



MORE YEARS

BETTER LIVES

## Joint Programming Initiative

More Years, Better Lives

The Potential and Challenges of Demographic Change

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# Data Mapping Project

AUSTRIA



Country Report



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## 1. Demographic context

In 2012, the total population of Austria was 8.4 million (8,443,018). The percentage of those aged 50 and over was 37.1 per cent, and 17.7 per cent were 65 years and older. The share of the population under age 15 was 14.6 per cent, and 67.7 per cent of the population were aged 15-64. Women are overrepresented in both the 50+ and the 65+ age groups (54.3 per cent and 58.1 per cent, respectively). The institutionalised population aged 60 and older in Austria is estimated to total approximately 60,000 (2006)<sup>1</sup>.

According to the latest population forecasts, the population will increase from the current 8.4 to about 9.5 million by 2050. As in other European countries, the age structure in Austria is shifting significantly towards older persons. About 21.6 per cent of the population will belong to the age group 65+ by 2025 (medium term) and this percentage will increase to 28 per cent in the long term (as from 2050). The share of very old people (80 years and more) in the total group of elderly is expected to increase drastically, from 397,000 in 2011 to 590,000 in 2030 and to almost 1,000,000 in 2050. At the same time, the share of the working-age population, aged between 20 and 64, is projected to drop from 61.9 per cent in 2011 to 53.4 per cent by 2050 due to demographic ageing. The growth of the share of the population aged 65+ is mainly due to the steady increase in life expectancy, the high birth rates around 1940 and 1960, as well as the currently declining birth rates.

Life expectancy among both men and women has been rising for decades, and reached 83 years for females and 80 years for males in 2011. Life expectancy at age 50 was 32.9 years (30.4 years for men and 35.1 years for women), while people at 65 had an average remaining life expectancy of 20.1 years in 2011. Since 1970, people aged 65+ have added six years to their remaining life expectancy. This development is mirrored by declining death rates. Between 1983 and 2010, age-standardized death rates fell for both sexes, while male death rates declined at a slightly higher pace, which also contributed to a declining gender gap in life expectancy. Cardiovascular diseases are the main cause of death for both males and females, followed by cancer. While death rates for males have always exceeded those for females, they are particularly high for men who suffer from mental disorders (e.g. addiction and depression). Increases in mortality from diabetes and certain infectious diseases can be observed in recent years. Furthermore, a pronounced increase in mental disorders have been recorded, which, together with musculoskeletal disorders, are the main causes of early retirement.

Among older workers (aged 50+) in Austria, the employment rate increased from 24 per cent in 2004 to 33 per cent in 2012. In 2012, 1,032,800 people aged 50+ were employed, while the number of employed individuals among the 65+ age group was 74,400 (employment rate: 5.1 per cent). The employment rates for these two age groups were at the level of the EU27 average in 2012. While a decrease in the gender gap can be observed, particularly over the last five years, the employment rate of women is still significantly below that of men (27.3 per cent for women and 40.7 per cent for men in the 50+ age group). The old-age dependency ratio (population aged 65 and over as a percentage of the population aged 20-64) in Austria is projected to increase from 28.6 per cent in 2010 to 52.9 per cent in 2050, and to 55.4 per cent in 2060 (EU27: 57.7 per cent). This demographic trend is the strongest factor in the growth in the gross public pension expenditure, which is projected to increase from 14.1 per cent of GDP in 2010 to 16.4 per cent of GDP in 2050, and to 16.6 per cent in 2060<sup>2</sup>.

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<sup>1</sup> This corresponds to 3.3 per cent of the population in this age group, which is in line with the EU average.

<sup>2</sup> European Commission, Directorate-General for Economic and Financial Affairs "The 2012 Ageing Report, Economic and budgetary projections for the EU27 Member States (2010-2060)", European Commission, Brussels (2012).

The average effective retirement age of recipients of direct pensions (old-age and invalidity pensions) was 58.4 years (59.4 years for men and 57.4 years for women) in 2012. Considering only old-age pensions, the actual retirement age for women was 59.3 years and 62.9 years for men. While the current statutory retirement age is 65 for men and 60 for women, the age at which women are eligible to retire and receive an old-age pension will be gradually raised between 2024 and 2033 to approach that of men.

The Austrian pension system strongly relies on the social insurance pensions system that combines the first (statutory) and second (occupational pension) pillars<sup>3</sup>. This dominant first pillar is a mandatory and benefit-oriented PAYG (pay-as-you-go) scheme, which was composed of different schemes for different occupational groups prior to 2005, but which was harmonised and combined by law in 2004<sup>4</sup>. The Austrian statutory pension system is primarily financed by insurance contributions that amount to 22.8 per cent of gross earnings up to a ceiling.

In the early 2000s, the Austrian pension system was subject to several important reforms that can be seen, at least in part, as a response to the challenge of sustaining the pension systems. With the introduction of the severance pay scheme in 2002 and the state-subsidised private pension scheme (*Zukunftsvorsorge*) in 2003, the third pillar (individual pensions) became increasingly important<sup>5</sup>. In 2005, the Austrian pension system was harmonised through the introduction of a uniform pension law covering people in all occupation groups.

In Austria, the public pension system is the most important instrument providing financial security in old age (about 90 per cent of the pension benefits are paid by the statutory pension insurance, which is compulsory for all economically active people in the framework of the general social insurance system). Based on the latest EU-SILC data (2011) for Austria, the at-risk-of-poverty rate for older people (aged 65+) is 16.0 per cent, which is higher than that of the total population (12.6 per cent). The poverty risk in this age group is significantly higher for women than for men (19.3 per cent and 11.4 per cent, respectively) and for people living alone (26.5 per cent).

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<sup>3</sup> Marin, B. "Welfare in an idle society", Ashgate, Farnham (2013).

<sup>4</sup> Kneller, M., Köhler-Töglhofer, W., & Prammer, D. "The Austrian Pension System – how recent reforms have changed fiscal sustainability and pension benefits". Monetary Policy and the Economy 2(06), Austrian National Bank, Vienna, 2006.

<sup>5</sup> Ibid.

## 2. Demographic change and policy concerns

The relatively low level of participation of older people in the labour market has been a key policy concern in Austria. In response to this problem, a wide variety of measures promoting older people's (re-)integration into the labour market have been undertaken, ranging from substantial reductions in ancillary wage costs to active support of integration through qualification measures. An additional measure, which aims to maintain the employment of older workers, is a part-time employment scheme that provides incentives for older employees to continue working, albeit at a reduced schedule, through partial wage compensation and maintenance of their social insurance contributions at the level of their previous standard working hours.

The Austrian government has implemented the National Reform Programme (NRP) and the Stability Programme in order to meet the goals set by the EU 2020 strategy. These measures are subject to regular review under the European Semester by the European Commission. In 2012, seven country-specific recommendations for Austria were issued. In order to meet the national 2020 employment targets, which include the harmonisation of the retirement age, increased employability of older workers, and an increase in the effective retirement age, the Austrian government has developed a number of measures.

1. The retirement age of women will be gradually adjusted by 0.5-year intervals between 2024 and 2033 until it is equal to 65, which is the pensionable age for men.
2. Maintaining and improving the ability to work and the employability of older workers has become a main policy priority in Austria. Thus, in the past few years, the further development and integration of preventive and health-promoting elements in labour market policy programmes were intensified with the goal of reducing the number of people who, citing health reasons, end their active working lives prematurely. The Labour Market Initiative, in effect through 2016, is intended to prolong active employment among older workers and workers with health impairments. The measures include improving access to medical and vocational rehabilitation for older workers with health problems (e.g. the "rehabilitation-preceding-pension programme"), and the establishment of a new central occupational health assessment unit ("*Gesundheitsstraße*" or "Road to Health"), which offers a broad package of services, such as counselling, guidance and coaching (the latter programme started as a pilot programme in the regions of Lower Austria and Vienna in 2009, and was implemented nationwide in 2011). Another notable example is the "Fit2Work Programme", which is being implemented in all regions of Austria between 2011 and 2013, and provides low-threshold counselling services to prevent early retirement for health reasons.
3. Several reforms of early retirement schemes and general pension reforms have been adopted to increase the effective retirement age. First, following a reform of the disability pension system, the limited-term disability pension will be replaced with a set of benefits or rehabilitation benefits for all individuals under the age of 50 by 2014. In addition, the eligibility age for collecting a disability pension, which is currently 57, will be increased gradually to age 60 by 2017. Moreover, the pre-retirement scheme known as the "corridor pension" will be reduced by raising deductions from 4.2 per cent to 5.1 per cent from 2017 onwards, and the number of years of pensionable services will be gradually raised from 37.5 to 40 years between 2013 and 2017. A new pension account will be in place from 2013 onwards that eliminates the "parallel calculation". This account will provide regular and transparent information on pension entitlements, and will signal that working longer provides a substantial increase in pension entitlement accruals.

4. A number of instruments have also been developed in recent years to promote and monitor age diversity programmes in the workplace. As was set out in the Austrian Health and Safety at Work Strategy 2007-2012 and the subsequent 2020 strategy, the goal of these programmes is to motivate enterprises to analyse the workforce's age structures and to identify and implement age-appropriate measures for work processes tailored to the sector and organisation. In addition, social partners in Austria have launched various initiatives to raise employers' awareness of the special value of older workers and of age-friendly workplace design and organisation (i.e. the NESTOR competition). These measures and initiatives are expected to bring about a change in attitudes towards working longer, framing staying in employment as a positive lifestyle choice.
5. An important step in the promotion of lifelong learning in Austria has been the adoption of the Strategy for Lifelong Learning in 2011. The strategy sets specific objectives to be met by 2020, and covers measures aimed at helping adults maintain basic skills, increasing access to education and training programmes for older people to ensure employability, and promoting work environments conducive to learning. The main goal of the strategy is to establish a country-wide resource for education and training services for older people, which are then provided in their local communities.
6. Austria's policy response to population ageing in the area of long-term care dates back to 1993, when the Federal Long-Term Care Act came into force. Since then, a number of measures have been implemented. A legal framework for supporting 24-hour care was introduced in 2007. In 2009, long-term care benefits were increased, the procedure for determining the "care level" was shortened, the co-insurance of care-giving family members was improved, and information and counselling services on care-giving at home were introduced. Most recently, the 2011 Long-Term Care Fund Act (*Pflegefondsgesetz*) provided the legal basis for creating the Long-Term Care Fund, which will cover part of the cost of developing a range of support and care-giving services in the long-term care system.

### 3. Data sources

#### General issues

A vast amount of data relevant to the issues of ageing and demographic change are collected by various Austrian government agencies and their research partners. In this introduction to the data sources themselves, we will discuss the main institutions that collect and disseminate these data, the strengths of the current system of data collection in the area of ageing, the domestic versus international uses of the datasets, and the domains in which data availability seem to be concentrated.

Austria's main statistical body, which is operated by the national government, is *Statistik Austria* (Statistics Austria). *Statistik Austria* maintains and is responsible for publishing and providing access to many of the data sources included in the JPI data map. *Statistik Austria* is also responsible for processing and submitting national data to Eurostat. In the Health and Performance area alone, *Statistik Austria* is, for example, responsible for the governance of the Austrian Health Interview Survey (AHIS), the Cancer Registry, the Cause of Death Statistics, the Hospital Discharge Statistics, and the Health Expenditures based on the System of Health Accounts (SHA). The Federal Ministry of Labour, Social Affairs and Consumer Protection (BMASK) has a strong mandate to fund social welfare studies. In 2011, the BMASK published the annotated bibliography "Austrian research data on the topic of old age<sup>6</sup>", an invaluable resource on Austrian data sources related to ageing and the elderly. The Main Association of Austrian Social Security Institutions (*Hauptverband der österreichischen Sozialversicherungsträger*) is also an important source of data collection and processing, particularly in the Social Systems and Welfare and Work and Productivity domains. The Central Social Security Registry (CSSR) contains numerous databases and datasets of interest to researchers on health insurance and pension benefits and coverage. In addition, the Federal Ministry of Health (BMG) and the Institute for Empirical Social Research (IFES) are active in funding and/or implementing data sources that appear in the JPI data map for Austria.

The current system of data collection has a number of strengths. The health component of active and healthy ageing is covered in depth, as well as in breadth. In addition to sources that provide data on perceived health status, wellbeing, and patient satisfaction, there are multiple sources of administrative data on the functionality of aspects of the health care system. The wide range of administrative data in Austria is discussed in the Data and Policy Agenda section of the report. In addition to a wealth of health data sources, there are a number of small-scale occasional studies that focused on the elderly population and investigated a broad range of topics, including productivity and employment, quality of life, technology use, and relations between the generations. Although these studies were conducted only once to fulfil specific research purposes, they provide rich information on the living conditions, wellbeing and activities of the elderly, and are thus highly relevant for this JPI project.

An added strength of the data network in Austria is the degree to which data sources are internationally comparable. Several data sources, while under national governance, use internationally standardised classification systems or methodologies, including the AHIS, the SHA Health Expenditure, the Time Use Survey and the Consumption Survey. This is because most of the larger surveys included in the data map are part of European or cross-national surveys. Another international dataset in which Austria participates is the Gender and Generations and Survey (GGG), which is part of the wider multi-country Gender and Generations Programme co-

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<sup>6</sup> Kolland, F., Mayer, T. & Nentwich, K. „Austrian research data on the topic of old age (Österreichische Forschungsdaten zu Altersfragen)“ BMASK, Vienna, 2011. Available at: [http://www.bmask.gv.at/cms/site/attachments/6/2/3/CH2227/CMS1314963502633/oesterreichische\\_forschungsdaten\\_zu\\_altersfragen.pdf](http://www.bmask.gv.at/cms/site/attachments/6/2/3/CH2227/CMS1314963502633/oesterreichische_forschungsdaten_zu_altersfragen.pdf)

ordinated by the UN Economic Commission for Europe. Among the original goals of the GGS was to capture data on gender and intergenerational relations, including attitudes towards ageing and the elderly among the public and among older people themselves. The version of the study adapted and implemented in Austria has, however, so far only focused on gender relations, specifically on fertility rates and desired family size, and only includes individuals aged 18-44 years in the sample. If future waves of the Austrian GGS incorporate the “generations”-related thematic elements, this survey will provide valuable information on the topic of public attitudes towards ageing.

As we noted above, much of the data, particularly the large quantitative datasets, are concentrated in the Health and Performance domain. However, several of these datasets are relevant for other areas as well due to their broad topical coverage. Data for Austria is lacking in a number of domains, especially Public Attitudes Towards Ageing, Intergenerational Relationships and Uses of Technology.

The following material summarises the major Austrian data sources for the 10 policy fields identified by the Joint Programming Initiative “More Years, Better Lives – The Potential and Challenges of Demographic Change”. More detailed information on these sources are available online in the JPI Data Map at <http://www.jpi-dataproject.eu/>.

## Health and Performance

The data sources included in the Health and Performance domain can be grouped into three main categories: surveys, registries and databases. The coverage of information in the Health and Performance domain is extensive. The surveys capture mainly self-reported health status, patient satisfaction with care services and quality of life; while the registries consist largely of administrative and clinical data on the health of those who come into contact with the health care system, including information on cancer patients and life events (births and causes of death). Finally, the databases focus on cost aspects of the health care system. In the first category, the Austrian Health Interview Survey (AHIS) and the Intersectoral Patient Satisfaction Survey (IPSS) are cross-sectional surveys with large sample sizes that rely on self-reported data and subjective assessments of health status. While the AHIS questionnaire is more comprehensive and seeks to gather information on both physical and mental health and subjective wellbeing, and includes institutionalised persons in its sample, the IPSS focuses on the health status, treatment and satisfaction with care among patients in inpatient care facilities. A smaller scale survey, carried out on behalf of the Austrian Federal Ministry of Labour, Social Affairs and Consumer Protection (BMASK), is the Quality of Life in Old Age survey, which asks participants to report on their health status as part of a wider evaluation of their overall quality of life (See Wellbeing topic below).

The three relevant registries are the Austria-wide Cancer Registry, Cause-of-Death Statistics, and Hospital Discharge Statistics. The Cancer Registry and Cause-of-Death Statistics are linked to one another with a personal identifier (and to the Austrian Birth and Marriage Registries), while Hospital Discharge Statistics are anonymised from the outset and therefore cannot be linked to other datasets.

Three databases that focus on costing aspects of the health care system are the Business Intelligence in the Health Care System (BIG), the General Approach for Patient-oriented Outpatient-based DRG (GAP-DRG) and the DIAG-Extranet. The BIG is concerned primarily with the cost and reimbursement of prescription drugs, the



GAP-DRG focuses on the reimbursement of outpatient care by the Diagnosis-related Group (DRG) and the DIAG-Extranet is concerned with the operations and finances of hospitals receiving social insurance funding.

In addition to these datasets, Health Expenditures based on the System of Health Accounts (SHA), the Austrian Health Information System (ÖGIS), and the Austrian Work Climate Index are included in the Health and Performance domain. The SHA Health Expenditure dataset calculates expenditures on health care services by age group, among other variables, and is implemented in most OECD countries, allowing for international comparisons. The ÖGIS, drawing from several national registries and databases, comprises almost all data sources on inpatient health and care systems in Austria and provides geographical disaggregation of data at the community/municipality level. Finally, the Austrian Work Climate Index collects cross-sectional, regular data on the subjective satisfaction of the Austrian working population with their employment situations, including their general and work-related health status.

## Social systems and welfare

The data sources included in this domain capture a broad range of data on all facets of Austria's social insurance bodies, including on the health insurance, pension and long-term care benefits received, as well as on household income, expenditures and consumption. The Consumption Survey, which has been carried out every five years since 2000 by Austria's central statistical office; and the Ageing Society survey, which was conducted once in two waves in 2006 and 2008; are the two national quantitative data sources in the Social Systems and Welfare domain. In addition to these two surveys, the extensive Central Social Security Register (CSSR) is the primary administrative data source in this area. Also included in this domain are the Austrian Health Information System (ÖGIS), and Health Expenditures based on the System of Health Accounts (SHA), which calculates health expenditure and health outcomes in old-age homes.

The Consumption Survey is linked to the Austrian Microcensus, and collects data on household real and disposable income, expenditure and consumption, as well as on household living standards. Socio-demographic data on households and individual household members are also captured. The Ageing Society survey 2006 and 2008, which was commissioned by the Futures Forum Austria (*Zukunftsforum Österreich*), is included in this section because it gathers subjective data from both older employees and employers on whether and to what extent the Austrian labour market is prepared to accommodate its older workers. The study is described in greater detail in the Work and Productivity domain below.

The CSSR is a depository of Austrian, social security-related, administrative data collected by the Main Association of Austrian Social Security Institutions and managed by *Statistik Austria*. The registry consists of independent datasets that can be matched using the unique social security number held by every registered Austrian resident. The individual databases included in this registry are: labour market status and monthly salary, long-term care benefits, health insurance, pension insurance and accident insurance.

## Work and productivity

The data sources contained in the Work and Productivity domain include information on the employment status and work satisfaction of residents. In addition, people's use of time—including leisure time, volunteer activities and time spent caring for family members—is collected. A small cross-sectional survey also captures data specifically on the untapped resources of elderly Austrians.

The Employment Registry, which is coordinated jointly by the BMASK and the Austrian Employment Service (AMS), regularly collects and publishes data on the labour market, including variables such as unemployment/employment and the number of job seekers and job availability. Data on job training and unemployment benefit recipients are also collected. Certain databases from the CSSR are particularly relevant for the Work and Productivity domain, namely the labour market status and monthly status database and the pension insurance database (For further information, see the Social Systems and Welfare domain).

The two waves of the Ageing Society survey interviewed business executives, employers and employees between the ages of 50 and 65 about their employment status and job satisfaction levels in an effort to assess how Austria's labour system is responding to the needs of those nearing retirement age. The Austrian Work Climate Index surveys employees on a quarterly basis on wide-ranging issues related to work and the work environment, such as general and work-related health (including occupational health hazards), work stress and physical working conditions.

### Education and learning

Research conducted at the national level on education and learning among the elderly population is limited. Most of the data come from European or international-level sources, such as the PIACC (the first wave of which is currently underway), the Adult Education Survey, the Lifelong Learning Survey (ad-hoc LFS module 2003) and the Vocational Education and Training Survey (EU-LFS). At the national level, two cross-sectional surveys have been conducted on the subject, both of which were funded by the BMASK: i.e., the Learning Needs and Arrangements of Elderly People Survey and the Education and Active Old Age Survey.

The Learning Needs and Arrangements of Elderly People Survey included seniors over the age of 60, and investigated the type, environment and frequency of continuing education among the elderly in Austria. In addition to education-related topics, the survey also captured self-reported health status. Meanwhile, respondents between the ages of 50 and 65 participated in the Education and Active Old Age Survey, a study which emphasises the role of education in active ageing, but which also asks respondents to report on their health, their quality of life and their leisure activities, as well as on intergenerational learning arrangements.

### Housing, urban development and mobility

The main sources of data for the Housing, Urban Development and Mobility domain in Austria provide information on housing conditions and demographics, on standards of living, on the use of public and private modes of transportation (for Lower Austria only), and on the mobility of elderly persons. The Housing Survey provides self-reported data on elements of housing conditions and standards of living, including the physical structures and dimensions of residences, and socio-demographic information about survey participants. The second survey, the Mobility Survey for Lower Austria, collects data on the use of public and private modes of transportation, as well as on participant attitudes towards certain kinds of transportation and issues surrounding mobility. In addition, the Mobility Survey captures information on household structure and household member demographics.

The Commuter Statistics registry, maintained by *Statistik Austria*, has been collecting data on Austrian commuters since 1971. Linked to the Microcensus at the municipal level, the registry contains data on the frequency, method, distance and direction of commutes, as well as on the characteristics of commuters, including age, employment status, profession and education.

Two additional studies that have relevance for the topic of mobility are Senior-friendly Products—New Technologies, and Quality of Life in Old Age. Both were carried out on behalf of the BMASK; the former includes a series of questions on modes of transportation used by seniors; and the latter considers mobility and independence as an indicator in its evaluation of quality of life in old age.

### Public attitudes towards old age

The two surveys included in the Public Attitudes Towards Old Age domain are the Intergenerational Solidarity in Austria survey, commissioned by the BMASK, and the Gender and Generations and Survey (GGS), which is described in greater detail in the General Issues section of this chapter. The Intergenerational Solidarity study, a cross-sectional investigation last conducted in 2005, takes a two-fold approach to exploring the tensions and points of conflicts between generations, as well as changing views of old age and the elderly, by asking participants to respond to questions from both a society-wide and an interfamilial perspective.

### Social, civic and cultural engagement

In this domain, data are available on how Austrians spend their time, including time spent at work and in social and civic engagements. The three data sources that have the most relevance for the Social, Civic and Cultural Engagement domain are all ad hoc, voluntary components of the Austrian Microcensus. The first is the Structure and Volume of Voluntary Work survey, which investigates participation in voluntary work and activities by type of activity and type of organisation. The two other datasets, the Time Wealth Survey and the Time Use Survey, collect information on the subjective quality, purpose, and type of activities people are engaged in. Whereas the Time Use Survey focuses on how time is allocated among certain types of activities, the Time Wealth Survey seeks to analyse subjective views regarding the degree to which people have sufficient time for professional, family care, and leisure activities.

In addition to these surveys, the Austrian Social Survey (ESS) provides information on political affiliation and involvement, and engagement in cultural and social activities (for further information, see the Wellbeing domain). The Undiscovered and Unused Resources and Potential of the Elderly Survey is also included in this section, as it collects information specifically on the engagement of older people in various activities through the broader lens of productivity (see the Work and Productivity domain). Finally, the Quality of Life in Old Age Survey is also included here because it investigates the social interactions and relationships of the elderly, as well as their voluntary participation in cultural and community events and institutions (for further information, see the Wellbeing domain).

### Uses of technology

Two of the studies in the Uses of Technology domain—Use of ICT in Households and the Austrian Online Monitor—are large-scale surveys that are conducted regularly over several years. The third survey, Senior-friendly Products—New Technologies, was carried out once in two waves and has a small sample size. The Use of ICT in Households survey and the Online Monitor allow for the tracking of trends in the use of technology among the Austrian population over time. The former is carried out by *Statistik Austria* on behalf of Eurostat, and uses the recommended guidelines and questionnaire produced by Eurostat, making international comparisons possible. The Online Monitor is, however, conducted by the private research firm Growth from

Knowledge (GfK Austria), and data availability is thus limited to the company's clients. The Online Monitor gathers data on the frequency and patterns of internet use among certain age groups, as well as on internet use by location (home, school, work, etc.) and the socio-demographic characteristics of respondents.

The Senior-friendly Products survey provides a snapshot of the subjective needs, skills and experiences of the elderly with regard to various forms of technology. Interestingly, the researchers responsible for the Senior-friendly Products survey elected to conduct the study in two waves: first in 2007 with respondents aged 70 and above, and then in 2008 with respondents aged 60-69.

## Wellbeing

The data sources in this domain can be loosely grouped into those that take a comprehensive approach to assessing subjective wellbeing, such as the Quality of Life in Old Age Survey and the Austrian Social Survey; those that address wellbeing from a health perspective, such as the AHIS, the ÖGIS and the IPSS; and those that are concerned with wellbeing from an employment and social security point of view, such as the Ageing Society Survey, the Consumption Survey and the Austrian Work Climate Index. Two additional datasets are included here because they hone in on specific aspects of wellbeing: the Time Wealth Survey and the Intergenerational Solidarity Survey. After Health and Performance, the Wellbeing domain includes the largest number of data sources, with many of them also appearing in other domains. This is perhaps not surprising given that wellbeing depends on multiple factors, including health, material security and interpersonal and community engagement. In terms of coverage, the Quality of Life in Old Age study addresses a wide range of factors that contribute to wellbeing, including physical and mental health, real and disposable income, and access to institutional and community resources. The survey, which has so far been carried out once in 2010 by the BMASK, has a small sample size and does not include people in institutionalised care. The other main source in the Wellbeing domain is the internationally comparable Austrian Social Survey, which asks respondents to give a subjective evaluation of their quality of life and level of life satisfaction, in addition to collecting data on employment, family dynamics, and cultural, political and religious involvement. The 2003 version of the study was carried out with the express intention of linking results to the previous versions of the study in order to analyse the changing demographics and social trends in Austria.

## Intergenerational relationships

Three surveys have relevance for the Intergenerational Relationships domain. They are: the Intergenerational Solidarity in Austria survey, the Gender and Generations Survey (GGS) (for further details on both, see the Public Attitudes Towards Ageing domain), and the Undiscovered and Unused Resources and Potential of the Elderly survey (for further details, see Social, Civic and Cultural Engagement). The Intergenerational Solidarity study asks participants for their views on the state of intergenerational relationships in society, and the points of conflict between age cohorts. Respondents are also asked to comment on intergenerational dynamics among family members and the potential for solidarity and support, as well as on the patterns of interactions and contact between members of the household and extended family. As was mentioned above, for the Austrian GGS, only information on the attitudes and values of individuals with regard to family (specifically fertility) and relationships has been captured to date.

The Undiscovered and Unused Resources and Potential of the Elderly survey includes a brief section in its questionnaire on the role of elderly people in providing financial and in-kind assistance to their children and

grandchildren. The survey also seeks to elicit comments on the effects that the voluntary activities of the elderly (i.e. the productivity of elderly persons) have on the wider social environment.

## 4. The data and the policy agenda: gaps and challenges

A number of gaps in data collection in the area of ageing and demographic change became apparent after the data mapping process was completed. The issues addressed in this section include the extent to which the Austrian data collection agenda is harmonised with the EU statistical data programme, the emphasis placed on reimbursement data in health-related data sources, the overrepresentation of administrative data, and the general accessibility of data sources contained in the data map. A number of studies initiated at the European level are included in the data map, such as the AHIS, the Austrian Social Survey and ad hoc components of the Austrian Microcensus (Time Wealth Survey, Time Use Survey, Austrian Social Survey, GGS, Use of ICT in Households). These European-level surveys were included either because their design differs from the original European template or because they capture additional variables which are not necessarily transmitted to Eurostat. In addition, two surveys collected at the national level which were not transmitted to Eurostat are included: the ad-hoc module of the Austrian Microcensus on the Structure and Volume of Voluntary Work (2006) and the Microcensus Housing Survey.

The strong alignment of the Austrian data collection agenda and the integration of Austrian data sources in cross-national data series have multiple advantages, the most important of which is the comparability of data with other participating EU countries. This alignment also reflects a harmonisation of Austrian national policies on ageing within the broader policy framework of the EU. A significant disadvantage of this approach is, however, that social issues in the realm of ageing that are specific to the Austrian context are somewhat marginalised. The Public Attitudes Towards Ageing and the Intergenerational Relationships domains deserve special attention. Looking at the data map, we notice an absence of large-scale, representative, quantitative studies implemented exclusively at the Austrian national level. Instead, there are several large, administrative-based registry databases, and surveys characterised by small sample sizes and narrow thematic coverage that are funded primarily by the Ministry of Labour, Social Affairs and Consumer Protection (BMASK).

A second area of policy concern is the lack of emphasis on surveys that seek to assess the health status of members of the population aged 50 and older. With the exception of the AHIS, the large datasets in the Health and Performance domain—e.g. the ÖGIS, the DIAG-Extranet, the GAP-DRG and the BIG—are primarily concerned with tracking reimbursement information for inpatient care and pharmaceutical use. Meanwhile, only minimal amounts of data are available on outpatient and ambulatory care, and people living in institutions are generally excluded from sampling. While the percentage of people over the age of 50 living in institutions is small relative to the entire population, people in nursing homes and elder care facilities constitute an important target group for research on ageing. There is a need for additional quantitative research that takes a longitudinal approach, that focuses on outpatient health and long-term care services, and that includes the elderly population living in institutions.

The predominance of registry data across multiple JPI domains is another significant issue. In the Health and Performance, the Social Systems and Welfare and the Work and Productivity domains in particular, administrative data collected by government agencies for internal use is the primary source of national data available to researchers and policy-makers. It can be difficult for external, non-governmental researchers to gain access to these registries, both in terms of technical access and in terms of the application and fees that are often required. In addition, the expertise needed to manipulate such datasets is considerable. For example, although the individual datasets contained within the Central Social Security Registry (CSSR) can be linked to one another with a personal identifier, requests for information from multiple databases must be separately matched and produced by *Statistik Austria* for each request, which is often a complex and time-consuming endeavour. Receiving permission from the various data “owners” can also be difficult. In the cases of the

CSSR, the GAP-DRG and the BIG, all of which have multiple datasets, each relevant stakeholder has to approve data requests and ensure that data protection regulations are being upheld before access can be granted.

A final observation is in regard to the data sources presented in the Wellbeing domain. Aside from the Quality of Life in Old Age survey, the datasets identified and included in this section only partially address the multi-faceted concept of wellbeing among the ageing population. Some data sources study mental and physical health, while others focus on employment and income security, and still others investigate the social and community engagement of elderly persons. There does not, however, seem to be a research agenda dedicated to population wellbeing as a unified topic. This gap in data availability in the Wellbeing domain is indicative of the wider debate that has been underway in recent years surrounding the effective measurement and evaluation of wellbeing across countries. Stiglitz, Sen and Fitoussi's<sup>7</sup> seminal report and the EU-level initiatives that have followed from it are redefining the term "wellbeing" and encouraging the use of indicators beyond the economic performance measures that have traditionally been used. Austria's newly introduced index of wellbeing, *Wie Geht's Österreich*, is a promising development in this area, and it is hoped that increased policy focus on national wellbeing will extend to key groups of interest, such as the ageing and elderly populations.

Policy-makers would benefit from incorporating a number of actions into the research and policy agenda for healthy ageing. First, an expansion of the scale and frequency of national surveys that focus on the circumstances of elderly people would provide researchers, as well as policy-makers, with important insights into the challenges and opportunities associated with demographic change. Second, although the coverage by Austrian data sources of the major variables is quite good, many of the datasets are several years old, and more current data are not always made readily available in a timely or affordable manner. In order to accurately assess the ever-evolving situation of the elderly, researchers need access to up-to-date data. Another dimension of this issue is the need to re-evaluate current data protection laws so that the ownership structure is simplified, with the goal of granting researchers access whenever possible and encouraging innovation in research, while maintaining the privacy and security of the data. To accomplish these and other aims, a stakeholder process could be initiated in which people representing all sides of the issue meet in a forum in which they are able to make suggestions and steer the agenda.

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<sup>7</sup> Stiglitz, J., Sen, A. & Fitoussi, J. "Report by the Commission on the Measurement of Economic Performance and Social Progress" (2009). Available at: [http://www.stiglitz-sen-fitoussi.fr/documents/rapport\\_anglais.pdf](http://www.stiglitz-sen-fitoussi.fr/documents/rapport_anglais.pdf)

## Annex 1. Experts consulted

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- Franz Kolland (Institut für Soziologie, Universität Wien)
- Nadja Lamei (Statistik Austria)
- Anton Hlava (Gesundheit Österreich, GmbH)
- Gerhard Fülöp (Gesundheit Österreich, GmbH)
- Nina Pfeffer (Hauptverband der österreichischen Sozialversicherungsträger)
- Nedeljko Beier (Institut für empirische Sozialforschung, GmbH)



