

27.10.2016

S2016/02071/FST

Ministry of Health and Social  
Affairs

Sweden

Focal point:

Deputy Director Anna Gralberg

Direct no: +46 8 405 23 19

Mobile: + 46 70 335 23 19

E-mail:

[anna.gralberg@regeringskansliet.se](mailto:anna.gralberg@regeringskansliet.se)

**National follow-up to the Regional Implementation  
Strategy of the Madrid International Plan of Action on  
Ageing (MIPAA) in Sweden**

---

**Executive summary**

In this report, the Ministry of Health and Social Affairs' Division for Families and Social Services sets out the measures that the Government has taken that are judged to have contributed towards implementing the MIPAA in the period 2012 – 2016. In order to incorporate the wide range of initiatives carried out to strengthen the rights of older women and men, a number of government agencies have been involved in drawing up the report, as have representatives of pensioners' organisations.

Compared with other OECD countries, Sweden has an ageing population with a high proportion of people over the age of 80, but also a relatively healthy elderly population. Both men and women enjoy almost twice as many years of health than the EU average, which increases opportunities to extend working life and ensure a sustainable pension system in which pensions are sufficient. Sweden is working to increase opportunities for women and men to remain in work or start work, e.g. by creating incentives through the tax and social insurance system, and through terms of employment in the public and private sector that benefit older workers. In Sweden,

parents are able to receive temporary parental benefit if they need time off work to care for a sick child under the age of 12. Swedish parental insurance also allows older women and men to receive temporary parental benefit to support younger generations. By claiming benefits for care of closely related persons, close relatives and others are also able to receive financial support when caring for people who are severely ill.

Expanded protection against age discrimination entered into force on 1 January 2013. A ban on discrimination on grounds of age now applies not only in employment and education but also in other areas of society such as goods, services, housing, health care, social services, social insurance and unemployment insurance. From 1 January 2015, poor accessibility is also included as a form of discrimination under the Swedish Discrimination Act.

The Government has carried out several initiatives, on the basis of a rights perspective, with the aim that elderly women and men should be able to lead active lives, exercise influence in society and over their daily lives, be able to age in safe and reassuring surroundings in which they retain their independence, be treated with respect and have access to good care and health care. One example is increasing staffing levels in care of the elderly. Staffing is a central factor that affects the quality of care. The Government has earmarked SEK 1 billion (over EUR 100 million) in 2015 and SEK 2 billion (over EUR 200 million) a year to the municipalities for the period 2016 – 2018 to increase staffing levels in care of the elderly. Hand in hand with higher staffing, SEK 200 million (EUR 20.5 million) has been earmarked in 2016 for a training initiative focused on basic level staff working in care of the elderly and with people with disabilities. To facilitate long-term planning for municipalities and county councils, the Government is additionally allocating SEK 10 billion (over EUR 1 billion) a year to the local government sector for 2017 and thereafter with the aim of strengthening welfare and developing the Swedish model.

Sweden is experiencing high population growth and a considerable increase in the need for housing. New investment funding for housing for elderly people has been introduced. This funding seeks to stimulate renovation of existing housing stock for older people and the construction of new housing with the aim of improving accessibility and making it easier for people to stay in their own homes. SEK 150 million (EUR 15.4 million) was allocated for this purpose in 2016.

With the aim of meeting the needs of women and men with dementia and the socioeconomic consequences that the disease brings in its wake, the Government will be drawing up a national strategy on dementia. The Government has also set aside resources to increase knowledge of how to prevent falls in the health and care sector.

The use of assistive technology can increase the opportunities of older people to live independent lives as fully participating members of society. It can also constitute important support for people whose decision-making capacity is reduced due to cognitive disabilities, so helping to develop good care with as few coercive elements as possible. Assistive technology is incorporated as a natural part of the Government's policy for care of the elderly.

In order for society to make the most of the resource that older women and men represent, it is important that older people are enabled in practical terms to continue to develop as people and constantly acquire new skills. Study associations and folk high schools are a national and local arena in which more than a million people are able to meet in a democratic setting to learn and participate in discussions, and to develop their social engagement and cultural interests. This form of adult education embraces diversity and crosses generational boundaries.

The rights of older people are also highlighted within the remit of the Government's international development cooperation. The Swedish International Development Cooperation Agency (Sida) provides core funding to HelpAge International, amounting to over SEK 38 million (EUR 3.9 million) for 2015 – 2018. The funding is based on both a rights perspective and a health and poverty perspective, with a focus on the global development of the rights of the elderly.

It is important that elderly care services are available to everyone in need, women and men alike, irrespective of their socioeconomic, cultural or ethnic background. National guidelines, benchmarking and recurring user surveys, as well as improved procurement skills are tools used to increase expertise, ensure quality and obtain consistent care and health care nationwide. Sweden has a feminist government. The aim of gender equality policy is that women and men, whatever their age, must have the same power to shape society and their own lives, a factor that is particularly important in shaping the Government's elderly policy.

### **National ageing situation**

Sweden has a relatively old population compared with other OECD countries. Just under 20 per cent of the population is over 65, compared with the average for all OECD countries of just under 17 per cent. Sweden also has a higher proportion of the population over the age of 80, just over 5 per cent, compared with the OECD average of just over 4 per cent. However, the proportion of people aged over 65 is increasing more quickly in many other countries compared with Sweden. In 2030 the proportion in Sweden and the average in the OECD are expected to be roughly the same. However, this does not apply to the proportion of the population aged over 80, where Sweden will continue to be one of the countries with the highest proportion of people in this age group. The reason for this is that in addition to a longer lifespan, Sweden also had a baby boom in the 1940s. In 2015 the expected average lifetime was 84 for women and just over 80 for men.

Sweden has an old population but also relatively healthy elderly people. Sweden tops European statistics for the number of people enjoying good health after age 65. Both men and women enjoy almost twice as many years of health as the EU average. For women this is 16.7 for Sweden and 8.6 for the EU on average. The difference for men is 15.2 years for Sweden and 8.5 in the EU overall. Sweden also has a comparatively high rate of participation in the workforce among people aged 60 or over.

In absolute terms, Sweden has very few poor elderly people compared with the rest of the OECD. On the other hand, the proportion with a low economic standard of living, a disposable income less than 60 per cent of the median, is relatively high. This particularly applies to older women. In the group aged 65 and older, 21.7 per cent of women in Sweden have a low economic standard of living compared with 15.7 per cent in the EU as a whole. For men, the figures are 10.3 per cent for Sweden and 11.3 per cent for the EU.

An increasing number of older people are able to remain in their own homes and receive services from municipally run assisted living services. In October 2014 more than 12 per cent of the population aged 65 or over were receiving assisted living services in their own homes, compared with 5 per cent living permanently in special forms of housing. Regarding people aged 80 or over, 59 per cent were receiving assisted living services and health care in the home, which shows an increased need for care among those who remain in their own homes.

## Method

With the aim of making the breadth of the initiatives carried out to strengthen the rights of older women and men at national level more visible, the Government commissioned the Public Health Agency of Sweden, the Swedish social insurance agency Försäkringskassan, the Swedish Agency for Participation, the Swedish Pensions Agency and the National Board of Health and Welfare to report the ways in which their operations are judged to have contributed towards implementing the Madrid International Plan of Action and Ageing (MIPAA) in the period 1 January 2012 – 30 April 2016. The Swedish Agency for Participation was additionally commissioned by the Government to compile the accounts of the other agencies as well as reporting on its own initiatives. All the agencies were urged to work with the Discrimination Ombudsman, the Swedish Association of Local Authorities and Regions, and representatives of civil society in completing this task.

Before the reports were produced, the State Secretary at the Ministry of Social Affairs invited relevant agencies, pensioners' organisations<sup>1</sup> and the Swedish Association of Local Authorities and Regions to a meeting in which the State Secretary emphasised the importance of MIPAA as a key instrument in strengthening the rights of older people. There are a number of human rights instruments that are applicable to the situation of elderly people. The way in which these can be applied from the perspective of older women and men needs to be monitored to a greater extent and MIPAA is an important tool in this context.

### **National actions and progress in implementation of the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy (MIPAA/RIS)**

Through the UN, the European Council and the EU, Sweden has ratified a number of international conventions that govern areas of rights that are relevant to the living conditions of older people. In signing these conventions, Sweden has undertaken to respect, protect and ensure that older people are able to enjoy their human rights. Sweden is also to support the development of systematic work on human rights which pays attention to people who may find themselves in vulnerable situations, e.g. the elderly. The relevant conventions are

---

<sup>1</sup> PRO with PRO Global, SPF Seniorerna and SKPF Pensionärerna attended the meeting

the International Covenant on Economic, Social and Cultural Rights (ICESCR), the International Covenant on Civil and Political Rights (ICCPR), the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), the International Convention on the Elimination of All Forms of Racial Discrimination (CERD), the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT) and, where applicable, the Convention on the Rights of Persons with Disabilities (CRPD).

The Government also has high ambitions in terms of playing a leading role in implementing the 2030 Agenda, in the national and international arenas. The 2030 Agenda seeks to eradicate poverty and hunger, realise universal human rights, attain gender equality and empower all women and girls, and ensure lasting protection for the planet and its natural resources. The sustainable development goals are integrated and indivisible and balance the economic, social and environmental dimensions of sustainable development. When it comes to elderly people, this involves, for example, ensuring that elderly people lead healthy lives, promoting wellbeing for everyone at all ages, and reducing the number of people who die prematurely. Another example is to put the needs of older people in focus in work to make cities inclusive and sustainable. This may, for example, involve developing and providing public transport services on the basis of older people's needs and making green areas and public spaces accessible.

At national level the Government has carried out several initiatives on the basis of a rights perspective with the aim of enabling older women and men to lead active lives and exert influence in society and over their daily lives, to age safely, retaining their independence, be treated with respect and have access to good care and health care.

### **1. Opportunity to work for longer**

In international comparison, Sweden has very high labour force participation and a high employment rate among the population aged 60 years or over, and participation in the labour market has even increased. In 2015 a total of 21.6 per cent of people aged 65–69 were employed and almost 10 per cent of people aged 70–74 were employed<sup>2</sup>. The tendency in today's world of work, however, is towards a higher pace and more stress, which means that increasing numbers of people are unable to work on into their later years due to becoming mentally and physically burned out. Sweden is working to

---

<sup>2</sup> Eurostat

make it easier for women and men to continue working – or to obtain jobs – partly by creating incentives via the tax and social insurance systems and age-friendly working conditions in the public and private sectors. Labour market policies and programmes in Sweden are not generally targeted to specific age groups, but there are some exceptions. One example is New Start Jobs which was introduced in 2007. This programme gives financial support to employers in order to encourage them to hire people who have been out of work for a long time. This programme includes a component to provide special support for older unemployed people, 55 being the qualifying age.

A good working environment is essential if people are to stay healthy and so be capable of working their entire working lives, as well as for their motivation and desire to work after reaching pension age. In 2016 Sweden is participating in the European Agency for Safety and Health at Work's campaign for a healthy and safe environment at work throughout people's working lives. The Government has produced a strategy on workplace health and safety for the period 2016 – 2020 with three areas of focus, one of which is a sustainable working life. A sustainable working life is about long-term initiatives to make it possible for everyone to work throughout their working lives. The Government has charged the Swedish Work Environment Authority with producing a pilot study to analyse the opportunity of drawing up selection criteria for inspection with a focus on highlighting any sectors or workplaces where early retirement can reasonably be attributed to health and safety factors. It has also commissioned the Swedish Work Environment Authority to work with the labour market partners to plan and carry out a series of seminars in conjunction with the European Agency for Safety and Health at Work's healthy workplaces campaign 2016 – 2017. The Swedish Work Environment Authority also has a mandate from the Government to analyse inspection results on the employer's work on adaptation and rehabilitation.

To facilitate a longer working life, Försäkringskassan offers rehabilitation in conjunction with illness. There is no age limit for benefitting from this initiative, which means that the opportunity of elderly people to work longer can also be boosted by rehabilitation initiatives. Other benefits are geared towards people with disabilities. These benefits can be retained beyond official pension age (65), which can make it easier for people to work for longer. Examples of benefits that may be retained include car benefit, assistance benefit and disability benefit.

Initiatives linked to financial incentives are important for enabling people to work for longer. The Swedish Pensions Agency provides information on the financial benefits of working for longer. One key principle is that the more years people spend in the workplace, the more pension they will receive on the day they stop working. Other advantages are that income tax goes down after the age of 65.

## **2. Greater participation by combatting discrimination**

The Government places great emphasis on working with civil society on issues concerning older citizens. In 1991 the Government appointed a national pensioners' committee in which the responsible minister meets the organisations that represent elderly people four times a year. The committee's terms of reference were revised in 2014 and today it comprises six pensioners' organisations. During the MIPAA period in question (2012–2016), the pensioner organisations have been invited to dialogues, partly ahead of the Government's preparations for the 2030 Agenda and on other policy processes at the Government Offices of Sweden that affect the elderly. Cooperation is also carried out at government agency level. For example, the National Board of Health and Welfare has a council for the elderly for contact and cooperation with pensioners' organisations. The council for the elderly provides opportunities for the organisations to contribute factual information towards the National Board of Health and Welfare's inquiries and regulations. The council for the elderly also meets four times a year.

To ensure that older people are fully integrated and able to participate in society, it is important to counter all forms of discrimination due to age or disability. Expanded protection against age discrimination entered into force on 1 January 2013. The ban on discrimination linked to age previously only applied at work and in education, but this has now been expanded to also cover the areas of society – goods, services, housing, general assemblies, public office, care and health care, social services, social insurance, unemployment insurance, government study grants and public appointments.

According to the current Discrimination Act (2008:567) all employers – not only government agencies – are obliged to run goal-oriented work to actively promote equal rights and opportunities at work, irrespective of sex, ethnic origin or religion or other faith. However, there is no requirement that active measures are taken regarding age in the workplace or in education. In order to tackle this, in March 2016 the Government submitted a bill that proposes that work on active

measures should also cover age as grounds for discrimination. The changes will enter into force on 1 January 2017.

There continues to be a great need for knowledge about national minorities and minority languages in different parts of society. The National Board of Health and Welfare has reported that the minorities consider that they have not been given access to care for the elderly in their minority language to a sufficiently high extent. The National Board of Health and Welfare has also set out the initiatives that can support the municipalities in their ongoing work in this respect.

Many older people are disabled in some way, which means that they risk encountering obstacles in their daily lives. Consequently it is important that society is made accessible to everyone at all ages. From 1 January 2015, poor accessibility has been included as a form of discrimination in the Swedish Discrimination Act. The same year, the Agency for Participation revised its publication “Riktlinjer för tillgänglighet – Riv Hindren” (“Guidelines for accessibility – Tear down the barriers”). The guidelines provide a theoretical basis for work on accessibility improvements as well as practical support on how improvements can be carried out. The guidelines have been widely disseminated in the public and private sectors.

In order to raise awareness about ageing as a natural phase it is important to develop non-discriminatory images of older persons. The National Institute for the Study of Ageing and Later Life (NISAL) is a Swedish institution that conducts leading-edge research on key social, political and cultural issues of ageing. While providing basic and advanced academic training within these fields NISAL also contributes to the proliferation of knowledge about ageing. NISAL also participates in various national and international research networks and is in charge of the Swedish contribution to the COST Action IS 1402 together with Karlstad University.

There is no upper age limit to study at a university or an university college in Sweden, which provides the basis for lifelong access to high education and training.

In Sweden older people are severely under-represented in the Riksdag, but not in local government. In the Riksdag, 3 per cent of members are aged 65 or over, and on municipal committees 19 per cent of the members are 65 or over, which is only slightly below the proportion of older people in the population (20 per cent).

The Swedish Agency for Participation has investigated accessibility for older people and people with disabilities in public elections and found that accessibility remains poor in some polling stations.

### **3. Healthy, independent ageing with dignity**

#### Higher staffing levels

Older people in need of care and health care must be able to trust that the care is of good quality and that there are sufficient staff with appropriate education and experience to provide this. Staffing is a central factor that affects the quality of care. The Government earmarked SEK 1 billion (over EUR 100 million) in 2015 and a further SEK 2 billion (over EUR 200 million) in 2016 to increase staffing levels with the aim of raising the quality of care of the elderly, increasing reassurance for elderly people and improving conditions to ensure the care provided is equal in every respect, including gender equality, throughout Sweden. Higher staffing levels can also provide more time for staff to be with the older people and to develop the organisation together. This can also contribute towards a better working environment.

It is important that all older women and men who live in accommodation for the elderly can feel safe, day and night. People's lives, safety and security must never be jeopardised and it is the needs of the elderly people themselves that must lead the way. In order to clearly set out the responsibility of the municipalities when it comes to access to staff in special forms of housing for the elderly, the Government has decided on a new provision in the Social Services Act (2001:937). According to the statute, special forms of housing for the elderly – based on the needs of the individuals – must have access to staff round the clock, who will notice if a resident needs support and help without delay. The new provision entered into force in April 2016.

#### Training initiative

To supplement higher staffing levels, in 2016 the Government is investing SEK 200 million (EUR 20.5 million) in a training initiative geared towards basic level staff who care for the elderly and people with disabilities. The aim of the training initiative is to support the municipalities in their work to develop skills improvement initiatives geared towards basic level staff who care for the elderly and people with disabilities. The initiative also enables development initiatives to reduce strategically important knowledge gaps, including work to prevent falls and initiatives in the area of dementia. The initiative also includes staff whose work involves exercising public authority and

seeks to provide increased knowledge and awareness in this area, particularly from the point of view of equality and gender equality.

The Government has also previously initiated skills raising initiatives. During the period 2011 – 2014 the National Board of Health and Welfare was commissioned by the Government to allocate SEK 974 million (EUR 100 million) as a performance-based government grant to municipalities with the aim of stimulating a skills boost in care of the elderly and people with disabilities. During the period 2013 – 2015 the Government also earmarked SEK 100 million (EUR 10.2 million) with the aim of increasing expertise among managers working with care of the elderly. Evaluations have shown that the level of expertise has been raised as a result of these initiatives.

#### Higher education programmes

The programme Leadership Development for Geriatric Managers aims to provide students with knowledge and skills to work as a manager with a focus on care for the elderly. In addition several of the Swedish universities and university colleges offer a postgraduate programme in specialist nursing with specialisation in elderly care.

#### Investment funding for homes for elderly people

The Swedish population has soared and the need for housing has increased considerably. In 2030 it is expected that 23 per cent of the population will be aged 65 or over.

In July 2016 the Government passed an ordinance on government grants for arranging and providing housing for older people. The grants are to encourage renovation of existing residential properties for elderly people and the construction of new ones, as well as covering modifications to properties in order to enable older people to remain in their homes through improved accessibility and safety. SEK 150 million (EUR 15.4 million) was allocated for this purpose in 2016.

#### Greater support for people with dementia

Dementia brings major consequences for the individual, for their family and for society as a whole. In order to meet the need in the target group and the socioeconomic consequences of the rapidly increasing number of people living with dementia, a widespread knowledge boost is needed in society. The many sectors of society and actors affected by this issue need to work in a more coordinated manner and development work in this respect needs to be better structured. The Government intends to earmark funding in 2016 – 2018 to carry out a survey with the aim of gaining data to serve as a

foundation for long-term, target-focused and coordinated work in the field of dementia. As part of this focus, in February 2016 the National Board of Health and Welfare was commissioned to submit data to the Government by 1 July 2017 at the latest for drawing up a national strategy on dementia diseases with prioritised initiatives for the period leading up to 2022.

The Swedish Dementia Centre is a foundation that can be compared with a liaison office and a knowledge bank in the field of dementia. The foundation is working actively to drive positive developments in care and health care for a more dementia-friendly society. The Government has granted the Swedish Dementia Centre SEK 1.8 million (EUR 185 000) during 2016 so that they can continue to implement relevant training material. The Government has further granted SEK 1.5 million (EUR 154 000) to the Swedish Dementia Register. This is a Swedish national quality register for dementia that seeks to improve the quality of dementia care by gathering data and following up changes in patient groups, diagnoses and treatment.

Behavioural and mental symptoms of dementia affect about 90 per cent of everyone living with dementia at some time. These symptoms may, for example, be aggression, anxiety, apathy or sleep disruption and they cause great suffering, above all for those who have dementia, but also for relatives and care staff. The national quality register, the behavioural and mental symptoms of dementia register, seeks to quality assure the care of people with dementia. The Government has granted Skåne University Hospital's memory clinic SEK 1.5 million (EUR 154 000) to continue developing this quality register.

#### Fall prevention work

The number of accidents involving falls among elderly people has increased in the past ten years. Every week almost fourteen people aged 80 or over die as a result of a fall and almost 600 people injure themselves so seriously that they seek medical attention. Two-thirds of those who suffer falls are women. Older people tend to be injured in the home, in specialist accommodation or in hospital. Previous falls are the biggest risk factor for further falls.

The National Board of Health and Welfare has been commissioned by the Government to increase knowledge of fall prevention in the health and care sector. SEK 7 million (EUR 719 000) was earmarked for this purpose in 2016. The training initiative must be designed such that it involves the elderly people themselves. Cooperation with civil society, particularly organisations that represent elderly people, is also a

strategic part of the work. The job must be carried out on the basis of a gender equality perspective.

National strategy on violence towards elderly people in the care and health sector

In the past 10 years the Government has contributed towards improving quality in preventing, counteracting and tackling violence against elderly people through legislation and different stimulation initiatives geared towards municipalities. The measures have mainly focused on three strategic areas: the dignity and wellbeing of the individual, the quality of care, and help and support to relatives who are carers. In order to further support the municipalities' quality development, in June 2014 the Government decided on a national strategy on violence towards elderly people in care and medical care. The intention of the strategy is to inspire municipalities to raise their sights and improve quality in terms of working to prevent, identify and tackle violence against older people that occurs in the care and health sector.

Initiatives by the National Board of Health and Welfare

The elderly people who are most ill often have extensive disabilities as a result of injury or illness. The Government has invested over SEK 3.4 billion (EUR 350 million) to improve the care and health of the most ill elderly people and during the period 2012 – 2014 the National Board of Health and Welfare has carried out a number of tasks linked to this investment. Among other things, the National Board of Health and Welfare has drawn up support for meeting the complex needs for care and health that exist in this group. The support is geared toward care and health providers, municipalities, county councils and regions.

It is important that elderly care services are available to everyone in need, women and men alike, irrespective of their socioeconomic, cultural or ethnic background. To boost expertise, safeguard quality and achieve uniform care and health care throughout Sweden, since 2012 the National Board of Health and Welfare has drawn up several *national guidelines*. The guidelines that are geared towards decision-makers and the profession contain recommendations regarding musculoskeletal diseases, diabetes care, good palliative end-of-life care and special support for people with dementia.

To attain the overarching goal whereby elderly people nationwide are to receive good quality help and support on the basis of their individual needs, the National Board of Health and Welfare has developed a needs-based and systematic way of working that has

partly resulted in the model “Äldres behov i centrum” (“Needs of the elderly central”). This is a model for processing and documentation regarding care of the elderly in which the life situation of the older person and their need for support are described and documented using the WHO’s International Classification of Functioning, Disability and Health (ICF)

The National Board of Health and Welfare’s web-based platform Kunskapsguiden (Knowledge guide) contains different types of *online training*, including training on medication reviews for elderly people. The often high use of medication among elderly people has led to an increased risk of side effects, such as a higher risk of falls. To reduce this risk, it is important that the elderly people and their relatives are given clear information on drugs and any side effects. Pensioner organisations consider that regular reviews of medication should be carried out at least once a year. The proportion of elderly people in assisted living services who have been prescribed medication that may be considered unsuitable for elderly people continued to fall during 2015. Another example of online training concerns how to prevent, identify and support older people who are the victims of violence.

To support national actors, responsible providers and practitioners in work to promote good care and health care for individuals, the National Board of Health and Welfare has worked with the Swedish Association of Local Authorities and Regions to develop a system of *benchmarking*. This is a system of recurring indicator-based comparisons of quality and resource consumption in health and medical care, social services and public health reported at regional, county council, municipal or unit level. The aim is to encourage county councils and municipalities to analyse their operations, learn from each other, improve quality and improve efficiency. It provides good transparency, can be used for analysis, follow-up and development in the operations of social services and the health and medical sector, and has opened up new opportunities to describe developments in care of the elderly.

With the aim of surveying the opinion of older people about their care and comparing the quality of social services and health care throughout Sweden, the National Board of Health and Welfare has carried out annual nationwide *user surveys* since 2013. The National Board of Health and Welfare’s user survey in 2015 shows that satisfaction is higher among those receiving assisted living services (89 per cent) compared with those who live in specialised accommodation (82 per cent). This can partly be explained by the fact that older

women and men who move into specialised accommodation have reached an advanced age and have poorer health compared with those who remain living at home. The median age for moving into specialised accommodation is 87 for women and 85 for men. The staff receive good scores for their approach both in assisted living services (97 per cent) and in specialised accommodation (94 per cent). The variation between different units and different municipalities is sometimes high, however. Women suffer from loneliness to a greater extent than men, and this is true both for elderly people receiving assisted living services and for those living in accommodation for the elderly. More women than men also suffer anxiety, worry or stress.

Half of the elderly people receiving assisted living services took part in the survey entirely independently and in the group of elderly people who live in specialised accommodation, a third of the questionnaires were filled in by the elderly people themselves. The others received help from someone else with completing the form.

#### Initiatives by the Public Health Agency of Sweden

The Public Health Agency of Sweden has developed a collaborative model for healthy ageing that involves supporting people aged 60–75 to be active and healthy as they advance in years. Through collaboration between county councils, municipalities and voluntary organisations, meeting places and a broad range of physical, social and cultural activities were offered. Meeting in groups is appreciated by many elderly people, with the activities fulfilling a social function and providing a sense of community locally. Those who participated in the activities also think that they improved their self esteem. Evaluations show that cooperation has increased in the four regions that participated and their attitude to health promotion efforts has improved.

#### Initiatives by the Swedish Pensions Agency

The Swedish Pensions Agency carries out regular information initiatives for people at risk of receiving a low pension. The majority of these individuals are women. The Swedish Pensions Agency also puts effort into providing information that all pensioners with low pension incomes can apply for a housing supplement. The agency has developed support that is based on the three life phases of the individual: saving for a pension, planning for a pension and living from a pension.

#### Initiatives by the Agency for Participation

Using assistive technology increases opportunities for elderly people to live an independent life as fully participating citizens of society. The Agency for Participation has collaborated with several agencies and actors, such as the National Board of Health and Welfare, the Swedish Civil Contingencies Agency and the Swedish Association of Local Authorities and Regions, on a Government inquiry on assistive technology. The agency has also coordinated a support initiative to speed up the introduction of digital services in the municipalities, mainly personal emergency alarms.

Assistive technology can also improve the quality of life of people with reduced decision-making capacity. Developments in care and health care for people with dementia have brought new skills and better working methods that are well worth taking on board. The overarching goal is to give people whose decision-making capacity is reduced good care with as few elements of coercion as possible, using an approach in which the individual's needs are central. The Agency for Participation has a mandate from the Government to develop technical solutions and modifications in the home environment that make it easier to care for people with a reduced decision-making capacity.

#### Initiatives by the National Agency for Public Procurement

The Swedish welfare model is built on public funding. Approximately 20 per cent of care of the elderly, however, is privately run. This makes demands in terms of procurement skills such that operations procured match the needs of the individual user and are of good quality. The National Agency for Public Procurement helps in different ways to ensure that welfare gains are attained by purchasing and public tenders being carried out and followed up effectively and sustainably. The agency has been charged with supporting municipalities and county councils in procuring health and care services for the elderly. A number of guidelines have been produced for procuring agencies, including a specification of requirements for assisted living services for elderly people and one for procuring services for people with disabilities. The agency has also surveyed procurement of aids and assistive technology used in elderly people's own homes. Over a three-year period, from May 2013 to May 2016, the National Agency for Public Procurement has had a mandate from the Government to increase skills in municipalities in terms of procuring services geared towards the elderly and people with disabilities. During this period, approximately 1 200 politicians and civil servants from over 100

municipalities have been trained in procuring care and health services for older people.

Initiatives in international development cooperation that help to strengthen human rights for older people

The Swedish International Development Cooperation Agency (Sida) is a government agency that works on behalf of the Riksdag and the Government to reduce world poverty. The work of the agency helps to implement Sweden's policy for global development. From 2015 onwards Sida has provided core funding, over SEK 38 million (EUR 3.9 million) for 2015–2018 to HelpAge International (HAI), a global organisation that works in low and medium-income countries to improve the situation of those aged 60 and over. The funding is given within the remit of the socially sustainable development strategy and is based on a rights perspective and a health and poverty perspective, focusing on global development for the rights of the elderly and social security systems. Sida also intends to continue to support organisations that work with the growing older population and conduct a dialogue on “leaving no-one behind”. Sida provides institutional support to HAI based on its national strategic programme for Bolivia, and Sida's regional team for SRHR in Lusaka has managed a grant to HAI over the past 4 – 5 years. In total SEK 89 million (over EUR 9 million) has been paid out, primarily focussed on older women.

#### **4 Solidarity between the generations**

It is vital to have a lifelong perspective on support and initiatives focussed on the population. Health promotion initiatives and initiatives focussed on children and young people at an early stage are hugely important for what the wellbeing of the ageing population will look like in the future. Well-developed support for older people and good conditions for being able to live independent lives are also of vital importance to the health of the younger population and their opportunity to participate in the job market and build a family, for example. The interaction between a well-developed and secure system for older people is also crucial to increasing the equality and financial independence of women. Since the mid-twentieth century Sweden has actively built a strong welfare system that includes a social security system and support for the elderly. This has been extremely important to Sweden's economic development and social development as a whole. It has also contributed towards equality between women and men and to a relatively high proportion of the female population being in work.

The public pension system is designed, as far as financially possible, to be neutral across the generations. Furthermore, Swedish parental insurance grants temporary parental allowance to the parent who takes time off work to look after a sick child under the age of 12. In addition, older women and men also have an opportunity to claim temporary parental allowance to support younger generations. By claiming benefits for care of closely related persons, close relatives and others are also able to receive financial support when caring for people who are severely ill. This applies as long as they have an income from work.

In 2009 an amendment was made to the Social Services Act (2001:453) whereby the local authority's social committee is obliged to offer support to make things easier for people caring for or supporting a relative suffering from a long-term illness or who is elderly, or supporting a relative with a disability. The National Board of Health and Welfare annually follows up the implementation of the change and the results from 2013 show that support has gradually grown in the municipalities and that the municipalities are applying the provision to care of the elderly to a greater extent.

Study associations and folk high schools are a national and local arena in which more than a million people are able to meet in a democratic setting to learn and participate in discussions, and to develop their social engagement and cultural interests. This form of adult education embraces diversity and crosses generational boundaries. Folk high schools and the study circles and cultural programmes run by study associations bring together women and men of different ages, from Sweden and born abroad. This cross-boundary mix of participants is one of the distinguishing features of non-formal adult education movement and is fundamental to its educational approach. In 2015 62 per cent of the people attending study circles run by the study associations were aged 45 or over. 37 per cent were over 65.

2012 was the European Year for Active Ageing and Solidarity between Generations. The year was mainly celebrated across Sweden in the form of activities arranged by civil society.

As stated above, there is no upper age limit for studying at universities or higher education institutions, so enabling life-long learning.

### **Research funded by Forte with relevance for the accomplishment of MIPAA**

The Swedish Research Council for Health, Working Life and Welfare (Forte) is supporting research concerning different aspects of ageing by several funding instruments. The research funded during the period 2012 – 2016 addresses questions primarily concerning goals 1–3 of the Vienna Declaration. Applications furthermore opened in 2016 for programme grants in Ageing, Demography and Health. Forte is also participating in European and international cooperation aiming to strengthen this research field. The researchers funded are to a high degree actively engaging with society, and Forte is also undertaking measures to stimulate the dissemination of knowledge. Examples of this are: Research Brief No. 3 “Ageing and memory” and Research Brief “Mental illness among elderly” (forthcoming 2016).

### **Conclusions and priorities for the future**

#### **Major achievements**

Major achievements have been observed in the labour market, independent living arrangements and in the low number of people aged 65 years and over who are at risk of ending up in poverty or being severely materially deprived. Healthy life expectancy is also increasing, which favours high labour force participation. Another achievement is the comparatively high number of people who use ICT. Sweden is often ranked as a very good country in which to grow old, but there are still major aspects to be improved. The ageing population is a key issue in many political areas, nationally and locally.

#### **Continuing challenges**

The increase in people over the age of 80 is likely to lead to a higher demand for care of the elderly and constitutes a financial and practical challenge for Sweden. Increased costs may bring about efficiency improvements and changed priorities in the municipalities as well as a need for tax rises. Recruiting sufficient staff will also pose a challenge, particularly as large numbers of people in the elderly care sector are nearing retirement age. A continued high level of employment is therefore vital in order to cope with higher demand for care of the elderly.

There are differences in health in Sweden between those who are financially better and worse off, and between those with higher or

lower levels of education. There are also major regional differences in terms of demographic development, which means that the challenges will vary in different parts of the country. The pensioners' organisations consider that they are seeing signs that older people are being given poorer care and treatment due to their age and that the care provided is not equitable or gender equal. In order to shore up welfare and facilitate long-term planning on the part of municipalities and county councils, the Government is allocating SEK 10 billion (over EUR 1 million) to the municipal sector for 2017 and the following years, which creates an opportunity for the municipalities to improve the quality of the welfare sector. In addition, the Government is allocating SEK 2 billion (EUR 205 million) per year in 2016 – 2018 to increase staffing and improve the quality of care of the elderly.

The Government has also appointed an inquiry charged with producing a long-term national quality plan for care of the elderly. The inquiry will report to the Government in April 2017. The plan will strengthen the development of equitable and gender equal care of the elderly and safeguard good quality and improved efficiency in strategically important areas in the long term. The inquiry will propose measures that seek to identify flexible forms of decision-making in care of the elderly. The starting points for this work are equality, gender equality, security, participation and influence.

A growing proportion of older women and men with great care and health care needs live in their own homes, which makes growing demands in terms of the skills of employees in meeting the needs of older people with greater care needs in assisted living services. Hand in hand with increased staffing levels, the Government is therefore allocating SEK 200 million (EUR 20.5 million) in 2016 for a training initiative geared towards basic level staff caring for elderly and disabled people.

Sweden has a very well developed system of care for the elderly. A considerably higher proportion of elderly people with health problems have access to help in the home or a place in special accommodation compared with almost all other countries. At the same time, many nevertheless feel that there are not enough places in specialised accommodation. Creating more housing solutions for older people is therefore an important policy goal. There is a need for more places with a high level of care but also for more accommodation that can serve as an intermediate stage between people living in their own homes and living in institutions. In July 2016 the Government passed an ordinance on Government grants for arranging and providing

housing for the elderly. The purpose is to encourage an increase in the number of homes for elderly people by building new homes and rebuilding and adapting existing homes. SEK 150 million (EUR 15.4 million) was allocated for this purpose in 2016, SEK 300 million (EUR 30.8 million) in 2017 and from 2018 SEK 400 million (EUR 41 million) will be allocated for this purpose on a permanent basis.

More and more people remaining in good health for longer is important for people's opportunities to extend their working lives. A longer average lifespan makes a longer life in work incredibly important in order to guarantee a sustainable pension system with sufficient pensions and avoid an increase in the number of elderly people living in poverty. Work is in progress to reform the pension system, with the aim of encouraging more people to work longer. This work also encompasses other social insurance and questions on health and safety and labour law. Women still have a lower employment rate compared to men. Working life that is more gender equal therefore needs to be brought about, partly to create more gender-equal pensions. The parties behind the Swedish pension agreement are conducting discussions on this issue.

The design of care of the elderly is in many ways a question of conditions for women. The majority of people working in care of the elderly are women and the majority of users of care of the elderly are also women. Both the Swedish Pensions Agency and Försäkringskassan are constantly working to integrate a gender equality perspective in core operations with the aim that there should be no unjustified gender differences in processing, approach and decision-making.

Sweden has a feminist government. A feminist government makes sure that the gender equality perspective is included in shaping policy on a broad front, both in the national and international arenas. The aim of gender equality policy is for women and men, irrespective of their age, to have the same power to shape society and their own lives. With this in mind, the Government is working in line with four sub-goals:

- An even distribution of power and influence. Women and men are to have the same rights and opportunities to be active citizens and to shape conditions for decision-making.
- Financial gender equality Women and men must have the same opportunities and conditions when it comes to education and

paid work that provides financial independence for the whole of their lives.

- An even distribution of unpaid domestic and care work. Women and men must take the same responsibility for domestic labour and have opportunities to give and receive care on equal terms.
- Men's violence against women must cease. Women and men, girls and boys, must have the same right and opportunity for bodily integrity.