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Shaping the Demographic Change – Together

Over the next few decades, the Finnish society will be ageing fast. Consequently, Finland has prepared for changes in the age structure in a number of ways. In order to rise to the challenge work has been done on several fronts: by raising the employment rate, by prolonging the working careers through a life cycle approach and by increasing productivity. In addition to these, the modernisation of the pension systems as well as efforts to improve the quality and effectiveness of the social and health services have been undertaken.

Recently launched national framework for high-quality services for older people (<http://www.stm.fi/Resource.phx/publishing/store/2008/02/ka1212393066110/passthru.pdf>) sets the scene for mainstreaming ageing in all society functions with the emphasis on health promotion of and preventive services. Thus, the framework pushes ahead with the 'Health in all policies' line. National framework – representing a means of information guidance used in Finland especially since the beginning of 1990' – outlines strategies for boosting quality and effectiveness in three dimensions: (1) promoting health and welfare and developing the service structure, (2) staffing levels and staff skills and management, and (3) old-age living and care environments. As the framework is implemented, the targets it sets for service structure changes will help to promote health and to decrease discrepancies in health as well as to restrain rising health and welfare costs. Ex post assessments of the existing frameworks indicate that municipalities consider them valuable tools in preparing for an ageing society.

The implementation of Finnish old age policy has several interfaces with the theme of this very conference. The intergenerational relationships are strengthened by the suggested health promotion policy actions in many ways – described in the following.

Focus on Health Promotion – Why and How?

Health promotion has both human and cost-restraining aims. It is worth promoting old-age health and welfare and providing necessary rehabilitation because:

- Health and welfare have greater impact on the need for health and welfare services, and the latter's cost and the adequacy of available financing, than a rising number of the older people *per se*,
- The cost-straining effect of health promotion brings about favourable prerequisites for intergenerational solidarity
- Boosting old-age health and welfare helps older people to go on living independently and at home, and to function as active members of the community and society in general,
- There is research evidence showing that prevention, risk management, early intervention and rehabilitation are effective.

The Finnish old-age policy strongly high-lights the importance of increasing the community care – home care and informal care support – and decreasing institutional care. This can be achieved by investing in health. As many older people as possible should be able to live a full, independent and meaningful life in their own homes and in a familiar environment. An accessible built-up

environment and transport system and ready access to public services reduce the need for health and welfare services and thus save on costs. Ensuring older people accessibility in their surroundings as well as means of transport is an important element in encouraging them to remain active and play a real role in everyday life. Free or low-priced opportunities for regular exercise are particularly valuable in strengthening muscles and improving balance. Hobbies, recreations, rehabilitation and access to peer support are of enormous value both to older people themselves and to the families caring for them. By working in close association with NGOs, parishes and voluntary organizations, municipalities can draw on their resources too in supporting old-age participation and an active life.

Draw up a strategy to promote health, increase community care and decrease care in institutions

The Finnish municipalities are recommended to have an old-age strategy approved by its council, with its implementation integrated into the municipal budget and financial plan. The basis for formulating this strategy comprises the different needs and resources of third-age and fourth-age people living in the municipality, and of course local resources. The strategy should be drawn up jointly by the various administrative branches, local people, the third sector, business and industry, and other actors and its implementation monitored and evaluated regularly.

The strategy should include elements in promoting health and welfare such as:

1. Securing successful ageing by supporting participation; maintaining social networks; ensuring opportunities for meaningful activities as well as promoting positive, respectful attitudes to older people in society
2. Promoting healthy lifestyles and preventing disease
3. Reducing discrepancies in health and welfare by recognizing and taking responsibility for the special needs of at-risk groups (those in a weaker socio-economic situation and at risk of exclusion)
4. Supporting independence and security by preventing accidents in the home and at leisure and by using of ethically acceptable technology developed for older people's needs
5. Early intervention in declining health and functional capacity, misuse of intoxicants, violence and abuse, and other social problems.
6. Effective treatment of disease: early identification, treatment and rehabilitation of somatic diseases, including oral health, mental health (especially depression) and memory problems as well as goal-oriented rehabilitation.
7. Reinforcement of gerontological expertise, including geriatric expertise.

These contents – when properly implemented – will increase the possibilities to intergenerational relationships and have an impact on future service needs of older people. Implementation must be, however, regularly followed-up, and actions taken when the goals remain out of reach.

Last but not least

When mainstreaming ageing, all the functions should be built on sustainable ethical base. Old age with dignity calls for conscious value choices that are made concrete in operating plans and budgets as quantitative and qualitative service targets. The main ethical principles ensuring old age with dignity are determined in Finnish old-age policy as follows: self-determination, resource orientation, equality, participation, individuality, and security. What comes to strengthening the intergenerational relationships, the principle of participation is of importance. Participation can be seen from the viewpoint of both the individual and society as a whole. At the individual level, it means making the participation principle visible in services for older people, maintaining and strengthening their active social capacities, and ensuring social cohesion so that people remain full members of their community even in old age. More broadly, social participation means ways in which people can influence the development of the society and environment they live in.