



ACTIVE AGEING AND SOLIDARITY BETWEEN GENERATIONS IN EUROPE AND BEYOND. A VIEW FROM THE UNITED NATIONS ECONOMIC COMMISSION FOR EUROPE

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Ageing in the UNECE Region

Population ageing is one of the distinctive traits in the region covered by the United Nations Economic Commission for Europe which spreads from North America over Western and Central Europe to Eastern Europe and Central Asia. In 2010, the number of people aged 65 years or above reached 174.5 million and presently accounts for 14.1% of the region's total population. This proportion is expected to exceed 20% by 2030. In Germany and Italy, a fifth of population was 65 years old or above already in 2010, and is projected to reach over a quarter by 2030. This will also be the case in Austria, Finland and Portugal. Out of eight UNECE countries where presently the proportion of people aged 65 years or older is below 10%, only four are projected not to breach this threshold by 2030 (Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan). The proportions of older olds - 80 years or above - are also set to rise: currently at 3.7%, this age group will account for more

than 5% of UNECE population by 2030, and in Austria, Finland, France, Germany, Italy, Sweden and Switzerland it will exceed 7%. In 2000-2010, some slowdown in the pace of population ageing was characteristic for countries with older population structures, while it speeded up markedly in 'younger' countries (Azerbaijan, Turkey, and Uzbekistan).

Ageing as a phenomenon means rising share of older populations relative to other age groups. It is a consequence of lower fertility rates and increasing life expectancy. At a country or regional level it also could be affected by migration trends. Fertility rates are lower than the replacement level of 2.1 children per woman in 45 countries of the region. With the UNECE average being at 1.79 children per woman (2010), it is below 1.5 in 18 countries¹⁷. Some countries still have above replacement level fertility, namely Azerbaijan, Iceland, Israel, and the five Central Asian countries Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan.

Average life expectancy at birth in the region was 74.2 years for men and 80.5 years for women (2010). In some countries male life expectancy is an issue of concern, being below 70 years in Belarus, Kazakhstan, Kirgizstan and Latvia, Lithuania, Republic of Moldova, Russian Federation, Tajikistan and Ukraine.

Population ageing has an impact on all areas of society. Ageing populations means more older workers who need to pursue new life-long learning strategies to stay well-adjusted for the changing requirements of the labour market. It means that there are fewer working-age people to pay into social security systems to support pensioners. It also means new challenges for the health and care system, which has to treat more old-age-related conditions and which needs to develop new forms of care. Markets need to get used to the special needs of a growing older consumer group. Transport systems and buildings need to accommodate the needs of a potentially less mobile target group. At the same time, more older people come with a huge set of experience that they can contribute to public life, for example through voluntary engagements, as active members in political parties and civic organizations or as entrepreneurs. Older retired people make important contributions to caring for grand-children or other older persons. Societies do have to adjust to the new balance of a larger share of older people in the total population. At the same time, if managed well, there is a lot to be gained from more people living longer.

The United Nations' strategic framework on Ageing

Member States of the United Nations have recognized ageing as an important issue, putting it on the international agenda as early as 1982 when the first World Assembly on Ageing took place in Vienna. They took the issue on even more vigorously with the second World Assembly on Ageing, taking place in 2002 in Madrid where they adopted the global UN framework on Ageing, the Madrid International Plan for Action on Ageing (MIPAA)¹⁸. It sets out three main priority directions, namely (I) Older persons and development, (II) Advancing health and well-being into old age and (III) Ensuring enabling and supportive environments. Ageing being considered particularly important in the region, UNECE member states gathered in the same year in Berlin to develop a Regional Implementation Strategy (RIS)¹⁹. The Strategy singled out ten commitments of where progress should be made. There was a major call to mainstream ageing into all policy-areas, meaning that all political activity – be it on labour, health, transport or education – should take ageing systematically into account.

Box: The 10 Commitments of the Regional Implementation Strategy for the Madrid International Plan of Action on Ageing (MIPAA/RIS) 2002:

1. To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages

2. To ensure full integration and participation of older persons in society
3. To promote equitable and sustainable economic growth in response to population ageing
4. To adjust social protection systems in response to demographic changes and their social and economic consequences
5. To enable labour markets to respond to the economic and social consequences of population ageing
6. To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions
7. To strive to ensure quality of life at all ages and maintain independent living including health and wellbeing
8. To mainstream a gender approach in an ageing society
9. To support families that provide care for older persons and to promote inter-generational and intragenerational solidarity among their members
10. To promote the implementation and follow-up of the Regional Implementation Strategy through regional cooperation.

The year 2012 stood in the sign of the tenth anniversary of the Madrid Plan and its Regional Strategy. For the second time, following a five-year cycle, countries were requested to report on progress made in implementing these commitments. Based on the reports received, a regional synthesis was prepared, identifying major trends

in the region²⁰. It was found that, over the past 10 years, UNECE member States have made significant progress in adapting social protection systems, promoting health and independent living and adjusting labour markets to the needs of an increasingly ageing population. However, these are also among the top areas where major challenges are still identified.

With regards to social protection systems, the reports confirmed that these expenditures make for a large share of public budgets and finding ways to sustain social protection systems has been one of the priorities in member States, despite accrued fiscal constraints since the financial crisis of 2008. Eighteen countries have introduced pension system reforms, for example by increasing required contributory periods, limiting early retirement options and increasing the retirement age. Incentives for employees to work beyond retirement age are also amongst the measures that have been introduced. Challenges remain in fully implementing the reforms. Some countries have had difficulties in developing functioning private pension systems. In the Republic of Moldova, for example, two private pension funds are registered but reportedly do not operate.

To adapt health and care sectors, several countries have developed integrated ageing-strategies to enhance access to affordable services while ensuring sustainability. Most countries provide a continuum of care, privileging individual choice and independent living. Major investments have been made in offering home-based care, further developing long-term care, geriatric and palliative care as well as ins-

titutional care for those in need. Countries have expanded their activities to address challenges around Alzheimer's disease and other forms of dementia. Some countries have also strengthened their legal frameworks with regards to abuse and violence against older persons, also setting up support structures and launching awareness raising initiatives.

Looking at labour markets it is worth to note that labour force participation has increased sharply for persons aged 60-64 years between 2000 and 2010, from 39.6% to 46.5% for men and from 22.7% to 31.5% for women. More modest increases have been registered at age 65+, from 11.7% to 12.6% for men and from 5.7% to 7.1% for women. The raised retirement age over the last decade in many parts of the region was an important factor. However, this also reflects the efforts made by many countries to develop strategic frameworks to promote longer working lives. Employers hiring older unemployed workers may benefit from subsidies. Adjusting the setup of the workplace and allowing for more flexible work time arrangements have proven equally important to accommodate the special needs of older workers. Some countries, including Lithuania, the Republic of Moldova and Slovenia have supported entrepreneurship opportunities for older persons, some of them especially targeting older women (Cyprus, Lithuania, the Republic of Moldova, Portugal and Serbia).

Most countries have understood the need to adopt ageing-related strategic frameworks to streamline policy-making and

to ensure that ageing is considered by all ministries. Thirteen countries have already adopted specific ageing-related strategic frameworks or action plans.²¹ Several countries have established national multi-stakeholder bodies with advisory functions to government that also include older persons or their representatives.

The culminating event of the stock-taking among member States was the UNECE Ministerial Conference on Ageing in Vienna, on 19-20 September 2012. Under the motto Ensuring a society for all ages: promoting quality of life and active ageing delegations from 50 countries and 27 Ministers and vice ministers or state secretaries gathered to reflect on their experiences made during the previous five years and to discuss the way forward. The outcome of this discussion was presented in the format of a Ministerial Declaration²² which sets out four priority goals for the MIPAA/RIS implementation period 2013-2017, namely to (I) encourage longer working life and maintain ability to work; (II) to promote participation, non-discrimination and social inclusion of older persons, (III) to promote and safeguard dignity, health and independence in older age and (IV) to maintain and enhance intergenerational solidarity. Under each of these goals, a number of more specific measures are identified by way of guidance.

On the side of the Ministerial Conference, a poster exhibition was prepared to highlight good practice examples in implementing MIPAA/RIS across the region. It demonstrated that there are a lot of good

examples already in place. Many posters have pointed to initiatives in the work place, such as Siemens Norway with their strategy to retain senior competence. When in 2011 a reform opened up new options to combine pension and work, the company decided to take steps to actively motivate seniors to prolong their senior career in the company. So-called „Milestone Dialogues“ are held between managers and employees at age 55 and 60 to discuss motivation, competence and possibility to work longer, addressing potentially necessary development actions or changes in job content. This allows a better planning of the future for both employer and employee. Seniors over age 64 who are employed full-time receive two extra weeks of spare time and seniors over age 60 can exercise fitness training two hours per week within normal working hours. Since the introduction of the programme, average retirement age has increased by close to two years and seven employees have decided to work beyond the former age limit of 67 years. A number of good practice examples also showcase ways of better integrating older people into society. Under title “We Are Glad to See You, We Enjoy Being Together”, a project from the Slovak Republic was presented where residents of the Nursing Home and Social Services Home in Kremnica cooperate with local schools and a local children’s home, organizing events where children present little shows they have prepared, singing songs, playing musical instruments or staging fairy tales. These programmes are followed by socializing and exchanging gifts so that children can find new “grandparents“ and the older people can

find new “grandchildren“. In Austria, a project Sustainable Learning in the Community empowers older people to become active citizens, encouraging the development of skills and competences through formal and informal learning opportunities. Personal skills profiles and actions plans are developed together with participants to help them become aware of their existing skills and competences and to serve as a starting point for volunteering or other civic engagement. Many of the examples presented in the poster exhibition showed how active ageing is already now a desire for many older persons, and how communities have helped to create new opportunities for active ageing thus contributing to more enabling framework.

Active Ageing and Solidarity between Generations

Active ageing as a concept has received considerable attention during the year 2012 which was designated European Year for Active Ageing and Solidarity between Generations. Given the motto of the Ministerial Conference, the topic has taken centre stage there, too.

Active ageing as a concept itself is not new. In fact, it was developed as a contribution of the World Health Organisation (WHO) to the Second World Assembly on Ageing. The definition developed then is still used today. According to WHO, ‘Active ageing is the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age’.²³ The idea is, that staying physically fit throughout the life course

can help not only to live longer but also to stay healthier in old age, thus contributing to better quality of life, including physical, mental and social wellbeing. Active ageing requires investments at the individual level. Everyone has a personal responsibility for their active ageing. Even the perceptions of ageing that people adopt when they are younger impacts on the quality of their ageing processes. At the same time, governments and societies can strategically invest in conducive frameworks that set the right incentives and enable all members of society to live actively throughout their lives. As a result, people may be less dependent and contribute more to society. This can also help generate considerable cost savings for both individuals and public budgets. At the same time, whether or not people live long and in good health does not only depend on their activity, but also on some biological conditions which cannot be influenced. Therefore, in ageing societies, provisions also have to be made for people who are frail and in need of help.

The priority goals that UNECE member States have set themselves with their Ministerial Declaration all support the idea of active ageing. In all these areas, both investments at the individual and at the societal level are needed to make active ageing work: In terms of (I) encouraging longer working lives, workers need to prepare for the realities of longer work lives and also consider entrepreneurship or self-employment opportunities to stay engaged professionally. At the same time, the policy framework needs to be conducive to longer working lives, for example by allowing

flexible retirement or phased retirement. In terms of (II) promoting participation, non-discrimination and social inclusion, individuals need to actively seek out available opportunities to participate in cultural, social and political life while policy-makers should create favourable conditions for participation in society through cultural, political and social activities for example by offering reduced prices and by ensuring accessibility of cultural sites for less mobile people. To (III) promote dignity, health and independence in older age and the individual responsibility to be physically active, eat healthily and avoid abusing tobacco or alcohol should be complemented by health promotion and disease prevention programmes. In order to (IV) maintain intergenerational solidarity, older and younger people themselves have to have an open approach to each other, free of prejudice while governments may start campaigning against age-discrimination and set up supportive frameworks or provide the organizational framework for intergenerational learning.

To better explore the potentials of active ageing, the UNECE, in cooperation with the European Commission and the European Centre for Social Welfare Policy and Research in Vienna, developed an Active Ageing Index for countries of the European Union. The objective was to measure older people's economic and social activities as well as their capacity for active and healthy ageing, thus identifying unused potential for active ageing. The Index makes use of a dashboard of indicators, organised under four different do-

mains: (1) Employment of older workers; (2) Social activity and participation of older people; (3) Independent and autonomous living of older persons; (4) Capacity and enabling environment for active ageing.

The results of the Index, presented at the closing Conference of the European Year for Active Ageing, in Nicosia, Cyprus, show that older people living in the three Nordic EU countries (Sweden, Finland and Denmark) as well as in the Netherlands, Ireland and the United Kingdom fare the best in terms of active ageing. In contrast, the majority of the Central and Eastern European countries and Malta and Greece have to catch up with the rest of the EU. When looking at the different domains of the index it was found that, for example, Cyprus, Portugal, Estonia and Bulgaria do particularly well in the employment domain; while Italy, France and Spain lag behind in the same domain.

Thanks to the activities throughout the European Year, active ageing has become much more anchored on the policy agenda. Even though the WHO concept was initially developed as a contribution to the second World Assembly on Ageing, the political declaration adopted there mentions the concept only once in Article 12: 'The empowerment of older persons and the promotion of their full participation are essential elements for active ageing'.²⁴ The Madrid Plan itself makes no mention at all. The Regional Implementation Strategy makes no direct reference to the concept either.²⁵ However, the ideas

that are behind the concept of active ageing are ingrained in both documents. Accordingly, when looking at the synthesis of the country progress reports of 2011-2012, the policies described there reflect an active-ageing approach with respect to each of the commitments of MIPAA/RIS. However, direct reference to active ageing-related measures is mostly made with respect to implementing the European Year and future planned activities.²⁶

In the spirit of the 2012 European Year, the Ministerial Declaration adopted in Vienna has active ageing already as a central element of the title *Ensuring a Society for All Ages: Promoting Quality of Life and Active Ageing*. As the Declaration sets out the priorities for the next five-year cycle of implementation, it firmly counts on active ageing, as formulated under number 11: 'For reaching the policy goals in the implementation of the UNECE RIS/MIPAA during the period 2013-2017, we stress the importance of mainstreaming ageing and promoting active ageing as defined by the World Health Organization (WHO) in the national policy processes, notably by incorporating the life course approach. We also note a need to build where possible on recent international commitments relevant to the promotion of active ageing, including prevention and control of non-communicable diseases, and addressing the social determinants of health'.²⁷

Since the adoption of MIPAA/RIS, the UNECE has supported the implementation of active ageing strategies in many dif-

ferent ways. It has prepared Road Maps on Mainstreaming Ageing to improve the active ageing policy framework in countries like Armenia and the Republic of Moldova.²⁸ It has organized capacity building seminars on different aspects of active ageing and it has published a Policy Brief Series that shows avenues to enhance active ageing in different areas of the MIPAA/RIS.²⁹

Where from here?

We know that ageing is here to stay and with the help of population projections we have a pretty good understanding of the likely development of the composition of populations within the region. Furthermore, UNECE countries are entering into the third cycle of implementation of MIPAA/RIS (2013-2017) with an increasing recognition of both challenges and opportunities that population ageing generates in the region.

Within the overall framework of a mainstreamed and integrated approach towards ageing, UNECE member States will continue to focus on a number of specific policy-areas, set out in the MIPAA/RIS framework:

Health and care will remain high on the agenda, in particular with regards to better integration and coordination of social and health services, financial sustainability, promotion of independent living and ageing in place, developing integrated models of long term care, supporting informal and family care givers and preventing violence and abuse.

Changes in labour market policies have aimed to allow persons to continue working if they wish so, by increasing the retirement age and abolishing incentives for early retirement. Such reforms need to be further implemented. They need to go hand in hand with reforms of pension and social protection systems that aim to ensure sustainability while safeguarding minimum subsistence levels and countering poverty among older persons.

Countries will continue working on life-long learning to keep the ageing workforce well-adjusted to changing realities at the workplace and also empowering older persons to live active and fulfilling life.

Overall, gender aspects are given more and more importance when formulating and analysing policies, using for example gender impact assessments or performing gender budgeting. Additional efforts will be required to facilitate reconciling work with family and care responsibilities.

New technologies are increasingly being used, especially in the health sector, but also in terms of enabling older people to use modern communication technologies to stay connected, be informed and independent

The recent economic downturn in many parts of the UNECE region is likely to have a lasting impact on the social and economic environment in which the MIPAA/RIS commitments will be carried out. At the same time, not tackling ageing now will have economic consequences that may even be more important than the ones now related to the economic crises.

The UNECE, with the help of the Working Group on Ageing, stands ready to support countries in the region to take on the right strategies on the way to building societies for all ages.

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- ¹⁷ These are Andorra, Austria, Belarus, Bosnia and Herzegovina, Cyprus, Germany, Hungary, Italy, Latvia, Liechtenstein, Malta, Poland, Portugal, Romania, Serbia, Slovakia, Spain, Ukraine.
- ¹⁸ Report of the Second World Assembly on Ageing, Madrid, 8-12 April 2002, A/CONF.197/9, <http://www.unece.org/fileadmin/DAM/pau/ggp/iwg/Budapest/Madrid2002Report.pdf>.
- ¹⁹
- ²⁰ Synthesis Report on the implementation of the Madrid International Plan of Action on Ageing in the UNECE region, http://www.unece.org/fileadmin/DAM/pau/age/Ministerial_Conference_Vienna/Documents/Synthesis_report_19-11-12.pdf.
- ²¹ Countries include Armenia, Austria, Cyprus, the Czech Republic, Finland, Ireland, Iceland, Lithuania, Macedonia, Serbia, Slovenia, Ukraine, and the United Kingdom.
- ²² 2012 Vienna Ministerial Declaration, Ensuring a society for all ages: Promoting quality of life and active ageing, ECE/AC.30/2012/3, http://www.unece.org/fileadmin/DAM/pau/age/Ministerial_Conference_Vienna/Documents/ECE.AC.30-2012-3.E.pdf.
- ²³ WHO (2002), Active Ageing: A Policy Framework, http://whqlibdoc.who.int/hq/2002/WHO_NM_H_NPH_02.8.pdf
- ²⁴ Report of the Second World Assembly on Ageing, Madrid, 8-12 April 2002, A/CONF.197/9, [\[min/DAM/pau/ggp/iwg/Budapest/Madrid2002Report.pdf\]\(http://www.unece.org/fileadmin/DAM/pau/ggp/iwg/Budapest/Madrid2002Report.pdf\).](http://www.unece.org/filead-</p>
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- ²⁵ Regional Implementation Strategy for the Madrid International Plan of Action on Ageing 2002, ECE/AC.23/2002/2/Rev.6, http://www.unece.org/fileadmin/DAM/pau/docs/ece/2002/ECE_AC23_2002_2_Rev6_e.pdf
- ²⁶ Direct reference to active ageing is made by several countries, including, Austria, Italy, Portugal, Serbia, Slovenia, Spain, UK, cf. Synthesis Report on the implementation of the Madrid International Plan of Action on Ageing in the UNECE Region http://www.unece.org/fileadmin/DAM/pau/age/Ministerial_Conference_Vienna/Documents/Synthesis_report_19-11-12.pdf.
- ²⁷ 2012 Vienna Ministerial Declaration Ensuring a society for all ages: Promoting quality of life and active Ageing, ECE/AC.30/2012/3, http://www.unece.org/fileadmin/DAM/pau/age/Ministerial_Conference_Vienna/Documents/ECE.AC.30-2012-3.E.pdf.
- ²⁸ <http://www.unece.org/population-unit/paupubwelcome/ageing/2011/roadmap-for-mainstreaming-ageing-in-armenia/docs.html>, <http://www.unece.org/population-unit/paupubwelcome/ageing/2012/roadmap-for-mainstreaming-ageing-rep-of-moldova/docs.html>.
- ²⁹ http://www.unece.org/pau/age/policy_briefs/welcome.html.

