Commission on Poverty (CoP) Elderly in Poverty

PURPOSE

This paper reports the sharing session between the Elderly Commission (EC) and the CoP on elderly in poverty in April 2006.

BACKGROUND

2. At its second meeting in April 2005, CoP members agreed that it would focus its work on (i) children/youth, (ii) working people, (iii) the elderly and (iv) the districts. Pursuant to Members' suggestion at the meeting in January 2006, a sharing session with the EC on elderly in poverty was held in April 2006. A gist of discussion is at *Annex* for Members' reference.

BASIC CONSIDERATIONS

- 3. Participants shared that the ageing population posed a serious challenge to the society. How well we meet the challenge hinges on how elderly services and support are designed generally as well as specifically, how the needy elderly are supported. Participants agreed on the following basic considerations concerning the design of the support system for elderly -
 - A sustainable structure of support for the elderly should be based on the concept of shared responsibility of the individuals, their family and the society;
 - while financial assistance was important, elderly in need should not simply be seen in terms of financial needs. Situation of the needy elderly should be considered holistically with special emphasis on the key *needs* (e.g. health, family/social support, housing) and their inter-relationships; and
 - a *preventive* approach enabling the elderly to stay and feel engaged with society is more effective, sustainable and socially beneficial. Hence, *active ageing*, making better and greater use of the resources of the elderly should be an integral part of the strategy.

ELDERLY IN POVERTY - AREAS FOR FURTHER WORK

- 4. Participants recognized that the EC has been providing advice to the Government in the formulation of a comprehensive elderly policy, taking full account of the above basic considerations. In terms of interface with the CoP for greater synergy, participants agreed that the focus of collaboration should be strengthening of support to the more needy elderly. During the sharing session, participants raised three areas for further work -
 - (a) more rigorous *targeting* of elderly services to the most needy elderly;
 - (b) further *strengthening of community support and networking* not only to provide a conducive setting for active ageing but also to facilitate the identification of "hidden cases" in the community; and
 - (c) *enhancing understanding* of the situation of high-needs elderly in the community, with a view to facilitating further policy deliberation.
- 5. Related to (b) above, participants noted that the CoP Task Force on District-based Approach was undertaking a Study on District-based Support for the Disadvantaged, and would also consider how to strengthen district support for the elderly in need at the district level.
- 6. In respect of Members' views expressed at the CoP meeting in January 2006 that accessibility to the medical waiver system should be improved to assist the needy non-CSSA recipients to receive essential services, the EC advised that the Hospital Authority had extended the coverage of time-specific waiver to include pre-scheduled appointments at the General Out-patient Clinics for up to six months. For elderly with chronic illnesses and require frequent follow-ups, a waiver covering a maximum period of 12 months may be issued.

WAY FORWARD

7. Members are invited to note the discussions summarised above. The sharing session was the first exchange between the EC and the CoP focusing on needy elderly. The CoP and the EC would continue the dialogue on the service models for the needy elderly, including following up the items identified in paragraph 4 above.

Commission Secretariat June 2006

Commission on Poverty and Elderly Commission

Sharing Session on Elderly in Poverty

Date : 10 April 2006 (Monday)

Time : 12.30 - 2.30pm

Venue : Room 2005, 20/F, Murray Building, Garden Road, Central, HK

Gist of discussion

Existing support for the elderly

Participants noted the background brief provided by the Health, Welfare and Food Bureau on the wide range of assistance currently provided to needy elderly. Participants also noted CoP Paper 9/2006 summarising the concerns raised by CoP members on the subject of elderly in poverty previously.

- 2. Regarding non-contributory financial assistance, participants noted that as at the end of 2005, 91% of the elderly aged 70 or above (i.e. 549 408 recipients) received public financial assistance either in the form of Comprehensive Social Security Assistance (CSSA), Old Age Allowance or Disability Allowance. The figure for those aged 65 or above was 80% (i.e. 677 348 recipients). Whilst seeking to meet the basic needs of those who could not support themselves financially, CSSA also took special care of the elderly, through the provision of higher standard rates, special grants and supplements.
- 3. Apart from financial support, the Government also provided different kinds of subsidized services to the elderly in need, including housing, community support services, home care services and residential care services. The Government also introduced the medical waiver system for the elderly with financial difficulties. Eligible elderly could obtain free medical treatment/apply for time-specific waiver at hospitals/clinics under the Hospital Authority or the Department of Health.

Reflections by academics

4. Prof Nelson CHOW shared with the meeting how we should help the needy elderly. While financial assistance through our social security system was important, other basic needs of the elderly (e.g. health, family/social support, housing) were inter-related and should be viewed in a holistic manner. He then made a presentation on the basic considerations in designing the support system to elderly, viz. the need to recognise the responsibility of the individual/family for old age protection, and to avoid shifting the whole responsibility to the society/Government. Given limited resources and the rapidly ageing population, there was a need to develop a more rigorous targeting in the provision of services to the needy elderly. To be sustainable, the system should also involve a mixed public and private provision as well as multi-faceted sources of financing from the Government, individuals and family. In this regard, the CPU's study on the existing arrangements for retirement protection in light of the ageing population was relevant.

Reflections from the Elderly Commission (EC)

5. Dr LEONG Chi-hung, Chairman of the EC shared with the meeting the work focus of the EC. He believed a long-term sustainable strategy to face up to the challenges of an ageing population was to take a preventive approach, and to make better use of the resources of the elderly. In the coming year, the EC would focus on building a positive image of the elderly in the society by (i) encouraging active and healthy ageing; (ii) working out a service model to support and encourage ageing in place and (iii) deliberating on retirement protection. Prof Alfred CHAN, Vice-chairman of the EC and Dr LAM Ching-choi, Chairman of the EC Working Group on Long-term Care Model (WGLCM) supplemented on the work of the two working groups on promoting active ageing and long-term care respectively. Dr LEONG said that the EC would be prepared to continue to work with the CoP on possible collaboration in order to strengthen our support to the needy elderly.

Sharing session/open discussion

(i) Targeting elderly services at the most needy

6. Participants noted that the CoP would focus on how to strengthen our support to the needy elderly. Participants remarked that some of the eligibility

requirements of the elderly services need to be redefined such that the resources could be used for benefit of the most needy elders. For instance, Members noted that currently users of residential care services were only required to go through either means-testing (those who make use of CSSA to pay for the home fees of non-subsidised residential care home for the elderly (RCHE) places) or care needs assessment (those seeking subsidised RCHE places), but not both. As a result, residential care services might not always reach the needy elderly with genuine financial and care needs. In order to target elderly services at the most needy, participants suggested re-thinking how best to allocate some elderly services taking into account the following factors (i) degree of disability (i.e. assessment of care needs); (ii) degree of affordability (i.e. assessment of means) and (iii) degree of urgency (i.e. assessment of availability of immediate support) in providing services to the elderly.

(ii) Further strengthening community support and networking

7. **Participants** considered that apart from financial community/neighbourhood support was very important to the quality of life of Besides providing emotional and social support, a good the needy elderly. community and neighbourhood network could also help identify needy cases that have not come forth for assistance. Participants recognised that the District Elderly Community Centres (DECCs) already played an important role in outreaching to the vulnerable elders through their support teams, and the Administration was conducting a review on its roles. Participants agreed that one broad direction of future work was how to further promote cooperation among different agencies and organizations at the district level to identify the hidden elderly, and to better utilise the available resources to address the needs of the elderly. To this end, the CoP Task Force on District-based Approach which was undertaking a Study on District-based Support for the Disadvantaged would also consider how to strengthen district support for the elderly in need.

(iii) Enhancing understanding of the situation of most needy elderly

8. In discussing the poverty indicators for the elderly in November 2005, CoP members considered that the available statistics had not fully captured the situation of needy elderly not on CSSA. Since hospitals/clinics were a useful platform to reach out to needy/fragile elderly, they suggested that the relationship of health and poverty be taken into account in the longer-term development of a territory-wide medical database.

Way Forward

9. Participants shared that the ageing population posed a serious challenge to the society; how elderly services should be provided, and in particular how to support the needy elderly merited careful rethinking. Participants noted that the sharing session was the first exchange between the EC and the CoP focusing on the needs of the elderly in need. They agreed to continue the dialogue and explore follow-up initiatives which could help strengthen our support to the elderly in need.

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