GOOD PRACTICES

UNFPA Ageing Project (CPR6P203) in China

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Project background

Ageing project CPR6P203 is implemented in six sites of six provinces, namely Shanghai and Shandong (in developed eastern China), Henan and Hunan (in less developed central China), and Gansu and Guizhou (in underdeveloped western China). The project is implemented by HelpAge International (HAI) and China National Ageing Committee (CNCA), funded by United Nations Population Fund (UNFPA).

The project’s expected output is “enhanced government capacity to formulate and implement evidence-based strategic plans and policies on ageing”.

Three practices have been selected as good practice models. They were designed applying evidence-based approach and implemented in line with county action plans on ageing, promoting healthy and active ageing innovatively to meet the changing needs of old persons. The three practices are outline below:

GOOD PRACTICE 1

Red Sunset1 Psychological Consultation Room
Site: Pudong District, Shanghai

Summary of practice

Volunteer retired psychological therapists provide free services to old people with psychological and mental problems.

Level of intervention

Sub-district, neighborhood community level

Targeted users of the practice

Local ageing committee officials, service stations targeting old persons, possibly extended to grassroots old persons’ associations in the future.

Problems addressed

The needs of old persons with psychological and mental disorders, the provision of psychological consultation to old persons.

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1 Red Sunset: a vivid word in Chinese specifically used for indicating old persons’ active participation in society, like the setting sun but still shining.
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Purpose of intervention
To improve old persons’ standard of living by providing counseling;
To promote the social participation and voluntary services of retired professionals.

Context
Shanghai’s Pudong district is located in eastern China. It is one of the most developed areas in China. The average annual disposable income of urban residents was USD 4,127, and that of rural residents was USD 2,038 at the end of 2008. This is high compared to a national average of USD 2,334 for urban residents and USD 704 for rural residents in 2008².
Pudong is among the first of China’s regions to be considered an ageing society. Older persons accounted for 21.4 percent of Pudong’s total registered population of 2.7 million at the end of 2009. In Pudong, 32 percent of old persons are living alone, and among them, 17.4 percent are widowed.
Older persons’ psychological and mental health is an emerging issue. More than 10 percent of old persons in Pudong have experienced depression³.
Older people need psychological support more than material support. When old people have difficulties dealing with psychological problems, they seldom receive timely treatment.
Few old persons seek psychological treatment, as psychological therapy in medical institutes is expensive and not covered by medical insurance. Older persons also tend not to trust therapists who are much younger than themselves.

Implementation strategy
1) Collect data by surveying the psychological needs of old people applying evidence-based approach.
In 2008, Pudong District Ageing Committee conducted a quantitative survey on old persons’ needs with a sample size of 7,600. The purpose was to better understand old persons’ psychological support needs. A human resource database was established through collecting household cards to identify eligible therapists among retired persons, as psychology is a relatively new discipline in China.

2) Pilot psychological consulting room providing free service to old persons in one community.
In early 2008, a psychological consultation service for old persons was piloted in Jinyang Xincun community by Pudong Ageing Committee. A service station was established with a retired therapist to provide free counseling services for old people living there. Assisted by social workers, it was successful and welcomed by local people.

3) Replicate “Red Sunset Psychological Consultation Room” in more communities.
After assessing and summarizing the pilot program, Pudong District Ageing Committee decided to replicate this practice in seven more communities. The Red Sunset Consultation Room program was formally initiated and established at community level.

4) Package psychological consultation services with awareness raising and give mental health lectures.
To better serve old persons with limited professional therapists, Pudong packages mental health consultation services together with clinical services, which are provided at consultation rooms. These services include raising public awareness about mental health through public media, newspapers and community lectures.

² Converted into USD at UN exchange rate.
³ Page 61, Baseline survey report of CPR6P203, 2007. Proportion of OP having depression trends urban 11.7 percent, rural 15.7 percent.
GOOD PRACTICE 1

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Before the practice was initiated.

70 percent of reported cases fully or partially recovered or significantly improved.

Cost and duration of the project

This is an ongoing project, which started in early 2008 and will continue to be implemented in the future.

The UNFPA invested a total of USD 8,000, and local government contributed a further USD 13,400.

Each consultation room requires a service staff of between two and four persons, including one professional psychologist.

Positive impact

1) The project made psychological counseling services accessible for the elderly.

2) It established mechanisms to address old persons’ psychological consultation needs.

3) It increased old people’s awareness of ways to prevent mental disorders, through community lectures.

4) It promote old people’s social participation.

Challenges and pitfalls

1) Human resources currently providing psychological consultation can’t meet old persons’ needs yet. More retired psychological therapists are needed.

2) Better publicity and services should be available to ensure “Red Sunset Psychological Consultation Rooms” are best utilized by old persons.

3) Older persons’ mental health seeking behavior should be improved.

GOOD PRACTICE 2

Relieving Older Women’s Psychological Stress

Site: Dunhuang City, Gansu Province

Summary of practice

Multi sectoral efforts led by Dunhuang City Ageing Committee and Women’s Federation to relieve old women’s psychological stress adopting evidence and rights based approaches.

Level of intervention

Village level

Targeted users of the practice

County governments, Ageing Committees, Women’s Federations at county and grassroots level, and Primary Health Care Centers.

Problems addressed

Heavy psychological stress experienced by old women. A lack of understanding into the root causes of psychological stress among old women, and a lack of multi-sectoral collaboration mechanisms aimed at relieving old women’s psychological stress.

Purpose of intervention

To better understand the situation and the causes of psychological stress, and to establish multi sectoral collaboration mechanisms to jointly relieve these stresses.

Indicators for monitoring

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Data in 2008</th>
<th>Data in 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of consulting room established</td>
<td>0</td>
<td>23</td>
</tr>
<tr>
<td>Number of professional psychologists providing services free of charge</td>
<td>0</td>
<td>38</td>
</tr>
<tr>
<td>Number of patients seeking therapy</td>
<td>0</td>
<td>4,306</td>
</tr>
<tr>
<td>Recovery rate of patients receiving therapy</td>
<td>0</td>
<td>70 percent</td>
</tr>
</tbody>
</table>

Indicators Data in 2008: Before the practice was initiated.
Indicators Data in 2010: After the practice was implemented.
Recovery rate of patients receiving therapy: 70 percent of reported cases fully or partially recovered or significantly improved.
GOOD PRACTICES
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Context

Dunhuang city is located in western China. It has a history of more than 2,000 years, and is famous as the site of the Mogao Grottoes.

Dunhuang has a population of 180,000, with old persons accounting for 8.8 percent of the total. Though there is no significant gender disparity in the composition of old persons in the area, a baseline survey report in 2007 found old women were 10 percent more likely to depression than old men.

Implementation strategy

1) Collect evidence to assess the psychological condition of old women – led by the local Women’s Federation and Ageing Committee.

The Women’s federation was identified as key partner of the Ageing Committee to conduct an in-depth survey among old women with sample size of 2,800. That accounts for half the regions’ total number of old women. The purpose of the survey was to better understand the psychological conditions of old women, firstly measured in the 2007 baseline survey.

2) Analyze the issue and propose solutions adopting a rights based approach encouraging the participation of both old persons and government officials.

Based on the quantitative report, officials who deal with ageing issues, members of old people’s associations and old women themselves were consulted to better reveal the root causes of heavy psychological stress among old women.

Through subsequent analysis of results, five determinants of psychological stress were identified, covering different aspects of old women’s life. They were:

• Suffering from chronic diseases
• Lack of support from family members
• Low level of social security
• Low level of health knowledge
• Lack of opportunity to participate in community activities

3) Establish a multi sectoral intervention model and pilot in at selected communities and villages.

To address the five determinants of psychological stress among old women, a multi sectoral intervention model was established, as illustrated in Graph 1 (Page 4). The Ageing Committee and Women’s Federations were responsible for coordinating and monitoring activities at different levels.

There were four villages in three towns selected as pilot sites. Activities conducted in these villages were:

• Government policies and initiatives to improve social security for old persons and increase medical insurance payments by 5 percent.
• Workshops to advocate the respect and support of old women, targeting young people, children, daughter-in-laws and mother-in-laws at a township level.
• Ageing Committees, Women’s Federations and the Bureau of Health invited experts to give lectures to old women, introducing basic health and medical concepts and skills, to help them deal with interpersonal relationships.
• Grassroots old persons’ associations encouraged old women to join social activities such as opera and dancing, as a way to enjoy daily life.
• Grassroots women’s association staff conducted home visits with old women.
**Indicators for monitoring**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Data in 2008</th>
<th>Data in 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of consultation meetings with the participation of duty bearers and rights holders</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Number of government agencies and CSOs involved into the practice</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Satisfaction rate for old women benefiting from different activities</td>
<td>0</td>
<td>3.72</td>
</tr>
</tbody>
</table>

**Positive impact**

A better understand into the root causes of heavy psychological stress among old women, and the establishment of a multi-party collaboration mechanism to jointly address the issue.

**Challenges and pitfalls**

1) More scientific methods should be introduced to finding the causes of stress.
2) There is still a lack of local psychological professionals.
3) Uncertainty over how and when to arrange activities for rural old women who are engaged in agricultural activities.
4) Limited resources for replication by local authorities.

**Cost and duration of the project**

The project ran between April 2008 and April 2010.

UNFPA invested a total of USD 8,000 dollars for the pilot phase, local ageing committees provided staffing and coordination resources from a Chinese counterpart.

Human resources needs include eight management staff from the ageing committees and Women’s Federations, plus 30 additional volunteers.

**Graph 1: A Multi Sectoral Intervention Model to address heavy psychological stress among old women.**

- **Suffering from chronic diseases**
- **Lack of support from family members**
- **Low level of social security**
- **Low level of health knowledge**
- **Lack of opportunity to participate in community activities**
- **Medical assistance and increase in medical subsidies**
- **IEC on improvement of family relationships**
- **Social assistance**
- **IEC on health literacy**
- **Encourage old women to participate in more social activities**

**Rights Holders/Old Women**

**Bureau of Civil Affairs, Bureau of Health**

**Women’s Federation, Youth League Commission, grassroots old persons’ associations**

**Coordinated by Committee on Ageing**

**Bureau of Health Bureau of Civil Affairs**

**Women’s Federation, grassroots old persons’ associations**

**Duty Bearers/Government Agencies**

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2. Where 0 = not satisfied at all, 5 = fully satisfied.
GOOD PRACTICE 3

Older Persons’ Social Participation, through an Association Named Five Guarantee Assistance Association (FGAA).

Site: Liuyang City, Hunan Province

Summary of practice
Retired officials from the Five Guarantee Assistance Association work with a government ageing committee to jointly address the issue of ageing.

Level of intervention
County Level

Targeted users of the practice
County government and old persons with political influence.

Problems addressed
The scarcity of government resources to address ageing issues, and limited access to political and social participation among old persons.

Purpose of intervention
To establish a successful old persons’ social participation model through Civil Society Organizations (CSO).

Context
Liuyang city is located in central China. It is famous for firework production, and 68 percent of the region is mountainous.

Liuyang has population of 1.34 million, 14.5 percent aged 60 and above. It is facing the challenge of a rapidly ageing population.

The Five Guarantee Assistance Association was registered in 2005. Its former body was the Five Guarantee Foundation, established 1995, which was led by the former party secretary of Liuyang City, along with seven retired government officials.

Implementation strategy

1) A regular communication channel between Liuyang City Ageing Committee and FGAA was established.

A daily communication channel was established between Liuyang City Ageing Committee and the FGAA. The FGAA was consulted over the formulation of an ageing policy, and the political influence of the FGAA was sought when necessary.

2) The FGAA and Ageing Committee conducted joint activities adopting an evidence-based approach into service delivery to old persons.

A team made up of FGAA and Ageing Committee members worked together in 2009 on pilot programs that provided services to a group of disabled old persons. The FGAA provided funding to improve facilities and train nursing home service staff. Through the use of a survey, disabled old persons in poverty were identified and transferred to institutes to be taken care of by professional service providers.

The FGAA conducted a study on old persons’ needs in 2010. Evidence was collected through surveys and face to face interviews. Based on the results of the study, the FGAA submitted policy recommendations to the Ageing Committee. 50 percent of the recommendations relating to old persons were incorporated into city policies.
3) Older persons’ social participation was institutionalized through CSOs.

Older persons were encouraged to participate with eight CSOs at city level. They were:

- Older Persons Association
- Caring About Next Generation Association
- Family Planning Association
- Association to Maintain Social Stabilization
- Older Persons’ Sports Association
- Association of Senior Scientists and Technicians
- Education Foundation
- FGAA

A system of joint regular meetings was established with participation of these CSOs and the government by following the FGAA pattern. The system was the further extended down to township and village level.

These CSOs play an indispensable role in supplementing government resources by protecting old people’s legal rights, caring for young people, assisting family planning, maintaining social harmony and organizing rural recreational activities.

**Indicators for monitoring**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Data in 2008</th>
<th>Data in 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency of communication between FGAA and the Ageing Committee</td>
<td>0</td>
<td>2 times per month</td>
</tr>
<tr>
<td>Frequency of FGAA participation in meetings</td>
<td>0</td>
<td>100 percent</td>
</tr>
<tr>
<td>Number of CSOs with old persons socially active</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>Number and percentage of old persons participating in CSO work:</td>
<td>N/A</td>
<td>15,000 60 percent</td>
</tr>
</tbody>
</table>

**Cost and duration of the project**

The FGAA has worked together with Liyang Ageing Committee adopting evidence based approach since 2009 to conduct survey and provide service among old persons.

UNFPA invested a total of USD 3,000 dollars in the project.

Eight government staff worked with seven CSO staff members on the project.

**Positive impact**

Through the participation of old persons, a model of how local CSOs can work with government agencies has been established. In addition, old persons’ social participation rates have improved through engaging CSOs.

**Challenges and pitfalls**

1) The joint efforts of the eight CSOs and Liuyang Ageing Committee can not fully meet the needs of old persons, especially given the rapid pace of population ageing.

2) The level of social participation among regular old persons still lower than that of old persons with political influence, therefore the program’s sustainability is not certain.
UNFPA Mission Statement

UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity. UNFPA supports countries in using population data for policies and programmes to reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS and every girl and woman is treated with dignity and respect.

UNFPA – because everyone counts.