

COVID-19 AND OLDER PEOPLE IN THAILAND

A. Thailand's Aging Society

1. Thailand is one of the fastest aging societies globally. Currently, 19% of its population, or 13 million people, are over the age of 60 years old. By 2030, this number will increase to over 19 million or 27% of the population. This major demographic transition will have a wide-ranging social and economic impacts and will require adaptations across major social systems including employment, pensions, education, health and care, climate and disaster resilience, transportation and urban infrastructure.

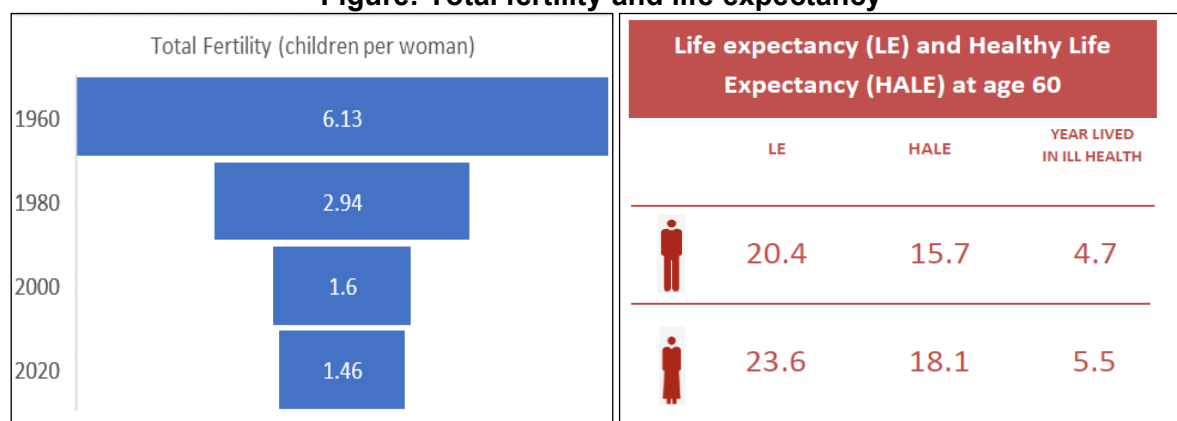
Table: Thailand's older population in 2020 and 2030

	2020				2030			
	Females	Males	Total Population	%	Females	Males	Total Population	%
All ages	35,834	33,966	69,800		36,306	34,040	70,346	
60-69	4,092	3,532	7,624	10.9	5,292	4,506	9,798	14.0
70-79	2,171	1,696	3,867	5.5	3,531	2,785	6,316	9.0
80+	1,168	753	1,921	2.8	1,772	1,122	2,894	4.1
Total +60	7,431	5,981	13,412	19.2	10,595	8,413	19,008	27.2

Source: United Nations, Department of Economic and Social Affairs, Population Division. [World Population Prospects 2019](#) (accessed 18 May 2020). Custom data acquired via website.

2. Population aging in Thailand should be viewed as a development success, although it does lead to emerging issues such as how to ensure appropriate health care and income security in old age. Population aging is driven primarily by falling fertility rates, and to a lesser extent the fall in mortality rates and increases in life expectancy. Total fertility rates in Thailand are estimated to be currently 1.46, far below the average replacement rate of 2.1. At the same time, life expectancy and healthy life expectancy for those over the age of 60 continue to increase and are the second highest in the Association of Southeast Asian Nations (ASEAN) region, behind Singapore. A female reaching the age of 60 can be expected to live a further 23.6 years, 18.1 of those years in good health. Longer life expectancy of females results in the 'feminization of aging', which increases at higher ages, and the accumulation of disadvantages across the life course. This is particularly pronounced in terms of access to decent work, savings and education

Figure: Total fertility and life expectancy



Source: Asian Development Bank.

B. COVID-19 and Aging Populations

3. **Aging populations have been highlighted as a specific risk group in the coronavirus disease (COVID-19) pandemic.** Older people are especially vulnerable to COVID-19. Mortality rates increase rapidly with age – 15% for over 80 years old, 8% for 70–79 years old, and 4% for 60–69 years old, against an estimated case fatality rate of 0.6% for those under 60 years old, based on data from the People’s Republic of China¹ with similar rates reported in Italy. In Switzerland and Sweden, 99% and 95% of all deaths respectively have been over the age of 60 years old, and in Italy, 55% of deaths occurred in those over 80 years old. In Thailand, as of 26 April 2020, 11% of all patients are aged 60 and above, and death rates among patients over 60 years is 6.4%,² versus 0.6% for people in the 30s and 1.9% for people in the 40s.³ Weakened immune systems and underlying health conditions, such as cardiovascular disease, hypertension and diabetes, associated with age and poverty, increase the likelihood of case fatalities. In Thailand, many older people suffer from poor health with almost 40% of older persons reporting some limitations of functional ability and 16% self-reporting poor or very poor health. Access to regular health care services and regular medication are at risk of disruption which is important to persons managing non-communicable diseases. People over 70 years old are being advised to stay at home. The ongoing home confinement and concerns about the virus will have a long-term negative impact on people’s physical, cognitive and mental health. This impact becomes increasingly difficult to reverse with age, and thereby hastens decline in functional ability.

4. **Providing and receiving care heightens risks.** With estimates that over half of all deaths in Europe have occurred in care homes,⁴ the need for specific attention and support to protect vulnerable residents and staff who are at very high risk is highlighted. Whilst there are no reported infection clusters in care homes in Thailand, the country does have over 450 registered homes, as well as an unknown number of unregistered homes. Currently, there is no common applicable set of care standards or regulations applied. As a further support, 200,000 bed-ridden older people receive regular care visits at home from community care workers and health center staff under the National Community-based Long-Term Care program⁵ managed by Local Health Funds and financially supported under Universal Coverage Scheme. The majority of older persons needing attention are cared for at home, in which there are a wide range of risks to be considered – vulnerability of the older caregivers to get sick, and in turn, unable to provide their usual care; people living alone (who tend to be female) and cannot seek care promptly; and large multigenerational households with increased risks of exposure to infection. Around 43% of older persons live with at least grandchildren; and 10% of older people live in skipped generational households where they act as primary carers for their grandchildren, increasing risk on COVID-19 transmission in these multigenerational households.

5. **Beyond the public health crisis, the economic crisis will increase financial hardship for older people.** In 2017, 27% of older women and 22% of older men reported no savings.⁶ Older people rely on a combination of pensions, family remittances and their own labor for income with almost half of men and a quarter of women over 60 years old continuing to work. Around 40% of older men and 22% of older women consider income from work their most important source of money; and this pandemic will disrupt their livelihood. Their ability to restart their livelihoods may be affected by more stringent physical distancing guidelines and

¹ R. Verity et al. 2020. Estimates of the severity of coronavirus disease 2019: a model-based analysis. *The Lancet*. [https://doi.org/10.1016/S1473-3099\(20\)30243-7](https://doi.org/10.1016/S1473-3099(20)30243-7).

² WHO. 2020. *Coronavirus disease 2019 (COVID-19): WHO Thailand Situation Report – 27 April 2020*. Bangkok.

³ WHO. 2020. *Coronavirus disease 2019 (COVID-19): WHO Thailand Situation Report – 17 April 2020*. Bangkok.

⁴ H. Kluge, WHO Regional Director for Europe. 2020. *Statement – Invest in the overlooked and unsung: build sustainable people-centered long-term care in the wake of COVID-19*. Copenhagen. 9

⁵ Asian Development Bank. Forthcoming. *Country Diagnostic Study on Long-term care in Thailand*. Manila.

⁶ ILC Singapore. 2019. *Financial Security of Older Women: Perspectives from South East Asia*. Singapore.

limitation on access to credit. Older women in particular rely on remittances from family members, and as the negative economic impact of the crisis unfolds, these remittances are likely to reduce. In 2009, after the last financial crisis and as one part of its stimulus package to mitigate the global economic crisis and accelerate recovery, Thailand did increase coverage and value of its old age allowance (OAA). It removed the means-tested eligibility criteria in order to provide a monthly non-contributory pension to all older persons not receiving income from other pension schemes. The value of the monthly non-contributory pension is tiered, increasing with age – B600 for 60–69 years old, B700 for those 70–79 years old, B800 for those 80–89, and B1,000 for those over the age of 90 years old. This recognizes the healthcare and social care costs, which increases with age, and the ability to earn income, which decreases. The value of the allowance is comparatively small: the pension amount is approximately 25% of the poverty line⁷ and equivalent to less than 2 days wages based on a minimum wage of B345 per day. The value of the allowance is not indexed and has remained the same since 2011. Despite the low value of the OAA, 23% of women and 17% of men consider it their most important source of income.

C. Thailand's specific response on older persons

6. Thailand's specific response to COVID-19 involving older people has focused on a clear communication, recommending people over 70 years to stay at home and dissuading visiting older family members. The Department of Medical Services, Ministry of Public Health have issued two sets of general guidelines – one for older people and another for care homes.

7. In terms of income support, as of 28 May 2020, there is a proposal for 9.3 million recipients of the Old Age Allowance to receive B1,000 per month for the period May – July,⁸ to help older persons partly offset the loss of income and remittances. This transfer can be disbursed quickly using the existing system and such a measure is aligned to the response in other countries, with over 40 countries worldwide, including India, Sri Lanka and Viet Nam have temporarily increased pensions or cash transfers to older people as part of their social protection measures to the pandemic. Older people are automatically eligible for support offered by government if they meet eligibility criteria (for example, support for informal workers and farmers). However, where applications for support are made online, there are concerns that the process is challenging for older persons to access and complete,⁹ and applicants have had to resort to submitting in person. Older persons of all ages have had applications rejected for unclear reasons. The Ministry of Social Development and Human Security has granted a one-year extension of loan payments to older people who have loans from the Elderly Fund, a micro credit scheme specifically for older persons, but this is only used by 9,000 older persons.

D. Potential areas for ADB Investment, Technical Support and Knowledge Sharing to Strengthen the Response

8. In the medium to long-term, there are several potential entry points for ADB to support recovery and build back better as Thailand adapts to becoming an aged society.

- **Long-term care.** In relation to long-term care, upskilling professional, volunteer and family caregivers; ensuring access to supplies of personal protective equipment; and ensuring roll out of clear guidelines to all providers, including private providers, on providing appropriate care during the pandemic is needed to guarantee that older persons will continue to receive care and safeguard their caregivers. To strengthen the regulatory environment for care providers, standards have been drafted by Ministry of Public Health in 2017 but not yet legislated. Once the standards are legislated,

⁷ Based on the 2018 national poverty line of B2,710.

⁸ <https://www.bangkokpost.com/thailand/general/1924668/b39bn-for-handouts-gets-nod>

⁹ Access to internet was 20% for older persons in 2014.

investment will be required to establish the training, inspection, and reporting systems across public and private sectors to ensure compliance

- **Work.** As Thailand moves into the recovery phase from the first wave specific attention should be given to jobs for middle age and older workers from hard hit sectors such as tourism, who may find it challenging to re-enter the job market. Cross cutting across social protection, financial inclusion and education sectors, support to ensure access to financial services, suitable retraining and job facilitation, the development of incentives for employers to invest in older workers, and work with educational providers to scale up lifelong learning opportunities will aid recovery.
- **Social protection.** Reforms are required in the different pillars of pension policy to make the system more sustainable and equitable, whilst discouraging early retirement of Thailand's shrinking workforce. The phased increase of the retirement age of civil servants has already been initiated. A focus on the expansion of social insurance schemes to the informal sector will help strengthen social protection systems for future crisis and strengthen income security in old age for the current workforce. This could be complemented by a permanent increase in the OAA, and the introduction of an indexing methodology to ensure the value of the OAA does not decrease over time. Public work programs that are suitable to older people to participate in could be considered.
- **Digital and financial inclusion.**¹⁰ Whilst this crisis has highlighted the importance of digital government and digital finance in facilitating social distancing, it has exposed the risks of leaving vulnerable groups behind. As digitalization accelerates, there is a need for knowledge sharing and technical assistance on digital and financial literacy to ensure inclusion of vulnerable groups, including older persons.
- **Thailand's SMART city development** is an opportunity to provide input to develop readiness of cities and infrastructure for aging populations across transport, public healthcare systems, lifelong learning, and housing and to collaborate on age friendly city initiatives.
- **Health and regional cooperation.** In November 2019 with Thailand's leadership, the ASEAN Centre for Active Ageing and Innovation (ACAI) was established and currently based at the Ministry of Public Health. The ACAI facilitates collaboration on knowledge and capacity on active aging amongst ASEAN member states. Whilst only recently established, it has potential to take a role in research at the regional level, particularly developing evidence, guidelines and capacity building on COVID-19 and older populations. The Asian Development Bank through a technical assistance provided financial assistance to ACAI's initial meetings, as well as producing studies and knowledge products on long-term care in Thailand,¹¹ providing an entry point for the Asian Development Bank to support further regional knowledge sharing and learning.

¹⁰ For further information, refer to G20 Fukuoka Policy Priorities on Aging and Financial Inclusion. Global Partnership for Financial Inclusion and Organisation for Economic Co-operation and Development. 2019. [G20 Fukuoka Policy Priorities on Aging and Financial Inclusion – 8 Key Steps to Design a Better Future](#). Fukuoka.

¹¹ ADB. [Regional: Strengthening Developing Member Countries' Capacity in Elderly Care](#).