ENSURING A SOCIETY OF ALL AGES
FROM POLICY DECLARATION TO ACTION

PROMOTING THE IMPLEMENTATION
OF THE OUTCOME OF THE UNECE MINISTERIAL
CONFERENCE ON AGEING, VIENNA 2012
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01. INTRODUCTION

Twenty years after the first ever United Nations global conference on ageing issues in Vienna in 1982, the Second World Assembly on Ageing of the United Nations took place in Madrid in April 2002. It adopted the “Madrid International Plan of Action on Ageing” (MIPAA) – a very comprehensive strategic document addressing the important changes and the needs of ageing societies and older persons worldwide.

In order to better shape policies and action according to the specificities of the region and the needs of its people, the United Nations Economic Commission for Europe, UNECE, decided to conceive a “Regional Implementation Strategy” (RIS) for the International Plan of Action on Ageing. In September 2002 high-level representatives of the UNECE member states met in Berlin and adopted this Regional Implementation Strategy together with the so-called “Berlin Ministerial Declaration” committing their governments to act according to this comprehensive strategy.

In order to monitor and to support the implementation of MIPAA and RIS in the region the UNECE decided to organise Ministerial Conferences on Ageing every five years – each one dealing with specific action areas as defined in the Berlin RIS. The second follow-up regional Ministerial Conference on Ageing took place in León/Spain in 2007 under the topic “A society for all ages: challenges and opportunities”.

On 19 and 20 September 2012 the third Ministerial Conference on Ageing of the UNECE took place in Vienna under the title “Ensuring a society for all ages: promoting quality of life and active ageing”. Government representatives of almost all 56 member states of the UNECE region - including the European countries, North America as well as countries from West and Central Asia, and thus stretching literally “from Vladivostok to Vancouver” – attended the conference. Many observers from other regions of the United Nations, representatives of the European Union, researchers and representatives of non-governmental organisations dealing with ageing issues were also among the participants.

The UNECE Ministerial Conference on Ageing in Vienna concluded with the adoption of a “Ministerial Political Declaration” containing, in particular, a catalogue of measures the member states committed themselves to implement. They address the following four core policy areas that were identified for enhanced action:

// Longer working life and ability to work
// Participation, non-discrimination and social inclusion of older persons
// Dignity, health and independence in older age
// Intergenerational solidarity
Two parallel fora preceded the Ministerial Conference on 18 September 2012: the Forum of Non-governmental Organisations (NGOs) and the Research Forum. Both fora came up with position papers dealing with main issues raised in the “Ministerial Political Declaration”. These two documents were presented during a plenary session of the Ministerial Conference (see chapter 3).

The three documents that resulted from the Ministerial Conference on Ageing in Vienna – the “Ministerial Political Declaration”, the “Vienna Research Forum Statement” and the “NGO Political Declaration” – are rather abstract texts containing a great variety of statements, demands, intentions and recommendations.

The purpose of this brochure is to illustrate, through the presentation of existing good practice and more general considerations for policy making, how commitments of the 2012 Vienna MinisterialDeclaration relate to various societal situations and can be successfully implemented in terms of concrete policies and action. The examples and proposals have all been selected from contributions to the Vienna conference.

It is expected that these examples can stimulate a larger circle of readers – politicians, public administrators, NGO activists, researchers, market actors, the media and interested citizens – to reflect on a variety of opportunities to promote action in the spirit of the Ministerial Declaration and the other conference declarations. The good practice cases are intended as “food for thought” and may serve as starting points for “creative imitation” to effectively address needs at local, regional and national levels. Thus they could serve as a stimulus to implement new measures in the UNECE region, helping to ensure “a society for all ages by promoting quality of life and active ageing”, the topic of the 2012 Vienna Ministerial Conference on Ageing of the UNECE.

The examples and the considerations for policy making presented are taken from various sources: from the contributions of experts and politicians during the panels of the conference itself as well as from the poster exhibition on “Good Practices from the UNECE Region” that was displayed during the conference. Special reference is also made to the comprehensive “Policy Briefs on Ageing”, which have been published since November 2009 by the UNECE Secretariat in Geneva. They are part of the activities of the UNECE “Working Group on Ageing” and contain, among others, an overview of issues with regard to each topic they deal with, related good practice examples in the UNECE member states, recommendations and a check list for policy making and action, as well as a bibliography (see all Policy Briefs under: www.unece.org/pau/age/policy_briefs/welcome.html).
02. The Vienna Ministerial Declaration with Good Practice Examples and Considerations for Policy Making

In this chapter the Ministerial Declaration – as unanimously adopted at the UNECE Ministerial Conference on Ageing in Vienna, September 2012 - is reproduced in full.

For easy orientation the heading of each of the four core policy areas identified by the Ministerial Declaration for enhanced action is highlighted by a different colour. At the end of each core area some good practice examples and policy recommendations, as presented in the context of the Vienna Ministerial Conference on Ageing, are listed in a box. The indication of corresponding internet sources invites interested readers to look for more detailed information.

The 2012 Vienna Ministerial Declaration “Ensuring a society for all ages: Promoting quality of life and active ageing”

01. We, the representatives of the Member States of the United Nations Economic Commission for Europe (UNECE), gathered at the Ministerial Conference on Ageing from 19 to 20 September 2012 in Vienna, Austria, reaffirm our commitment made in the Berlin Ministerial Declaration in 2002 and subsequently confirmed in the León Ministerial Declaration in 2007 to implement the Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing (MIPAA).

02. We welcome the notable increase in life expectancy in the region, so that ever greater proportions of persons are living longer and in better health. We are aware that in certain countries with economies in transition the recent gains in longevity have not yet been able to fully offset the losses in life expectancy of their citizens, particularly men.

03. We recognize that the enduring demographic changes have been generating both opportunities and challenges in the region. We are committed to raising awareness about and enhancing the potential of older persons for the benefit of our societies and to increasing their quality of life by enabling their personal fulfilment in later years, as well as their participation in social and economic development.

04. We emphasize the rights of older persons and note with concern that age discrimination continues to be a barrier in attaining a full, healthy life as active members of society.

05. We are committed to meet individual and societal challenges triggered by population ageing through adequate and sustainable measures of financial security in old age, life-long continuum of health and social care, including long-term care, and provisions of inclusive education and support for active ageing, life-long learning, and participation in various spheres of society without discrimination, particularly with regard to older women.
06. We realize that the implementation of the UNECE RIS/MIPAA during the past five years has occurred in the environment of a continuing global financial crisis, which in most countries of the region has affected families and communities, including its older members and especially older women.

07. We also realize that while some Member States still have to develop more comprehensive policy responses to individual and societal needs of ageing populations others aim to sustain for the future the existing access of older persons to adequate social protection and well-functioning systems of education, gender-specific health and social care, as well as opportunities to participate in society as equal partners.

08. We acknowledge the significant progress made by many Member States in fulfilling the ten commitments of the UNECE RIS/MIPAA during the second five-year cycle. The notable achievements of the implementation process in the region include, amongst others, the following:

(a) increasing attention by policy makers, the media and the general public, to the issues of population and individual ageing, including growing recognition of older persons’ dignity, human rights and fundamental freedoms, their potential to contribute to social and economic development, solidarity between generations and cohesion within society;

(b) expanding initiatives to adapt national social protection systems to the consequences of demographic change;

(c) growing involvement of civil society, in particular organizations of older persons, in formulating, implementing and monitoring policies addressing the rights, needs and expectations of older persons;

(d) increasing use of innovative approaches in providing educational, health, rehabilitation and social care services, including technological and organizational innovations, as well as promoting stronger involvement and collaboration of public, private and non-profit sectors in developing such services;

(e) establishing the UNECE Working Group on Ageing as an intergovernmental body for regional cooperation in the implementation and monitoring of RIS/MIPAA.

09. We are cognizant that the advancement towards a society for all ages promulgated by the MIPAA has been uneven across the region. We are also aware of numerous challenges in implementing RIS/MIPAA, including the following:

(a) many societies are still confronted with man-made barriers and prejudices that constrain the achievement of intergenerational equity and reciprocity. There remains the need for policies on health and welfare of older persons to be complemented with measures to empower older persons, particularly older women, and to prevent elder abuse, neglect and loneliness, as well as by measures to strengthen solidarity among generations;
(b) in many countries, policies fostering active and healthy ageing have been rather modest and short of the necessary disease preventing and health promoting measures;

(c) the progress in adjusting national legislation concerning work and retirement has been slow in some countries;

(d) the need to streamline national efforts to adjust the systems of social protection in view of demographic changes and financial challenges persists;

(e) the growing demand for long-term care presents additional challenges for public systems of care provision, as well as for care provided by civil society and by families.

10. In fostering the implementation of the UNECE RIS/MIPAA in its third implementation cycle (2013-2017), we are determined to reach by 2017 the following policy goals:
I. Longer working life is encouraged and ability to work is maintained by

(a) Promoting and supporting healthy life styles and wellbeing in work, preventing and controlling non-communicable diseases, and ensuring safe and healthy working conditions, including measures for appropriate work-life balance with flexible working time schemes, through the entire working career.

(b) Achieving higher employment rates of older men and women through appropriate incentives related to, inter alia, taxation and social security systems, age-friendly working conditions, flexible working time schemes, information, age-appropriate training and re-training programmes, and age management measures in public and private sectors.

(c) Developing evidence-based labour market policies, which recognize that youth and older persons’ employment policies are complementary and beneficial to all. Promoting positive attitudes towards senior employees and combating age discrimination in the labour market.

(d) Making the transition to retirement more flexible and providing incentives for staying longer in the work force in accordance with the individual’s needs and aspirations.

(e) Carrying out pension reforms to adapt to demographic changes, including increasing longevity and, in certain Member States, to the growing numbers of older persons working in the informal sector. Promoting the sustainability and adequacy of both public and private pension systems and ensuring universal coverage, as appropriate.

(f) Promoting the role of older workers as transmitters of knowledge and experience to younger workers.
Some good practice examples and considerations for policy making regarding the encouragement of longer working life and the maintenance of ability to work

An example from Austria:
Prevent invalidity and early exit from the labour market

In 2011, the Austrian Government started the programme „fit2work“ with the objective to prevent invalidity and early exit from the labour market and hereby to aim at maintaining the employability of employees. It is designed as a nationwide low-threshold information and counselling service on work and health for the target group of older persons at risk of losing their jobs due to illness, disability or similar problems but addresses also businesses. Four principles govern „fit2work“: voluntariness, early intervention, individuality and sustainability.

An example from the Czech Republic:
A strategy of age management

In order to improve the situation of the age group 50+ in the labour market the Czech Association of Adult Education Institutions implemented a concept of “Age Management” using, in particular, the Work Ability Concept and, based on it, a Work Ability Index. Work ability is understood as how good a worker’s performance is at present and presumably in the near future, and how able he or she is to carry out a specific task with respect to the work demands, considering his or her health and mental resources. Thus work ability is the result of the interaction of the worker and the work to be performed. Work ability may also be described as the balance of the workers’ resources and the work demands. The application of the Age Management principles in this project resulted in encouraging the employment of the age group 50+ and, as a consequence, supports social cohesiveness and economic growth.

An example from the United Kingdom:
Gender impact assessment of a pension reform

The United Kingdom introduced two new Pension Acts, in 2007 and 2008, which led to important changes to the State pension from 2010 onwards and introduced a new, low-cost private pension scheme that people will be able to save into from 2012 onwards. The Gender Impact Assessment analyses the likely impact of these reforms on women and men saving for retirement. The 2007 Pension Act addresses a number of measures that are crucial from an equality perspective in order to ensure justice for both genders. A key aspect in this reform is that a life of unpaid caring responsibilities will be rewarded in retirement (in the State pension system) in the same way as a life of gainful employment.
An initiative of HelpAge International

HelpAge International has conducted a research project named “Off the grid” in Tajikistan and in Kyrgyzstan. These countries, like many others in the EECA region, have a large informal work sector with large numbers of older people working until they are very old. For them work is not a choice but they work because they have to. This creates specific problems: under existing rules, many informal workers will not be eligible for contributory pensions because they and their employers have not been paying into the necessary funds, and both countries struggle with fiscal strains that make any new public sector spending, including large-scale poverty reduction programmes, hard to afford. HelpAge International recommends certain measures to address these problems, among these are, e.g., realistic policy projections building on existing institutional capacities, adopting a life course approach, learning from the experiences of others, including representations of people concerned in planning processes, restoring public trust and, last but not least, a guaranteed minimum income for all (universal pension).

An example from Norway:
St. Olav’s University Hospital in Trondheim

St. Olav’s University Hospital received the national award for “This year’s senior initiative” in 2011 for its successful efforts to make senior policy a special focus area. The purpose of its commitment is that seniors are encouraged to further employment, so that the hospital can take advantage of valuable skills and experience acquired by personnel throughout a long professional life. Senior policy is now part of the hospital’s priorities and thus a natural element of the total employer policy, thus being of great importance for the hospital to achieve its goals. Employees from age 55+ may enter agreements on various measures. The holistic approach, with main responsibilities of top management, the anchoring in all levels of the organisation, and the general awareness raising are decisive elements in building a sustainable Senior Policy.

More information related to the subject with additional examples of good practice

An overview of issues related to this topic with short descriptions of more examples from practice, a checklist and policy recommendations can be found in the UNECE Policy Brief on Ageing No. 9 of January 2011 on “Age-friendly employment: policies and practices”.

See:

Contact for further information:
Trondheim University Hospital,
www.stolav.no

See:
II. Participation, non-discrimination and social inclusion of older persons
are promoted by

(a) Reducing material deprivation, poverty and social exclusion among older persons, especially older women, and facilitating the access of older persons to resources to meet their needs.

(b) Taking measures to combat discrimination based on sex, racial or ethnic origin, religion or belief, disability, age or sexual orientation.

(c) Empowering people to realize their potential for physical, mental and social wellbeing throughout the life course and to fully participate in society according to their needs, desires and capacities.

(d) Ensuring lifelong access to various forms of high quality education and training, including in advanced technologies.

(e) Facilitating participation of older persons in political, economic, cultural and social life.

(f) Facilitating participation of older persons, particularly women, in decision-making processes at all levels, both directly and through organizations of older persons across civil society.

(g) Combating ageism through awareness campaigns and by encouraging the media and other opinion-making actors to give an age-balanced image of society, highlight the positive aspects of ageing, develop non-discriminatory images of older persons, and disseminate information about ageing as a natural phase in individual development. Involve older persons in the planning, implementation and evaluation of such media programmes.

(h) Promoting easy access of young and older persons to information and education related to ensuring their dignity and their human rights.

(i) Improving the collection and sharing of data, statistics and qualitative information for monitoring better the quality of life and dignity of older persons, including cases of violation and abuses of their rights, in order to design and implement appropriate evidence-based policy measures.

(j) Taking into account the diverse needs of a growing number of older persons among ethnic minorities and migrants to ensure their integration and equal participation in society.
Some good practice examples and considerations for policy making regarding the promotion of participation, non-discrimination and social inclusion of older persons

An example from Kyrgyzstan:
The right to live without violence in old age

A project supported by HelpAge International is aimed at alleviating all forms of neglect, abuse and violence against older women and men in the Kyrgyz Republic by protecting older people, with specific attention to older women, against domestic violence, neglect and abuse. It does so by measures that strengthen support services, increase civil society representation, and promote greater public awareness of the issue. Furthermore, it encourages enhanced civil society participation in the promotion and protection of the rights of older victims of domestic violence and abuse. The project has achieved many positive changes at civil society level, at community and family level, and at national level.

An example from Greece:
Capacity building for a society of all ages

In 2012 SOCIAL AID OF HELLAS implemented the “Capacity Building Programme for Ageing”. The objective was to help senior Greek citizens to become more organized and active members of their local communities. They are encouraged to develop advocacy for their age group and to offer their help to other citizens in their municipality who are in need of support. They are educated and helped to recognise their potential to contribute to the survival of their families, their children and their relatives during the serious financial situation of the country.
An example from Serbia:
Some sport, some fun – get involved

The Movement of the Third Age of Serbia is organizing the “Olympiad Sports, Health and Culture of the Third Age” under the motto “For active and creative age”. Elderly people from Serbia and other countries compete in various sport disciplines, participate in ecological action, in a painting colony, in literary and ethnic evenings and present their talents. The fourth Olympiad had 750 participants from 76 cities. The achievements: social inclusion of elderly persons and persons with special needs, education, cooperation between generations, development of volunteering, promotion of healthy lifestyle, promotion of creativity of the elderly, gender equality issues, raising ecological awareness, socializing and competition, new experiences, new friends and improving the quality of life.

An example from Austria:
Sustainable learning in the community, SLIC

The project focussed on raising awareness of older people’s competences and identifying new opportunities for learning and engagement. Through the means of workshops it aimed at empowering older people to become active citizens, encouraging the development of skills and competences through formal and informal learning opportunities and directly linking the concepts of lifelong learning and community involvement. The SLIC workshops encouraged participants to become more active and motivated them to take part in formal and informal education and volunteering.

Some general reflections:
Active ageing, active participation – five propositions for better policy making

Active ageing is a central political concept that considers not only the challenges, but also the opportunities of long-living societies. This includes opportunities for older people to continue working, to stay healthy longer and to contribute to society, for example through volunteering. Five propositions are in the centre of a detailed argumentation: 1. Although interventions for active ageing are most efficient when taking place early in the life-course, they are also effective and meaningful later in life. 2. Diversity in ageing processes should be reflected in interventions for promoting participation, social inclusion and non-discrimination. 3. Transition into retirement is an important gateway for active ageing. 4. Active participation in later life is based on opportunities for involvement and volunteering in organizations and in the community. 5. Images of ageing frame opportunities for active ageing and access to social and health services for older persons. These five issues are argued extensively in this conference contribution.
More information related to the subject with additional examples of good practice

An overview of issues related to this topic with short descriptions of more examples from practice, a checklist and policy recommendations can be found in the

UNECE Policy Brief on Ageing No. 4 of November 2009 on “Integration and participation of older persons in society”.

UNECE Policy Brief No. 12 of January 2012 on “Images of older persons”.

See:
III. Dignity, health and independence in old age are promoted and safeguarded by

(a) Safeguarding the dignity of older persons, particularly those with disabilities, and fostering their sense of belonging and self-esteem through measures aimed at, inter alia, combating any form of prejudice, neglect, abuse and discrimination.

(b) Strengthening measures of health promotion, care and protection, as well as disease and injury prevention at all ages, thus lowering the probability of illness and disability and helping to ensure high physical and mental functioning, independent living, as well as active participation throughout the life course.

(c) Giving special attention to preventive measures, early diagnosis and to the treatment, care, especially long-term care, and social protection of persons with Alzheimer’s disease and other dementias, while ensuring their dignity and non-discrimination in society.

(d) Respecting self-determination and dignity as core values through the end of life of an individual. This in particular should be the principal attitude in nursing and medical practice, including long-term and palliative care.

(e) Aiming to ensure that older persons maintain the highest possible level of health, social and functional capacity before, during and after natural and man-caused disasters by enhancing coordinated support.

(f) Facilitating access to age-appropriate, affordable and effective high-quality goods and services and improving mobility through age-friendly environments.

(g) Developing innovative methods and technologies for reliable, affordable and safe support and care of older persons at home.

(h) Ensuring ‘ageing in place’ by promoting services and support to the individual and the family to enable older persons to continue living for as long as possible in their own environment and community. These services should take into account the special needs of women, in particular those who are living alone.

(i) Promoting architectural alterations and innovative housing design aimed at adapting to the changing needs and functional abilities of persons as they age.

(j) Supporting, by appropriate means, self-help arrangements of older persons for independent or assisted living, including inter-generational housing facilities and acknowledging that individual needs are assessed and properly addressed whether in an institution or at home.
(k) Ensuring a continuum of affordable, high-quality care, ranging from arrangements for primary and community-based care to various forms of institutional care.

(l) Recognizing and improving the situation of informal and formal carers, including migrant carers, through training and dignified working conditions including adequate remuneration.

(m) Recognizing and supporting family carers, who are mostly women, in accomplishing their demanding tasks, including provisions for reconciliation of work and family duties, as well as social protection measures.

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Some good practice examples and considerations for policy making regarding the promotion and safeguarding of dignity, health and independence in older age

An example from the Ukraine: Preventing elder abuse
The objective of the project implemented by the Ukrainian charity organisation “Turbo pro Litnii v Ukraini” (Age Concern Ukraine) is to improve the lives of vulnerable older people in the Ukraine by raising awareness of their human rights, reducing the abuse of their rights, and mobilising older volunteers to defend their own human rights. It aims at achieving an once-for-all change in the national approach to identifying and safeguarding vulnerable adults by gaining national legislative support for local multi-agency vulnerable adults’ protection working groups, to have elder abuse recognised as a human rights abuse by all key stakeholders, society and legislation, and by raising awareness among the general public and older persons themselves. The project also mobilises older volunteers to act as advocates on behalf of themselves and their peers.

An example from Greece: Exercise in old age
The Special Secretariat for Nutrition and Sports of the Ministry of Health and Social Solidarity funds local authorities of the country to implement programs of physical activity for people aged 65+. These programs are part of the Sport for All programs, covering all age groups, and also special population groups such as persons with a disability, Roma, prisoners, patients of drug rehabilitation centres etc. The programme “Exercise in Old Age” includes physical exercises with a recreational and social nature, and is aimed at disease prevention, recreation and improvement of the biological, psychological and mental ability of a person, while it also develops the concept of sociability.

Contact for further information:
www.tlu.org.ua/?page_id=299

Contact for further information:
Ministry of Health & Social Solidarity, Special Secretariat of Nutrition and Sports.
www.yyka.gov.gr
An example from Serbia: 
Older people’s self-help groups

The main objective of the project is to empower older people to get involved in the issues that affect their lives and to help themselves by participating in older people’s self-help groups and to contribute to the development of their communities. The project facilitates older people’s active participation in society, also to help their peers who are disabled, chronically ill or have special needs, and it follows the motto “Nothing about us without us”. These older people’s self-help groups plan the participation of their members in the community, they promote ways and means to help and support others to deal with their difficulties, and they exercise advocacy for the elderly towards politicians, the administration and social as well as health services.

An example from Slovenia: 
Reducing health inequalities among the elderly

The project deals with opportunities of health education transfer between different social strata. In guided discussion meetings on health-related issues the participating elderly focus each time on a different topic; nutrition, physical exercise, alcohol, smoking, relationships etc. The moderators’ task is not so much to give information, but to encourage discussion and exchange of positive experiences in disease management among the participants. This kind of social learning achieves changes of attitude and behaviour towards a healthier lifestyle. Health inequalities between the elderly are reduced by the elderly themselves as they become more actively involved in care for their own health. This adds to their quality of ageing and is also cost-effective from the public health point of view.

Contact for further information:
www.redcross.org.rs

For further information:
www.inst-antonatrstenjaka.si/gerontologija/projekti/14.html
02. THE VIENNA MINISTERIAL DECLARATION WITH GOOD PRACTICE EXAMPLES AND CONSIDERATIONS FOR POLICY MAKING

New trends and initiatives within the US Administration for Community Living

The U.S. has a longstanding set of protections and laws focused on providing health, economic security, social support and a host of legal rights and protections for older individuals. The goal is to enable older people to remain healthy and to live independently and with dignity in their own homes and communities. Recently, support for caregivers was included with the creation of the National Family Caregiver Support Program to assist family care and other care forms at home as a good alternative to care in institutions. The current transformation of the US healthcare delivery system and the National Prevention and Health Promotion Strategy, aiming at improving health at all ages, puts four goals in focus: building healthy and safe community environments, expanding quality preventive services in clinical and community settings, empowering people to make healthy choices, and eliminating health disparities among differing segments of the population. In addition, protection from elder abuse, neglect and exploitation are addressed. Work is also done on the improvement of age-friendly city environments, on establishing and enhancing quality standards for social services and health care, as well as on the reconciliation of work and family and care duties of informal caregivers.

Results from a Swedish research project on physical barriers: Home is the major place for ageing

Independence in daily functioning and the well-being of older European citizens in the future will be significantly enhanced through an improved understanding of the interrelations between ageing persons and their material environments in areas such as home and out-of-home environments. Research at Lund University on person-environment interactions provides evidence that combinations of functional limitations related to the environmental barriers in housing, public facilities and public transportation present the major causes of accessibility problems. Actors in physical planning need more knowledge on functional capacity and on how the process of ageing interacts with physical environmental barriers and how they can be overcome in order to create environments enabling activity, participation, independence, and ultimately good health.

See:

See:
Contribution of Prof. Susanne Iwarsson, Lund University, to the UNECE Ministerial Conference on Ageing, Vienna, September 2012;
More information related to the subject with additional examples of good practice

An overview of issues related to this topic with short descriptions of more examples from practice, a checklist and policy recommendations can be found in the

UNECE Policy Brief on Ageing No. 6 of April 2010 on “Health promotion and disease prevention”.

UNECE Policy Brief No. 7 of July 2010 on “Towards community long-term care”.

See:


IV. Intergenerational solidarity is maintained and enhanced by

(a) Promoting and strengthening multigenerational dialogue and intergenerational learning by all stakeholders, including governments, non-governmental organisations, the private sector, the media and the general public.

(b) Improving cooperation between youth organisations and older persons’ organisations.

(c) Recognizing the value of and fostering the joint volunteering of people of all ages.

(d) Designing and implementing educational campaigns for the general public, particularly the younger generations, on issues of population and individual ageing. It should include teaching about healthy, active ageing as part of the life-course into the curricula of all educational institutions, while also raising awareness among older persons on issues, living conditions and challenges of the younger generations.

(e) Considering, that solidarity between generations also means adequate and sustainable social protection of older persons while recognizing that older men and women continue to make important contributions to their communities in various ways, including continued employment, performing non-paid caring of younger and older family members, participating in volunteering as well as cash and in-kind transfers to benefit younger members of their families and communities.

(f) Developing and implementing socially responsible, financially sound and sustainable strategies encompassing the needs, capacities and expectations of current and future generations while promoting equal opportunities for their self-determination.
Some good practice examples and considerations for policy making regarding the maintenance and enhancement of intergenerational solidarity

An example from the Slovak Republic: We enjoy being together

The Nursing Home and Social Services Home in Kremnica (NHSSH) creates conditions for cultural activities, hobbies and work therapy as it cooperates with local schools and children’s homes to fill the clients’ leisure time and to maintain and even improve the quality of their lives. Children are looking for new “grandparents” and NHSSH’s clients are looking for new “grandchildren” and new friends. The programme is aimed at strengthening self-confidence and self-assertion in a heterogeneous group environment consisting of people of various generations, at supporting abilities like making other persons happy and offering or accepting help regardless of age or familiarization with the elderly. Children should realise that they must respect the elderly and behave towards senior citizens in an attentive manner. Through regular meetings both sides learn to accept each other and enjoy the time spent together, which is the main purpose of the meetings.

An example from Austria: Styrian Intergenerational Week

The Division of Society and Generations within the Styrian Department of Society and Diversity is developing and coordinating a Generations Network for NGOs. Services include information and consulting on active ageing, funding for intergenerational projects, as well as support of knowledge transfer and exchange through symposia and expert conferences. With a variety of projects launched to raise general awareness for intergenerational issues, the topic of interaction and solidarity between generations is addressed, taking different perspectives into account. The Styrian administration created a Generations Fund for intergenerational projects and initiated an annual Generations Conference „JUNG.ALT.MITEINANDER“, meaning “Young. Old. Together”. The strategy is to closely review all activities in this area and to adapt and improve measures to meet the needs of the generations in order to ensure efficient use of resources.

An example from Slovenia: Folk dance heritage – bridge between generations

In Slovenia folklore has a long and rich tradition that varies greatly from region to region. The project “Beltinci Let’s Dance!” folklore festival was conceived as a platform for the introduction, promotion and interconnection of the best folklore groups
Thoughts of a youth representative on appropriate policy orientation:
We are all future

Lloyd Russell-Moyle, a youth representative, advanced some personal reflections on the challenges of intergenerational solidarity. Focusing on the need to re-balance the actual needs of young people with democratic principles, the economy, the world of work and with pension perspectives of all people, he emphasized that issues like service provision for those at the margin of society and the importance of sustainable development should not be neglected. Fulfilling the needs of today without compromising the options for tomorrow is the real challenge. He suggested that many of the concerns of the old and the young are rather similar and emphasized that a holistic approach of the key issues was indispensable. Promoting truly inter-generational solidarity could only be done by making sacrifices for the greater good, but also by showing solidarity for the most disadvantaged. The slogan of the Youth Forum „For Youth Rights” could easily be reformulated „For Your Rights”, providing, protecting and empowering all generations.

Reflection of a leader of an international NGO on intergenerational solidarity and related policies

The overall objective of a society for all ages is to encourage and maximize the potential of both men and women throughout the entire life course, including life at older ages. Many NGOs primarily advocate on behalf of the world’s older population, but one should never lose sight of the fact that intergenerational policies and programs have to be fair and affordable for all generations. While this may create stress and even potential conflicts, it has to be recognized that intergenerational solidarity is the glue that holds families and communities together and contributes to a more stable and prosperous society. Intergenerational solidarity enables individuals to reach their full potential during the various stages of the life course. Ensuring more balanced policies to protect and promote intergenerational solidarity has always been a difficult challenge. A lack of intergenerational leadership and vision at this point in time could result in serious threats to intergenerational solidarity in future decades.
More information related to the subject with additional examples of good practice

An overview of issues related to this topic with short descriptions of more examples from practice, a checklist and policy recommendations can be found in the UNECE Policy Brief on Ageing No. 8 of August 2010 on “Advancing intergenerational solidarity”.

11. For reaching the policy goals in the implementation of the UNECE RIS/MIPAA during the period 2013-2017, we stress the importance of mainstreaming ageing and promoting active ageing as defined by the World Health Organization (WHO) in the national policy processes, notably by incorporating the life course approach. We also note a need to build where possible on recent international commitments relevant to the promotion of active ageing, including prevention and control of non-communicable diseases, and addressing the social determinants of health.

12. We will endeavour to raise awareness in societies of the overall advantages of promoting active ageing for today and the future, underlining the need of allocating sufficient resources for its implementation. We will also strive to disseminate across the region innovative and effective approaches for policy action for example those promoted during the European Year for Active Ageing and Solidarity between Generations (2012) and its follow up.

13. We also emphasize that policies on ageing and their implementation are to be seen as a shared responsibility of all major actors in society. Consequently, there is a need to effectively promote the collaboration of governments, policy makers, the private sector, social partners, researchers and organizations of and for older persons, as well as other non-governmental organizations. Such cooperation is of particular importance for identifying issues that require new policies, for formulating appropriate responses and for the effective implementation, monitoring and evaluation of evidence-based policies on ageing.

14. We are aware that research is vital to the development and implementation of effective policies and programmes. Sustainable research infrastructures, improved data collection, longitudinal research and cross-sectoral cooperation should be further strengthened and developed.

15. We acknowledge the contribution of civil society and older people themselves in taking forward the provisions of the RIS/MIPAA and are committed to sustain the continuing partnership between all major stakeholders in the implementation process.

16. We appreciate the contribution of the European Centre for Social Welfare Policy and Research, affiliated with the United Nations, and the International Institute on Ageing, United Nations - Malta (INIA), to the implementation of the UNECE RIS/MIPAA.

17. We recognize the role of the national focal points on ageing and the UNECE Working Group on Ageing in leading the implementation and monitoring of RIS/MIPAA across the region and providing for the exchange of information and best-practices. Through the work of its Bureau, the Working Group on Ageing has streamlined the second review and appraisal process of RIS/MIPAA and the preparation of this Ministerial Conference on Ageing.

18. We are committed to sustaining the Working Group on Ageing as a long-term intergovernmental body within the UNECE framework for the implementation and monitoring of RIS/MIPAA and will support its activities substantively and by contributing financially to the extent possible.

19. We appreciate the role of the UNECE secretariat, in collaboration with other stakeholders, in assisting Member States in implementing the UNECE RIS/MIPAA and the Vienna Ministerial Declaration 2012 through, inter alia, the support provided in developing national capacities on ageing. The cooperation between the UNECE secretariat and its major partners within the UN system, in particular with the entities working on ageing such as UNFPA and the WHO Regional Office for Europe, should be strengthened.

20. We thank the Commission of the European Union for the financial contribution to the organisation of the Research and Civil Society Fora.

21. We express our sincere gratitude to Austria for hosting the 2012 UNECE Ministerial Conference on Ageing and for its hospitality.

Recommended for further reading:
“Ageing in the Twenty-First Century: A Celebration and A Challenge”

This report published in October 2012 by the United Nations Population Fund (UNFPA) and the NGO HelpAge International aims at stimulating dialogue and sharing of best practice. It provides recommendations on how to better organise society in the light of 21st century demographics.

The full report and an executive summary can be downloaded from the following website:
http://www.unfpa.org/public/home/publications/pid/11584
03. OTHER FINAL DOCUMENTS OF THE UNECE MINISTERIAL CONFERENCE

In this section the texts of the two additional position papers presented in the Ministerial Conference – namely the “NGO Political Declaration” and the “Vienna Research Forum Statement” – are reproduced in full.

The NGO POLITICAL DECLARATION

01. We, the NGOs contributing to the UNECE Ministerial Conference on Ageing in Vienna, 19-20 September 2012;

02. Recognising that much has to be done to achieve the aims and objectives of the Madrid International Plan of Action on Ageing (MIPAA) and insisting that fiscal uncertainty is not an excuse for inaction;

03. Recalling the León Ministerial Declaration in which NGOs were recognised as playing “a significant role in representing people and their needs in society and thus can contribute to policy making”;

04. Reaffirming that MIPAA and its political declaration constitute a forward-looking response on the part of governments to the opportunities and challenges of population ageing in the twenty-first century and that if MIPAA is to succeed, Member States need to implement the three priority actions of MIPAA that they themselves have agreed: older persons in development; advancing health and wellbeing into old age; ensuring enabling and supportive environments;

05. Noting with concern problems with the effectiveness of MIPAA as a political tool given the non-binding nature of the agreement, its lack of concrete time-bound targets and comprehensive accountability;

06. Further noting with disappointment: i) the lack of awareness of MIPAA; ii) the failure of over one third of UNECE Member States to complete reviews of MIPAA in the current cycle; and iii) the lack of implementation of the ‘bottom-up’ review process across UNECE Member States resulting in the almost total absence of civil society involvement in the review at the national level, where such discussions would have had greatest impact;

07. Reaffirming the rights of older persons and the obligations of Member States to protect those rights;

08. Recognising that efforts to address the needs and aspirations of older people require on-going intergenerational dialogue, cooperation, communication and the full participation of all age groups;

09. Further recognising the need to value older persons and their multiple contributions to society, and rejecting any notion of discrimination based on age;

10. Insisting that assured social, physical, material and financial security is a fundamental pre-requisite for ageing in dignity in all societies and at all times;
11. In the interests of achieving the aims and objectives of MIPAA, urge UNECE Member States to:

a. Protect the rights of older persons by: i) enforcing legislation that already exists; ii) promoting good practice that enables older persons to understand and claim their rights; iii) strengthening national, regional and international human rights legislation including the continuation of the UN Open-ended Working Group on Ageing; and iv) appoint ombudspersons in every UNECE Member State in order to offer older persons greater legal recourse;

b. Strengthen the monitoring, evaluation and review of MIPAA by: i) setting time-bound targets and commitments; ii) developing specific indicators with the involvement of older persons and NGOs for monitoring and evaluating the implementation and impact of MIPAA; iii) supporting the submission of NGO shadow reports at MIPAA reviews; and iv) establishing a schedule of interim meetings between NGOs and relevant national ministers in the years between the mandatory five-year reviews of MIPAA;

c. Eliminate poverty and inequality among older persons by: ensuring adequate incomes, including universal access to non-contributory pensions and equal access to essential goods and services;

d. Facilitate access to decent work and adequate pay for persons of all ages by: i) abolishing mandatory retirement ages; ii) eliminating discrimination on the basis of age for access to work and pay across the life course; iii) implementing flexible working practices that meet the needs of older persons; iv) supporting retraining programmes for older workers; and v) supporting older workers in the informal sector;

e. Recognise, make visible and support the multiple contributions of older people to society and to the benefit of people of all ages, including knowledge and life experience, caring, educating, homemaking, working and volunteering;

f. Guarantee access to lifelong learning across the life course, recognising that access to affordable high-quality education, informal and non-formal learning for people of all ages is necessary for strengthening older persons’ participation in society, increasing social inclusion and reducing discrimination;

h. Strengthen the autonomy of older persons and their inclusion in the community by investing in age-friendly environments, including: local infrastructure, transport, adaptable housing and products, social and personal support services, and local facilities;

i. Provide free access to: i) high-quality and gender-specific health and social care services, including investment in gerontological training of care personnel and their adequate remuneration; ii) mental health and dementia services, including preventative and rehabilitation services; and iii) adequate pain management and palliative care;

i. Put in place national quality standards to regulate health and social care services in both community and institutional settings involving older persons in the monitoring, evaluation and review of those standards;
j. Take action to prohibit, prevent and redress acts of abuse, neglect and violence by:
   i) reviewing laws and policies and implementing existing legislation; ii) raising
   awareness and providing appropriate social support systems; and iii) implementing
   transparent complaint mechanisms;

k. Take action on the gender-specific rights and needs of women and men, including:
   addressing the vulnerability of older women who often live in greater poverty; and
   meeting the specific needs of older vulnerable men living in isolation;

l. Recognise the vulnerability of older migrants and other marginalised groups and put in
   place measures to assure them adequate social protection and equal access to services;

m. Take forward the commitments and values of MIPAA in eliminating poverty and
   meeting the needs of older persons internationally by: i) mainstreaming ageing in
   development cooperation; ii) strengthening age and sex-disaggregated data collection
   globally; and iii) ensuring that issues relating to ageing and older persons are
   fully integrated into the post-2015 Development Framework and the Sustainable
   Development Goals;

n. Ensure that the commitments and values of MIPAA are carried forward in other
   international agreements, including, but not limited to: the UN Principles for Older
   Persons of 1991; the Declaration on the Right to Development; the Millennium
   Declaration; and all relevant human rights instruments;

o. Engage and collaborate actively with civil society and older persons to ensure that
   the commitments made at the present Ministerial Conference are fully realised.

12. In conclusion, we the NGOs expect the UNECE Member States to: i) recognise fully the
    role of NGOs in achieving the commitments entered into both at the present Ministerial
    Conference and in the original MIPAA agreement; ii) convene planning meetings with
    organised civil society at the national level in each Member State by March 2013 to take
    forward those commitments; and iii) report publicly, both nationally and regionally, on
    the results of those meetings by the end of June 2013.
Vienna Research Forum Statement

1. We have come together at the Research Forum in Vienna, Austria, to contribute to the Ministerial Conference on Ageing with its theme ‘Ensuring a Society for All Ages: Promoting Quality of Life and Active Ageing’. We unequivocally support the implementation of the Madrid International Plan of Action on Ageing (MIPAA) in the region of the United Nations Economic Commission for Europe (UNECE). We are convinced that the UNECE Regional Implementation Strategy for MIPAA (UNECE RIS/MIPAA) is a sound framework for policy actions on ageing in our countries. We are also convinced that such actions will have to be informed by and founded on valid, reliable, representative and timely evidence drawn from a high quality multidisciplinary research on ageing, incorporating life course perspective and placing an essential focus on gender.

2. We realise that our region and the entire world have been undergoing important demographic change with social, familial, economic, political and technological implications, and population ageing will be one of the most powerful forces driving these global transformations. Through research and knowledge dissemination, we want to understand the full extent and significance of these transformations and contribute to capacity development in designing appropriate policy responses. Emphasis need to be placed towards capacity-building in gerontological expertise, so as to assist shaping the society for all ages consistent with the goals of MIPAA/RIS, as well as in securing and enhancing the dividends of longevity gains. This requires a significant investment in the development of academic centres in the field of research on ageing, as well as rolling out training programmes in the field of gerontology to ensure an effective provision of all essential social and health services.

3. We recognise that researchers and research institutions of the UNECE region are among those leading the global efforts in identifying the mechanisms of individual and population ageing and therefore we have a special responsibility to share the scientific analysis of ageing and its implications with the rest of the world. To realise this endeavour, adequate and timely funding is required from both public and private sources and also obligations to make all necessary data accessible to researchers, policymakers and practitioners. We must do more and better research to counter the growing concerns often raised in policy debates in which population ageing is seen as a burden to the society, in particular during times of economic crisis, and elaborate approaches for removing the institutional and social barriers in mobilising the potential of older people.

4. We acknowledge in particular that Eastern Europe countries, as well as countries of the former Soviet Union, in recent decades have undergone multifaceted transitions and gathered invaluable experiences in addressing numerous challenges of building cohesive and prosperous societies. Many of these countries have also been adjusting to their demographic transition by developing policies for active and healthy ageing, by reforming their pension systems, reorganizing labour markets and modernizing their health and social care systems. These countries need to be supported further in building research capacity and in formulating evidence-informed policy making, especially in view of the fact that efforts to deal with the crisis may undermine attempts to improve the programmes that exist in these countries to enhance well-being and social integration of older people. Reciprocity is required in drawing lessons across the countries of the UNECE region.
5. We note the progress achieved within the priority areas for policy related research on ageing outlined in the Research Agenda on Ageing for the 21st Century. We are eager to see that the results of this research are translated into good practices, evaluated and applied in more effective and efficient policy responses to the challenges and opportunities of ageing. To achieve this, the policy formulation and its evaluation must be performed through a concerted and well-coordinated engagement of experts from public authorities, research institutions, academia, civil society including employers and advocacy groups, trade unions, the business sector, older people themselves and representatives from younger generations, not just at the national level but also at the regional and local levels. Policies should clearly seek to respond to the needs and preferences of older persons by giving them the opportunity to make their voices and opinions heard as experts in their own right, and all new initiatives or policy developments should aim to promote active and healthy ageing and the quality of life among the current and future generations of older people.

6. We regard the WHO Framework on Knowledge translation as a useful tool for promoting evidence informed policy in various areas of individual and population ageing. ‘Strengthening the evidence base and research’ has been singled out as one of the four strategic priority areas for the WHO Strategy and action plan for healthy ageing in Europe, 2012–2020. We welcome the initiatives of the Road Map for European Ageing Research, resulting from the FUTURAGE project funded by the European Commission and the European Research Area in Ageing (ERA-AGE) resulting in Europe’s first post-doctoral programme in the ageing field (FLARE) and the first European ageing research funded jointly by several European countries – Active and Healthy Ageing Across the Life Course. We also acknowledge the significance of the European Social Charter and the EU Charter of Fundamental Rights that help strengthen human rights of older people, as well as the EU Directives against age discrimination and the recent European Charter on the rights and responsibilities of older persons in need of assistance.

7. The 2012 European Year for Active Ageing and Solidarity between Generations, the pilot European Innovation Partnership on Active and Healthy Ageing (EIPAHA) and the Joint Programming Initiative ‘More Years, Better Lives – The Potential and Challenges of Demographic Change’, as well as the EU programme ‘Ambient Assisted Living’, have initiated a more systematic process identifying how research and innovation can best enhance and highlight the contribution that older people make to society. These initiatives as well as the Active Ageing Index (AAI) developed at the European Centre Vienna for the European Commission have the explicit purpose to encourage policymakers and relevant stakeholders at all levels to take most appropriate policy actions, with the goal of ensuring that longevity gains are not just additional years of life but an asset for social and economic development.
8. Exchange of knowledge, practice and policy experiences on ageing can make indispensable contribution at national, cross-national, and cross-cultural levels. To ensure such exchanges, both a sustainable structure and an on-going process are needed and it must involve all key stakeholders from various parts of our region, most importantly older people as well as younger generations, to empower their interests further. We believe that such requirements in the UNECE region can be met by forming the online platform Research Application and Dissemination Platform on Ageing (REAP-AGE). The formation of an initiating multidisciplinary group for exploring the feasibility of this proposal would be required at this first stage of such an endeavour.

9. The proposed platform would involve international experts from public and private sectors, academia, the civil society, the business sector, and labour and trade unions as well as older people, to help translate research findings into policy options and specific recommendations for policy actions. It would serve as the forum for exchanging innovative scientific ideas, help in designing rigorous studies, analysing research findings and monitoring current research and policy advancements, in order to identify the most promising replicable models (best practices) to inform evidence-based policy action on ageing. It would also provide opportunities for international experts to train each other in the development, analysis and dissemination of data on ageing. It can become a bridge between the Western, Central and Eastern European countries and the countries of the former Soviet Union for sharing the experience in evidence-based policy action on ageing and facilitating the exchange of ideas and experts between various countries for developing national capacity in the area of ageing.

10. European countries are entering the third cycle (2013–2017) of implementing the UNECE RIS/MIPAA, and we (the participants of the Vienna Research Forum) commit ourselves to produce and disseminate the essential evidence to inform policy efforts aimed at reaching the goal of the MIPAA: A Society for all Ages.