Introducing the MENARAH Network:
Middle East and North Africa Research on Ageing Healthy Network

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Why is it important to focus on Ageing in the MENA region?

- A success story
  - Declining mortality rates
  - Declining fertility rates
  - Improved life expectancy
- Historical high fertility rates
- Socio-economic changes
- Migration and mobility
- Variable stages of the demographic transition
- Variable pace of population ageing

Total Fertility Rate 1960-2016

Source: World Bank

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February 2020
Demographic shifts

Population ages 65 and above (% of total)

Life expectancy at birth, total (years)

Source: World Bank

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Population ageing is not occurring in isolation

- Population ageing is occurring simultaneously with ‘youth bulge’
- Socio-demographic changes
  - Co-residency patterns
  - Urbanisation
  - Displacement
- Epidemiological and health transitions
  - Non-communicable diseases replacing communicable diseases
  - Life style, physical activities, obesity
- Real cost at the individual and HH levels

Source: World Bank
‘Unique’ features of ageing in the region

- Countries experience both population growth, simultaneously with population ageing
- While many countries are at an earlier stage of population ageing, due to the ‘youth bulge’ and earlier trends of high fertility rates, the rate of ageing will be considerable by 2050
- Countries will become ‘aged populations’ at significantly faster rates than most developed countries did in the past
  - On average, within 13-40 years compared to 50 to 150 years in OECD countries’ experience
- Other socio-demographic changes are simultaneously occurring:
  - Increased trends in ‘lone-residency’ at old age (usually women)
  - Higher female labor market participation (primary care givers)
  - Migration (internal and international) and proximity of residency
Major implications

<table>
<thead>
<tr>
<th>Individuals and families</th>
<th>Systems and society</th>
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</thead>
<tbody>
<tr>
<td>People are spending more years post-retirement or at 'old age' than ever</td>
<td>Preparedness, awareness and formal support availability</td>
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<td>Many years are spent in ill-health with multiple co-morbidities</td>
<td>Communities and the role of charitable sectors and NGOs</td>
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<td>Intersectionality of gender and age</td>
<td>How far the environment is enabling (or disabling) older people and their families</td>
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<td>Wellbeing and dignity</td>
<td>Financial burden (on the state)</td>
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<tr>
<td>Families are the primary care givers</td>
<td>How well the system is prepared</td>
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<tr>
<td>- Usually women with multiple responsibilities</td>
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<tr>
<td>- Financial, emotional and physical burden</td>
<td>- Potential exploitation (e.g. unregulated care market including private health and care services)</td>
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Developing the MENARAH network

- Supported by a GCRF Partnership grant; Continuation of networking activities conducted in 2019 (previous GCRF network grant)
- Further support to develop a short film to raise awareness (GCRF Impact support)
- Builds on previous research in the region:
  - Published research e.g. Ismail & Hussein (2018); Hussein & Ismail (2017); Khan, Hussein & Deane (2017)
  - Developing policy: e.g. supporting the Turkish and Omani governments to develop their ageing and social development strategies
  - Previous collaboration with UN-ESCW to develop Ageing policy in the region
  - Invitation to contribute to UN Expert meeting on measuring ageing (Bangkok, Feb 2019)
- Links to other projects, esp. Strengthening responses to dementia in developing countries “Stride- dementia"
Summary of key activities

February 2020

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Ageing and Elderly Care in the Arab Region: Policy Challenges and Opportunities
Shereen Hussein1 · Mohamed Ismail2

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Abstract Populations are expected to age rapidly in the Arab countries coming few decades. However, the current evidence base indicates that many in the region are not paying attention to this demographic phenomenon. In particular concern as longevity is often accompanied by many years of ill health and most of the countries in the region continue to rely on the primary source of elder care. While the family, and particularly women, are providing increasing support for longer, they are facing a set of socio-economic changes that may hinder their ability to provide such care. This paper focuses on demographic changes in the Arab region and reflects on the multiple-roles by utilising quantitative analysis of international population and socio-economic factors as well as reviewing the background literature and current aging policy region. The paper then discusses possible strategies to address increasing care needs through a social capital lens, where supports informal caregivers.

Nexus Between Demographic Change and Elderly Need in the Gulf Cooperation Council (GCC) Countries: Some Policy Implications
Hafiz T. A. Khan1 · Shereen Hussein2 · John Drane3

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Abstract Population aging is a phenomenon affecting the whole world, in the GCC countries as well. With the GCC there is an expected population aging that will happen faster than experienced by many other countries. The purpose of this paper is to explore the population aging of GCC countries, while discussing this within a context of social policies. Specifically, we discuss the early stages of acknowledgments such change. We utilise data from the United Nations and the World Bank, complemented with policy and age-related social security measures in the GCC. Given the importance of demographic changes in the region, we consider the implications of changes in family structures, living conditions, and care needs for the elderly. The findings confirm the declining trend in fertility combined with increased life expectancy in all the six GCC countries. However, they highlight that social policy measures focused on the older generations and their care needs are still relatively at the early stages of each country’s
Developing the network

The partnership activities took place from February to July 2019 with the following main objectives:
1. To mobilise and strengthen networks with key stakeholders in the region.
2. To decide on priority research areas related to ageing and LTC that are likely to make the most impact.
3. To use existing and new networks and identified a set of priorities aimed at enhancing the region’s LTC preparedness across various levels and sectors within the society.

REGIONAL WORKSHOP ON POPULATION AGEING IN THE MIDDLE EAST, CAIRO, APRIL 2019

In collaboration with the Social Research Center, American University in Cairo, Professor Sherine Hussein organised a multi-disciplinary and multi-sectoral population workshop on “Population Ageing in the Middle East and Sub-Saharan Africa” on 9-10 April 2019. The workshop aimed to bring to the forefront of policy debates the scale and implications of population ageing in the region with some of its social, economic and health dimensions through a multi-sectoral forum of discussion. The workshop was well attended with over 50 representatives participating representing international, regional and national stakeholders.

During the workshop’s researchers, national and international policymakers and Non-Governmental Organisations (NGOs) were able to share evidence-based research and examples of innovative activities and policy developments with the aim of enhancing the discussion towards planning efficient and effective interventions to secure the welfare of older people and their families in the Arab region and Sub-Saharan Africa.

The meeting provided a unique opportunity to share information on the experiences of population ageing in different countries and regions of the world from Asia to East Asia, Europe and Latin America. Sharing in the meeting was work on population ageing in the Arab region, the focus of the workshop was on the future of population ageing in the Middle East region. The workshop was well attended with over 50 representatives participating representing international, regional and national stakeholders.

The workshop provided a unique opportunity for knowledge exchange between international and regional researchers, policy makers and non-governmental organisations (NGOs). The workshop has been time-wise as it coincided with, and included, the launch of the Aging Population Strategy in the Arab Region 2019-2020, by the Arab League in collaboration with the United Nations (UN)/Regional Office.

Chair: Sherine Hussein

Panel: 639-650 Registration
9:30-9:50 Welcome and Introduction
Hoda Rashad, American University in Cairo and Sherine Hussein, University of Kent
Session I: Population Ageing: International and Regional Overview
Moderator: Sherine Hussein
10:15-10:30 Sustainable Development Goals (SDGs) and Population Ageing
Ibi Sabiu, World Health Organisation, Cotonou
10:30-10:45 Overview of Population Ageing and Key Challenges in the Region
Sherine Hussein, University of Kent
10:45-11:15 Discussion
11:15-11:45 Break
Session II: Population Ageing in the Middle East and Sub-Saharan Africa: Country Specific Experiences I
Moderator: Sherine Hussein
11:45-12:00 Population ageing in Egypt: Research studies
Zahrah Khayam, American University in Cairo
12:00-12:15 Population ageing in Egypt: ARCH and ETHOS
Gamal Elbad, Mona Tantawy and Hamada Abdel-Wahab
12:15-12:45 Population ageing in Lebanon
Khalil Sbeih and Maya Abu Daher, American University in Beirut
12:45-1:00 Discussion
1:00-1:05 Lunch
Session III: Population Ageing in the Middle East and Sub-Saharan Africa: Country Specific Experiences II (4th conference facility)
Moderator: Sherine Hussein
13:05-13:20 Elderly People in the Arab Region and Africa: Policy perspective
Dr. Shereen Tantawy, (Mayt) Caring Demographic Future
13:20-13:40 Elderly People in the Arab Region and Africa: Policy perspective
Dr. Hoda Rashad, American University in Cairo, Demographic Future

February 2020
Progress this year

- Networking meetings in the UK and the region
- Consolidating collaborations and developing research agenda
- Forging new collaborations (Oxford Institute for Ageing; Global Brain Health Institute)
- Conducted an engagement event in Cairo with 16 older people and informal carers
- Conducted nine interviews with older people, informal carers and key stakeholders
  - These are videoed and some will be used for the film production
- Agreed on establishing the MENARAH network
  - Currently collating content and working with website production team
- Plans with professional TV production team
MENARAH aims

- Refine the set of priorities developed through previous activities
  - Strong links to UN SDGs
  - Clear focus on healthy ageing (in its broad meaning)
- Establish a strong and visible presence on the web for the network
- Establish an academic presence for our collaboration through jointly publishing in a peer-reviewed relevant journal.
- Raise awareness of ageing population and associated challenges and opportunities in the region
- Continue engaging in a constructive dialogue with key stakeholders in the region from researchers to non-governmental organisations and policy makers
- Enhance the relationship with key international organisation e.g. WHO and UN for future collaborative activities and partnerships
Why is the Italian experience particularly relevant?

- Family care model:
  - Only 3% of older people use care homes;
  - Cash-for-care systems – strong role of informal cares especially in care co-ordination
- Strong history of utilising social capital and co-production models in LTC
- Transferable development in technology and LTC
- Experience in migrant care workers (particularly relevant to the Gulf region)
- Active ageing and participation
Discussion points and moving forward

- Perspectives and expectations of ‘being old’
- Intergenerational support (bi-directional)
- Stereotypes, stigma, changing norms and addressing potential/hidden abuse
- Gender inequalities at old age – economic, social, cultural and environmental
- The role of technology
- Participation and independence
- Social capital
- Date and workforce
How can you contribute?

- Consider contributing to the broader aims of the network
  - What are some measures - specific to the MENA region - which can be put in place to enhance the wellbeing and overall ‘health’ of older people?

- Your views and experience are most valuables
  - Video interviews – reflecting on the importance of addressing ageing in the MENA region as a priority policy area
  - Reflecting on the ways Italy differ from, or are similar to, MENA countries in how it cares for the elderly

- Share learning especially around social capital, co-production, active ageing and the workforce
  - What lessons can MENA countries take from the experience of how Italy cares for its elderly?
References


Networking and impact activities are funded by the University of Kent to support partnership building for future GCRF funding applications.

The partners for the original application were University of Kent, the American University in Lebanon, the American University in Cairo, the African Population and Health Research Centre and London School of Economics and Political Science.

Current partners include further academic and non academic groups from the Middle East, Europe and USA as well as support from the WHO and the UN.

The views presented here are those of the author alone.
CURRENT RESEARCH
PROFESSOR SHEREEN HUSSEIN
EXAMPLE 1: SUSTAINABLE CARE:
CONNECTING PEOPLE AND SYSTEMS-
MIGRANT CARE WORKERS IN THE UK

Funder: Economic and Social Research Council- United Kingdom Research and Innovation
ABOUT THE SUSTAINABLE CARE PROGRAMME

• ESRC funded
• From November 2017 to May 2021
• PI: Professor Sue Yeandle, University of Sheffield
• Partners: Birmingham, Kent, King’s College, Stirling, Swansea, Ulster, Alberta (Canada), & Carers UK
• Academic collaborators in 15 countries
• Eight policy and practice partnerships in the UK
• WP team: Shereen Hussein and Agnes Turnpenny
# STRUCTURE OF THE SUSTAINABLE CARE PROGRAMME

## Work packages

**Sustainable Wellbeing: a conceptual and analytical framework for policy and practice in care and caring**

<table>
<thead>
<tr>
<th>Strand A: CARE SYSTEMS</th>
<th>Strand B: CARE WORK and CARING RELATIONSHIPS</th>
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<tbody>
<tr>
<td>Comparing UK care systems: prospects, developments and differentiation in the four UK nations</td>
<td>Delivering care at home: emerging models and their implications for sustainable wellbeing</td>
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<tr>
<td>Modelling care system costs and contributions: data for a sustainable care and wellbeing strategy</td>
<td>Combining work and care: how do workplace support and technologies contribute to sustainable care arrangements</td>
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<tr>
<td>Achieving sustainability in care systems: the potential of technology</td>
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<tr>
<td><strong>Migrant care workers in the UK: an analysis of sustainability of care at home</strong></td>
<td>Care ‘in’ &amp; ‘out of’ place: towards sustainable well-being in mobile and diverse contexts</td>
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CONTEXT

• In England 685,000 jobs in domiciliary care (42% of social care jobs), 75% in the independent sector, 21% directly employed by care users.

• Non-UK nationals make up 16% of the home care workforce in England – 9% are non-EU nationals and 7% non-UK EU nationals.

• Large regional variations: London, the South East, the South West and the East most reliant on migrant care workers

• Brexit: end of free movement and new immigration system; high levels of uncertainty.
OUR WORK: RESEARCH QUESTIONS

1. How are UK policy changes in 2018-2020 affecting the roles, recruitment and status of migrant home care workers? Which groups are most affected, and why?

2. What are the implications of these for sustainability and wellbeing for care users, carers, providers, and workers?

3. What changes are required in the support and organisation of home care?

4. What can be learned from other countries where migrant care labour features significantly in how home care is delivered?
WHAT WE ARE DOING (METHODS)

- Reviews – evidence and policy.
- Delphi survey – expert panel to generate possible scenarios for statistical modelling and explore future challenges.
- Qualitative interviews with migrant care workers, carers, care users, providers and stakeholders.
- Statistical analysis
KEY MESSAGES: DELPHI SURVEY

• First round: February 2019 (before first Brexit deadline); 32 expert stakeholders
• Growing demand for home care should be met via an increase in the supply of services, and their associated workforces.
• Improving recruitment and retention of workforce – with better pay and working conditions – seen as priority.
• Migrant workers important but seen as part of a broader workforce strategy.
• Immediate concern: how to ensure that migrants can continue to work in the sector.
• Second round to be launched soon
KEY MESSAGES: CARE WORKER INTERVIEWS

• Relationship between immigration control (visas, free movement) and the wellbeing of migrant care workers.

• Diverse trajectories and outcomes: differential experiences of different groups.

• Agency and resources (e.g. networks) are key determinants of wellbeing.
CONTACT AND FURTHER INFORMATION

Shereen Hussein: S.A.Hussein@kent.ac.uk

Agnes Turnpenny: A.V.Turnpenny@kent.ac.uk

Project page: https://www.pssru.ac.uk/project-pages/sustainable-care/

Programme website: http://circle.group.shef.ac.uk/sustainable-care/
CURRENT RESEARCH (UK)

EXAMPLE 2: DEVELOPING A SCALE OF WORK-RELATED QUALITY OF LIFE FOR ADULT SOCIAL CARE STAFF (ASCOT-STAFF):

Funder: National Institute for Health Research- Research for Patient Benefit

Sep 2019- Mar 2021
PROJECT OVERVIEW – PROJECT TEAM

Prof. Shereen Hussein*
Ann-Marie Towers**
Nadia Brookes*
Sinead Palmer*
Dr Barbora Silarova*

*Personal Social Services Research Unit, University of Kent, ** Centre for Health Services Studies, University of Kent

@ascot_pssru
#ASCOT_staff
PROJECT OVERVIEW - BACKGROUND

- Work-related quality of life (WRQoL) is important to:

  - Individual’s emotional and physical wellbeing;
  - Work outcomes – e.g. turnover;
  - The quality of service provided and outcomes related to service users.
PROJECT OVERVIEW - BACKGROUND

• Care and nursing staff are particularly vulnerable to low levels of WRQoL, due to:

  ➢ Caring being emotionally taxing;

  ➢ Structural pressures in sector – low wages and increased fragmentation;

  ➢ Moral distress.
PROJECT OVERVIEW - BACKGROUND

• Existing scales focus on:
  ➢ wages, patterns of work and supportive environment yet ignore emotional rewards from caring;
  ➢ do not examine the impact of care work on workers’ own quality of life.

• A conceptually similar measure exists of the impact of caring on the quality of life of unpaid carers – ASCOT-Carer.
To begin development of an ASCOT-staff measure, examining the quality of life of care staff, and the impact of care work upon this.

The first stage, and the focus of this project, is to determine the domains of WRQoL that are relevant to care staff.
PROJECT OVERVIEW - BACKGROUND TO ASCOT

• Adult Social Care Outcomes Toolkit
• Social Care-Related Quality of Life (SCRQoL)
• Those aspects of QoL most affected by social care services and support.
• Rigorously tested (users, carers and general population) and used all around the world.
• Tools for ‘service users’ and ‘informal carers’.
• Self-completion, interview, mixed-methods.
# PROJECT OVERVIEW - SERVICE USER AND CARER DOMAINS

## SERVICE USER
1. Food and drink
2. Personal cleanliness
3. Accommodation cleanliness
4. Personal safety
5. Social Participation
6. Occupation
7. Control over daily life
8. Dignity

## INFORMAL CARER
1. Self-care (eating well, getting enough sleep)
2. Personal safety
3. Social Participation
4. Occupation
5. Control over daily life
6. Space and time to be yourself
7. Feeling encouraged and supported
PROJECT OVERVIEW - METHODS

1. Scoping review

2. Group discussions and individual interviews

3. Survey
PROJECT OVERVIEW - SOME IDEAS/EXAMPLES

ASCOT-Staff

- Feeling valued and supported
- Relationships with users and carers
- Feeling safe at work
- Being able to make decisions
- Having time to meet people's needs
- Job enable you to meet your own needs

Staff

- Feeling valued and supported
- Relationships with users and carers
- Feeling safe at work
- Being able to make decisions
- Having time to meet people's needs
- Job enable you to meet your own needs
PROJECT OVERVIEW – ANTICIPATED IMPACT

Questionnaire Development

Phase One
Dimensions of work-related quality of life

Phase Two
Pre-tests, Cognitive interviewing, Piloting

Phase Three
Validation

ASCOT-Staff project

Long term plans
PROJECT OVERVIEW – DISSEMINATION AND OUTPUTS

- Agreed domains of ASCOT-Staff
- A brief guide for social care practitioners and employers
- A summary report to be published on the PSSRU website
- Two peer-reviews journal articles (open access)

- Project website: https://www.pssru.ac.uk/ascotforstaff/homepage/
- Twitter: # ASCOT_staff
CALL FOR PAPERS AND REVIEWERS
SUSTAINABLE CARE: FACING GLOBAL AGEING MORE EFFECTIVELY IN SUSTAINABILITY

- Special issue at *Sustainability* guest edited by Professor Shereen Hussein
- Sustainability is a peer-reviewed and cross-disciplinary scholarly journal of environmental, cultural, economic and social sustainability. It has an impact factor of 2.592 (2018) and it is indexed by Scopus and Social Sciences Citation Index (Web of Science).

**Special Issue Information**

Dear Colleagues,

Population ageing is happening across the world, and at a faster pace in less economically developed countries than has ever been observed before. Across the globe, changes in demography and socio-economic structures require the creation of new sustainable care models that are effective in enabling large segments of the society who are growing older to continue contributing to the economic and social dynamics of the society while ensuring meeting the care needs for those requiring support. At the core of long-term care provision is the workforce, where the provision of care is essentially a human activity relying on relationship building, compassion and competency. Thus ensuring an adequate supply of well-trained and highly skilled care workforce becomes a priority within such systems. However, most economically developed countries have aged populations, with a shrinking working-age population. Global mobility widens the pool of workers and allows many countries to rely heavily on migrant labor to fill such gaps. The latter creates new care gaps in migrant's home countries, as their own populations are growing older with increasing care needs.

At the same time, new technologies are playing an important role in maintaining and enhancing care systems. From assistive technologies aiming at delaying intensive care needs and enhancing individuals' independence to organizational tools and recruitment platforms, technologies are also facilitating new models of care such as caring at a distance, whether it is by informal family members or by professionals.

One might argue that ensuring the dignity and wellbeing of those requiring care and support through high quality and enabling support should be the core ethos of a sustainable and effective care system. Yet with increasing fiscal pressures to provide such support, the wellbeing of the workforce can be easily overlooked, despite a clear link between workers' wellbeing and quality of care.

This special issue welcomes articles that address the concept of creating sustainable care from a global perspective. We welcome empirical and conceptual papers from different disciplines that addresses some of the issues highlighted above. Articles could address the situation in one country or region or adopt a more comparative approach. In particular, we would welcome articles that addresses one or more of the following themes:

- Conceptual development of the meaning and definitions of sustainable care, who are the care actors and how do they interact?
- How migration and mobility contribute to, or hinder, the effectiveness of sustainable care systems
- The role of technology in shaping and enhancing sustainable care
- The workforce, emotional work and quality of care
- Developing models of care, including the role of social capital and informal support, especially in low and middle income countries
- The interplay between individuals, their families, the formal care workforce and systems of care

Prof. Dr. Shereen Hussein  
Guest Editor

Manuscript Submission Information

Manuscripts should be submitted online at [www.mdpi.com](http://www.mdpi.com) by registering and logging in to this website. Once you are registered, click [here](http://www.mdpi.com) to go to the submission form. Manuscripts can be submitted until the deadline. All papers will be peer-reviewed. Accepted papers will be published continuously in the journal (as soon as accepted) and will be listed together on the special issue website. Research articles, review articles as well as short communications are invited. For planned papers, a title and short abstract (about 150 words) can be sent to the Editorial Office for announcement on this website.

https://www.mdpi.com/journal/sustainability/special_issues/Sustainable_Care