International Workshop

Well-being in Ageing Societies: Perspectives from China, Germany and Japan

23–25 October 2013, Beijing, PR China
International Workshop

Well-being in Ageing Societies:
Perspectives from China, Germany and Japan

健康老龄化：中、德、日的多学科研究

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<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction (Florian Coulmas)</td>
<td>4</td>
</tr>
<tr>
<td>Workshop Program Agenda</td>
<td>6</td>
</tr>
<tr>
<td>Aim and Purpose of the Workshop</td>
<td>10</td>
</tr>
<tr>
<td>▪ Welcome (Fang Cai, Clemens Tesch-Römer, Caiwei Xiao)</td>
<td>19</td>
</tr>
<tr>
<td>▪ Visions for the Ageing Societies of China, Germany and Japan (中德日老龄社会展望)</td>
<td>27</td>
</tr>
<tr>
<td>▪ Special Presentation and Demonstration of Paro (Paro特别介绍和演示环节)</td>
<td>37</td>
</tr>
<tr>
<td>▪ Session I: The Individual (Psychological Issues) (个体研究 (心理问题))</td>
<td>41</td>
</tr>
<tr>
<td>▪ Session II: The Society (Sociological Issues) (社会研究 (社会学问题))</td>
<td>51</td>
</tr>
<tr>
<td>▪ Session III: The Economy (Economic and Business Issues) (经济研究 (经济和商业问题))</td>
<td>61</td>
</tr>
<tr>
<td>▪ Session IV: Technology (技术研究)</td>
<td>69</td>
</tr>
<tr>
<td>▪ Session V: Actively Designing Well-being in Ageing Societies (Policy Issues) (积极规划老龄化社会的幸福感 (政策问题))</td>
<td>81</td>
</tr>
<tr>
<td>▪ Visit to Zhongyi Aging Development Center (现场考察: 访问中益老龄事业发展中心)</td>
<td>93</td>
</tr>
</tbody>
</table>
Introduction

Three countries, three socio-political systems, one challenge: To secure a satisfactory level of well-being under conditions of population ageing. We have here two medium-sized countries, Japan and Germany, and the most populous country in the world, China. Taken together, these three countries account for 21.92 per cent of the world’s population and 23.28 per cent of global wealth (as of 2013).

Germany as a European early industrializer had a comparatively long time to adjust its welfare systems to changing population developments. Japan was the model catch-up nation that led the way among East Asia’s “flying gees” towards development, but had much less time to build a welfare state capable of coping with an ageing population. And in China, the present-day economic growth champion that its leaders until recently described as a developing country, the process of population ageing is happening at an even higher pace. The dependency ratio in 2050 is projected to be a startling 74 per cent in Japan, 59 per cent in Germany, and 41 per cent in China – a prospect that must be a serious concern for social planners in all three countries. Two of the three countries are highly urbanized, while one is still largely rural. China, with an urbanization rate of some 50 per cent, is well behind Japan’s 91 per cent, whereas Germany (75 per cent) occupies a position midway between the two. However, urbanization is proceeding rapidly in China.

The countries’ economic systems – characterized as “social market economy”, “corporate capitalism” and “state capitalism” – differ from each other, as do the systems and levels of social welfare provisions. Yet, these and several other differences notwithstanding, the population dynamics of the three countries exhibit certain parallels. This in itself is a matter of great interest, for we cannot but notice that the two East Asian countries – one of which for a long time has had a much more invasive population policy than the other – converge if we look at the birth rate development which, moreover, shows the same tendency in the third, European, country of our comparison. Furthermore, medical and hygienic progress has led to remarkable life-expectancy gains in all three countries. While this is an undeniable success, the rapid transformation of the population structure brought about by ageing in conjunction with low fertility brings in its wake unprecedented challenges for the societies and governments concerned. Since these challenges are genuinely new in the history of humanity, it is prudent to try to understand these developments by comparing even very diverse countries, because different settings give rise to different innovations and solutions to problems. Intellectual exchange about these matters can only be beneficial. It is from this point of view that the first international workshop on Well-being in Asian Societies: Perspectives from China, Germany and Japan was convened.

Florian Coulmas
German Institute for Japanese Studies Tokyo (DIJ)
DAY 1: WEDNESDAY, OCTOBER 23

18:00–19:30 Welcome and Keynote Panel

Welcome:
Fang Cai, Director, IPLE-CASS, PR China
Clemens Tesch-Römer, Director, DZA, Germany
Florian Coulmas, Director, DIJ, Japan
Florian Kohlbacher, Head of Business & Economics Section, DIJ, Japan

Keynote Panel:
Visions for the Ageing Societies of China, Germany and Japan
Panel chair: Florian Coulmas
Speakers: Zhenzhen Zheng, Professor, IPLE-CASS, PR China
         Ursula Lehr, President, German National Association of Senior Citizens’ Organisations (BAGSO), Germany
         Clemens Tesch-Römer, Director, DZA, Germany
         Hiroko Akiyama, Professor, University of Tokyo, Japan

Special Presentation and Demonstration of Paro
Speaker: Takanori Shibata, Researcher, National Institute of Advanced Industrial Science and Technology (AIST), Japan

DAY 2: THURSDAY, OCTOBER 24

09:00–09:15 Keynote Speech
Caiwei Xiao, Vice President, China National Committee on Ageing

09:15–10:45 Session I
The Individual (Psychological Issues)
Chair: Clemens Tesch-Römer
Buxin Han, Institute of Psychology, Chinese Academy of Sciences, PR China
Michael Eid, Faculty of Education and Psychology, Free University Berlin, Germany
Hiroshi Shibata, University of Human Arts and Sciences, Japan
• How does well-being change over the life course?
• What are important psychological factors affecting well-being over the life course?

11:15–12:45 Session II
The Society (Sociological Issues)
Chair: Hiroko Akiyama
Xuejin Zuo, Shanghai Academy of Social Sciences, PR China
Andreas Motel-Klingebiel, DZA, Germany
Takako Sodei, Ochanomizu University, Tokyo, Japan
• What are important social issues related to ageing?
• How do these social issues of ageing affect well-being over the life course?
DAY 3: FRIDAY, OCTOBER 25

09:00–10:30 Session V  
Actively Designing Well-being in Ageing Societies (Policy Issues)  
Chair: Axel Börsch-Supan  
Jian Song, Population and Development Center, Renmin University, PR China  
Frank Berner, DZA, Germany  
Takeo Ogawa, Kumamoto Gakuen University, Japan  
- What are policies for successful ageing and/or active ageing?  
- How do these policies affect well-being over the life course?

11:00–12:30 Session VI  
Discussion and Wrap-Up  
Topic: The road ahead: Collaboration, research, action  
Facilitators:  
Zhenzhen Zheng, Professor, IPLE-CASS, PR China  
Florian Coulmas, Director, DIJ, Japan  
- What are policies for successful ageing and/or active ageing?  
- How do these policies affect well-being over the life course?

14:00–17:00 Visit to Zhongyi Aging Development Center
Aim and Purpose of the Workshop

Demographic change has emerged as a powerful megatrend affecting a large number of countries around the world. The ageing – and in some cases shrinking – of the population has vast economic, social, individual and organizational consequences (Drucker 2002; Dychtwald & Flower 1990; Kohlbacher & Herstatt 2011; Magnus 2009). A particularly pressing question against this backdrop is how to assure the well-being of people in ageing societies. Indeed, the study of people’s well-being and happiness has developed into an ever more important field of research with many practical implications for individuals and entire societies (Coulmas 2009; Layard 2011).

In recent years, there has been a lively debate on the relationship between societal welfare and subjective well-being (Dier et al. 2009; Stiglitz, Sen & Fitoussi 2009; Veenhoven 2006). Societal welfare can be described not only in terms of objective societal wealth (e.g. economic production, income and wealth, and welfare state infrastructure), but also in terms of subjective well-being, referring to the mean level and distribution of life satisfaction and happiness in a society. However, despite the growing importance of the older age group in the population, and the global scale of the demographic shift, the topic of well-being in ageing societies has not yet received sufficient attention. Besides, the vast majority of the research on ageing societies on the one hand, and well-being on the other, has been conducted in North America and Europe, while Japan – the country most strongly affected by the demographic shift with both a rapidly ageing and shrinking population (Coulmas 2007; Coulmas, Conrad, Schad-Seifert & Vogt 2008; Muramatsu & Akiyama 2011) – has been neglected. China, with its rapidly ageing population, has received even less attention, yet its demographic challenges are daunting, for China is growing old before becoming a rich nation – unlike Japan which has grown old after becoming rich (Peng 2011; Zeng 2009). Moreover, the demographic changes in China are directly influenced by its population policy (“one-child policy”). In Japan, low fertility was not a political goal, but the consequence of societal development.

The differences between the economic and political systems of Japan and China notwithstanding, both countries are facing severe challenges balancing the requirements for the objective and subjective well-being of working and dependent population cohorts in a society that enjoys sustainable growth – or at least non-declining standards of living. Researchers should endeavour to conduct cross-national, comparative research of these two countries and include Western European nations as well. Experts emphasize the importance of furthering comparative ageing research in a systemic way (Tesch-Römer & von Kondratowitz 2006), and this is why this workshop adopted a cross-national perspective to compare three rapidly ageing nations: China, Germany and Japan. While China and Japan were selected based on their demographic development, position and economic power in Asia, Germany was selected as a comparative case representing Europe’s most aged society. In previous research, German–Japanese comparisons on issues pertaining to the ageing society have proven meaningful and fruitful (e.g. Coulmas & Lützeler 2011), and this workshop endeavoured to further develop these comparative research efforts between Germany and Japan by adding the topic of subjective well-being, while at the same time furthering knowledge in the area by including China, which lags behind the other two in socio-economic development, but which – due to the unprecedented speed of its economic expansion – will have even less time than Japan had to adjust to the ageing challenge.

Understanding older people and ageing societies via academic, empirical research will help policy makers and opinion leaders deal with the individual needs of both younger and older people in ageing societies and design the appropriate environments to enhance their well-being. In gerontology, the subjective well-being of older people is one of the most studied areas (Carstensen 2009; George 2010), and thus there is also much to learn...
from gerontologists for scholars in other disciplines. But it is not a one-way process, and this is why this multidisciplinary workshop brought together experts on the well-being of older people from various fields of research.

For example in the area of business studies – particularly marketing – understanding older consumers is crucial for marketers and companies to better cater to the individual needs of older consumers with innovative products and services. This is not only expected to increase business opportunities but more importantly contributes to the well-being of the fastest growing age group in the industrialized world. Therefore, it is necessary to study the well-being of older consumers in a business context, and research has begun to discuss this issue both directly (e.g. Moschis & Mathur 2007; Moschis & Pettigrew 2011) and indirectly in terms of how new products and services can contribute to the quality of life of older consumers (Kohlbacher & Hang 2011). Similarly, the potential of technology for increasing the welfare in the (hyper-)aged society needs further investigation (Burdićk & Kwon 2004; Chen & Chan 2011; Lindenberger 2007), as do macroeconomic policies for improved living standards with higher labour force participation levels of the elderly (Nyce & Schieber 2005). Financing health care and long-term care in ageing societies is another problem area that none of the nations in question can evade (Ikegami 2010). This particular issue illustrates well that social ageing concerns not only the older population segments but is a problem that has far-reaching consequences for intergenerational relations and the entire social system (Streeck 2011).

The overall aim of this workshop was to bring together international experts studying (1) the relationship between objective and subjective well-being and/or (2) older adults/ageing societies in various fields to present their latest ideas and empirical research in order to help develop an agenda for future research on well-being in the ageing society. The discussion focused on China, Germany and Japan, as these societies represent different stages of economic development, speed of demographic change, cultural values concerning families and older people, and social policies that vary widely due to specific circumstances and historical path dependence. The following three general questions were discussed:

(a) How do well-being, satisfaction and happiness change over the life course in China, Germany and Japan?
(b) What are the individual, economic and societal factors that affect well-being, satisfaction and happiness of older adults in China, Germany and Japan?
(c) Which societal institutions, cultural frameworks and social policies help to enhance the well-being, satisfaction and happiness under conditions of population ageing in China, Germany and Japan?

After outlining the demographic situation in China, Germany and Japan, we discussed empirical evidence on psychological well-being over the life course in these three countries, concentrating on individual factors that influence life-satisfaction and happiness as people age. We then moved on to discuss the role of societal and economic factors for subjective well-being. Finally, we focused on policies for active ageing and well-being in ageing societies. In the discussion of these topics, we tried to focus on similarities and differences between China, Germany and Japan. In this process, we certainly realized the need for specific national policies due to specific circumstances and historical path dependence.

We hoped that the comparative perspective of the workshop would be productive for learning from each other in terms of general challenges and opportunities that China, Germany and Japan are facing due to demographic and social changes. Despite the many differences between the three countries in regards to economic development, social structure and political system, they share the challenge of rapid population ageing.
The presentations were intended to stimulate discussion of research topics, methods and ideas that could suggest new avenues for studying the well-being of people in ageing societies from a cross-cultural perspective. Hence, the presentations were to be brief and concise (10 minutes maximum) and focus on the three questions posed above: (a) life course trajectories of well-being; (b) individual, economic and societal factors affecting well-being in late life; (c) institutions, cultural values, economic factors and social policies enhancing well-being. The aim of the workshop was to facilitate future collaborative studies among participants. By focusing on the discussion among experts from various disciplines, we hope to have encouraged the cross-pollination among disciplines and leveraged the creative potential of our cross-national and multi-disciplinary setting.

The workshop was held on the premises of the Institute of Population and Labor Economics (IPLE), Chinese Academy of Social Sciences (CASS), in Beijing.

Given the unique situation of China as the world’s most populous country with a rapidly ageing population, and the dearth of internationally published empirical studies on this country, we considered Beijing the ideal location for hosting such an international workshop.

References


Welcome and Keynote Panel

Fang Cai, Director, IPLE-CASS, PR China
Clemens Tesch-Römer, Director, DZA, Germany
Caiwei Xiao, Vice President, China National Committee on Ageing
The unprecedented fast economic growth in China, since policies of reform were initiated in the late 1970s, has been accompanied by an equally impressive fast demographic transition. This fact illustrates how China is converging with her more developed counterparts, not only in terms of economic size and standards of living, but also in terms of population age structure. It is especially true that China accomplished a transition from a phase characterized by rapid population growth to a phase characterized by population aging in a much shorter period than developed countries.

The convergence in China’s demographic transition poses two research agendas. First of all, in the sense that China is a latecomer in population aging, there are many lessons for China to learn from forerunner countries like Japan and Germany. Secondly, the characteristic of “growing old before getting rich” places China in a unique position that can shed light on many peculiar implications in comparative studies. According to data by the United Nations, in 2010, the share of the Chinese population aged 60 and older was 12.3 percent, whereas the same share in all other developing countries was only 7.5 percent. That is, while China, as a developing country, faces many challenges similar to those faced by developed countries, such challenges for China can hardly be solved with the same measures employed in developed countries. Two examples shall illustrate this.

In developed countries, the overall education level of the population is the cumulative result of long-term development; therefore, years of schooling as an indicator of education attainment are equally distributed among populations at different ages. For instance, in the United States, on average, the population attains 13.8 years of schooling at age 25, and 13.7 years of schooling at age 60. In Japan, the related two figures are 13.6 and 11.7 respectively. In China, however, while the population at age 25 receives 9.7 years of schooling, that at age 60 attains only 6.1 years of schooling.

This characteristic has important policy implications for both labor market policy and pension policy. In developed countries, postponing the official retirement age is a practical policy option to tackle issues such as labor shortage and insufficiency of pension funding. In China, however, since there is no actual demand by employers for older workers with a low education level, a postponed retirement is bound to put them into a very vulnerable position in the labor market. Empirically, one can easily observe that the higher the workers’ age, the lower the labor force participation rate and the higher the unemployment rate. In conclusion, any suggestion simply advising Chinese policy makers to postpone the retirement age is nothing short of catching fish in a tree.

The middle-income position of China in the world ranking, along with unequal income distribution (namely, a Gini coefficient of 0.47), creates particular difficulties for Chinese society when coping with its elderly support. Such difficulties are embodied not only in an aggregated national level, such as financial and physical shortages in elderly support, but also at a household level with regard to elderly care. While most Chinese families are not affluent enough to afford institutional elderly care, traditional family support of the elderly is no longer feasible, because the long-term implementation of China’s one-child policy has built a reverse pyramid-shaped structure of age within families. Therefore, China has to innovate a mixed mode of elderly support suitable to her economic development level and population characteristics.

In conclusion, the Chinese unique characteristic of “growing old before getting rich” will not only help researchers to capture the key issues relating to China’s population aging, drawing more relevant policy implications, but also help them to distinguish dissimilarities between China and her devel-
Welcome Speech and Workshop Summary
Clemens Tesch-Römer
German Centre of Gerontology (DZA), Berlin

Travelling to another country means marveling at the beauty of landscapes and buildings and enjoying hospitality and friendships with the citizens of the country. When we are visiting another country as scientists we try to understand the people and their customs and learn from different approaches to similar challenges. This is what we are doing in this workshop. We are posing the question of how population ageing affects individual and societal well-being in three very different countries. China, the host of this conference, is experiencing demographic change at a much faster rate than both Japan and Germany which have grown older over the last century. Comparing these three countries allows for fascinating perspectives. Although individual well-being very much depends on individual factors, each person is embedded in the culture and society of his or her homeland. Hence, looking at social policy solutions for societal challenges, which come with the demographic change, will improve our capability to enhance well-being in ageing societies.

I would like to thank four of my colleagues who made this workshop possible. Prof. Dr. Fang Cai and Prof. Dr. Zhenzhen Zheng from the Institute of Population and Labor Economics of the Chinese Academy of Social Sciences have been wonderful, supporting and highly knowledgeable hosts from whom we have learned tremendously. Prof. Dr. Florian Coulmas and Prof. Dr. Florian Kohlbacher from the German Institute for Japanese Studies had the idea for this workshop and developed its concept. It was and it is a pleasure to work with both of them.
Ageing is a natural process. All individuals who are privileged to live into old age experience the changing relationship of increasing losses and decreasing developmental gains. However, ageing processes are shaped by cultural values and beliefs, by the changing demographic composition of a population, and by social policies affecting many areas of life. How do children support their ageing parents, and what happens when the subsequent generations become systematically smaller (as is happening for different reasons in China, Germany and Japan)? Which social policies have to be adapted (or even introduced) to meet the challenges of demographic change? And finally, what role does technology play in improving the quality of life of older people? All three countries involved in this workshop face similar challenges, but to different degrees. Societal and political solutions to these challenges are path dependent, but it was highly enlightening to listen to the expert’s analyses from China, Germany and Japan.

Keynote Speech (Day 2: Thursday, October 24, 09:00)
Caiwei Xiao
China National Committee on Ageing

Distinguished delegates:
Good morning!

It is a great honour for me to participate in this important international workshop on “Well-being in Ageing Societies: Perspectives from China, Germany and Japan”, co-organized by the German Institute for Japanese Studies (DIJ), the German Centre of Gerontology (DZA), the Chinese Institute of Population and Labor Economics (IPLE) and the Chinese Academy of Social Sciences (CASS). First, I would like to convey – on behalf of the China National Committee on Ageing – congratulations to the workshop and a warm welcome to the experts and scholars from abroad and China.

Like Germany and Japan, China is experiencing fast growth in the elderly population. By the end of 2012, the population aged over 60 in China reached 194 million, about 15 per cent of the total population. Responding to the challenge of an ageing population, China has developed a series of policies including social security, health care, social services and an age-friendly environment. Additionally, national research on strategies of population ageing has been conducted and completed.
DAY 1: WEDNESDAY, OCTOBER 23
Keynote Panel:
Visions for the Ageing Societies of China, Germany and Japan
Panel chair: Florian Coulmas
Speakers: Zhenzhen Zheng, Professor, IPLE-CASS, PR China
Ursula Lehr, President, German National Association of Senior Citizens’ Organisations (BAGSO), Germany
Clemens Tesch-Römer, Director, DZA, Germany
Visions for Ageing Societies

Preparing for an Ageing Society
Zhenzhen Zheng
Institute of Population and Labor Economics (IPLE), Chinese Academy of Social Sciences (CASS), Beijing

China has completed a demographic transition and entered an era of population ageing. The number of elderly people will increase dramatically over the next two to three decades. As the decline of mortality in the 1950s to 1960s and the decline of fertility since the 1970s occurred before China’s economic development, the current challenges resulting from demographic changes are also happening prior to economic development and will have stronger impacts. The impact of population ageing will relate to all aspects in society and all persons in society; therefore it is not only an issue of elderly care. Responses to population ageing should consider strategies comprehensively, consider the relationships between elderly people and other age groups, as well as a harmonious relationship between population and social-economic development. Preparing for an ageing society is not only the responsibility of the state; regional governments, communities, families and individuals also need to build capacity. Resources need to be mobilized from the government, civil societies and the private sector. Society has to adjust and change in culture and traditional practices to fit an ageing society. China should learn from the experiences and lessons from countries that are already old – in order to prepare as soon as possible for a healthy and harmonious ageing society.

The Demographic Change – A Challenge for the Individual and the Society
Ursula Lehr
German National Association of Senior Citizens’ Organisations (BAGSO), Bonn

We are living in an ageing world. Never before in Germany, in Europe, in the whole world have so many people reached such an advanced age. There is an enormous extension of lifespans in all European countries, but also in all countries of the world. This is due to improvements in socio-economic living conditions and the advances in modern medicine – and it is also influenced by lifestyle.

However, it is not only important to add years to life, but also to add life to years. Our life expectancy is dependent on our lifestyle. Life expectancy does not only mean length of life, but also quality of life. It does not only count how old one will become, but how one will get old. Ageing has many different faces. Ageing itself is not only a biological process; it is a process determined by a number of biological, social and ecological factors. There is very often a great difference between people of the same chronological age. So chronological age is a highly problematic criterion for political and administrative measures.

Scientists of all disciplines and politicians have to discuss the question of longevity combined with a state of psycho-physical well-being. What can be done to assure healthy ageing? What can be done to assure quality of life in old age? What can be done to prevent illness, diseases and dependency in old age?

We are living in a time of fast technical and social change. These changes will accelerate more and more. So lifelong learning is necessary in our time, more than ever before, because our environment is changing very quickly and this needs our adjustment. But, on the other hand, this rapid technological change also brings many opportunities. Technological innovations
Visions for Ageing Societies

for example have made communication much easier. They facilitate social contact by phone (or via Skype), by air travel, by Internet-chatting and e-mailing. In such a changing world, elderly people will be faced with more and more problems, especially if they are not willing or not able to learn new things, to learn how to use computers and the Internet.

Changes in the retirement system need to be made; we have to finish our occupational life later than in the past and we need more flexibility in retirement. We have an enormous extension of average life expectancy, we are healthier than former generations, and we start our occupational life at a higher age (23 to 25 years of age) and thus we will be able to continue work to a more advanced age (but with some exceptions in professions that are physically very demanding). We need programmes to further qualify elderly employees and we need health promotion in the workplace. Research on ageing has provided evidence for the existence of a variety of patterns of ageing. The multi-dimensionality and multi-directionality of ageing processes have to be taken into consideration.

Today, the economic situation of the elderly in Germany is still relatively fine. Less than 5 per cent of the elderly are living below the poverty line in need of social welfare support. In Germany, it is quite unusual for grown-up children to give financial and material support to their parents. Very often parents and grandparents are supporting their children and grandchildren from their pension.

Well-being also means healthy ageing. We know that life expectancy and quality of life are not dependent only on physical or biological conditions. Social, psychological and environmental factors are also important. It is not only the state of curative medicine that affects life expectancy, but so also – and to a much greater degree – do knowledge of and compliance with preventive measures. Therefore, much more attention should be paid to prevention and rehabilitation. The importance of physical and mental activity must be made clear from childhood on – because ageing is a lifelong process. It is also necessary to maintain a high degree of physical, social and mental activity in men and women during the years of adulthood.

Ecological aspects are also important for well-being. We need “age-friendly cities”. Along with increasingly poor health, ecological factors gain more influence. Very often it is ecological variables (as defined by the housing situation, equipment in the home, rural or urban environments, transportation and so forth) that will determine the degree of dependency of a person. Favourable ecological conditions extend the range of the activity of people and elicit more activity and social contacts and provide more stimulation. Unfavourable ecological variables may result in a restriction of the life space and a loss of abilities and skills.

Today, a policy for the elderly has to be more than a policy for pension systems and a policy for care, and it also has to include aspects other than financial ones. The first issue is maintaining and increasing the competence of the elderly in order to prevent dependency, to secure healthy ageing with a high quality of life. A policy for the aged is a policy for healthy ageing, combined with a state of psycho-physical well-being.

We know, ageing is affected by biological heredity as well as by individual behaviour and a wide range of social, environmental, cultural and political factors. Healthy ageing is the result of a life-long process. So it is necessary to optimize the life-long development of the individual. We know that a variety of influences in early childhood, adolescence, and early and middle adulthood, as well as in the present life situation of the aged, determine the process of ageing and well-being in old age. In 1985, Robert Butler asserted firmly that “the participation of older people enriches societies economically, culturally and spiritually”. Health and productivity are closely connected. The loss of one may entail the loss of the other and so lead to dependency, decline of mental, psychological and physical abilities, and incompetence – whereas productivity, participation, responsibility and the feeling of being needed have a favourable effect on health. Butler stated
Visions for Ageing Societies

Happiness in Germany: Challenges for a Demographically Changing Society
Clemens Tesch-Römer
German Centre of Gerontology (DZA), Berlin

The German population is growing older, declining in size and, due to immigration, becoming more diverse. Several trends within Germany’s demographic change are notable: the number and proportion of children is decreasing, the number and proportion of very old people (80+) is increasing, the workforce in Germany is growing older (with a shift from younger/middle-aged workers to older workers), and the relevance of migration will probably increase. In addition, population ageing is regionally very diverse, it is more pronounced in Eastern Germany and in rural areas (due to lower birth rates and migration within Germany). These changes demand adequate policies in at least six areas.

1. Work and retirement regulations. Pension reforms have led to a rising retirement age. Employment rates have increased over the last 20 years, most notably for older workers, but also for younger age groups. Future challenges concern the maintenance of productivity and innovation within ageing workforces.

2. Income and material well-being. Pension entitlements for people with long-term full-time employment will remain comfortable, while for other types of occupational biographies, pension entitlements will be considerably lower. Future challenges concern the prevention of old age poverty.

3. Health and health care. In Germany, there is some evidence for compression of morbidity. However, this might change in the future (e.g. because of obesity trends). Nevertheless, health expenditures continue to increase. Future challenges concern the sustainability of the health

Reference

further: “Much discussion of health [...] is really a discussion of medicine. The medical model is a very restricted one. Only relatively recently attention has been drawn to the elements of health promotion and disease prevention, a movement toward a broader social definition of health.” And we have to “recognize that health and productivity are interacting conditions. The unproductive human is at higher risk of illness and economic dependency; and the sick person is limited in productivity and is, therefore, at higher risk of dependency” (Butler 1985: 7, 12).

Demographic change, the ageing world, is a challenge for all of us. A policy for the aged, however, should not be determined only by the question: “What can we do for the aged?” It should also be: “What can the aged do for the society?” For this we need to revise the negative image of the aged. Most of the elderly are competent and wish to assist other people and society. Societies, communities, churches, clubs et cetera should promote this readiness for voluntary public engagement and be prepared to provide the framework and to utilize the potential and services elderly people have to offer. Elderly people have a great experience of life and they are willing to share their knowledge and competences with other generations. For example, in Germany, senior councils at the local level advice politicians and thus help to shape society.

Old age and longevity should not be seen as problems but as a chance and a challenge – a challenge for everyone: for ageing individuals, for their families and for our society. We should not only ask for the problems and deficits of ageing and old age. We also have to ask and open our eyes to the new potentials of the aged, as well as to the competences and new potentials of the very old. We have to see the aged as human capital.
care system facing an ageing population (and a highly innovative health care industry).

(4) Frailty and long-term care. The long-term care insurance, introduced in 1995, is widely accepted in the German population, although a variety of problems have not been solved yet (e.g. benefits for people with dementia, quality of care, shortage of skilled personnel). Future challenges concern the sustainability of the long-term care system and the recruitment of professionals.

(5) Family and social integration. Family relations are of high quality and very reliable in Germany. However, the percentage of people without children is increasing in younger cohorts. Future challenges concern the support of social integration via networks outside the family.

(6) Societal participation. Volunteering has been stable in Germany over the last decade. However, there has been no increase in volunteering with a gain in free time after the transition into retirement. Hence, volunteering seems to be tied to occupational opportunities. Future challenges concern the increase of volunteering and societal participation in all age groups (and especially in older persons).

Well-being is related to a variety of factors (e.g. socio-economic factors, social relations, activities, health as well as personality and coping processes) which also play a role in these challenges related to the demographic change in Germany. Moreover, policies strengthening democracy, societal solidarity and social security support happiness and life satisfaction in an ageing population. Nevertheless, social and behavioural ageing research should address the complex relationship between population ageing, social policies as well as well-being and happiness in the population.

The following recommendations seem to be relevant for ageing societies:

- Work and retirement regulations. Stimulate employers to create healthy work environments and life-long learning opportunities. Support employees to maintain workability for an extended working life.

- Income and material well-being. Ensure adequate pension entitlements, also for individuals receiving employment disability pension. Create old age security for people with discontinuous careers.

- Health and health care. Stimulate health promotion, prevention and rehabilitation (especially for the older population).

- Frailty and long-term care. Secure both the recruitment of competent professionals and the engagement of volunteers (e.g. in the assistance of people with dementia).

- Family and social integration. Relieve families from the burden of care by providing services tailored to the needs of individuals who care and individuals who are cared for.

- Societal participation. Improve the opportunity structure for potential volunteers (especially for older persons).
DAY 1: WEDNESDAY, OCTOBER 23
Special Presentation and Demonstration of Paro
Speaker: Takanori Shibata, National Institute of Advanced Industrial Science and Technology (AIST), Japan
Therapeutic Seal Robot, PARO, as a Bio-feedback Medical Device in Dementia Care
Takanori Shibata
Human-Life Technology Research Institute, National Institute of Advanced Industrial Science and Technology (AIST), Japan

Robot therapy, which uses robots as a substitution for animals in animal therapy, is a new robot application in the fields of welfare and patient care. The seal robot PARO began development as a device for robot therapy in 1993. PARO was commercialized in Japan in 2005 and in Europe and the U.S. in 2009. Since then it has been used in hospitals and care facilities in approximately 30 countries. Recent research has revealed that robot therapy has a similar effect on patients as animal therapy. In 2009, the U.S. Food and Drug Administration (FDA) certified PARO as a bio-feedback medical device. While PARO can be used in various kinds of therapy similar to real animals, this presentation focused on its use with elderly dementia patients because explicit differences can be easily observed before and after interacting with PARO. First, the purposes and functions of PARO were explained. Second, because there are several observational studies of the therapeutic effects of the elderly with dementia interacting with PARO, some typical cases and interesting special cases were introduced. These cases included recovery from depression, reduction of agitation, and recovery from speech disorders. Finally, reasons why PARO has the potential to change moods and behaviors of the elderly with dementia as a non-pharmacological approach were discussed.
DAY 2: THURSDAY, OCTOBER 24
09:15–10:45 Session I
The Individual (Psychological Issues)
Chair: Clemens Tesch-Römer
Buxin Han, Institute of Psychology, Chinese Academy of Sciences, PR China
Michael Eid, Faculty of Education and Psychology, Free University Berlin, Germany
Hiroshi Shibata, University of Human Arts and Sciences, Japan

- How does well-being change over the life course?
- What are important psychological factors affecting well-being over the life course?
Mental Health Status of Chinese Elderly in the Past 20 Years: Stability and Variation
Buxin Han
Key Lab of Mental Health, Institute of Psychology, Chinese Academy of Sciences, Beijing

Aim: To explore the subjective well-being and depression of Chinese elderly in the process of the social and economic reformation in China, in comparison with the cross-sectional data of suicide rate and mental health.

Method: The revised and standardized Chinese version (Zhou 1990) of the Memorial University of Newfoundland Scale of Happiness (MUNSH, 24 items) (Kozma & Stones 1980) has been used quite often to explore the subjective well-being of Chinese. The score of MUNSH is calculated by the sum of positive affection and positive experience minus the sum of negative affection and negative experience. Thirty-five studies, published between 1993 and 2010, with 17,230 participants involved, were used for a cross-temporal meta-analysis. Similar processes were applied for depression as measured by GDS (Geriatric Depression Scale) and CES-D (Center for Epidemiological Studies Depression Scale).

Results:
(1) There was no significant correlation between the year and the mean weighted scores from the studies in each year ($r = -0.183$, $p>0.05$) and no significant correlation between the year and the mean SD ($r = -0.006$, $p>0.05$).
(2) Negative experience and negative affection increased slightly but significantly during the period and correlated with the year significantly.
(3) There is no significant correlation between the sum score and social economic index, such as health insurance or social welfare. However, negative affection and experience are correlated with several social economic variables.
(4) Depressive symptoms increased continually over the past 10 years, as indicated by GDS and CES-D scores.

Conclusion:
The subjective well-being of elderly Chinese has been stable over the past 20 years, in spite of the increasing negative affection and experience in this period; while depression is increasing.

Suggestions:
(1) Possible intervention approaches based on Chinese Daoism tradition (e.g., Taiji play), applicable in either community or institutional settings, as indicated by field and empirical studies. Typical approaches of modern clinical psychology (e.g., psychoanalysis) may not be valid for this group.
(2) Chinese elderly, as similar to those in other parts of the world, are experiencing marginalization with respect to economic status, rights in decision-making processes, and social involvement. The stability and variation of mental health could be considered a reflection of this reality.
(3) Further exploration is needed concerning intergenerational relationships, the transition of traditional values, and effective interventions at both individual and group levels, with emphasize on cross-cultural comparison.

References
Over the last 20 years, average general life satisfaction in Western Germany was about 7 on a scale ranging from 0 to 10, whereas in Eastern Germany it was about 6.5 – with small differences over the years. The German Ageing Survey 2008 shows that the level of average positive affect is rather high (about 3.8 on a scale ranging from 1 to 5) and that there are only small differences between age groups and the two parts of Germany. On the other hand, average negative affect is rather small with a mean value of about 2 on a scale ranging from 1 to 5. Less is known about the distribution of psychological well-being and flourishing. A recent study on flourishing in Europe (Huppert & So 2013) came to the conclusion that only 20 per cent of the German population are flourishing.

There are many factors that can have an influence on individual well-being such as genes, personality, life events, affect regulation, goal regulations, personal strength, et cetera (e.g. Eid & Larsen 2008). From a cross-cultural perspective, more studies are needed on cultural influences on these factors and how they moderate the influence of these factors on well-being. Cultures differ in what they consider as ideal and appropriate (Diener 2009). For example, there are differences in ideal affect (Tsai 2007) and in norms for the experience of emotions (Eid & Diener 2001). Western cultures favour high-arousal positive affective states (e.g. excitement, enthusiasm), whereas Eastern cultures favor low-arousal positive affective states (e.g. calm, peacefulness) (Tsai 2007). Western cultures generally favor positive emotions, whereas Eastern cultures do not favour pride and contentment so much (Eid & Diener 2001). Moreover, these studies show that nations differ in their homogeneity of norms, with Eastern nations being more heterogeneous and Western nations being more homogeneous (Eid & Diener 2001). These studies, however, only refer to some selected nations and affective well-being. More studies on other concepts of well-being and a broader range of nations are needed.
Social policy should consider individual and societal conceptions of ideal well-being and ageing. Moreover, social policy should create conditions that allow individuals to flourish. Social policy should enable individuals to pursue individual happiness.

References

Effects of Productive Activities on Well-being in Late-middle and Aged Japanese
Hiroshi Shibata
University of Human Arts and Sciences, Saitama

The concept of well-being has changed according to era. In eras when life expectancy was short, attaining longevity by reducing disease-related mortality was of central concern. Longevity is a domain of quantity in well-being. In societies that have attained a certain level of longevity, the significance of quality of life as a domain of quality in well-being is raised. In my presentation I proposed productivity as the third component of well-being in late-middle and aged people.

The UN Second World Assembly on Ageing, held in Madrid in 2002, highlighted the significance of productivity by old people in an aged society. The productive activity comprises all formal and informal activities, such as paid labor, unpaid labor (house management, gardening, etcetera), organizational volunteer activities, and informal mutual aid – as far as these productive activities are contributory to society.

The question of the effect of productive activities by late-middle and aged people should be discussed from two standpoints. The first is to evaluate the usefulness of productive activities by senior adults to society. The second is to verify that productive activities by senior adults help to enhance the well-being of the performers themselves. The former aspect is very difficult to determine because research design concerning this question is complicated. The latter aspect has been investigated thoroughly. In Western developed countries, unpaid labor and volunteer activities, in particular, have proven to have favorable effects on the subjective well-being of the performers themselves. Whether paid labor, however, is helpful for the well-being of the performers themselves has not been determined.
We investigated the effects of productive activities by late-middle and aged Japanese, based on longitudinal and interdisciplinary studies of two Japanese representative panels, J-HRS (aged 55–64) and J-AHEAD (aged 70+). The relationships of productive activities to the outcomes of well-being were investigated longitudinally. In the late-middle aged group (J-HRS), informal productive activities at baseline significantly prevented two-year incidences of chronic diseases. In the aged group (J-AHEAD), the total amount of time used for all activities of paid labor, unpaid labor, and volunteer activities had significant and direct relations to preventing three-year impairment of both cognitive and physical functioning and to reducing mortality controlling for confounding factors. Effects of paid labor on the well-being of the performers themselves may differ between people in Western developed countries and Japan, because some religious people (mainly Old Testament) in Western countries feel stigmatized when engaging in paid labor in later stages of life.
DAY 2: THURSDAY, OCTOBER 24
11:15–12:45 Session II
The Society (Sociological Issues)
Chair: Hiroko Akiyama
Xuejin Zuo, Shanghai Academy of Social Sciences, PR China
Andreas Motel-Klingebiel, DZA, Germany
Takako Sodei, Ochanomizu University, Tokyo, Japan

- What are important social issues related to ageing?
- How do these social issues of ageing affect well-being over the life course?
China’s population aging and rapid change in lifestyle have contributed to the fast epidemiologic transition in both urban and rural areas. Non-communicable chronic diseases (NCDs), such as cancer, cardiovascular/cerebrovascular diseases, and diabetes, have become more prevalent among the population’s morbidity and major causes of death. In 2011, the top three causes of death – cancer, cardiovascular, and cerebrovascular diseases – accounted for 70 percent of deaths in urban areas and 65 percent in rural areas, indicating an over 10-percentage-point increase as compared with the same two figures from 1995. A recent survey revealed that the morbidity of diabetes increased from only one percent in 1980 to 11.6 percent in 2010. As many as 70 percent of diabetes patients were not aware of their illness, not to mention the need for taking any curative measures. The higher NCD incidence certainly implies poorer quality of life in patients’ old age and a heavier health care/long-term care burden for both the family and the public’s finances.

To promote healthy and active aging, it is imperative to lower the incidence of NCDs by emphasizing preventive interventions, which are less costly and more effective than curative care. However, the mal-incentives built into the country’s poorly designed health system discourage movement in this direction.

The three major public health insurance programs – the Health Insurance for Urban Workers and Staff, the Health Insurance for Urban (Non-Working) Residents, and the New Cooperative Medical Scheme (NCMS) for rural residents – are all financed and operated at the prefectural level or even lower-level localities, leading to fragmentation in the health system as well as difficulties for migrant workers and their dependents in accessing health facilities in their current locales. Severe price distortion in the health system (namely, over-pricing of drugs and high-tech check-ups at the cost of under-priced labor services) has resulted in over-prescription of the former and inadequate and poor quality provision of the latter. The problems are further aggravated because providers are motivated to generate more revenues since the incomes of medical workers are closely linked to the revenues of the providers, and payment to the providers are in general based on a “fee for services” (FFS) system.

Policy suggestions
Measures should be taken to remove price distortion and reform the financing of health care facilities. Among the three tiers of health care facilities, primary and secondary care facilities have more externalities due to their services being “public goods”/“merit goods” in nature. By comparison, services in tertiary hospitals are more likely to be “private goods”. The government should play a more important role in the financing of primary and secondary health facilities, encouraging them to engage more in preventive care and basic curative care. More emphasis should be placed on the work and outcomes of preventive services when evaluating their performance. Measures should be taken to encourage patients to seek health care at primary/secondary health facilities first, in order to enhance the quality of services and lower deductibles/co-payments. The government should make efforts to highlight and duplicate the good practice of primary/secondary providers. For instance, extending preventive care to non-traditional health care fields which promote healthy physical exercise (e.g., “Taichi boxing”).

Sociological Issues

China’s Population Aging and the Health System Reform
Xuejin Zuo
Shanghai Academy of Social Sciences

China’s population aging and rapid change in lifestyle have contributed to the fast epidemiologic transition in both urban and rural areas. Non-communicable chronic diseases (NCDs), such as cancer, cardiovascular/cerebrovascular diseases, and diabetes, have become more prevalent among the population’s morbidity and major causes of death. In 2011, the top three causes of death – cancer, cardiovascular, and cerebrovascular diseases – accounted for 70 percent of deaths in urban areas and 65 percent in rural areas, indicating an over 10-percentage-point increase as compared with the same two figures from 1995. A recent survey revealed that the morbidity of diabetes increased from only one percent in 1980 to 11.6 percent in 2010. As many as 70 percent of diabetes patients were not aware of their illness, not to mention the need for taking any curative measures. The higher NCD incidence certainly implies poorer quality of life in patients’ old age and a heavier health care/long-term care burden for both the family and the public’s finances.

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Sociological Issues
This presentation gave an overview of specific transformations of ageing and later life as well as the development of quality of life and its distribution under the conditions of social change in Germany. Maintaining quality of life for all ages under social and demographic conditions is one of the major concerns in Germany and Europe, while the Asian emphasis lies more on safety and happiness – an interesting difference in connotation that could be fruitfully discussed and analysed.

After briefly identifying the most crucial social issues related to ageing and later life in Germany, the presentation tried to outline future transformations and intervention needs in the German and European context. Based on the aforementioned different connotations, these may differ between national or regional contexts.

The presentation briefly discussed these developments theoretically as well as empirically, applying data from the German Ageing Survey (DEAS) – an ongoing cohort sequential study of older people aged 40 to 85 in Germany.

Suggestions and recommendations:

- Social and demographic change are essential features of all three societies – China, Germany and Japan – but they differ significantly in relevant aspects.
- At the same time, discourses and intentions connected to basic responses on the challenges of these transformations differ.
- Although transformations create new risks for ageing individuals and societies, they also bear new opportunities for further development – socially and economically.
- A main policy task will be to secure social sustainability under these conditions – and it will be the responsibility of (social) science to guide and observe this process also in an international comparative perspective to learn from diverse experiences with distinct approaches.
Gender Differences in Well-being over the Life Course
Takako Sodei
Ochanomizu University, Tokyo

There are many scales for measuring the well-being of an individual such as happiness, life satisfaction, loneliness, alienation, depression, marital satisfaction, marital quality et cetera. Each scale measures slightly different aspects of an individual’s state of mind, although they have a lot in common. In order to identify gender differences in well-being, I focused on the aspects of life satisfaction and marital satisfaction.

According to previous studies in Western nations, life satisfaction over life course shows a U-shape, with people in their 30s at the lowest point. However, based on comparison among cross-sectional data conducted in many countries, Esterlin (2001) pointed out that the relation between life satisfaction and age was not directly related and that there were many intermediate variables.

In Japan, a nation-wide survey conducted by the Cabinet Office in 2013 showed a shallow U-shape with people in their 40s and 50s at the bottom. The 40s and 50s form the mid-life crisis period for both men and women. In general, around this time, men work in mid-tier management positions and experience pressure from both the top and the bottom. In Japan, the suicide rate is the highest among men in their early 50s. Many women experience “the empty nest syndrome” after their children have grown up, and this is also the time of menopause when they face physical and psychological strain. Furthermore, in Japan, the 50s also pose the most difficult time for the family budget because of the high cost of sending children to college or university and paying off the mortgage.

Recently, many young people in Japan do not or cannot find a decent job – they depend on their parents even after graduating from college. In addition to supporting their grown-up children, many of these middle-aged parents are also responsible for taking care of their own ageing parents who have a longer life expectancy. Middle-aged parents thus have become the “sandwich generation” suffering from the burden of supporting both the younger and older generations.

Life satisfaction of Japanese females is higher than that of males, which is similar to other countries. However, their marital satisfaction is very low compared with other countries, the lowest point being for women in their 40s. Though women are satisfied with their daily lives, they are not satisfied with their husband. Dissatisfaction with the husband often leads to so-called mature divorce after a long married life. The major cause of divorce is a lack of communication.

In old age, especially after the death of the spouse, Japanese women face financial difficulty, while men face social isolation. In the gender-segregated society of Japan, the norm is that men should work outside the home, while women should stay at home taking care of the children and keeping the house clean. Today, most Japanese women work outside the home, yet they are still responsible for housekeeping, childcare and eldercare. About 60 per cent of Japanese women stop working after giving birth to their first child. Moreover, women also stop working because of their husband’s job relocation and/or because they take care of their ageing parents or parents-in-law. Therefore, Japanese women usually work only for a short period of time and for a low wage, which results in a very low old-age pension. Therefore, most women choose their widow’s pension, which is higher than their own.

Compared with other countries, Japanese old people have less social contact, especially among men. Typical Japanese salaried men spend most of their time at work and they have no place at home and in the community. In Japan, retired men are often referred to as “big trash” at home, while retired single men are likely to end up in social isolation, often a reason behind isolated death (i.e. several days or weeks passing before a
deceased person is found). About one out of five older men living alone have no one to rely on when they are in trouble.

Suggestions to solve difficulties that middle-aged and older men and women in Japan are facing include the following:

1. Gender equality at work as well as at home should be realized so that women can avoid poverty in old age.
2. It is necessary to change work styles. Long hours and transfers for the husband make it difficult for the wife to keep working.
3. Recently, the Japanese government has been trying to realize a work-life balance, particularly through men's participation at home. However, this will take time because employers (usually older men) do not see the need for changes in life and work styles.
4. In order to change lifestyles, the gender-role segregated norm should be abolished. Deeply rooted in the patriarchal stem family system, this norm is a common tradition in China, Germany and Japan. Its abolition will be attained through socialization processes from early childhood.

References
DAY 2: THURSDAY, OCTOBER 24
14:00–15:30 Session III
The Economy (Economic and Business Issues)
Chair: Xuejin Zuo
Jiehua Lu, Department of Sociology, Peking University, PR China
Axel Börsch-Supan, Max Planck Institute for Social Law and Social Policy, Munich Center for the Economics of Aging, Germany
Florian Kohlbacher, DIJ, Japan

- What are the economic and business challenges of ageing societies?
- How do these economic and business challenges affect well-being over the life course?
Economy

The Impact of Aging on the European Economy
Axel Börsch-Supan
Max Planck Institute for Social Law and Social Policy, Munich Center for the Economics of Aging (MEA)

The expected change in the age structure in virtually all industrialized countries – as well as in many developing countries – is dramatic and will lead to a substantially higher proportion of older people in the world. While aging is global, there are marked international differences in the speed and the extent of the aging processes. Even within the industrialized countries, differences are large. Europe and Japan already have a much older population than North America. Italy and Germany are aging faster than France and Great Britain. In Asia, some countries start from a relatively young population, but aging is very quick. A particular dramatic example is China.

Due to the globalization of our economies, aging will change the international division of labor. This offers chances and poses challenges – both of which are complex, under-researched, and therefore the focus of this presentation. International flows of capital, goods and services, and labor – in descending order of mobility – will be important mechanisms moderating the effects of population aging in each individual country. Moreover, the different extent and speed of demographic change will affect the wealth of nations differently. Hence, some countries will gain and others will lose in the international pecking order. Equally important is the question how these gains and losses can be influenced by public policy.

With these two core questions in mind, my presentation (1) described the international differences in the challenges and chances due to global aging, (2) juxtaposed them with the existing and the planned policy environment, which adds another component of international differences, and (3) worked out what this means in terms of the international growth prospects.

An Overlook at a Booming Mature Industry in China’s Ageing Society
Jiehua Lu
Department of Sociology, Peking University

Accompanied by a decline in fertility and an increase in life expectancy, China has experienced accelerating population ageing in the past few decades. In contrast to the majority of opinions in the scientific community that there are major negative effects from an ageing society on China’s future socio-economic development, this presentation pointed out that the ageing of the Chinese society also has some positive impacts on China’s business opportunities at present and in the near future. Therefore, this presentation started with a short introduction to the past, current and future situation of population ageing in China and outlined the disagreements about the impact of ageing on socio-economic development. Secondly, it introduced the concept of mature industry and its priority areas. We think that the mature industry refers to an industrial system which is targeted mainly at the elderly population and includes the products, services, as well as economic agents for job opportunities. In fact, a mature industry meets the rising demands for garments, food, housing, transportation, medical health, long-term care et cetera. Thirdly, the significance of a booming industry was measured quantitatively in terms of whole economic growth, leading to the conclusion that it would result in an increase in this industrial sector as compared to the economy as a whole. Finally, some policy frameworks were proposed in order to promote healthy development of this newly-emerging industry in China.

• There is an urgent call to propose some key incentive policies to promote this industry.
• A long-term plan is also needed for this booming industry in China.
• Operational management of this industry could provide a favourable environment.
The presentation took a European point of view, focusing on global interaction in the power triangle consisting of Europe, North America, and the quickly growing Asian markets.

The main results are:

1. The opportunities and challenges for growth in Europe are very different. Some countries have high debt burdens – partially due to the financial crisis and in addition to ill-designed pension systems. Living standards in these countries are in danger. Other countries have reformed their social systems and/or have low debt burdens. They will grow in spite of population aging. Asia is facing demographic problems at least as severe as Europe. China is aging about twice as fast as Europe; India has largely wasted its demographic dividend by under-educating its youth. The important message for all countries is that demographics is *not* destiny, but policy responses to demographic developments can be.

2. The main structural bottlenecks in Europe are low labor force participation and lack of competitiveness. Wages and productivity have not converged. The North-South divide in competitiveness amplifies the North-South divide in demographic aging.

3. Structural reforms, especially labor market and pension reforms, are needed to unplug these bottlenecks. This is possible as the examples of Sweden (in the 1980s), the Netherlands (1990s), and Germany (2000s) have shown.

4. In the long run, the most important role of the public sector is to ascertain long-term investments in health and (further) education, as these are the main ingredients for high productivity over people’s entire, ever longer lives.

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**Consumer Well-being in Later Life: Conceptual Foundations and Preliminary Empirical Evidence**

Florian Kohlbacher

*German Institute for Japanese Studies (DIJ), Tokyo*

Despite the growing importance of the 50+ age group in the population, older consumers are still under-researched and still often not included in a range of marketing practices. In addition, the vast majority of research on older consumers published so far has been conducted in North America and Europe, while Japan – the country most severely affected by the demographic shift with both a rapidly ageing and shrinking population – has been widely neglected. Understanding older consumers via academic, empirical research will help marketers and companies to better cater to the individual needs of older consumers by offering innovative products and services. This is not only expected to increase business opportunities but more importantly also contribute to the well-being of the fastest growing age group in the world. Therefore, it is necessary to study explicitly the well-being of older consumers in a business context; research has begun to discuss this issue both directly and indirectly in terms of how new products and services can contribute to the quality of life of older consumers. In gerontology, the well-being of older people is one of the most studied areas, thus there is much to learn for marketing scholars from gerontologists. This presentation introduced the concept of consumer well-being, discussed its theoretical foundations and offered some preliminary empirical findings from research in Japan.

Main conclusions and recommendations for social policy:

- Consumer well-being is an important issue
  - but the concept needs to be refined and clarified.
• There is a relation between consumption and happiness  
  → but the nature of it is complex and needs clarification.

• Marketing activities have an impact on consumer well-being  
  → but the relationships are complex and need clarification.

• Policy makers need to set the right framework for consumer sovereignty  
  → that is, install regulations that prevent the infringement of consumer sovereignty and consumer well-being.

• Policy makers need to provide relevant information and educate consumers  
  → that is, information/education campaigns are needed that provide information about consumer rights et cetera to consumers of all ages.
DAY 2: THURSDAY, OCTOBER 24
16:00–17:30 Session IV
Technology
Chair: Florian Kohlbacher
Ke Chen, Department of Systems Engineering and Engineering Management, City University of Hong Kong, China
Birgid Eberhardt & Sibylle Meyer, SIBIS Institute for Social Research and Project Consulting, Berlin, Germany
Ryoko Fukuda, Graduate School of Media and Governance at Keio University, Tokyo, Japan

• What kind of technologies can contribute to successful ageing and/or active ageing?
• How do technologies affect well-being over the life course?
Understanding Gerontechnology Acceptance by Elderly Hong Kong Chinese: A Senior Technology Acceptance Model

Ke Chen
(co-author: Alan Chan)

Department of Systems Engineering and Engineering Management, City University of Hong Kong

Technology develops at a tremendous speed and has tremendous impact on our daily lives. However, studies have revealed that older adults are less likely to use technology than younger people. The aim of this presentation, which is based on a study, was to examine the factors that influence the acceptance and non-acceptance of gerontechnology by older adults in Hong Kong. In order to investigate and explain technology acceptance by older Hong Kong Chinese, a Senior Technology Acceptance Model (STAM) was developed and empirically tested. The proposed model integrates conventional TAM constructs (perceived usefulness, perceived ease of use, self-efficacy, anxiety, facilitating conditions) and age-related health and ability characteristics. A face-to-face interview technique with a preset questionnaire was employed for data collection. A sample of 1,012 seniors aged 55 and over participated in the study.

Results
The Senior Technology Acceptance Model (STAM) was strongly supported by the quantitative data in this study. In the STAM, personal attributes and environmental supports were more decisive than perceived benefits for predicting gerontechnology usage behavior. For older adults, technology acceptance behavior is affected explicitly and directly by individual attributes like age, gender, education, health and ability characteristics (such as functional abilities, cognitive abilities, attitude to aging, and life satisfaction). There is a need for gerontechnology interface designers to accommodate the physical, cognitive, and emotional needs of older users. The government and related agencies or organizations could provide more resources and introduce some measures or policies to provide encouragement and support for individual older people engaging in technology usage activities.

Conclusion and reflection
Use of gerontechnology is a synthesis of person, technology, and the social environment. Technology has the potential to help older adults to maintain physical fitness, cognitive function, and social activity, as well as providing opportunities for increasing independence and productivity. Using technology can improve individuals’ quality of life and well-being. Personal attributes (such as self-efficacy, physical and cognitive abilities, and knowledge) were found to play important roles in shaping elderly individuals’ attitudes toward and behaviors with technology. Social policies, prevailing values, norms, the trends of a society, as well as important referents (especially family and circle of friends) were found to impact older individual’s behavior. We concluded that usage of gerontechnology is multidimensional; and in order to encourage old people to adopt technology, there is a need to remove barriers at personal, technological, and environmental levels.

Suggestions/recommendations for social policies:
- Business organizations, the Hong Kong Government, non-governmental organizations (NGOs), and local universities should collaborate to provide more training courses tailored specifically to the elderly. Moreover, rather than just teaching the operation skills required for using technology, trainers should put greater effort into improving the efficiency and effectiveness of training so as to give older people the confidence to learn for themselves.
- A favorable learning and usage environment should be created for older users because of the fact that social influences play an important role.
in affecting the behavior of older adults. Media and public opinion also should promote the belief that seniors have the right, need, and capability to use technology. Relevant organizations and the community in general should create an atmosphere that is supportive and favorable to the raising of confidence in older people and encourages them to interact with gerontechnology.

- Older people have relatively fewer user resources and they often do not have physical access to hardware. Further intervention by practitioners should aim to work toward allocating sufficient facilities for seniors in communities and public places like elderly or community centers, sports centers, and libraries. Government and related organizations should introduce some measures or policies to support older people engaging in technology usage activities. For instance, the government could subsidize the purchase costs or service charges for those users experiencing financial difficulties.

**Assisting Technologies in Germany**
Birgid Eberhardt & Sibylle Meyer
SIBIS Institute for Social Research and Project Consulting, Berlin

In Germany, assisting technologies are one piece in the puzzle of the strategy of handling expected demographical and societal changes in combination with the following:

- encouragement of volunteer work
- acquisition of foreign professionals
- promotion of new forms of living together
- encouragement of work-life balance concepts
- health in high age
- company health management.

Germany’s national research on assisting technologies is funded by different federal ministries and state ministries and it is also influenced by European programmes. Research organizations as well as companies and user groups are engaged in programmes of all sources.

At the national as well as the European level, not only the aged are addressed (gerontechnology) but also people caring for the elderly including relatives as well as professional caretakers. Expecting only half of an ageing (and shrinking) population to be of working age, the optimization of processes through the use of technical improvements is also an issue, as is the support of elderly employees and voluntary workers.

Technical solutions are based on technologies such as home automation, smart textiles, household equipment, new light technology, telemedicine services, entertainment devices, local based services, robotics, as well as computers, tablets, smart phones and apps. Another issue is the need to develop better and new user interfaces to existing supportive devices. Ad-
aptation to an individual’s needs can be solved using a system of rules as part of the configuration process. Technology also often needs or enriches human services. An example would be a system of sensors detecting emergency situations, a set of rules defining how to react to situations, and finally a homecare service providing help.

The target of funding programmes has shifted especially over the last seven years from pure technical research to research solving aspects and bringing quality for example to the following fields:

- support in daily life
- safety in daily life
- support of communication and social participation
- fun, well-being and prevention
- supply with goods
- handling diseases and support of rehabilitation
- support of mobility
- support of rural areas
- foster and palliative care
- telemedicine and point-of-care.

The chosen technology for new or improved solutions is less important. So in one concrete funding call, research on robots could be supported as well as an improved cooperation between services based on advanced IT. More important would be the proof of concept by possible users and their inclusion in the design, test and evaluation cycles, and their approval.

The purpose of technology solutions can start in cross-generation support and lead to dedicated support for elderly. Their use might provide comfort in the beginning, be helpful, and finally necessary to continue independent living. To support the development of changes in life, solutions therefore have to be adaptable to changing needs through configuration, by adding components and services. To be able to do so components and even services have to be interoperable, working and fitting together.

In Germany answers to questions of data security and safety as well as to ethical questions are essential for the acceptance of technical support, especially when they involve the collection and transmission of data to service organizations, monitoring using cameras et cetera. The Federal Ministry of Research and Education therefore funded accompanying research studies on those questions. Furthermore, the inclusion of user groups and organizations serving the elderly became a strong issue. The Federal Ministry of Economic Affairs and Energy recently ensured that data security has to be compliant with protection profiles not only valid in Germany but also at the level of European laws.

As a result of industrial and research efforts, a lot of small, useful, more complex and highly sophisticated solutions (including complete ambient environments) are available. The awareness of meta-users such as care providers, foster care homes and the building industry is increasing. Articles and popular lectures have also called attention to end users. Currently missing are warehouses or marketplaces that show not only single products among many others but provide concepts showing what kind of and how technology-based solutions can help people with dementia and their relatives. For the time being, this is an important missing link.

Robots for future support of elderly people

A challenge is the involvement of users in areas without any experience to build on. In 2011, a study on the acceptance of service robots by the elderly was initiated by VDE (Association for Electrical, Electronic and Information Technology). The results were gained by intensive face-to-face interviews with the elderly and questionnaires given to professionals with a technical background.

Gerontechnology for Successful Aging: From Compensation to Enhancement
Ryoko Fukuda
Graduate School of Media and Governance at Keio University, Tokyo

Gerontechnology is the study of technology and aging for the improvement of the daily functioning of the elderly. Its wide research areas comprise five perspectives: (1) clarifying the aging process, (2) avoiding the decline of functions, (3) compensating the declined functions, (4) supporting people with declined functions, and (5) supporting both care receivers and caregivers. In addition to these conventional approaches aiming to compensate the decline in functions, a new approach that enriches the daily lives of older adults is required to contribute to active aging.

In Japan, various gerontechnology products have already been developed and implemented. Technologies to avoid the decline of functions (such as physical training machines or video games for the training of physical and cognitive functions) are designed to suit older adults’ functions in order not to add an extra load.

Technologies that compensate declined functions (such as glasses, hearing aids, sticks, and wheelchairs) are rather conventional and many older adults use them. Recently, the designs of some products have become more sophisticated – they have the potential to enrich the daily lives of older adults.

In order to support people with declined functions, many products have been developed: an easy-to-unplug electric plug, a kitchen shelf with an electric lift, a washing machine with a tilted drum, or a toilet lift – all products that support declined physical functions. Regarding the decline of visual functions, products with enlarged elements such as buttons and labels have been implemented. Considering decline of hearing functions, lower tone frequency, greater sound volume, and slower speech rate are suitable. A radio with this kind of adjustment function already exists.
Support technologies in caregiving is one of the most characteristic technologies of Japan. In order to compensate for a lack of caregivers, many kinds of robots have been developed. Robots to move care receivers are familiar by now. Also available are robot suits which, from the point of view of older adults, may be the better choice to move care receivers. The "toilet robot", which was introduced at the Japanese exhibition of welfare technology in September 2013, is expected to further reduce the demands on caregivers, as the robot detects excretion and immediately vacuums it into a tank. In the future, home assistant robots may do all the household work and thus help both caregivers and care receivers. Therapy robots are a different type of robot that communicate with older adults and make them feel relaxed. The most popular therapy robot is Paro, which is now being used in approximately 30 countries. Paro is certified as a "bio-feedback medical device"; its therapeutic effect is widely acknowledged. Watch-over systems play a great role in caregiving, also for independent older adults living in individual houses. In order to avoid discomfort with observation from cameras, current watch-over systems employ sensor devices to monitor the daily activities of older adults. For example, one watch-over system consists of an electric kettle that is connected with Internet to observe whether target older adults use the electric kettle as usual to make Japanese tea. Such watch-over systems are accepted by both older adults and their families living separately.

In order to enrich daily lives, information and communication technology (ICT) is expected to play a significant role. Communication with other people, telemedicine, personal healthcare, online shopping, general information gathering, and maintaining (and improving) cognitive functions are all possible with ICT. However, most older adults cannot benefit from ICT, as conventional ICT products are targeted mainly at younger adults. A large amount of research has stressed the difficulties for older adults, and products which resolve such difficulties have been developed. In the case of mobile phones, the simple mobile phone in its early phase had no mail or any additional functions. Later models offered various functions but with a simple menu, guidance functions, larger labels, and higher display luminance and contrast. In addition to these functions, the latest smart phones provide haptic feedback. Over time, older adults get used to ICT. Touch-screen interfaces might increase the acceptance of ICT by older adults owing to more intuitive operation.

If older adults were more interested in such new technologies, even their daily lives might be affected by it. One of our empirical studies has shown that, during a four-week experimental period, technological products have positive influences, not only on the daily activities of older adults but also on their emotions and willingness to use technology. Use of technology can lead to higher enjoyment of everyday life and even the enhancement of functions.

It should now be discussed further how high-technologies enrich the daily lives of older adults, and how such technologies can be implemented. In order to accelerate the acceptance of technologies by older adults, it is also necessary to give information about the use of these technologies, including benefits and possible risks, and to consider individual needs and interests.
DAY 3: FRIDAY, OCTOBER 25
09:00–10:30 Session V
Actively Designing Well-being in Ageing Societies (Policy Issues)
Chair: Axel Börsch-Supan
Jian Song, Population and Development Center, Renmin University, PR China
Frank Berner, DZA, Germany
Takeo Ogawa, Kumamoto Gakuen University, Japan

• What are policies for successful ageing and/or active ageing?
• How do these policies affect well-being over the life course?
Aging Policies in China: From “Rights Protection” to “Integrated Development”
Jian Song
Population and Development Center, Renmin University of China, Beijing

China has the largest number of older people in the world as well as a longstanding culture of respect and support for the aged, which both challenges and guarantees the formulation and implementation of aging policies. Attempting to satisfy the three-layer needs of the elderly (i.e., financial support, daily assistance, and spiritual comfort) and putting more emphasis on the multiple priorities of the elderly at different ages who live in rural or urban areas, the Chinese government is currently developing a preliminary policy and legal framework in response to rapid and severe population aging, especially in accordance with the requirements of the ICPD Program of Action, covering old-age security, medical care, old-age service, and social participation. The principal aging policies in China include the Law on the Protection of the Rights and Interests of Elderly People, the 12th Five-Year Plan for the Development of China’s Undertakings for the Aged, and the Plan for Construction of a Social Support Service System for the Elderly (2011–2015), as well as other policies in the form of administrative regulations, local regulations, and departmental rules and documents at various levels.

- **Old-age security system.** So far, China’s basic old-age security system has institutionally achieved full coverage of all population groups. It includes basic pensions of enterprise retirees, a minimum living-standard security system, and support for rural seniors eligible to the “five guarantees” (i.e., food, clothing, medical care, housing, and burial expenses). Special subsidies are also offered to the seniors of family-planning families.

- **Medical care security system.** The Chinese medical care security system takes basic medical security as the major component, and medical insurance and commercial health insurance as supplements—an approach that safeguards the rights of the elderly who need to have access to basic medical and health services despite their locality. The elderly can also enjoy a steady improvement in the quality of professional services from concerned institutions at all levels. Today, more attention is paid to the prevention and control of chronic diseases, medical and health care for disabled seniors, and the mental health of the elderly.

- **Old-age social support service system.** The Chinese old-age social support service system is based on aging at home, supplemented by community services and supported by social organizations. In addition to the construction of public and home environments taking the physiological features of the elderly into account (thus allowing the elderly to live in their homes and communities safely), a wide-ranging old-age service system has been constructed, beds for old-age support have increased markedly, and professional old-age nursing institutions have developed at an accelerated rate. Meanwhile, old-age service teams have become increasingly professional and proficient in IT applications.

- **Social participation of older people.** In order to provide supportive environments for the elderly, various kinds of professional old-age organizations have come into being at central and local levels, offering platforms for seniors. A great variety of old-age activity centers, stations, service sites, and rooms have been set up and physical activities have been organized to improve the health status of seniors and engage them in more social communications. Artistic events including the China Old-age Culture and Art Festival have enriched the spiritual and cultural life of the elderly and upgraded their quality of life in every aspect.
In recent years, active ageing has become an important policy goal in many European countries, as well as at the level of the European Union. As a consequence, the year 2012 has been declared the European Year for Active Ageing and Solidarity between Generations. By doing this, the European Union sought "to encourage policymakers and relevant stakeholders at all levels to take action with the aim of creating better opportunities for active ageing and strengthening solidarity between generations."1 In the same framework, the European Union, together with the United Nations Economic Commission for Europe (UNECE), has launched the Active Ageing Index. The index creates a ranking order between 27 European countries. For each country, active ageing indicators from four domains are put together to make an overall country score. The four domains are: (1) employment of older people; (2) older people's participation in society; (3) independent, healthy and secure living; and (4) capacity and enabling environments for active ageing. The ranking order is explicitly meant to motivate governments to rethink and redesign their policies concerning the domains mentioned. The underlying idea is that governments, by implementing the right policy measures, do have the means to encourage, enhance and promote active ageing.

In my presentation, I tested this assumption by comparing the policies and their results in two fields of political action that are generally considered core aspects of active ageing: (1) the employment of older people and the transition into retirement, and (2) volunteer work. For each of these two fields, I first described the development and change of policy, and then looked at some empirical trends.

Suggestions on promoting Chinese aging policies are as follows:

- Strengthen the legal system. Policies in the form of administrative regulations, local regulations, departmental rules and documents at various levels should be in a more formal legal form to avoid arbitrariness.
- Integrate various target groups into one system. Chinese urban employees, urban residents, and rural people (who are currently covered in different old-age security and medical care insurance systems with different standards) should be integrated into the basic security system to guarantee equal rights for everybody.
- Set up a monitoring system for aging policies to ensure their efficiency and comparative stability.

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As to the field of employment of older people and the transition into retirement, we have witnessed a paradigmatic policy change during the 1990s and the 2000s. From the 1970s on, early retirement of older people had been the main goal of policy in this field. Unemployment regulation was generous for older workers, and pension regulation allowed workers to leave the labour market and go into early retirement at the age of 58. As a result of this policy, labour market participation rates were low among people aged 55 and older. From the 1990s on, the overall policy goal shifted to keeping older people on the labour market and prolonging working lives. Beginning with the pension reform of 1992, several pension reforms aimed to raise the standard pension age. In the 2000s, several measures of labour market policy were introduced in order to raise the labour market participation of older workers. Empirical data shows two obvious results of this policy change: since the 1990s, the percentage of people aged 55 to 65 being in employment as well as the average retirement age have continuously been rising.

Approximately in the same period, since the 1990s, a new policy field focusing on the enhancement of volunteer work developed in Germany; volunteer work has become more and more prominent on the political agenda; increasing volunteer work has been established as an overall policy goal; responsibilities and tasks have been assigned to political actors; and policy interventions and policy instruments to promote volunteer work have been developed. In addition, several programmes and campaigns have been launched to promote volunteer work especially of older people. Empirical data shows that the participation rates of older people in volunteer work have been rising since the end of the 1990s. However, there are good reasons to assume that the increase in the participation rates of older people in volunteer work is mainly due to the fact that the cohorts of people who have moved up into old age over the last 15 to 20 years are healthier, better educated and have better pensions than previous cohorts. Good health, high education and a sufficient income in old age are strong predictors for volunteer work of older people. Most scientific commentators agree that these long-term effects of health policy, educational policy and pension policy have a stronger impact on the level of volunteer work by older people than the political action in the newly developed field of volunteer work enhancement.

All in all, two conclusions can be drawn:

(1) The effect of policy is more obvious regarding the employment rates and the retirement age of older people than regarding the number of older people involved in volunteer work. This is not a big surprise, since there are now strong financial disincentives to leave the labour market early. Volunteer work for older people, since it is by definition voluntary, is not sanctioned by comparably strong incentives. As a consequence, the capacity of governments to influence volunteering is much lower than the capacity of governments to influence participation on the labour market.

(2) It seems that policy interventions from several policy fields have to concur and go hand in hand to be effective. The rising labour market participation rate of older workers and the rising retirement age is a combined effect of labour market policy and pension policy. And the rising participation rates of older people in the volunteer work sector are presumably more an effect of health policy, educational policy and pension policy than of the new policy on volunteer work.

What can be learned from this?

- If governments want to enhance active ageing in a certain field of political action (like volunteering or employment participation by older people) they should embark on an overall strategy combining measures in several policy fields.
- There are policies (like health policy or educational policy) that have a long-term effect over individual life courses, and there are policy inter-
ventions with a short-term effect (like introducing financial incentives to make people delay their retirement). Both kinds of policies have to be considered, but depending on the field of political action, either policy measures with a long-term effect or policy measures with a short-term effect may be more important.

- Obviously financial incentives are more effective than campaigns and motivational programmes.

How Have Japanese Social Policies Affected the Well-being of Older People?
Takeo Ogawa
Kumamoto Gakuen University, Japan

The Japanese population graph by age shows two age peaks. The first one is the post-war baby boomers (called dankai no sedai in Japanese) and the second one is their children’s generation. Therefore, from 2000 to 2010, short-term measures concerning the elderly targeted two age cohorts, the first being the baby boomer generation. Since these people are reaching retirement age, it is necessary to mitigate this retirement shock to the labour market. Therefore, under the mandatory retirement system, the Japanese government is promoting a strategy of a continuation of employment for the first baby boomer generation. The second target is people aged 65+ with higher life expectancy. Although most of these people are healthy, a long-term care system for increasingly frail elderly is needed. The Japanese government has not only adopted the public long-term care insurance system but has also implemented preventive health care policy. Moreover, active ageing strategies are required in order for older people who live longer and are healthy to be involved in society continuously. In the decade from 2000 to 2010, how did Japanese social policies affect the well-being of older persons?

In my presentation, I focused on people aged 50+ in 2000, cohorts that will be influenced not only by their ageing but also by social policies, with the aim of constructing and verifying three hypotheses. Firstly, assuming that the 50–54 age cohort is affected by the work/income policy in 2000–2010, their “value” in 2010 will be higher (or lower) than the value of the 60–64 age cohort in 2000. Secondly, assuming that the 65–69 age cohort is affected by the health/welfare policy in 2000–2010, their value in 2010 will be higher (or lower) than the value of the 75–79 age cohort in 2000. Thirdly, assuming that the 60–69 age cohort is affected by the involvement policy
in 2000–2010, their value in 2010 will be higher (or lower) than the value of the 70–79 age cohort in 2000. I then proceeded to evaluate these hypotheses based on governmental statistical data.

I was able to conclude that the continuous employment policies mitigated a little bit of the decline of the male boomer generation from 2000 to 2010; since then, these people have been satisfied with their income to a greater extent than their antecedent generation. The female boomer generation, on the other hand, is less satisfied than its antecedent generation. Health and long-term care policies for people aged 70+ have accomplished their aims from 2000 to 2010, except for people aged 65–69; nevertheless, older people still worry about health even today. Volunteerism in people aged 60–64 was promoted a little bit in the younger old; and although the involvement level of the antecedent generation cannot be maintained, they nonetheless do not worry about their later life. In addition, they will be contributing to a sense of fullness in life within a decade. Therefore, it can be said that the well-being of Japanese older persons has reached its culmination point today.

Therefore, the government should rather focus on the working younger generations, who have unstable lives. This is the reason why the General Principles Concerning Measures for the Aged Society (http://www8.cao.go.jp/kourei/measure/taikou/etaikou.htm) in 2012 added one more basic measure – the construction of an infrastructure for all generations.

In order to promote the well-being of older people, Japanese policy makers should focus on the following strategies:

(1) Improvement of women’s situation – for example, a labour and housekeeping (work-life balance) policy.

(2) Improvement of workers’ situation – for example, a work sharing between generations policy.

(3) Improvement of affordable health and social services – for example, a policy of moderating the abnormal acceleration of the myth of health.

(4) Improvement of life-time utilization – for example, a policy of harmonization between the paid and unpaid volunteers and workers.
DAY 3: FRIDAY, OCTOBER 25
14:00–17:00 Visit to Zhongyi Aging Development Center
German Institute for Japanese Studies Tokyo (DIJ)
(德国日本研究所)
The DIJ was established in 1988 and is dedicated to investigating contemporary Japan, its economy, society, politics and culture. It belongs to the Max Weber Foundation, which is funded by the German Ministry of Education and Research. The DIJ independently sets its own research agenda. By investigating the economy, society, politics and culture of contemporary Japan, the DIJ seeks to advance knowledge about Japan and contribute to mutual understanding. The DIJ also sees itself as an “on-site” centre for research on Japan, actively involved in international cooperation.
www.dijtokyo.org

Institute of Population and Labor Economics (IPLE),
Chinese Academy of Social Sciences (CASS), Beijing
(中国社会科学院人口与劳动经济研究所)
The IPLE-CASS was established in 1980 and conducts research projects in the areas of demography, labour economics, social security theories and questions of population and labour employment. Research interests include demographic theories, demographic policy, demographic economics, labour economics, labour and social security, employment and human resources, demography and social development, demographic statistics, ageing society, migration and urbanization, and demographic history.
http://iple.cass.cn/

German Centre of Gerontology (DZA), Berlin
(德国老年学研究中心)
The DZA is a leading research institute in the fields of social and behavioural ageing with a focus on the investigation of the living arrangements, life situations and lifestyles of ageing people in the societal and policy context. Research projects are conducted on topics such as “work and retirement”, “economy of old age”, “health and social care”, “family and social relations” and “societal participation”. The DZA is funded by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth.
www.dza.de

The workshop was supported by the Stiftung Mercator Foundation.