

III Implementation of the Madrid International Plan of Action on Ageing in the UNECE region: Review of the first five years

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

country reports and is structured along the lines of those commitments. The country reports are available at UNECE Population Activities Unit website.⁵

This summary frequently refers to the country reports that provide the particular information presented. Such reference is made in cases when the reported policy or trend pertained to one or a few countries, and not made in describing general trends pertinent to a large number of countries. For the sake of brevity, the standard United Nations three-letter country code⁶ is used in these references.

THE 10 COMMITMENTS

of the Regional Implementation Strategy for the Madrid International Plan of Action on Ageing 2002

1. To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages
2. To ensure full integration and participation of older persons in society
3. To promote equitable and sustainable economic growth in response to population ageing
4. To adjust social protection systems in response to demographic changes and their social and economic consequences
5. To enable labour markets to respond to the economic and social consequences of population ageing
6. To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions
7. To strive to ensure quality of life at all ages and maintain independent living including health and well-being
8. To mainstream a gender approach in an ageing society
9. To support families that provide care for older persons and to promote intergenerational and intragenerational solidarity among their members
10. To promote the implementation and follow-up of the Regional Implementation Strategy through regional cooperation.

⁵ http://www.unece.org/pau/age/mica2007/country_reports.htm

⁶ Available at: <http://unstats.un.org/unsd/methods/m49/m49alpha.htm>

Table 1

Countries whose reports have been considered in this document

Country	Abbreviation	Country	Abbreviation
Albania	ALB	Lithuania	LTU
Armenia	ARM	Malta	MLT
Austria	AUT	Netherlands	NLD
Azerbaijan	AZE	Poland	POL
Belarus	BLR	Portugal	PRT
Belgium	BEL	Romania	ROU
Canada	CAN	Russian Federation	RUS
Cyprus	CYP	Serbia	SRB
Czech Republic	CZE	Slovenia	SVN
Denmark	DNK	Spain	ESP
Estonia	EST	Sweden	SWE
Finland	FIN	Switzerland	CHE
France	FRA	The former Yugoslav Republic of Macedonia	MKD
Germany	DEU	Turkey	TUR
Greece	GRC	United Kingdom of Great Britain and Northern Ireland	GBR
Hungary	HUN	United States of America	USA
Israel	ISR	Uzbekistan	UZB
Latvia	LVA		

1. *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”*

Mainstreaming ageing means integrating ageing issues into all policy fields and including the issue in development plans and policy strategies on the national, regional and local levels. It particularly involves policy on economic, labour, health care, education, housing, social, cultural, family, environment and transport matters. While none of the countries specifically mention commitment 1 as a priority area, a majority of countries follow a holistic approach (DEU, ESP, FIN, HUN, MLT, NLD, SRB) in their ageing

policies as set out in national plans, frameworks and strategies on ageing.

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

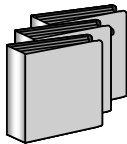
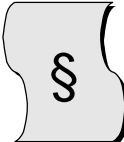
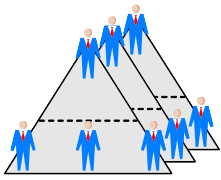
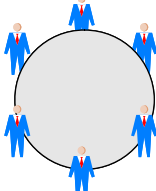


Several policy tools can be considered to mainstream ageing issues, including laws and regulation activities in ministries and municipalities, formation of councils, boards or commissions, identification of an ombudsperson or an office of age discrimination.

Within this policy toolkit, legislation is the most common. Several countries have passed anti-discrimination acts and laws (CYP, DEU, DNK, FIN, GBR, GRC, LTU, NLD, SWE) and may even have adapted their national constitutions or are planning to do so. Most countries have established a national consultative body on ageing issues (e.g. a council, commission or board) that includes relevant stakeholders, such as pensioner representatives, non-governmental organizations (NGOs), the private sector and trade unions (AUT, CZE, DEU, DNK, ESP, FIN, GBR, GRE, NLD, SWE). These bodies are established to ensure the involvement of all affected population groups in policymaking and in the legislative process. One country follows the concept of “champions” –

representatives who stand up for older people’s interests and influence policy decisions (GBR). Three countries mentioned dedicated anti-discrimination/equal treatment authorities (DEU, HUN, NLD). One country has introduced an ombudsperson for equal treatment and is preparing to establish a monitoring and advisory office on age discrimination (CYP, AUT). In Cyprus, an advisory board has been set up to implement and improve legislation for older persons, with representation from government, NGOs and local authorities. In several countries, the local level municipalities play a major role in mainstreaming ageing (DEU, DNK, FIN, NLD, PRT). Furthermore, the European Union (EU) Member States also have to implement EU directives in the field of equal treatment and discrimination, including age discrimination (AUT, CZE, DNK, GBR, GRE, HUN, MKD, MLT, NLD, SRB, SWE). Most Governments mention close cooperation with civil society and the NGO sector both in terms of shaping policy and implementation.

Figure 1

Commitment 1 – Mainstreaming objectives and policy tools to achieve mainstreaming of ageing issues into general policymaking

Mainstreaming Objectives	Policy Toolkit		
<ul style="list-style-type: none"> ▶ Use holistic approach to ageing mainstreaming across several policy fields, including economic, labor, budgetary, health care, educational, housing, social, cultural, family, environmental, transport, security and cultural matters 	 <p data-bbox="760 1360 922 1430">National Plans/ Strategies/ Frameworks</p>	 <p data-bbox="963 1360 1101 1430">Laws/ Constitution/ Regulation</p>	 <p data-bbox="1157 1360 1304 1409">Ministries and Municipalities</p>
<ul style="list-style-type: none"> ▶ Include all relevant stakeholders in decision making and legislative process 	 <p data-bbox="735 1686 873 1759">Councils/ Boards/ Commissions</p>	 <p data-bbox="946 1686 1117 1759">Ombudsperson/ Office on Age Discrimination</p>	 <p data-bbox="1190 1696 1295 1745">EU Directives</p>
<ul style="list-style-type: none"> ▶ Prevent age discrimination 			
<ul style="list-style-type: none"> ▶ Ensure fairness and access to services for all 			
<ul style="list-style-type: none"> ▶ Raise public awareness for ageing related issues 			

2. Commitment 2: “To ensure full integration and participation of older persons in society.”

Commitment 2 demands the full integration of older persons into society. The RIS postulates that a successful country will allow them to participate fully in social, political, economic and cultural activities. This approach rests on the provision of services in three broader areas. First, there should be functional integration of the elderly into the process of political decision-making processes as well as labour market and economic integration. Secondly, governments should commit to providing the infrastructure that enables the elderly to enjoy adequate housing, public transport and cultural participation. Thirdly, governments should facilitate intergenerational integration by encouraging volunteerism and by promoting a positive image of ageing. A final section will deal with the implementation of the participatory approach, a special priority in the implementation of the RIS.

Four countries identified integration as a specific priority (AUT, HUN, LVA, SVN). Nonetheless, progress across countries and topic areas is heterogeneous.

2.1 Functional integration

In the area of political integration, there is almost universal inclusion of older persons in the legislative and political decision-making processes. One country has a law in place aiming to assure the equality of rights and opportunities for people with handicaps and of old age and which shall support their integration into the social life (FRA). The scope of political participation varies from countries with only informal local arrangements (CZE, ISR, SRB) to countries where pensioners' organizations are established partners in the policymaking process (AUT, DEU, EST, FIN, FRA, NLD, ROU, SWE). Older persons also tend to be active voters. One country specifically mentioned that it has made provisions for easier participation of disabled persons in the electoral process (FRA). Despite the pensioners' active voting record, only three countries report that political parties make special provisions for them. Two (SRB, SVN) report the existence of a specific pensioners' party that is active at the local level,

while two (MLT, SVN) report that the major political parties have established specific pensioners sections.

Eleven countries report supporting financially the non-governmental infrastructure related to population ageing (AUT, BEL, CYP, DEU, ESP, EST, LTU, LVA, ROU, RUS, SWE). In several countries, organizations of war veterans have a significant role in this infrastructure (AZE, BLR, RUS). One member State (AUT) offers a fixed funding formula with government support pegged to the number of people aged 60 and over, which allows an NGO to maintain funding even when catering for a greatly increased number of pensioners. However, one country reports significant legal obstacles to forming NGOs (TUR) while another (SVN) reports significant obstacles to volunteering by means of a high tax burden on income from voluntary work.

In terms of labour market integration, progress is reported in the area of encouraging pensioners to remain integrated in their work context and to use their experience efficiently. One country (FRA) has a national concerted action plan in place in support of the employment of senior citizens, which is seen as a means to their integration into the social and economic life. About one third of the country reports mention incentives to employers and/or employees to extend the working life beyond the mandatory retirement age. Most early retirement provisions are cut back. Six countries (CHE, ESP, FIN, MKD, SWE, USA) report a reduction of the risks of being removed from the place of work that specifically affect older persons. Six countries (CYP, DEU, ESP, EST, PRT, USA) report having made the retirement age more flexible, allowing able and willing employees to continue working beyond mandatory retirement age. Other popular methods of flexible retirement are the practices of subsidized part-time employment and phased retirement (FIN, FRA, NLD, USA). Three countries (CAN, DEU, EST) have programmes to increase the employability of older workers through training, while some offer a wage subsidy for employers offering jobs to low-paid workers over 54 years old. Another option is a

joint platform of employers and employee associations dealing with the matter (AUT).

Economic participation should involve labour market participation as well as recognizing the special product and service needs of elder customers. However, only one country gives its pensioner representatives a seat on the domestic customer council (AUT) and a few provide pensioners with an institutionalized say in service provision (e.g. FRA). In one country (DEU), the law was amended to assure quality of care-giving in nursing homes and other consumer services. Two countries (BEL, DNK) report that care homes must have standing inhabitant committees that can directly influence the provision of services.

2.2 Infrastructure

To ensure that older persons can participate satisfactorily in society, the State needs to provide them with infrastructure allowing participation. This involves delivering the financial and physical means to combat exclusion in the areas of housing, public transportation and cultural activity. There are successful infrastructural initiatives in many countries. However, accessibility of these services, especially in rural areas, is recognized as a problem in six countries (DEU, FIN, HUN, MKD, PRT, SVN).

Financial support for housing measures can take various forms, such as a heating subsidy (ROU), a housing benefit (CAN, CYP, NLD, USA), the offer of discounted repair services to older persons (CYP, GBR, MLT), or funding for the remodelling of homes to make them accessible for persons with disabilities (FRA, HUN, MLT). Moreover, some countries (CYP, CZE, DEU, ESP, EST, SVN) are committed to improving the physical availability and accessibility of housing for seniors. One country is doing intensive research into improving home technology adapted to older persons needs (AUT). Furthermore, two countries offer discounted medical products to older persons (EST, ISR). In one country (DEU), a “model housing” project incorporates new designs and concepts to promote self-determined and independent lifestyles for older people.

Another area that is crucial to the inclusion of older persons is the provision of affordable and accessible public transport. At least 10 countries (AZE, BLR, CYP, FRA, GBR, ISR, NLD, ROU,

RUS, UZB) offer their seniors free or discounted transport, with one even offering a wide range of free national rail tickets that can be paid out in cash when not used (ROU). The introduction of low-floor buses and improved-access trains is part of development plans in four countries (CZE, ESP, EST, SWE) at different levels of proliferation.

Five countries (AUT, CYP, ISR, LTU, NLD) support their elderly in participating in cultural life through subsidized theatre tickets and reduced fees for other cultural activities and courses. In Cyprus, a “social card” is made available to older persons, and reduced tickets to cultural events and grants are made to cultural “creators”. Two countries organize cinematic activities such as a festival for older persons (CZE) and intergenerational cinema circles (BEL). One country (FRA) highlighted that all institutions of teaching and learning have to be made accessible for persons with handicaps.

2.3 Intergenerational activity

An important area with respect to improving the integration and participation of older persons in society is the fostering of intergenerational relations and a more positive image of ageing. This is done along the broad lines of media campaigns and support for volunteering organizations. The vast majority of countries have some sort of image campaign in place to promote an image of the older population as active contributors to society. This may involve schooling media workers about undesirable stereotypes (AUT, ESP) and the airing of positive TV programmes (FRA). Many countries also draw attention to the issue by celebrating special days (AUT, CAN, DEU, FIN, GRE, HUN, ISR, LVA, MKD, SVN) or even a whole week (FRA) dedicated to older persons. The latter country (FRA) has a specific organization with the aim of enhancing intergenerational activities through the publication of guidelines and an online best practice database as well as through an intergenerational holiday scheme.

A further area of intergenerational exchange is the voluntary sector. Many countries offer financial support to volunteer organizations that play an important role in offering help to older persons. Volunteers can play an important role in caring for older persons without close relatives.

Three countries (DEU, ISR, USA) make particular use of volunteers for care and support, while many others (AUT, DEU, GBR, SWE, HUN, DNK, NLD) mention supporting volunteer organizations that help older persons. One country (NLD) contemplates the introduction of mandatory community service for high school students.

In comparison, there are fewer initiatives encouraging older persons to use their knowledge and skills by volunteering themselves (CAN, DEU, FRA, LTU, USA). Only three countries (CAN, DEU, USA) directly encourage this practice, with one other offering intergenerational art courses (LTU) and one encouraging the production of an intergenerational newspaper (EST). Another (FRA) has an organization in place to actively support the

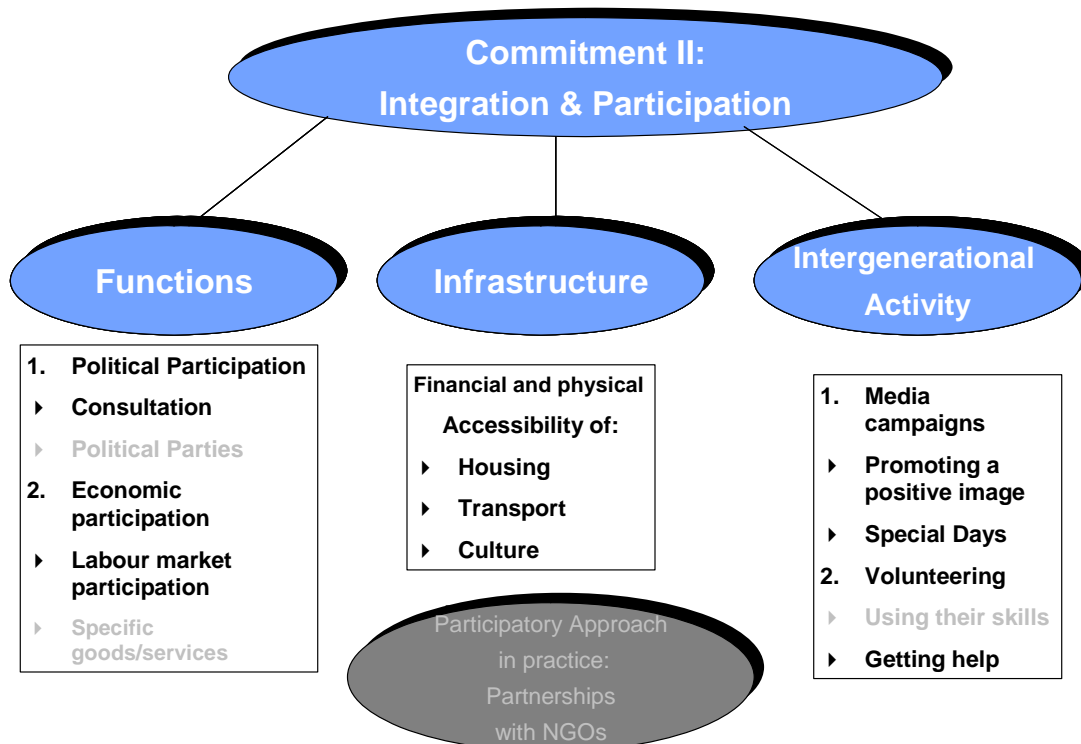
transmission of historic memory of older persons to the youth, for example by going into schools.

2.4 Participatory approach

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

Figure 2

Commitment 2 – Integration and participation of older persons in the three issues areas of functions, infrastructure and intergenerational activity



3. Commitment 3: “To promote equitable and sustainable economic growth in response to population ageing”

Efforts should be made to raise the economic growth and productivity rates so as to increase available resources for transfer and distribution, and to ensure the financial sustainability of social protection systems in general and pension schemes in particular. Most countries mention that macroeconomic policies must be developed to address the needs of an ageing population. These policies comprise four areas, namely monetary, fiscal, industrial, social and education policies.

There has been some agreement that for economies in transition, but not exclusively for them, the eradication of poverty, especially among older persons, is of special concern and several countries have significantly increased or are planning increases in pensions (ALB, BLR, ESP, PRT, ROU, RUS, UZB). Several countries mention inflation-indexation of wages as a way to prevent old-age poverty (EST, FIN, LVA, LTU, PRT).

3.1 Monetary policy

Most countries view monetary policy as a key component to sustaining economic growth. Its main task is to provide price stability and low inflation rates through the sensible management of interest rates and money supply. The monetary policy in the Eurozone⁷ is within the domain of the European Central Bank. (ECB). In all other countries, monetary policy is developed by the respective national banks often following ECB decisions fairly closely. Generally speaking, there is no one single policy that can be prescribed to address certain demographic developments. However, monetary policies should be oriented towards achieving stability in society.

3.2 Fiscal policy

Most countries have identified balanced budgets as a main priority for sustainability. Thus, it is important to balance economic growth (AUT, DNK, ESP, FIN, GBR, HUN, LVA, NLD, PRT, ROU, RUS, TUR) with an effort to reduce

government debt and expenditure while increasing tax revenues. One country focuses specifically on efficiency improvements in public services in order to decrease public expenditure (FIN). Countries already in the Eurozone, those who are about to adopt the Euro, and those who aspire to membership in the EU have to put strict budget controls and fiscal discipline in place to meet the Maastricht criteria set up by the EU as prerequisites for joining the third stage of the European Economic and Monetary Union (including an annual deficit cap of 3 per cent of total GDP) (HUN, MLT, TUR).

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

3.3 Social and industrial policy

Several countries refer to their ongoing pension and social security reform efforts. These should help to balance public budgets (AUT, DEU, DNK, FRA, FIN, ESP, PRT, SWE, TUR) while securing old-age income levels e.g. by guaranteeing a minimum pension (CHE, FRA, PRT, SWE). Furthermore, the EU Member States have signed up to the Lisbon Strategy for growth and employment in the EU, aiming at making Europe the most competitive and dynamic knowledge-based economy in the world by 2010 (AUT, DEU, MLT). The Lisbon Strategy includes investments in competitiveness and productivity improvements and the strengthening of labour markets (ROU). Some countries are making specific efforts to increase the number of small and medium enterprises as drivers of growth and employment (AZE, SRB). Several countries observe an increase in the overall employment rate (AUT, CYP, CZE, LVA, NLD) and highlight the employment rate of older people (CYP, DEU, EST, FRA, NLD) as a priority. One country has emphasized their strategy of lower taxation at both the corporate and private levels in order to increase investment and consumption. The same country

⁷ The Eurozone comprises those European Union (EU) Member States which have adopted the euro.

has followed the strategy of bringing the ancillary labour costs down, making work for enterprises and employees more worthwhile (DEU). One country specifically mentioned the need to continuously monitor and adapt, if necessary, the optimal ratio between years of payment of contributions and average life expectancy (FRA).

One country has reformed its tax and social security schemes to encourage individual initiative and job creation (FIN). Another country facilitates the use of inverse mortgages enabling older people to convert the value of their home into cash to finance other needs (ESP). One country made particular reference to the “silver economy”, taking into account the consumer potential and needs of older persons to enhance economic development. To this end, a website has been developed informing older persons about the safety and user-friendliness of products, goods and services. At the same time, initiatives were reported that integrate

older persons into consumer working groups to identify shortcomings in the areas of housing, leisure or media with regards to older persons’ needs (DEU).

3.4 Education and training policy

On-the-job-training and continuous updating of skills are needed to further economic prosperity and to increase productivity and employability. Several countries identified investments in education and training, including adult (re-)training as key measures to maintain and propel economic growth (FIN, GBR, LVA, NLD, ROU, SRB). One has begun to improve innovation support, to promote knowledge transfer and new product development to become a “knowledge-intensive economy” (LVA). Improvements in human capital and technology ameliorate the potential for economic growth (cf. commitment 6 on lifelong learning).

Figure 3

Commitment 3 – Sustainable economic growth as a backbone of ageing policies in the four issue areas of monetary, fiscal, social and industrial and education policies

Monetary Policy	Fiscal Policy	Social & Industrial Policy	Education & Training
<ul style="list-style-type: none"> ▶ Provide price stability and low inflation rate ▶ Aligned with ECB / national bank policies 	<ul style="list-style-type: none"> ▶ Balance budgets and fiscal discipline ▶ Reduce governmental debt and expenditure ▶ Increase tax revenues ▶ Improve efficiency in public services ▶ Meet Maastricht criteria ▶ Golden Rule ▶ Sustainable Investment Rule 	<ul style="list-style-type: none"> ▶ Reform Pension and Social Security Systems to ensure sustainable budgets ▶ Secure income levels of older and disabled e.g. through minimum pensions to prevent poverty ▶ Contribute to Lisbon Strategy by improving competitiveness and productivity ▶ Increase participation of SMEs (Small and medium sized enterprises) and encourage individual initiative ▶ Increase overall employment ▶ Regulate inverse mortgage and dependency insurance policies 	<ul style="list-style-type: none"> ▶ Contribute to EU Lisbon Strategy in creating knowledge based economy (EU members states and candidate countries) ▶ Promote knowledge transfer ▶ Create inclusive labor market

4. *Commitment 4: “To adjust social protection systems in response to demographic changes and their social and economic consequences”*

The main issues in providing sustainable social protection systems in the face of demographic ageing are financial sustainability and the continued protection of the weakest groups in society. Measures in this area may involve the strengthening of incentives for citizens to participate in the labour force, the provision of comprehensive health services, sustaining a

functioning educational system, and active labour market policies. In order to prevent and/or reduce poverty and to provide adequate security for all, existing social protection systems may have to be adapted to demographic developments and changes in family structures. With regard to pension reforms three pillars have to be differentiated, namely public pension (pillar 1), occupational

pension (pillar 2) and personal savings (pillar 3). Furthermore, the issues of social protection of women, income security and health care must be considered.

Adjusting social protection systems was indicated as a priority area by 15 countries (AUT, CAN, CHE, CYP, ESP, FIN, FRA, GBR, HUN, MKD, MLT, ROU, RUS, SVN, TUR). There is much activity in the areas of pension reform, health-care provision and income security. This rise in activities is triggered by the growing number of older persons, which makes changes in the pension, health-care and social security systems inevitable.

Thirteen countries reported either starting or completing pension reforms over the last five years. The reforms mentioned in the reports are primarily focused on the adjustment of public pay-as-you-go (PAYG) systems forming pillar 1 (public pension). In some cases, they also include Pillars 2 (occupational pension) and 3 (personal savings).

Reforms of pillar 1 include the adjustment of the official retirement age (AUT, CZE, SRB, ALB, DEU, FIN, MKD, SWE, ARM, LVA, CHE) and required insurance periods (CZE, FRA, SRB, ESP) discouraging early retirement (AUT, FIN, FRA, ALB, ESP, GBR, NLD), changes in the calculation of pensions (AUT), and an increase in insurance contribution rates (CZE). Many countries with a PAYG system in place have made efforts to introduce a stronger link between the contributions an employee makes and the benefits he/she receives (ESP, FIN, LTU, PRT, SWE). One country has introduced a sustainability factor which takes the relationship between those drawing pension benefits and those paying contributions into consideration for the general management of the pension scheme (DEU). Several countries have introduced or are considering the introduction of a flexible retirement age to keep people in the labour market for a longer period (CHE, FIN, GBR, SWE). One country has replaced the combination of age and years worked as requirement for retirement pay with an age-only system (MKD). Another country has reported efforts to improve the management of pensions of people having paid into different pension funds throughout their working careers (FRA). Furthermore, the country has put an emphasis on the simplification of the pension

calculation system and on availability of information for future pensioners (FRA).

Occupational pension plans (pillar 2) are still playing a minor role. However, Governments encourage increased employer participation (CZE, ROU, GBR, USA, CAN). In most countries, participation in occupational plans is strictly voluntary (AUT, CZE, FIN, FRA, LTU, SWE). Five countries (CYP, DNK, GBR, MKD, NLD) have made them mandatory. One country has introduced a "Pension Regulator" who helps to protect members' benefits, e.g. in the event that an employer files for bankruptcy, and promotes good administration of work-based pension schemes (GBR).

To encourage citizens to plan and save for their retirement, many Governments have introduced personal savings plans (pillar 3) (AUT, CZE, DNK, FIN, FRA, GBR, LVA, MKD, ROU, SRB, SWE). To encourage the use of pillar 3, incentives for life insurance schemes and/or supplementary pensions have been introduced. Incentives may take the form of subsidies or tax relief. As a variation of pillar 3, one country introduced "working time accounts", which make it possible for employees to save part of their gross salary each year in order to fund a period of unpaid leave in the future, e.g. for care, education, early retirement or sabbaticals (NLD).

In addition to the three pillars of pension reform, measures have been introduced with respect to the social protection of women. Childcare times can now be credited as pension contribution periods. One country explicitly mentioned that periods of care provision for relatives (other than their children) may also be counted towards their pension (DEU). In two countries, pension-splitting among partners has been introduced (AUT, DEU). Part-time work regulations and parental leave (GBR), combined with a right to return to the workplace, are another example (AUT, USA). Several countries have introduced laws on equal opportunity (MKD, SRB) or made gender-neutral contributions to social protection schemes mandatory (DEU). One country has started campaigns to raise awareness of the need to reconcile work and family (USA), and one country (ESP) extended the scope of its widowhood pensions to civil partnerships.

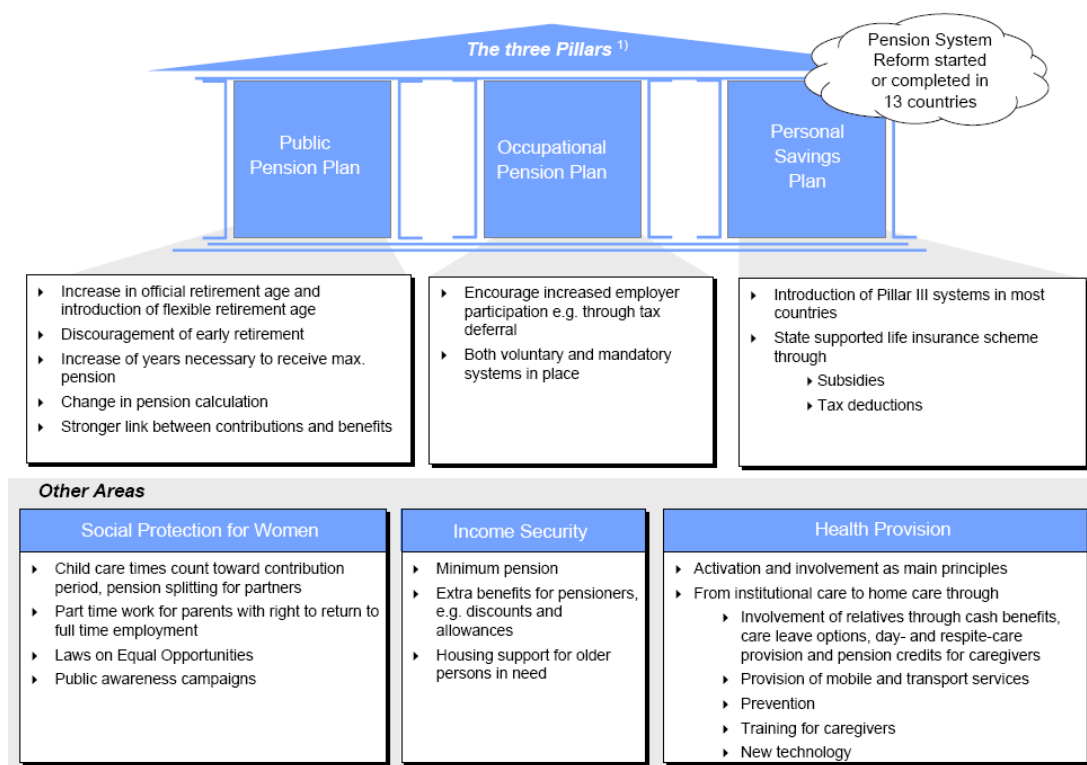
Concerning income security for older citizens, several countries provide minimum pensions (ALB, AUT, CAN, DNK, FIN, FRA, GBR, HUN, LTU, LVA, MLT, ROU, SRB, SWE) or make other provisions to provide for basic security in old age (ARM, DEU). In addition, many Governments offer reductions on public transport, telecom services, ticket prices, heating expenses, etc., to their older citizens (AUT, DNK, GBR, HUN, ISR, MLT, ROU), and some support

housing expenses for older persons in need (ALB, CAN, DNK, FIN, GBR, ISR).

In the field of health care, some countries have also undertaken reforms to cope with increased burdens of their health-care systems which may also be caused by demographic changes. One way to avoid hardships among chronically ill persons or persons with low incomes is to introduce ceilings for health-care insurance payments (DEU).

Figure 4

Commitment 4 – Adjustments in social protection systems and its constituting elements (the pension system, social protection for women, income security and health provision)



The overall trend in terms of health provision for older persons is to enable them to stay in their homes as long as possible through programmes of activation and “helping them to help themselves”. The means to achieve this objective include a range of monetary (such as tax alleviations) and time benefits as well as targeted

services (DNK, FIN, FRA, HUN, ISR). Countries also offer interpretation services to people with hearing disorders (HUN) and provide one-time funding for the remodelling of homes to make them accessible for persons with disabilities (FRA, HUN, MLT). One country (ISR) has developed a range of care facilities that allow older persons to stay in their familiar surroundings for as long as

possible. This is made possible through the involvement and extensive training of volunteer organizations that help organize home help, nursing care, respite care and day-care centres. Hence, it is made possible for older persons to stay with their families even if their relatives work full-time. Respite-care centres for older persons allow caretakers to go on vacation (ISR, MLT). One country has put in place an early warning system for isolated or fragile persons giving responsibility to the mayor to organize support in crisis situations such as extreme climate conditions (FRA). One country has emphasized the improvement of the networking of gerontological health services (FRA).

In the field of housing the emphasis on independent living is supported by the provision of mobile services in a number of countries (AUT, DNK, FIN, GBR, GRC, POL, SWE, USA). New

technology is also increasingly being utilized to achieve this goal, e.g. to enable older persons to communicate with their children/grandchildren or medical personnel (CYP, DEU, FIN, GRC).

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

5. Commitment 5: “To enable labour markets to respond to the economic and social consequences of population ageing”

Member States have committed to taking measures to enable labour markets to respond to the economic and social consequences of ageing. In this regard, they pledged to seek increases in employment rates, especially the employment rates of older persons. To this end, the member States also agreed to improve the employability of older workers, e.g. through vocational guidance and training, the promotion of lifelong learning and the improvement of working conditions. Finally, member States have committed to taking steps towards increasing the age at which people stop working and towards making retirement more flexible and gradual.

The magnitude of the impact of population ageing on national labour markets differs significantly for the UNECE member States. The Member States of the EU are committed to the Lisbon targets⁸ and are working towards achieving

them. While countries with high and growing old-age dependency ratio (OAD)⁹ have long started to develop and deploy a wide range of policies, countries with high general and youth unemployment and lower OAD set their priorities differently.

A large number of countries reported that progress had been made towards commitment 5. Nine countries (AUT, CHE, FIN, HUN, LTU, LVA, PRT, ROU, SRB) have explicitly indicated this field as a priority area. Most countries deploy a policy mix comprising incentives and regulatory policies targeted towards either employers or employees in order to increase employment rates and extend the working life of their workers (figure 5).

5.1 Incentive policies: Employers

In order to increase the employment rate of older workers, several countries have an option to subsidize their wages or waive parts of the ancillary labour cost such as insurance or taxes

⁸ The Lisbon targets from 2000 include an increase in overall employment rates to 70 per cent for the working age population as a whole, with over 60 per cent for women and 50 per cent for older workers by 2010. “Older workers” refers to the cohort of workers aged between 55 and 64.

⁹ Old-age dependency ratio (in per cent) = the population 65 and older divided by the population between ages 15 and 64.

(AUT, DNK, FRA, HUN, MLT, NLD, ROU, SWE). In three countries (AUT, DNK, USA), specific awards for companies committed to the employment and retention of older workers were introduced. One country has mentioned its campaign to sensitize employers to the positive management of older workers and ways of benefiting from their experiences (FRA). In one country, actions towards better risk management of workplace accidents have been attempted that specifically address older persons (FRA).

Several countries have identified employment barriers of older workers as one of the reasons for old-age unemployment. In response, they have set up counselling and training programmes, which offer companies advice on how to best design their policies towards older workers (AUT, CYP, DNK, EST, FIN, SWE, USA). One country offers tax breaks to employers who involve their older workers in on-the-job training (NLD). One country has introduced a system whereby companies can be certified with an Equality Label if they protect the equality of both sexes in all age groups (FRA).

5.2 Incentive policies: Employees

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

A number of specific initiatives providing employees with more flexibility to combine retirement and work have been introduced.

Employees are given the freedom to choose their retirement age and manage their transition using part-time work or job sharing agreements (USA). One country introduced the concept of an on-call pool of retired workers who are re-hired to work on temporary projects following retirement (USA). Flexible retirement ages allow employees to make self-determined decisions about their income to leisure time ratio while not forcing the qualified and motivated workforce into retirement (EST, FIN, GBR, HUN, SWE). Some countries allow pensioners to continue to work after retirement and combine pension income with work income (DNK, EST, FIN, HUN, NLD, ROU, RUS). Sometimes, these arrangements are supplemented by partial income tax exemptions (GBR, NLD, SWE). One country has a programme of persons already retired to be reintegrated into their former workplace as tutors for younger workers (FRA). These policies are intended to ensure a smooth transfer from working life to retirement.

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

5.3 Regulatory policies: Employers

Several countries stress the problem of age discrimination in the labour market (AUT, CZE, DNK, EST, GBR, LTU). Some other countries deploy special measures to protect older workers in the labour market that prevent employers from dismissing workers above a certain age, i.e. through job guarantees. Others levy financial penalties on companies that dismiss older workers

(AUT, LTU). One country (DNK) has installed a complaints board. In one country (SWE), the labour legislation demands that employers first dismiss the employees they hired last in the case of layoffs. The gender wage differential between men and women might prevent some women from (re-)entering the labour market. One country (FIN) reports setting up an investigation of the gender-wage differential.

5.4 Regulatory policies: Employees

Many countries have increased the official retirement age or have started to do so gradually (ALB, ARM, CHE, CZE, DNK, EST, FIN, GBR,

LVA, MKD, SRB, SWE). Two countries are planning to index the retirement age to life expectancy (DNK, PRT). Furthermore, most countries have reversed their early retirement policies and hence abolished early retirement incentives. In addition, disincentives for early retirement have been introduced to increase the actual retirement age (AUT, FIN, ALB, CZE, ESP, NLD, EST). One country (GBR) has tied its support allowance payment for unemployed persons to clearly defined and agreed responsibilities, such as job-seeking activities, work-related interviews or trainings. If the responsibilities are not met, benefits are reduced gradually.

Figure 5

Commitment 5 – Labour market policies on population ageing, including incentive and enforcement policies for employers and employees as well as research

	Employers	Employees
Incentive Policies	<ul style="list-style-type: none"> ▶ Wage/insurance subsidies for employing older employees ▶ Reduction of ancillary wage cost ▶ Employer award for best practices ▶ Consulting and training services related to ageing workforce offered to employers 	<ul style="list-style-type: none"> ▶ Tailor-made vocational trainings for older workers and women, partly with support of the European Social Fund ▶ Motivational programs ▶ Entrepreneurial training and credits for start up of SME ▶ Flexible working conditions allowing part time work before retirement ▶ Opportunity to combine pension with work ▶ More years worked resulting in higher pensions ▶ Tax credit offered to workers who stay in work after reaching official retirement age ▶ Right to a job with the local authorities for older long term unemployed ▶ Prevention fund against wear and tear of the workforce ▶ Initiatives to improve child and elderly care in order to free resources for the job market
Enforcement Policies	<ul style="list-style-type: none"> ▶ Banning of age discrimination by law ▶ Penalty payment for dismissing older employees ▶ Special regulation protecting employees with only a few years to retirement ▶ Employees hired last have to be fired first ▶ Investigation of gender wage differentials 	<ul style="list-style-type: none"> ▶ Increase in official retirement age ▶ Introduction of disincentives for early retirement
Research	<ul style="list-style-type: none"> ▶ Set up of government funded research projects and think tanks around Population Ageing 	

5.5 Other activities

Public awareness campaigns have been launched in several countries to draw attention to the labour market issues related to ageing and to support the aforementioned measures towards

increasing retirement age (CAN, DNK, FIN, ISR, ROU, SWE, USA). Several countries (DNK, LTU) have also started to leverage Web-based technology in the form of job search databases for older workers or as a means of raising public

awareness and engaging in dialogue. Furthermore, Governments have set up research projects and

think tanks to develop labour market policies in response to ageing (DNK, LTU).

6. Commitment 6: “To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions”

The concept of lifelong learning pertains to adults in general and seniors in particular. It involves adjusting the education system to accommodate the needs of older persons, fine-tuning learning content as well as developing learning methods, e.g. to teach older persons the use of information technology. More research is needed to better understand the educational and training needs of an older target group. Overall, the education system should also aim to achieve better employability of all persons and to increase school retention rates, limiting dropouts and facilitating the reintegration into the labour market of those who left the formal educational system early.

Lifelong learning has been identified as an important precondition for longer working life. It also influences the social integration of senior citizens in their societies. Three member States have explicitly named lifelong learning as a priority area (ESP, LTU, PRT) and a few other countries have established systems that offer tailor-made training courses considering the needs and capabilities of older persons. In general, the concept of lifelong learning is not yet fully integrated into most educational systems. However, countries have identified the need to establish institutions for lifelong learning and to further explore and understand the learning needs of their older citizens.

6.1 Education systems

The concept of lifelong learning is taking hold throughout the region and the notion of universities of the Third Age is gaining wider acceptance. Whereas in the past it was considered sufficient to guarantee older persons access to adult educational systems, now the standard educational systems are being adapted to meet the learning needs and capabilities of older persons. The education of older persons is mainly State-run, but some countries have put incentives in place to encourage employers to invest in the training of workers nearing the retirement age by offering

support and training courses or tax rewards (FRA, ROU, SWE). Some countries state the explicit objective of increasing the participation rate of older age groups in training activities (HUN).

While some countries have established national lifelong learning strategies (CYP, EST, HUN, LTU, MKD, PRT), others follow a decentralized approach in which the main responsibility rests with the municipalities (GRC, SWE). One country guarantees a right to lifelong learning through its adult training law (EST); in another, most of lifelong learning activities are offered by NGOs (ARM). One country has mentioned making particular efforts to integrate young people – and female students in particular – in disadvantaged areas into the schooling system to improve their employment prospects and thus enhance their ability to provide for themselves throughout their life course (FRA).

6.2 Learning contents

The content of many lifelong learning programmes focuses on computer and Internet literacy (ARM, CZE, GBR, GRE, HUN, LTU, MKD, MLT, NLD). Furthermore, language classes, courses on entrepreneurship, and classes aiming at the empowerment of citizens to influence policies and enhance their intellectual and social skills are being offered (FIN).

6.3 Teaching and learning methods

Concerning teaching methods, Third Age education differs significantly from other forms of education, extending from training to counselling. Usually, it does not include exams and focuses on debate and participation. The methods are adjusted to older persons in terms of location, content and duration of courses (LVA). Trainers receive special training on how to train older persons (LTU, LVA). To reach a larger number of students, several countries have developed distance-learning options (ESP, LTU, PRT, SWE). One country has developed a dedicated website, which should

encourage older people to learn more about the Internet (NLD). Another refers to focused TV programmes (MLT).

6.4 Research

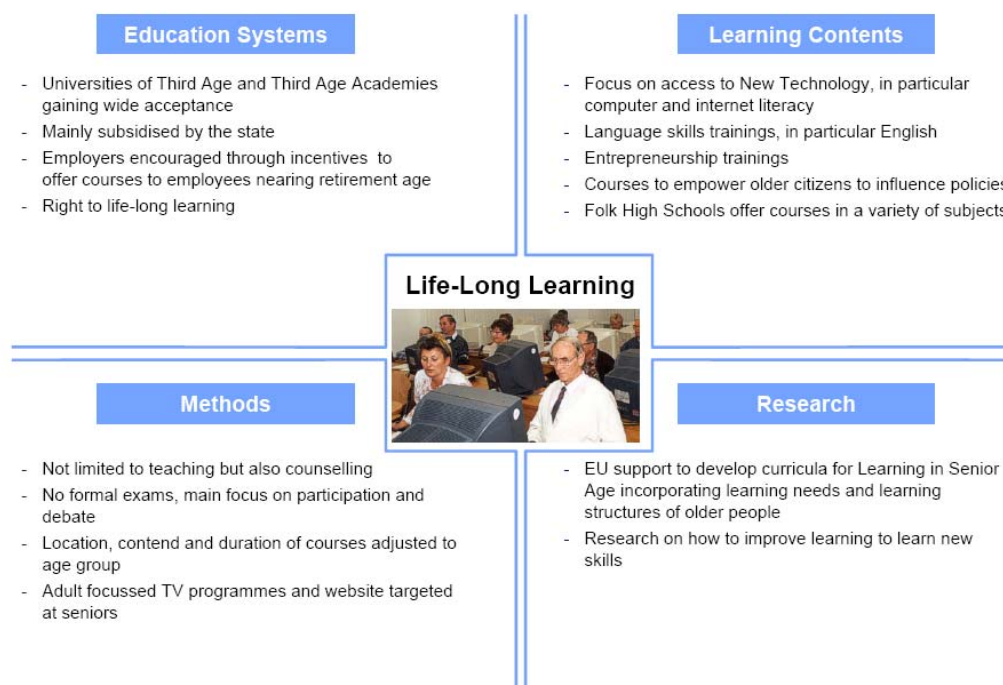
The EU is funding the development of curricula for older persons (e.g. through the project LENA – Learning in the Post-Employment Stage of Life) and encourages the exchange of best practice among its Member States. Several

countries have started research projects on how to best organize lifelong learning in their societies, focusing on the needs of older persons.

To better understand the learning needs of older citizens, several countries have set up research projects to develop policy options. The EU and the European Social Fund in particular support many projects that target the development of curricula for Third Age education.

Figure 6

Commitment 6 – Ageing-related education strategies with regards to education systems, learning contents, methods and research



7. *Commitment 7: “Striving to ensure quality of life at all ages and maintain independent living including health and well-being”*

Member States have committed to ensuring quality of life at all ages and in particular into old age. Three aspects can be differentiated with respect to this aim. The first is financial sustainability of the health-care system and improvement of access to health care. The second aspect is the availability and scope of care, which provides a precondition for older persons to stay at

home. Thirdly, countries have committed to preventive efforts, such as promoting healthy lifestyles throughout the life course, which would improve health and quality of life in old age.

7.1 Health-care systems

Increasing dependency ratio can easily bring sustainability of the health-care system under

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

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

A variety of measures to address inequalities have been specified in the member States. One country (ESP) has established special interdisciplinary centres; in another (GBR), an interdepartmental conference has been set up to combat health inequality. One area of particular concern seems to be regional inequality with

health-care provision in rural areas lagging behind that in urban centres. Three member States (EST, HUN, ROU) provide financial and training incentives for medical personnel to settle in deprived areas, while other two (GBR, SVN) are tying regional funds to the achievement of care targets. Two other countries (CHE, NLD) are running specific campaigns to improve accessibility to people from different ethnic and cultural backgrounds, by assisting medical personnel from minority groups and by providing information and support to potential patients from non-native backgrounds.

Some countries have national priorities on specific diseases, such as on dementia and Alzheimer's disease (DEU, FRA). One country also has a special focus on research of age-related issues, including through a network of interdisciplinary "Competence Networks" (DEU).

7.2 Care and independent living

The trend of allowing older people to stay in familiar environments for as long as possible (as mentioned under commitment 4 on social protection systems) is also important in relation to quality of life and well-being. As mentioned earlier, most countries are adopting an approach that puts independent living above institutionalized care. Among the measures taken to achieve this are activation programmes, the extension of home care and mobile services such as "Meals on Wheels" (ISR) or preventive home visits. New technology is also increasingly utilized to achieve this goal, e.g. to enable older persons to communicate with their children/grandchildren or medical personnel (DEU, FIN, GRC). Accessibility of the living environment, including the public sphere, is highlighted as crucial in maintaining independence of older persons in one country (SWE). Several member States are undertaking projects to develop community centres and to improve the accessibility of public transportation (LTU, SWE). Some other countries are developing good practices for home help and home nursing (FIN) and providing remote assistance for older persons living alone.

Once independent living is not an option anymore initiatives such as establishing group (LVA) and nursing homes (MLT) aim to enabling older persons to stay close to home. The introduction of case management and the

integration of social and health services to secure seamless provision of “one care” are growing in popularity (CHE, CZE, SRB, USA). One country has a body in place to direct older persons towards the care and support they need to coordinate the local actors involved in service provision (FRA).

Member States are increasingly paying attention to the quality of care both in institutional and home contexts. Many countries have national programmes establishing and monitoring minimum standards for both home and institutional care (CYP, MLT, NLD, PRT) as well as systems to assess the norms of social care (LTU). One country has made annual inspections of nursing homes compulsory and has established a complaint’s body that will follow up on reported misconduct in institutionalized care settings (DEU). Some countries report setting up structures to observe that patients’ rights are met in health-care units (POL, ROU); some countries include patients’ representatives in such bodies. One country has set up a “Learning System” to deal with critical events in care settings (DEU).

Moreover, professional training in the areas of nursing and elderly care is extended and improved and one country makes efforts to raise the profile of care professions and to make them more attractive (DEU). One country has introduced the option of persons delivering care to obtain a degree confirming their on-the-job experience. This mechanism has helped to increase the availability of qualified care both in the professional sphere and at home (FRA). The country also offers training for family carers. In parallel, this country has also made additional budgets available to enhance the education and recruitment of additional staff serving in professions to do with older persons (FRA). A few countries also use elaborate campaigns to raise awareness about the abuse of older persons (CAN, MLT) or have research under way to detect the level of violence against older persons (DEU). A number of other member States also offer training and capacity-building to professional care personnel, volunteers and care-taking family members (ESP, FIN, GBR, MLT, SRB, SVN). Civil society in one country has demanded an increase in awareness of geriatric issues among general practitioners (DEU). One country has introduced an oral documentation system instead of the written one in order to reduce the amount of time spent on documentation and

administration and to generate more time for the actual care-related tasks (DEU).

Most countries provide benefits to persons who take care of an old, ill or disabled family member. This support of familial care can encompass necessary services for the client, a compensation for the informal carer as well as leave and support services to the carer. Family hospice leave, respite care, carers’ pensions and especially day-care centres are also frequently mentioned. Day-care centres enable families to care for frail elderly parents at home and to continue with regular work and family responsibilities. In addition, respite care enables family carers to go on holiday, take care of their own personal health, or simply have a rest (AUT, ISR, MLT). Volunteer organizations also play a role for the elderly in need who do not have a family member (ISR). In some countries in transition, NGOs and external donor organizations play an important role in service delivery (ALB, ROU, SRB).

7.3 Prevention and promotion of healthy lifestyles

Many member States stress the importance of preventive action. Many countries do preventive work to promote well-being and a healthy lifestyle. The importance of preventive action in maintaining quality of life, including health and independence, has been stressed during the past years. Prevention is now perceived to be financially and socially viable. Raising consciousness and the promotion of health education and healthy lifestyles are popular means of prevention. A number of member States have programmes focused on reducing the number of home accidents of older persons, preventing falls being a particular focus (AUT, HUN). Alongside various information campaigns on the effects of exercise, nutrition and drug use, this involves sports and fitness offers (CYP, FRA, LVA, NLD). These campaigns can take the form of brochures or TV programmes (AUT, FRA), enterprise competitions (CZE) or transmissions of recommendations via the Internet (LVA).

Countries report commemorating special days related to ageing, for example the International Day of Older Persons (MLT, RUS) and the “World Elder Abuse Awareness Day”

(CAN). These are occasions for awareness-raising, health education and the realization of preventive campaigns (MKD). These events include cultural, educational, art and social activities. One country organizes multiple “Health Days”, which are combined with screenings, healthy food and information distribution (HUN).

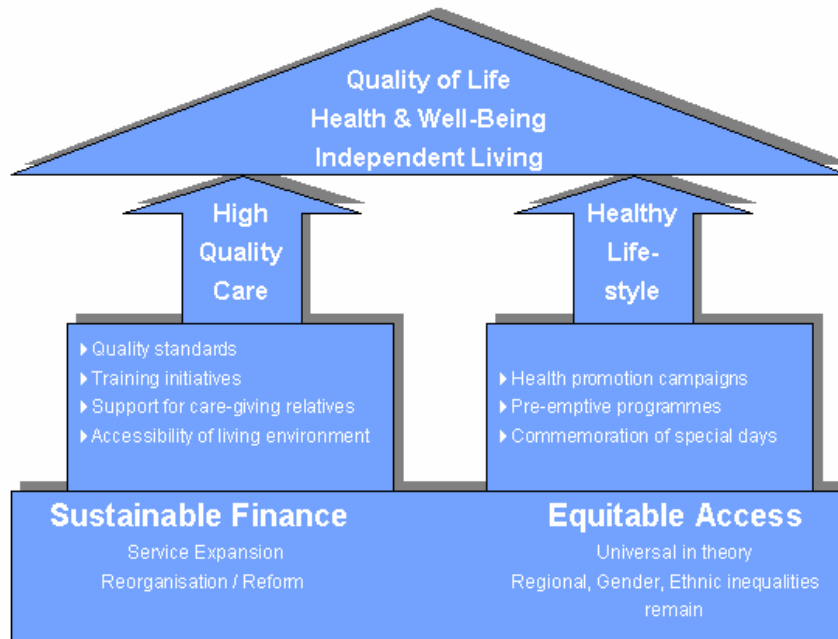
Health and ageing-related training is offered to older persons to promote activity, participation and self-help (ISR, MLT). Two countries have prepared a vocational guidance and counselling programme that includes practical

training, theoretical education and consultations to motivate and activate older persons (CAN, LTU). Some countries offer and promote preventive medical examination visits to older persons (DEU, FRA). One country puts a special focus on women’s health, for example through information (DEU).

The diagram below describes how the different aspects of the commitment to quality of life, health and well-being are interrelated.

Figure 7

Commitment 7 – Quality of life, health and well-being in ageing societies and its constituting factors, including health-care systems, quality of care and prevention



8. Commitment 8: “To mainstream a gender approach in an ageing society”

The process of ageing may not affect men and women in the same way. It is therefore imperative that Governments take special precautions to ensure that gender inequalities are avoided in an ageing society. To this end it is important that gender issues are addressed both on a public policy level and regulatory as well as on a more individual basis.

8.1 Gender equality in public policy and regulation

While several countries make reference to this topic one country in particular (ESP) has identified gender equality as a priority area in the context of ageing. Nonetheless, inequalities in wages and participation persist. Many countries have passed or extended anti-discriminatory

legislation (DNK, FIN, FRA, GBR, GRC, LTU, NLD, SWE), some having to amend the constitution in this connection. These anti-discrimination laws form the basis for the establishment of equal opportunity councils (BEL, DEU, FRA, GBR, MKD, MLT, ROU, SRB). These councils can operate at various levels ranging from the company or local level to national importance. In one case, they provide a direct way to obtain equal pay (GBR).

On average, pensions for female older persons tend to be lower because of shorter periods of contribution payments due to childcare periods, lower general pay levels or part-time arrangements. One measure to compensate for these differences in pension levels is in the form of minimum pensions. Other measures may include compensation for years of discontinued payments of pension contributions due to family responsibilities or the possibility of continuing to contribute to the pension funds during periods at home (FRA).

Several countries provide training classes for government officials and employers to highlight issues in this area and to increase sensitivity (ARM, EST, FIN, LVA, MKD, NLD, SRB). Moreover, four countries (FIN, HUN, LTU, SWE) publicly fund self-employment training and encouragement for women, with one providing expertise from experienced “mentors” (SWE). Three countries (FIN, LTU, MLT) have created provisions for each relevant budget item to be gender-checked before passing. The new laws have also led to an adaptation of school curricula in three countries (ARM, EST, MKD) as well as the inception of university courses dealing with ageing and gender in two others (CZE, ESP).

9. Commitment 9: “To support families that provide care for older persons and to promote intergenerational and intragenerational solidarity among their members”

This commitment acknowledges that the family remains the prime source of care-giving and support both for children and older persons. Family caregivers make important contributions beyond the publicly available facilities or the services of commercial care providers or NGOs. However, the well-being of the caring persons should also be

The increased awareness of the relevance of the gender aspect is illustrated by the fact that countries increasingly collect gender-sensitive data. While data availability on this issue remains mixed, a majority of countries have data broken down into gender and age groups at their disposal. Two countries (DEU, MLT) run a research and documentation centre open to the public to inform a broader audience about the subject matter, while others have initiated research into the gendered division of household tasks (MKD).

8.2 Gender equality on the individual level

Regarding family and work issues, the UNECE countries have mainly invested in making it easier to combine work and child-rearing. Two countries identify this as a specific area of gender inequality that needs to be addressed (MLT, SWE). Six countries (DEU, EST, FIN, GBR, LVA, SWE) have recently expanded childcare provisions through funds or tax breaks for families. Paid parental leave is now commonplace in many countries (DEU, DNK, FIN, GBR, LVA, MLT, NLD, ROU, SWE); some countries offer extra days if child-minding duties are split between the partners (FIN, SWE). More flexible work arrangements are also encouraged (DEU, EST, GBR, MLT), while two countries are re-evaluating the recognition of child-rearing periods for pension payments (AUT, SWE). One country offers an award to the most family-friendly employer (HUN). Some countries also offer financial incentives for family-friendly companies or require them to report on measures taken to achieve equal pay or to make work and family more reconcilable. Another country offers special family equality courses to couples (MLT).

kept in mind and policies may be developed to facilitate their activities. Achieving high-quality care without unduly draining the resources of the caretaker is crucial for intergenerational solidarity. In addition, intergenerational interaction also takes place beyond the family and may need public support.

9.1 Family policies

Many countries recognize the importance of the family in offering care both for children and older persons, although no country has specifically named this area as a priority. In the family policy field the majority of initiatives aim to improve the financial and time situation of working parents with various initiatives allowing more flexible work or financial support. Some of these measures also pertain to those caring for relatives. However, these are usually limited to family members and cannot be extended to friends, thus potentially having a negative impact on older persons without relatives. Another area of action is the development of small auxiliary services and day-care institutions. Various other schemes are used by individual countries, often involving the NGO and voluntary sector. In total, there were relatively few initiatives reported in this section that had not been covered in connection with the other commitments.

Concerning the promotion of family policy, one country (FIN) states the explicit aim of allowing everyone to have as many children as they want through the use of free provisions and financial transfers. While others may not be so forthright, the provision and expansion of unconditional child benefits (sometimes called childcare benefits) was mentioned by at least six countries (AUT, DEU, FIN, HUN, SWE, SVN). In two countries (HUN, PRT), the benefits are also available to grandparents if they are the ones rearing the child, while in another it is means-tested (MLT). Three countries offer additional free maternity and child services (FIN, MLT, SWE); two grant special monetary allowances for parents of sick and disabled children (SWE, MLT). In one country, “local alliances” help improve the compatibility of family and working lives, by providing more flexible childcare services such as support services for those who nurse family members (DEU).

9.2 Care arrangements

Caring for an old or infirm member of the family puts a particular strain on an individual. Nonetheless, family care remains the most common type of care for older people. The member States are honouring caretakers through financial and time provisions. Family-care benefits usually mean paid time off work and are available in at

least seven countries (AUT, BLR, CYP, CZE, FIN, RUS, SWE). In one country, the caretaker can seek “employment” by the municipality, which then covers his or her salary (ROU). Additionally, monetary benefits are available in many countries (AUT, CYP, DEU, DNK, FIN, LTU, MKD, NLD, SWE). One country offers vouchers that can be converted into care services provided by a home care worker or by a service agency (FRA). Normally, these are available to family members only and sometimes there are further restrictions such as payouts to people living alone only (MLT) or means tests (HUN). Only one country reports counting care time as work for retirement purposes (HUN).

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

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

9.3 Intergenerational initiatives beyond the family and care system

Apart from the family and care programmes, a number of other intergenerational initiatives have been created. They are often carried out in cooperation with NGOs (CYP, DEU, ISR, MLT, ROU, SRB, SVN). One country actively encourages public-private partnerships and uses lottery money to support NGOs (FIN), while two others (ESP, MLT) have amended legislation to encourage voluntary organizations and the

involvement of older persons in them. Five countries have established new bodies for the promotion of intergenerational solidarity (GRC, DEU, NLD, PRT, SVN); in one case, a new ministry was even set up (NLD). Elsewhere (SRB), a social innovation fund was established to provide new local projects with money. Further projects

include a national programme for social protection (MKD), food kitchens serving the needy around the country (MKD) and joint family learning initiatives.

Figure 8

Commitment 9 – Inter- and intragenerational solidarity in ageing societies in the family, in care and beyond

Family Policy	Care Policy	Other Intergenerational Schemes
<ul style="list-style-type: none"> ▶ Child benefits ▶ Flexible work ▶ Leave to care for relatives 	<ul style="list-style-type: none"> ▶ Time and Monetary benefits for Carers ▶ Counting care time for retirement pay ▶ Respite care ▶ Social care centres ▶ In-house help 	<ul style="list-style-type: none"> ▶ New bodies promoting intergenerational solidarity ▶ Cooperation with NGOs ▶ Social Innovation Fund ▶ Joint Family Learning

10. Commitment 10: “To promote the implementation and follow-up of the Regional Implementation Strategy through regional cooperation”

UNECE member States have the primary responsibility for the implementation and follow-up of the RIS. In doing so, they are supported through regional cooperation, which takes place on three levels: between member States, between member States and the UNECE secretariat, and between civil society organizations in the member States.

10.1 Cooperation between Member States

Overall, regional cooperation has been taking place in various international projects, in the form of sharing good practices and in research. However, the RIS process has been supported by the majority of UNECE member States, by

submitting country reports and attending RIS follow-up meetings. Several countries have hosted international expert meetings, conferences and institutions (AUT, DEU, GBR, ESP, MLT, RUS, USA). Others carry out joint projects, e.g. in the framework of the EU, or by financing ageing-related programmes in other member States (AUT, CZE, LTU, PRT, ROU, RUS, USA).

10.2 Activities coordinated by the UNECE

UNECE has been promoting international collaboration in the field of ageing through the exchange of experience and good practices and capacity development. The United Nations-affiliated European Centre Vienna has been

developing tools for monitoring the RIS based on a Memorandum of Understanding between the UNECE and the Government of Austria. Austria, Spain and the United Nations Population Fund have provided significant financial support to ageing-related activities in the framework of the UNECE.

The UNECE secretariat has organized a number of international meetings, the most recent being the Léon Ministerial Conference. Data and analysis for monitoring the RIS are provided through cooperation with the European Centre for Welfare Policy and Research in Vienna.

Most member States have attended and played an active role in the meetings organized by the UNECE secretariat and have followed up on international meetings through national implementation workshops or similar activities. In addition, collaboration among EU Member States is guaranteed through regular council meetings of social ministers. One country proposed launching a “year of active ageing” in Europe (HUN).

11. Conclusions

Significant policy actions have been undertaken by member States to implement the RIS. Progress has been achieved in all the 10 commitments of the RIS, with different commitment areas receiving varying degrees of attention. Implementation has been concentrated on social and economic policy. Out of the 35 reporting Governments, 12 explicitly prioritized the area of social protection systems (commitment 4), 12 the area of quality of life and health care (commitment 7), and 8 the area of labour markets (commitment 5).

Within the framework of commitments 4 and 5 (social protection systems and labour markets), most member States prioritized measures aiming at financial sustainability of social protection systems. Progress in the reform of these systems was often reported through the provision of incentives to encourage citizens to participate in the labour force for longer. Many countries have increased the official retirement age or have started initiatives in this direction. To increase the

10.3 Cooperation between member States and civil society

The UNECE member States support civil society mainly through funding for organizations, projects or events (AUT, HUN, MKD, ROU). They also enable NGO representatives to attend international conferences and expert meetings (AUT). Furthermore, civil society is closely involved in the policymaking and legislative process in a number of countries (DEU, FRA, HUN, ISR, NLD, ROU). This can take various forms. For example, one country has set up a National Action Plan Office with participation of civil society to facilitate the RIS process (DEU). One country has integrated a statement of civil society to all the commitments into their country report (DEU).

At the intersection of the member States, the UNECE secretariat and civil society, several networks of research institutes, public institutions and NGOs have evolved to address population ageing. One member State offers training courses for government and NGO delegates from other member States, and thus facilitates increased collaboration in the region (MLT).

employability of older workers, training, a flexible retirement age, tax reductions and subsidies for companies have been introduced. These measures are usually complemented by an economic policy that aims at fostering sustainable growth through balanced budgets, employee training and initiatives to increase productivity, as well as reforms of the labour market to increase employment rates.

Considerable progress was also reported on the commitment 1 (mainstreaming ageing in all policy fields). A large majority of reporting countries either have comprehensive national programme documents related to ageing or are drafting them. Governments are increasingly involve citizens by establishing or strengthening national councils where pensioners’ and older citizens’ organizations are represented and are assisting in preparing and monitoring legislation.

Participation of older persons is being promoted by fostering intergenerational collaboration through volunteer programmes and media campaigns conveying a more positive image

of ageing. Improving infrastructure in the housing and transport sectors to provide easy access is another tool to support integration. All in all, member States are increasingly devoting attention to participation: 20 countries reported significant activity in this field, with four identifying it as a specific priority area. Promoting a participatory approach is also seen as an important area where the civil society and NGOs have a special role. Government involvement in this area frequently focuses on financial support to the non-governmental infrastructure related to population ageing. However, participation and collaboration with civil society and NGOs have yet to be reviewed and appraised systematically.

Most countries have passed anti-discriminatory legislation to ensure gender equality (commitment 8). While commitment 7 (quality of life, health and well-being) was identified as a priority area by 12 countries, 20 reported significant activity in this area. Countries have invested in making it easier to reconcile work and child-rearing. Throughout the region, many activities aimed at recognizing the family as the

prime point of care for both children and older persons were reported (15 countries). Frequently, policy measures improving life for caretakers, such as paid time off work, monetary benefits and training are applied.

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

There has been significant and increasing international cooperation in the framework of the UNECE in implementing the RIS. This cooperation has been carried out in the form of exchange of experience and good practices, capacity-building and the development of monitoring tools. The UNECE secretariat has proven effective in facilitating the RIS and in bringing countries together to exchange on progress made.

Figure 9

Prioritization of commitments according to country reports

① Mainstreaming	
② Participation	4
③ Economic Growth	
④ Social Protection Systems	13
⑤ Labour Markets	8
⑥ Life-Long Learning	2
⑦ Quality of Life, Health and Well-Being	12
⑧ Gender	1
⑨ Intergenerational Solidarity	
⑩ Regional Cooperation	