ADB

Technical Assistance Report
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Project Number: 54116-001
Knowledge and Support Technical Assistance (KSTA)
September 2020

Challenges and Opportunities of Population Aging in Asia: Improving Data and Analysis for Healthy and Productive Aging

Asian Development Bank

ABBREVIATIONS

ADB	–	Asian Development Bank
ASEAN	–	Association of Southeast Asian Nations
COVID-19	–	coronavirus disease
DMC	–	developing member country
ERCD	–	Economic Research and Regional Cooperation Department
G20	–	Group of Twenty
JFPR	–	Japan Fund for Poverty Reduction
PRC	–	People's Republic of China
TA	–	technical assistance
UHC	–	universal health care

NOTE

In this report, "$" refers to United States dollars.

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KNOWLEDGE AND SUPPORT TECHNICAL ASSISTANCE AT A GLANCE

1.	Basic Data		Project Number: 54116-001	
	Project Name	Challenges and Opportunities of Population Aging in Asia: Improving Data and Analysis for Healthy and Productive Aging	**Department/Division**	ERCD/ERMR
	Nature of Activity Modality	Research and Development Regular	**Executing Agency**	Asian Development Bank
	Country	REG (BAN, INO, MAL, SRI, THA, VIE)		

2.	Sector	Subsector(s)	ADB Financing ($ million)	
			Total	0.00

3. Operational Priorities	Climate Change Information	
✓ Addressing remaining poverty and reducing inequalities	GHG Reductions (tons per annum)	0
✓ Accelerating progress in gender equality	Climate Change impact on the Project	Low
✓ Strengthening governance and institutional capacity	**ADB Financing**	
✓ Fostering regional cooperation and integration	Adaptation ($ million)	0.00
	Mitigation ($ million)	0.00
	Cofinancing	
	Adaptation ($ million)	0.00
	Mitigation ($ million)	0.00

Sustainable Development Goals	Gender Equity and Mainstreaming	
SDG 1.3	Some gender elements (SGE)	✓
SDG 3.8, 3.c		
SDG 5.c	**Poverty Targeting**	
SDG 10.4	General Intervention on Poverty	✓

4.	Risk Categorization	Complex

5.	Safeguard Categorization	Safeguard Policy Statement does not apply

6. Financing

Modality and Sources	Amount ($ million)
ADB	**0.00**
None	0.00
Cofinancing	**2.00**
Japan Fund for Poverty Reduction (Full ADB Administration)	2.00
Counterpart	**0.00**
None	0.00
Total	**2.00**

Currency of Financing: US Dollar

I.   INTRODUCTION

1.   The knowledge and support technical assistance (TA) will generate policy-relevant knowledge on population aging by (i) supporting the development of internationally comparable survey-based panel databases on aging in selected Asian countries; and (ii) coordinating comparative and demonstrative studies in selected Asian countries to provide the region's governments with information to reform health and social security policies and to craft policies to adapt to population aging.

2.   To implement the recommendation of *the **Shared Understanding on the Importance of Universal Health Care Financing in Developing Countries*** and the ***Fukuoka Policy Priorities on Aging and Financial Inclusion*** endorsed at the Group of Twenty (G20) Osaka Summit in 2019, the TA will generate and disseminate policy-relevant knowledge to policy makers on promoting healthy and productive aging. The TA is aligned with Strategy 2030 of the Asian Development Bank (ADB) and follows its key operational priorities of tackling remaining poverty and reducing inequalities. The TA will help strengthen social security systems and improve provision of health care and financial services to vulnerable groups, especially the elderly, via social inclusion, better health for all, and social protection. Although not a part of the 2020 annual work program of the Economic Research and Regional Cooperation Department (ERCD), the TA is proposed as a special follow-up project to the G20 recommendation to further universal health care (UHC) financing and will contribute to resilience to pandemic shocks such as the coronavirus disease (COVID-19).[1]

II.   ISSUES

3.   Asia is aging rapidly. From 2020 to 2050, the population share of those 65 years old and above will double from 8.9% to 18.0%, exceeding the global average of 15.9%.[2] Rapid population aging poses new challenges for adequate yet sustainable health care, social security, and pensions. Many developing Asian economies face the risk of growing old before they become rich.[3] The working-age population (ages 15−64) will gradually decline, and the decline is likely to be drastic in some economies. However, population aging need not slow down economic growth if countries adopt appropriate new technologies and policies. Tackling the challenges of population aging requires a better understanding of the socioeconomic consequences of aging and the state of older people. Such knowledge can foster forward-looking policies that maximize the opportunities associated with aging. For example, well-designed policies can improve older people's health and productivity and thus extend their working lives, which would be a boon to economies.[4]

4.   Promoting UHC can improve the elderly's access to health care, which is vital to their welfare and productivity. As life expectancy increases, treating noncommunicable diseases and providing long-term and palliative care become higher priorities. Disabilities, particularly cognitive impairments such as Alzheimer's disease and related dementias, are expected to become more prevalent, with substantial health, social, and economic implications. Sound and broad-based

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[1] The TA first appeared in the business opportunities section of ADB's website on 15 July 2020.

[2] United Nations. 2019. *Department of Economic and Social Affairs, Population Division. World Population Prospects 2019,* custom data acquired via website.

[3] ADB. 2011. *Asian Development Outlook 2011 Update: Preparing for Demographic Transition.* Manila*;* and ADB. 2018. *Tapping Technology to Maximize the Longevity Dividend in Asia.* Manila.

[4] Park, Donghyun, Sang-Hyop Lee, and Andrew Mason, eds. 2012. *Aging, Economic Growth, and Old-Age Security in Asia*. Cheltenham/Northampton: Asian Development Bank/Edward Elgar Publishing; and ADB. 2019. *Asian Economic Integration Report 2019/2020: Demographic Change, Productivity, and the Role of Technology*. Manila.

health systems and services can improve health outcomes across age and gender, expand access to health services, and enhance human capital. G20 leaders recognized the importance of UHC and endorsed the Shared Understanding under Japan's leadership in 2019. G20 leaders, including Australia, India, Indonesia, Japan, and the People's Republic of China (PRC), underscored the "power of an early start and preparedness for the future" and called for developing member countries (DMCs) to invest in health care for the elderly.[5]

5.   Besides health, another challenge is old-age income security in DMCs, which often lack comprehensive pension or social protection systems. Longevity can exacerbate inequality and increase the vulnerability of the elderly, especially women with little or no income.[6] Alongside reforms to strengthen pension and social security systems, countries must invest in financial inclusion to prepare their citizens for longer lives. Thus, research is needed to assess financial inclusion and financial literacy, which influence access to financial services and postretirement financial preparedness, and to evaluate the effectiveness of financial literacy pilot programs.

6.   Aging countries can turn the demographic headwind to tailwind by harvesting the "silver dividend" from older workers who are healthy, educated, and experienced.[7] Education, skills development, and lifelong learning must be promoted to upgrade skills. Physical augmentation technologies that aid mobility and endurance will help the elderly remain productive. Understanding the employment patterns of older workers and evaluating the effectiveness of policies and programs that promote their work participation are much needed across DMCs. Since the policy environment is vital in shaping labor force participation, policy makers will benefit from standardized cross-country studies that yield comparable evidence on health, education and other policy outcomes, which provide reliable benchmarks for policy assessment and enable knowledge sharing based on experiences of early adopters.

7.   Quality data and rigorous analysis of health, population aging, and other related topics help governments monitor aging-related developments. They can thus make informed decisions when they reform health and social security systems and craft policies to adapt to population aging. For example, panel surveys of older individuals, such as the Health and Retirement Study[8] and its "family" surveys around the globe, as well as the National Transfer Account database, have significantly informed policymakers about the changing dynamics of demographics, health endowments, financial status, and inclusion of elders.[9]

8.   The TA will customize its knowledge support according to data availability in DMCs and their readiness to collect data. For DMCs with available panel data series that meet the requirement of rigorous quantitative analysis, the TA will provide financial support to produce internationally comparable and quantitatively rigorous research using country-specific data. This strand of research support will cover Thailand, Sri Lanka, and Viet Nam (and possibly the PRC, which has panel datasets of older persons). For DMCs that do not have national aging data but have shown interest and readiness to initiate data collection and strengthen research capacity, the TA will provide financial support to help them build datasets, strengthen capacity in conducting

[5]   The TA contributes to implementing the Kuala Lumpur Declaration on Aging: Empowering Older Persons in ASEAN, which reaffirms the shared responsibility among Association of Southeast Asian Nations members in promoting healthy and active aging.

[6]   United Nations Department of Economic and Social Affairs. No date. *Income Poverty in Old Age: An Emerging Development Priority*.

[7]   R. Matsukura, S. Shimizutani, N. Mitsuyama, S. Lee, and N. Ogawa. 2017. Untapped Work Capacity among Old Persons and Their Potential Contributions to the "Silver Dividend" in Japan. *The Journal of the Economics of Ageing*.

[8]   International Sister Studies lists Health and Retirement Study family panel data in the region.

[9]   R. Lee, A. Mason, and members of the National Transfer Account network. 2014. Is Low Fertility Really a Problem? Population Aging, Dependency, and Consumption. *Science*. 346. pp. 229–234.

surveys, and conduct research analysis. This strand of research support will cover Bangladesh, Indonesia, and Malaysia. The TA will promote internationally comparable studies and facilitate knowledge sharing.[10] The analysis of DMCs at different levels of development and population aging will thus yield relevant implications for policy makers across the entire region.

9.   The TA will respond to DMCs' need for data and for research that monitors and analyzes the characteristics of the elderly while exploring new benchmarks and methodologies: the needs of the elderly; the extent of their social protection coverage, including UHC; and other policy-relevant attributes. In collaboration with leading academic institutions, the TA will build DMCs' capacity to collect and analyze data. Given that the regional economies are at different stages of population aging, the TA will expedite and finance standardized cross-country research that generates comparable reference and foster knowledge sharing that benefits all economies in the region. Better research capacity and standardized evidence-based policy analysis contribute to overall economic and social stability by helping the region better adapt to population aging.

10.   The TA builds on existing ADB TA projects such as Strengthening Developing Member Countries' Capacity in Elderly Care,[11] lessons from which include the following: (i) the multisector scope of aging means that multiple sectors and stakeholders must be engaged to influence policy; (ii) research and recommendations must cover current and future cohorts of older persons and provide better policy context for countries with predominantly young populations; and (iii) research capacity must be improved, including data collection and analysis, to support evidence-based policy making. The TA will primarily respond to the last item. The TA will collaborate with ADB's TA for Developing Innovative Community-Based Long-Term Care Systems and Services to cross-fertilize generated knowledge, support DMCs through the joint organization of knowledge-sharing and capacity-building events, and build synergy by leveraging common national and regional networking platforms and research institutions for multisector collaboration.[12]

11.   **Pandemic impacts.** The elderly are highly vulnerable to infectious diseases and their associated social and economic shocks. COVID-19 disproportionately affects the elderly and poses a serious threat to their well-being.[13] Therefore, the age profile of COVID-19's effects, especially on older persons, must be tracked. The TA will incorporate such impacts in its data collection and research.

III.   THE TECHNICAL ASSISTANCE

A.   Impacts and Outcome

12.   The TA is aligned with the following impacts: remaining poverty and inequalities reduced among developing Asia's vulnerable population, particularly the elderly and especially the female elderly; social protection systems and provision of health care and financial services strengthened in developing Asia; and the regional public good of fostering healthy and productive aging

[10] The TA will also study data from Japan, the Republic of Korea, and the United States to provide a basis for comparative studies and enrich policy recommendations.
[11] ADB. 2016. *Strengthening Developing Member Countries' Capacity in Elderly Care.* Manila (TA 9111-REG).
[12] ADB. 2019. *Developing Innovative Community-Based Long-Term Care Systems and Services.* Manila (TA 9928-REG).
[13] In the PRC, those above the age of 60 account for about 80% of total COVID-19–related deaths (United Nations Policy Brief, May 2020).

promoted.[14] The TA will have the following outcome: capacity of DMCs to monitor, develop, and reform health and social protection programs improved.[15]

B.   Outputs, Methods, and Activities

13.   **Output 1: Quality datasets on healthy and productive aging for targeted DMCs enhanced.** In collaboration with academic institutions and research institutes, the TA will support and finance the collection of panel data on aging population in three countries: Bangladesh and Indonesia[16] because they do not have panel surveys for collecting data on the economic, social, and health status of older persons; and Malaysia[17] because it has started a pilot survey, which the TA can build on. The TA may include questions that evaluate the impact of COVID-19 on the elderly in the surveys or a specific survey module on COVID-19.[18] The TA will finance surveys and organize capacity-building workshops in collaboration with leading institutions with expertise in rolling out similar surveys.[19] The sample size of the surveys may vary by country, depending on the context and the country's policy environment or objectives.[20] The information collected by the TA will be anonymized and made available to policy makers and researchers, subject to review.[21]

14.   **Output 2. Innovative research on healthy and productive aging promoted and disseminated.** To complement the project-generated datasets from output 1, existing aging-related panel datasets from Thailand, Sri Lanka, and Viet Nam (and possibly the PRC, which has a panel dataset of older persons), which have rapidly aging populations, will be used to produce 20 research papers which cover topics that correspond to G20 recommendations. The papers will also cover advanced economies in Asia, such as Japan and the Republic of Korea, and other countries of the Organisation for Economic Co-operation and Development, to provide a good reference for comparative studies. The TA will prioritize innovative multidisciplinary research and investigate the health, economic, and social status of older persons. Commissioned papers will (i) evaluate the role of UHC in an aging society and assess the costs and benefits of health care (five studies); (ii) measure the silver dividend and monitor the physical and cognitive ability of older persons (five studies); (iii) examine financial inclusion of older persons (three studies); and (iv) analyze employment of older persons, the role of technology, and the gender dimensions of

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[14] ADB. 2018. *Strategy 2030: Achieving a Prosperous, Inclusive, Resilient, and Sustainable Asia and the Pacific.* Manila*;* G20. 2019. *Shared Understanding on the Importance of Universal Health Care Financing in Developing Countries and the Fukuoka Policy Priorities on Aging and Financial Inclusion* endorsed at the G20 Osaka Summit; ADB. 2019. *Strategy 2030 Operational Pan for Priority 1: Addressing Remaining Poverty and Reducing Inequalities.* Manila; and ADB. 2019. *Strategy 2030 Operation Plan for Priority 7: Fostering Regional Cooperation and Integration, 2019–2024.* Manila.

[15] The design and monitoring framework is in Appendix 1.

[16] The TA will support a survey for Kalimantan and possibly other suitable areas in Indonesia.

[17] In Bangladesh, the TA plans to complement existing long-standing household panel data series (Mahbub Hossain Panel Data Series) in collaboration with Building Resources Across Communities networks. In Malaysia, the TA intends to support the rollout and to build the capacity of the survey team and researchers engaged in the Malaysia Aging and Retirement Survey, in collaboration with the University of Malaya and the Social Security Research Centre. In Indonesia, the TA plans to explore collaboration with a local institution experienced in conducting large-scale repeated panel survey with demonstrated research expertise on aging population.

[18] World Bank. 2020. High Frequency Mobile Phone Surveys of Households to Assess the Impacts of COVID-19: Interview Manual for Template Questionnaire (English).

[19] RAND Corporation, University of New York at Buffalo, University of South California, and University of Tokyo.

[20] Malaysia: 5,000 households (2018); Bangladesh: about 3,000 households (with leeway to cover more urban households); and Indonesia: about 5,000 households in the eastern part of the country.

[21] The modality of data release will be discussed with collaborating research institutions and might be handled by joint committees, guided by local data disclosure policies that are already in place.

aging, including gaps in socioeconomic outcomes (five studies).[22] The TA might support two studies that assess the impact of COVID-19 on older persons. Commissioned papers, upon review, will be published online as working papers. One executive report summarizing the research output will be published. Its key contents will be distilled into policy briefs, blogs, and social media items to reach a wider audience and generate greater impact.

15.   **Output 3. Standardized and comparable cross-country evidence-based knowledge on aging-related policy measures and assessment techniques developed.** The TA will support and implement the first multi-country comparative study on population aging in the region, using standardized methodology and harmonized data to enable cross-country comparison and learning. The study will cover all target countries and others, including advanced economies that are more experienced in coping with population aging. Standardized cross-country research will help policy makers assess aging-related issues and develop policy measures with comparable benchmarks. A research conference will be organized, based on a call for research papers, inviting up to 25 scholars or experts who specialize in cross-country comparisons based on micro surveys of older persons. The conference will identify a suitable topic for the standardized comparison research. Examples include the employment patterns of older persons, financial literacy, and their health status. The comparative study will be published as a special online report.

16.   **Output 4. Knowledge dissemination and capacity building on healthy and productive aging strengthened.** The TA will disseminate the data and knowledge generated from output 1 to output 3 to policy makers, researchers, ADB operations and knowledge departments, and other stakeholders through conferences, workshops, and webinars and other virtual outreach. Audiences include both TA-targeted countries and other DMCs in the region. Additional dissemination may target regional and global platforms such as the Asia-Pacific Economic Cooperation, the Association of Southeast Asian Nations, and G20. The TA team will respond to requests from ADB departments and DMCs to provide capacity-building activities and customized knowledge products, including UHC-related knowledge products, based on the TA data and research, to support ADB operations.

17.   The project team will work closely with Japan-based institutions that have abundant experience in studying aging and constructing datasets on older persons, such as the Japanese Study of Aging and Retirement. The team will draw on Japan's extensive experience in providing UHC and implementing policies to adapt to population aging, including pension reforms and long-term care insurance. The TA will explore collaboration with the University of Tokyo, the Asian Development Bank Institute, the Japan International Cooperation Agency Research Institute, Nihon University, and the University of Tsukuba.

C.   Cost and Financing

18.   The TA is estimated to cost $2,000,000, which will be financed on a grant basis by the Japan Fund for Poverty Reduction (JFPR) and administered by ADB. The key expenditure items are listed in Appendix 2.

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[22] The TA project will work with networks of scholars to identify target countries. For example, UHC studies might draw from countries with UHC, such as Thailand, while financial inclusion studies will focus on countries with sufficient data on financial literacy among older persons, including Japan, the Republic of Korea, and the United States.

19.   The following are ineligible items under the JFPR: (i) purchase of vehicles, (ii) salaries for civil servants, (iii) foreign travel,[23] (iv) scholarships or long internships, (v) detailed engineering design, (vi) civil works and other related expenses, and (vii) those under ADB's List of Ineligible Items (or Negative List) and Prohibited Investment Activities List.

D.   Implementation Arrangements

20.   ADB will administer the TA. ERCD will be responsible for supervision and management of consultants; procurement; and accomplishment, monitoring, and evaluation of the outputs. Collaboration with institutional bodies or universities may be explored through knowledge partnership or cooperation agreements to conduct the surveys. To maximize ADB's experience and knowledge, ERCD will coordinate with other departments and resident missions to identify DMC participants, recommend research partners, and/or be resource persons at workshops and conferences.

21.   The implementation arrangements are summarized in the table. Regular review sessions will measure the progress and achievement of the TA objectives.

Implementation Arrangements

Aspects	Arrangements		
Indicative implementation period	September 2020–June 2023		
Executing agency	Economic Research and Regional Cooperation Department, ADB		
Implementing agency	Macroeconomics Research Division and Economic Analysis and Operational Support Division, Economic Research and Regional Cooperation Department		
Consultants[a]	To be selected and engaged by ADB		
	Firm: QCBS (90:10) under LCB or direct contracting (single-source selection) of a selected firm with strong justification	Survey and data processing for aging database (12 person-months)	$900,000
	Individual: Framework agreement or consultants' qualification selection	International expertise (33 person-months)	$441,000
	Individual: Framework agreement or consultants' qualification selection	National expertise (25 person-months)	$180,000
Procurement[b]	To be procured by executing agency		
	Direct purchase	3 contracts	$23,000
Disbursement	The TA resources will be disbursed following ADB's *Technical Assistance Disbursement Handbook* (2020, as amended from time to time).		
Asset turnover or disposal arrangement upon TA completion	After the TA is completed, any procured equipment will be disposed of in compliance with Administering Grant-Financed Technical Assistance Projects in the Project Administration Instructions.		

ADB = Asian Development Bank, LCB = limited competitive bidding, QCBS = quality- and cost-based selection, TA = technical assistance.
[a] ADB will consider lump-sum payments, output-based contracts, and framework contracts for individual consulting services.

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[23] Foreign travel is ineligible "except in the case of TAs where participation of recipient countries, including civil servants, in international workshops, conferences, mentoring visits, or study tours is fully justified in the original proposal with detailed description, objectives and budget, and approved by the Government of Japan." Refer to the Japan Fund for Poverty Reduction 2020 Policy Guidelines for Technical Assistance Grant.

22.   **Consulting services.** ADB will engage the consultants following the ADB Procurement Policy (2017, as amended from time to time) and its associated staff instructions. [24] In collaboration with research institutes or universities, firms may be recruited either through quality- and cost-based selection or direct contracting. The proposed selection methods are deemed justified since only a few survey firms specialize in socioeconomic research. To produce 20 research studies on the various aspects of aging using the project-generated datasets and other similar datasets, up to 15 individual international consultants will be engaged. One international economics editor will be hired to edit the studies, including an international comparative study and an executive report. Two national consultants are expected to provide overall assistance for the TA activities, especially in coordinating the studies and processing data. Experts, including ADB staff members, will be engaged to share knowledge and/or facilitate workshops, trainings, and conferences.

23.   **Knowledge partnerships.** During TA implementation, knowledge partnership agreements with academic institutions and/or intellectual and advisory research institutions might be necessary. Any knowledge partnerships will follow the Staff Instruction on Business Processes for Knowledge Partnerships under Technical Assistance Operations. The partnership agreements will clearly delineate roles and disbursements.

24.   **Transfer of funds.** Collaboration with universities or a knowledge partner could be pursued in conducting the surveys. Should this be necessary, the potential partner's capacity to manage the funds, its financial management system, funds flow, and financial reporting requirements will be assessed.

25.   **ADB's procurement.** Datasets or licenses to use certain databases may be purchased during TA implementation. Procurement will follow the ADB Procurement Policy and Procurement Regulations for ADB Borrowers (2017, as amended from time to time). Where applicable, the TA team will coordinate with ADB's Procurement, Portfolio and Financial Management Department and Office of the General Counsel before purchasing datasets and signing data-use agreements with DMC statistical agencies and third-party database providers. Disbursements under the TA will be made in accordance with ADB's *Technical Assistance Disbursement Handbook* (2020, as amended from time to time).

IV.   THE PRESIDENT'S DECISION

26.   The President, acting under the authority delegated by the Board, has approved the Asian Development Bank administering technical assistance not exceeding the equivalent of $2,000,000 to be financed on a grant basis by the Japan Fund for Poverty Reduction for Challenges and Opportunities of Population Aging in Asia: Improving Data and Analysis for Healthy and Productive Aging, and hereby reports this action to the Board.

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[24] Terms of Reference for Consultants (accessible from the list of linked documents in Appendix 3).

DESIGN AND MONITORING FRAMEWORK

Impacts the TA is aligned with
1. Remaining poverty and inequalities reduced among developing Asia's vulnerable population, particularly the elderly and especially the female elderly[a]
2. Social protection systems and provision of health care and financial services strengthened in developing Asia[b]
3. Regional public good of fostering healthy and productive aging promoted[c]

Results Chain	Performance Indicators with Targets and Baselines	Data Sources and Reporting Mechanisms	Risks
Outcome Capacity of DMCs to monitor, develop, and reform health and social protection programs improved	By 2023: a. At least 80% (48 out of 60) of all policy makers participants and 50% (150 out of 300) of other policy makers across DMCs gain improved knowledge about the socioeconomic consequences of population aging and the state of older persons (2019 baseline: Not applicable)	a. Event feedback reports (conference, workshop, and webinars) and follow-up surveys toward the end of the project	DMCs cannot sustain commitment to improve health and social protection programs.
	b. At least 80% (120 out of total 150) of DMC researchers enhanced their capacity to roll out surveys, use them for research, and disseminate the outcomes effectively to policy makers (2019 baseline: Not applicable)	b. Event feedback reports (conference, workshop, and webinars), access counts to survey database and the number of reports and papers published using panel survey data, and follow-up surveys toward the end of the project	
Outputs 1. Quality datasets on healthy and productive aging for targeted DMCs enhanced	By 2023: 1a. Three sets of quality and comparable survey data on aging populations in selected DMCs developed (2019 baseline: Not applicable)	1a. Progress reports, including survey plans, questionnaires, and summary reports by consultants	Potential delays in survey implementation because of slow government approval
	1b. Two capacity-building workshops held on survey implementation, data collation, and/or data analysis, with at least 80% of participants (40 out of 50, of whom 40% are women) reporting enhanced capacity (2019 baseline: Not applicable)	1b. Workshop agenda, presentations of resource persons, workshop evaluation	
2. Innovative research on healthy and productive aging promoted and disseminated	2a. 20 studies on four themes, with at least 2 studies on old-age gender issues, each with at least 200 downloads and 50 citations (2019 baseline: 0)	2a. Website of journals, Google scholar, conference and publication references, ADB web counters, ADB website	Potential delays in analysis because of competing research priorities of collaborating research institutions
	2b. 1 executive report, 5 blogs, and 3 policy briefs prepared based on 2a, with at least 500 downloads and 20 citations (2019 baseline: 0)	2b. Website of journals, Google scholar, conference and publication references, ADB web counters, ADB website	

3. Standardized and comparable cross-country evidence-based knowledge on aging-related policy measures and assessment techniques developed	3a. One research conference on cross-country comparison research on population aging in Asia organized, with 60% of participants recognizing the usefulness of such a study (2019 baseline: 0)	3a. Call for papers, conference webpage, reports	
	3b. An international comparison research on an identified aging topic conducted, with 200 downloads (2019 baseline: 0)	3b. Research terms of reference, progress report, journal website and manuscripts	
4. Knowledge dissemination and capacity building on healthy and productive aging strengthened	4a. At least 30 scholars and 60 policy makers gained up-to-date knowledge on the socioeconomic consequences of population aging and the state of older persons, and demonstrated the ability to access the latest data and research (2019 baseline: 0)	4a. Conference material, evaluation report	
	4b. At least 300 policy makers enhanced their knowledge on the socioeconomic consequences of population aging and the state of older persons based on the research generated through TA at external policy forums and through virtual promotion (2019 baseline: 0)	4b. Conference material, staff back-to-office reports, email dissemination, webinar participant list	

Key Activities with Milestones[d]

1.   Quality datasets on healthy and productive aging for targeted DMCs enhanced
1.1 Select firms or partner institutions to do survey (September–December 2020)
1.2 Form national survey committees and conduct inception meetings with partners (September–December 2021)
1.3 Conduct survey capacity-building workshops (January–March 2021)
1.4 Design and pretest survey questionnaires (December 2020–March 2021)
1.5 Conduct survey (April–October 2021)
1.6 Validate and tally survey results (November–December 2021)
1.7 Present survey results and report (December 2021)

2.   Innovative research on healthy and productive aging promoted and disseminated
2.1 Contract consultants (September–November 2020, January 2021–February 2022)
2.2 Draft research studies (October 2020–February 2021, June–October 2021, March–July 2022)
2.3 Finalize and upload e-print studies (March 2021–May 2021, November 2021–January 2022, August–September 2022)
2.4 Draft and finalize executive report (November 2022–January 2023)
2.5 Produce executive report (February 2023)
2.6 Produce blogs and policy briefs (November 2021, July 2022, and March 2023)

3.   Standardized and comparable cross-country evidence-based knowledge on aging-related policy measures and assessment techniques developed
3.1 Call for papers (October 2020)
3.2 Conduct cross-country comparison conference (June 2021)
3.3 Prepare draft comparative study methodology and identify partnering researches (August 2021)
3.4 Organize two technical workshops (September 2021, January 2022)
3.5 Finalize and upload e-print comparative study (March 2022)
3.6 Produce blogs and policy briefs (July 2021–December 2022)

4.   Knowledge dissemination and capacity building on healthy and productive aging strengthened
4.1 Coordinate and co-host dissemination workshops with relevant ADB projects (January 2021–March 2023)
4.2 Conduct dissemination and policy dialogue workshops (March–April 2023)

TA Management Activities

Pursue knowledge partnerships (September–December 2020)
Obtain "no objections" from DMCs (September–October 2020)
Monitor conduct of survey (April–October 2021)
Conduct post-events and end of project assessment (January 2022, April 2023)

Inputs

Japan Fund for Poverty Reduction: $2,000,000.00

Assumptions for Partner Financing

Not applicable

ADB = Asian Development Bank, DMC = developing member country, TA = technical assistance.

[a] ADB. 2018. *Strategy 2030: Achieving a Prosperous, Inclusive, Resilient, and Sustainable Asia and the Pacific.* Manila*;* and Group of Twenty (G20). 2019. *Shared Understanding on the Importance of Universal Health Care Financing in Developing Countries and the Fukuoka Policy Priorities on Aging and Financial Inclusion.* Endorsed at the G20 Osaka Summit.
[b] ADB. 2019. *Strategy 2030 Operational Plan for Priority 1: Addressing Remaining Poverty and Reducing Inequalities.* Manila.
[c] ADB. 2019. *Strategy 2030 Operation Plan for Priority 7: Fostering Regional Cooperation and Integration, 2019–2024.* Manila.
[d] Depending on how soon it can be contained, the coronavirus disease (COVID-19) pandemic might hamper the implementation of some outputs such as surveys and workshops and conferences. The TA may choose to organize events using digital platforms. The survey schedule could be made as flexible as possible to allow for varied scenarios.
Source: Asian Development Bank.

COST ESTIMATES AND FINANCING PLAN
($'000)

Item	Amount
Japan Fund for Poverty Reduction[a]	
1. Consultants[b]	
a. Remuneration and per diem	
i. Firms	900.0
ii. International consultants	441.0
iii. National consultants	180.0
b. Out-of-pocket expenditures	
i. International and local travel	13.0
2. Printed external publications[c]	20.0
3. Surveys (ADB staff monitoring activity)[d]	50.0
4. Goods (rental or purchase)[e]	23.0
5. Training, seminars, workshops, forum, and conferences	
a. Facilitators[f]	55.0
b. Travel cost of ADB staff members acting as resource persons[d]	56.0
c. Venue rental and related facilities[g]	22.0
d. Participants[h]	137.0
e. Representation[d]	2.0
6. Contingencies	101.0
Total	**2,000.0**

ADB = Asian Development Bank.

Note: The technical assistance is estimated to cost $2,000,000, of which contributions from the Japan Fund for Poverty Reduction are presented in the table.

[a] Administered by ADB.

[b] Lump-sum payments and output-based contracts will be considered for individual consultants.

[c] Digital and print publication costs of studies and/or reports, including payment to service providers (typesetters, translators, proofreaders, page-proof checkers, and overtime pay for Printing Unit contractual personnel). Publications will be printed for a specific group of requestors on demand only.

[d] ADB (Budget, Personnel, and Management Systems Department; and Strategy and Policy Department). 2013. Use of Bank Resources: Regional Technical Assistance and Technical Assistance vs. Internal Administrative Expenses Budget. Memorandum. 26 June (internal). Includes cost for business travel of ADB staff members to monitor the conduct of surveys, for staff members acting as resource persons, and for representation.

[e] Includes office supplies and databases. Databases will be purchased in accordance with the ADB Procurement Policy (2017, as amended from time to time) and the associated staff instructions, and in coordination with ADB's Information Technology Department and Office of Administrative Services, where applicable.

[f] Covers travel costs and honoraria for resource persons at workshops and international conferences.

[g] Includes cost for collaterals (signage, brochures, and backdrop with branding design); equipment rental; meals; and other logistical costs for organizing events.

[h] Pertains to travel costs of international participants in technical workshops in three developing member countries (airfare, per diem or allowances, and miscellaneous travel expenses of 60 participants, assuming that three 2-day workshops are held); and travel cost of 60 participants of a 2-day conference to be held in ADB headquarters (airfare, per diem or allowances, and miscellaneous travel expenses).

Source: Asian Development Bank estimates.

LIST OF LINKED DOCUMENTS
http://www.adb.org/Documents/LinkedDocs/?id=54116-001-TAReport

1.   Terms of Reference for Consultants
2.   Procurement Plan