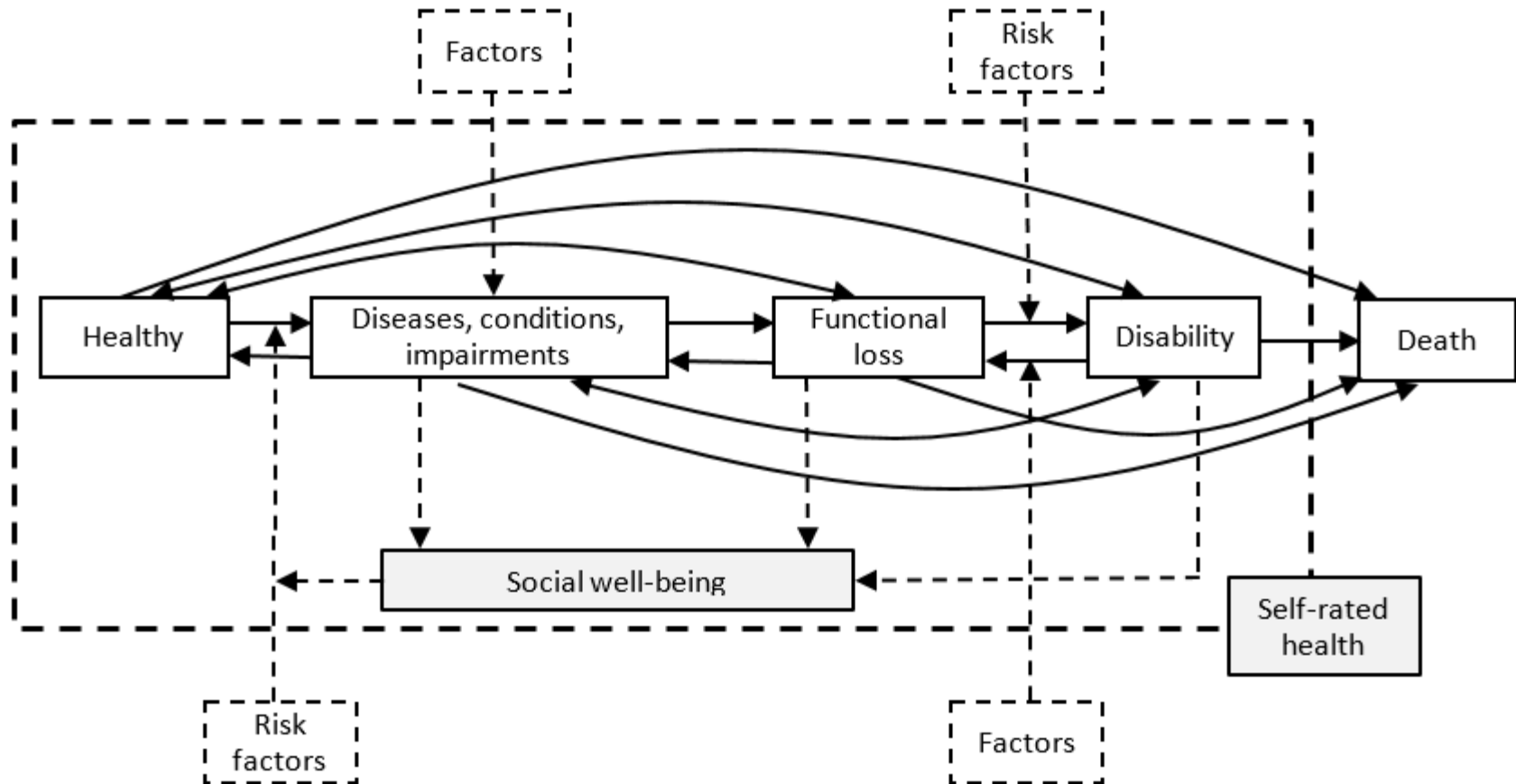
Aim of the Project

- Examine well-being of older adults aged 60 and over in two countries of ASEAN:
 - the Philippines and Vietnam (no longitudinal study)
- Focuses on health status including mental health: current health status and correlates, and changes over time if any, and determinants
- Estimate health expectancy
- Examine care needs, economic well-being, etc.

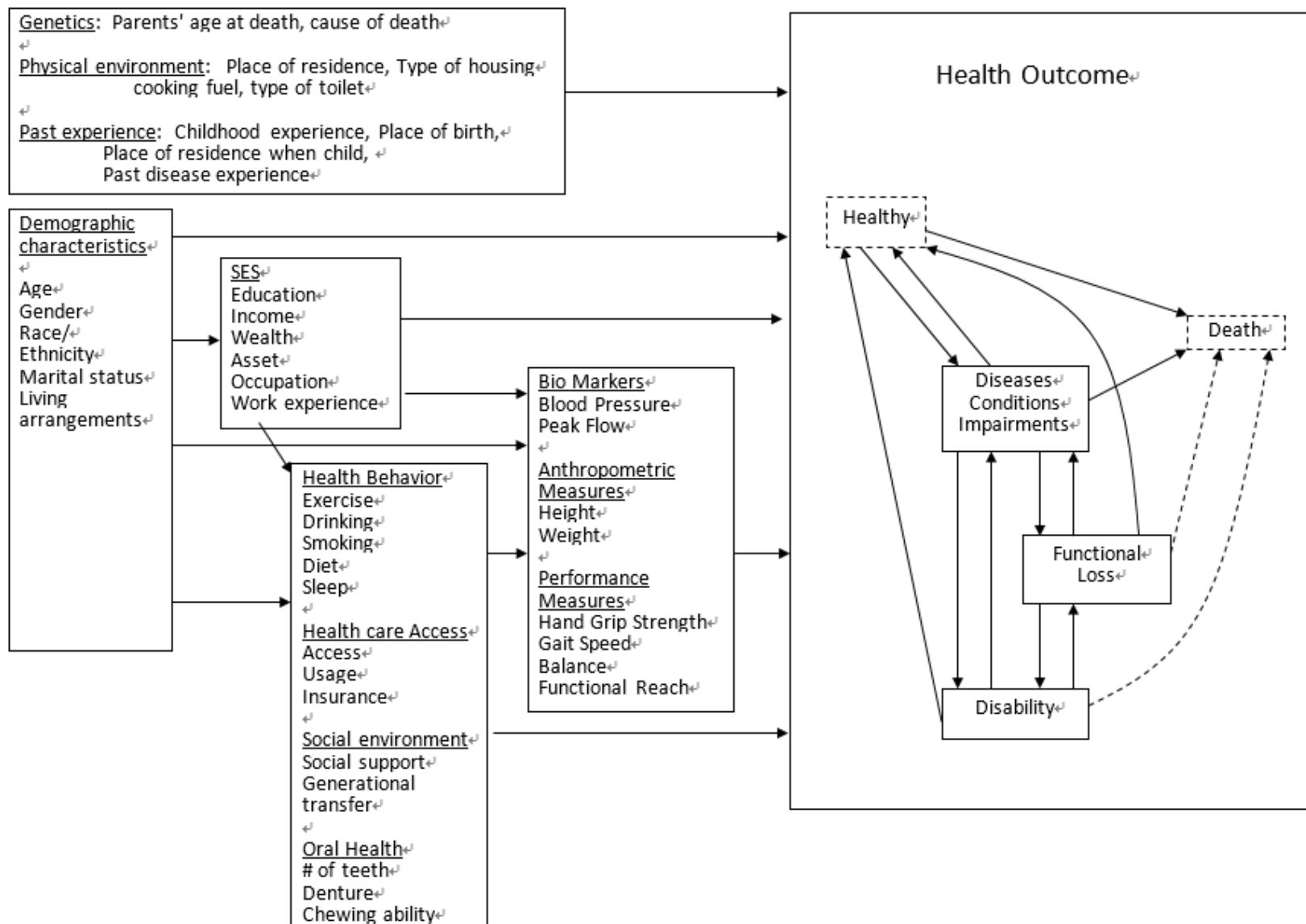
Statistics at a glance

		Philippines	Vietnam
Population	total	103 mil	93 mil
	60+	7 mil	9 mil
Proportion of population age 60+	2015	7.3%	10.3%
	2030	10.3%	17.5%
Life expectancy	at birth	68.5	76.0
	at age 60	17.0	22.0
GDP per capita		\$8,325	\$5,957

Health States and Health Transitions



Conceptual Framework of the Project



Longitudinal Study of Ageing and Health in Vietnam (LSAHV) and in the Philippines (LSAHP)

- Survey design for baseline survey in 2018
 - Nationally representative sample of 60 and over
 - Sample size of about 6,000 persons selected by Multi-stage stratified random sampling
 - oversampled those aged 70-79 by factor of 2 and aged 80 and over by factor of 3
 - In-person interview survey using structured survey questionnaire by tablet (proxy allowed)
- Wave 2 scheduled to be conducted in 2020
 - Exit survey: death and related information
 - Sample refreshing - may be considered

Questionnaires

- Screening by Short Portable Mental State Questionnaire (SPMSP: Pfeiffer 1975)
- Household questionnaire
- Main questionnaire for older adults
- Anthropometric measures questionnaire
- Child questionnaire
- Care giver/potential future care giver questionnaire

Household Questionnaire

- Family Structure
- Living arrangements
- Information on Surviving Children's family
- Electricity
- Water
- Cooking fuel
- Toilet
- Asset
- Bank account
- GPS

Main Questionnaire

- Demographic attributes
- Socioeconomic status
- Intergenerational exchange
- Social network
- Loneliness
- Health behaviors
- Chronic conditions
- WG disability questions
- Sleep
- GALI
- Physical functioning (ADL, IADL, NAGI)
- Mental Health
- Vision & Hearing
- Fall
- Pain
- Dental Health
- Health Care Utilization
- Income/Pension
- Information Technology

Exit Survey

Decedent proxy Interview

- Date of death
- Cause of death
- Place of death
- Medical expenses in the last 6 months prior to death
- Relationship of main caregiver

Anthropometric and performance measurements

- Blood Pressure / Pulse
- Anthropometric Measures
 - Height
 - Weight
- Grip strength
- Gait speed
- Peak flow
- Segmental Appendicular Muscle Mass
- Functional reach
- Balance test

Adult Child Questionnaire

- relationship with older parents
- intergeneration support
 - financial support
 - in kind support
 - others
- filial piety
- Contact information

Care giver/ Potential future care giver questionnaire

- working status
- health status
- family composition
- attitude and beliefs
- kind of care providing

Closing Remarks

- Only with data (evidence based), policy makers will be able to formulate effective policies for older adults in the country.
- It is very important to conduct cross country comparative studies for older adults. We could learn a lot from other countries.