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Economic Commission for Europe**Working Group on Ageing****Ministerial Conference on Ageing**
Vienna, 19 and 20 September 2012**Synthesis report on the implementation of the Madrid
International Plan of Action on Ageing in the UNECE region:
Executive summary, Introduction and Conclusions****Note by Secretariat*****I. Executive Summary****A. The context of the second cycle of MIPAA/RIS implementation**

1. Over the last ten years, the ageing of population was a dominant feature across all UNECE countries. And in the coming decades, the extent and pace of ageing in the region is not expected to abate: people of 65 years old and above are set to account for more than a fifth of total population by 2030 while those of 80 years old and above will make up more than 5 per cent. The median age of the region's population will move up from 37.6 years presently to 41.8 years by 2030.

2. The Madrid International Plan of Action on Ageing (MIPAA) and its Regional Implementation Strategy (RIS), both adopted in 2002, provide the main policy framework to direct the response to population ageing among UNECE member States. It also requires reviewing every five years the progress made in implementing MIPAA/RIS commitments in ten key areas including health and well-being, employment, social participation and intergenerational solidarity.

3. In the present review and appraisal of the developments since MIPAA/RIS was adopted, and in particular during its second implementation cycle (2007-2012), countries marked the positive changes, determined areas for improvement and identified emerging issues that must be addressed in an inter-generationally balanced way in the coming years. It was also noted that implementation of the MIPAA/RIS in the UNECE region during the

* Submitted late due to needs of consultations.

second cycle occurred in an environment of a financial crisis that was accompanied by economic, social and political instability in some parts of the region.

1. Demographic change endures

4. When in 2002 the UNECE countries adopted the Regional Implementation Strategy for the MIPAA, some 154 million people among the region's population of 1.18 billion were aged 65 years or above (13 per cent). Ten years later, the number of people aged 65 years or above has increased to 174.5 million and presently accounts for 14.1 per cent of the region's total population. Out of eight UNECE countries where presently the proportion of people aged 65 years or above is below 10 per cent, only four are projected not to breach this threshold by 2030 (Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan).

2. Life expectancy rises and low fertility rates persist

5. The extent and pace of population ageing depend on trends in life expectancy, fertility and, to some degree, migration. Over the last ten years, the increases in life expectancy at birth and at the age beyond 65 were notable across the region, adding on average three years and nearly a year and a half, respectively. However, in some countries in the eastern and south-eastern part of the region, the recent gains in longevity have not yet fully offset the significant losses in life expectancy of their citizens, particularly men, during the 1990s.

6. The disparities in life expectancy among UNECE countries and between men and women (among and within countries) remain large: at birth, for instance, for men they vary from 79.9 years in Switzerland to 62.8 years in the Russian Federation, for women, from 85.3 years in France and Spain to 73 years in Kyrgyzstan.

7. The average total fertility rate in the UNECE region has dropped to a low level of 1.7 children per woman by 2000. In the past ten years fertility rates marginally recovered in some countries with the average for the region mounting up just below 1.8 children per woman in 2010. Presently, the total fertility rate is below the replacement level (2.1 children) in 45 UNECE countries. In 19 of those countries the rate remains under 1.5 children per woman.

3. Economic and social environment deteriorates

8. In 2002-2007, during the first MIPAA/RIS implementation cycle, the entire UNECE region experienced a period of relatively high economic growth, rising labour market participation and declining unemployment, including that of older workers. At the same time, a number of governments in the region also made significant progress in improving the social security systems, enhancing healthcare and social services.

9. The second cycle of MIPAA/RIS implementation took place in a very different economic environment: under the impact of financial crisis that unfolded in 2008, some more advanced UNECE economies stagnated, while the majority of countries in the eastern part of the region experienced significant downturns in growth. This resulted in a rising inequality, high unemployment, and often intensified informal sector. Countering the impact of financial crisis, governments in many UNECE countries introduced fiscal austerity measures that affected also pensions and various social benefits.

10. Although many countries in the region now seem to be on the path of economic recovery, important challenges remain in ensuring the sustainability of social security systems, strengthening intergenerational relationships, tackling rising inequalities and managing the consequences of migration flows.

B. Main findings from the second review and appraisal of MIPAA/RIS implementation

11. In the second review and appraisal of MIPAA/RIS, most UNECE member States reported major progress in policy areas such as mainstreaming ageing, reforming social protection systems, and further developing health and care systems. However, they also indicated that main challenges remain in these areas, especially in implementing reforms on social protection systems and further developing systems of health and care as well as adjusting labour markets.

1. Mainstreaming ageing

12. A number of countries have developed ageing-related strategic frameworks to streamline policy-making in the future. Both, Armenia and the Republic of Moldova, have benefited from UNECE's assistance in developing Road Maps for Mainstreaming Ageing, providing concrete guidance based on a thorough analysis of the country situation. Several countries have established national-level multi-stakeholder bodies with advisory functions to government that also include older persons or their representatives. Some countries have specifically strengthened the role of decentralized levels in policy-implementation. Anti-discrimination legislation prohibits age-based discrimination in most UNECE countries.

2. Social protection systems

13. Social security expenditures make for a large share of public budgets and they are in the focus of a majority of UNECE member States' policy-making. Finding ways to sustain social protection systems has been one of the priorities in member States. Realising a need to adjust to population ageing and faced with a current economic downturn, a number of countries have taken steps to reform their pension systems, for example by increasing required contributory periods, limiting early retirement options and increasing the retirement age. In general, funded obligatory employment pension schemes financed by contributions of both employers and employees are complemented by social pension schemes based on social security contributions. A number of countries provide social pensions to ensure minimum subsistence levels. Often, the mandatory pension insurance system exists alongside voluntary options so that more and more people are covered from supplementary pension schemes. Challenges remain in the area of implementation of pension reforms. Some countries have had difficulties in developing functioning private pension systems. In addition to redesigning pension systems, several countries have engaged in comprehensive reforms of their social security and welfare systems.

3. Labour markets

14. In many countries, developing strategic frameworks to address population ageing dynamics from a labour market perspective became a high priority. Special attention is given to measures directed toward extending active work lives. Legal frameworks prescribe equal treatment and non-discrimination based on age or disability. The pension legislation in some countries is being adjusted to facilitate working beyond retirement age. Active labour market measures have been directed to employers who can, for example, benefit from subsidies if they employ older unemployed workers. Employees may receive support in the form of job placement services and training. Adjusting the setup of the workplace and allowing for more flexible work time arrangements may be equally important to accommodate the special needs of older workers. Countries have supported entrepreneurship opportunities for older persons, some of them especially targeting older women.

4. Ensuring quality of life at all ages and maintaining independent living, health and well-being

15. Several countries have developed integrated ageing-related strategies or plans with relevance for the health and care sectors, with the aim of making service provision more sustainable and enhancing access to affordable health and care services. Medical insurance coverage ensures access to health care in many countries within the region.

16. To reduce inequalities in access to health and social services, some countries provide a range of services free of charge or at reduced prices for older persons with special needs. Most countries provide a continuum of care, aiming to privilege individual choice and independent living, offering home based care, making efforts to further develop long-term care systems, geriatric and palliative care as well as institutional care for those in need. However, providing access to affordable services continues to be a challenge. Countries have expanded their activities to address challenges around Alzheimer's disease and other forms of dementia. Practically all countries agree to the need of programmes for health promotion and disease prevention.

17. Across the region, work has been done on enhancing quality of care and capacities among care-staff. Increasingly, member States acknowledge abuse and violence against older persons as a challenge and have strengthened their legal frameworks, raised awareness, improved monitoring and provided support. Coordination of services of older persons remains a major challenge and countries have been conscious of the need to promote integrated health care and social services. To expand service provision more and more countries have improved frameworks for the non-profit and the private sectors to play a stronger role.

C. Tasks ahead for the third cycle of MIPAA/RIS implementation

18. The UNECE countries will be entering into the third cycle of implementation of MIPAA/RIS (2013-2017) with distinct awareness of the enduring demographic change and with an increasing recognition of both challenges and opportunities that population ageing generates in the region. The recent economic downturn in many parts of UNECE region will likely to have a lasting impact on social and economic environment in which the MIPAA/RIS commitments will be carried out.

19. 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:

- Issues around 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.

- 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.

20. Implementing MIPAA/RIS in the region has been about using opportunities and addressing challenges related to population ageing. The second review and appraisal of the MIPAA/RIS culminates in the Ministerial Conference which takes place on 19-20 September 2012 in Vienna, Austria, under the motto *Ensuring a Society for all ages: promoting quality of life and active ageing*. The expected outcome document will guide activities in the next cycle of implementation. The Working Group on Ageing provides the institutional framework to facilitate intergovernmental collaboration in this area, providing the framework to exchange experiences and jointly work towards a Society for all Ages in the countries and across the region.

II. Introduction

A. The MIPAA/RIS process

21. The Madrid Plan of Action on Ageing (MIPAA), adopted at the Second World Assembly on Ageing in Madrid in 2002 provides the global policy framework to guide the efforts of countries in response to population ageing. In the UNECE region, member States have devised a more targeted Regional Implementation Strategy (RIS), adopted in the same year in Berlin. The Strategy highlights ten commitments that member States agreed to focus on when implementing the Madrid Plan.

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 intergenerational and intragenerational solidarity among their members
 10. To promote the implementation and follow-up of the Regional Implementation Strategy through regional cooperation
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22. Countries were asked to report on progress made in implementing MIPAA/RIS for the first time after five years, in 2007. Based on common guidelines country reports were collected and compiled into a regional report that was published together with the proceedings of the Ministerial Conference A Society for all Ages: challenges and opportunities which took place in León, Spain, in the same year.¹ With the outcome document of the Conference, UNECE member States recommitted themselves to the policy framework of MIPAA/RIS.

23. The second review and appraisal cycle was launched in May 2011, asking countries to report on developments since 2007. To help national focal points on ageing prepare their reports, Guidelines for Reporting on National Follow-up to the UNECE Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing (MIPAA) were adopted by the UNECE Working Group on Ageing.² The reports submitted to the UNECE Secretariat can be accessed online.³ Information provided through the reports shall form the basis for discussion at the 2012 UNECE Ministerial Conference on Ageing, 18-20 September 2012, Vienna, which will mark the tenth anniversary of the adoption of MIPAA/RIS. Hosted by the Austrian government under the leadership of the Federal Ministry of Labour, Social Affairs and Consumer Protection (BMASK), the theme of the Conference will be Ensuring a society for all ages: promoting quality of life and active ageing.

24. Based on the country reports received, the synthesis report summarizes the main trends of MIPAA/RIS implementation, highlighting progress and identifying challenges. The synthesis report shall thereby inform discussions at the Ministerial Conference which is expected to result in the adoption of an outcome document to shape MIPAA/RIS implementation in the coming years.

B. Submissions

25. Most countries had submitted their reports by the end of 2011, with some reports still incoming in 2012. Submissions were requested in any of the three official UNECE languages, English, French or Russian. A total of 36 reports were received. One report was only submitted in the national language and could therefore only be used partially.

26. Some countries indicated that they have found it difficult to submit their reports within the official deadline of 31 October 2011 due to different factors such as complex processes of involving different ministries and departments as well as the need to acquire approval of different hierarchical levels before official submission. In addition, the guidelines requested using a participatory approach in preparing the report. Such processes take time and where countries have made efforts to take into account stakeholder views this may have contributed to delays in submission. For future review and appraisal processes it will be helpful to allow for more time in preparing the national reports.

¹ UNECE 2008, A Society for All Ages: Challenges and Opportunities,
<http://www.unece.org/pau/pub/mipaa.html>.

² UNECE 2011, Guidelines for Reporting on National Follow-up to the UNECE Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing (MIPAA),
http://www.unece.org/fileadmin/DAM/pau/_docs/age/2011/Policybriefs/Guidelines_on_National_Reporting_in_the_Context_the_2nd_R_A_Cycle_EN.pdf

³ <http://www.unece.org/population-unit-home/areas-of-work/ageing/ageing/mipaa-ris/country-reports.html>.

C. Comprehensiveness

27. Reports were on average 30 pages long, not counting annexes. Some countries provided additional material, such as national ageing plans, information about laws and regulations, programmes and institutional set ups, good practice examples or indicators as annexes (Austria, Belgium, Czech Republic, France, Ireland, Lithuania, Malta, Netherlands, Poland, Republic of Moldova, Serbia, Spain, Tajikistan, Ukraine, United Kingdom).

28. Most reports adhered to the general structure suggested in the guidelines, providing an executive summary, an overview of the national ageing situation, an explanation of the methodology used in preparing the report, an update of activities in each of the ten commitments and finally conclusions and priorities for the future. Most countries that have followed the reporting logic by commitments have reported on all ten commitments. Where reports have deviated from the suggested structure, information was taken into account for the analysis of the relevant corresponding chapter.

29. In general, reports outline achievements and areas of activities and many, but not all, have attempted to also highlight areas where difficulties and challenges remain. Most countries have provided a vision of future activities on MIPAA/RIS implementation. Most countries focus on activities at national level. However, the synthesis report attempts to extrapolate the information provided into advice for the desired role for international cooperation in the UNECE framework and beyond.

III. Conclusions and the way forward

30. Countries have reported progress on implementation of MIPAA/RIS since 2007 in many areas across all commitments. There have been visible efforts to improve the normative framework to promote mainstreaming ageing. The challenge now is to implement this policy framework (Armenia, Ireland, Republic of Moldova, Slovenia, The former Yugoslav Republic of Macedonia, Ukraine). Some countries plan to further work on mainstreaming ageing-related policy-making and on revising and improving national legislation to be more sensitive to matters related to ageing (e.g. Tajikistan, Ukraine). A majority of countries has a well-developed civil society infrastructure in place to represent the interest of older persons – even though available financial means to support civil society may be perceived as too little (e.g. Slovenia). Several countries enhanced institutional capacities by creating relevant structures, such as commissions or councils that discuss ageing from a cross-cutting perspective. Here again, the challenge is to achieve a coordinated approach that sustainably drives and directs policy action and takes into account the views of all stakeholders, including civil society and older persons themselves (Armenia, Republic of Moldova).

31. Another challenge is to maintain the sustainability of public finances to uphold commitments made. Overall, the economic and financial crisis has had serious impacts on ageing-related policy-making in the region. Countries have struggled to uphold their ongoing obligations in social and pension payments but have generally made it a priority not to cut on measures that are meant to protect the most vulnerable from the consequences of the crisis. Economic strategies have aimed at stabilizing the economic situation in general, to create sustainable and equitable growth and reduce poverty (Armenia, Belgium, Canada, Cyprus, Israel, Lithuania, Norway, Republic of Moldova, Serbia, Tajikistan, The former Yugoslav Republic of Macedonia, Ukraine). Overall, towards the end of the reporting period, the economic outlook across the region seems already slightly more optimistic. However, for a number of countries migration remains a major ongoing challenge (Armenia, Lithuania, Republic of Moldova).

32. Some areas are of particular concern to member States. For example they frequently prioritize health and care provisions for their future activities (Belarus, Canada, Finland, Poland, Serbia, The former Yugoslav Republic of Macedonia). Member States will continue to strive towards better integration and coordination of health and social services (Cyprus, Czech Republic, Slovenia, The former Yugoslav Republic of Macedonia, Ukraine, United States). Providing access to affordable and quality health and social services is an important challenge. Therefore, the financial sustainability of the health and social care sector is of utmost importance to uphold service provision. In addition, countries aim to further build up targeted care services and to refine them so they correspond to individuals' needs, building upon the principles of self-determination and self-management of older patients (Austria, Czech Republic, Denmark, Sweden, Ukraine, United States).

33. Enabling older persons to live independently for as long as they can has been a priority declared by many. Illustrating a broad support for concepts such as ageing in place, home-based care and domiciliary services will be further strengthened as will be information accessibility with regards to available services (Belgium, Canada, Iceland, Israel, Sweden, United States). Challenges are found particularly with regards to supporting informal care givers, especially in the family (Austria, Iceland, Malta). Efforts have to be made to achieve inclusion and participation of older persons with reduced mobility, to allow them to maintain social ties and to address the issue of loneliness (Malta, Norway, Poland). Member States are planning to expand community-based services, both in terms of making them available in more regions, including remote areas, and in terms of extending hours and scope of services (e.g. Israel, Republic of Moldova, Serbia, Slovenia, United States). Several countries intend to further develop and diversify the volunteer sector (Belgium, Czech Republic) to enhance social inclusion.

34. An area of special attention will be to design integrated models of long term care. At the same time, countries agree that strategies to further explore the opportunities of eHealth and use of modern technology are needed (Austria, Czech Republic, Denmark, Ireland, Sweden, United Kingdom). Countries subscribe to the need of health promotion and disease prevention programmes, improving the social determinants of health (Belgium, Ireland, Lithuania, Poland, Republic of Moldova, United States).

35. A few member States have mentioned measures to avoid violence and abuse. Several countries will invest more in awareness raising, in combating ageism and old age stereotypes and in changing attitudes, for example with regards to longer working lives. However, perceptions do not change from one day to another and so this will remain an important challenge for the countries in the region (Austria, Czech Republic, Ireland, Malta, Republic of Moldova).

36. To create incentives for staying in work longer, several countries have increased retirement age and abolished incentives for early retirement. Reforms to create pension and social protection systems that are sustainable and equitable for all generations and that ensure minimum subsistence levels and avoid poverty in old age have been key areas of activity. Carrying through and implementing reforms initiated during the reporting period to ensure adequate and secure income in retirement featured prominently among the future tasks listed (Belarus, Canada, Czech Republic, Finland, Lithuania, Netherlands, Republic of Moldova, Serbia, Tajikistan, The former Yugoslav Republic of Macedonia, Ukraine, United Kingdom).

37. Closely related is the focus on developing labour market and employment strategies that reflect the new realities of ageing societies (Belarus, Israel, Lithuania, Netherlands, Norway, Portugal, Republic of Moldova, Serbia, Sweden, The former Yugoslav Republic of Macedonia, United Kingdom). Among the priority areas are measures making it attractive for employees to work longer as well as providing incentives, including financial ones, for employers to keep older persons employed or to newly employ older people who

are seeking jobs. Countries have reported efforts towards adjusting workplaces to the needs of older persons (Czech Republic) or work schedules or to combine work with training and continued education (Belgium).

38. Several countries have worked on strategies for life-long learning to keep the ageing workforce well-adjusted to changing realities at the workplace, although implementing such strategies remains a challenge in some places where it has been difficult to uphold this area against other priorities. However, many of the reports agreed that improving computer literacy of older persons should be a priority to enhance connectivity and provide access to the advantages of modern information technologies (Belgium, Malta, Serbia, United Kingdom).

39. Some countries have paid special attention to gender-related activities, to achieve more equality, to address the specific situation of women often living longer than men and performing a considerable part of the care responsibilities. Further work on finding solutions to reconcile work and family responsibilities including care for older family members is recognized as important (Belgium, Slovakia).

40. Several countries have seen a need to further enhance monitoring and evaluation of MIPAA/RIS and ageing policies in their countries. They point out to a need for better indicators and would like to improve policy-making based on evidence. Overall, the most professional way to develop targeted programmes is to base them on scientific insight. More work is certainly needed to enhance collection of gender and age-disaggregated data and to increase the evidence base for practical projects in different areas (Armenia, Ireland, Norway, Republic of Moldova, Russian Federation, Serbia, The former Yugoslav Republic of Macedonia). Slovenia concretely outlined a scientific agenda which includes establishing a database for the monitoring of long-term care services and expenditures, analysing home-based care provided by public services and studying the active inclusion of older persons in the framework of *the European Year for Active Ageing and Solidarity between Generations* in 2012. Several other countries have mentioned their focus on active ageing, reflecting the current emphasis on the topic in the framework of the *European Year* (Austria, Portugal, Slovenia, Spain, United Kingdom).

41. In general, countries acknowledge the importance of continuous cooperation between countries in the region for sharing experience and best practices, as well as the coordination of activities within the framework of international organizations. Considerable exchange is taking place within the European Union. The UNECE, in turn, remains an important forum for cooperation of EU member States and other countries in the region as emphasized by several countries (Armenia, Lithuania, Republic of Moldova). The need for further capacity building in some areas relating to strategy development and implementation of existing programmes and action plans is stressed (e.g. Armenia, The former Yugoslav Republic of Macedonia). Overall, countries are committed to further implementing MIPAA/RIS. Acknowledging the challenges within their countries, they express strong support for the regionally-coordinated MIPAA/RIS process the next phase of which will be shaped by the decisions taken at the UNECE Ministerial Conference *Ensuring a Society for all ages: promoting quality of life and active ageing*.