OVERVIEW OF THE AGEING SITUATION IN THE UNECE REGION

SUMMARY REPORT ON THE IMPLEMENTATION OF THE MADRID INTERNATIONAL PLAN OF ACTION ON AGEING IN THE UNECE REGION

Note by the secretariat

Summary

In the first five-year cycle of the global review and appraisal of the Madrid International Plan of Action on Ageing (MIPAA), the United Nations Commission for Social Development agreed on the modalities for the review and appraisal of the MIPAA. These modalities mandated the United Nations regional commissions to organize regional conferences of review and appraisal and to submit the findings to the Commission for Social Development for the global review and appraisal (E/CN.5/2006/2). In the framework of preparations to the 2007 UNECE Ministerial Conference on Ageing, 31 member States have been submitted their country reports on the implementation of the UNECE Regional Strategy for MIPAA (ECE/AC.23/2002/2/Rev.6), based on the guidelines provided by the UNECE secretariat. The reporting guidelines invited countries to report on their activities in the areas of each of 10 commitments of the Regional Implementation Strategy and to highlight priority areas. The current document summarizes the findings of these country reports.
## CONTENTS

<table>
<thead>
<tr>
<th>Paragraphs</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summary...</td>
<td>1</td>
</tr>
<tr>
<td>Introduction</td>
<td>1-2</td>
</tr>
<tr>
<td>Commitment 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</td>
<td>3-5</td>
</tr>
<tr>
<td>Commitment 2: To ensure full Integration and Participation of Older Persons in Society</td>
<td>6-19</td>
</tr>
<tr>
<td>Commitment 3: To promote equitable and sustainable economic growth in response to Population Ageing</td>
<td>20-24</td>
</tr>
<tr>
<td>Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences</td>
<td>25-34</td>
</tr>
<tr>
<td>Commitment 5: To Enable Labour Markets to Respond to the Economic and Social Consequences of Population Ageing</td>
<td>35-43</td>
</tr>
<tr>
<td>Commitment 6: To promote life-long learning and adapt the educational system in order to meet the changing economic, social and demographic conditions</td>
<td>44-49</td>
</tr>
<tr>
<td>Commitment 7: Striving to ensure quality of life at all ages and maintain independent living including health and well-being</td>
<td>50-59</td>
</tr>
<tr>
<td>Commitment 8: To Mainstream a Gender Approach in an Ageing Society</td>
<td>60-63</td>
</tr>
<tr>
<td>Commitment 9: To Support Families that Provide Care for Older Persons and to Promote Intergenerational and Intragenerational Solidarity Among Their Members</td>
<td>64-69</td>
</tr>
<tr>
<td>Commitment 10: To promote the implementation and follow-up of the Regional Implementation Strategy through regional co-operation</td>
<td>70-74</td>
</tr>
<tr>
<td>Conclusions</td>
<td>75-82</td>
</tr>
</tbody>
</table>
INTRODUCTION

1. In September 2002, five months after the World Assembly on Ageing had adopted the Madrid International Plan of Action on Ageing (MIPAA), the 2002 UNECE Ministerial Conference on Ageing in Berlin considered and adopted its Regional Implementation Strategy (RIS). The Strategy includes a concrete catalogue of measures in the form of 10 commitments. In preparation to the 2007 Ministerial Conference on Ageing, the UNECE secretariat invited member States to report on their activities in the areas of each of these 10 commitments and to highlight priority areas. The current document is also structured along the lines of those commitments.

2. This document frequently refers to the country reports that provide the particular information presented. Such reference is made in cases when the reported policy or trend pertained to one or a few countries, and not made in describing general trends pertinent to a large number of countries. These country references are not necessarily exhaustive lists of all countries to which the referring statements pertain. For the sake of brevity, the standard United Nations three-letter country code\(^1\) is used in these references.

Table 1. Countries whose reports have been considered in this document.

<table>
<thead>
<tr>
<th>Country</th>
<th>Abbreviation</th>
<th>Country</th>
<th>Abbreviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albania</td>
<td>ALB</td>
<td>Malta</td>
<td>MLT</td>
</tr>
<tr>
<td>Armenia</td>
<td>ARM</td>
<td>Netherlands</td>
<td>NLD</td>
</tr>
<tr>
<td>Austria</td>
<td>AUT</td>
<td>Poland</td>
<td>POL</td>
</tr>
<tr>
<td>Azerbaijan</td>
<td>AZE</td>
<td>Romania</td>
<td>ROU</td>
</tr>
<tr>
<td>Belarus</td>
<td>BLR</td>
<td>Russian Federation</td>
<td>RUS</td>
</tr>
<tr>
<td>Belgium</td>
<td>BEL</td>
<td>Serbia</td>
<td>SRB</td>
</tr>
<tr>
<td>Canada</td>
<td>CAN</td>
<td>Slovenia</td>
<td>SVN</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>CZE</td>
<td>Spain</td>
<td>ESP</td>
</tr>
<tr>
<td>Denmark</td>
<td>DNK</td>
<td>Sweden</td>
<td>SWE</td>
</tr>
<tr>
<td>Estonia</td>
<td>EST</td>
<td>Switzerland</td>
<td>CHE</td>
</tr>
<tr>
<td>Finland</td>
<td>FIN</td>
<td>The former Yugoslav Republic of Macedonia</td>
<td>MKD</td>
</tr>
<tr>
<td>Greece</td>
<td>GRC</td>
<td>Turkey</td>
<td>TUR</td>
</tr>
<tr>
<td>Hungary</td>
<td>HUN</td>
<td>Britain and Northern Ireland</td>
<td>GBR</td>
</tr>
<tr>
<td>Israel</td>
<td>ISR</td>
<td>United States of America</td>
<td>USA</td>
</tr>
<tr>
<td>Latvia</td>
<td>LVA</td>
<td>Uzbekistan</td>
<td>UZB</td>
</tr>
<tr>
<td>Lithuania</td>
<td>LTU</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\(^1\) Available at: http://unstats.un.org/unsd/methods/m49/m49alpha.htm
COMMITMENT 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”

3. Mainstreaming ageing touches on a large number of policy fields, including economic, labour, budgetary, health care, educational, housing, social, cultural, family, environmental, transport, security and cultural matters. While none of the countries specifically mention commitment 1 as a priority area, a majority of countries follow a holistic approach in their ageing policies, set out in a number of national plans, frameworks and strategies on ageing.

4. For the development of these plans and further policies on ageing, the involvement of all relevant stakeholders is of crucial importance. The prevention of age discrimination, all other discrimination, and the provision of equal access to services for all are frequently mentioned policy objectives in this context. A number of countries have also reported raising public awareness of ageing as a policy priority (CZE, LVA, NLD, ROU, RUS).

5. Within the policy toolkit, legislation is the most common. Several countries have passed anti-discrimination acts and equal opportunity laws, while some (DNK, FIN, GBR, GRC, LTU, NLD, SWE) have adapted their national constitutions or are planning to do so. Most countries have established a national consultative body on ageing issues (e.g. a “council”, “commission” or “board”) that includes relevant stakeholders, such as pensioner representatives, non-governmental organizations (NGOs), the private sector and trade unions. These bodies are established to ensure the involvement of all affected population groups in policymaking and in the legislative process. One country follows the concept of “champions” – representatives who stand up for older people’s interests and influence policy decisions (GBR). Two countries mentioned dedicated anti-discrimination/equal treatment authorities (HUN, NLD). One country has introduced an ombudsperson for equal treatment and prepares for the establishment of a monitoring and advisory office on age discrimination (AUT). In several countries, the local level municipalities play a major role in mainstreaming ageing (DNK, FIN, NLD). Furthermore, the European Union (EU) member States also have to implement EU directives in the field of equal treatment and discrimination, including age discrimination.

COMMITMENT 2: “TO ENSURE FULL INTEGRATION AND PARTICIPATION OF OLDER PERSONS IN SOCIETY”

6. Four countries have identified integration as a specific priority (AUT, HUN, LVA, SVN). Nonetheless, progress across countries and topic areas is heterogeneous. In the area of functional integration, there is almost universal inclusion of older persons in the law-making process in one form or another. Older persons also tend to be active voters.

7. Another part of a successful integration strategy is encouraging older persons to stay in their jobs longer and make use of their considerable experience. About one third of the country reports mention incentives to employers and/or employees to extend the working life beyond the mandatory retirement age. Less progress has been made in recognizing senior citizens as customers with special needs and potential. For example, only one country (AUT) gives its pensioners a special seat on the customer association panel.
8. There are successful infrastructural initiatives in many countries. The focus of these is usually the provision of adequate financial and physical access to housing, public transport and cultural activities. Many countries have schemes in place that offer older persons tickets for transport and cultural events at low prices. However, accessibility of these services, especially in rural areas is recognized as a problem in four countries (FIN, HUN, MKD, SVN).

9. To ensure true integration of older persons, progress needs to be made in promoting intergenerational activity and a more positive image of ageing. Two countries (ROU, SRB) specifically report that older persons feel a negative image of them is portrayed. To this end, many countries report the use of image campaigns and special days drawing attention to the situation of older persons. A further area of intergenerational exchange is the voluntary sector. Many countries offer financial support to volunteer organizations that play an important role in offering help to older persons. There are fewer initiatives encouraging older persons to use their knowledge and skills by volunteering themselves, with only three countries (CAN, LTU, USA) citing such examples.

10. Nine (AUT, BEL, ESP, EST, LTU, LVA, ROU, RUS, SWE) countries report supporting financially the non-governmental infrastructure related to population ageing. In several countries, organizations of war veterans have a significant role in this infrastructure (AZE, BLR, RUS). One member State (AUT) offers a fixed funding formula with government support pegged to the number of people aged 60 and over, which allows an NGO to maintain funding even when catering for a greatly increased number of pensioners. Only one country (TUR) reports significant legal obstacles to forming NGOs. The scope of political participation varies from countries with only informal local arrangements (CZE, ISR, SRB) to countries where pensioners’ organizations are established partners in the policymaking process at all levels (AUT, EST, FIN, NLD, ROU, SWE).

11. Despite the pensioners’ active voting record, only three countries report that political parties make special provisions for them. Two (SRB, SVN) report the existence of a specific pensioners party active at the local level, while two countries (MLT, SVN) report that the major political parties have established specific pensioners sections.

12. Economic participation should involve labour market participation as well as recognizing the special product and service needs of elder customers. However, only one country gives its pensioner representatives a seat on the domestic customer council (AUT) and few provide pensioners with an institutionalized say in service provision. Only two countries (BEL, DNK) report that care homes must have standing inhabitant committees that can directly influence the provision of services.
one (FIN) offers a wage subsidy for employers offering jobs to low-paid workers over 54. Another option is a joint platform of employers and employee associations dealing with the matter (AUT).

14. To ensure that older persons can participate satisfactorily in society the state needs to provide them with infrastructure allowing participation. This involves delivering the financial and physical means to combat exclusion in the areas of housing, public transportation and cultural activity. Several countries identify this as a problem area especially in rural areas (FIN, HUN, MKD, ROU, SRB). Financial support for housing measures can take various forms, such as a heating subsidy (ROU), a housing benefit (CAN, NLD, USA) or the offer of discounted repair services to older persons (GBR, MLT). Moreover, some countries (CZE, ESP, EST, SVN) are committed to improving the physical availability and accessibility of housing for seniors. One country is doing intensive research into improving home technology adapted to older persons needs (AUT). Furthermore, two countries offer discounted medical products to older persons (EST, ISR).

15. Another area that is crucial to the inclusion of older persons is the provision of affordable and accessible public transport. At least eight countries offer their seniors free or discounted (AZE, BLR, GBR, ISR, NLD, ROU, RUS, UZB) transport, with one of them even offering a wide range of free national rail tickets that can be paid out in cash when not used (ROU). The introduction of low-floor buses and improved-access trains is part of development plans in four countries (CZE, ESP, EST, SWE) at different levels of proliferation.

16. An important area in improving the integration and participation of older persons in society is the fostering of intergenerational relations. This is done along the broad lines of media campaigns and support for volunteering organizations. The vast majority of countries have some sort of image campaign in place to promote an image of the elder parts of the population as active contributors to society. This may involve schooling media workers (AUT, ESP) about undesirable stereotypes and the airing of positive TV programmes. Many countries also draw attention to the issue by celebrating special days dedicated to older people.

17. Volunteers can play an important role in caring for older persons without close relatives. Two countries (ISR, USA) make particular use of volunteers for care and support, while many others mention supporting volunteer organizations that help older persons. Only one country reports significant obstacles to volunteering by means of a high tax burden on income from voluntary work (SVN). One country (NLD) contemplates the introduction of mandatory community service for high school students.

18. Older persons can also volunteer, which would make use of their skills and make them feel needed. However, only two countries (CAN, USA) directly encourage this practice with one other offering intergenerational art courses (LTU) and one encouraging the production of an intergenerational newspaper (EST).

19. One specific feature of the integration and participation programme is the intended use of the participatory approach. The member Governments agreed in theory on involving individuals and pensioners’ organizations in all their evaluation of policy and the development of new proposals, to allow maximum transparency and scope of ideas. A vast majority of countries reports a strong involvement of NGOs in the policy formulation process. One country reports
direct discussion (ROU) with pensioners, and another (USA) a long-standing tradition of public hearings on policy.

**COMMITMENT 3: “TO PROMOTE EQUITABLE AND SUSTAINABLE ECONOMIC GROWTH IN RESPONSE TO POPULATION AGEING”**

20. There is general agreement that efforts should be made to raise economic and productivity growth rates. This increases available resources for transfer and distribution as well as ensuring the financial sustainability of social protection systems in general and pension schemes in particular. Economic transformation has to consider the eradication of poverty, especially among older persons, and several countries have significantly increased or are planning increases in pensions (ALB, BLR, ESP, ROU, RUS, UZB). Another common way to prevent old age poverty is by use of inflation-indexation of wages (EST, FIN, LVA, LTU). Most countries mention that macroeconomic policies must be developed to address the needs of an ageing population.

21. Most countries have identified balanced budgets as a main priority for sustainability. Thus, it is important to balance economic growth (AUT, DNK, ESP, FIN, GBR, HUN, LVA, NLD, ROU, RUS, TUR) with trying to reduce government debt and expenditure, while increasing tax revenues. One country focuses specifically on efficiency improvements in public services in order to decrease public expenditure (FIN). Countries already in the Eurozone\(^2\), those who are about to adopt the Euro, and those who aspire to membership in the EU have to put strict budget controls and fiscal discipline in place in order to meet the Maastricht criteria set up by the EU as prerequisites for joining the third stage of the European Economic and Monetary Union (including an annual deficit cap of 3% of total GDP) (HUN, MLT, TUR).

22. One country makes specific reference to the “Golden Rule” which states that the government will only borrow to invest, not to fund current spending. This country also applies the “Sustainable Investment Rule”, which states that public sector net debt, as a proportion of GDP, should be held stable and at prudent levels (GBR)

23. Several countries refer to their ongoing Pension and Social Security Reform efforts. These should help to balance public budgets (AUT, DNK, FIN, ESP, SWE, TUR) while securing old age income levels e.g. by guaranteeing a minimum pension (CHE, SWE). Furthermore, the EU member States have signed up to the Lisbon Strategy, with the objective of making Europe the most competitive and dynamic knowledge-based economy in the world by 2010 (AUT, MLT). The Strategy includes investments in competitiveness and productivity improvements and the strengthening of labour markets (ROU). Some countries make specific efforts to increase the number of small and medium enterprises as drivers of growth and employment (AZE, SRB). Several countries observe an increase in the overall employment rate (AUT, CZE, LVA, NLD) and highlight the employment rate of older people (EST, NLD) as a priority.

24. One country has reformed its tax and social security schemes to encourage individual initiative and job creation (FIN). Another country facilitates the use of inverse mortgages enabling older people to convert the value of their home into cash to finance other needs (ESP).

---

\(^2\) The Eurozone refers to the EU member States that have adopted the Euro.
25. Adjusting social protection systems was indicated as a priority area by 13 countries (AUT, CAN, CHE, ESP, FIN, GBR, HUN, MKD, MLT, ROU, RUS, SVN, TUR). There is a lot of activity in the area of pension reform as well as in the areas of health care provision and income security. This rise in activities is triggered by the growing number of older persons, which makes changes in pension, health care and social security systems inevitable.

26. Twelve countries reported on either starting or completing pension reforms over the last five years. The reforms are primarily focused on the adjustment of public Pay-as-You-Go (PAYG) systems forming Pillar 1. In some cases, they also include Pillars 2 and 3 – occupational pension plans and personal savings plans.

27. Reforms of Pillar 1 include the adjustment of the official retirement age and required insurance periods, discouraging early retirement, changes in the calculation of pensions and an increase in insurance contribution rates. Many countries with a PAYG system in place have made efforts to introduce a stronger link between the contributions an employee makes and the benefits he/she receives (ESP, FIN, LTU, SWE). Furthermore, several countries have introduced or are considering the introduction of a flexible retirement age to keep people in the labour market for a longer period (CHE, FIN, GBR, SWE). One country has replaced the combination of age and years worked as requirement for retirement pay with an age-only system (MKD).

28. Occupational pension plans (Pillar 2) are still playing a minor role. However, Governments encourage increased employer participation. In most countries, participation in occupational plans is strictly voluntary (AUT, CZE, FIN, LTU, SWE). Four countries (DNK, GBR, MKD, NLD) have made them mandatory. One country has introduced a “Pension Regulator” who helps to protect the member’s benefits, e.g. in the event that an employer files for bankruptcy and promotes good administration of work-based pension schemes (GBR).

29. To encourage citizens to plan and save for their retirement, most Governments have introduced personal savings plans (Pillar 3). In order to propel the use of Pillar 3, incentives for life insurance schemes and/or supplementary pensions were introduced. As a variation of Pillar 3, one country introduced “working time accounts”, which make it possible for employees to save part of their gross salary each year in order to fund a period of unpaid leave in the future, e.g. for care, education, early retirement or sabbaticals (NLD).

30. Several measures have been introduced to give special protection to women. Childcare times are now credited as pension contribution periods and in one country pension splitting among partners was introduced (AUT). Part-time work regulations and parental leave (GBR), combined with a right to return to the workplace, are another example (AUT, USA). One country (ESP) extended the scope of its widowhood pensions to civil partnerships.

31. To ensure sufficient income levels for their older citizens, several countries provide minimum pensions. In addition, many Governments offer reductions on public transport, telecom services, ticket prices, heating expenses, etc., to their older citizens. In some countries, the family is expected to play the main role in providing income security for older persons. The state
will, however, provide a safety net in case the family cannot support its dependents (ARM). Most countries support housing expenses for older persons in need.

32. The overall trend in the area of health care is to enable older persons to stay in their homes as long as possible through programmes of activation and “helping them to help themselves”. The means to achieve this objective include a range of monetary and time benefits as well as targeted services. Countries also offer interpretation services to people with hearing disorders (HUN) and provide one-time funding for the remodelling of homes to make them accessible for persons with disabilities (HUN, MLT). One country (ISR) has developed a range of care facilities that allow older persons to stay in their familiar surroundings for as long as possible. This is made possible through the involvement and extensive training of volunteer organizations that help organize home help, nursing care, respite care and day-care centres. Hence, it is made possible for older persons to stay with their families even if their relatives work full-time. Respite care centres for older persons allow caretakers to go on vacation (ISR, MLT).

33. In the field of housing, there is an overall shift of focus from nursing homes to independent living with necessary assistance provided by mobile services. New technology is also increasingly being utilized to achieve this goal, e.g. to enable older persons to communicate with their children/grandchildren or medical personnel (FIN, GRC).

34. Although prevention and health improvement of older citizens, the need for services and care can be postponed (FIN, MLT, POL, USA). One country has launched an “Own your Future” campaign to help consumers plan for long-term care, and provides a special website for information purposes (USA). To support and motivate caregivers, the pension system was adjusted in a way so that caregivers for older persons earn pension credits for the time they spent taking care of their relatives (AUT, GRC). In some countries, the involvement of donors and activities of NGOs play an important role (ALB, ROU, SRB).

**COMMITMENT 5: “TO ENABLE LABOUR MARKETS TO RESPOND TO THE ECONOMIC AND SOCIAL CONSEQUENCES OF POPULATION AGEING”**

35. The magnitude of the impact of population aging on national labour markets differs significantly for the UNECE member States. The member States of the EU are committed to the Lisbon targets and are working towards achieving them. While countries with high and growing old-age dependency ratios (OADs) have long started to develop and deploy a wide range of policies, countries with high general and youth unemployment and lower OADs set their priorities differently. However, a large number of countries reported that progress has been made towards commitment 5. Eight countries (AUT, CHE, FIN, HUN, LTU, LVA, ROU, SRB) have explicitly indicated this field as a priority area.

---

3 The Lisbon targets from 2000 include an increase in overall employment rates to 70 per cent for the working age population as a whole, with over 60 per cent for women and 50 per cent for older workers by 2010. “Older workers” refers to the cohort of workers aged between 55 and 64.

4 Old-Age Dependency Ratio (in %) = Population over 65 years divided by population between 15 and 64.
36. In order to increase the employment rate of older workers, several countries subsidize their wages or waive parts of the ancillary labour cost such as insurance or taxes. In three countries (AUT, DNK, USA), specific awards for companies committed to the employment and retention of older workers were introduced.

37. Several countries have identified employment barriers of older workers as one of the reasons for old age unemployment. As a response, they have set up counselling and training programmes, which offer companies advice on how to best design their policies towards older workers (AUT, DNK, EST, FIN, SWE, USA). One country offers tax breaks to employers who involve their older workers in on the job training (NLD).

38. Most countries identify lack of skills, in particular in information and communication technologies and language skills as the main barriers to old age employability. Therefore, most Governments are focused on the provision of vocational training. Adult education programmes are in place in most countries, and some have developed programmes for women and/or older workers (BLR, CAN, CZE, HUN, MLT, NLD, RUS, USA). Lack of motivation and self-confidence on the part of older workers is also being addressed through special training (LTU, MLT) and face-to-face career counselling (EST, GBR). Some Governments encourage self-employment (USA) and entrepreneurial activities of older unemployed. This is done by supporting small and medium enterprises through training and funding (FIN, HUN, LTU, SRB). Member States of the EU are working in close cooperation with the European Social Fund, which aims to create employment by funding vocational training.

39. A number of specific initiatives providing employees with more flexibility to combine retirement and work have been introduced. Employees are given the freedom to choose their retirement age and manage their transition using part-time work or job sharing (USA) agreements. One country (USA) introduced the concept of an on-call pool of retired workers who are re-hired to work on temporary projects following retirement. Flexible retirement ages allow employees to fine tune their old-age income. This policy is expected to ensure a smooth transfer from working life to retirement. Some countries allow pensioners to continue to work after retirement and combine pension income with work income. Sometimes these arrangements are supplemented by partial income tax exemptions (GBR, NLD, SWE).

40. One country (DNK) guarantees employment with the local authorities to long-term unemployed over the age of 55 years. It has also set up a wear and tear fund to prevent the premature withdrawal of workers from the labour market due to health reasons. Another country (ISR) sponsors employment projects for older workers on low income. Finally, the introduction of area-wide childcare and elderly care in combination with flexible part-time arrangements is seen as key for allowing greater participation of women in the labour market (AUT, NLD, SWE). To make part-time or lower skilled work more attractive to people near retirement age, one country (NLD) changed the pension calculation so that the pension is calculated based on the salary in the last full-time job.

41. Several countries stress the problem of age discrimination in the labour market. To address the issue, one country (DNK) has installed a complaints board. Some other countries deploy special measures to protect older workers in the labour market that prevent employers from dismissing workers above a certain age, i.e. through job guarantees. Others, however, levy financial penalties on companies that dismiss older workers (AUT, LTU). In one country (SWE),
the labour legislation demands that employers first dismiss the employees they hired last in the case of layoffs. The gender wage differential between men and women might prevent some women from (re-)entering the labour market. One country reports about setting up an investigation of the gender-wage differential (FIN).

42. Many countries have increased the official retirement age or have started to do so gradually. One country is planning to index the retirement age to life expectancy (DNK). Furthermore, most countries have reversed their early retirement policies and hence abolished early retirement incentives. In addition, disincentives for early retirement have been introduced to increase the actual retirement age. One country (GBR) has tied its support allowance payment for unemployed persons to clearly defined and agreed responsibilities, such as job-seeking activities, work-related interviews or trainings. If the responsibilities are not met, the benefit is reduced in a series of steps.

43. Public awareness campaigns have been launched in several countries to draw attention to the labour market issues related to ageing and to support the aforementioned measures towards increasing retirement age. Several countries (DNK, LTU) have also started to leverage Web-based technology in the form of job search databases for older workers or as a means of raising public awareness and engaging in a dialogue. Furthermore, Governments have set up research projects and think tanks to develop labour market policies in response to ageing (DNK, LTU).

COMMITMENT 6: “TO PROMOTE LIFE-LONG LEARNING AND ADAPT THE EDUCATIONAL SYSTEM IN ORDER TO MEET THE CHANGING ECONOMIC, SOCIAL AND DEMOGRAPHIC CONDITIONS”

44. Two member States have explicitly named life-long learning as a priority area (ESP, LTU). Only a few countries have already established systems that offer tailor-made training courses considering the needs and capabilities of older persons. The concept of life-long learning is not yet fully integrated into most educational systems. Countries have, however, identified the need to establish institutions for life-long learning and further explore and understand the learning needs of their older citizens. To this end, several countries have set up research projects to develop policy options. The EU and the European Social Fund support many projects that target the development of curricula for Third Age education.

45. The concept of life-long learning is taking hold throughout the region and the notion of universities of the Third Age is gaining wider acceptance. The approach is changing: whereas in the past it was considered sufficient to guarantee older persons access to adult educational systems, now the standard educational systems are being adapted to meet the learning needs and capabilities of older persons. Some countries state the explicit objective of increasing the participation rate of older age groups in training activities (HUN). While some countries have established national life-long learning strategies (EST, HUN, LTU, MKD), others follow a decentralized approach in which the main responsibility rests with the municipalities (GRC, SWE). One country guarantees a right to life-long learning through its adult training law (EST); in another, most of life-long learning activities are offered by NGOs (ARM).

47. The content of many life-long learning programmes focuses on computer and Internet literacy. Furthermore, language classes, courses on entrepreneurship, and classes aiming at the
empowerment of citizens to influence policies and enhance their intellectual and social skills are being offered.

48. Concerning teaching methods, Third Age education differs significantly from other forms of education, extending from training to counselling. The methods are adjusted to older persons in terms of location, content and duration of courses. Trainers receive special training on how to train older persons (LTU, LVA). To reach a larger number of students, several countries developed distance-learning options (ESP, LTU, SWE). One country has developed a dedicated website, which should encourage older people to learn more about the Internet (NLD). Another country refers to focused TV programmes (MLT).

49. The EU is funding the development of curricula for older persons (e.g. through the project LENA – Learning in the Post-Employment Stage of Life) and encourages the exchange of best practice among its member States. Several countries have started research projects on how to best organize life-long learning in their societies, focusing on the needs of older persons.

COMMITMENT 7: “STRIVING TO ENSURE QUALITY OF LIFE AT ALL AGES AND MAINTAIN INDEPENDENT LIVING INCLUDING HEALTH AND WELL-BEING”

50. Twelve countries have specifically identified health and care as priority area in the context of the RIS (ALB, ARM, AUT, CAN, CHE, GBR, GRC, ISR, LTU, ROU, SVN, USA). While there is agreement on the importance of the area, the actions and requirements in the area of health care financing vary substantially. While some Eastern European nations (ALB, LTU, ROU) expand their health systems, there are severe worries about the sustainability of the current more advanced systems in other countries. To this end, systemic reorganizations have been implemented in a number of countries. Three countries report having reformed pension and insurance systems (AUT, CHE, NLD), three others (EST, LVA, SRB) mention reforms of their service provision systems, and another two (CZE, ROU) have reformed the structure of their hospitals to make them more efficient. Individual countries have also taken further measures to reduce expenditures in and increase contributions to the health sector. One country (CHE) reports having raised the retirement age for women, while another (ESP) has tightened fiscal rules on health spending and established a reserve fund. Other options that were looked into are the extension of private sector elements (USA) and the combination of health and social security systems.

51. All countries are aiming to provide equal access to health care to all their residents. This is done either by a universal health care system with compulsory insurance and free treatment or by means-tested free care for the needy. Four countries (CAN, GRC, LVA, RUS) specifically state that their care systems are universally free, while two others (DNK, SWE) have deductibles small enough not to have a deterrent effect. A number of countries (AUT, LVA, ROU, SRB, SVN) are aiming to ensure equal access by means-tested free care for those without sufficient income. However, three countries (CZE, MKD, TUR) report that in practice there are inequalities in access to health care along regional, gender or cultural lines.

52. A variety of measures to address inequalities have been specified in the member States. One country (ESP) has established special interdisciplinary centres; in another (GBR), an interdepartmental conference has been set up to combat health inequality. One area of particular
concern seems to be regional inequality with health care provision in rural areas lagging behind that in urban centres. Three member States (EST, HUN, ROU) provide financial and training incentives for medical personnel to settle in deprived areas, while other two (GBR, SVN) are tying regional funds to the achievement of care targets. Two other countries (CHE, NLD) are running specific campaigns to improve accessibility to people from different ethnic and cultural backgrounds, by assisting medical personnel from minority groups and by providing information and support to potential patients from non-native backgrounds.

53. Some member States are executing comprehensive reforms of their health-care systems (HUN) and social services (ALB), while smaller initiatives to improve and restructure the health care system are common throughout the region. The introduction of case management and the integration of social and health services to secure seamless provision of “one care” are growing in popularity (CHE, CZE, SRB, USA). Many member States stress the importance of preventive action, which will be discussed in more depth under the section on healthy lifestyles.

54. Member States are increasingly paying attention to the quality of care both in institutional and home contexts. Countries are working to fix, coordinate and improve standards of care, e.g. by creating quality standards (MLT) and systems to assess the norms of social care (LTU). Some countries report setting up structures to observe that patients’ rights are met in health care units (POL, ROU). Many countries have national programmes establishing and monitoring minimum standards for both home and institutional care. Moreover, professional training in the areas of nursing and elderly care is extended and improved. A few countries also use elaborate campaigns to raise awareness about the abuse of older persons (CAN, MLT).

55. Most countries provide benefits to persons who take care of an old, ill or disabled family member. This support of familial care can encompass necessary services for the client, a compensation for the informal carer as well as leave and support services to the carer. Family hospice leave, respite care, carer’s pension and especially day-care centres are also frequently mentioned. Day-care centres enable families to care for frail elderly parents at home and to continue with regular work and family responsibilities. In addition, respite care enables family carers to go on holiday, take care of their own personal health, or simply have a rest (AUT, ISR, MLT).

56. Concerning the housing situation of older persons, there is a strong trend towards independent living and away from institutional care in favour of home care. This encourages older persons to stay at home for as long as possible by helping them to help themselves and through activation programmes. This should take pressure off the health-care system and delay the point in time from which older people need permanent care. To achieve this objective, i.e. cash benefits for caretakers, introduction of mobile services such as Meals on Wheels (ISR) and preventive home visits are used. Accessibility of the living environment, including the public sphere, is seen to be of crucial importance in maintaining independence (SWE). Several member States are undertaking projects to develop community centres and to improve the accessibility of public transportation (LTU, SWE). Other supportive structures enabling living at home for as long as possible are developing good practices for home help and home nursing (FIN), providing remote assistance for older persons living alone, and the aforementioned offers of support to relatives performing care duties (AUT).
57. Many countries do pre-emptive work to promote well-being and a healthy lifestyle. The importance of preventive action in maintaining quality of life, including health and independence, has been stressed during the past years. Prevention is now perceived to be financially and socially viable. Raising consciousness, health education and the overall promotion of healthy lifestyles are popular means of prevention. A number of member States have programmes focused on reducing the number of home accidents of older persons with avoiding falls being a particular focus (AUT, HUN). Alongside various information campaigns on the effects of exercise, nutrition and drug use, this involves sports and fitness offers (LVA, NLD). The campaigns can take the form of brochures, regular programmes on TV (AUT), enterprise competitions (CZE), or transmissions of recommendations via the Internet (LVA).

58. Countries report commemorating special days related to ageing, for example the International Day of Older Persons (MLT, RUS) and the World Elder Abuse Awareness Day (CAN). These are occasions for awareness-raising, health education and the realization of preventive campaigns (MKD). These events include cultural, educational, art and social activities. One country organizes multiple “Health days” that are combined with screenings, healthy food and information distribution (HUN).

59. Health and ageing related training is offered to older persons in order to promote activity, participation (ISR, MLT) and self-help. Two countries have prepared a vocational guidance and counselling programme, which includes practical training, theoretical education and consultations to motivate and activate older persons (CAN, LTU).

COMMITMENT 8: “TO MAINSTREAM A GENDER APPROACH IN AN AGEING SOCIETY”

60. Most countries have passed anti-discriminatory legislation to ensure gender equality, and one country (ESP) identifies gender equality as a priority area in the context of ageing. Nonetheless, inequalities in pay and participation persist. Data availability on this issue is rather mixed, though a majority of countries has data broken down into gender and age groups. One country (MLT) runs a research and documentation centre open to the public to inform a broader audience about the subject matter, while others are starting research into the gendered division of household tasks (MKD).

61. Many countries have passed or extended anti-discriminatory legislation, in one case even the constitution has been amended (MLT). These anti-discrimination laws form the basis for the establishment of equal opportunity councils. These councils can operate at various levels ranging from firm or local level to national importance. In one case, they provide a direct way to obtain equal pay (GBR). The new laws have also led to an adaptation of school curricula in three countries (ARM, EST, MKD) as well as the inception of university courses dealing with ageing and gender in two others (CZE, ESP).

62. Half a dozen countries provide training classes for government officials and employers to highlight issues in this area and to increase sensitivity (ARM, EST, FIN, LVA, MKD, NLD, SRB). Moreover, four countries (FIN, HUN, LTU, SWE) publicy fund self-employment training and encouragement for women, with one providing expertise from experienced “mentors” (SWE). The same country has also expanded funding in the area, while another has
made breast cancer screening freely available (GBR). Finally, three countries (FIN, LTU, MLT) have created provisions for each relevant budget item to be gender checked before passing.

63. Regarding family and work issues, the UNECE countries have mainly invested in making it easier to combine work and child-rearing. Two countries identify this as a specific area of gender inequality that needs to be addressed (MLT, SWE). Five countries (EST, FIN, GBR, LVA, SWE) have recently expanded childcare provisions through funds or tax breaks for families. Paid parental leave is now commonplace in many countries with some offering extra days if child-minding duties are split between the partners. More flexible work arrangements are also encouraged (EST, GBR, MLT), while two countries are re-evaluating the recognition of child rearing times for pension payments (AUT, SWE). One country (HUN) offers an award to the most family-friendly employer, while another offers special family equality courses to couples (MLT).

COMMITMENT 9: “TO SUPPORT FAMILIES THAT PROVIDE CARE FOR OLDER PERSONS AND TO PROMOTE INTER GENERATIONAL AND INTRAGENERATIONAL SOLIDARITY AMONG THEIR MEMBERS”

64. Many countries recognize that the family remains the prime point of care both for children and older persons though none specifically name this area as a priority. Policies are developed to improve life for those caring for either of these groups or sometimes members of both groups at the same time. Achieving passionate, high-quality care without unduly draining the resources of the caretaker is crucial for intergenerational solidarity.

65. Concerning the promotion of family policy, one country (FIN) states the explicit aim to allow everyone to have as many children as they want through the use of free provisions and financial transfers. While others may not be so forthright, the provision and expansion of unconditional child benefit (sometimes called child care benefit) was mentioned by at least five countries (AUT, FIN, HUN, SWE, SVN). In one (HUN), the benefit is also available to grandparents, should they be the ones rearing the child, while in another it is means-tested (MLT). Three countries offer further free maternity and child services (FIN, MLT, SWE); two grant special monetary allowances for parents of sick and disabled children (SWE, MLT).

66. Another common policy is to make work more flexible, which is done through the option of reduced work time or working part-time in five countries (AUT, GBR, MLT, ROU, SVN). One country also tries to align work hours with the school day and to advance work at home (SVN). Paid parental leave and extra days off when the leave is split between husband and wife are gaining popularity in at least four countries (FIN, GBR, MLT, SWE). Measures mentioned by one country only are the marriage grant (MLT), a special housing allowance (SWE), and close links of parental support schemes with schools (GBR).

67. Caring for an old or infirm member of the family puts a particular strain on an individual. Nonetheless, family care remains the most common type of care for older people. The member States are honouring caretakers through financial and time provisions. Family care benefit usually means paid time off work and is available in at least six countries (AUT, BLR, CZE, FIN, RUS, SWE). In one country, the caretaker can seek “employment” by the municipality, which then covers his or her salary (ROU). Additionally, monetary benefits are available in
many countries (AUT, DNK, FIN, LTU, MKD, NLD, SWE). Normally these are available to family members only and sometimes there are further restrictions such as payouts to people living alone only (MLT) or means tests (HUN). Only one country counts care time as work for retirement purposes (HUN).

68. Other help that is offered comprises training and services for caretakers (ARM, FIN, HUN, SWE), respite care (DNK, LTU, NLD, SWE) allowing caretakers a few days’ break and the provision of in-house help (GBR, MLT, SRB, SVN). To offer relief to caretakers, five countries plan the construction of social care centres (ALB, ISR, LVA, MLT, SRB), usually in the form of day-care centres (ISR, LVA, MLT, SRB).

69. Apart from the family and care programmes, a number of other intergenerational initiatives have been created. Often they are in cooperation with NGOs (ISR, MLT, ROU, SRB, SVN). One country actively encourages public-private partnerships and uses lottery money to support NGOs (FIN), while two others (ESP, MLT) have amended legislation to encourage voluntary organizations and the involvement of older persons in them. Three countries have established new bodies for the promotion of intergenerational solidarity (GRC, NLD, SVN), where in one case even a new ministry was set up. Elsewhere (SRB), a social innovation fund was established to provide new local projects with money. Further projects include a national programme for social protection (MKD), food kitchens serving the needy around the country (MKD), and joint family learning initiatives.

COMMITMENT 10: “TO PROMOTE THE IMPLEMENTATION AND FOLLOW-UP OF THE REGIONAL IMPLEMENTATION STRATEGY THROUGH REGIONAL CO-OPERATION”

70. Overall, regional cooperation has been taking place in various international projects, in the form of sharing of good practices and in research despite not being mentioned as a priority specifically. The UNECE secretariat has facilitated a number of international meetings; data and analysis for monitoring the RIS are provided through cooperation with the European Centre for Welfare Policy and Research in Vienna. Regional cooperation takes place on three levels: between member States, between member States and the UNECE secretariat, and between civil society organizations in the member States.

71. Several countries have hosted international expert meetings, conferences and institutions (AUT, GBR, ESP, MLT, RUS, USA). Others carry out joint projects or finance ageing-related programmes in other member States (AUT, CZE, LTU, ROU, RUS, USA). Most member States have attended and played an active role in the meetings organized by the UNECE secretariat. In addition, a fair amount of collaboration among EU member States is guaranteed through regular council meetings of social ministers.

72. The member States support civil society mainly through funding for organizations, projects or events (AUT, HUN, MKD, ROU). They also enable NGO representatives to attend international conferences and expert meetings (AUT). Furthermore, civil society is closely involved in the policymaking and legislative process in several countries (HUN, ISR, NLD, ROU).
73. The UNECE secretariat has been promoting international collaboration in the field of ageing through the exchange of experience and good practices and capacity development. The United Nations-affiliated European Centre Vienna has been developing tools for monitoring the Regional Implementation Strategy based on a Memorandum of Understanding between the UNECE and the Government of Austria. Austria, Spain and the United Nations Population Fund have provided significant financial support to the ageing related activities in the framework of the UNECE.

74. At the intersection of the member States, the UNECE secretariat and civil society, several networks of research institutes, public institutions and NGOs have evolved. These networks tackle the issues emerging around population ageing. One member state offers training courses for government and NGO delegates from other member States, and thus facilitates increased collaboration in the region (MLT). One country proposed that the secretariat launch a “year of active ageing” in Europe (HUN).

**CONCLUSIONS**

75. Significant policy actions have been undertaken by member States in the areas of all the 10 commitments of the Regional Implementation Strategy, while some commitment areas received considerably more attention than others. Implementation has been concentrated on social and economic policy. Out of the 31 reporting Governments, 12 have explicitly prioritized the area of social protection systems (commitment 4), 12 the area of quality of life and health (commitment 7), and 8 the area of labour markets (commitment 5).

76. Within the framework of commitments 4 and 5, most member States prioritized measures aiming at financial sustainability of social protection systems. Progress in the reform of these systems was reported often through the provision of incentives for citizens to participate in the labour force for longer. To increase the employability of older workers, training, a flexible retirement age, and tax reductions and subsidies for companies were introduced. A high activity level in this area (22 countries report significant activity for commitment 4, 19 do so for commitment 5) shows that the reform of social protection systems is at the heart of ageing-related policies.

77. Many countries have increased the official retirement age or have started initiatives in this direction. These measures are usually complemented by an economic policy that aims at fostering sustainable growth through balanced budgets, employee training and initiatives to increase productivity, as well as reforms of the labour market to increase employment rates.

78. Considerable progress was also reported on the commitment to mainstreaming ageing in all policy fields (commitment 8). Governments increasingly involve citizens by establishing or strengthening national councils where pensioners’ and older citizens’ organizations are represented and are assisting in preparing and monitoring legislation.

79. Participation of older persons is promoted by fostering intergenerational collaboration through volunteer programmes and media campaigns conveying a more positive image of ageing. Improving infrastructure in the housing and transport sectors to provide easy access is another tool to support integration. All in all, member States increasingly devote attention to
participation, 20 reporting on significant activity in this field with four identifying it as a specific priority area. Promoting a participatory approach is also seen as an important area where the civil society and NGOs have a special role. Government involvement in this area frequently focuses on financial support to the non-governmental infrastructure related to population ageing.

80. Most countries have passed anti-discriminatory legislation to ensure gender equality. While commitment 7 was identified as a priority area by 12 countries, 20 have reported significant activity. They invested in making it easier to combine work and child-rearing. Throughout the region, many activities aimed at recognizing the family as the prime point of care for both children and older persons are reported (15 countries). Frequently, policy measures improving life for caretakers, such as paid time off work, monetary benefits and training are employed.

81. Many member States reported on cross-sectoral activities that affect society as a whole, e.g. increasing the employability of the workforce through lifelong learning, for example Universities of the Third Age and training programmes. However, lifelong learning has not yet come to the fore throughout the whole region. Only four countries have a high level of activity in this area, and only two have declared it a priority area.

82. There has been significant international cooperation in the framework of the UNECE in implementing the Regional Strategy. This cooperation has been carried out in the form of exchange of experience and good practices, capacity development, and the development of monitoring tools.