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Active Ageing Index: A Legacy of the European Year 2012 for Active Ageing and Solidarity between Generations

Asghar Zaidi

Why active ageing?

Advances in health and social welfare during the 20th century brought in a golden age for humanity in terms of increased longevity, better health, and ways of sustaining a good quality of life through formal pensions, health and social care provisions. For example, someone born in London today could expect to live 30 years longer than a counterpart in 1900, will have access to pensions as well as universal healthcare systems. These advances have been truly unparalleled, and their consequences were not fully realised until recently when the social and fiscal consequences of ageing populations started to be calculated.

The downside to this golden age has been the pressure put on the resources of the modern welfare states, in particular public pensions and healthcare systems. These advances have become a victim of their own success: with so many more people benefiting from the longevity revolution, weaknesses in the financing and impact of public welfare systems were exposed. Increased numbers living longer lives need to do so in financially sustainable ways, or otherwise face the consequences of poverty and suffering in old age.

The clouds are not all dark with foreboding! Longevity gains have also accompanied economic progress in most societies. In addition, technological advances are promoting effective and efficient provision of healthcare, albeit the progress has been gradual and uneven.

But, there is one key consequence of the population ageing that has the risk of being overlooked: the new generation of older people to be a resource to the ageing societies they live in. Being healthier as a group, they have the potential to contribute to not just their own well-being but also to sustain a greater economic and social prosperity for the society as a



Being healthier as a group, we have the potential in our old age to contribute towards not just our own well-being but also help sustain a rising economic and social prosperity for our nations. These new paradigms of active and healthy ageing motivate the work of the Active Ageing Index project.

whole (see, e.g. Foster and Walker, 2015). The aspirations towards better and more comprehensive pensions, health and social care have also become a norm for this generation. And all of this is what we mean by new paradigms of active and healthy ageing.

Active and healthy ageing means growing older in good health and as a full member of society, feeling more fulfilled in jobs and in social engagements, more independent in our daily lives and more engaged as citizens. The active ageing strategies are about changing attitudes and developing a more positive approach to tackling the challenges of ageing. But this cannot happen successfully without help from governments and relevant agencies, at national as well as at local communities' levels.

What do we mean by active ageing strategies?

For governments, being involved in active ageing encompasses many different policy areas of living: it is not exclusively about fostering employment, but also about promoting social participation and engagement, increasing financial security, improving health and well-being, including age-friendly infrastructures, and much more. For these strategies to succeed, the building blocks of active ageing need to be cemented into the social fabric. In addition, active ageing strategies are also envisaged at the personal level, by fostering a healthy lifestyle throughout one's life.

While at times these policies focus on specific goals, they must be cast in a global approach that addresses all positive aspects of the lives of older people, most of which are brought together in the Active Ageing Index (AAI) project.

Development of the Active Ageing Index

The Active Ageing Index has been developed for the European Union countries during the year 2012, which was the European Year of Active Ageing and Solidarity between Generations. The work was initiated at the European Centre for Social Welfare Policy and Research, Vienna, and its second phase is currently undertaken at the Centre for Research on Ageing, University of Southampton.¹ The work is funded by the European Commission with the support of the United Nations Economic Commission for Europe.

¹ The focus in this Policy Brief is on the AAI results for 28 EU countries. Within the second phase of the AAI project, the geographical coverage is being expanded to include Canada, Iceland, Norway, Switzerland and the United States. Further extensions are also explored through the pilot studies in Georgia, Serbia and Turkey.

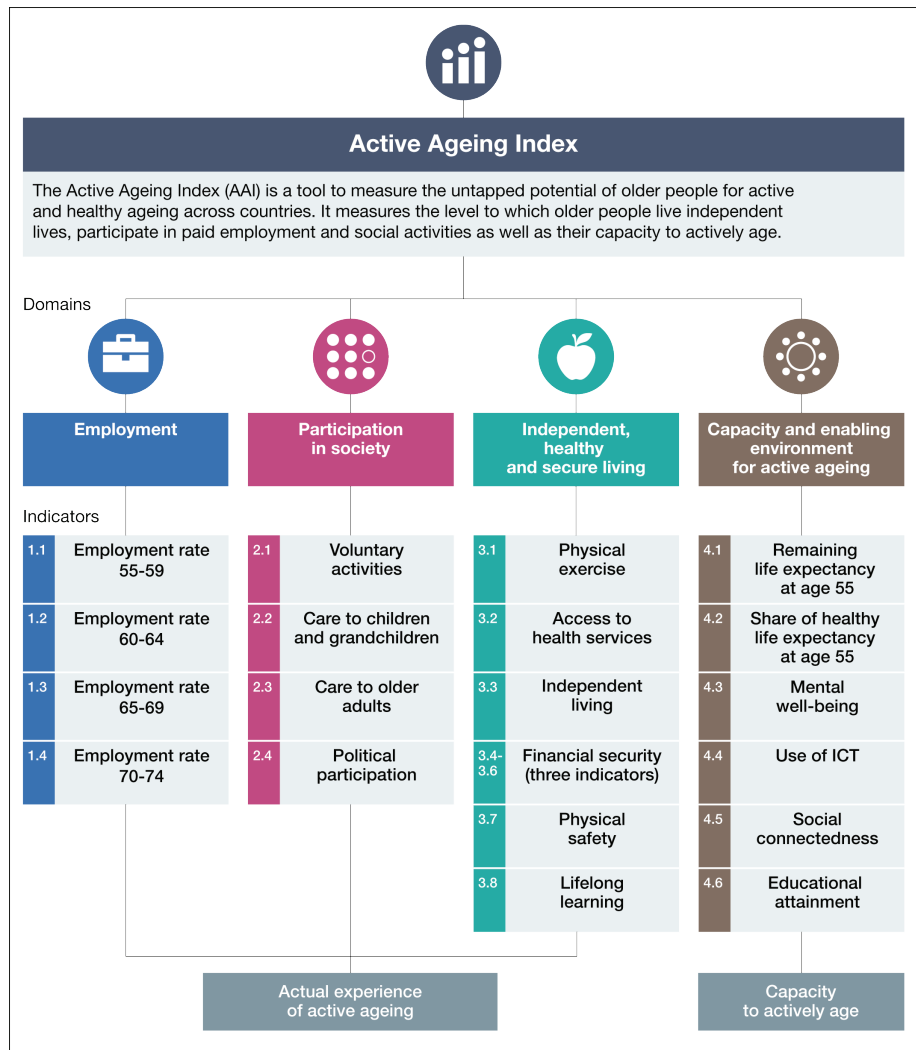
Composite indices such as the AAI always raise difficult methodological issues, e.g. of weighting their constituent indicators (see also HelpAge International, 2013). In this respect, the development of the AAI benefited enormously from the consultations of members of the AAI Expert Group, comprising academics, statisticians and representatives of international organisations such as OECD, European Commission and UNECE.

The in-depth analysis of the constituent parts of the AAI (its 22 indicators and four domains) help to explore what forms of active ageing potentials of older people have yet to be realised in different countries.

The AAI assesses the untapped potential among older people across multiple dimensions of active and healthy ageing. It is a tool that monitors overall progress and identifies where challenges remain across European countries. It also helps in assessing where policies have started to ensure that older people enjoy an active and healthy life.

The AAI encourages policy-makers to look at active ageing in a comprehensive way. It offers the broader perspective of different dimensions of contribution and potential of older people. In doing so, it helps policy-

Figure 1:
The domains and indicators of the Active Ageing Index



makers and practitioners to understand where they could do better compared to other countries and set themselves goals for a higher and more balanced form of active ageing.

The AAI comprises twenty-two individual indicators grouped in four domains: Employment; Social participation; Independent living, and Capacity for active ageing. The AAI indicators focus on the current generation of older people (mostly referring to those aged 55 and older). Their active ageing outcomes reflect experiences and vulnerabilities accumulated over the life course (for a discussion, see Zaidi 2014). All indicators and their aggregation into composite measures are available separately for men and women, indicating also what progress could be achieved simply by closing gender gaps (for a detailed description, see Zaidi et al., 2013).

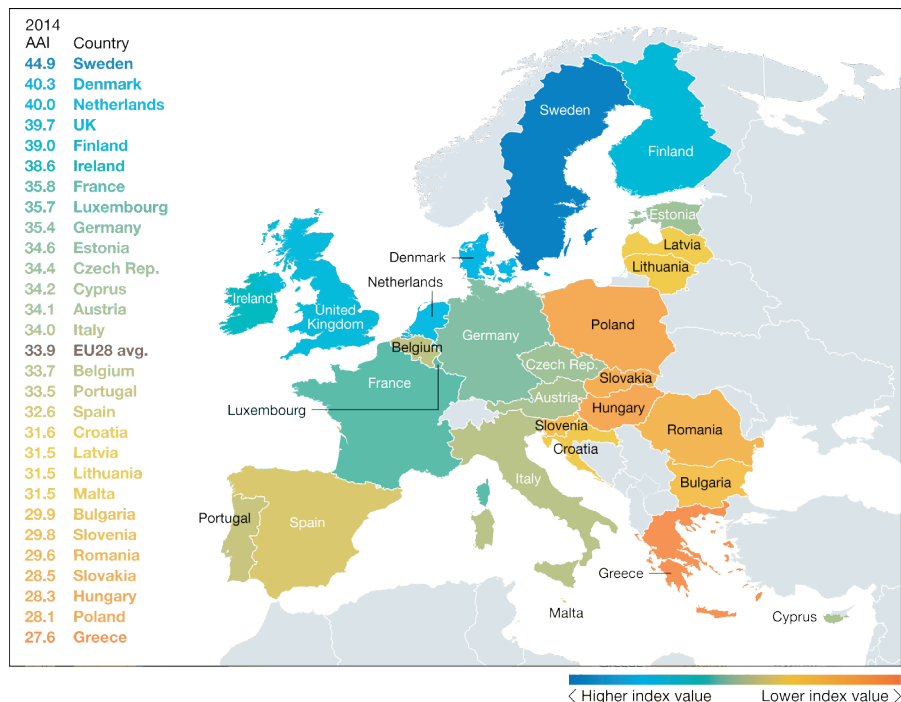
The latest results of the Active Ageing Index give a clear indication that a healthy and active life during old age is a reality for many Europeans and it has now become a genuine possibility for many more!

Key findings based on the latest 2014 AAI

The AAI 2014 results reflect the degree to which healthy and active life during old age has become a reality for the current generation of older Europeans. Figure 2 illustrates the position of 28 European Union (EU) Member States using the latest data available (for details, see UNECE / European Commission, 2015).

Sweden is at the top of the ranking across the 28 EU Member States, followed closely by Denmark, the Netherlands, Finland, the United Kingdom and Ireland. Four Southern European countries (Italy, Portugal, Spain and

Figure 2:
Ranking of 28 EU Member States based on the 2014 overall AAI



Malta) are middle-ranked countries together with most other Western European countries. Greece and the majority of the Central and Eastern European countries are at the bottom of the ranking.

The top position of Nordic and Western European countries is in large part because of their policies sustaining employment levels among older workers who are reaching retirement and providing income security and access to healthcare for their retired population. The AAI data shows that even in these countries there is scope for improvement in some individual dimensions of active and healthy ageing.

The AAI data shows that active ageing has also an important non-financial component. There are examples that show this: the top-ranked United Kingdom and Denmark are respectively 7th and 10th in the ranking for social participation and they can learn from the examples of Ireland and Italy, which have much higher scores in this respect.

Conversely, lower income Central and Eastern European countries as well as Greece face a greater challenge and need to address how they can make their older people's policies more supportive and financially sustainable. Within the low scores for the overall AAI some countries nevertheless achieved employment scores above the EU-28 average (Portugal with 33 points and Latvia with 32 points). In contrast, Greece (20), Spain (23) and Hungary (19) are all much lower than the EU-28 average of 28 points. Some of the high employment scores in these countries are likely to reflect problems of pension adequacy constraining people to remain longer in employment. When this problem is addressed, the higher levels of employment (especially among people over retirement age) may not be sustainable without further supportive policy initiatives and improvements in the work environment.

The fact that countries at the top of the AAI score have done consistently well across all the four domains is an indication that active ageing is a coherent policy area where a balanced and well-founded approach can lead to achievements that leave nobody behind. Very few countries, however, score consistently at the very top in each individual indicator of active ageing, indicating that there might be trade-offs and different priorities across these countries in achieving progress with respect to active ageing.

Unexpected AAI scores provide some interesting insights. For example, Estonia achieves a very high employment score despite having a relatively low GDP per capita and its high employment score for women (40 points) is of special note. Malta scores well across most domains, espe-

cially for men, but its overall score is pulled down because of its lowest score for women’s employment (8.5 points only). Understanding why this is so and why other countries achieve far higher levels of employment among older women will help Malta formulate policies to achieve a higher overall score.

Germany matches well with the UK, the Netherlands, Denmark and Finland in the Employment domain. In the other two domains, Independent Living (3rd domain) and Capacity for Active Ageing (4th domain), Germany’s scores are also above the EU average. It is the low score in the Social Participation domain (2nd), especially for women, that keeps Germany out of the top scoring group.

Table 1:
Ranking of EU-28 countries based on the overall 2014 Active Ageing Index and its domain-specific scores

Countries at the top have done consistently well across all four domains of active ageing – this is an indication that active ageing is a coherent policy area where a balanced and well-founded approach can lead to achievements that leave nobody behind.

| Rank | Overall | Employment | Participation in society | Independent living | Capacity for active ageing |
|------|------------------|------------------|--------------------------|--------------------|----------------------------|
| 1 | Sweden 44.9 | Sweden 43.4 | Ireland 24.1 | Denmark 79.0 | Sweden 69.2 |
| 2 | Denmark 40.3 | Estonia 39.7 | Italy 24.1 | Finland 79.0 | Denmark 65.1 |
| 3 | Netherlands 40.0 | Denmark 35.8 | Sweden 22.9 | Netherlands 78.9 | Luxembourg 63.6 |
| 4 | UK 39.7 | UK 35.8 | France 22.8 | Sweden 78.6 | Netherlands 61.8 |
| 5 | Finland 39.0 | Germany 34.4 | Netherlands 22.4 | Luxembourg 76.7 | UK 61.3 |
| 6 | Ireland 38.6 | Netherlands 33.9 | Luxembourg 22.2 | France 75.9 | Finland 60.5 |
| 7 | France 35.8 | Finland 33.7 | UK 21.6 | Ireland 74.9 | Belgium 60.3 |
| 8 | Luxembourg 35.7 | Portugal 32.6 | Finland 20.5 | Germany 74.4 | Ireland 60.0 |
| 9 | Germany 35.4 | Latvia 32.0 | Belgium 20.2 | Slovenia 74.2 | France 59.1 |
| 10 | Estonia 34.6 | Cyprus 31.4 | Denmark 19.6 | Austria 73.8 | Austria 58.2 |
| 11 | Czech Rep 34.4 | Romania 31.0 | Czech Rep 18.8 | UK 73.7 | Malta 57.1 |
| 12 | Cyprus 34.2 | Ireland 30.6 | Croatia 18.7 | Belgium 72.5 | Spain 56.3 |
| 13 | Austria 34.1 | Lithuania 30.5 | Austria 18.3 | Czech Rep. 71.2 | Germany 55.8 |
| 14 | Italy 34.0 | Czech Rep. 28.0 | Cyprus 18.0 | Malta 70.1 | Czech Rep. 54.3 |
| 15 | Belgium 33.7 | Bulgaria 25.1 | Spain 17.8 | Spain 69.8 | Italy 53.4 |
| 16 | Portugal 33.5 | Austria 24.7 | Malta 17.3 | Croatia 69.5 | Croatia 52.8 |
| 17 | Spain 32.6 | France 24.1 | Slovenia 16.3 | Italy 69.0 | Bulgaria 52.2 |
| 18 | Croatia 31.6 | Spain 23.3 | Hungary 15.4 | Hungary 68.0 | Portugal 52.1 |
| 19 | Latvia 31.5 | Italy 23.0 | Lithuania 14.7 | Cyprus 68.0 | Cyprus 50.4 |
| 20 | Lithuania 31.5 | Poland 22.4 | Portugal 14.1 | Estonia 67.3 | Slovenia 50.0 |
| 21 | Malta 31.5 | Slovakia 21.9 | Latvia 13.8 | Portugal 67.3 | Latvia 48.2 |
| 22 | Bulgaria 29.9 | Luxembourg 21.9 | Slovakia 13.7 | Lithuania 66.2 | Poland 47.9 |
| 23 | Slovenia 29.8 | Croatia 21.7 | Greece 13.7 | Slovakia 65.8 | Estonia 47.5 |
| 24 | Romania 29.6 | Belgium 21.0 | Germany 13.6 | Poland 64.9 | Slovakia 47.1 |
| 25 | Slovakia 28.5 | Greece 20.4 | Estonia 12.8 | Greece 64.9 | Hungary 46.9 |
| 26 | Hungary 28.3 | Malta 20.1 | Romania 12.7 | Bulgaria 62.7 | Greece 45.8 |
| 27 | Poland 28.1 | Hungary 19.3 | Bulgaria 12.5 | Romania 61.8 | Lithuania 45.3 |
| 28 | Greece 27.6 | Slovenia 19.1 | Poland 12.1 | Latvia 58.7 | Romania 40.9 |
| | EU28 avg. 33.9 | 27.8 | 17.7 | 70.6 | 54.1 |

The goalpost 57.5 The goalpost 54.2 The goalpost 40.6 The goalpost 87.7 The goalpost 77.7

An analysis of the relationship between the AAI and life satisfaction implies that a higher AAI is correlated with a higher quality of life of older people. Likewise, a positive relationship is observed between the AAI and GDP per capita. These correlations imply that a push towards active ageing does not imply a worsening of older people's quality of life, and it brings real benefits to the economy.

Trends in the Active Ageing Index for 28 European Union Countries

With results now available for three data points, the AAI will facilitate the benchmarking of country performances, to encourage countries to look at policies and programmes that other countries have adopted and learn from those experiences.

Affluent EU Member States in the Nordic and Western Europe have had greater success in sustaining employment and providing income security and achieving an active, engaged older population. But there is still scope for improvement even in these top performing countries.

In its current stage, with results for three data points, the Active Ageing Index has started to allow the benchmarking of country performances. It can therefore be hoped that the AAI data will encourage European countries to look at policies and programmes that other countries have adopted, and learn from those experiences – both positive and otherwise.

Looking at trends between the 2010 AAI (year: 2008) and the 2014 AAI (year: 2012), an increase of 2 points is recorded on average across EU28 countries. An increase by three points or more is observed in nine EU countries during this period (see Figure 3). This improvement is quite remarkable given the financial and economic crisis and fiscal austerity measures observed during this period. It is also reassuring in favour of active ageing strategies that policies to phase out early retirement and to raise the age of retirement were not reversed during the crisis. Further progress can be expected in active ageing outcomes once economic and budgetary conditions have returned to normal.

The highest increase observed is in the Social Participation domain, about 3 points², with two other domains increasing by about 2 points each, (Independent Living and Capacity for Active Ageing). For the Employment domain, the change is marginal (0.6 point). Significantly, all four domains registered increases. For most countries, the changes in the overall index for men and for women also showed improvement, although with a significant gender gap in almost all countries.

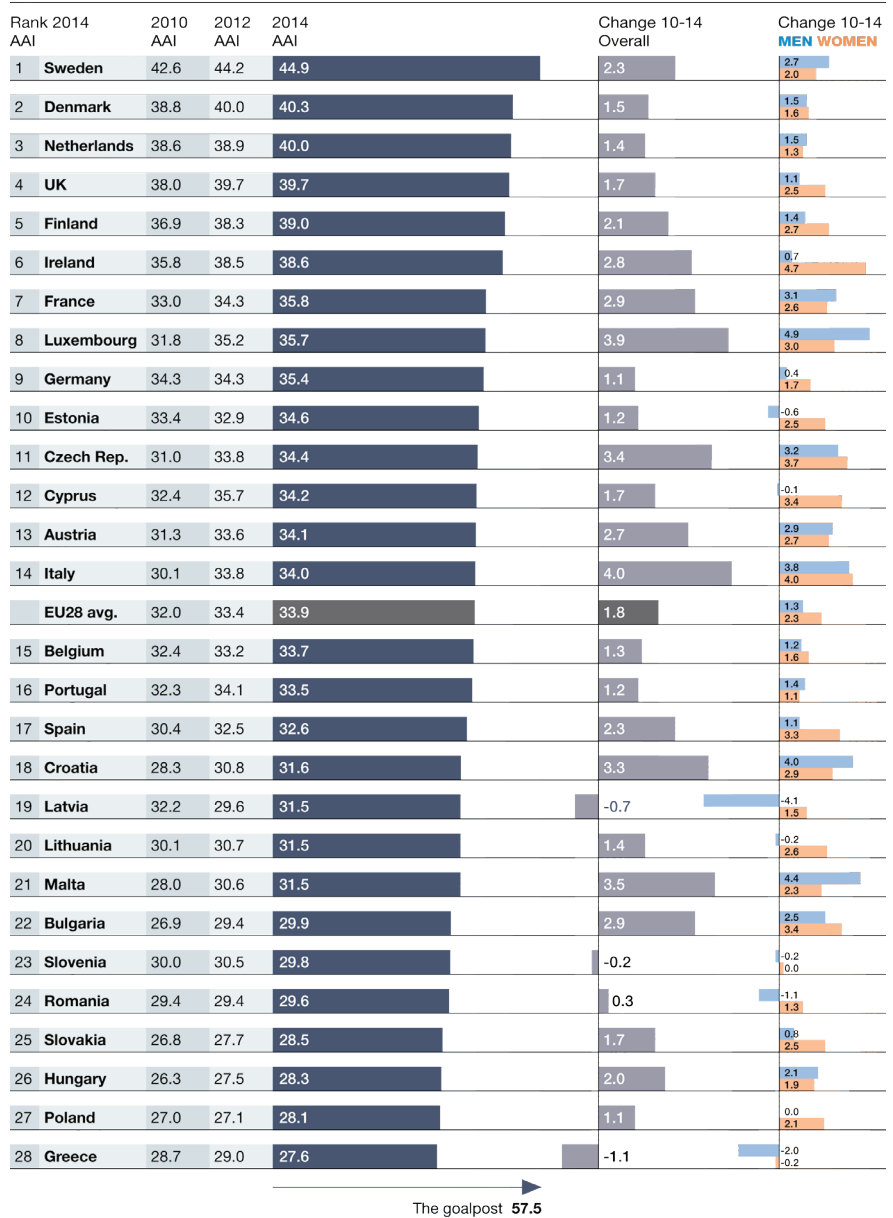
Overall, it is safe to say that some progress has been made with regard to active ageing in EU countries over this period. It is unclear though how much of this progress is attributable to policy changes, how much is the result of cohort effects (which may reflect policy choices of past dec-

² The change within the Social Participation domain is influenced by a strong change in many countries in the proportion of older population (55+) caring for children and grandchildren, particularly in Italy, but also in Cyprus, Ireland and Slovakia. These large increases need to be viewed with caution as they may reflect data comparability problems.

ades) and how much is simply the result of data inconsistencies. Further in-depth analysis is required to draw further policy insights from these results.

Figure 3: **Active Ageing Index 2010, 2012 and 2014-AAI**

Changes in the overall AAI, between 2010 AAI (Year: 2008), 2012 AAI (Year: 2010) and 2014 AAI (Year: 2012)



Concluding remarks

The AAI framework provides policy-makers with data in key areas of active and healthy ageing to enable them to assess their country's relative position as of 2012. Each country's position highlights where policy areas for older people are already effective and where they need further development.

Although the global financial crisis has damaged employment levels, especially for younger people in EU Member States, it is reassuring that policies to counter early retirement including raising the age of retirement were not reversed during this period.

Comparisons with other countries help highlight for each country where the biggest potentials lie and where they can look to others' achievements in policy design. These comparisons and assessments inform policy-makers and allow them to set targets and monitor progress towards them.

Most importantly, the active ageing strategies moves policy-thinking away from a one-sided concern about affordability where older people are viewed as a burden. Data presented in the AAI contribute towards raising awareness of the challenges and opportunities for older people as well to seek ways to develop their full potential, not just to enhance their own well-being, but also to the prosperity of societies in which they live.

Many aspects of active ageing are influenced by policies at the regional and local level. The effectiveness of the AAI as a tool for fostering better policies for active ageing therefore depends largely on its adoption by local and regional policy-makers and stakeholders.

A final point to make concerns the often-expressed idea that adopting and implementing a comprehensive active ageing paradigm will be expensive, and too expensive for poorer countries to implement. In fact, this is not the case as people making these remarks rarely do the math correctly. Active ageing strategies based on social investment principles prevent the loss of valuable expertise, preserve the potential of older people, and strengthen society's human and structural resilience. The cost for managing ageing actively is much cheaper than the passive management of older people left marginalised and dependent fully on the state and family.

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