

We Should Anticipate an Aging Population in Asia: An Indonesian Perspective

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The Asia Leadership Fellow Program (ALFP) 2017 theme “Seeking Our Commons in Asia: How Can We Create Visions for the Future?” facilitated the urgent need to discuss one of the common problems in Asia nowadays i.e. population-related issues. While a few countries such as Japan now have an aging population, most Asian countries have a young population. However, it is noteworthy that their average life expectancy has also increased due to various factors such as their improved economic prosperity and the success of their health, education, family planning, and sanitation programs and therefore should prepare for aging population. Indeed, most Asian countries are experiencing a demographic transition that takes place nearly at the same time with other two social transitions e.g. sociological transition and epidemiological transition. Demographic transition in the form of transformation of young population into a more mature population, sociological transition (e.g. transformation of communalistic society into an increasingly individualized society) and epidemiological transition that manifests in the form of double burden of communicable and non-communicable diseases (NCDs) occur in almost all Asian countries and significantly affect human's health and wellbeing.

If we look at Asia today through demographic perspective, unavoidably we will see that the population of this continent is growing both larger and older. This actually makes Asia the most important continent in the world in terms of demographic perspectives.¹ It is estimated that currently the population of Asia is about 4.2 billion and by 2050 is expected to increase to approximately 5.9 billion. At that time, the number of people in Asia aged 65 and older will grow fourfold, from 250 million nowadays to approximately 1 billion by 2050. Sharp decline in fertility and in tandem with rising life expectancy are altering the age structure of the Asian population so that in 2050 for the first time in history there will be roughly as many people in this continent under the age of 15 and over the age of 65.²

What is more interesting is the fact that this demographic change in Asia, from a young to a more mature population, is taking place in this continent much more rapidly than in today's more industrially advanced countries in Western Europe, North America, and Oceania (Australia and New Zealand). The transformation of population age structure that

¹ Asian Development Bank, “Population and Aging in Asia: The Growing Elderly Population,” <https://www.adb.org/features/asia-s-growing-elderly-population-adb-s-take> (January 2017), and Linda J. Waite, preface to *Aging in Asia; Findings from New and Emerging Data Initiatives*, (Washington DC: National Academies Press, 2012).

² James P. Smith, “Preparing for Population Aging in Asia: Strengthening the Infrastructure for Science and Policy,” In *Aging in Asia; Findings from New and Emerging Data Initiatives*, (Washington DC: National Academies Press, 2012).

happened over more than 100 years in most countries in Western Europe and North America are occurring in countries such as China and Indonesia in less than 25 years. It is worth mentioning that compared to Western Europe and North America, Asian countries are currently aging more rapidly at a lower income as well as at a weak non-familial income and health security systems in place.³ Indeed, while some Asian countries are experiencing significant economic development, partly reflecting their integration in to world's economy and a globalized world, other countries are developing much more slowly.

On the one hand, aging population can be categorized as a success story of economic and social development, modern medicine and public health, but on the other hand it produces major challenges for the governments in Asian countries to provide economic, social and health security for their elderly people and to do so at affordable budgets. The projected growth of the proportion of people aged 65 and older has significant consequences and implications to the economy, health services and for families and kinship in Asia, considering that the responsibility for economic and daily support for elderly people still rest almost totally in the members of their immediate and extended family.⁴

Indonesian's Demographic Transition

Indonesia is a good example of a country that is now experiencing a demographic transition from a youthful to a more mature society. In fact, if we have to mention several significant progresses that Indonesia had achieved after 71 years of independence, we should mention the increased life expectancy as one of the most significant achievements. Indonesia indeed is among the nations that have made great progress in enhancing life expectancy over the last decade. Indonesians nowadays can expect to live for 71 years on average, up from only 45 years in 1945 when Indonesian founding fathers declared the nation's independence. The increased life expectancy is surely an important achievement but we should also anticipate the consequences of population aging in our country.⁵

Additionally, Indonesia has contributed significantly to the accelerated growth of the elderly population worldwide. It is estimated that the country will experience an elderly population boom in the first two decades of the 21st century. Based on the 2010 Indonesia Population Census, the population of older people in Indonesia amounted to about 18.04 million. Moreover, the United Nations has predicted that the percentage of Indonesians over the age of 60 years will reach 25% in 2050—or nearly 74 million elderly people. Several provinces have a greater number of elderly people than the national average, and Yogyakarta so far has the largest elderly population in the country.

³ Waite, preface to *Aging in Asia; Findings from New and Emerging Data Initiatives*.

⁴ Ajay Mahal and Barbara McPake, "Health Systems for Aging Societies in Asia and the Pacific," *Health System and Reform* 3, no. 3 (2017): 149–153, and Smith, "Preparing for Population Aging in Asia."

⁵ Sudirman Nasir, "We Should Prepare for an Aging Population," *The Jakarta Post*, April 17, 2015.

Population aging in Indonesia should be seen as a direct result of successes in development programs such as nutrition, housing, health, family planning, cleaner drinking water and sanitation, that are crucial in reducing serious infections and prevent deaths among children. This phenomenon is commonly indicated by a declining birth rate and increased life expectancy has resulted in a situation where individuals aged 60 years and over are the fastest growing segments of the population. Moreover, at the same time the number of children is decreasing while the proportion of the productive population aged 15–59 years is increasing.

However, the rapid growth of the elderly population also poses various challenges, such as the increasing number of people who suffer from various degenerative diseases including hypertension, heart and coronary diseases, cancer, diabetes mellitus type 2, osteoporosis, Alzheimer, and dementia. These will affect the quality of life of the elderly people and will increase the cost of their health care. The issue of inadequate health and care services, along with the lack of welfare provision and legal frameworks that often do not specifically address elderly people, are among the problems that we face on a daily basis. In fact, although many elderly people lead a healthy, happy and active life, there are many others who experience low quality of life and are often regarded as burdens on their family. It is also noteworthy that Indonesia still has approximately 2.9 million elderly people who are being neglected and have limited access to health and other social services. As a result we should anticipate and adjust our policies and programs related to older people issues such as health care, social welfare, social security, employment, as well as investment, consumption and savings patterns.

A strategic part of anticipating the population aging requires designing of a population responsive policy to answer the current population trend by taking the unique nature and needs of older population into consideration. Therefore, government and community need to enact population-influencing policy to promote active aging with the aim of enhancing the wellbeing, health and participation of older people. In addition, population aging needs to be addressed by both the government and the general public. The role of researchers, activists and mass media is crucial in disseminating and advocating the issues associated with Indonesia's aging trend.

It is important to note that population aging can contribute positively to the national development if we are prepared. Numerous studies indicate that countries who anticipate and harness the rich potential of an aging population may obtain a longevity benefit as older people usually have accumulated skills, experience and wisdom and actually can continue to make valuable contributions to the nation and society for longer periods. Ultimately, countries that promote active aging will have a competitive advantage over those that do not. Both state and society should recognize the potential of older people and ensure them a life of dignity and justice.

The Indonesian government has been initiating and implementing important policies and programs, such the establishment of National Action Plan for Aging and National Commission for the Elderly as well as numerous programs conducted by the Ministry of Health and the Ministry of Social Affairs. Those policies and programs should be improved, better coordinated, and scaled up to reach out to more elderly people, particularly neglected elderly people. Programs such as “Posyandu Lansia” (community integrated services for the elderly people) with its creative and fun activities including health and nutrition counseling and gym for seniors should be further developed and promoted. Several cities in the archipelago like Yogyakarta, Surabaya, Bandung, and Makassar are now establishing and promoting this program. Community participation also starts to emerge in response to the issue of population aging. An example includes the initiative of several students from Hasanuddin University a few years ago to assist the local government and community in an area in the city of Makassar to initiate a “Posyandu Lansia” which is still running today and has received positive responses from the people in that locale.⁶ Indonesia also needs to learn from the experience of Asian countries such as Japan who have faced the aging population earlier than Indonesians.

Indonesia’s Sociological and Epidemiological Transitions

It is noteworthy that the demographic transition of Asia as well as of Indonesia occurs in tandem with other important social transitions i.e. sociological and epidemiological transitions. Asia and Indonesia today are experiencing a sociological transformation from a rural into an increasingly urbanized society as well as a transition from communalistic into a more individualized society. One billion people in Asia forecasted to be city-dwellers in 2040 and since 2010 there were more than 50% of Indonesians live in urban areas.⁷ Certainly, this transition facilitated challenges related to the availability and quality of food, clean water, housing, transportation, and healthy environment.⁸

In addition, Asia and Indonesia are currently not just dealing with communicable diseases such as lung tuberculosis, HIV, and typhoid but also face the significant increase of non-communicable diseases (NCDs) e.g. mental health problems, diabetes, cancers, and degenerative diseases related to aging process such as Alzheimer and dementia. Today, only one-fifth of all deaths in Asia are related to infectious diseases while the largest share of deaths—over 60%—comes from NCDs. Diabetes and cancers, for example, are expected to increase to 71% by 2030. Indonesia itself is experiencing a double burden of communicable

⁶ Ibid.

⁷ Asian Development Bank, “Cities and Urbanization in Asia: 12 Things to Know,” <https://www.adb.org/features/facts-and-data-about-cities-and-urbanization-asia> (March 2012).

⁸ World Health Organization, “Urbanization and Health,” <http://www.who.int/bulletin/volumes/88/4/10-010410/en/> (2010).

diseases and NCDs in which proportional mortality due to NCDs has increased from 50.7% in 2004 to 71% in 2014.⁹

Providing Better Services for Our Young Population

We should prepare for an aging population and work hard to design and implement better care programs for our elderly people, while at the same time providing better services for our young people. As mentioned previously, most Asian countries share a young population. While the abundance of young people could be considered as an advantage particularly in economic terms (e.g. a source of strong work force), this also has negative implications if we fail to provide services such as high quality education, health services, and access to decent employment.

Again, Indonesia is a good example in this issue. Around half of Indonesia's 259 million people are under 30. In addition, more than 50 million of the 128.3 million people of productive age have low education levels. Some 31.7 million only finished primary school and 20.4 million graduated from junior high school. With poor qualifications, a lot of young Indonesians will find it difficult to enter the labor market and compete with job seekers at the national and global levels.

It is noteworthy that employment allows people to engage in meaningful activities. It provides them with a structured life and a feeling of being respected by the community and their wider social networks. Unemployment, on the other hand, deprives people not only of the "direct" benefit of employment, which is to have a legitimate and regular source of income, but also of the "indirect benefits" of employment. Such deprivation may generate depression, disillusionment, and isolation and could trigger or aggravate many other psychological and physical problems. Furthermore, studies have shown that there is a relationship between unemployment, boredom, disenchantment, violence and substance abuse. For instance, "unemployed young men aged between 15 and 24, particularly those who live in low-income neighbourhoods, are more likely to engage in violence and excessive use of alcohol or drugs" while "unemployment among young people in poor urban neighbourhoods is...closely related to involvement in various forms of offences, including vandalism, petty crimes or more serious crimes such as burglary and robbery."¹⁰

Researchers have identified that the benefits of having a job can prevent people from being violent or consuming too much alcohol and drugs. Having a job protects young people

⁹ World Health Organization, "Indonesia," www.who.int/nmh/countries/idn_en.pdf (2015).

¹⁰ Sudirman Nasir, "Jobless Youth Raise Risk of Indonesia's 'Demographic Bonus' Turning into Disaster," *The Conversation*, November 19, 2015, <http://theconversation.com/jobless-youth-raise-risk-of-indonesias-demographic-bonus-turning-into-disaster-50402>. See also Sudirman Nasir and Doreen Rosenthal, "The Social Context of Initiation into Injecting Drugs in the Slums of Makassar, Indonesia," *International Journal of Drug Policy* 20, no. 3 (2009): 237–243, and Tim Rhodes, "Risk Environments and Drug Harms: A Social Science for Harm Reduction Approach," *International Journal of Drug Policy* 20, no. 3 (2009): 193–201.

from risk-taking behavior that may have serious consequences for health and well-being. Of course, youth unemployment and crimes are not always associated with one another. Not all unemployed young people will automatically engage in these activities. But unemployment evidently plays a pivotal role in exacerbating young people's vulnerability to such harmful activities.

Indonesian government at all levels should start creating policies that can absorb youth into the workforce. Furthermore, the government needs to work on the development of Indonesia's education and health services as well as the real sector, the part of the economy which produces goods and services that can create more jobs for Indonesia's young workforce.

If Indonesia can manage to provide the above basic services to its young people, Indonesia will enjoy the benefit of demographic bonus, the period when the country will have more people of productive age—between 2010 and 2030. This is a window of opportunity for Indonesia. With fewer people as “burdens,” the children and elderly who could not work, the government would have the chance to direct the country's resources to invest in education, health, and sanitation. This would facilitate greater prosperity for the country, which in turn would also contribute to prosperity and stability of the Asia-Pacific region.¹¹

Lesson Learned from the Fieldwork of ALFP 2017

Several programs and fieldwork I participated in during the Asia Leadership Fellow Program (ALFP) 2017, such as the visit to Nishinari neighborhood in Osaka in which many of the inhabitants are elderly people and the visit to a nursing care facility in Atsugi, were relevant to the issue of aging population and health. In both locales we learned about the complexity of aging population and age care as well as the need for various policies, programs, skills (both technical and communication skills), and facilities to provide appropriate and culturally sensitive care for the elderly. Additionally, several lectures and discussion during the ALFP program as well as daily experience during our stay in Japan made it increasingly clear that we need an interdisciplinary approach and inter-sectoral cooperation in dealing with and in anticipating aging population in Asia and Indonesia. Aging population should be viewed from various disciplines, such as sociology, anthropology, public policy, economics, psychology, and social work, and not just from a health perspective because the issues are not limited to health but also have economic, social, and political aspects.

¹¹ Sudirman Nasir, “We Should Prepare for an Aging Population,” *The Jakarta Post*, April 17, 2015.

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