



Centre for Research on Ageing, Health & Wellbeing

Symposium Session:

Ageing in Asia

Thursday 31 October 2019

3:30pm – 5:30pm, light refreshments served on arrival

Bob Douglas Lecture Theatre, Building 62A (entrance on Eggleston Road)



Prof Shane Thomas



Prof Colette Browning



Dr Cathy Gong



Dr Vasoontara Yiengprugsawan

This session brings together a series of multidisciplinary research which investigates lifecourse determinants of health and wellbeing in later life, chronic illness patterns and risk factors, and health system responses in the context of population ageing in Asia.

Symposium Agenda

3:30 pm	Registration and afternoon tea
4:00 pm	Prof Shane Thomas - The Happy Life Club: A Pragmatic Cluster Randomized Controlled Trial of a Health Coach Intervention for the Management of Individuals With Type 2 Diabetes Mellitus in China
4:30 pm	Prof Colette Browning - Food, Eating, and Happy Aging: The Perceptions of Older Chinese People
4:50 pm	Dr Cathy Gong - Does education and interrupted work experience help to explain why childhood health is related to later life quality in China
5:10 pm	Dr Vasoontara Yiengprugsawan - Investigating the role of primary health care and chronic care management: findings among older people in Sri Lanka and Thailand



INTERNATIONAL ALLIANCE OF
RESEARCH UNIVERSITIES

Centre for Research on Ageing, Health & Wellbeing

Symposium Session:

Ageing in Asia

Abstract: Frontiers in Public Health - Special Issue in Chronic Illness in China

<https://www.frontiersin.org/research-topics/7544/chronic-illness-and-ageing-in-china>

This special issue was funded by the Australian Research Council Discovery Project (DP160103023) and the International Primary Health Care Research Institute San Ming Program in Shenzhen.

China's population is ageing and, like many countries, the major disease burden is chronic illnesses. Today, life expectancy in China is 76 years, an increase in 17 years since 1970. In 2016, 10.8% of the population were aged 65 years and over and by 2050 this will increase to 25%. China's population is ageing more rapidly than other countries. In China those aged 65 years and over will grow from 7% to 14 % in a period of 26 years, compared to Australia which took 73 years, and the US which took 69 years to achieve this growth. Closely linked to the shift in ageing profile is the transition in health, involving a progressive shift in the burden of disease away from communicable disorders and injuries to chronic non-communicable diseases. Almost 80% of all deaths in people living in China aged 60 years or over are attributable to chronic non-communicable disease. The chance of dying prematurely in China from non-communicable diseases is double that of other countries. In people aged 60 years and over in China the main diseases contributing to burden are ischaemic heart disease, stroke, chronic obstructive pulmonary disease, and diabetes. Behavioural risk factors such as smoking, alcohol consumption, sedentary behaviour, insufficient dietary intake, and high body mass index contribute significantly to the prevention and management of these conditions. Population ageing has a major impact on the numbers of people with at least one chronic illness.

The purpose of this Research Topic was to examine: chronic illness patterns and health system responses in the context of population ageing in China; behavioural risk factors in the prevention and management of chronic illnesses; workforce requirements to address chronic illness prevention and management; and health and primary health care policy responses to population ageing and the burden of disease in China.

The presentation provides an overview of the work published in the special issue (including the first three presentations of this session) and its implications for research, policy and practice.

Symposium Contributors

Professor Shane Thomas

Professor Shane Thomas is Director of the International Primary Health Care Research Institute in Shenzhen China and Honorary Professor at the Research School in Population Health at ANU and Honorary Professor at Peking University. Professor Thomas' work focusses on psychological determinants of health, chronic illness and public health services. He has authored 300 publications and has supervised 50 PhD students to completion. His work has achieved high academic citations and significant translation into policy and practice in the UK, Australia, Saudi Arabia and China. He has led international engagement at University and Faculty levels and the administration of research programs at the University, Faculty, School and Institute levels.

Abstract - The Happy Life Club: A Pragmatic Cluster Randomized Controlled Trial of a Health Coach Intervention for the Management of Individuals with Type 2 Diabetes Mellitus in China

The aim of this research was to investigate the effects of a health coach intervention for the management of glycaemic control, as well as physiological, psychological and self-care outcomes of patients with type 2 diabetes mellitus (T2DM), compared with usual care.

A pragmatic cluster RCT was conducted in the Fengtai district of Beijing. Forty-one community health stations (CHSs) were cluster randomized (stratified geographically, 1:1 ratio) and eligible, randomly selected T2DM patients were sequentially contacted by CHSs. Control participants received usual care according to the Chinese Guideline for Diabetes Prevention and Management. Intervention participants received 18-months of health coaching based on principles of Motivational Interviewing (MI) plus usual care. Medical and pathology fees were waived for both groups. Outcome assessment was performed at baseline, 6, 12, and 18-months. The primary outcome was glycated haemoglobin (HbA1c); secondary outcomes encompassed a suite of physiological, psychological and self-care measures. Strong clinical improvements were found in both groups with stronger effects in the intervention group. The reasons for this pattern of results are discussed as are the implications for the control and reduction of chronic illness in China and globally.

Professor Colette Browning

Professor Browning is Professor of Healthcare at Federation University, Honorary Professor at the Research School in Population Health at ANU and Honorary Professor at Peking University. She is a recognised national and international leader in psychology and health. Her research is focussed on healthy ageing and improving quality of life for older people, chronic disease self-management and consumer involvement in health care decision-making. Professor Browning has contributed to formulation of national and regional policy in Australia and China and her research informs policy and public health and clinical practice in the areas of ageing and primary health care. She has a strong interest in research capacity building and research training and has held senior leadership positions in these areas at top ranked universities.

Abstract – Food, Eating, and Happy Ageing: The Perceptions of Older Chinese People

China's government has for a long time focused on food security for its population. Many older people in China have lived in times when food security was not stable. Thus, while food has a central position in Chinese culture for all Chinese people, it is of particular pertinence to older people. This research examined the meaning of food and eating in the lives of older Chinese people in China and how it contributes to healthy, thus happy aging. Focus groups and qualitative interviews were used in this study. Participants were recruited from the rural Yongfu Province of Southwest China, and Fangzhuang and Haidan districts in Beijing. Forty-two participants were recruited aged 62–83 years of age. Two major themes emerged—the quantity of food and the quality of food required to have a happy old age. Participants discussed the desire to eat “until you are full” because of their experiences of famine during childhood. The high cultural importance of food for older Chinese in China was confirmed in this study. The food-related life experiences of older Chinese in China are quite different from younger Chinese and health promotion messaging needs to be informed by these unique perspectives in order to maximize its effectiveness.

Dr Cathy Gong

Dr Cathy Gong is a Research Fellow at the Centre for Research on Ageing, Health and Wellbeing (CRAHW) at ANU and an Associate Investigator (AI) at the ARC Centre of Excellence in Population Ageing Research (CEPAR). She has a PhD in Applied Economics and had been previously working as a Research Fellow at NATSEM, University of Canberra, and an Assistant Director at DEEWR and a Statistician/Assistant Director at National Bureau of Statistics of China.

She has contributed primarily to the CEPAR and ARC discovery projects on healthy and productive ageing. She has published in the top journals in the areas of population health, ageing, economics and social science, such as Social Science and Medicine (SSM) Population Health, BMC Health Services Research, Journal of Aging and Health, the Review of Income and Wealth, Journal of Population, Space and Place etc. Her research has strong policy impacts in promoting health, productivity and wellbeing.

Abstract – Does education and interrupted work experience help to explain why childhood health is related to later life quality in China

Background: China is experiencing rapid population aging. How to make sure prolonged longevity is accompanied by good quality of life needs to be investigated.

Methods: This study uses the China Health and Retirement Longitudinal Study (CHARLS) 2013 survey data to examine how different measures of later life quality are influenced by childhood health and how these relationships could be mediated by education, interrupted work experience and other social economic factors. CHARLS is a most recently available nationally representative longitudinal survey of older people in China aged 45 years and over with retrospective information on childhood health collected among more than 18, 000 individuals in 150 districts and 450 villages.

Results: The findings indicate that childhood health is significantly associated with different measures of later life quality, with education and interrupted work experience being the significant and important mediators.

Conclusion: The results can inform actions to improve life-long social and health equity by enhancing equal access to education and health resources and improving life-long continuous labour force participation, especially for vulnerable groups.

Dr Vasoontara Yiengprugsawan

Dr Vasoontara Yiengprugsawan is a Fellow at the ANU Centre for Research in Ageing, Health and Wellbeing and the Australian Research Council Centre of Excellence in Population Ageing Research. Over the past 15 years, her research focuses on lifecourse determinants of health and wellbeing, equity access to universal health care, and the role of primary health care and non-communicable diseases in Asia. She previously contributed to over a decade of the Thai Health-Risk Transition: A National Cohort Study, held a fellowship from the World Health Organization Asia-Pacific Observatory on Health Systems and Policies, and coordinated input for the ARC Discovery Project on ageing and health in China and Australia. Dr Yiengprugsawan has established collaborative research network in China, Malaysia, Sri Lanka, Thailand, and Vietnam. She completed postgraduate study in international development and was awarded a PhD in epidemiology, economics, and population health.

Abstract - Investigating the role of primary health care and chronic care management: findings among older people in Sri Lanka and Thailand

Health services are facing rapid growth in the numbers of older people and in rates of non-communicable diseases (NCDs). This study investigates the role of primary health care in addressing health needs of older persons in two selected middle-income countries in Asia – Thailand and Sri Lanka. Semi-structured interviews were conducted with physicians, health managers and patients by a senior Ministry of Health official in each country covering policies, current practices, and challenges. Sri Lanka has been strengthening primary health care, with NCD screening carried out in nearly 800 Healthy Lifestyle Centres established from 2011 onwards in sub-district hospitals. While the country is relatively well-supplied with health professionals, their services are still not yet reoriented to older patients. Thailand has successfully implemented the Universal Health Coverage in 2002 and primary health has played fundamental roles in preventing and monitoring NCDs among middle-aged and older adults. Thailand is in the process of integrating community-based health and social care for its elderly people with additional training for health professionals and volunteers in primary health centres. Both country case studies highlight the importance of improved continuity of care between primary and secondary health services and further training for healthcare professionals in servicing older population.