Challenges and Opportunities of Population Aging in the People's Republic of China

中国人口老龄化所带来的机遇和挑战

Asian Development Bank
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Abstract

• The population in the People's Republic of China (PRC) is aging rapidly. The proportion of people aged 60 years and above is expected to increase from 12% in 2010 to 33% by 2050, turning the PRC into the oldest population in the world. Health care costs and dependency ratios will increase in parallel.

老龄化导致劳动力短缺，从而致使平均工资水平升高，削弱了经济竞争力。人口快速老龄化问题若得不到解决，则可能阻碍产业转型过程，而这一过程是迈向更高收入水平所需要的。中国在收入水平还较低时即遭遇老龄化，增加了挑战的复杂性。

• Aging results in labor force shortages, which in turn increase average salaries undermining the economy's competitiveness. Rapid population aging, if unaddressed, might hamper the industrial transformation process needed to attain higher income status. The fact that the PRC is aging at a low level of income magnifies the challenge.

鉴于中国卫生资源有限，社会安全网不够完善，老龄化将对医疗卫生服务的提供造成资金压力，尤其是对日益增多的老年人的长期护理。由于此类服务主要由地方政府提供，这将使地方政府的财政更为吃紧。

• Given the limited health resources and safety nets in the PRC, aging will exert financial pressure on the provision of health care services, in particular long-term care for a growing number of elderly. This will aggravate fiscal constraints in local governments, who shoulder the bulk of providing these services.

老龄化带来了巨大挑战，但同时也提供了就业机会和服务发展的机会，这也是政府改革议程的优先事项。然而，要获取老龄化的益处，需要推出政策措施，以加快经济增长方式的转变。同时，还需要改革劳动力市场和改善人力资本，提升劳动生产率。此外，还应提高公共支出水平，满足老年人日益增长的需求，包括养老金。
I. INTRODUCTION

1. While the best-known dimension of aging relates to fiscal sustainability due to spiraling pension and health care costs, the repercussions of aging are wider, including a shrinking working-age population. As labor absorption is a key element in the formulation of GDP growth targets, changes in the labor market will thus impact overall macroeconomic planning. Aging will also constrain economic growth as it results in labor force shortages that in the absence of productivity increases depress growth.

2. The population in the PRC is aging rapidly. The proportion of people aged 60 years and above is expected to increase from 12% in 2010 to 33% by 2050, turning the population of the PRC into the oldest in the world. This trend results from the combined effect of increasing average life expectancy levels and falling fertility rates due to the impact of the one-child policy.

3. Favorable demographics in the PRC between 1975 and 2005 caused the total dependency ratio—defined as the share of children and elderly to the working-age population—to fall by about 50%. This doubled the working-age population from 400 million in 1978 to 800 in 2005, generating a large demographic dividend that added about 2 percentage points a year to GDP growth. However, the working-age population peaked in 2011 at 940 million, and it has been declining since. Today, rapid aging has reversed a more than half-century decline in the dependency ratio, and labor market shortages are increasing average wages in labor-intensive industries, undermining the PRC’s international competitiveness.

4. Given the limited health care resources and safety nets in the PRC, aging will exert financial pressure on the provision of services, in particular long-term care, for the growing number of elderly. This will exacerbate fiscal constraints in local governments, who shoulder the bulk of providing these services, demanding urgent reforms to increase fiscal revenue at the local level. The burden would be heavier in rural areas, where the old-age dependency ratio is higher, pension coverage is minimal, and elderly care facilities are rare.

5. While aging poses great challenges, it also provides opportunities for employment generation and the development of services, which are priorities in the government reform agenda. Aging can unleash new drivers of growth. However, capturing the benefits requires policy actions to speed up the transformation of the pattern of growth, coupled with labor market reforms and improved human

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1. Average life expectancy in the PRC has increased from 41 years in 1950 to 74 years today. In major cities like Beijing and Shanghai it is around 80 years. In parallel, the fertility rate has declined sharply from 6 children per woman to 1.5 in the same period.
capital to increase labor productivity. Higher public expenditure to finance the growing needs of the elderly, including pensions, is also needed.

6. Based on relevant international experiences this policy note aims to formulate policy recommendations to address the socioeconomic implications of rapid population aging in the PRC. The note will focus on reforms to increase labor productivity, health care services for an aging population, and measures to face the increasing dependency ratio.

II. POPULATION AGING AND THE LABOR MARKET

7. Developed countries were the first to age. They approached the problem by shifting from input-driven growth models—fueled by the accumulation of capital and labor—to productivity-driven ones. However, the shift requires structural reforms to boost the contribution of technology and innovation to growth, which involves investments in human capital to facilitate the adjustment of the labor force to technological change. International experience also shows that aging increases the financial responsibility of governments to provide services to a growing number of elderly. This is aggravated by the impact of surging dependency ratios in aging societies, and its adverse effects on the sustainability of the pension system amidst shrinking working-age populations.

8. The labor market will be particularly affected in this process. Experiences in other countries indicate that drastic changes can be expected in the skills needed to accommodate products and services to the health, travel, care, and recreational needs of the elderly. This changes result in demand for new jobs, which require specific training or re-training efforts. For instance, in Germany, a fast aging society, it has been estimated that adjustments in the labor market triggered by the distinct consumption pattern of the elderly will force 15% of the workers to change jobs in the near future.

9. Shortages in the labor market will help the PRC adjust to slower growth without social instability. However, workers with limited mobility and obsolete skills might not find jobs despite the labor shortages, and thus become unemployed. Hence, efforts to increase labor mobility and upgrade skills are crucial. Mobility restrictions—the household registration system (hukou) and the non-portability of benefits—discourage transfers from labor-surplus provinces to labor-deficit ones. Labor market rigidities are compounded by skill shortages and mismatches that hamper productivity increases and transfers of labor across the three productive sectors in the economy, hindering the PRC’s ascent to higher income status.

10. Against this background, the PRC needs to accelerate ongoing plans to pursue innovation-driven growth to ameliorate the impact of demographic changes. The PRC is already loosing competitive advantage in labor-intensive industries, but losses are not being compensated by an advantage in
knowledge-intensive industries, the key to achieve higher income status. Policy actions are needed to address the aging challenge through increases of the labor supply and its productivity. The following policy recommendations are suggested to that effect.

11. **Enhance labor mobility.** Reforms conducive to greater labor mobility in the PRC will foster the matching of labor demand and supply, thus curbing labor shortages stemming from rapid aging. Existing institutional barriers —*hukou* and restrictions on the portability of benefits— hinder natural migration flows and deter urbanization, resulting in an inefficient allocation of labor. Simulations suggest that reallocating labor from low-to high-productivity sectors could add several percentage points to GDP growth.² It is thus recommended to accelerate the ongoing relaxation of the *hukou* policy and social security reforms to foster labor mobility and sustain growth.

12. **Open up to immigration.** Welcoming workers from countries with younger populations is the most direct way to increase labor supply. This is best illustrated by experiences in European countries, Australia, and the US, where imported labor has contributed to address labor shortages and to boost population growth. Japan, a country traditionally closed to immigration, has recently announced plans to attract 200,000 foreign workers per year. The PRC could consider opening up specific sectors of its labor market (i.e., high-tech industries, health care) to specialized workers to rapidly address talent shortages. Similarly, incentives could be developed to facilitate the return of Chinese nationals educated abroad.

13. **Upgrade the labor force.** Upgrading human capital is essential to increase labor productivity in the PRC, and to support government efforts to foster innovation-driven growth. While the past decade has witnessed an expansion in tertiary education in the PRC, the country should aim to double the percentage of population with tertiary education in scientific and technical subjects. In addition, the percentage of labor force that completed high school, be it regular or vocational, should be expanded, as despite recent increases in junior secondary completion rates, high school attainment at 39% for the 25-34 year-olds in the PRC is still well below the average in OECD countries (82%). Government efforts to strengthen technical vocation education and training are welcome steps in the right direction.

14. Efforts should be complemented with incentives for firms to provide on-the-job training, and initiatives to re-train workers with obsolete skills to prolong their participation in the labor force. This would matter most in rural and less-developed areas, where improvements in human capital would be indispensable for future growth. In this regard, given the high propensity to drop out in main migrant-

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sending areas, subsidies could be provided for children to complete high school, to counterbalance the trend to drop out as unskilled wages rise.

III. POPULATION AGING AND LONG-TERM CARE

15. Long-term care systems in developed countries differ significantly depending on the role of the state and the overall structure of the social security system. Germany, France, and the Netherlands, rely on the social insurance system for long-term care because functional dependency is seen as an area where society must be able to provide a pooling mechanism. In Scandinavian countries, the state plays a key role in the financing and delivery of social services, and long-term care is financed through taxes, and managed by public providers. Most countries have separate schemes for medical and social care. Integrating long-term care into the health care system often leads to inefficiencies if long-term care patients are treated in general hospitals at a much higher cost.

16. Public safety nets for the elderly are limited in the PRC, and the development of long-term care services and institutions lags behind desirable standards. In rural areas, minimal pensions result in family members being the primary source of support for 85% of the elderly. However, the family-support mechanism is put at risk by the socioeconomic changes brought about by economic development and modern lifestyles. This exerts enormous pressure for the provision of sufficient beds in nursing homes and resources for long-term care expenditure. Against this background, the following policy recommendations are suggested for the PRC to develop long-term care.

17. **Increase long-term care financing.** Addressing the needs of a growing number of elderly requires large-scale reforms to upgrade safety nets to the challenge of aging. This implies that significantly higher public resources are needed. Public health care expenditure in the PRC stands at 1.4% of GDP compared with a 6.3% average in OECD countries, where long-term care alone amounts to 2.5% of GDP. Hence, long-term care public financing in the PRC needs to accurately reflect the coming demographic changes, and make financial provisions for appropriate benefits and contributions.

18. **Expand health insurance financial protection.** The PRC has made significant progress in recent years in extending health insurance coverage universally, but out-of-pocket payments still account for about 50% of total health expenditure, exacerbating the vulnerability of the elderly in rural areas. Hence, it is recommended to further expand the health insurance coverage, reduce co-insurance rates, and introduce ceilings on maximum out-of-pocket payments. Separate programs should be implemented to address the needs of the most vulnerable groups (i.e., elderly poor, elderly incapacitated). In the future, the PRC could introduce a long-term care insurance system. Increased pension benefits will ensure the ability of the elderly to pay for it.
19. Develop systems for the provision of long-term care. The changing family support system and the one-child policy make it difficult to rely on children to provide care to their parents. The lack of long-term care facilities results in unnecessary admissions in acute care hospitals and, therefore, in a waste of health care resources. For instance, improved home-based long-term care in Denmark has released 30% of hospital beds. Different types of facilities such as nursing homes, assisted residential facilities, and day-care centers need to be developed in the PRC to match rapidly growing needs. In developed countries, caregivers visit and provide personal care to the elderly at home, or provide assistance with housekeeping and other daily routines. Other programs in developed countries that could be adopted in the PRC include the delivery of meals, transportation services, and day-care centers.

20. Rely on private sector participation. While nursing homes catering for the wealthy are proliferating, there is urgent need to increase the availability of affordable nursing houses in the PRC. These facilities are usually financed in other countries by a mix of government support and individual pension contributions. It is also common to rely on private sector support. For instance, state-owned facilities are often privately managed, and private sector participation is incentivized through tax relief or subsidies in OECD countries. It is thus recommended that the role of the PRC’s government in the provision of long-term care shifts from supplier to purchaser and regulator, a concept that bodes well for government plans to allocate a greater role to the market in the provision of social services.

21. Develop a professionalized long-term care workforce. Long-term care providers in the PRC are scarce, lack basic training, and are poorly remunerated. It is thus imperative to improve working conditions and prioritize training initiatives to ensure the availability of sufficient long-term health care providers. This implies that in addition to caregivers, the availability of clinical staff (doctors and nurses) and managers should also increase accordingly. At present, the PRC has much fewer doctors and nurses per capita than the OECD average. This will provide important opportunities for employment generation.

IV. POPULATION AGING AND DEPENDENCY RATIOS

22. A falling dependency ratio and a large demographic dividend underpinned the PRC’s unprecedented socioeconomic transformation since 1975. However, both trends are now reversed. The dependency ratio is expected to reach 18% in 2020 from 10% in 2000. The demographic dividend vanished in 2011 when the working-age population started to shrink. While figures are not
yet alarming, the speed of aging, and its implications for the sustainability of growth and the pension system, demand prompt policy actions. The fact that aging is happening at a low level of income adds urgency to the task. The following suggestions are made.

23. **Selectively fine-tune family planning policies.** At 1.5 children per woman, and at 0.7 in cities like Shanghai, the current fertility rate is well below the replacement rate (2.1). The ongoing relaxation of the one-child policy would ease the burden of only-children supporting elderly parents and grandparents, the so-called 4-2-1 problem. It is recommended that adjustments are gradual and initially confined to prosperous urban centers, as even small changes could result in large absolute numbers given the size of China’s population.

24. **Raise the retirement age.** Following dramatic longevity improvements, developed countries have increased retirement age up to 67 years in some cases. In the PRC, retirement age has not been revised since it was established in 1950 at 60 for men and at 55 and 50 for women in white and blue collar jobs, respectively. Under the current average life expectancy (74 for males and 77 for females) it is recommended to gradually revise upwards the retirement age to mitigate labor shortages. Women’s retirement age should be aligned with that of men reflecting their longer life expectancy. Retirement age should be progressively increased for both genders in urban areas, while adopting a more flexible approach in rural areas. During the transition, schemes for voluntary retirement at an older age could be introduced on an experimental basis to draw relevant lessons to expand the program nationwide at a later stage. In addition to increasing the labor supply, prolonged labor market participation will also support the sustainability of the pension system.

25. **Accelerate pension reform.** The low level of coverage and the structural and financial weaknesses of the current pension scheme demand further reform. It is recommended to establish a three pillar system. The first pillar should be a defined-benefit basic flat rate pension, financed by taxes and fiscal transfers, and supported by the national pension reserve fund. The second pillar should be a mandatory defined-contribution scheme (funded individual accounts), which already exists, but needs to be strengthened until it generates sufficient returns to guarantee the expected replacement rates. The third pillar should consist of voluntary private pension funds. However, pension reform will not be possible without additional financial liberalization. A larger variety of investment options and a less restrictive regulatory framework are needed to strengthen the individual accounts, and lay the foundations for the establishment of private pension funds.

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Dependency ratios in Japan, Republic of Korea, Singapore, UK, and the US are respectively 39.0%, 13.4%, 13.2%, 26.3%, and 20.4%. However, these are all high-income countries, which per capita income exceeded $16,000 when they reached the level of aging the PRC shows today.
Observations and Suggestions

一、引言

1. 众所周知，由于养老金和医疗卫生费用的螺旋式攀升，人口老龄化与财政可持续性密切相关，实际上，人口老龄化的影响更广，还包括劳动年龄人口收缩等。因为劳动力吸收是制定GDP增长目标的一项关键因素，劳动力市场的变化将对整体宏观经济规划产生影响。老龄化会导致劳动力短缺，若生产率未提高，势必抑制经济增长。

2. 中国的人口正在迅速老龄化。预计60岁及以上人口所占比例将由2010年的12%升至2050年的33%，使中国成为全球老龄化程度最高的国家。这一趋势的形成源于两大因素的共同作用：不断提高的平均预期寿命以及受计划生育政策影响生育率不断下降。


4. 鉴于中国卫生资源有限，社会安全网不够完善，老龄化将对医疗卫生服务的提供造成资金压力，尤其是对日益增多的老年人的长期护理。由于这些服务主要由地方政府提供，这将令地方政府的财政压力更加吃紧，因此存在迫切的改革要求，以增加地方政府财政收入。而农村地区的财务负担将更重，那里的老年人抚养比率更高，养老保险覆盖率很小，而老年人保健设施也极为缺乏。

5. 老龄化带来了巨大挑战，但同时也提供了就业机会和发展服务业的机会，这也是政府改革议程的优先事项。老龄化可以带来新的经济增长点。然而，要获取老龄化的益处，需要推出政策措施，以加快经济增长方式的转变。同时，还需要改革劳动力市场和改善人力资本，提升劳动生产率。此外，还应提高公共支出水平，满足老年人日益增长的需求，包括养老金。

6. 本政策简报借鉴了相关国际经验，旨在提出政策建议，以应对人口快速老龄化对中国社会经济的影响。本文将着重阐述提高劳动生产率和完善老龄人口医疗保健服务的各项改革措施，以及应对日益增长的抚养比率问题的措施。

1. 中国人口的平均预期寿命已从1950年的41岁，提高到今天的74岁。在北京和上海等大城市预期寿命则达80岁左右。而在同一时期，生育率则急剧下降，从平均每名妇女生育6个子女减至1.5个。
二、人口老龄化和劳动力市场

7. 发达国家是最早开始老龄化的。它们应对老龄化问题的办法是转变经济增长模式，即通过资本和劳动投入驱动的经济增长模式转变为生产率驱动型经济增长。但是，这一转变需要结构性改革来推动技术和创新对经济增长作出贡献，其中涉及对人力资本的投资，促进劳动力适应技术变革。国际经验还表明，老龄化会增加政府的财政责任，为日益增多的老年人提供服务。老龄化社会持续增长的抚养比进一步加重了财政负担，而且随着劳动年龄人口萎缩，对养老金制度的可持续性也存在不利影响。

8. 劳动力市场在老龄化进程所受的影响将尤为显著。其他国家的经验表明，为满足老年人的保健、旅游、护理和娱乐需求，提供相应产品和服务的技能将发生巨大的变化。这种变化导致新的就业机会，也产生了对具体培训或再培训工作的需求。例如，在德国这样一个快速老龄化的社会，据估计，由老年人独特消费模式引发的劳动力市场需求变化将使15%的工人在不久的将来更换工作。

9. 劳动力市场短缺将有助于中国适应经济增长的放缓，同时避免社会动荡。然而，尽管劳动力短缺，流动能力有限，技能过时的工人也很难找到工作，并因而成为失业者。因此，努力提高劳动力的流动性和升级技能至关重要。包括户籍制度和社会福利无法跨区转移在内的流动性限制因素抑制了劳动力从过剩省份向短缺省份的转移。技能短缺和不匹配进一步加重了劳动力市场恶化问题，限制生产率的提高和劳动力在三大经济生产部门之间的流动，因而阻碍中国向更高收入水平的迈进。

10. 在此背景下，中国需要加快创新驱动型增长的进程，更好地应对人口结构变化带来的影响。中国在劳动密集型产业已经失去竞争优势，而知识密集型产业目前尚非中国的优势，无法弥补其在劳动密集型产业方面的损失，而知识密集型产业是实现更高收入水平的关键。面对老龄化的挑战，中国需要采取增加劳动力供给和提高生产率这两个政策措施。下面提出一些相关政策建议。

11. 提高劳动力流动性。在中国，有利于提高劳动力流动性的改革将促进劳动力需求和供给的匹配，遏制由于快速老龄化形成的劳动力短缺问题。现有的体制障碍，包括户籍制度和社保福利跨区转移的限制，阻碍了劳动力的自然迁移流动，也不利于城市化进程，造成劳动力的配置效率低下。模拟实验表明，劳动力从低生产率部门转移至高生产率部门，可以使GDP增长率增加几个百分点。因此，建议进一步加快户籍政策的放松和社会保障改革，以促进劳动力流动和维持经济增长。

Observations and Suggestions

12. 向移民开放。从人口结构更为年轻化的国家引入工人，这是增加劳动力供给最为直接的方式。欧洲国家、澳大利亚和美国在这方面有着较好的成功经验，从外国引入的劳动力为解决劳动力短缺问题作出了贡献，并促进了人口的增长。作为一个传统上移民政策封闭的国家，日本在最近也宣布，计划每年引入20万外国工人。中国可以考虑向专业化劳动力开放部分劳动力市场（如高科技产业，医疗保健），以快速解决人才短缺问题。同样，可以采取一些激励措施，鼓励海外留学人员归国工作。

13. 劳动力升级。人力资本升级对于提升中国劳动力生产率是必不可少的。目前政府正在努力促进创新驱动型增长，人力资本升级同样至关重要。尽管中国高等教育在过去十年取得了发展，中国还需将科学和技术学科方面受过高等教育的人口比例提高一倍。另外，完成高中或职高学业的劳动力比例也应该扩大。尽管最近初中毕业率有所上升，在中国25-34岁的年轻人中，高中学历比例仅为39%，仍远低于经济合作与发展组织（经合组织）国家的平均水平（82%）。此外，政府还应加强职业技术教育和培训。

14. 还应鼓励企业提供在职培训，并为技能过时的工人提供再培训，延长他们的职业生涯。对于农村和欠发达地区，这方面的工作尤为重要，因为对这些地区而言，人力资本的改善对于未来增长是不可或缺的。由于非熟练工人工资上涨，主要劳务输出地区出现了高辍学倾向，可以考虑为完成高中学业的学生提供补贴，以抗衡辍学打工的趋势。

三、人口老龄化和长期护理体系

15. 发达国家长期护理体系因国家的职能和社会保障体系总体结构不同而存在巨大差异。德国、法国和荷兰的长期护理体系依赖于社保体系，因为在这些国家，抚养老人被视为社会必须有能力建立统筹分担机制的领域。在斯堪的纳维亚半岛各国，国家在融资和社会服务中起关键作用。长期护理体系通过税收融资，由公共提供者管理。大多数国家均有独立的医疗和社会保障方案。若将长期护理体系纳入到医疗体系，长期护理需求者需要花费更多钱在常规医院就医，这通常会导致效率低下。

16. 在中国，老年人公共安全网的发展有限，长期护理服务和机构的发展滞后于理想标准。在中国，由于养老金标准低，85%的老年人由家庭成员供养。然而，由于社会发展和现代生活方式转变所产生的社会经济变化使得家庭保障体系岌岌可危。这样一来，养老院床位和长期护理资源开支将承受巨大压力。考虑到以上情况，为中国发展长期护理体系提出如下建议。

17. 增加长期护理融资。为满足持续庞大的老年人口需求，大规模改革势在必行，需升级安全网以应对人口老龄化挑战。这就意味着对社会资源的需求大幅增加。在中国，公共卫生支出占GDP的1.4%，而在经合组织国家比例达到6.3%，仅长期护理一项就占GDP的2.5%。因此，中国长期护理体系的公共融资需准确切合未来人口结构变化，并结合收益考虑，选择融资方案。
18. **加强医保资金保障。** 近些年，中国已经在扩大医保覆盖率上取得重大进展，但自掏腰包入保比例仍占总卫生支出的50%，这使得农村地区的老年人吃力不讨好。因此，建议进一步扩大医保覆盖范围，降低共同保险率，设置最大个人支付上限，并启动独立项目以解决最弱势群体需求（例如，贫困老人，行动不便的老人）。未来，中国可以制定一套长期保险体系，通过提高养老金确保老年人负担得起医保费用。

19. **发展多种长期护理体系。** 不断变化的家庭支助系统和计划生育政策使得父母难以依靠子女为其提供保障。长期医疗设施匮乏直接增加了非必要的急诊入院，造成医疗资源浪费。举例来说，在丹麦，完善的家庭长期护理设施为医院空出了30%的床位。中国需发展多种护理设施，如养老院、家庭辅助设施、日托中心等以满足与日俱增的需求。在发达国家，护理人员亲自上门为老年人提供个人护理，或协助其完成家务及其他日常需求。在发达国家，还有其他一些项目也可为中国采用，如送餐、提供交通服务、建立日托中心等。

20. **依靠私营部门参与。** 在中国，为富人而设的养老院随处可见，但迫切需要增加的是普通老人负担得起的养老院数量。在其他国家，这些设施所需资金通常由政府和个人养老金共同提供，依赖私营部门支持也非常常见。例如，在综合组织国家，国有设施通常由私人经营，并通过减免税负或提供红利的方式鼓励私营部门参与。因此，建议中国政府将自身角色从长期护理供应者转变为采购者和管理者。这也预示着政府将在提供社会服务的过程中赋予市场更大权力的计划。

21. **培养一批长期护理服务专业人员。** 在中国，长期护理人员稀缺、缺乏基本培训，且待遇差。因此，改善工作条件和优先培训激励是保证长期护理人员充足的重要举措。这意味着，除了护理人员以外，也应相应增加临床工作人员（医生和护士）和管理人员数量。目前，中国人均医生和护士数量远低于综合组织国家的平均水平。这一方法将为就业人员提供重要的就业机会。

### 四、人口老龄化和抚养比率

22. 自1975年起，抚养比率下降和人口红利增大现象使中国社会经济进入了前所未有的转型期。然而，这种趋势现在出现了逆转。据预测，中国抚养比率将从2000年的10%升至2020年的18%，而人口红利的现象则在2011年消失了，这一年正是劳动年龄人口开始萎缩的一年。虽然数据还不是很惊人，但是老龄化速度及其对可持续发展和养老保险制度的影响，亟需在政策上有所作为。尤其是当老龄化发生在收入水平低的社会状态下，这一任务则显得更加迫切。下面提出一些建议。

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3. 日本、韩国、新加坡、英国和美国的抚养比率分别为是39.0%、13.4%、13.2%、26.3%和20.4%，但是它们都是高收入国家，在其老龄化达到中国现如今的水平时，人均收入超过16,000美元。
23. **有选择地微调计划生育政策。** 当前的生育率远低于人口替代率（2.1），平均每名妇女生育1.5个子女。而在诸如上海这样的中心城市生育率只有0.7。计划生育政策有所放松，有助于缓解独生子女赡养父母和祖父母的负担，即所谓的4-2-1家庭结构难题。建议初期逐渐在繁荣的城市中心进行调整，因为即使是微小的变化也可能影响中国人口规模的绝对数。

24. **提高退休年龄。** 在人均预期寿命大幅提高后，发达国家将退休年龄提高到67岁。在中国，退休年龄于1950年提出，规定男性退休年龄统一为60岁，女性白领和蓝领分别为55岁和50岁，这一规定一直未作调整。根据目前的平均寿命（男性74岁，女性77岁）来看，建议逐步调高退休年龄，以缓解劳动力短缺的情况。由于女性平均寿命稍长，其退休年龄应与男性一致。在城镇地区，两性退休年龄都应逐步提高，而在农村地区可采取相对灵活的方式。在过渡期间，可建立试点，推出老龄者自愿退休计划，通过借鉴相关经验，逐渐在全国开展此项目。除了增加劳动力的供给外，增加就业市场参与率也将有助于养老保险制度的可持续发展。

25. **加快推进养老保险制度改革。** 当前养老保险制度覆盖面窄，结构不完善，资金薄弱，这都使得养老保险制度亟需改革。建议建立“三大支柱”养老保障制度。第一大支柱是固定收益基本定额养老金，通过税制和财政转移进行资助，由国家养老金储备金扶持；第二大支柱是强制性固定缴纳养老金（个人基金账户），虽为现行，但必须加强其执行力，确保其回报足以保障预期的替代率；第三大支柱应由自愿的私人养老基金构成。然而，养老金改革需要提高金融自由化程度，需要多种投资选择和限制较少的监管框架以巩固个人账户，并为建立私人养老基金奠定基础。
About the Asian Development Bank
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Based in Manila, ADB is owned by 67 members, including 48 from the region. Its main instruments for helping its developing member countries are policy dialogue, loans, equity investments, guarantees, grants, and technical assistance.

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