UKRAINE NATIONAL PROGRESS REPORT
ON THE
REGIONAL IMPLEMENTATION STRATEGY
OF THE
MADRID INTERNATIONAL PLAN OF ACTION ON AGEING
2007-2011
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Summary

The socio-demographic policy in Ukraine in the recent five years is characterized by some revitalization and has some achievements evidently supported by the materials presented in this report. The main results of the government development policies and priorities in the area of population ageing in Ukraine are summarized below.

The escalation of the demographic ageing process and the need to strengthen social security of older persons determined a priority need for social care system reforms.

There are yet some achievements in the pension system reform through improving the parameters of its PAYG component, increasing the retirement age, and introducing incentives for the participation of older workers in the labour force. Further steps to reform the pension system in Ukraine and ensure successful adaptation of the labour market adaptation to demographic changes should be taken towards the transformation of retirement into a flexible and gradual process. This should include financial incentives for employers to hire workers in the pre- and post-retirement ages, focusing on education and training of older workers and eradication of age discrimination in favour of younger workers. Interventions are also necessary to maintain and promote health and well-being of older people, improve working conditions and create conducive environment for various economic activities of older people.

In the recent years Ukraine has been actively developing legal frameworks for continuous education and life-long learning, including in the area of vocational training. Innovative forms of social and educational services for the elderly were piloted. The main challenge for the future is further improvement of mechanisms for implementing the legislation and empowering older people to participate in appropriate education and training programmes.

Reducing poverty levels among pensioners’ households is an important achievement of Ukraine over the last five years. Extreme poverty levels among older persons were decreasing at a steady and quick pace. However, the level of deprivation of older people in certain living conditions remains rather high: accessibility of good quality health care, infrastructural facilities, transportation etc. is limited in many cases. Therefore the issue of increasing the living standards and improving the quality of life in older age remains important and topical. To comprehensively address the poverty challenges, on 31 August 2011 the Government approved the draft law "On approval of the national programme for overcoming and preventing poverty by 2015".

Given the adverse health and demographic situation in Ukraine, one of the top priorities of the national development policies are maintaining good health and working ability of older people. The current health care reform is aimed at solving the problems existing in this area, being part of the presidential programme of reforms for 2010-2014 "Wealthy Society, Competitive Economy, Effective State".
Country Information

1. Name of the State

Ukraine

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5. Title, Coding and Adoption Date of a National Strategy, Plan of Action or Other Document on Population Ageing

None
National Situation in Population Ageing

By share of population aged 60 years and above Ukraine ranks among the top 30 oldest countries of the world, sharing the 25-26 position with Norway. By share of persons aged 65 and older, Ukraine is somewhat below (by 1.1-1.2 percentage points) the average figure for the EU countries group and substantially behind the world leaders by the level of ageing (Italy, Germany, Japan). Ukraine’s longevity index, similar to that of the Russian Federation, is on average 5-6 percentage points lower than in countries such as Sweden, France or Spain.

Such differences concerning our country’s position in the global ranking of various ageing indicators are caused by its substantial lagging behind the developed European countries in average life expectancy, as well as by low survival rate into the oldest age in Ukraine (see Annex 4. Population ageing indicators for 2006-2010).

The specific features of the ageing process in Ukraine are as follows:
- the ageing rate is traditionally affected by the ‘demographic waves’ caused, in their turn, by specificity of historical development (war periods, social cataclysms, etc.);
- population ageing was for a long time occurring under the influence of decreasing birth rates and no sustainable positive shifts in people’s life expectancy;
- typical substantial differences in ageing rates by sex and settlement type;
- noticeable regional variation of population ageing indicators;
- a rather high ageing rate is combined with large-scale de-population.

Ageing of Ukraine’s population is accompanied by declining numbers and shares of labour-active population groups, growing demo-economic burden upon able-bodied population, decreasing financial opportunities of social security under general growth of demand for social services on the older people’s part. The process of reduction in the number of able-bodied persons will especially speed up in 2015-2020 because the most numerous generations will exceed the working age limits in that period; in the nearest decades, demographic burden upon the able-bodied population in Ukraine will grow, and the burden structure share caused exactly by persons of post-working age will increase at an increasing rate as soon as after 2020.

Labour force ageing in Ukraine takes place amid its insufficient educational and vocational flexibility, as well as weak development of institutions and traditions of self-education activities and lifelong learning, and is combined with a conservative structure of economy and employment.

The challenges of rapid ageing are aggravated by people’s low living standards and unsatisfactory health, as well as by incompletely shaped market institutions, the existence of which would provide certain opportunities to mitigate negative economic consequences of ageing.
Methodology

In the course of the study on Ukraine’s implementation of the Madrid International Plan of Action on Ageing (MIPAA) and its Regional Implementation Strategy (RIS), quantitative and qualitative approaches to policy assessment on population ageing were combined.

A transverse analysis method prevailed in quantitative information analysis: it considered the outcomes of the policy measures implemented during the period under review (last five years) in various sectors such as social protection of older persons, maintenance of their health and well-being, development of lifelong education, efficient employment, achievement of gender equality, securing family and social integration of the elderly, etc. The analysis involved a broad range of information sources (data from the State Statistics Service, departmental statistics of the Ministry of Health, the Ministry of Social Policy, the Pension Fund, the Ministry of Finance, the Ministry of Education and Science, Youth and Sport, etc.), and of statistical methods for information processing. Some policy measures were also studied with a longitudinal analysis method.

To assess the efficiency of social programmes existing in Ukraine and aimed at older people, a special methodology for their efficiency assessment was developed by combining quantitative and qualitative approaches. In particular, quantitative analysis used population poverty indicators and their behaviour whereas qualitative analysis involved results of a special modular population survey on efficiency of social assistance programmes.

The study also used a ‘top-to-bottom’ approach by carrying out (with involvement of professional sociologists) a special nationwide survey of older persons using the in-depth interview method (September 2011). One of the survey objectives was to find out the older people’s opinions on their treatment by the society and the State as well as to obtain their appraisal of the state policy on population ageing.

To analyze the state of affairs in certain policy implementation areas (particularly on securing family inter-generational solidarity, reducing the older people’s rate of poverty and deprivations in living conditions, etc.), results of a number of socio-demographic population surveys, carried out in Ukraine during 2009-2010, were also involved.

To prepare inputs for the report within the framework of a joint project by the UN Population Fund in Ukraine and the Ministry of Social Policy of Ukraine “Supporting the Implementation of the Madrid International Plan of Action on Ageing in Ukraine”, a national consultant was engaged. Elaboration of the report involved all the public authorities, a number of academic institutions and non-governmental organizations (see Annex 2). The draft report was discussed at a round-table in the Ministry of Social Policy on 23 September 2011 involving all the stakeholders – representatives of public authorities, non-governmental sector, academic institutions, and international organizations – with their proposals and comments taken into account.
Besides, an expanded report was prepared containing broad factual materials for the evaluation of implementation of the state policy on population ageing; it will be published and distributed among public authorities and society.

**Review and Appraisal of National Follow-Up to Regional Implementation Strategy of the Madrid International Plan of Action on Ageing**

Key laws of Ukraine concerning older persons include law on Pension Provision; on Basic Foundations of Social Protection of War Veterans and Other Older Persons in Ukraine; on the Status of War Veterans and Guarantees of Their Social Protection; the Basics of Legislation of Ukraine on General Mandatory State Social Insurance; on General Mandatory State Pension Insurance; on Non-state Pension Provision; on Social Protection of War Children; on Social Services; on Measures for Legislative Provision of Pension System Reform; on Amending the Basics of Legislation of Ukraine on Health Care to Improve Provision of Medical Care. In pursuance of these laws, a number of the Cabinet of Ministers resolutions were issued concerning procedures and mechanisms for payment of compensations, preferences, cash benefits, etc.

The programme documents that embody public response to ageing problems and concern older persons include: the Strategy of Demographic Development of Ukraine for the Period until 2015 and the Action Plan for its implementation; the Programme of Economic Reforms in Ukraine for 2010-2014; the Concept of the State Target Programme for Development of Palliative and Hospice Care for 2010-2014; the draft Concept of the Nationwide Programme *Health 2020: Ukrainian Dimension*; the Concept of Reform for the System of Social Services (for 2012-2020) and the Action Plan for its implementation. The Concept of the National Action Plan on Population Ageing has been drafted but not yet adopted.

Core central public authorities for implementation of the MIPAA/RIS include: the Ministry of Social Policy of Ukraine, the Ministry of Economic Development and Trade of Ukraine, the Ministry of Education and Science, Youth and Sport of Ukraine, the Ministry of Health of Ukraine, the State Statistics Service of Ukraine, the State Service for Persons with Disabilities and Veterans, and the Public Employment Centre.

**MIPAA RIS 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**

The ageing process in Ukraine coincides with a period of social transformations. During the economic growth period of 2000-2008, opportunities for extremely necessary restructuring of Ukraine’s economy and moving it onto a development path based on investments and innovations were not properly used. As estimated by the Institute of Economics and Forecasting, National Academy of Sciences of Ukraine, the observed
economic growth actually became not an outcome of systematic reforms but a consequence of impact caused by favourable short-term factors, therefore GDP increase behaviour in Ukraine was unstable.

A widespread flaw in a number of national decisions (programmes) concerning social protection of the population consists of their declarative nature as well as absence, in some cases, of separate targeted financing for implementation of programmes, which makes proper supervision of their realization impossible.

The Programme of Economic Reforms declares necessary structural reforms to lay a foundation for sustainable and long-term economic growth; results of the reforms will determine, in particular, possibilities and speed of addressing the Ukrainian population ageing problems. It is a stable economic environment, sustainable development tending to cause labour productivity growth and create new opportunities to apply labour, that eventually brings benefits to various age groups, shapes a basis for increasing income levels and reducing material and income inequality, provides more acceptable conditions for individual life activities and new opportunities for implementation of health-keeping policy, hence promotes extension of average life expectancy and, particularly, the period of active longevity, life duration and quality in the advanced age.

The above-mentioned programme document also specifies the need and areas of reforms in major social sphere systems – education, health care, pension provision, and social support – based on their social and economic effectiveness. Implementation of in-depth structural reforms in these areas should shape a new social policy model, functioning conditions and development of which will be determined, inter alia, by demographic factors.

Generally, it should be pointed out that large-scale realization of the Madrid Plan requirements and the commitments specified by the Regional Strategy of the Plan implementation requires mobilization of financial resources, coordination of central and local executive authorities, institutions and organizations in addressing ageing-related problems, as well as active organizational efforts to encourage the processes underlying socio-demographic development and society adaptation to the population ageing process.

In order to improve efficiency of public administration in the social sphere, the Ministry of Social Policy of Ukraine was established in December 2010, as part of administrative reform, based on the former Ministry of Labour and Social Policy and the Ministry for Family, Youth and Sports. One of the Ministry’s functions is to improve state policy on demographic development, inter alia raising birth rate and family development, improving people’s health, overcoming adverse consequences of population ageing, and regulating migration flows. Hence, the functions related to formulation of the family and demographic policy are currently concentrated in one state body, which is a positive step towards stronger influence upon the course of socio-demographic processes in Ukraine.
In the process of preparing this report, a comprehensive study was conducted on implementation of the national policy on population ageing, which is to become a basis for decision-making at all public administration levels, including completion of the draft National Action Plan on Population Ageing.

**MIPAA RIS Commitment 2: To ensure full integration and participation of older persons in society**

To analyze the status of meeting this commitment in our country, analysis involved data collected in sociological polls and socio-demographic surveys, information on operating results of the organizations addressing older people’s integration problems, etc.

Results of an all-Ukrainian survey of Ukrainian pensioners by means of in-depth interviews proved that integration of Ukrainian pensioners in society takes place completely due to their indirect desire, as a need for communication, and as a need for being socially useful, necessary and self-realized. The complex of ‘needlessness’ arising in a Ukrainian pensioner as a result of inattention to him/her on the part of the State and society mainly becomes his/her deeply personal problem that can show itself to other people in no way. Older people’s ‘incorporation’ in the system of family relations does not guarantee their social integration at all and often fails to prevent loneliness, sometimes even exasperating it; the pensioners’ aspiration for finding themselves in some socially significant and publicly useful pursuits shows itself first of all in their attempts of continuing their labour activity.

The most widespread ways of older people’s integration in Ukraine are not significant in quantitative terms; a certain share of pensioners remain outside social integration, and for another weighty percentage, social integration is reduced solely to family-based integration. According to results of sociological surveys, most pensioners are not satisfied with the level of attention to them on the part of the State, and appraise its policy towards older persons in our country mainly negatively.

One of the vectors of pensioners’ integration in society consists of their active life philosophy and social activity: some pensioners undertake independently the functions of self-governance and organization of housing self-management, and take care of addressing problems of their block of flats or house, street, or district (this concerns mainly urban pensioners).

Pensioners partly integrate also within artistic groups (art collectives, amateur talent societies, artistic clubs), ideological movements, some or other circles and schools, psychological training centres, etc.; choirs under territorial centres are a special setting for involving elderly people in organized activities.

The majority of older persons in Ukraine feature absolute inability of living for themselves, for their own joy, of being self-sufficient and finding other (not only
labour- and family-related) ways of self-realization. This inability is caused by the stereotyped perception of being on a pension and ageing, which is both deep-rooted in our cultural tradition (‘old people are the foundation of the kin, a pillar of the family’) and fixed by mass consciousness mindsets (‘old age is the most difficult, most complicated period when a person simply lives out his/her last years rather than continues a full-fledged life’).

Overall, dissatisfaction with life, deadaptation, general pessimism, apathy, uncertainty in the future are more noticeable in urban pensioners who complain of loneliness, needlessness, and aimlessness of their existence more often than their rural counterparts. Such a situation is presumably explained both by the fact that rural pensioners are considerably busy with their personal peasant farms and by specificity of communication in rural areas, for example urban communities’ concern about their older people.

Organizations working in Ukraine on integration of older persons include:
- religious organizations that aim their activities at providing social support to older persons; the Caritas network, Ukrainian Greek Catholic Church, and Hesed work in this field best of all other organizations;
- Turbota pro Litnikh v Ukraini (Age Concern Ukraine) all-Ukrainian charitable organization that works to improve life quality for older persons and to ensure their re-socialization by means of involving them in active life and assistance to their peers;
- organizations consolidating elder persons:
  - veterans’ organizations (Organization of Ukrainian Veterans, Ukrainian Union of Afghan War Veterans, Association of Ukrainian Intelligence Veterans, etc.);
  - Union of Nazism Victims’ Organizations;
  - Network of Former Political Prisoners’ Organizations;
  - non-governmental organizations consolidating pensioners on the occupational basis (journalists, engineers, scientists, etc.), and military pensioners;
  - All-Ukrainian Association of Pensioners – a voluntary public association established to meet and protect pensioners’ social, economic, creative, national, cultural, sporting and other interests;
  - other civil society organizations.

**MIPAA RIS Commitment 3: To promote equitable and sustainable economic growth in response to population ageing**

Extreme encumbrance of Ukrainian economy with social payments is a distinct problem for it. As far back as the 1990s, decline of Ukrainian people’s income and living standards provoked expansion of social protection guarantees and enlargement of the range of social transfer recipients, hence it caused unceasing increase in the share of social costs in state expenditure and GDP.
During the economic growth period of 2000-2008, opportunities for extremely necessary restructuring of Ukraine’s economy and moving it onto a development path based on investments and innovations were not properly used. Economic growth was occurring mainly in the tideway of restoration processes, was based on the use of old capacities, conserved an outdated structure of production and employment, and failed to be sustainable. Economic growth benefits were used by various population groups not equally: more and more resources were concentrated in hands of relatively small groups.

Aggravation in Ukraine’s economic conditions during the crisis years of 2008-2009 caused exacerbation of the social sphere situation, and restricted financial capabilities for meeting social commitments declared in the budget; social guarantees in 2008-2009 were jeopardized by consolidated and state budget deficit; however, as soon as in during 2010 and the first half of 2011, certain improvement in budget fulfilment was recorded.

In the structure of budget spending on social protection and security of Ukraine’s population the largest share belongs to expenditures designed for older persons. Meanwhile, the share of transfers aimed at older population is considerably greater than in the EU countries (see Fig. 1 in Annex 4).

The share of socially-oriented expenditures (particularly amid a cut of expenses for economic activities in 2010) was to a great extent increased through disbursement of considerable funds from the state budget to cover the deficit of the Pension Fund of Ukraine; at the same time, the burden on the state budget caused by social payments was growing and causing inflationary consequences.

Considerable amounts of state social commitments, including those related to population ageing, a high share of expenditures designed for older persons, and at the same time insufficient effectiveness of social support for these vulnerable populations in Ukraine dictate the need for urgent reformation of the existing system of pension provision, changes in health care, etc. In-depth structural reforms are envisaged in these fields to lay the foundation of sustainable and long-lasting economic growth.

**MIPAA RIS Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences**

As a pension reform began in Ukraine (2004), laws on the establishment of a three-pillar pension system came into force: I pillar – pay-as-you-go system; II pillar – defined-contribution system of general mandatory state pension insurance (not implemented); III pillar – non-state pension provision on the voluntary basis.

In 2000-2004, the minimum pension was substantially lower than the subsistence minimum for persons who lost capacity for work. In September 2004, a monthly subsidy was introduced that took the pension size up to the subsistence minimum for persons who lost capacity for work. Since 2005, the minimum old-age pension was
established as equal to the subsistence minimum. In 2007, the minimum pension was set at a level 1% higher than the subsistence minimum. Since April 2008, a minimum pension payment no less than the subsistence minimum has been introduced, regardless of pensionable service.

At the same, rather long delay with taking more drastic measures for pension system reform (those being ‘unpopular’), implementation of mainly short-term or ‘cosmetic’ parametrical changes, and defiance of objective long-term threats resulted in extreme unbalance and low efficiency of the pension provision system in Ukraine, and too much complicated the situation with financing of pension expenditure that reached 18% of the country’s GDP in 2010.

The Programme of Economic Reforms 2010-2014 *Wealthy Society, Competitive Economy, Effective State* has opened a new stage in reformation of the national pension system. The Law of Ukraine on Measures of Legislative Support for Pension System Reform, in force since October 2011, specifies the conditions for implementation and operation of a mandatory defined-contribution component that should change the existing pension system structure radically, and provides for a number of actions on parametrical reforms in its pay-as-you-go component (increased necessary pensionable service, greater retirement age, changes in pension indexation procedures, etc.); most actions aim at motivating able-bodied populations to extend their working period and take active part in pension insurance, and at creating equal pension provision conditions for various population groups, including by promoting gender equality in labour and social rights.

The next stage of pension system reform in Ukraine is scheduled for 2012-2013 to improve the procedure of updating of assigned pensions; introduce occupational, corporate defined-contribution schemes for workers employed in jobs with harmful or special conditions of work; continue codification of legislation; and reduce inequality among pensioners.

Transfer of insurance contributions to the Defined- Contribution Pension Fund (DCPF) shall be introduced beginning from the year in which a no-deficit budget of the Pension Fund of Ukraine has been achieved (according to estimates, it can happen in 2013-2014). The retirement age for women shall be increased gradually to the limit set for men (60 years); during the first 3 years, women shall be allowed to retire at 55 years given at least 30 years of pensionable service, in case of dismissal and some other conditions; the retirement age for men working in civil service shall also be raised, to 60 years (beginning from 2013, by 6 months every year). Some measures are envisaged to reduce inequality in pension provision by occupational attribute.

Measures to adjust the health care system to population ageing conditions were also developed in the reporting period.
Signs of an unfavourable medico-demographic situation in Ukraine and of problems in maintaining older people’s health include: high premature mortality rates (especially among men), progressing transformation of diseases into chronic ones (including presence of a few chronic diseases in an older person), low average age at death, and increased mortality from preventable causes. The older population’s state of health has been gradually aggravating: problems are progressing, and diseases prevalence among persons of post-working age has increased by almost a third over the recent decade. Mortality of the older population in Ukraine is noticeably higher than in the EU countries (1.7 times on average); if compared with advanced European countries, the peak excess is typical exactly for the ‘younger’ age group of 60-74 years.

Older people’s mortality patterns in Ukraine have been generally encouraging in recent years. The most substantial decrease in mortality rates is seen in the age of 60-64; decrease in mortality among persons aged 65-69 and 70-74 years is about twice less; yet less is death frequency decrease in the 75-85 years interval.

Regional programmes aimed at preserving health of older persons operate in Ukraine: Section 6 of the Health of the Nation Intersectoral Comprehensive Programme for 2002-2011 deals with health preservation in old age; the Health of Kyivans Intersectoral Comprehensive Programme for 2003-2011 has a section entitled Health Preservation in Old Age.

However, the level of medical and social care provided to older persons fails to meet their real needs neither in quantitative nor in qualitative terms. Lack or imperfection of primary medical care to old people results in emergence of an excessive need for their hospitalization. Besides, preventive work carried out among younger patients is also insufficient, which gradually determines substantial health problems in the old age and the need for long-term care.

The State Educational and Methodological Geriatric Centre under the P.L. Shupyk National Medical Academy of Post-graduate Education organizes and coordinates pre- and post-graduate geriatric training of medical and social workers, volunteers and general public, and provides organizational, methodological, treatment and consultative assistance to geriatric institutions. A thematic cycle on anti-ageing medicine was offered in the official curriculum of a state institution of post-graduate physician education for the first time ever in 2011.

The Concept of the State Target Programme for Development of Palliative and Hospice Care for 2010-2014 has been developed and submitted to the Cabinet of Ministers of Ukraine for consideration; the Institute of Palliative and Hospice Medicine State Enterprise has been established; the measures on palliative care development in Ukraine approved by the Ministry of Health for 2009-2010 have been developed and implemented.
With support from the MATRA project and the UNFPA, the Institute of Gerontology, Academy of Medical Sciences of Ukraine, has begun to create a network of centres in Ukraine for providing informational and consultative support to older persons and for training of the population in the basics of healthy lifestyle and active longevity. With the UNFPA assistance, the Institute of Gerontology has also designed a number of training programmes on improving life quality in the old age, observing older people’s rights, organizing the volunteer movement, ensuring social adaptation and reintegration of older persons, optimizing services for older persons, preparing for retirement, etc. The programmes are intended for staff of the state institutions working for older people, representatives of public organizations and voluntary associations of older persons.

**MIPAA RIS Commitment 5: To enable labour markets to respond to the economic and social consequences of population ageing**

More than 3 million pensioners (about one fifth of their total number) keep working as of the middle 2011 in Ukraine. The situation concerning employment of persons of post-working age has been somewhat more stable recently than that of working-age population, which can to a great extent be explained by widespread employment of older age groups within the less prestigious jobs (with minor competition from labour supply), in the informal economy, and at state enterprises.

Among older workers, persons with a higher educational and qualification level are more often employed. However, whereas a certain part of educated working pensioners hold relatively highly-paid positions within the ‘legislators, senior civil servants, managers’ and ‘professionals’ groups, employment quality of the overwhelming majority of working persons of retirement age is not satisfactory both from the perspective of its productivity and character of labour.

Addressing the problem of the older people’s efficient employment in Ukraine is more problematic compared to developed countries because of the archaic economic structure, prevailing traditional low-technology and labour-intensive productions, widespread outdated technologies and equipment, harmful or arduous conditions of work, which by no means promotes long-term preservation of health and working capacity.

A regulatory legal framework on prevention and prohibition of discrimination on the part of employers on the ground of age (including in job placement per se) has not been properly developed in Ukraine; mechanisms for implementation of existing regulations and supervision of their observance have not been elaborated.

The Law of Ukraine on the Employment of Population provides for additional employment guarantees for certain citizen categories that need social protection and are not able to compete in the labour market on equal terms, including for persons of pre-retirement age (men upon attainment of 58 years, women upon attainment of 53 years),
which are realized by means of a job quota, as nominated by employment centres, for enterprises, institutions and organizations in order to place such persons in a job.

Certain steps have been taken in Ukraine recently to provide incentives for older workers’ participation in labour activities. The Law of Ukraine on Measures for Legislative Provision of Pension System Reform envisages gradual (by six months every year) rise of the retirement age for women and improvement of the mechanism for retirement postponement accompanied by pension size increase: if retirement is postponed by up to 5 years, pensions are increased by 0.5% for each month of work after attainment of the retirement age; if retirement is postponed by more than 5 years, the figure is 0.75% for each month of work.

The same law provides for measures aimed at eliminating any incentives for early retirement: minimum required pensionable service for old-age pension is raised from 5 to 15 years; statutory pensionable service for assignment of the minimum old-age pension is increased from the current 20 years for women and 25 years for men to 30 and 35 years, respectively; service length for military pensioners will be gradually increased (from 20 to 25 years); pension size is decreased by 0.5% for each month of early retirement (for those women who will have, during the period until 2015, an option of voluntary retirement upon attainment of 55 years).

**MIPAA RIS Commitment 6: To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions**

In Ukraine, considerable levels of the population’s training activity are only recorded in age groups below 35 years; functional illiteracy among representatives of older age groups is rather widespread, particularly on mastering of information technology resources, fluency in foreign languages, etc.

A high rate of staff ageing in a number of economic sectors and activities is a painful problem (agriculture, fishing, production and distribution of electricity, gas and water, construction, public administration, research and development, provision of utility and personal services, culture, etc.).

According to the National Doctrine of Education Development in Ukraine in XXI Century, development of a continuous education and lifelong learning system is specified as a priority of state policy on education development, but progress in this field cannot be regarded as meeting modern requirements.

Certain work is underway to involve persons of older working and post-working ages in the vocational training system throughout their labour activities. More than 1 million workers of various age groups improve their skills or undergo retraining on the on-the-job basis annually. The most experienced of them are production trainers and mentors for young workers.
The Government of Ukraine endorsed the Concept of Development of the Workers’ Skills Improvement System for the Period until 2010, and approved an action plan for its implementation. A regulatory legal framework for on-the-job vocational training and its informational and methodological support are being improved; measures are being taken to encourage employers to improve workers’ skills.

The network of post-graduate education establishments includes more than 500 training institutions and units in higher educational institutions. More than 300 thousand specialists pass through the post-graduate education system every year, of them about 50 thousand acquire higher education in 58 specialties; however, the system so far features insufficient training equality and incompliance of the training forms and methods with modern needs and specificities (social and age-related) of its target audience.

A draft Concept of Development of the Lifelong Learning System has been developed, specifying core tasks, objectives and principles, benefits and problematic aspects of lifelong education in Ukraine.

Third Age Universities, an innovative form of provision of socio-pedagogical services, has evolved to a certain extent (in cities such as Vinnytsia, Kovel, Kremenchuk, Kyiv, Lviv, Mykolaiv, Kharkiv, Chernivtsi), there are thematic schools for older persons, etc. However, overall in Ukraine, the training institutions, centres or programmes, which would be specially targeted on the needs of older people, encourage their aspiration for learning something new, and offer opportunities to obtain necessary knowledge and skills, are still not numerous.

**MIPAA RIS Commitment 7: To strive to ensure quality of life at all ages and maintain independent living including health and well-being**

The older people’s rate of deprivations in living conditions remains rather high in Ukraine; the highest rate can be seen among households of single pensioners and households consisting of representatives of the oldest age groups. Older persons living in rural areas have a considerably higher poverty rate in terms of living conditions than urban residents.

Older persons (first of all those living in rural areas) suffer much greater deprivations in access to social infrastructure facilities (lack of retail trade points and health care facilities near their houses, no emergency aid services in their settlements, no regular transport communication with other settlements). Deprivations related to financial incapacity of securing necessary medical treatment in case of a disease are the most widespread among pensioner households.

Poverty in pensioner households has generally decreased over the last five years in Ukraine (*Fig. 2 in Annex 4*). The extreme poverty (destitution) level among persons of post-working age was going down in a more gradual manner and at an outstripping rate.
Besides, poverty among the oldest pensioner groups (75 years and older) has decreased more slowly than among other groups. The situation of the older age groups has been tangibly affected by the financial and economic crisis.

The poverty level of the households that, in addition to pensioners, include persons from other age groups is higher than that of pensioner-only households. It is mixed (multigenerational) households, those bearing a double demo-economic burden, that suffer an increased poverty risk in Ukraine.

One of the typical features of older people’s poverty level differentiation consists of its substantial dependence on the place of residence. The poverty level of rural pensioners of older age groups has been 1.3 times on average higher than that of urban residents in recent years, the destitution level being 1.4 times higher, whereas the differentiation for all pensioner households has been almost 1.7-1.9 times. The worst is the situation of older persons residing in villages and living in mixed multigenerational households.

A specific feature of older people’s poverty in Ukraine, at the same time being an indicator of their general social and psychological deadaptation and unsatisfactory social health, consists of increased subjective poverty. Pensioners are rather pessimistic in estimating their well-being level, and among them, it is single ones of post-working age that most often complain of extreme income shortage.

The following programmes targeted on older persons are in force in Ukraine:

- State social protection of older persons in Ukraine: pension provision; social assistance (in cash and in kind); social services including services at home and in residential institutions. Housing subsidy programmes and privileges, though being general-purpose, also cover mainly older persons;
- A system of privileges (for transport, for payment for housing and utility services, etc.) covers older people categories such as war veterans, war children, old-age pensioners (transport privileges). Total quantity of privileged persons is about 18 million, most of them being older ones.
- Housing subsidies are a form of social protection of low-income population under growing prices of housing, utility services, electricity, gas and other fuels. About 1.8 million families received subsidies in 2010, older single persons being the main recipient group.
- A state system of social services to pensioners, war and labour veterans, persons with disabilities, single persons incapable of working, etc. is functioning. A network of residential social service facilities includes 325 care homes, of them 74 for older persons and persons with disabilities, 39 boarding houses for war and labour veterans, etc.

M.V. Ptukha Institute of Demography and Social Research, National Academy of Sciences of Ukraine, developed a methodology of, and conducted, assessment of social programmes that is a procedure of measuring their direct effects, performance and potential long-term impacts; the goal of the assessment is to provide public authorities
and experts with information on major parameters of programme functioning, their efficiency for users and society, and discover problems and possible negative outcomes.

The assessment of the programmes in terms of their impacts upon aid recipients proved that the programme of privileges and the housing subsidy programmes are the most focused on older people among those operating in Ukraine.

The social impact was evaluated as a programme’s impact upon reduction of the general poverty level or older people’s poverty level; impact upon the target group was measured through reduction of poverty among aid recipients.

The poverty level of privilege recipients (including privileges) is 9.4%, that being considerably lower than the average level and demonstrates a rather high level of anti-poverty protection for this recipient category; percentage of the poor among privilege recipients is 17.4%, which shows weak orientation upon the poor population. 72% of the respondents support the idea of stronger targeting in the privilege system, and 69% deem reasonable to restrict privileges for the categories not belonging to the poor (destitute) population.

Stronger targeting of privileges and social assistance is one of areas in the reforms declared in social protection of the population. The reform envisages for 2012-2013 refocusing operation of the social protection bodies system mainly to provide assistance to families below the poverty line, instead of providing isolated types of social benefits and privileges according to the category-based principle. Information technologies and efficient methods for provision of targeted social assistance and promotion to poor families, widely recognized in international practice, will be developed and implemented.

**MIPAA RIS Commitment 8: To mainstream a gender approach in an ageing society**

This aspect of the ageing problem is particularly topical in Ukraine’s modern social environment where there is substantial sex-based differentiation of the ageing level and women’s considerable numerical superiority among older persons (*Fig. 3 in Annex 4*). Average life expectancy for women in Ukraine is currently 10 years longer than for men; probability of survival into old age is 1.3-1.4 times higher.

The risk of living alone in an individual household is much greater for older women than men, and grows with age, reaching the highest level for persons aged 70 and older. The majority of older persons living alone (more than 4/5) are women.

Lack of any substantial gender misbalance on the ground of education is a distinctive feature of Ukraine. There is an educational sex-based prevalence of employed women over employed men.
In young and middle working ages, gender differences in the level of engagement in economic activities are rather small in Ukraine, however they begin to grow over the threshold of 50 and especially 55 years, which is mainly caused by the lower limit of women’s retirement age and affects their pension levels further on.

Gender disparities remain appreciable in the employment structure in terms of some qualitative attributes, and they show itself in: women’s lagging behind men in the occupation and position hierarchy; gender skew in enterprise development ‘in favour’ of men; noticeable intra-occupational sex segregation by activity; considerable lag of women (including highly educated ones) in terms of wage levels and personal income and generally in lower education return for women.

A woman’s wage in Ukraine is currently 22.2% on average lower than man’s. Yet greater is a gap between men and women in terms of income from entrepreneurial and individual labour activities. Women’s average pension is only 69% of men’s.

Another gender-related ageing aspect in Ukraine shows itself in women’s greater subjection to violence (particularly family violence) and in the fact that it is older women that more often become victims of crime (112,175 victims of various crimes in 2010 included 14,293 female pensioners).

Activities for improvement of the regulatory legal framework to secure gender equality are represented by adoption of the Family Code and the Law on Ensuring Equal Rights and Opportunities of Women and Men (in force since 2006) that specifies key areas of the state policy on ensuring equal rights and opportunities of women and men; the law enshrines a requirement on conducting gender and legal expert examination of the current legislation. However, no mechanism for implementing all requirements of the law and applying sanctions for failure to comply with it has been elaborated.

The basic policy document in this period is the State Programme on Consolidating Gender Equality in Ukrainian Society for the period until 2010, which recognizes at the nationwide level that discrimination on the grounds of sex persists in Ukraine in all domains of life whereas achievement of equality between men and women is described as a precondition for ensuring stable development of society on the democratic principles. Besides, the programme points out for the first time ever that the gender equality issue is not purely ‘feminine’ but concerns men’s problems as well.

Work was going on to improve and develop gender statistics. Women and Men in Ukraine statistical digests are published, containing statistical information on a broad range of indicators that describe the situation of women and men in various fields. Indicators as broken down by sex are annually presented in other publications as well. The national system of indicators and gender statistics includes 115 absolute and estimated indicators that adhere to European and international statistical standards in terms of their determination methodology.
MIPAA RIS Commitment 9: To support families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members

In Ukraine, working-age persons that provide care for frail older people are granted the working status (e.g. if the right to be assigned housing subsidies is decided); the period of care for an elderly person who, according to a health facility’s opinion, needs permanent outside care or has attained 80 years – if such non-working able-bodied persons receive a benefit or compensation according to legislation – is included in pensionable service (payment of insurance contributions to the Pension Fund is made from the funds of the State Budget of Ukraine). A working-age person caring for a person with group I disability or for an elderly person aged 80 or above, is entitled to be assigned state social assistance (the Law of Ukraine on State Social Assistance to Low-income Families).

Persons who permanently provide social services to older persons as well as to persons with disabilities, children with disabilities, sick persons incapable of self-service (except persons served by social services) are assigned monthly compensation payments.

Ukraine has a system of social patronage and assistance for older persons, including at home. Services to these populations are rendered by territorial centres of attendance and provision of social services to single older persons incapable for work and persons with disabilities, which provide services to people at the place of their residence (at present, 736 such centres attend to almost 2 million people and provide about 50 types of services).

Older persons in Ukraine mostly live within a nuclear family; as age increases, the family composition of population changes, first of all because of a growing percentage of those living alone and a declining share of those living within a nuclear family; according to demographic forecasts, the number and percentage of single older persons should be expected to increase.

According to an all-Ukrainian in-depth survey of pensioners (September 2001), we can state that a modern Ukrainian pensioner is closely interwoven into the structure of family relations; he/she is an important link in this structure, the place of which is determined by foundations of our traditional mentality. Older persons strive to communicate with their own children and grandchildren, deem it necessary to take part in bringing up the grandchildren, and opt to spend more time with their children, grandchildren and relatives.

According to sociological studies, the practice of providing by adult children regular help to older parents in housekeeping, of caring for them, and sometimes of providing financial aid is rather widespread in Ukraine. The older persons in real need of concrete
assistance are rendered it exactly by their children. Pensioners complain more of having not enough communication rather than assistance.

If in our country one is guided solely by capabilities of family care (instrumental support) for the oldest members of society, then, as the share of elderly people grows and other predictable changes in the age composition occur, capabilities of labour-resource provision for long-term care for older persons will be reduced. This is indicated, in particular, by estimates of family support indicators in Ukraine (built on actual data for recent years and indicators of the mean demographic forecast version) (*Fig. 4 in Annex 4*).

The ratio between those providing instrumental support for older persons and potential groups of persons in need of such support will decrease at a rather swift rate in the future, which will undoubtedly actualize the question on who will care (who will pay for care?) for older persons. Generally speaking, there are no proper demographic and economic preconditions allowing one to hope only for a family in this regard.

There is a system of social patronage and assistance to older people in Ukraine, including at home, and the demand for such social services is high: as of 2010-2011, almost 2 million pensioners, single people incapable of work, and persons with disabilities needed social attendance and social services; more than half-a-million of them were in need of assistance at home.

Territorial centres of attendance and provision of social services to single persons incapable for work and persons with disabilities operate in each administrative-territorial area, in cities and district centres of Ukraine. The Ministry of Social Policy takes measures on the continuous basis, inter alia initiated by regions, to expand the list of social services, and assists local authorities in the implementation of innovative forms of social work. New types of social services for older persons and persons with disabilities are designed with account of demand for such services on the part of community members.

Most residential institutions for older persons in Ukraine are subordinated to the Ministry of Social Policy of Ukraine. These residential facilities are mainly represented by boarding houses (general, psychoneurological, special) and geriatric care homes (the latter feature improved conditions of living and assistance). Hence, state expenses for maintenance of boarding houses and care homes for older people are growing but they are still insufficient to ensure not only high-quality functioning of these facilities but also to meet the quantitative demand for their services completely.
MIPAA RIS Commitment 10: To promote the implementation and follow-up of the regional implementation strategy through regional cooperation

Ukraine takes part in all the programmes and activities of regional cooperation for the realization of the MIPAA RIS. The National Focal Point on Ageing is a member of the UNECE Working Group on Ageing.

International cooperation is actively promoted by collaboration between the Ministry of Social Policy and the UN Population Fund in Ukraine, initiated in 2008, to support implementation of the Madrid Plan, particularly: implementation monitoring, training and communication events for public authorities, development of scientific achievements on population ageing. In particular, a national workshop “State policy on ageing. Implementation of the Madrid International Plan of Ageing in Ukraine” was held on 28 September 2008 with support from the UN Population Fund in Ukraine.

To actualize ageing issues in Ukraine and search for efficient ways of addressing related problems in this area, cooperation with the European Centre for Social Welfare Policy and Research (Vienna) was commenced with support from the UN Population Fund and the UN Development Programme in Ukraine.

In particular, a working meeting was held on 4 April 2011 between managers and staff of the Ministry of Social Policy with Prof. Bernd Marin, the European Centre’s Executive Director, and Dr. Oleksandr Sidorenko, former Head of the UN Programme on Ageing, that highlighted the Centre’s activities and scientific research results as well as included discussions on the MIPAA performance monitoring and evaluation.

At the State Academy of Public Administration under the President of Ukraine, a scientific and methodological seminar “Role of scientific research in formulation of state policy on overcoming negative consequences of Ukrainian population ageing” was held on 5 April 2011, involving the European Centre representatives, Bernd Marin and Oleksandr Sidorenko, and national scientific institutions, aimed at increasing the level of scientific research on population ageing and their use in the formulation of national state policy.

At present, an expert team of the European Centre for reform of the pay-as-you-go pension insurance system in Ukraine is working in the framework of implementation of the joint project of the Ministry of Social Policy and the UN Development Programme in Ukraine, Support to the Social Sector Reform in Ukraine.

Overall, Ukraine’s participation in regional cooperation on population ageing issues promotes improving the level of scientific research and practical developments as well as exchanging experience of various countries on population ageing.
Conclusions and Priorities for the Future

Ukraine is a country with high level of demographic ageing: by the proportion of people of 60 years of age and older Ukraine concludes the group of 25 oldest countries of the world. However, due to relative low (compared to European averages) longevity in Ukraine, the share of people older than 70 or 80 years is significantly smaller in Ukraine than in the developed European countries. Population ageing in Ukraine is being influenced by the “demographic waves” (caused by periods of social cataclysms in the country’s history) and has notable gender and territorial differences in the levels of ageing because of the significant gender gap in life expectancy and sustained region-dependent features of demographic processes.

As a country where a rather high level of population ageing is combined with massive depopulation, Ukraine experiences significant difficulties in ensuring social security of older persons. In the future, as ageing accelerates (in 2020-2025, according to the demographic projections), Ukraine will encounter the socio-economic effects of this process such as the increasing demographic (and, respectively, tax) load on the working population, labour force deficit (primarily of qualified workers), general ageing of the labour capital, compromised capacity to ensure long-term care for older persons, growing demand for health care service by older persons, to name only a few. These future challenges yet today require a reconstruction of the national socioeconomic system to meet the demands of the ageing population, along with reforms of social and health care.

The last five years in Ukraine were marked with certain economic hardships caused by both the world economic crisis and long-lingering internal controversies of the country’s socioeconomic development. The more favourable economic conditions of 2002-2007 in Ukraine were not adequately used for restructuring its economy, building base for sustainable and long-term economic development, and closing material well-being and income gaps of the population. Economic deterioration during the crisis years (2008-2009) has led to growing numbers of recipients of social transfers (mainly among older persons) and sharpening situation in the social sphere. The steadfast increase of expenditures on social security of older persons observed during the recent years in the structure of budgetary expenses accompanied by the ineffective social support of these vulnerable groups confirmed the necessity of urgent reforms of the pension system, health care etc.

The pension system reform that proclaims the establishment of a three-tier pension system has been implemented in Ukraine since 2004; however, for a long time its activities were mainly short-term or introduced “cosmetic” parametric changes to the current pay-as-you-go pension system. In 2011 a law came into force that operationalized more decisive and effective measures for the pension system reform, e.g. refined the conditions for implementation and functioning of its mandatory funded component, spelled out the roadmap for the retirement age gradual increase and its equalization for women and men, provided for motivations to remain in the labour force.
and for gender equality in labour and social rights etc. Therefore, this law represents the Ukraine’s unconditional progress in the implementation of Commitments 4, 5 and 8 of the Regional Implementation Strategy of the Madrid International Plan of Action on Ageing. At the same time, the implementation of mentioned commitments in our country cannot be considered full because of the insufficient level of targeting of benefits and care for older persons, unresolved issues with effective employment of older persons, persisting income gap between women and men (including pension amounts), absence of policy measures to transform retirement to a flexible and gradual process and other remaining challenges.

The period after Madrid featured Ukraine with the first steps in the development of education opportunities for older people, laying grounds for establishing non-traditional types and forms of learning for the elderly, and certain progress in life-long vocational training. These steps can be considered a definite contribution to the implementation of Commitment 6 of the RIS/MIPAA, with a reservation that Ukraine’s progress in adapting the national educational system to changing economic, social and demographic conditions is not sufficient yet and not matching the modern requirements.

Activities for securing older people from poverty were implemented in Ukraine during the reviewed period. Despite the generally positive dynamics of poverty and extreme poverty levels of pensioners’ households, households of oldest pensioners (75 years and above) and households with the “double demoeconomic burden” (children and pensioners) still remain in the zone of high poverty risks. Poverty among rural older persons is significantly higher than among urban dwellers, as is the level of deprivation in living conditions (this is especially true for oldest pensioners and older persons living alone). The most widespread deprivation of older persons in Ukraine relates to access to good quality health care and to selected objects of social infrastructure. This certifies the insufficient progress towards Commitment 7 of the RIS/MIPAA that regards the quality of life and independence of older persons, including health and well-being.

The poor status of health of people (general population and older persons in particular) and low longevity remain the most painful historical medical and sociodemographic challenges for Ukraine. Regardless of the recent positive changes in the indicators of survival to older ages and mortality in older age groups, the situation with maintaining good health in older age and, more specifically, prevalence of chronic diseases among the elderly, remains far from desired.

Ukraine has rich traditions in the development of geriatrics and a strong scientific base for the geriatric service and organization of health care for older people. In the reviewed period, a number of measures were undertaken to build a system of geriatric professional training, improve health care services for older persons, and develop palliative and hospice care. Nevertheless, the contemporary level of medical and social care for older persons in Ukraine does not meet the existing demands in both the quantitative and qualitative aspects. At this, the accessibility of good quality medical care to older people has worsened during the reviewed period. Not least this is due to
the fact that maintaining health of older people has not become a true policy priority in Ukraine that is supported with adequate financial and organizational resources. The country now stands at the threshold of health care system reform, and the impact of this reform on the quality, availability and accessibility of health care for older persons appears obscure.

Our country is characteristic of good integration of older persons in the structure of family relationships, which is defined by the basics of our traditional mentality. And while the general influence of globalization processes (americanization, westernization etc.) leads to secularization of authentic cultural norms and hence implies the entire cultural tradition, no significant transformations in the model of intergenerational relationships in a family (both rural and urban) have taken place. There is an existing demand to save and maintain intergenerational family links; traditions of family-based mutual support are widespread: older persons actively participate in bringing up and caring for their grandchildren, adult children mostly regularly help their older parents to cope with household tasks and sometimes provide them with material support. Steps taken by the state towards fulfilling Commitment 9 of the RIS/MIPAA deserve a positive assessment, namely guaranteeing social support to families caring for the disabled older persons and compensatory payments to persons who provide long-term social care to older citizens and other people incapable of self-care. During the reviewed period, the system of social patronage and home-based care for older persons was also further developed.

It has to be ascertained that older people’s social integration and participation, capitalizing on their potential, are insufficient in Ukraine. Older people are mostly perceived as inert elements, and conditions to ensure their effective participation in social life are lacking. The most common ways of social integration of older persons are not weighty enough in the quantitative relation; a certain part of pensioners remain beyond the limits of social inclusion, and for another significant part social integration is limited to family only. Ensuring older people’s integration in the society (Commitment 2 of the RIS/MIPAA) is left in Ukraine to older persons’ own and happens mostly when it is a want of their own. So no surprise that, according to sociological surveys, the majority of pensioners are unsatisfied with the state’s attention to them and negatively assess the Ukrainian state’s policy regarding older persons.

Based on the experience of social policy development and implementation in the area of population ageing in the post-Madrid period, the following most important directions for Ukraine can be outlined and recommendations to improve and upscale this policy suggested:

- Revision and improvement of the national legislation on issues related to older persons, especially with regard to age discrimination prevention, improving social benefits targeting, protection of rights of older persons in family relationships, provision of essential medical and social care for older people. The existing legal base needs enforcement, and for this purpose parliamentary monitoring of the work of executive authorities should be improved.
• Maintaining health in older age and extending the longevity should become a priority of the national policy on ageing. This priority should integrate provision of inclusive access for older persons to means of health preservation and active longevity – e.g. modern means of medical diagnostics, prevention, treatment and rehabilitation. The system of geriatric care in Ukraine requires further development and coordination. This is preconditioned by establishing a unified inter-sectoral system of geriatric education, staffing of outpatient health care facilities with geriatric nurses, increasing wages of geriatricians and geriatric nurses, developing the network of geriatric rehabilitation institutions, establishing coordination bodies on medico-social care for older persons within local executive authorities, mainstreaming geriatrics in the work of all health and social care establishments.

• There is an acute need in expanding the network of palliative and hospice care (according to international expert assessments, the demand/supply gap for hospice beds is 4 to 5 times, even more terminally ill patients require home care), improving its material and technical base, living conditions of patients, developing standards and clinical protocols in palliative and hospice medicine (particularly, for ensuring accessible and effective anaesthesia).

• The Ukrainian system of social security of older persons requires improvement and adaptation to the accelerating demographic ageing. The implementation of the second stage of the pension system reform in Ukraine should provide for improvement of assigned pension revision/actualization mechanisms, implementation of professional and corporate funded pension schemes for workers employed in hazardous working conditions, further codification of pension legislation and liquidation of inequalities between pensioners. In the medium term, the following will be required: increasing retirement age for generations that will participate in the second (funded) tier of the pension system (to 65 years for both men and women), further diversification of pension schemes (options are implementing a basic level of pensions and/or reform of the redistribution-based system into conditionally funded system), integration and complementation of governmental and non-governmental organizations in the area of social protection of older persons, creating enabling conditions for extending the labour life, providing incentives for people to take part in private pension schemes. There is also a need for optimizing the system of social benefits for older persons and its transition to providing more targeted support.

• Creating a friendly environment for older persons remains a challenge. Their demands regarding housing, workplaces, transportation, leisure sites should be fully met. Ukraine should also develop national production of foodstuff, clothing, footwear, furniture, houseware and means of rehabilitation for older persons.
• Situation with provision of socio-emotional and instrumental support to older people requires improvement: increasing the quality of care by social services, raising awareness on the availability and scope of such services, increasing the number of residential buildings and institutions for older persons who cannot receive care elsewhere and improving the living conditions thereof, increasing the availability of psychological, legal and other types of support for older persons. To improve the conditions of family care for disabled older persons, it is reasonable to increase the amount of social compensation paid to an unemployed family member caring for the disabled relative to the level of minimum subsistence (partial payments can be made if an older person receives other social services).

• There is a necessity to develop theoretically justified and practically feasible conceptual approaches to education in older age, to cultivate traditions of life-long self-learning, to adapt the adult education methodologies to the needs of the elderly, accounting for their physiology, psychology, motivations etc.

• Various forms of self-organization of older persons need more active supporting in order to create better conditions for their self-fulfilment (communities, volunteer organizations, clubs, NGOs etc.).

• Public awareness should be raised around the inevitability of demographic ageing, shaping the public attitudes to ageing based on the Ukrainian national traditions of respecting older persons, acknowledgment of older people’s contributions to the society, fostering sense of responsibility for older parents in adult children.

• An important issue is scaling up information, education and communication activities as an integral element of the national ageing policy, and improving inter-institutional cooperation in its formulation and implementation. There should be more information sources on the issues of concern to older persons (especially in villages). Collaboration between governmental and non-governmental organizations should be promoted. International best practices in integrating older persons into social life should be learned and more widely used. Volunteer activities of older persons should be propagandized and supported wherever possible.

Overall, the complete implementation and observance of the UN Principles for Older Persons, recommendations of the Madrid International Plan of Action on Ageing, and commitments of its Regional Implementation Strategy in Ukraine requires mobilization of financial resources, good coordination of work among central and local level executive authorities, institutions and services concerned with life and well-being of older persons. Processes shaping the sociodemographic development of the country and influencing the society’s adaptation to the progressing demographic ageing will require much organizational effort as well.
Annex 1
List and contacts of the organizations directly involved in the preparation of this report

1. Public authorities:
   - Ministry of Social Policy of Ukraine;
   - Ministry of Economic Development and Trade of Ukraine;
   - Ministry of Education and Science, Youth and Sport of Ukraine;
   - Ministry of Health of Ukraine;
   - State Statistics Service of Ukraine;
   - State Service for Persons with Disabilities and Veterans;
   - Public Employment Centre.

2. Non-governmental organizations:
   Turbota pro Litnikh v Ukraini all-Ukrainian charitable organization;
   Organization of Veterans of Ukraine;
   All-Ukrainian Association of Pensioners;
   Lybid International Federation of Business Women.

3. Academic and educational institutions
   1. Research institutions functioning within the system of the Ministry of Social Policy.
      2. M.V. Ptukha Institute of Demography and Social Research, National Academy of Sciences of Ukraine, that has long since been conducting research on the population ageing rates and dynamics, specific features of population ageing in Ukraine, relationships between population ageing and major demographic processes, and developing forecasts of ageing and its socio-economic implications. The Institute also carries out studies on older people’s participation in the labour market and on problems of older people’s living standards and poverty. The Institute takes part in the formulation of policy on older people and in performance monitoring of measures taken in this field.
   3. Institute of Gerontology under the Ministry of Health of Ukraine that conducts research on ageing mechanisms and on factors that slow down or speed up this process, and carries out studies on relationships between the ageing process and age-related pathology as well as on the course of basic diseases in older age. The Institute develops and improves methods of diagnostics, treatment and prevention, rehabilitation measures, and analyzes the demographic situation, living conditions, character of nutrition, labour activities, their impacts on health and life expectancy of the Ukrainian population.
   4. Institute of Economics and Forecasting, National Academy of Sciences of Ukraine that conducts fundamental and applied research on socio-economic problems, including on development of industrial potential and forecast estimates of industrial potential components for short- and long-term periods, as well as on addressing labour market problems, interrelation and interaction between the education system and labour market.
5. State Academy of Public Administration under the President of Ukraine that conducts fundamental and applied research on the formulation of national mechanisms of public administration in ensuring socio-economic development.
List and contact information of organizations involved in the MIPAA RIS implementation in Ukraine

1. Public authorities
Key central public authorities involved in the MIPAA RIS implementation are as follows:

Ministry of Social Policy of Ukraine responsible for the formulation and implementation of policy on labour, employment and social protection of the population, including of family and children. Contact information: http://www.mlsp.gov.ua.

Ministry of Economic Development and Trade of Ukraine charged with the formulation and ensuring implementation of state policy of economic and social development; it defines economic basics of demographic and social development, and elaborates forecasts of Ukrainian population size broken down by sex and age. Contact information: http://www.me.gov.ua.

Ministry of Education and Science, Youth and Sport of Ukraine tasked with the formulation and ensuring implementation of state policy on education, particularly on provision of conditions for acquisition of lifelong education. Contact information: http://www.mon.gov.ua

Ministry of Health of Ukraine charged with the formulation and ensuring implementation of state policy on health care, including securing observance of the citizens’ right to health care, definition of priority areas of health care development, and elaboration of state comprehensive and targeted programmes on health care. Contact information: http://www.moz.gov.ua

State Statistics Service of Ukraine that ensures implementation of state policy on statistics and forms the information base for forecasting and analysis of tendencies and relationships in socio-economic development, organizes and carries out statistical surveys on socio-economic and demographic processes in Ukraine and its regions, develops, improves and implements an evidence-based statistical methodology. Contact information: http://www.ukrstat.gov.ua.

Some other central executive authorities and public bodies are also involved in the MIPAA RIS implementation: the State Service for Persons with Disabilities and Veterans, the Public Employment Centre, oblast and city state administrations, and local governments.

2. Non-governmental organizations

3. Academic and educational institutions

1. Research institutions functioning with the system of the Ministry of Social Policy of Ukraine.

2. M.V. Ptukha Institute of Demography and Social Research, National Academy of Sciences of Ukraine

3. Institute of Gerontology, Ministry of Health of Ukraine

4. Institute of Economics and Forecasting, National Academy of Sciences of Ukraine

5. State Academy of Public Administration under the President of Ukraine
## Annex 4

### Ukrainian population ageing indicators, 2006-2010

<table>
<thead>
<tr>
<th>Indicators</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident population, thousand (as of the year end)</td>
<td>46749.2</td>
<td>46465.7</td>
<td>46192.3</td>
<td>45963.4</td>
<td>45782.6</td>
<td>45598.2</td>
</tr>
<tr>
<td>Average age, years</td>
<td>39.7</td>
<td>39.8</td>
<td>40.0</td>
<td>40.1</td>
<td>40.2</td>
<td>40.3</td>
</tr>
<tr>
<td>Total population increase/decrease, thousand /‰</td>
<td>-351.3</td>
<td>-7.5</td>
<td>-283.5</td>
<td>-6.1</td>
<td>-273.4</td>
<td>-5.9</td>
</tr>
<tr>
<td>Natural population increase/decrease, thousand /‰</td>
<td>-355.9</td>
<td>-7.6</td>
<td>-297.7</td>
<td>-6.4</td>
<td>-290.2</td>
<td>-6.2</td>
</tr>
<tr>
<td>Population aged 0-14 years, %</td>
<td>14.5</td>
<td>14.2</td>
<td>14.1</td>
<td>14.1</td>
<td>14.1</td>
<td>14.2</td>
</tr>
<tr>
<td>Population aged 15-64 years, %</td>
<td>69.3</td>
<td>69.4</td>
<td>69.6</td>
<td>70.0</td>
<td>70.2</td>
<td>70.5</td>
</tr>
<tr>
<td>Population aged 65 years and older, %</td>
<td>16.2</td>
<td>16.4</td>
<td>16.3</td>
<td>15.9</td>
<td>15.7</td>
<td>15.3</td>
</tr>
<tr>
<td>Total demographic burden on working-age population (per 1,000)</td>
<td>657</td>
<td>651</td>
<td>649</td>
<td>651</td>
<td>659</td>
<td>666</td>
</tr>
<tr>
<td>Demographic burden with children</td>
<td>263</td>
<td>256</td>
<td>252</td>
<td>252</td>
<td>253</td>
<td>255</td>
</tr>
<tr>
<td>Demographic burden with persons older than working age</td>
<td>394</td>
<td>395</td>
<td>397</td>
<td>399</td>
<td>406</td>
<td>411</td>
</tr>
<tr>
<td>Longevity ratio, %</td>
<td>13.3</td>
<td>14.2</td>
<td>15.1</td>
<td>15.9</td>
<td>16.3</td>
<td>16.8</td>
</tr>
<tr>
<td>Average life expectancy:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>at birth</td>
<td>67.25</td>
<td>67.93</td>
<td>67.60</td>
<td>68.00</td>
<td>69.63</td>
<td>70.27</td>
</tr>
<tr>
<td>at 1 year</td>
<td>66.97</td>
<td>67.64</td>
<td>67.36</td>
<td>67.69</td>
<td>69.29</td>
<td>69.92</td>
</tr>
<tr>
<td>at 20 years</td>
<td>48.56</td>
<td>49.20</td>
<td>48.94</td>
<td>49.19</td>
<td>50.75</td>
<td>51.38</td>
</tr>
<tr>
<td>at 80 years</td>
<td>6.27</td>
<td>6.36</td>
<td>6.43</td>
<td>6.44</td>
<td>6.53</td>
<td>6.67</td>
</tr>
<tr>
<td>at retirement age</td>
<td>22.9/13.8</td>
<td>23.2/14.1</td>
<td>23.4/14.1</td>
<td>23.5/14.4</td>
<td>23.9/14.8</td>
<td>24.0/14.9</td>
</tr>
<tr>
<td>Probability of survival into:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 years</td>
<td>0.9793</td>
<td>0.9802</td>
<td>0.9790</td>
<td>0.9815</td>
<td>0.9830</td>
<td>0.9833</td>
</tr>
<tr>
<td>60 years</td>
<td>0.7090</td>
<td>0.7235</td>
<td>0.7146</td>
<td>0.7193</td>
<td>0.7592</td>
<td>0.7769</td>
</tr>
<tr>
<td>65 years</td>
<td>0.6220</td>
<td>0.6397</td>
<td>0.6323</td>
<td>0.6385</td>
<td>0.6804</td>
<td>0.6988</td>
</tr>
<tr>
<td>80 years</td>
<td>0.2723</td>
<td>0.2846</td>
<td>0.2853</td>
<td>0.2932</td>
<td>0.3215</td>
<td>0.3305</td>
</tr>
<tr>
<td>Total birth rate, children</td>
<td>1.207</td>
<td>1.301</td>
<td>1.334</td>
<td>1.446</td>
<td>1.460</td>
<td>1.429</td>
</tr>
<tr>
<td>Net reproduction ratio</td>
<td>0.572</td>
<td>0.620</td>
<td>0.633</td>
<td>0.684</td>
<td>0.692</td>
<td>0.678</td>
</tr>
<tr>
<td>Migration balance, thousand /‰</td>
<td>4.6</td>
<td>0.1</td>
<td>14.2</td>
<td>0.3</td>
<td>16.8</td>
<td>0.4</td>
</tr>
</tbody>
</table>

Sources: data from the State Statistics Service of Ukraine and calculations on their basis; calculations based on tables of mortality and life expectancy and on tables of fertility designed by experts of M.V. Ptukha Institute of Demography and Social Research.
Fig. 1. Functional structure of social transfers in the EU countries and Ukraine

Source: data from the Eurostat’s official site and from the State Statistics Service of Ukraine

Fig. 2. Poverty indicators for older people households and all Ukrainian households, 2006-2010

Sources: calculations by experts of M.V. Ptukha Institute of Demography and Social Research
Fig. 3. Indicators of Ukrainian population ageing by sex (as of the beginning of 2011)

Source: calculations based on data from the State Statistics Service of Ukraine

Fig. 4. Indicators of family support in Ukraine, 2009-2011 and until 2050

Source: calculations based on data from the State Statistics Service of Ukraine and on the mean version of Ukraine’s demographic forecast for the period until 2050