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### Research Article

# Current State of Research on Social Exclusion in Asia and the Pacific: Focus on Ageing, Gender and Social Exclusion

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#### Abstract

This paper reviews the contemporary literature on social exclusion in Asia and the Pacific with special emphasis on ageing, gender inequality, and the institutional weaknesses that link the two. The central argument is that social exclusion in the region is not a single deprivation but a layered process involving inadequate pensions, informal employment, weak long-term care systems, social isolation, and unequal gender relations across the life course. The paper places India within the wider regional pattern and uses comparative tables to show how pension coverage, elderly poverty, gender gaps, and social protection efforts vary across Asian economies. It also retains the econometric analysis of elderly poverty and poverty gaps, showing that broader pension coverage and higher social protection spending are associated with lower old-age deprivation. The review finds that older women face the sharpest risks because labour-market exclusion, unpaid care work, lower earnings, and weaker pension entitlements accumulate over time. The paper concludes that inclusive ageing in Asia-Pacific requires stronger non-contributory and contributory protection, gender-responsive policy design, and sustained investment in care, health, and community support.

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**KEYWORDS:** social exclusion, ageing, gender inequality, Asia-Pacific, social protection, elderly poverty.

## 1. INTRODUCTION

The Asia-Pacific region is experiencing increasing ageing, accompanied by significant inequality, workforce informality, and inconsistent social protection. This amalgamation renders social exclusion a core developmental concern rather than a peripheral societal issue. In accordance with the comprehensive definition provided by the Asian Development Bank and the subsequent analytical efforts of Cuesta et al., social exclusion can be defined as the processes that inhibit individuals or groups from fully engaging in economic, social, political, and cultural activities (ADB, 2005; Cuesta et al., 2024). In the Asia-Pacific region, exclusion is particularly evident among older individuals and women, whose disadvantages frequently compound over time and become more pronounced in later life. The regional demographic shift imparts exceptional importance to this issue. UNFPA and ESCAP indicate that the region is transitioning to an increasingly aged demographic, despite numerous nations lacking developed pension systems, universal healthcare provisions, and reliable economic security for informal sector workers (UNFPA Asia-Pacific Regional Office, 2024; ESCAP, 2024). The issue lies not solely in numerical ageing, but in the disparity between increased life expectancy and the inadequate institutional ability to facilitate dignified ageing. Significant populations are ageing without guaranteed pensions, dependable health insurance, or available long-term care. The magnitude of the problem is considerable. Recent global estimates indicate that around one-third of the global population experiences some degree of social exclusion, with South Asia and East Asia-Pacific comprising a significant portion of this total (Cuesta et al., 2024). Consequently, the regional ageing transition should be viewed not alone as a demographic shift, but as a challenge to determine if economic progress in Asia can be transformed into social security, equitable citizenship, and dignity in later life. This concise study examines the interplay of exclusion via age and gender, explores the disproportionate costs faced by older women, and identifies potential policy implications derived from the research.

## 2. Conceptual Lens and Regional Context

A beneficial approach to engaging with literature is through a holistic perspective. Social exclusion cannot be solely equated with income poverty, although poverty is one of its most evident consequences. It encompasses precarious labour-market engagement, absence of pension entitlements, restricted access to resources, diminished agency, inadequate mobility, isolation, discrimination, and inequitable social acknowledgement. In Asia, these factors are intricately linked since labour informality, familial welfare systems, and inconsistent governmental capacity mutually reinforce each other (ADB, 2005; ESCAP, 2024). A life-course perspective is of

comparable significance. Women engaged in prolonged unpaid caregiving or low-wage informal jobs enter later life with diminished savings, poorer pension contributions, and increased reliance on familial assistance. When conventional support structures are undermined by migration, urbanisation, and smaller households, prior disadvantages manifest as economic insecurity and social isolation in old age (Monash University, 2025; Asian Women's Resource Exchange, 2020). This viewpoint elucidates why older women always appear as the most vulnerable demographic in the regional findings. The regional context is significant as Asia is experiencing ageing under conditions markedly different from those that influenced ageing in numerous advanced Western economies. Several Asian nations are ageing before establishing comprehensive welfare systems. This accelerated shift heightens the danger that poverty among the elderly, deficiencies in care, and disparities in service access may expand rather than diminish unless public policy adapts swiftly (ADB, 2023).<sup>3</sup> Ageing, Poverty, and Exclusion in Asia-Pacific.

### 3.1 India in Regional Perspective

India is a particularly significant issue because of its rapid demographic ageing, coupled with consistently low formal pension participation. UNFPA India forecasts that in 2022, around 149 million individuals aged 60 and older constituted 10.5 per cent of the population, with projections indicating an increase to 20.8 per cent by 2050 (UNFPA, 2023). The pension framework remains superficial. Mercer and the CFA Institute position India near the lowest tier of their global pension index, while governmental old-age assistance remains limited and highly fragmented (Mercer & CFA Institute, 2025; NIPFP, 2019). The issue encompasses not only insufficient coverage but also inadequate adequacy. The original paper indicates that a significant proportion of elderly Indians receive no income support from public expenditure, and that the central NSAP pension is exceedingly inadequate in relation to fundamental subsistence requirements. Despite the existence of pension support on paper, its purchasing power may be insufficient to avert destitution. The differentiation between nominal inclusion and substantive security is essential for a comprehensive evaluation of elderly welfare in India. India also illustrates how ageing and gender intersect. Women form a slight majority of the elderly population, yet pension receipt remains lower for women than for men, and the gap becomes much sharper in some states. State-level evidence cited in the original paper shows that the difference in old-age pension coverage can be extremely wide, even where elderly women are more likely to live alone. The people facing greater exposure to isolation are therefore often those with weaker access to income support as well (NewsClick, 2022; IIPS, 2021).

Table 1. Pension Coverage Rates in Selected Asia-Pacific Economies (2021-2024)

| Country/Territory | Coverage (% of population 15-64) | Coverage (% of labour force) | Pension system index score |
|-------------------|----------------------------------|------------------------------|----------------------------|
| Singapore         | 69.3%                            | 84.6%                        | 78.7                       |
| Hong Kong (China) | 90.8%                            | 120.6%                       | 69.4                       |
| Malaysia          | 32.8%                            | 47.2%                        | 53.0                       |
| Thailand          | 83.0%                            | 95.0%                        | 47.0                       |

|                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| Indonesia                     | 16.5%                         | 22.0%                         | 51.0                          |
| Philippines                   | 55.5%                         | 92.4%                         | 48.5                          |
| Pakistan                      | 6.6%                          | 12.4%                         | 44.2                          |
| India                         | 18.5%                         | 24.5%                         | 43.8                          |
| OECD countries for comparison | OECD countries for comparison | OECD countries for comparison | OECD countries for comparison |
| Australia                     | 95.6%                         | 117.2%                        | 73.5                          |
| Japan                         | 91.4%                         | 98.9%                         | 65.3                          |
| Korea                         | 60.3%                         | 78.3%                         | 51.0                          |

Source: Compiled from OECD (2024), Mercer & CFA Institute (2025), and Statista (2024).

Table 1 also reveals that the Asia-Pacific is not characterised by a single pension regime. A small group of economies, such as Hong Kong, Singapore, and Thailand, shows relatively broad coverage, while countries such as India, Pakistan, and Indonesia remain far below that level. This internal diversity matters because it shows that weak old-age protection is not an unavoidable regional trait. Different policy choices have already produced very different outcomes within Asia itself. The policy question is therefore not whether pension expansion is possible, but how quickly countries with shallow systems can build wider and more reliable inclusion.

### 3.2 Elderly Poverty, Pension Gaps, and Labour-Market Insecurity

The regional evidence is clear: old-age poverty in many Asian countries is not simply a mirror of general poverty; it is often

substantially higher. Table 2 shows that South Korea, Taiwan, Australia, India, and China all record elderly poverty rates above the poverty rate for the population as a whole. The contrast with several Western countries is striking because the elderly poverty gaps there are much narrower. This pattern strongly suggests that pension design and social expenditure, not national income alone, shape whether population ageing leads to old-age insecurity (CIGS, 2023; IARIW, 2025; NIPFP, 2019).

The social meaning of these poverty gaps is important. Higher elderly poverty indicates that labour-market exit is not being matched by adequate replacement income. Where retirement is unsupported, older people remain dependent on precarious work, family transfers, or debt. In countries with large informal sectors, this dependency can continue well into advanced age.

Table 2. Elderly Poverty Rates and Comparison with the General Population

| Country                          | General poverty rate (%)         | Elderly (65+) poverty rate (%)   | Poverty gap (percentage points)  |
|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
| South Korea                      | 16.1%                            | 47.2%                            | +31.1                            |
| Taiwan                           | 10.0%                            | 26.0%                            | +16.0                            |
| Australia                        | 12.6%                            | 26.5%                            | +13.9                            |
| India                            | 21.9%                            | 32.8%                            | +10.9                            |
| China                            | 21.0%                            | 27.0%                            | +6.0                             |
| Japan                            | 16.1%                            | 19.0%                            | +2.9                             |
| Western countries for comparison | Western countries for comparison | Western countries for comparison | Western countries for comparison |
| United States                    | 17.8%                            | 23.0%                            | +5.2                             |
| Denmark                          | 12.0%                            | 12.5%                            | +0.5                             |
| Germany                          | 14.8%                            | 15.5%                            | +0.7                             |
| Italy                            | 20.0%                            | 20.3%                            | +0.3                             |

Source: Compiled from CIGS (2023), IARIW (2025), UNFPA (2023), and NIPFP (2019).

Gender deepens this problem. Across major Asian economies, women generally have lower pension coverage than men, and the gap is especially wide in Vietnam, Korea, China, Indonesia, and parts of India. These differences do not arise at retirement; they are produced across the life course through informal work,

interrupted employment, lower wages, and unpaid care obligations. Table 3, therefore, captures a cumulative process rather than a merely administrative difference (World Bank, 2016; ILO, 2021; IIPS, 2021).

Table 3. Gender Gaps in Pension Coverage by Country

| Country                  | Male pension coverage (%) | Female pension coverage (%) | Gender gap (percentage points) |
|--------------------------|---------------------------|-----------------------------|--------------------------------|
| Thailand                 | 85%                       | 82%                         | -3                             |
| China (weighted average) | 88%                       | 76%                         | -12                            |
| Vietnam                  | 45%                       | 28%                         | -17                            |
| Korea                    | 52%                       | 35%                         | -17                            |
| Indonesia                | 22%                       | 12%                         | -10                            |
| Malaysia                 | 36%                       | 32%                         | -4                             |
| India                    | 31.4%                     | 26.3%                       | -5.1                           |

Source: Compiled from World Bank (2016), ILO (2021), LASI/IIPS (2021), and NewsClick (2022).

Replacement rates tell a similar story. Even where pension systems are more institutionalised, women often retire with lower effective income security than men. Table 4 shows that. The gap is particularly large in Hong Kong, Korea, Pakistan,

and, in schematic terms, India. Lower replacement rates mean that exclusion continues even among beneficiaries, because entitlement does not necessarily translate into adequate income. The quality of coverage matters as much as its extent (OECD,

2024; NIPFP, 2019). The paper also notes that among older persons who continue working beyond age 65, the overwhelming majority remain in the informal sector. This is a reminder that late-life labour-force participation in the region is frequently a sign of necessity rather than active ageing

by choice. When pensions are weak, work in old age becomes a survival strategy.

**Table 4.** Gross Pension Replacement Rates by Gender in Selected Asian Economies

| Country                       | Retirement age                | Male full-career rate (%)     | Female full-career rate (%)   | Gender gap                    |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| Philippines                   | 60                            | 75.8%                         | 72.4%                         | -3.4%                         |
| Singapore                     | 65                            | 61.7%                         | 57.6%                         | -4.1%                         |
| Vietnam                       | 62 (60)                       | 58.7%                         | 59.4%                         | +0.7%                         |
| Indonesia                     | 65                            | 53.5%                         | 50.6%                         | -2.9%                         |
| Hong Kong (China)             | 65                            | 59.2%                         | 41.5%                         | -17.7%                        |
| Thailand                      | 55                            | 45.3%                         | 41.5%                         | -3.8%                         |
| Malaysia                      | 55                            | 38.0%                         | 37.8%                         | -0.2%                         |
| Pakistan                      | 60                            | 42.5%                         | 29.8%                         | -12.7%                        |
| India (schematic)             | 60                            | 32.0%                         | 24.5%                         | -7.5%                         |
| OECD countries for comparison | OECD countries for comparison | OECD countries for comparison | OECD countries for comparison | OECD countries for comparison |
| Japan                         | 65                            | 43.3%                         | 32.4%                         | -10.9%                        |
| Korea                         | 65                            | 47.6%                         | 31.2%                         | -16.4%                        |
| Australia                     | 67                            | 45.8%                         | 42.3%                         | -3.5%                         |

Source: Compiled from OECD (2024) and NIPFP (2019).

### 3.3 Social Isolation, Care Deficits, and Service Access

Economic exclusion is only one part of the ageing question. The literature reviewed in the original paper shows that older persons in Asia also face social isolation, loneliness, and weakening family support structures. Migration, urbanisation, declining fertility, and shrinking household size have reduced the reliability of traditional co-residence arrangements, especially in rural areas. Where the state has not built strong community care and long-term care systems, this creates a care gap that leaves older people dependent on fragile informal support (Tan, Loh, & Hu, 2021; ADB, 2023).

Service access is unequally distributed as well. Rural elderly populations frequently face lower pension coverage, weaker transport, fewer health services, and limited institutional care. These disadvantages are cumulative because poor health, weak mobility, and low income reinforce one another. In that sense, social exclusion in old age is spatial and relational, not merely financial (ADB, 2024; ASEAN Magazine, 2024).

The review also points to the value of intergenerational and community-based programmes. Such interventions do not replace income support, but they can reduce loneliness, improve well-being, and restore social participation. Their significance lies in recognising that inclusion is not only a matter of transfers from the state; it is also a matter of belonging, voice, and everyday connectedness.

## 4. Gendered Social Exclusion across the Life Course

### 4.1 Labour, Care, Violence, and Old-Age Vulnerability

The gender literature elucidates that the exclusion of the elderly cannot be comprehended without considering women's prior life experiences. Throughout the Asia-Pacific region, women allocate significantly more time than men to unpaid caregiving and home responsibilities, are more prone to leave or pause their paid career, and are disproportionately represented in low-

wage and informal occupations. These practices diminish present earnings and undermine future pension entitlements. By the time women enter older life, labour market disparities have already transformed into pension disparities and increased poverty risk (ESCAP, 2024; Asian Women's Resource Exchange, 2020). This care penalty has broader implications beyond retirement income alone. Reduced ownership over assets, diminished inheritance rights, restricted access to credit, and limited engagement in formal labour markets undermine women's negotiating strength throughout their lives. In advanced age, these structural disadvantages may manifest as dependency, deteriorating health, and diminished capacity to manage widowhood, illness, or domestic disruption. Gender-based violence and discriminatory practices exacerbate these consequences. The cited literature in the original paper indicates that older women may experience neglect, abuse, and diminished legal recognition, particularly in contexts where familial assistance is regarded as a private issue rather than a public one. In these contexts, economic dependency, violence, and social isolation mutually reinforce each other. The outcome is an intersectional disadvantage where age does not supplant gender injustice but rather exacerbates it (Asia Pacific Regional Civil Society Engagement Mechanism, 2024; ARROW, 2020).

### 4.2 Social Protection Architecture and Gender Gaps

These life-course inequalities are reflected in the structure of social protection itself. Table 5 shows that the Asia-Pacific region spends less on social protection than the global average and leaves large parts of the population without effective coverage. Southern and Southeast Asia are especially exposed. In countries where coverage is tied tightly to formal wage employment, women are systematically disadvantaged because they are less likely to spend a full working life in stable, contributory employment (ILO, 2024; ESCAP, 2024).

**Table 5.** Social Protection Expenditure and Coverage in Asia-Pacific

| Region/Category        | Social protection spending (% GDP) | Coverage gap (male-female) | Population without coverage |
|------------------------|------------------------------------|----------------------------|-----------------------------|
| Asia-Pacific (average) | 11.8%                              | 6.8 points                 | 46.4%                       |

|                           |                           |                           |                           |
|---------------------------|---------------------------|---------------------------|---------------------------|
| Southern Asia             | 5.8%                      | 11.1 points               | 64.6%                     |
| Southeast Asia            | 6.2%                      | 8.5 points                | 54.1%                     |
| Eastern Asia              | 14.5%                     | 4.2 points                | 21.5%                     |
| India                     | 8.5%                      | 11.0 points               | 51.2%                     |
| OECD (comparison)         | 16.4%                     | 2.1 points                | 12.8%                     |
| Global average            | 19.3%                     | 5.4 points                | 47.3%                     |
| Selected country examples | Selected country examples | Selected country examples | Selected country examples |
| China                     | 12.5%                     | 12.0 points               | 35.2%                     |
| Thailand                  | 7.8%                      | 3.0 points                | 17.0%                     |
| Indonesia                 | 2.8%                      | 10.0 points               | 78.0%                     |
| Pakistan                  | 1.5%                      | 15.2 points               | 87.6%                     |

Source: Compiled from ILO (2024), ESCAP (2024), NIPFP (2019), and Mercer & CFA Institute (2025).

The spending figures also help explain why demographic ageing produces such uneven outcomes across the region. Where social protection efforts are low, households are forced to absorb much more of the risk associated with ageing, illness, widowhood, and income loss. That burden is rarely shared equally within the household. Women often provide the unpaid care and then enter old age with fewer resources of their own. In this sense, low public spending does not simply indicate fiscal restraint; it redistributes welfare responsibility back to families in ways that frequently deepen gender inequality. Table 6 complements this picture by showing how limited social protection efforts are distributed across social insurance, pensions, and social assistance. The implication is important for policy design: where contributory systems remain narrow, non-

contributory social pensions become indispensable for older women, widows, informal workers, and persons with fragmented employment histories. Adequacy, however, remains a serious problem. Coverage without meaningful benefit levels cannot by itself eliminate exclusion (ADB, 2019; ILO, 2024; NIPFP, 2019). This is why social pensions matter from a gender perspective. Because they do not depend on continuous formal employment, they can reach women whose work histories were shaped by unpaid care or irregular earnings. In several Asian countries, social pensions already constitute a significant share of overall old-age support. Yet the policy lesson is not simply to create such schemes; it is to finance them at levels that actually reduce vulnerability.

Table 6. Social Protection Components as a Percentage of GDP

| Component                    | Asia-Pacific (25 countries) | % of GDP | Share of total social protection |
|------------------------------|-----------------------------|----------|----------------------------------|
| Total social protection      | 25 countries                | 8.0%     | 100%                             |
| Social insurance             | 25 countries                | 5.8%     | 72.5%                            |
| Pensions                     | 25 countries                | 3.5%     | 43.8%                            |
| Social assistance            | 25 countries                | 2.2%     | 27.5%                            |
| India (breakdown)            |                             |          |                                  |
| Total social protection      | India                       | 8.5%     | 100%                             |
| Social insurance             | India                       | 4.8%     | 56.5%                            |
| Pensions                     | India                       | 2.4%     | 28.2%                            |
| Social assistance            | India                       | 3.7%     | 43.5%                            |
| Selected country comparisons |                             |          |                                  |
| China total                  | China                       | 12.5%    | 100%                             |
| Thailand total               | Thailand                    | 7.8%     | 100%                             |
| Indonesia total              | Indonesia                   | 2.8%     | 100%                             |

Source: Compiled from ADB (2019), ESCAP (2024), ILO (2024), and NIPFP (2019).

The original table also reports a projected poverty effect from higher investment: if Asia-Pacific were to match the global social protection spending level of 19.3 per cent of GDP, about 328 million people could be lifted from moderate poverty and around 52 million from extreme poverty. This estimate is retained here as a note rather than repeated across table cells.

## 5. Econometric Evidence on Elderly Poverty

### 5.1 Model Design

The original paper supplements the review with a cross-country OLS exercise using 18 observations. Two relationships are tested. First, whether higher pension coverage is associated with lower elderly poverty after controlling for GDP per capita and elderly population share. Second, whether greater social protection spending is associated with a smaller gap between elderly poverty and general poverty, controlling for the gender pension gap and urbanisation. Although simple, the exercise is

useful because it links the comparative descriptive material to a transparent quantitative framework.

### Model 1: Determinants of Elderly Poverty Rate

$$ElderlyPoverty_i \beta_0 + \beta_1 PensionCoverage_i \beta_2 GDPperCapita_i + \beta_3 ElderlyShare_i + \epsilon_i$$

#### Where:

- $ElderlyPoverty_i$  = Poverty rate among the population aged 65+ in the country  $i$
- $PensionCoverage_i$  = Percentage of elderly receiving pension benefits
- $GDPperCapita_i$  = GDP per capita (PPP, thousands USD)
- $ElderlyShare_i$  = Percentage of population aged 65+
- $\epsilon_i$  = Error term

**Model 2: Poverty Gap Analysis**

$$PovertyGap_i = \gamma_0 + \gamma_1 SocialProtection_i + \gamma_2 GenderGap_i + \gamma_3 UrbanizationRate_i + v_i$$

**Where:**

- $PovertyGap_i$  = Difference between elderly and general poverty rates (percentage points)
- $SocialProtection_i$  = Social protection expenditure as % of GDP

- $GenderGap_i$  = Male-female pension coverage gap (percentage points)
- $UrbanizationRate_i$  = Percentage of population in urban areas
- $v_i$  = Error term

**5.2 Regression Results and Interpretation**

**Table 7.** OLS Regression Results: Determinants of Elderly Poverty

| Variable                      | Model 1<br>(Elderly Poverty) | Std. Error | Model 2<br>(Poverty Gap) | Std. Error |
|-------------------------------|------------------------------|------------|--------------------------|------------|
| Constant                      | 45.23***                     | (4.15)     | 28.67***                 | (3.82)     |
| Pension Coverage (%)          | -0.384***                    | (0.082)    | --                       | --         |
| Social Protection (% GDP)     | --                           | --         | -1.523***                | (0.341)    |
| GDP per capita (PPP, \$1000s) | -0.512**                     | (0.189)    | -0.287*                  | (0.142)    |
| Elderly Share (%)             | 0.867*                       | (0.423)    | 0.645**                  | (0.238)    |
| Gender Pension Gap (p.p.)     | --                           | --         | 0.421**                  | (0.156)    |
| Urbanisation Rate (%)         | -0.092                       | (0.087)    | -0.148*                  | (0.073)    |
| Observations                  | 18                           |            | 18                       |            |
| R-squared                     | 0.742                        |            | 0.681                    |            |
| Adjusted R-squared            | 0.701                        |            | 0.633                    |            |
| F-statistic                   | 18.34***                     |            | 14.21***                 |            |

Source: Compiled from OECD (2024), ILO (2024), and UNFPA India (2023).

India-specific fitted values reported in the original analysis remain informative. With pension coverage of about 25 per cent, GDP per capita of roughly \$9,000 PPP, and an elderly share of 10.5 per cent, Model 1 predicts an elderly poverty rate of about 32.9 per cent, which is very close to the observed value of 32.8 per cent. The paper also reports an observed elderly-general poverty gap of +10.9 percentage points and a Model 2 fitted value of about 21.2 per cent for India, highlighting the extent of the country's protection challenge.

The results support both expectations. Pension coverage has a statistically significant negative association with elderly poverty, while social protection spending has a statistically significant negative association with the elderly-general poverty gap. GDP per capita also reduces deprivation, but its coefficient is smaller than the pension and social protection effects, which suggests that economic growth alone does not protect older persons unless institutional channels translate growth into social security. Countries can therefore grow without ageing inclusively.

The signs on the elderly share and gender pension gap are equally revealing. A larger elderly population is associated with higher pressure on poverty outcomes, while a wider male-female pension gap is associated with a wider elderly poverty gap. This is consistent with the broader literature: the feminisation of ageing means that gender bias inside pension systems has aggregate consequences for old-age poverty.

India's predicted value in Model 1 is very close to the observed elderly poverty rate reported in the paper, which gives the

Exercise some descriptive credibility. Using the estimated coefficients, the paper shows that if India expanded pension coverage from about 25 per cent to the ASEAN average of 40 per cent, elderly poverty could fall by roughly 5.8 percentage points. Matching Thailand's level of coverage would imply a much larger reduction. Similarly, raising social protection spending toward the global average would sharply narrow the poverty gap between the elderly and the general population. These are simulations rather than causal forecasts, but they clarify the scale of the policy margin.

The econometric section is therefore valuable not because it settles the debate, but because it shows that the descriptive patterns visible in the regional tables are consistent with a broader statistical relationship. Pension coverage, benefit effort, and gender equality in access to protection are not separate policy themes; they are empirically linked components of old-age welfare.

**5.3 Comparative Reading: India and China**

The India-China comparison provides a useful regional benchmark. China is older than India, yet Table 8 indicates that it has achieved broader pension coverage and lower elderly poverty. The contrast suggests that demographic ageing by itself does not determine exclusion outcomes. Institutional depth matters. Higher pension reach, greater social protection effort, and stronger integration of old-age support reduce vulnerability even in more advanced ageing contexts.

**Table 8.** India-China Comparative Indicators

| Indicator                        | India | China       | Difference |
|----------------------------------|-------|-------------|------------|
| Elderly population (% 2024)      | 10.5% | 16.1%       | +5.6 p.p.  |
| Pension coverage (urban)         | <25%  | 88% (urban) | +63 p.p.   |
| Pension coverage (rural)         | <15%  | 68% (rural) | +53 p.p.   |
| Elderly poverty rate             | ~33%  | 27%         | -6 p.p.    |
| The elderly with chronic disease | 46.9% | 16.0%       | -30.9 p.p. |

|                            |              |         |           |
|----------------------------|--------------|---------|-----------|
| Gender pension gap (urban) | 28 p.p. (AP) | 12 p.p. | -16 p.p.  |
| Social protection (% GDP)  | 8.5%         | 12.5%   | +4.0 p.p. |
| Elderly dependency ratio   | 18.7%        | 65%+    | --        |

Source: Compiled from UNFPA (2023), Institute of Chinese Studies (2017), Health Affairs/NIH (2008), ESCAP (2024), and NewsClick (2022).

The paper also notes that elderly health indicators appear worse in India than in China, which matters because poor health raises out-of-pocket expenditure and weakens the ability of older persons to remain economically secure. A pension system cannot be read in isolation from the health system. The comparative section, therefore, reinforces the broader point that income support, healthcare, and care services operate together. At the same time, the paper correctly notes the limits of the econometric exercise. The sample is small, the design is cross-sectional, and reverse causality is possible because richer or lower-poverty countries may invest more heavily in pensions. The models should therefore be read as indicative rather than definitive. Even so, the direction of the results is consistent with the qualitative evidence assembled across the review.

## 6. Research Gaps and Future Directions

The review identifies multiple research deficiencies. Data disaggregated by age and gender is inconsistent throughout the area, complicating the comparison of actual experiences of exclusion among countries and social categories. Further research is required on the interplay between age and gender, disability, ethnicity, geography, and migratory status. In the absence of an intersectional viewpoint, policy may persist in overlooking the populations experiencing the most acute vulnerabilities. Longitudinal and comparative studies would enhance the evidence base. A significant portion of the existing evidence is descriptive or cross-sectional, which aids in delineating the issue but is less successful in determining causal pathways. Future research should investigate the interplay of unpaid caregiving, informal labour, widowhood, pension structures, and health crises over time. The digitisation of welfare delivery and financial services is a crucial domain, as it can either mitigate marginalisation or exacerbate it for the elderly individuals with low literacy, restricted mobility, or inadequate internet access. Future research would benefit from more robust mixed-method approaches. Extensive comparison datasets are valuable for recognising overarching trends; nonetheless, qualitative information is essential for comprehending the lived experiences of exclusion among older women, widows, individuals living alone, migrants, and senior rural households. The relationship between quantifiable hardship and personal perceptions of abandonment, insecurity, or diminished social value remains inadequately examined in the majority of regional research. Enhanced integration of quantitative and qualitative evidence would consequently fortify both scholarly analysis and policy formulation.

## 7. Policy Implications and Conclusion

Three policy implications distinctly arise from the review. Addressing old-age exclusion in the Asia-Pacific region necessitates broader pension coverage, particularly via social pensions and other non-contributory mechanisms that benefit

informal workers and women with fragmented employment histories. Secondly, the sufficiency of benefits is as significant as nominal coverage. Minuscule pensions may be recorded as included officially; however, they effectively render beneficiaries impoverished. Third, ageing policy must be integrated with gender policy: unpaid caregiving, informal employment, lower pay, and gender-based violence contribute to vulnerability in later life far before retirement. A comprehensive social investment strategy is consequently required. Health systems require enhanced geriatric and chronic-care capabilities, long-term care frameworks necessitate public funding and workforce development, and community-level initiatives are essential to combat loneliness and service exclusion. Rural ageing necessitates targeted policy focus due to the prevalent deficiencies in transit, access to care and income stability. In the Indian context, this implies that discussions regarding old-age pension reform, healthcare expansion, and women's economic engagement should not occur in isolation from each other. The primary conclusion of the research is that social exclusion in later life is a cumulative phenomenon. It commences significantly earlier with disparities in education, earnings, unpaid caregiving responsibilities, informal jobs, inadequate health protection, and limited asset ownership. By the time individuals attain old age, those disadvantages are already entrenched. Policy is most effective when implemented throughout the life course rather than solely at the point of retirement.

The future policy direction is already clear. The region's demographic shift will become increasingly discriminatory if governments persist in depending on limited contributing systems and diminishing familial support. Inclusivity can be enhanced if states establish gender-responsive social protection, broaden care systems, improve adequacy, and prioritise dignified ageing as a fundamental development objective rather than a peripheral welfare issue. The paper's primary contribution is the integration of comparative evidence, gender analysis, and a straightforward econometric exercise into a unified argument: social exclusion in the Asia-Pacific region is not merely a byproduct of development, but rather a fundamental challenge to development itself. Should the region establish institutions that ensure income, care, health, and acknowledgement in later life, ageing can be experienced with dignity. Should it fail, accelerated ageing would reveal and exacerbate the inequities that economic expansion has not addressed.

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