Focus

Asia-Pacific

Newsletter of the Asia-Pacific Human Rights Information Center (HURIGHTS OSAKA)

June 2024 Vol. 116

Contents

Editorial

Longer Life, Prolonged Suffering?

As the number of old members of society increases, the question of quality of life for the elderly arises. Will they be able to enjoy a standard of living that is adequate for their health and well-being?

Can the elderly rely on their own families for support? Are there appropriate social environment, facilities and opportunities that address their needs? Can the state sufficiently support the elderly?

Is it possible for the elderly to live with a degree of independence while staying with their children or relatives?

Unless support for the elderly is secured and sustained, longer life may mean prolonged suffering particularly for those who have been living in disadvantaged situation for much of their life due to gender and other factors.

Shifting the perspective from retirement to continued engagement of the aged in whatever appropriate programs and activities would help make them live well.

Our elderly deserve a life of dignity and worth.

Assessment of the Status of Older Women in Sri Lanka*

Centre for Social Concerns

Sri Lanka's population has mean age of 33.95 years.[1] The female life expectancy in Sri Lanka is 80.4 years, while the male life expectancy is 73.8.[2] Women have almost seven years of added life compared with that of men. Since patriarchal practice dictates that a woman should be younger than the men at the time of marriage, most women are bound to outlive their spouse by several years in singlehood. Life expectancy is around 21.1 years at 60 years. The newly reduced retirement age to 60 years from 65 years due to the economic crisis forces the older population to a life of inactivity for around twenty years or more. Instead of expanding the employability of the population, reducing the retirement age in a population heading towards a dependency crisis on the working population is ironic.

Research Project

The Centre for Social Concerns (CSC) undertook an assessment in 2022 of one hundred ninety-nine older women and fifty-two older men in ten different districts covering the rural, urban, plantation, fishing, and agriculture and informal sector communities. Given the qualitative nature of the assessment, the sample of respondents provides a fair view of the older population in Sri Lanka particularly of the marginalized groups. The over-60 category is not a homogenous group. They are dependent on their activeness vs. ill-health, mobility vs. immobility, family support vs. the lonely, poverty, ethnic and cultural dimensions innate to the different cohorts. These are some of the determinant factors of quality of life in old age.

Main Findings

Sri Lanka, ranked 76th on the Human Development Index, has outperformed countries at a similar level of development. However, increasing numbers of elderly in a population creates challenges as well as opportunities. Sri Lanka's age dependency ratio for the dependent population was: 46.3 percent reported in 2019. A higher ratio indicates more financial stress on the working population.

The Ministry of Social Empowerment and Welfare is mandated to hold direct responsibility for the older persons to provide people-friendly – social and economic services to marginalized and disadvantaged people: Poor, Elderly, Disabled, and Single Parents. With a feminization of the population, especially in the upper age group, the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) Committee highlights that the discrimination that older women experience is often a result of unfair resource allocation, maltreatment, neglect, and limited access to essential services.

Article No. 8 of the United Nations General Recommendations No. 27 on older women and the protection of their human rights states that older women are not a homogeneous group. They have a great diversity of experience, knowledge, ability, and skills.[3] Article 15 of the Recommendations provides that the full development and advancement of women cannot be achieved without taking a life cycle approach. It will help to recognize and address the discrimination at different stages of women's lives through childhood, adolescence, adulthood, and old age and its impact on the enjoyment of human rights by older women. Therefore, the crucial role of the Ministry of Women, Child Affairs and Social Empowerment is underscored in meeting the CEDAW Committee recommendations.

Sri Lanka considers 60 years as the age of retirement. However, the assessment shows that 60 percent of women and 69 percent of men in all age groups over 60 are economically active and that 36 percent of even 80-plus women support their children and grandchildren,

even though their income is low. 50 percent of the older women receive family support for their livelihood-related activities contributing positively towards intergenerational support and interdependence.

Men are more visible in leadership roles within the family, neighborhood, and community. Over 50 percent of women also play leadership within the families, neighbors, and in the communities. Women's leadership during emergencies is mainly based on traditional knowledge and practices, whereas men intervene to resolve conflicts or transport the injured/sick for hospitalization. The women of the respondent group belong to an era where government and non-governmental interventions promoted leadership among women, making them more visible in the leadership of Community Based Organizations (CBOs). Between women and men, women tend to save their earnings and the government dole in banks, at home, or, a small percentage with others.

The key ailments of older persons are non-communicable diseases such as hypertension, arthritis, cataract, diabetes, and dental issues. There are, however, district disparities in the severity of the ailments. For instance, older persons in Colombo indicate a high incidence of hypertension and arthritis, whereas in Nuwara Eliya, the same diseases are recorded as much less. However, it is also noted that there is a vast difference in the ability to access health services in the mentioned districts.

The most visible disabilities among older persons are poor vision, poor hearing, stroke, and dental issues. A smaller number of females and males suffer from incontinence, and it is one of the areas that affect the quality of life of older persons that is overlooked. Older adults face abuse and violence such as scolding and threatening of being beaten, deprivation of food and medication. Some respondents indicated that sexual abuse of older women does happen in their neighborhood.

More women are recipients of government doles such as Samurdi (The Sri Lanka Government's Poverty Alleviation Programme) (51.5 percent), public assistance (9.4 percent), and elders' allowances (25.8 percent).

Gender is one of the key determinant factors that shape the current status of older women. It directly affects prolonged periods of singlehood among women, as men have a shorter life expectancy.

Certain cultural practices oppress women particularly the dowry system compelling old parents to give their house as dowry to the daughters. Early transfer of assets forces old parents to live with children's families although some live with children by choice, many are not happy. They are expected to engage in reproductive roles across generations without a choice that even curtail their leisure time or neglect their health. Critical discussion with older persons would be required to infuse strategic options like encouraging all children planning to marry to invest on housing, and sparing the elderly from having to give up their houses where they live.

Most women sacrifice their education, being married at a relatively young age, and being forced especially into unpaid reproductive roles that has kept them away from gainful employment. It has prevented women from earning to be more financially independent.

Resulting from the above, women remain poorer than men with little or no access to livelihood and holding assets. In the transfer of assets from their husbands or within the family, women have been unfairly treated. One of the reasons women are forced to live with their daughters in some communities is that the mothers are trapped in giving dowry to their daughters, resulting in them becoming homeless. The women are also socialized into selfless giving by prioritizing the needs of others, and this, in old age, make them more disadvantaged. Despite these odds, out of necessity, women still engage in some livelihood mostly around the house. Often, such meagre earnings again go back to maintain the families of their offspring.

Women continue to play voluntary roles within the communities. However, due to interventions of both government and non-governmental organizations their leadership seems more meaningful and is engaged in the transformation for change.

The National Secretariat for Elders in Sri Lanka is mandated to ensure the rights of older

people based on the United Nations Principles and the Madrid International Plan of Action on Ageing (MIPAA).[4] It is the responsibility of the Secretariat to, together with the Ministry of Health, and the Ministry on Women Affairs, share their National Plan of Action with the District and Divisional Secretariats and allocate sufficient funds to intervene in the issues of older persons. This includes community-based mobile programs to address issues of older women for which they have limited access.

Stringent policies, civic society and private sector interventions are required to make the older population active and productive and even change the perspective of the "dependent population" through a life-course approach to intervention. Women's rights organizations (WROs) have a strong role to play to ensure that the CEDAW Convention General Recommendations on Older Women are followed and especially advocated with the Ministry of Women, Child Affairs and Social Empowerment to address the issues of older women. All WROs which participated in the assessment expressed the importance of addressing the issues of older women through their projects and programs.

Conclusion

Sri Lanka is becoming a country with the oldest people in the South Asian region. It is also one of the fastest ageing countries in the world, with a larger proportion of women over 60. Therefore, it is appropriate to perceive Sri Lanka with a higher proportion of women's population over 60 facing feminization of the older population.

While analyzing the data, one of the key questions that surfaced was whether the quantity in years added to life has added quality to life of Sri Lanka's older women and men. The assessment clearly highlights the precipitating factors of structural inequality being more sharply reflected in the end of their lives. With longevity, if corrective actions are not taken at the appropriate time, the suffering can be lengthened for many years.

The life-course approach further elaborates how the life-long discrimination has made women subordinate to men through the acculturation into "unpaid gender roles" that have made most older women poor and subservient. The women, more than men, also were not sent to school but were kept at home to look after siblings and engage in other household chores. The denial of education has resulted in poor opportunities to engage in a substantial livelihood and holding at least some means of independent living.

The Centre for Social Concerns is an organization registered as a not-for-profit company with a vision of a society that has realized the human potential to harness justice, peace and humaneness. It engages in advocacy on behalf and with marginalized groups with special commitment to the elderly who are one of the most neglected groups in Sri Lanka.

For more information, please contact: Centre for Social Concerns 228, Walauwatte, Batagama North, Sri Lanka, phone:+94-11-2240078; e-mail: centreforsocialconcerns@gmail.com.

* This article is an edited excerpt of the report of the same title prepared by the Centre for Social Concerns.

Endnotes

1 Sri Lanka Population aged 60+ years, 1950-2021, https://knoema.com/atlas/Sri-Lanka/topics/Demographics/Age/Population-aged-60-years.

2 Sri Lanka Population aged 60+ years, 1950-2021, ibid.

3 CEDAW/C/GC/27, 16 December 2010, https://daccess-ods.un.org/access.nsf/Get?OpenAgent&DS=CEDAW/C/GC/27&Lang=E.

4 Political Declaration and Madrid International Plan of Action on Ageing (MIPAA), Second World Assembly on Ageing, Madrid. Spain, 8-12 April 2002, is available at www.un.org/esa/socdev/documents/ageing/MIPAA/political-declaration-livepage.apple.co.jpen.pdf.

The Elderly in Central Asia

Kanat Makhanov

Central Asia, comprised of Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, and Uzbekistan, is currently home to about seventy-five million people, with about 12 percent of the population being elderly. Over the past two decades, the region has faced significant economic challenges exacerbated by widespread labor migration. This migration has introduced further socio-economic difficulties, particularly impacting the elderly population who are often left behind and deprived of essential support systems.

There are different thresholds and internationally accepted standards of age at which people start to be considered elderly, typically ranging from 60 to 65. However, when considering the socio-economic context, the most relevant age threshold for defining people as elderly is the age beyond retirement, which varies from country to country in Central Asia. For men, the lowest retirement age is in Turkmenistan (62 years), and the highest is in Uzbekistan (65 years). For women, the lowest retirement age is in Turkmenistan (57 years), and the highest is in Kazakhstan (61 years), according to current legislation.

As of 2024, the combined population aged 60 and above in the five Central Asian states is about nine million (UN DESA, 2024), and around 8.9 million of them are registered as pensioners entitled to pension benefits from the state (Ministries of Social Protection of Central Asian states, 2024). Despite the small number of pensioners relative to the total population, the economic well-being of the elderly in the region remains highly concerning due to low amount of pension and high inflation rates over the past several years. For instance, the average pension in Tajikistan in 2024 is around 400 *somoni* (approximately 37.30 US dollars), the lowest among all former Soviet states. Other countries in the region, such as Uzbekistan with an average pension of 86.80 US dollars and Kyrgyzstan with an average pension of 107.10 US dollars, have the second and third lowest pension rates in the entire post-Soviet space (Ministries of Social Protection of Central Asian states, 2024). These low pension rates imply that a significant share of the elderly population in these countries is exposed to conditions of poverty and extreme poverty. It should be admitted that the governments of these countries were rather active in raising the social benefits and pensions in recent years. However, given the high inflation rates that have hit the region over the past several years, the socio-economic well-being of the elderly in Central Asian countries has become increasingly challenging in recent times. On the other

Table 1. Number of pensioners and average level of pension benefits in countries of Central Asia in 2024 measured in current US dollars

	Kazakhstan	Kyrgyzstan	Tajikistan	Turkmenistan	Uzbekistan
Average pension (USD)	295.2	107.1	37.3	201.3	86.8
Minimal pension (USD)	128.8	79.0	23.3	143.1	51.1
Number of pensioners (thousand people)	2,354.0	762.0	796.1	524.3	4,470.0

Source: Data sourced from the Ministries of Labor and Social Security of Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan.

hand, the degree of exposure of the elderly to poverty is not uniform across the region. Kazakhstan has relatively decent pension levels compared to the other countries in the region. Turkmenistan also has somewhat higher pensions according to official statistics; however, the accuracy of these statistics from this highly isolationist country is questionable.

Labor Migration and the Elderly

As it has been for many years, the labor migration of youth and the high dependency of some Central Asian states on remittances constitute a complex issue affecting various aspects of life in these countries. Tajikistan, Uzbekistan, and Kyrgyzstan are particularly dependent on remittances. For instance, before the Russian invasion of Ukraine, remittances from labor migrants made up about 10 percent of Uzbekistan's Gross Domestic Product (GDP) and 30 percent of Kyrgyzstan's and Tajikistan's GDP (ADB, 2023). This pattern is less prevalent in Kazakhstan and Turkmenistan. In Kazakhstan, the relatively higher income levels reduce the need for labor migration, while in Turkmenistan, strict restrictions on travel abroad limit the movement of its workforce abroad. The remittances sent to Uzbekistan, Kyrgyzstan and Tajikistan from incomes earned abroad play a crucial role in the economies of these countries, including alleviating poverty among the elderly. The real effect of the remittances on elderly welfare in these countries is hardly quantifiable, as remittances are often transferred through informal channels and redistributed within households.

It is commonly believed that the altruism motive prevails in sending remittances in which migrant workers send money back to their home country primarily out of concern and care for their family members and relatives. This concept is based on multiple observations when remittances inflows increase with age dependency ratio (number of dependents aged 0 to 14 and over 65, compared to the total population aged 15 to 64), consistent with the altruism motive such as supporting children and elderly. However, in the case of some of the Central Asian countries, the final effect of remittances might appear somewhat debatable especially in recent periods.

Despite the fact that regions with the poorest economies and highest unemployment rates are the primary sources of migrant workers (Cabar.asia, 2021), the overall effect of remittances on alleviating poverty in Central Asia may be very limited in the long run. One possible reason is that labor migrants come from families that are not at the extreme end of poverty, and thus long-term labor migration may not benefit the poorest section of the population. Moreover, most migrant workers prefer to resettle permanently in Russia after years of labor migration, which does not lead to the eradication of the root causes of poverty (Nawaz Kayani, 2022). This can lead to further stratification between rich and poor households, impacting the elderly population, as they often cannot rely on state pensions and depend on the younger generation for support.

Extended periods of labor migration have prompted workers to settle permanently in Russia rather than move back and forth (Nawaz Kayani, 2022). For instance, since 2016, over 800,000 citizens of Tajikistan, Uzbekistan, and Kyrgyzstan have received Russian passports, the vast majority of whom are migrant workers living in Russia (Russian Ministry of Internal Affairs, 2024). The number of holders of Russian passports from these countries has been rapidly rising over the past several years, up until 2023. Understanding the effects of these trends on the elderly in these countries is challenging and requires extensive research. However, acquiring a Russian passport usually implies that working-age migrants resettle in Russia along with their family members, which negatively affects the elderly. Unlike the younger generation, elderly people are usually reluctant to move to another country due to health issues, inability to receive their state pension abroad, social bonds, climate, and other factors. However, staying in their home country weakens social bonds with their children and grandchildren living abroad and causing socio-emotional stress.

One of the risks stemming from massive labor migration from countries like Tajikistan, Uzbekistan, and Kyrgyzstan is that it is primarily concentrated in Russia. It should be admitted though that precise and reliable statistics on the number of

migrant workers in Russia are lacking. According to United Nations (UN) estimates from 2019, there are probably more than eleven million labor migrants in Russia, the majority from former Soviet Central Asian countries (UN, 2019). Around 63 percent of all labor migrants from Central Asia worked in Russia in 2020 (UN DESA, 2020). Since the full-scale invasion of Ukraine by Russia in February 2022, subsequent international sanctions and economic hardships might have decreased remittances, negatively impacting the well-being of the elderly in Central Asia. Tracking remittance dynamics is difficult as much of it is not reflected in statistics. However, recent estimates suggest that the deceleration of the Russian economy might have heterogeneous effects on remittances sent to Central Asian countries (ADB, 2023), with serious downturns in some sectors and growth in others. Generally, it can be said that the welfare of elderly people in Central Asia remains dependent on remittances from Russia to a certain extent.

Impact of Labor Migration

The significant outmigration of youth and the working-age population from Central Asian countries produces a complex array of changes that, over time, tend to deteriorate the lives of the elderly population. As mentioned earlier, the outmigration of the working-age population from Central Asian states can be estimated in millions, leading to noticeable changes in regional demographics. As a result, the age structure in some areas with significant population outmigration becomes highly imbalanced in terms of gender and age structure, further deteriorating local economies and social life. Moreover, national economic policies in Central Asian states sometimes exacerbate regional inequalities, leading to additional outmigration. For instance, the *propiska* (obligatory residence permit) registration policy in Uzbekistan, inherited from the USSR system, prohibits migration to urban centers, forcing people to live and work in their native regions. This policy severely restricts internal migration, prompting people from areas with high unemployment to migrate abroad in search of jobs, often resulting in the massive migration of essential high-skilled specialists as well. For example, large-scale migration of medical specialists has been observed in many areas of Tajikistan due to low wages (Vasilyevich and Khasanovich, 2024). This led to a noticeable deterioration of the country's healthcare system, which has had the greatest impact on the elderly population, who require medical care the most.

Although labor migration from Central Asian countries is often a means of economic survival, this process frequently has a clear negative effect on the traditional social organization in these countries. The population of Central Asian countries, especially in rural areas, typically comprises traditional societies where the elderly play a key role in decision-making. The departure of youth from these complex networks of personal relationships disrupts traditional bonds, often affecting the elderly the most. With their children working thousands of kilometers away from home, the elderly gradually lose their emotional and socio-psychological connection with them, resulting in a loss of the traditional privileged position they used to enjoy within the social structure. In many cases, labor migration weakens the bonds between parents working abroad and their children left in their home country. When the children of migrant workers remain in their home country, they are usually left in the care of their elderly grandparents. Consequently, the elderly grandparents become the ones who bridge the generational gap. Raising grandchildren is quite challenging for the elderly both physically and psychologically (Ablezova et al., 2008). This profound shift highlights the multifaceted impact of labor migration, which not only affects economic stability but also erodes the traditional social fabric and intergenerational relationships in Central Asian societies.

Marginalization of the Elderly

With more than two decades of active labor migration from Central Asian countries, the elderly population has not only been marginalized in economic and socio-demographic dimensions, but also experienced regional marginalization. Regions with the poorest economies and highest unemployment rates are the primary sources of migrant

(Continued on page 14)

Ageism in Southeast Asia

Kanwaljit Soin

Southeast Asia is home to some of the world's most rapidly ageing countries. This is the result of increased life expectancy and falling fertility rates.

In 1970, women in Southeast Asia had an average of 5.5 children. By 2017, that number was down to 2.1, and the total fertility rate dropped below the replacement level in Brunei, Malaysia, Singapore and Thailand.[1]

Countries with slow population growth tend to be ageing ones. This has held true throughout the ASEAN region as every nation has experienced an increase in median age since 1970. By 2035, it is projected that 26.6 percent of Singapore's population will be 65 or older, while the same group is expected to reach 22.8 percent in Thailand. In Vietnam, the proportion of those over 80 will rise to 20 percent by 2038.[2]

An ageing population shifts the narrative for the region's economic growth prospects, as a declining working-age population pairs with an increasing old-age dependency ratio.

On a cultural scale, two factors tend to make a society more ageist — scarce resources and a growing percentage of older people in the population. More older people will need health and social care and financial security for retirement needs.

The term "ageism" was coined by gerontologist and author Robert Butler, MD. According to him, ageism has three elements – prejudicial attitudes towards older people and the ageing process, discriminatory practices against older people, and institutional practices and policies that perpetuate stereotypes about the elderly.[3]

The World Health Organization's *Global Report on Ageism*[4] states that one out of every two people on earth may harbor ageist attitudes. Ageism is everywhere and it impacts everyone. We need to recognize it in our part of the world and take measures to reduce it. Compared to racism and sexism, ageism is the most socially normalized "prejudice." Its consequences affect us deeply as individuals and the societies we live in.

Like the racist and the sexist, the ageist relies on the concept of "othering" — where we see a group of people as being unlike ourselves. That perceived difference leads to bias and prejudice.

Ageism exists because of fear and denial that we will become the other person — the older person whom we see as an unwelcome stereotype. All of us are exposed to negative images and messages about older people from society at large, the media, movies and negative stories about older people. Through these experiences, our brains become wired to implicitly believe that becoming old means going downhill both cognitively and physically. Thus, we might consider ageism to be a coping mechanism that allows people to avoid thinking about their own mortality.

All "isms" are socially constructed ideas that pit us against one another, but ageism's target makes it a singular and strange phenomenon. Of the three categories of 'isms' — sex, race and age — age is the only one in which the members of the in-group (the young) are destined to join the out-group (the old). Ageism is therefore prejudiced against our future self — our feared future self. That is why I find it strange that although ageism can compromise the quality of our own life into old age, many of us become ageists.

Ageism in the Workplace

Data from ADP's Global Workforce View 2020 report shows that Singaporean workplaces have some of the highest incidences of age discrimination in the Asia-Pacific region, with 17 percent of workers saying they have experienced such discrimination in their current role. The survey

found the regional average to be 12 percent and Asia-Pacific has the highest regional incidence of perceived discrimination.[5]

Embracing today's greater longevity requires policymakers and employers to reject yesterday's preconceptions about ageing. Chronological age does not equate with function and does not equate with cognition. Ageing is also very heterogenous and so it should not be used as a proxy for capability. As such, we should do away with our policies of fixed retirement and re-employment age, as is the practice in Singapore.

Despite reported ageism in the workplace, the Philippines is the only country in our region that has any legislation which expressly prohibits age discrimination. In Singapore, there are only guidelines regarding fair treatment in the workplace by the Tripartite Alliance for Fair & Progressive Employment Practices (TAFEP). This is not enough. Fortunately, Singapore is working to codify the current workplace anti-discrimination guidelines into law. Employers have to face the reality that the workforce is ageing, and it would be to their benefit to continue to upskill and retain their older workers. Practicing ageism is not a productive way to go.

Companies must ensure that their employees — including their leadership — attend sessions to be aware of unconscious biases directed towards older workers. This needs to be part of their diversity, equality and inclusion (DEI) agenda. We are living longer, so each new cohort of the older population is effectively younger and should not be discriminated against because of chronological age. Their ability to do the work is what is important. Leaders must recognize the value of the experience and institutional memory of older workers. They should also organize the transfer of skills between generations and teach younger leaders about reverse mentoring.

In addition, older workers have to rid themselves of the negative perceptions of ageing. They should engage in lifelong learning and try to build allies with younger co-workers throughout their working careers. Doing so will deliver individual and collective benefits.

Ageism and Gender

Outside of the workplace, ageism also impacts our daily lives and the gender dimension of ageism is a double blow for women. For some women, ageism is worse than the ageing process itself. In our culture and elsewhere, youth and beauty are greatly prized, especially for women. Women become "older earlier" and are more often judged by their physical appearance, rather than their accomplishments.

Grey hair and facial lines are seen as making men look distinguished and experienced whereas they merely make women look "old." Therefore, women often disguise the fact that they are ageing. That is one reason why many women do not like to tell their age. Old age seems to make women invisible and therefore, many women want to avoid looking old so that they are not overlooked in their attempt to remain socially and professionally engaged. This is one reason why the aesthetic industry is so successful and so many of its clients are women. We should work toward a genderless outlook on ageing in which everyone is recognized and appreciated for the experience their years have given them.

Ageism and COVID-19

The COVID-19 pandemic has helped expose ageism and age discrimination in society. In a statement published during the pandemic, Claudia Mahler, the United Nations Independent Expert on the enjoyment of all human rights by older persons, called for urgent action against ageism. As she noted, "Ageist comments and hate speech were ripe with older persons being blamed as the reasons for lockdowns and labelled as vulnerable and burdens to societies."[6] In reality, society placed greater burdens on older people during that time as our ageist assumptions made it "more difficult for older persons to get equal access to medical care."[7]

One study found the pandemic compounded the impact of ageism and that those effects might outlast the challenging circumstances in which they arose.

As the researchers noted, "Being the target of ageism during the crisis negatively affects older adults' self-perceptions of ageing and this impact may be felt beyond the current crisis."[8]

The same study noted that while we develop subjective perceptions of ageing early in life, they "can change over the life span as a function of experiences."

Internalization of Ageism by Older People

One of the most insidious effects of ageism is that older people internalize negative attitudes which become self-relevant and self-fulfilling prophesies. The older person then feels that it is not worth trying to age actively, not worth doing routine health screening, not worth living a healthy lifestyle and that nothing can be done about frailty and disease as they are part of getting old. It is crucial that we consider the effects of ageism as we develop and enact policies to keep older people healthy via beneficial efforts like age-friendly housing, affordable health care and senior centers.

It is interesting to note that credible scientific research has shown that negative and positive self-perceptions of ageing can have profound effects on health and longevity.

One study found that older people with more positive self-perceptions of ageing, measured up to twenty-three years earlier, lived 7.5 years longer than those with less positive self-perceptions of ageing. This advantage remained after age, gender, socioeconomic status, loneliness, and functional health were included as covariates.[9]

The results of another study suggest that positive age beliefs — which are modifiable and have been found to reduce stress — can act as a protective factor. It further found that these benefits occur even for older individuals at high risk of dementia. This is the first study to link the brain changes related to Alzheimer's disease — a devastating neurodegenerative disorder that causes dementia in millions of people worldwide — to a culturally-based psychosocial risk factor. This last study suggests that combatting negative beliefs about ageing could potentially offer a way to reduce the rapidly rising rate of Alzheimer's disease.[10]

In Singapore, the statistics for dementia are worrying — one in ten people over the age of sixty and one in two over the age of 85 have dementia. Over 100,000 are estimated to be diagnosed with dementia in Singapore.[11] Therefore, our health strategy must prioritize combatting negative beliefs about ageing.

Managing Ageism

Ageism exists in our institutions, our relationships and ourselves, and so we have to work at all these levels to reduce ageism.

On an individual level, we should explore and explode our own unconscious biases. A common example is when an older person forgets something, he or she will say apologetically, "I'm having a senior moment?" Younger people also forget things, but they do not say, "I am having a junior moment."

Ageism can change us in many ways. It can alter our perceptions of ourselves and negatively impact our health, longevity and well-being. It can create generational divides, thereby limiting the benefits of interaction between those groups. Ageism can also foster serious economic consequences.[12]

On the family level, some young people here and in other Asian societies have a misplaced sense of filial piety. They show their love and devotion by putting too many restraints on their elderly parents.

While moderate shows of affection elevate the mood of the older person, too much support can reinforce feelings of inadequacy. This can make older people feel powerless and vulnerable, which can lead to depression.

Tough love is a concept that is familiar to many. The phrase commonly applies to raising youth. However, older people can also benefit when adult children allow their elderly parents to live as independently as possible and accomplish certain activities by themselves. In the long run, tough love tactics can help the older person.

On the societal level, we have to work towards building age-integrated societies. Such age-integration could bring about positive changes in our thinking, behavior, policies and institutions.

Singapore is one of the fastest ageing countries in the world and is going through an unprecedented demographic transition. For Singapore to cope effectively with this

demographic challenge, it needs to convert its ageing society into a longevity society. Andrew J. Scott offers this wisdom: "An ageing society focuses on changes in the age structure of the population, whereas a longevity society seeks to exploit the advantages of longer lives through changes in how we age. Achieving a longevity society requires substantial changes in the life course and social norms and involves an epidemiological transition towards a focus on delaying the negative effects of ageing."[13]

Ageism is a major barrier to achieving an age-integrated longevity society.

The media plays a major role in perpetuating stereotypes of age. The ways in which older people are represented in the media can have a lasting impact on attitudes, reinforcing stereotypes held both by the young and by older people themselves.

Dr Becca Levy and her colleagues estimate that age discrimination, negative age stereotypes, and negative self-perceptions of ageing lead to billions of dollars in excess annual spending in the US on common health conditions like cardiovascular and respiratory disease, diabetes, and injuries.

We need data like this in Southeast Asia to spur us to take action against ageism instead of wringing our hands about how the ageing population is pushing up health care costs.

To say the least, ageism is hardly benign --- it can foster serious economic, social and health consequences. It can have a direct effect on people's livelihoods, health and function.

A wide-ranging public conversation is essential, as the ageing of the population is one of the biggest demographic and socio-economic challenges in our recorded history. Whether this challenge will be a boon or bane depends on each nation's policy response. If we make the appropriate adjustments to become an age-integrated longevity society, then we can benefit from the "longevity dividend."

How can we become an age-integrated longevity society?

An age-integrated society builds on the complementarity of qualities and skills of both younger and older people. We must more vigorously create the conditions for the old and the young to study, work, and live together. Older people want to age and die in the community and not in old age homes. We can adapt our built environment to create more spaces where old and young interact and support and learn from each other. For example, why not build senior care centers that are also student care centers, with opportunities for the different generations to bond over common interests? The Aconchego program in Portugal aims to increase intergenerational contact by arranging for older people to provide housing to university students. In exchange, the students help alleviate older people's loneliness and isolation.[14]

Why not ensure that all working spaces are multigenerational? Why not do away with policies that have fixed retirement ages? Because age is not a reliable indicator for judging workers potential productivity or employability — chronological age does not equate with function and does not equate with cognition. To bring about this shift will require changes to the way we run businesses, as well as the outlooks and actions of individuals and society as a whole.

It is worth pointing out that the establishment of an age-integrated society will spur the formation of an inclusive society. Older people are from different genders, ethnic groups, religions and abilities, and if we accept them for themselves and feel no prejudice against them and our future selves, then other "isms" will also melt away from our consciousness and we will be on our way towards universal human solidarity.

Dr Kanwaljit Soin is a well-respected orthopaedic and hand surgeon. She is also a former and Singapore's first female Nominated Member of Parliament, from 1992-1996. Dr Soin, who was inducted into the Singapore Women's Hall of Fame in 2014, is actively involved in welfare and advocacy organizations. She is also the author of Silver Shades of Grey: Memos for Successful Ageing in the 21st Century.

For further information, please contact: The Head Foundation, 20 Upper Circular Road, The Riverwalk #02-21 Singapore 058416; ph (65) 6672 6160; fax (65) 6672 6189; e-mail:

(Continued on page 15)

New Educational Programs of the Human Rights Commission in Iran

Iranian Islamic Human Rights Commission

The Iranian Islamic Human Rights Commission (IHRC) was formally established in December 1994. But its major activities began one year later in December 1995 as an independent national institution in Iran. It has so far been operating for twenty-eight years.

In 1996, the United Nations (UN) Human Rights Commission (replaced by the Human Rights Council) welcomed the establishment of the Human Rights Commission in Iran in the resolution related to national institutions (E/CN.4/RES1996/64). It has the most prominent Iranian legal scholars and academics among its members, and has been systematically implementing a variety of educational programs within its Research, Educational and Promotional Department.

Educational Program

Inspired by the Paris Principles on National Institutions approved by the United Nations General Assembly (1993), the IHRC has made human rights education one of its main functions at different levels. It implements various programs every year for various groups, including those in government agencies and civil society, and the general public. Usually, the training programs of IHRC are conducted with a focus on international standards, Iran's legal system and Islamic thought. In some cases, the training is focused on comparative studies. The following discussion reviews some of the most important educational programs implemented by IHRC.

Recent Activities

From summer 2023 to spring 2024, the IHRC has implemented the following human rights education programs:

1. A training course on Poverty Alleviation and Human Rights from the perspective of international standards, Iran's legal system, and socio-economic foundations

This three-week course, conducted on Wednesdays at the IHRC central office, featured presentations by the Human Rights Council rapporteur on extreme poverty and human rights issues, as well as the discussion of relevant reports submitted to UN specialized agencies such as the International Labor Organization. Additionally, the Iranian government's obligations under the International Covenant on Economic, Social, and Cultural Rights are examined. A representative from non-governmental organizations engaged in poverty alleviation in deprived areas of Iran also present non-governmental initiatives. The course is publicly advertised, and participation is open to all interested individuals, primarily attracting graduate students or doctoral candidates and professionals working in relevant governmental bodies.

2. The Police and Human Rights Education Program

This program, conducted with the participation of representatives from various departments of the Iranian police organization, provides an opportunity for guest lecturers to discuss internationally published books in the field and engage in discussions on relevant works translated into Farsi with the presence of their translators, who were themselves legal scholars in Iran. The works translated into Farsi describe the international human rights standards regarding the police.

3. Artificial Intelligence and Human Rights Education Program

Led by a human rights law professor, Baqer Ansari, PhD, Director of the Master's Department of Human Rights, Faculty of Law, Shahid Beheshti

University (located in Tehran), this program consists of three sessions held over three separate weeks and predominantly attracts graduate students in law and computer engineering.

It is noteworthy that in Iran, masters programs in human rights law have been established in four universities (Shahid Beheshti, Tehran, Allameh Tabatabai, all located in the capital of Iran, Tehran, and the fourth Mofid University located in Qom city) for over two decades, admitting five to seven students annually. Over the past two decades, students in this field authored numerous theses on various human rights topics, many of which have been published as books, significantly contributing to the expansion of specialized human rights literature in Iran.

4. Examining a number of Islamic movements in the world in terms of their attitude towards human rights

In this four-session course conducted over four weeks, from mid-December 2023 to mid-January 2024 the instructor of this course, Bahman Akbari, PhD, a researcher of Islamic movements at the global level, examined the extent to which various political and social movements identifying with Islamic ideology in the past three decades have prioritized human rights. It was observed in this course that some of these groups, purporting to advocate for change and social transformation based on Islamic principles, have failed to grasp the proper standards of human rights or demonstrate adequate support for human rights. Consequently, many of these groups are perceived by Muslims as misusing Islam and are viewed with suspicion in the Islamic world, akin to organizations like ISIS or the Taliban.

5. Familiarization with the Draft International Covenant on the Right to Development

Three professors (Nasreen Mosfa, PhD, Professor of Tehran University, Baqer Ansari, PhD, Associate Professor of Shahid Beheshti University, Mahmoud Khani, PhD, Head of the Department of Social Development of the Ministry of Foreign Affairs of Iran) elucidated on the theoretical and practical dimensions of the draft International Covenant on the Right to Development on 25 October 2023 in an event held at the headquarters of IHRC and simultaneously broadcast online. This draft covenant was presented at the Human Rights Council in 2023.[1]

The event revealed significant disagreements between developed and developing countries on various issues in the finalization process of this document, emphasizing the importance of its finalization and approval for development processes worldwide.

New Plans

The IHRC has plans to implement several educational programs starting from April 2024. These programs include:

- Understanding the Internal or External Challenges and Impacts of International Human Rights Mechanisms;
- Familiarization with the Judicial Procedures of Iranian Courts regarding Child Rights Support and Compliance with the Convention on the Rights of the Child;
- Understanding International Judicial and Quasi-Judicial Processes Dealing with Violence Against Women;
- Exploring the Dimensions of the Right to Energy and Governments' Commitments to Respect this Right and Protect the Environment;
- Training on the content of the *Practical toolkit for law enforcement officials to promote and protect human rights in the context of peaceful protests* presented by the Special Rapporteur on the Right to Assembly to the Human Rights Council;
- Training on New Developments in the United Nations regarding Trade and Human Rights (Special Program for Economic Activists).

IHRC aims to collaborate with other active human rights organizations in the Asian region to jointly implement some of its educational programs this summer. Furthermore, IHRC has translated into Farsi several books on human rights education and published them. This ongoing translation initiative of IHRC welcomes proposals for additional works to be translated into the Persian language.

For further information please contact: Iranian Islamic Human Rights Commission, No. 2, Soltani Alley (former Qarqavel), Seyyed Khandan, the beginning of North Sohrawardi, Tehran, Iran; ph 88768623; fax 88768807; e-mail: ihrciran@yahoo.com, ihrc@ihrc.ir; www.ihrc.ir, www.humanrightsiran.com; Facebook: www.fb.com/IHRCIran; telegram: https://t.me/ihrciran.

Endnote

1 See Intergovernmental Working Group on the Right to Development Presents to the Human Rights Council a Draft International Covenant on the Right to Development, Human Rights Council, 20 September 2023, www.ohchr.org/en/news/2023/09/intergovernmental-working-group-right-development-presents-human-rights-council-draft. (To see the text of the draft, refer to: A/HRC/54/50/Add.1)

The Elderly in Central Asia

(Continued from page 7)

workers (Cabar.asia, 2021). Over extended periods, economic marginalization of these regions relative to other parts of the country occurs without adoption and implementation of proper measures for harmonious regional development by central authorities. With the passage of time, the development of these partially depopulated regions becomes increasingly difficult due to the shortage of the working-age population. Many villages and small settlements in southern Kyrgyzstan and eastern Tajikistan exemplify this phenomenon. The governments of these countries have largely been unsuccessful in implementing policies that would stimulate development in the most underdeveloped parts of these nations. As a result, these settlements, typically small towns and villages, have become marginalized areas with predominantly elderly and sometimes predominantly female populations. As a result, the elderly population faces multiple problems in their daily lives related to infrastructural degradation, poor transportation, and limited access to healthcare, sanitation, and drinking water.

Kanat Makhanov is a research fellow at the Eurasian Research Institute. He is a PhD candidate at the Department of Social Geography and Regional Development. His current research is related to geography of population in post-Soviet countries with a particular focus on Kazakhstan.

For further information, please contact Kanat Makhanov, Eurasian Research Institute, ph +7 (727) 279 97 94, fax +7 (727) 279 24 26, e-mail: username1006@gmail.com; kanat.makhanov@eurasian-research.org). He can also be contacted at the University of Debrecen, ph (mobile): +36 70 346 9957, e-mail: kanat.makhanov@science.unideb.hu).

References

ADB (2023). The economic impact of the Russian invasion of Ukraine on the Caucasus and Central Asia: Short-term benefits and long-term challenges. Retrieved from www.adb.org/sites/default/files/publication/863591/ado-april-2023-special-topic.pdf. Accessed: 1 June 2024.

Nawaz Kayani, F. (2022). Analyzing the impact of foreign remittances upon poverty: A case of Uzbekistan from Central Asia. *International Journal of Economics and Financial Issues*, 12(1): 1-6.

Vasilyevich, R. S. and R. A. Khasanovich (2024). Emigration of medical personnel from Tajikistan abroad: Causes and consequences. *Migration Letters*, 21(4): 1755–1767. https://doi.org/10.59670/ml.v21iS68489

United Nations Department of Economic and Social Affairs (2024). Total population by single age.

Retrieved from www.un.org/development/desa/pd/data-landing-page. Accessed: 1 June 2024.

United Nations Department of Economic and Social Affairs (2020). International migrant stock. Retrieved from www.un.org/development/desa/pd/content/international-migrant-stock. Accessed: 6 June 2024.

Cabar.asia (2021). Labor migration from Central Asia: constantly relying on Russia is a wrong strategy. Retrieved from https://cabar.asia/en/labor-migration-from-central-asia-constantly-relying-on-russia-is-a-wrong-strategy. Accessed: 7 June 2024.

Ageism in Southeast Asia

(Continued from page 11)

info@headfoundation.org; www.headfoundation.org.

* This is an edited version of the article of the author in Digest, 18 August 2023, entitled "The Story of Ageism in the Southeast Asian Region," https://digest.headfoundation.org/2023/08/18/the-story-of-ageism-in-the-southeast-asian-region/#easy-footnote-3-40502.

Endnotes

1 Fertility, OECD logoSociety at a Glance: Asia/Pacific 2022, OECD iLibrary, www.oecd-ilibrary.org/sites/c416afed-en/index.html?itemId=/content/component/c416afed-en; The ASEAN Post Team, Declining fertility rates in ASEAN, The ASEAN Post, 29 March 2020, https://theaseanpost.com/article/declining-fertility-rates-asean. https://theaseanpost.com/article/declining-fertility-rates-asean

2 The ASEAN Post Team, Southeast Asia's rapidly ageing population, The ASEAN Post, 16 February 2020, https://theaseanpost.com/article/southeast-asias-rapidly-ageing-population.

3 See Sheldon Ornstein, Ageism and Aging, American College of Health Care Administrators, www.achca.org/index.php?option=com_dailyplanetblog&view=entry&category=aging&id=50:ageism-and-aging. Read also Robert N. Butler, MD, "Age-Ism: Another Form of Bigotry," *The Gerontologist*, Volume 9, Issue 4_Part_1, Winter 1969, pages 243–246, available at http://agisme.eu/wp-content/uploads/2018/02/Butler-Ageism.pdf.

4 Global report on ageism, WHO, www.who.int/teams/social-determinants-of-health/demographic-change-and-healthy-ageing/combatting-ageism/global-report-on-ageism.

5 Mint Kang, Singapore has most age discrimination in APAC, People Matters, www.peoplemattersglobal.com/news/diversity/singapore-has-most-age-discrimination-in-apac-27840.

6 Pandemic exposes ageism and age discrimination in society, says UN expert, United Nations, 30 September 2021, www.ohchr.org/en/press-releases/2021/09/pandemic-exposes-ageism-and-age-discrimination-society-says-un-expert.

7 Pandemic exposes ageism and age discrimination in society, says UN expert, United Nations, ibid.

8 Anna E. Kornadt, Isabelle Albert, Martine Hoffmann, Elke Murdock, Josepha Nell, "Perceived Ageism During the Covid-19-Crisis Is Longitudinally Related to Subjective Perceptions of Aging," *Frontiers Public Health*, Volume 9, 13 July 2021, www.frontiersin.org/journals/public-health/articles/10.3389/fpubh.2021.679711/full.

9 Levy, B. R., Slade, M. D., Kunkel, S. R., & Kasl, S. V., "Longevity increased by positive self-perceptions of aging," *Journal of Personality and Social Psychology*, 83(2), 261–270, 2002. https://doi.org/10.1037/0022-3514.83.2.261.

10 Becca R Levy, Martin D Slade, Robert H Pietrzak, and Luigi Ferrucci, "When Culture Influences Genes: Positive Age Beliefs Amplify the Cognitive-Aging Benefit of APOE ε2," J Gerontol B Psychol Sci Soc Sci. 2020 Oct; 75(8): e198–e203, www.ncbi.nlm.nih.gov/pmc/articles/PMC7489069/.

11 Understanding Dementia, Dementia Singapore, https://dementia.org.sg/dementia/singapore/.

12 Questions and answers/Ageing: Ageism, WHO, 18 March 2021, www.who.int/ageing/features/faq-ageism/en/.

13 See Andrew J. Scott, "The longevity society," *The Lancet*, www.thelancet.com/journals/lanhl/article/PIIS2666-7568(21)00247-6/fulltext.

14 For more information on the Aconchego Program, read Age-friendly World, https://extranet.who.int/agefriendlyworld/afp/aconchego-program/.

HURIGHTS OSAKA Calendar

HURIGHTS OSAKA welcomes submission of articles on human rights education that focus on specific sectors such as youth, the elderly, workers, fisherfolk, indigenous people, etc. These articles can be included in the 14th volume of *Human Rights Education in Asia-Pacific*.

BUREAU DE POSTE
OSAKA
JAPON
TAXE PERCUE

PRINTED MATTER **AIR MAIL**

May be opened for inspection by the postal service.

HURIGHTS OSAKA, inspired by the Charter of the United Nations and the Universal Declaration of Human Rights, formally opened in December 1994. It has the following aims: 1) to engender popular understanding in Osaka of the international human rights standards; 2) to support international exchange between Osaka and countries in Asia-Pacific through collection and dissemination of information and materials on human rights; and 3) to promote human rights in Asia-Pacific in cooperation with national and regional institutions and civil society organizations as well as the United Nations. In order to achieve these goals, HURIGHTS OSAKA has activities such as Information Handling, Research and Study, Education and Training, Publications, and Consultancy Services.

FOCUS Asia-Pacific is designed to highlight significant issues and activities relating to human rights in the Asia-Pacific. Relevant information and articles can be sent to HURIGHTS OSAKA for inclusion in the next editions of the newsletter.

Sender: HURIGHTS OSAKA
(Asia-Pacific Human Rights Information Center)
8F, CE Nishihonmachi Bldg., 1-7-7 Nishihonmachi, Nishi-ku, Osaka 550-0005 Japan
Phone: (816) 6543-7002 Fax: (816) 6543-7004
E-mail: webmail@hurights.or.jp Website: www.hurights.or.jp

HURIGHTS OSAKA