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Ministry of Labour and Social Affairs

Service for Senior Citizen

Israel national report for the third review and appraisal cycle of the implementation of the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy (MIPAA/RIS)

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Part I

Executive Summary

Although Israeli society is relatively young compared with other industrialized countries, it is ageing rapidly. In recent years, many steps have been taken to integrate the elderly population into society, yet there are still many challenges in attempting to ensure a satisfactory quality of life for all in an ageing society. This document presents the main achievements of recent years and the challenges for the future.

1. Methodology

Information and data were collected and elaborated from the various ministries, NGOs, and academics by a research institute highly experienced in the area of ageing.

2. Brief survey on the progress Israel has made

- Encouraging a longer working life and maintaining the capacity to work

Since raising the retirement age and instituting mandatory pension savings from employment, comprehensive efforts have been made in recent years to enable older workers to stay in the work force. This has been true of the statutory realm as well as the in the realm of supply and demand. Among other things, steps have been taken:

- to prevent ageism and to enforce laws against ageism;
- vis-à-vis employers to identify suitable workplaces and change the perception of employing older workers;
- vis-à-vis older employees before and after retirement.

- Promoting participation, non-ageism, and social inclusion of elderly people

The primary approach to the issue has been to take measures to prevent poverty and assure a minimum income. Changes have been made to expand the number of people eligible for income maintenance allowances such as easing the eligibility criteria for receiving the benefit. At the same time, the state has also emphasized the need to take measures to assure the actuarial stability of the National Insurance Institute (NII).

Much effort has been devoted to promoting the rights of the elderly and enhancing the fulfillment of their rights by means of statutory amendments to prevent ageism, disseminating information, and assisting the elderly to exercise their rights. Other initiatives aim to promote "active" ageing in such areas as culture, leisure, health and consumerism.

While Israeli research into the field of ageing is longstanding, in recent years it has expanded with the establishment of special research programs and ageing studies at most academic institutions, including programs for interdisciplinary collaboration.

- Promoting and safeguarding the dignity, health and independence of elderly people

Israel's approach to care for the elderly is guided by the concept of ageing in the community and maintaining optimal functioning to prevent disability and dependence. As per this concept, varied community services have been developed. These have been augmented in recent years by the development of additional models and new services. Programs have been launched to

promote active health, the training of care personnel in the community, and the development of rehabilitation services. There is still a shortage of hospital beds, physicians and nurses to cope with the ageing of the population. NGOs have been highly active in the community: supplying medical equipment for domestic use, providing community activities for older adults in general and activities for persons with Alzheimer and other types of dementia, in particular. Currently, Israel is in the experimental stage of implementing a model of integrated care for the elderly in the community to more efficiently address the needs of elders requiring a combination of health and social services.

In recent years, there has been a major effort aimed at the prevention of neglect and abuse of the elderly. This effort includes operating prevention and treatment units in the Social Service Departments (SSDs) of local authorities, providing special training in this area for social workers and other professionals working with the elderly, developing tools for identification and reporting, working through multidisciplinary teams, and establishing a forum of ministry representatives and NGOs to formulate national policy on the topic.

Furthermore, important work is being done in Israel in the area of terminal illness. In 2016, a national program was launched for palliative care and end-of-life situations.

Activity in the statutory realm has seen amendments to the Legal Capacity & Guardianship Law to permit the elderly to retain autonomy and maximal independence, and to the Patient's Rights Law, designed to prevent ageism in medical care.

- Intergenerational

Israeli society's value system accords a central place to the family and intergenerational solidarity. In recent years, there has been an intensified collaborative effort of government and NGOs to strengthen the intergenerational bond. Among the activities undertaken in this area are a ministry-operated volunteer force of elderly people for the community, and of young people for the elderly in a variety of areas. A cadre of volunteers was established to help alleviate loneliness, including home visits for joint activities. In addition, NGOs and different ministries run diverse programs to create collaboration among youth, students and the elderly.

Another direction that has seen change regards the place of the family, now recognized as the mainstay of support of the elderly person. Consequently, public agencies and NGOs operate various programs to help family caregivers cope with their burden. These programs include support groups to alleviate the emotional burden and to impart knowledge and skills, as well as programs offering comprehensive responses to the families as needed. Technological advancements have also been helpful; for example, monitoring the activities of an elderly person in the home can enhance a family's sense of security.

3. Achievements and Challenges

Main achievements in recent years include: the recognition of the family as a target population for the development of supportive services; the nationwide dissemination of pilot programs to prevent elderly abuse, which has led to the establishment of prevention and treatment units, and the development of an innovative model offering a social and nutrition service to elderly in need.

Main challenges include both shortages in the infrastructure and the workforce to cope with the implications of the ageing of the Israeli society; improving the coordination among the different services; and adapting the labor market to the ageing population.

4. Conclusions

Decision-makers and professionals have become increasingly aware that the population is ageing and that the trend is expected to accelerate. Evidence of this can be seen in a number of government decisions and specific legislation, as well as the decision to define the ageing of the population and its implications, as a topic of national importance in planning the government's work program. This is especially prominent in the involvement of ministries dealing with overall policy but not necessarily responsible for directly supplying services to the elderly population, such as the Prime Minister's Office and the National Economic Council, the Ministry of Finance and the Ministry of Economy. In recent years, these ministries not only accorded the topic of ageing an important place but have established collaboration with other ministries around the question of how society is to deal with the ageing population. Furthermore, ministries that traditionally dealt with the care of the elderly have prioritized the topic. Notably, the Ministry of Social Affairs and Services (MSAS) has led the national planning process in cooperation with all of the agencies involved, and the Ministry of Health has designated the preparation of the health system for the ageing of the population as one of its strategic pillars of health policy for the coming years. The health plans, charged with providing healthcare under the National Health Insurance Law, have in recent years, developed advanced technological means that contribute to data sharing among units in the health system in order to improve the quality of care, including home health care. In addition, remote medical systems have been developed, which are especially important for the elderly population because of their heavy reliance on medical care.

General Information

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1. National Ageing Situation

Israel is a small country, which had a population of approximately 8.3 million at the end of 2014, of whom 900,000 were aged 65 and over. While still relatively young demographically (11% over age 65) in comparison to other developed countries, Israel has aged at a rapid rate since the country obtained independence just over 68 years ago. At that time, less than 4% of the population was 65+. In other words, the rate of increase of the elderly population has been double that of the general population. It is estimated that the percentage of elderly people will reach 15% of the total population by 2035 (numbering 1,660,000).

As in other countries, population ageing is largely a consequence of the decline in fertility rates, and of the continuous increase in life expectancy. In Israel, for example, life expectancy is high: 84.1 years for women and 80.3 for men. Life expectancy for men is one of the highest in the world.

The total fertility rate¹ in Israel declined from 3.93 in 1955 to 3.08 in 2014, yet remains relatively high compared to other developed countries, thus mitigating the ageing of the population. The high fertility rate masks the considerable growth in the absolute number of people aged 65+. One of the outcomes of this demographic phenomenon is the mitigation of the ageing of the labor workforce.

One of the unique features of Israeli society is its heterogeneous composition. Approximately 92% of Israel's elderly people are Jews, while 8% are non-Jews (Moslems, Christians and Druse). Moreover, only 28% of the elderly were actually born in Israel, while 49% immigrated to Israel prior to 1990 (from Arab countries in South-West Asia and North Africa and from Western or Eastern Europe), and 23% are relatively new immigrants who came since 1990, mainly from the former Soviet Union. Thus, Israel is confronted with the combined challenge of addressing the needs of an ageing population as well as confronting considerable cultural diversity and language barriers. Note also that Israel's ageing population includes an estimated 23% of Holocaust survivors who are still coping with the long-term consequences of their past experiences, and require special attention and services.

The major agencies responsible for the provision of services to the elderly are: the Ministry of Social Affairs and Social Services, the Ministry of Health and health service providers, the National Insurance Institute and the Ministry for Social Equality. The development, provision and evaluation of services are based on close collaboration between the government and the voluntary sector.

2. Method

This document was written under the aegis of the Division for Senior Citizens at MSAS with the assistance of the Myers-JDC-Brookdale Institute. It is a joint endeavor of government ministries and NGOs working on behalf of the ageing population.

The preparation of the document involved the relevant ministries and local authorities, as well as representatives of JDC-Israel-Eshel. Participating in the process on behalf of the government

¹The total fertility rate equals the average number of children per woman.

were representatives of the MSAS, the NII, the Ministry of Health, Ministry of Economy, Ministry for Social Equality, Ministry of Justice, Ministry of Foreign Affairs, and Ministry of Finance. Israel's main NGOs as well as academics active in the field were included in the process. The NGOs were: Halev – The Union of Associations for the Elderly in Israel; Yad Sarah-a voluntary organization that provides a spectrum of services to sick, disabled and elderly people (the best known service is lending of medical equipment).; Ken Lezaken (Yes! To Seniors), a Jerusalem-based, independent advocacy group for the elderly; MELABEV – centers for the care of patients with Alzheimer's and dementia; Association of Law in the Service of the Elderly; EMDA –The Alzheimer's Association of Israel. The academics were: Prof. Liat Ayalon, Bar-Ilan University; Prof. Yitzhak Brick, Chairman, Israel Gerontological Society, Haifa University; Prof. Israel Doron, Haifa University; Prof. Esther Iecovich, Ben-Gurion University of the Negev; Prof. Howard Litwin, Hebrew University of Jerusalem; Prof Faisal Azaiza, Haifa University.

The method of data collection included receiving ministry documents on the services and important developments in their purview in recent years. In-depth interviews were conducted with representatives of non-profit organizations and academics. We also received documents on their main activities in recent years and learned what they considered as the important developments in the field of ageing. In addition, this report is based on studies and databases of the Center for Research on Ageing at the Myers-JDC-Brookdale Institute, Jerusalem.

Part II

1. National Actions and Progress in Implementation of MIPAA/RIS

Goal 1: Longer working life is encouraged and ability to work is maintained

Two significant changes were made in the laws affecting employment at an older age and the ability to retire with dignity when the time comes. The first has to do with the age of retirement. Israel was among the first countries to raise the retirement age. Between 2004 and 2009, the legal retirement age (the age at which a person is entitled to retire from work and receive an old age benefit from the National Insurance Institute (NII) and a work pension) was raised from 65 to 67 for men and from 60 to 62 for women. This was done in a gradual process, albeit rapidly compared to other countries. At the same time, the mandatory retirement age (the age in which an employer may force an employee to retire) was also raised, from 65 to 67 for men and women. A public commission is currently discussing the possibility of raising the pension entitlement age for women. This decision is expected to be made together with a number of complementary programs that will help people find work at an older age. Following these changes, there has been a trend toward higher rates of participation of people aged 65+ in the labor market. In 2014, the rate of participation of people aged 65+ in the labor market was 19% (27% for men and 12% for women). This is one of the higher rates in OECD countries.

The second change has to do with the work pension. A decree issued in 2008 mandates deductions toward pensions for nearly all workers in the Israeli labor market. The proportion of people with pensions rose among those retiring (44% in 2014). It is expected that these changes will be more reflected among workers retiring in the future, particularly among low wage earners (who in the past had no occupational pension coverage).

Additional steps were aimed at reducing the ability of employers to avoid the mandatory contributions to the occupational pensions. These included legislation in 2011 aimed at enhancing the enforcement of labor laws. In 2015 the Equal Opportunity Employment Commission of the Ministry of Economy issued fines of over NIS 18 million to employers who violated the decree.

The Equal Opportunity Employment Commission of the Ministry of Economy (EOEC) addresses legal issues with regard to age-related discrimination and files lawsuits regarding discrimination in employment due to ageism. It also collects data and conducts surveys of employers and employees with regard to employment issues by age, gender, sexual preference etc. In the coming years, the EOEC plans to create a forum that will deal with practical help regarding age discrimination, including enhancing enforcement.

In addition to these changes, the government decided in 2015 that preparing for the ageing of the population is a strategic government issue. Accordingly, various steps were taken and various decisions made regarding work at an older age. The Civil Service Commission (CSC) designated the types of jobs in the civil service where there is a shortage of workers, or occupations requiring special, at the national or regional levels, for which extended service over the mandatory retirement age is permitted. The list of types of jobs will be updated as necessary by the CSC.

Programs to encourage employment: Besides raising the retirement age, there are also various programs aimed at encouraging employment at older ages. In 2014, the Ministry of Economy ran a public campaign to encourage workforce diversity, and this included an increase in recruitment of older workers. The websites registered nearly 117 million exposures to advertisements. In 2015, the EOEC launched a website that includes information for employees regarding rights and discrimination, as well as information for employers on training and workforce diversity. The Ministry of Social Equality is planning marketing and communication activities, particularly for employers, to present older workers (after the age of retirement) as an efficient work force (having experience, stability, flexibility etc.) that has the potential to contribute to any business.

The Ministry of Social Equality, together with the CSC, JDC-Israel-Eshel, the Ministry of Finance, the Ministry of Justice and the National Economic Council, created a pilot program for establishing a targeted employment track within the Civil Service for elderly citizens over the age of retirement. Their employment would be in positions that do not officially exist in the Civil Service and are intended to assist government employees in their work. They would be employed up to 120 hours a month.

"Experience Wanted" ("*Darush Nissayon*") is an Internet portal that offers jobs to people over the age of retirement only. In addition to Internet activities, they also offer activities to enhance the chances of finding work. These include workshops to prepare people for the job market, refreshing people's computer skills, guidance in preparing CVs, and a call center that offers jobseekers support through the entire process including placement and follow-up after placement. Additional activity is focused on the employers, to encourage them to employ older people by changing stereotypes and emphasizing the advantages of employing workers with more experience. This program is implemented together with the Ministry of Social Equality and the "Vehadarta" association.

"Placement Centers" – establishing infrastructures in the local authorities to assist with elder employment. The program offers personal mentoring for finding work, referral to courses and training and establishing relations with employers in the local authorities. It was created by the NII and JDC-Israel-Eshel in cooperation with the Ministry of Social Equality, and is implemented by various associations. JDC-Israel-Eshel opened an "entrepreneurship incubator" for retirees, which provides them with tools to establish a small independent business. The participants receive personal support during the course, sometimes from students. In some of the places the program also includes an "entrepreneur's forum" for peer learning and support. This program has been active for six years.

The "Midway" program ("*Emtza Haderech*") is aimed at helping people aged 45-75 with extensive employment experience, who have been out of the job market for over six months. This program attempts to create local expertise for high priority industries and to develop relations with employers. It was created by the Ministry of Economy and JDC in collaboration with the Ministry of Social Equality.

Another program currently in pilot stages is implemented by the Employment Service in cooperation with the Age & Work Association, which offers in-depth workshops to impart tools for the current employment market: familiarization with advanced tools and methods of identifying jobs, preparation for job interviews and simulations by human resource managers. The program is for unemployed older adults, and was created and funded by the Ministry of Economy.

Corporate responsibility: The Ministry of Social Equality and JDC-Israel-Eshel are working toward incorporating the topic of ageing into an index benchmarking Israeli companies on managing and incorporating social values (the Maala CSR Index), with the aim of raising consciousness in the business world on the topic of ageing and creating work interfaces that contribute to the quality of life of older citizens.

Training: In addition to training that takes place in various employment-promoting frameworks, the Ministry of Economy is working toward training older workers who were pushed out of the job market because of changes in the economy. This training is geared toward people aged 45+ and works through the use of coupons and courses for vocational training and through courses budgeted by the Division of Vocational Training. The State-funded "Maagalim" fund was established to help workers in "burnout" professions to retrain or upgrade their skills. During the retraining, some of the older workers become mentors for the younger ones, sharing their knowledge and experience. Men aged 50 to 65 and women aged 50 up to two years before retirement age are eligible for training, on condition that they have been employed for at least 7 years in a "burnout" profession; also eligible are workers under age 50 who have been employed for 20 years in a burnout profession.

Two programs for engineers are currently being created by the Ministry of Economy. Their aim is to refresh the skills of engineers over 45 who have lost their jobs and to return them to knowledge-intensive industries or projects in the areas of electricity or electronics.

Preparation for retirement: Currently there is no comprehensive program addressing preparation for retirement. As a result there is great diversity in the extent of preparation that people receive when they retire – beginning with no preparation at all and ending with extensive programs, mostly in government organizations or large businesses. In order to raise awareness of the great importance of preparation and planning for retirement to the future quality of life of the retirees and their families, the Ministry of Social Equality, in collaboration with JDC-Israel-Eshel and the Ministry of Finance, are developing a comprehensive program for preparation for retirement that will cover a range of relevant topics, including financial planning.

The Ministry of Social Equality is implementing an information center for senior citizens, including information that can help with decisions concerning retirement. The center approaches people about to retire in order to inform them about their rights after retirement and provide essential information that will help them prepare and make decisions prior to retirement.

Goal 2: Participation, non-discrimination and social inclusion of older persons are promoted

The main activities conducted in Israel to promote social involvement for older persons and an adequate standard of living focus on income support programs, exercising the rights of the elderly, and participation in lifelong education and culture.

Income Support and the Prevention of Poverty

Pensions/Benefits: The three main sources of income for the elderly in Israel are: 1) Transfers from government that include: a) The basic, universal old-age pension from the NII. The pension is linked to the consumer index and is currently 17% of the average wage (basic single pension, 2014 data); b) An income supplement for elderly people who have no source of income apart from the basic old-age pension. The supplement is based on a means test. An old-age pension

including an income supplement for a single person today stands at 31% of the average wage. Some 23% of recipients of an old-age pension receive the income supplement. 2) A work-related pension. In recent years, the percentage of work-related pension recipients has risen and today 44% of the elderly receive one; 3) Income from work (16% of persons over the age of 65 are employed), private savings, and private pension insurance plans.

Three main changes in recent years have contributed to expanded coverage of old-age pensions from NII: 1) Expanding the pool of recipients of old-age pensions to include homemakers who were formerly ineligible; 2) Age-based supplements to the basic old-age pension so that older recipients receive a higher sum; 3) Easing the criteria for receipt of income supplements (for people without other sources of income).

In 2014, the incidence of poverty² among the elderly in Israel (after transfer payments and direct taxes) was some 23%, similar to that among the general population.

Preparing the Social Security System for the Ageing of the Population

In 2015, the government resolved to ensure the stability of the NII. The resolution includes the following measures:

- Ensuring government participation in financing NII payments for old-age pensions and long-term care benefits, to address the implications of an ageing population for the NII's actuarial state. Government participation will be afforded if the increase of recipients is greater than the natural increase of the general population. The ratio between these two increases – the demographic coefficient – determines the amount of government participation.
- Once every three years the government will discuss the long-term stability of the NII based on a full actuarial report. The discussion will include an assessment of the ability of the NII to meet (old-age, long-term care benefits and widow(er) pension payments in the long run. The projected NII balance statements over time will also be appraised.

Housing assistance: Two main ministries in Israel assist the elderly in the area of housing: the Ministry of Construction and Housing, and the Ministry of Immigrant Absorption. The assistance take two main forms: providing a rental subsidy for a flat on the free market or public housing. The criteria for assistance are: receipt of an NII income supplement and that recipients do not own a home. Currently, there are some 11,700 public housing units (occupied by some 14,000 elderly people,) most of which are populated by elderly new immigrants. In addition, some 64,500 elderly people receive rental assistance on the free market; about half of them are interested in moving to public housing due to the high increases in rent on the private market and because public-housing flats are adapted to the needs of the elderly. In light of this, there are plans for building another 2,600 public-housing units in the coming year.

Promoting and Exercising Rights

One way to promote the rights of the elderly and prevent ageism is legislation. Three amendments have recently been made: to the Mandatory Tenders Law; the Patient's Rights Law (see also below in Chapter 3, with reference to health services); and prohibition against ageism as regards products and public services. An amendment to the Mandatory Tenders Law

² The poverty line in Israel is defined in relative terms: 50% of the disposable median income (including transfer payments and after deduction of taxes), adjusted to family size

stipulates a prohibition against discrimination based on age. This issue of ageism was not addressed previously in the law dealing with government and public sector contracts for goods, property and services. –Concomitantly, the prohibition was extended to tenders for hiring civil servants by virtue of the Civil Service Law (Appointments). The preamble to the law noted that the need to add the prohibition against ageism grew out of a sharp rise in complaints on this issue, submitted to the Commission for Equal Employment Opportunity, and in light of various studies indicating a clear preference for younger workers.

All the above amendments demonstrate that in recent years, the legislative branch has in fact recognized that ageism is as discriminatory and illegitimate as sexism, religious discrimination etc.

Since 2008, the Ministry for Social Equality has operated a hotline for senior citizens and their families. It is a central resource for the receipt of information on all rights on a range of topics such as health, housing, pensions, preparation for retirement, consumerism, culture and leisure activities. Answers are provided by experts employed by the hotline. The Ministry collects data on the rights of, and services for, the elderly from public authorities and publishes them in a pamphlet that is sent out to all senior citizens reaching retirement age (and receiving a Senior Citizens card). Other activity in this area is conducted by the Information Center established by Re'ut and JDC-Israel-Eshel, which runs a 24-hour hotline manned by people (not a machine) who provide reliable information. To assist the elderly and their families in times of crisis, the Commission established a consultation and information service that operates in 12 hospitals ("Segula Units"). The service is provided by trained adult volunteers and managed by a social worker. It helps families and senior citizens exercise their rights in the health system. In addition, the Ministry initiated an amendment to the Senior Citizens Law whereby every local authority is mandated to appoint a senior citizens advisor.

An additional central service offering advice and information on the exercise of one's rights is provided by a special NII unit ("Counseling Service for the Elderly"). The unit makes efforts to inform senior citizens and their families about the rights to which they are entitled. A major focus of their consultation revolves around retirement issues. The unit is manned by 5,000 volunteers. Seniors may receive information by telephone or in person, including home visits. In 2013, more than 14,000 seniors applied to the service.

Two notable non-governmental organizations that promote seniors' rights include: Ken Lezaken (Yes! To Seniors) and The Association of Law in the Service of the Elderly. Ken Lezaken is active in safeguarding and promoting the rights of the elderly in the public, community, and personal spheres. It is run by volunteers and the members of its advisory council include lawyers, physicians, social workers and academics. On the individual level, it serves as an address for seniors and their families for inquiries, mediation, and exercising their rights in all areas of life. At the public level it constitutes a major force in the struggle to promote senior rights. The Association of Law in the Service of the Elderly promotes the rights and status of Israel's elderly through legal channels. It submits petitions to the High Court of Justice and files claims related to senior rights to the Supreme Court and other courts. Among its other activities, it publishes information pamphlets on the rights of the elderly, presents lectures in the community and at institutions, and implements special projects for seniors and their families and for professionals working with seniors.

Cultural Activity

The Ministry of Social Equality encourages active ageing by promoting the provision of benefits in different areas. For example, as part of the "Tuesday Seniors" initiative, older citizens enjoy subsidies to purchase cinema tickets (about half a million tickets are bought every year as part of the initiative). In addition, senior citizens enjoy discounts for museums, heritage sites, excursions, vacation sites and more. The ministry established a consumers club for senior citizens, which offers members benefits and discounts, and it supports an array of popular and university courses countrywide adapted to the elderly population. The goal is to allow seniors who so desire to expand and deepen their areas of knowledge, to acquire new knowledge, and develop their creativity. Among other things, there are special studies in computer skills, the Internet, and innovative technologies. But beyond the learning, the courses are a social and cultural meeting place for senior citizens. Another project supported by the Ministry is Tehila – enabling seniors over 55 to complete their elementary-school education. Finally, Ministry cooperation with JDC Israel-Eshel makes it possible for Holocaust survivors to enjoy Yiddish theater free of charge.

Raising Awareness, Training and Research

Several agencies are working actively to raise public awareness of the role and participation of the elderly in society. The various ministries – MSAS, Economy, Health and Social Equality – have run campaigns to raise awareness in different areas. JDC-Israel-Eshel collaborates with academic institutions and ministries to publish substantial professional literature on the subject and produce films to raise awareness of the public at large of the problems of the elderly.

The Ministry for Social Equality in cooperation with JDC-Israel-Eshel helped create an experiential, interactive exhibition on the subject of ageing, titled "Dialogue with Time" that on display at the Children's Museum in Holon. The purpose of the exhibition is to engender change and lead to the empowerment of the elderly both in their own eyes and in the eyes of society in general.

One way to promote and improve the quality of care provided for the elderly population by the service system is through basic training and continuing courses for professionals from a variety of disciplines (such as medicine, nursing, social work, and rehabilitation). These courses are conducted by the MSAS, the Ministry of Health, the health plans and JDC-Israel-Eshel. MSAS courses for social workers have, in recent years, emphasized the subjects of identification and treatment of abuse, dementia, and family caregivers. The Ministry of Health, the health plans, and hospitals offer comprehensive training for health professionals and over the years have extended the topics to include geriatrics and ageing. The main types of training in the area of health are: 1) Training, as per the legal requirements for licensing specialists, for example, in a specialization in geriatrics; 2) Training offering certificates as in psycho-geriatrics for physicians; 3) Academic training for a second degree in geriatric nursing. Thanks to scholarships and incentives, the number of geriatricians in Israel had grown considerably in recent years to more than 300 currently of working age. More than 1,394 nurses have completed a year's course in the intensive care of geriatric patients. In addition, a program was established to train specialist, geriatric nurses with all the authority that the designation entails. Thus far, 19 such nurses have been trained and the policy is to further promote the subject. Other areas of health, such as nutrition, occupational therapy, physiotherapy, and speech therapy also offer courses in geriatrics.

JDC-Israel-Eshel operates two centers for training and continuing training in the area of ageing (in Israel's north and center; a third, in the south, is in process of establishment). The Yad Sarah

organization also maintains an institute for the study of ageing, directed at both professionals and the general public.

The Israel National Institute for Health Policy and Health Services Research (NIHP), an independent NGO established by force of the National Health Law of 1995, has the goal of monitoring and evaluating the impact of the law on state health services, their quality, efficiency and costs. As such, it funds research into the organization, financing and quality of services, as well as the decision-making processes in the health system, including ageing-related topics.

The Israel Center for Disease Control, a research agency of the Ministry of Health, provides an up-to-date picture of the state of health of Israel's population. In recent years, the center has surveyed services of medical rehabilitation for the elderly as well as their state of health and nutrition. As per the decision of the Ministry of Health, the center has also begun to keep a record of the illnesses typical of ageing, such as strokes.

The Information Division at the Ministry of Health is both responsible for the creation of a health information system to support planning and decision-making. Among other things, this responsibility covers the administration of health data, including the creation of health indices of the population and the utilization of health services such as hospitalization. This division is responsible for the reporting of Israeli health data to international bodies such as the OECD. The Information Division is involved in research of various aspects of the health system and public health with both ministry units and extra-ministry investigators, including the Central Bureau of Statistics.

Studies on ageing in academia: In recent years, specific curricula have been developed on ageing in academia. Several academic centers in Israel now offer courses towards certification or specialization as part of the studies leading to a first degree (social work or health systems administration). Moreover, the subject of ageing has developed to the extent that several second-degree level courses are now available in gerontology along with a combination of ageing-related specialties and other MA studies. New areas of knowledge are being developed such as the economics of ageing and multidisciplinary research, mainly by the social and medical sciences. This approach is evidenced in the many publications dealing with the process of ageing from an integrative perspective of different disciplines (such as cognitive functioning and personal wellbeing, recreation and state of health, physical activity and personal wellbeing, etc.).

Research: Gerontology research has been pursued in Israel since the 1970s. The Myers-JDC-Brookdale Institute (MJB), since its establishment in 1974 has conducted hundreds of studies in the field of applied gerontology, serving as a central agency in the field, and assisting the development of policy and services for the elderly. MJB systematically follows socio-demographic changes, examining the implications for the service system. It also conducts evaluation studies of programs and services.

Israel's four main universities each have a research institute on ageing and other independent research institutes are also concerned with this area. The involvement in this area is reflected by the increase in academic publications and research reports written by Israeli researchers, including young investigators. Since 2000, Israeli researchers have published more than 2,700 papers on ageing in academic journals, written some 90 doctoral dissertations and more than 430 theses on the subject.

The Ministry for Social Equality supports The Israel Gerontological Data Center (IGDC) established at the School of Social Work at the Hebrew University in Jerusalem, to provide a comprehensive infrastructure of databases for conducting research on various aspects of population ageing.

Based on a 2012 government resolution, Israel joined SHARE-ERIC, an organization that conducts "The Survey of Health, Ageing and Retirement in Europe". It is a multidisciplinary and cross-national panel database of micro data on health, socio-economic status and social and family networks of more than 55,000 individuals from 20 European countries aged 50 or over. The SHARE-ISRAEL survey is managed by (IGDC) with the support of the National Institute on Ageing (NIA), the European Union, and other sources in Israel: The Ministry for Social Equality, NII, and the Ministry of Science, Technology and Space. SHARE data are open to the entire research community and ministry research departments at no cost for purposes of setting policy and developing services. More than 120 scholarly articles and publications have been based on SHARE-ISRAEL data.

Goal 3: Dignity, health and independence in older age are promoted and safeguarded

Two guiding principles govern Israeli policy and service development in the promotion of the health, dignity, independence, and wellbeing of the elderly: 1) Making it possible for them to age in place; and 2) Safeguarding their optimal functioning to avoid disability and dependency. In fact, 96% of Israel's elderly live in the community; few elderly live in long-term care institutions.

In recent years, the MSAS Senior Citizens Service and the NII have put an emphasis on the development of a range of community services aimed to address the needs of the elderly in various areas of life and at different functional levels. These range from services for the independent elderly to supportive services for people with a severe functional disability at home. The Senior Citizens Service provides care through local Social Service Departments (SSDs) to more than a third of the elderly population. The services developed over the years respond to the needs of the elderly in regard to daily functioning, social life, finances, nutrition security, protection and security. The main services are as follows:

Social Services

Supportive Communities: This innovative program was developed in Israel. It provides seniors with a safety net and supportive services to enable them to live independently and maintain their quality of life in various personal, family and functional situations. The main services it provides are: an emergency call service, medical services (house calls by physicians and summoning an ambulance), a community facilitator (for light home repairs and social support), and social activity. The program was initiated by JDC-Israel-Eshel and MSAS. It is implemented by non-profit organizations, local authorities, and for-profit commercial firms. Participants pay a membership fee. Low-income people are subsidized by the MSAS. There are some 250 supportive communities today countrywide encompassing more than 52,000 senior citizens (some 40,000 households), 6% of the elderly who live in the community. Among the main changes introduced into the program, are attempts to make the basket of services more flexible in order to expand the range of services offered. There have also been attempts to adapt the program to the ageing of the members and the concomitant decline in functioning, such as making recreational activities more accessible and alleviating the loneliness of the housebound,

as per the recommendations emerging from the evaluation studies that have accompanied the development of the program.

Another model currently being developed "Community for Generations" includes two additional components: a community component and care management. The community component enables the elderly to be partners in identifying the services appropriate for them, making it possible for the community to better contribute to their well-being. The care management component includes an assessment of the needs of the elderly and their families in order to match services to their needs. Combined, the two components provided a holistic approach to the needs of the elderly living in the community.

Services to strengthen social networks and alleviate loneliness: About a third of the 65+ age group in Israel report a sense of loneliness whether occasionally or often. Alongside the 1,000 social clubs that have long been active, ministries and voluntary agencies are endeavoring to develop additional models to provide appropriate responses to populations of varied needs and to weaker population groups:

MOFET clubs: The goal of these clubs is to provide nutrition security and a comprehensive social "umbrella" to functionally independent elders suffering from poverty, poor nutrition, loneliness and social isolation, and who have no family support system. The service includes transportation to and from a club, breakfast, lunch, and social activity. There are some 250 MOFET clubs countrywide serving about 7,500 senior citizens. An additional 57 are slated to open for Holocaust survivors.

Daycare centers: To meet the need for social interaction and activity of people with functional disabilities, a daycare model was developed in Israel. The centers are generally open six days a week, providing, under a single roof, meals and socio-cultural activities, personal care, and professional-therapeutic services. 163 daycare centers are active countrywide serving some 18,500 seniors. Some of the centers are designed to serve people with dementia. Evaluation studies of the centers showed very high satisfaction on the part of participants. Nevertheless, more effort is needed to expand their utilization among the elderly able to benefit from the service. Among other things, attempts are being made to make the basket of services more flexible and expand the opening hours for activities at the centers.

Special initiative to develop models to alleviate loneliness: The MSAS and NII encourage the development of new models, drawing on bottom up knowledge and experience, to help the elderly cope with loneliness. In this context there are currently several demonstration projects around the country, accompanied by formative evaluation research.

"Here live..." The Ministry for Social Equality, the Ministry of Construction and Housing, and the Students Union joined forces to establish an intergenerational social program. Students find living quarters in the homes of senior citizens. The seniors benefit from a flat-mate to alleviate loneliness and increase their sense of security, while the students provide company in exchange for an inexpensive housing solution and a significant stipend to help see them through their years of study.

Home care for elderly with functional disability: Since 1988, Israel has provided home care to seniors with functional disabilities under the Community Long-term Care Insurance Law. Israel offers broad coverage for home care, and some 170,000 seniors or 19% of all seniors receive this service today. The law allows those eligible to choose an individual basket from the following services: personal care at home (between 10 to 18 hours a week), daycare centers, connection to a distress call center, absorbent undergarments and laundry services. Recent

years have seen attempts to make the basket more flexible and expand the choices, including the possibility of receiving a monetary allowance instead of service in kind (where the elderly person employs a caregiver for most hours of the day). Studies that have followed the implementation of the law show very high satisfaction on the part of recipients. However, there is a need for more hours of personal care, especially among people who are highly limited or suffer from dementia and require constant supervision. One of the challenges of providing home care to the elderly with disabilities is a shortage of manpower. Like other countries, Israel has addressed this challenge by providing permits to foreign workers. There are some 40,000 foreign workers in the area of frail nursing care hailing from numerous countries (the Philippines, India, Nepal, Sri Lanka, Moldavia, etc.). Attempts are under way to reach bilateral agreements and bypass intermediaries in order to regulate and assure the working conditions and rights of these workers. Agreements with Nepal and Sri Lanka have already been signed.

As said, Israel encourages ageing in place for as long as possible. However, some elderly cannot continue living at home and they move to an institutional setting. According to a means test, institutional services are subsidized by the government. The Ministry of Health is leading reform to add long-term nursing care to the basket of services for which all citizens are eligible. Among other things, the reform recommends increasing the number of hours for home care covered by the state and easing the income criteria for receipt of this service.

Guardianship: The Legal Capacity and Guardianship Law was amended this past year to allow people with declined functioning to preserve their autonomy and maximal independence in managing their lives by reducing the amount of cases in which a guardian is appointed. Now, the appointment of a guardian is to be the last resort. Two other measures that have come into use are: 1) the appointment of a guardian for the legal procedures in the court system (an objective person appointed when there is a need for representation in court. The appointment is given for the period of the process). The courts have increasingly adopted this procedure in recent years. 2) The appointment of a person supporting decision-making in place of a guardian, to help reach decisions but not make them in place of the elderly person. Recently, the courts adopted this approach in two different cases.

Ongoing power-of-attorney: This past year, a law was enacted permitting granting of an ongoing power-of-attorney, which is not automatically cancelled in the case of decision-making incapacity. This enables autonomy to be retained and may avoid the need to appoint a guardian. Moreover, the Ministry of Health led a process to introduce changes, easing the process of granting power-of-attorney in medical matters.

Health Services

In Israel, the provision of health services comes under the National Health Insurance Law of 1995. The law ensures broad insurance coverage to the general population (including community medicine, hospitalization and medications). The Ministry of Health is responsible for regulating community and hospital health services, including the licensing of suitable institutions, issuing directives (including procedures) in relevant areas, monitoring these services on a regular basis, and enforcement as need be. National councils were established to assist the ministry in setting policy. The National Geriatric Council, as the name suggests, deals with the health of the elderly. It is composed of senior representatives from the ministries and health plans, health care professionals, non-profits, academics and researchers. Among the topics discussed by the council are: the promotion of health and prevention, dementia, palliative care, prevention of falls, polypharmacy, geriatric evaluations, enhancing quality of home health care

and during hospitalization. The main providers of community health services are the four non-profit health plans that act under the National Insurance Law.

Health Promotion: Based on the conception that activity promotes health, infrastructures have been developed for meaningful cultural and social activities, learning and enrichment, physical activity, sports, and volunteering. The ministry has launched campaigns to encourage physical activity, prevent falls, and raise awareness of rehabilitation, of dementia, and of the caution to be exercised in extreme weather conditions. Considerable information appears on the ministry website regarding the right to health, particularly of the elderly population. The information appears in several languages.

Programs and courses on active, healthy ageing in a range of areas are being developed by the health plans, JDC-Israel-Eshel, the Ministry of Health, the Ministry of Social Equality, local authorities and NGOs. Kits and manuals have been developed for professionals on the following subjects: encouraging safe walking, cognitive and mobility exercises, prevention of accidents at home, retaining and improving memory, improving sleep, etc.

In light of the importance of sports for physical, emotional, social and cognitive health, a popular sports program has been developed, run by trained volunteers (senior citizens). Apart from offering sports activities, it facilitates intergenerational sports. It was developed by JDC-Israel-Eshel and the Ministry for Social Equality. In addition, there is a seniors petanque (lawn bowls) league sponsored by the Ministry for Social Equality and the Ministry of Culture and Sports. In recent years, the health services have put special emphasis on programs to prevent falls, a joint effort by JDC-Israel-Eshel, the Ministry for Social Equality, Ministry of Health, and the NII.

Community health services: Primary care is the focal point of Israel's health services and in recent years, steps have been taken to improve the knowledge and ability of primary care teams to care for the elderly. The focus has been on topics such as medications, nutrition, prevention of falls, dementia and more. Geriatricians at the health plans strengthen the ability of the health system to provide an optimal professional response to the population of the elderly in the community. An overall framework of geriatric evaluation with a multidisciplinary team strengthens primary physicians caring for the elderly. Geriatricians are also involved in health-plan units providing at-home and home-hospital care. Nurses are an important component of community care of the elderly and, as said, some of them train specifically in geriatrics. All the health plans provide a range of medical home care. The Ministry of Health encourages and develops professional home health services to reinforce the conception of the home as a treatment venue and an alternative to hospitalization.

Rehabilitation: Medical rehabilitation services are an integral part of the basket of services provided under the National Health Insurance Law. They include hospital wards, multidisciplinary daycare centers, and exclusive centers for physiotherapy, occupational therapy, speech therapy, as well as the provision of rehabilitation in a patient's home. The various hospital arrangements for rehabilitation include general rehabilitation wards, some of which are in general hospitals and some in rehabilitation hospitals that include specific departments (such as neurological rehabilitation). The general rehabilitation services are directed at all ages although a substantial proportion of the hospitalized are elderly. In addition, geriatric rehabilitation services have been developed; specific wards for the elderly most of which operate in geriatric hospitals. A daycare model of multidisciplinary rehabilitation has been developed. This model is of great importance to patients requiring the services of two or more disciplines of rehabilitation from a multidisciplinary perspective, as in the aftermath of a stroke.

Rehabilitation equipment and mobility: The Ministry of Health subsidizes the use of rehabilitation and mobility equipment under the National Health Insurance Law. The health plans fit seniors with hearing aids, and participate in their cost, by law. They also supply medical equipment such as various types of respiratory apparatus.

A unique model for the provision of medical-rehabilitation equipment in the community was developed in Israel by the Yad Sarah NGO, one of the most significant voluntary organizations in this field. Yad Sarah operates a countrywide lending service run by volunteers. The stock of equipment, which is available to all for set periods of time, contains hundreds of items from simple canes to sophisticated modern devices such as oxygen generators. Yad Sarah is part of the network of services enabling seniors with functional disability to continue to live in the community. Among the services developed in recent years are: mobile units for dental care and a seniors fitness gym. The organization's branches offer legal aid to the elderly in the exercise of their rights through the Yad Riva NGO.

Changes in the Patient's Rights Law: Given that ageism may also occur in medical care, the Patient's Rights Law was amended in 2010 to prohibit this form of discrimination: it stipulates that a caregiver or medical institution will not discriminate between patients on the basis of age. However, if a distinction between different ages is warranted for medical reasons, it is not considered discrimination. In 2014, another amendment was added, imposing a fine for discriminating against patients on the basis of age. Until then, there had been no sanctions for ageism.

Caring for people with dementia: In recent years, there has been growing awareness of dementia and its repercussions. Israel joined the group of countries that have developed a national program, launched at the end of 2013, to address Alzheimer's and other forms of dementia. The program was developed by a multidisciplinary team of prominent professionals in the field, led by the Myers-JDC-Brookdale institute. It relates to timely diagnosis and treatment in primary care, and to the principles of care at every stage up until the end of life. The Ministry of Health has established a team to implement the program. As a result, there has been closer cooperation among the various government agencies active in this area, and between them and civil society through relevant NGOs. The MSAS and NII have increased activities to develop suitable frameworks for people with cognitive deterioration at daycare centers. The NII offers supportive activities to patients in the early stages of Alzheimer's and operates an information and support telephone hotline (manned by volunteers 5 days a week, 4 hours a day) and support groups for family members. The development of services for people with dementia and their families is a key element of the work program of JDC-Israel-Eshel. It includes developing supportive service models and providing information on the continuum of services to the elderly in the community.

EMDA -the Alzheimer's Association of Israel, takes steps to raise public awareness of the illness, and hosts various activities all over Israel to help the elderly and their families, such as: family support groups, consultation services, and workshops and lectures to impart knowledge, communication tools, and suitable ways of working with patients with Alzheimer's and similar illnesses. It has developed tools to retain brain faculties and improve quality of life through interventions that activate the senses, and through art and music. One example is the "Activities for Health" kit to arouse interest and bring some contentment into the lives of people with dementia and their caregivers by means of shared activities. In recent years, it has introduced LITUF – a program of individual support and care for families of people with dementia, in cooperation with JDC-Israel-Eshel and MSAS services. EMDA initiated a pilot to improve the

quality of life of patients and families in the advanced stages of the illness through a home hospice service, in collaboration with the health plans. It also trains professionals, such as daycare-center staff, to better acquaint them with the illness and coping strategies.

MELABEV - operates daycare centers based on a person-centered concept of care. This approach respects the dignity of people with dementia and "where they are" in the course of their illness, and tries to advance them as much as possible from that point. MELABEV provides services in different stages of the illness. The Savyon computer program developed by MELABEV aims to help elderly users retain cognitive faculties. It offers challenges in four areas: memory, shapes, verbal and math skills. Program activation is individual and skill levels are suited to a senior's personal ability and pace. MELABEV also offers home services for the elderly, especially those at the advanced stage of the illness when they can no longer attend daycare. It supports family members with advice and information and runs support groups for patients and their families.

End-of-Life: There has been an increase in awareness of the need to maintain the quality of life in situations of severe illness, terminal illness, and end-of-life. For example, several programs have been developed for caregivers of relatives suffering from dementia that focus on the decisions made by the family at the end of life. One important development was the introduction of the National Program for People in End-of-Life Situations and for Palliative Care launched in June 2016. It was initiated by, and formulated under, the Ministry of Health in collaboration with JDC-Israel-Eshel and the Myers-JDC-Brookdale Institute. It was developed with the participation of representatives from the MSAS, the health plans, the NII, universities and public figures. It aims to allow patients and families to live independently, in dignity, receiving care suited to their preferences and values. The main recommendations relate to the development of palliative services in hospitals and institutions of long-term care, in an effort to ensure continuity of care. The program emphasizes education, training and research.

Preventing Abuse

Awareness of the need to protect the elderly from abuse has increased in recent years in Israel. This protection rests on three main laws: 1) The Law for the Defense of Protected Persons 1966; 2) The Penal Code 1977, expanded in 1989 to include elderly victims of physical or mental abuse; 3) The Law for Prevention of Violence in the Family 1991, permitting therapeutic intervention and protection of elderly victims of abuse.

Government policy led to the development of assistance programs for situations of abuse and neglect of senior citizens: operating units to prevent abuse in the Social Service Departments of local authorities (65 units); training social workers regarding the Protected Persons Law, and training professionals treating the elderly as regards abuse and neglect; operating multidisciplinary teams (physician, attorney, social worker) in complex cases (committees for at-risk elderly); establishing an inter-ministerial forum in collaboration with NGOs on behalf of the elderly that works to formulate national policy on the topic. The development of the units to prevent abuse at the SSDs included a pilot stage in three local authorities, accompanied by an evaluation study by the Myers-JDC-Brookdale Institute. The study findings reinforced the model, which was disseminated countrywide. Information on elder abuse and neglect is disseminated in written material, including "A Guide to Identify Abuse and Neglect in the Elderly" (published by JDC-Israel-Eshel). It includes a tool to evaluate the risk of abuse and neglect and a guide for establishing a unit to treat and prevent abuse in the rural sector. Social services in Israel are working to intensify treatment of the topic by: 1) Identifying measures to prevent and treat a greater number of cases of abuse and neglect in the elderly by developing more units in local

authorities; 2) Raising awareness of the public and service providers of elder abuse and neglect. (In this respect, a number of professional events have been held, including a national conference on the topic as part of World Elder Abuse Awareness Day); 3) Equipping community services with the tools to identify elderly persons at risk of abuse and neglect, and developing appropriate interventions for such situations; 4) Establishing "abuse committees" in long-term care institutions and hospitals in order to raise awareness and design interventions and proper procedures to be followed in the case of abuse; 5) Establishing a central information service to keep a record of the cases of abuse of the elderly handled by the social services.

Integrated Care

A plethora of agencies in Israel address the elderly. The fragmentation of service providers makes it difficult for the elderly and their families to receive care, maintain continuity of care, and fully exercise their rights. To help resolve the problem of fragmentation, a pilot was developed including a model of individualized care management. The model is based on the local service system for diagnosis and referral to existing services and responses. The program is implemented together with the NII, the MSAS, the Ministry of Health, JDC-Israel-Eshel, the health plans, and local authorities. It is being accompanied by a comprehensive evaluation study by the Myers-JDC-Brookdale Institute.

Goal 4: Intergenerational solidarity is maintained and enhanced

The family and intergenerational solidarity occupy a central place in Israeli society's value system. In recent years, inter-organizational cooperation has grown in order to develop policy and special programs to strengthen intergenerational relations.

Developing Civil Society in the Realm of Intergenerational Activity

MSAS volunteer force: Recognizing that volunteerism is an integral part of the overall national service system, and believing that volunteers are an important, value-based human resource for developing social solidarity, MSAS established a volunteer department in 2010. The department has activated more than 40,000 volunteers countrywide. Activities are in conjunction with the local authority SSDs and include, among other programs, the following:

Green Light – pensioners at traffic junctions and crosswalks helping school and kindergarten children cross streets safely; Retirees for the Israeli Defense Force (**IDF**)- Pensioners helping out at IDF bases, arranging clothing kits for the reserve corps as well as emergency stores; Ben-Gurion Commando – pensioners at ATMs helping the elderly withdraw cash and making sure they are safe; Repair Commando – a group of volunteers made up of electricians, plumbers, carpenters, technicians etc. who help the elderly maintain their homes and carry out light repairs.

NII volunteer force: A professional division of the NII runs a volunteer force to identify older adults in situations of risk or distress (the lonely, people with disabilities, the housebound and so forth). The volunteers make social visits to the housebound, and host information days for people on the verge of retirement, for widow/ers, and for families of relatives with dementia.

The **Yad Sarah** NGO was established as a volunteer organization to meet the changing demands of all age groups with special needs. It has thousands of volunteers of different ages, thereby enabling the elderly to continue to contribute to society; if need be, it calls on younger volunteers too. Yad Sarah has developed comprehensive arrangements for managing and

fostering volunteers, including intake, support and training as well as a special program for retiring volunteers (the "House of Lords").

Programs in formal and informal education with children and youth: Basically, these are joint activities between youth and senior citizens through school or youth movements. The programs are designed to create bridges and strengthen intergenerational contacts, reduce stigma, and impart knowledge, enrichment and technological skills between the generations through educational and technological means. Other programs rely on some 15,000 volunteers countrywide and are implemented by JDC-Israel-Eshel along with various community agencies; they include intergenerational programs on various topics.

Intergeneration Programs of the Ministry for Social Equality

National Service on behalf of senior citizens and the elderly (*Vehadarta*): In this ministry project, National Service volunteers help alleviate the loneliness of elderly people living in the community. They make regular weekly visits to the homes of elderly persons and participate together in community activity.

"Seniors classes" in junior high or high school as part of the school day: The program includes learning and enrichment for the elderly while reinforcing intergenerational contacts between students and seniors. The classes, in a variety of subjects, are held for four hours per day, twice a week. The program is implemented by the local authorities in cooperation with the Ministry of Education.

Through the eyes of the elderly (*Mizkeinim Etbonen*): This intergenerational program is implemented at the International School for Jewish Peoplehood Studies (ISJPS) under the Ministry for Social Equality and the Ministry of Education. It creates a dialogue between seniors and the younger generation around research into family histories. The generations connect from learning together while documenting the Jewish world and communities of the past through personal-family stories. It stimulates the interest of the elderly and activity that helps them remain involved and mentally healthy. It contributes to narrowing the digital gap, giving the elderly new 21st-century media tools. The joint project creates a database that becomes the source of family information and a family tree.

"The Elderly on the Move": This program offers joint activities for senior citizens and youth movement members. Activities cover a broad range of topics from computer lessons and activities surrounding the holidays to documenting the life stories of the elderly. The program addresses the situation of seniors in Israeli society and, through the program, a partnership is established with the youth wherein each side gives and receives. The youth movements participating in the program are: Bnei Akiva; Scouts; Ezra; Hanoar Haoved Vehalomed; Arab Scouts; Hashomer Hatza'ir; Agricultural Union; Maccabi Hatza'ir; Druze Youth; Hekhalei Oneg; Ariel; Betar National Youth.

"Witness Theater": This is a cooperative effort of the Ministry for Social Equality and JDC-Israel-Eshel centering on personal contact between schoolchildren and Holocaust survivors. The joint activity culminates in an impressive, moving, documentary stage performance. The goal of the program is to give survivors emotional support, to pass on the legacy of the Holocaust to the next generation, and to strengthen intergenerational relations.

"Students for Senior Citizens": Through the students union, the Ministry for Social Equality implements a program in which students carry out a range of activities on behalf of the seniors: establishing community theaters, holding lectures before groups of seniors, explaining rights to

elders in senior citizen homes, giving computer enrichment lessons and more, in return for a scholarship.

Family Caregivers

Families in Israel are the main source of assistance for the elderly; about a quarter of the adult population provides care for an elderly relative. This care, on top of their regular activities (work and family), is a serious burden on the caregiver. Until recently, specific programs were developed to support and assist family caregivers, as local initiatives on the part of ministries and NGOs. A major change in the past two years was the recognition of a need to formulate general policy to support family caregivers and safeguard this important resource. The MSAS is leading a process to formulate general policy that regards the family as a target population in its own right, with needs that should be addressed. One of the policy goals that the MSAS Division for Senior Citizens has set itself for the coming year is the development of a professional doctrine and organizational models to provide assistance and support to family caregivers to be disseminated and adopted by the social services.

Below we present the major initiatives supporting family caregivers:

Caregivers Israel: An NGO spearheads a vision to recognize and appreciate the role of family members. Its very establishment reflects public recognition of the special role of the family and the challenges it faces. The NGO strives to promote the rights of family caregivers and to provide tools to enable them to continue in this role while safeguarding their health and quality of life. Today, it works together with JDC-Israel-Eshel to raise awareness and to improve attitudes to informal caregivers in their places of work. Pilot programs to support family caregivers are being implemented in a number of for profit and non-for profit companies. By introducing supports for family caregivers in their place of work, the aim is to help balance their work role with that of caregiver, and to enable them to continue working and maintain a high level of functioning. These initiatives are accompanied by formative evaluation research by the Myers-JDC-Brookdale Institute.

Support groups are an important response developed over the years to help family members. To expand their use and improve their professionalism, the NII, together with the MSAS and local authorities, implemented a comprehensive national project of support groups for family members caring for the elderly. These groups provide emotional support, knowledge and care giving skills. There are specific groups for family members caring for a relative with dementia or a family member in need of long-term nursing. Some 150 support groups operated in recent years, nationwide, with the participation of some 2,000 family caregivers. The project was accompanied by an evaluation study by the Myers-JDC-Brookdale Institute, which, along with the participating organizations, summarized the experience in a guide to help professionals lead family support groups. In addition, the NII funds and implements support groups for widow/ers to help cope with the death of a spouse. Other support groups are implemented by various organizations such as the health plans, the local authority SSDs, and the EMDA and MELABEV NGOs.

A resource for family caregivers: In recent years, there have been attempts to provide family caregivers with a specific address to turn to in times of need. These experimental programs are cooperative efforts of NGOs and the MSAS. Common elements of the programs are an assessment of the needs of family members, followed by referral to suitable services and help in navigating the service system using the approach of managed care. These models are based on the combined professional manpower of social workers and volunteers.

Training home care workers: To improve the dialogue and relationship between formal and informal caregivers, MATAV – the largest NGO of home care workers in Israel – has begun to implement a program to train the caregivers of the elderly to identify the needs of family members and set up effective cooperation for the benefit of the senior, the family and the caregivers. The training includes aspects of creating effective communication. These programs are run in cooperation with JDC-Israel-Eshel.

Technological developments: This refers to the development of applications to support family members of elderly relatives suffering from dementia or in a frail condition, living in the community and requiring supervision. One example is the new NII initiative to experimentally implement sensor technology in the homes of seniors, which make it possible to monitor movement, temperature, falls, opening of a refrigerator and so forth. The idea is to enhance a family's sense of security regarding the condition of their elderly relative, lightening their burden somewhat.

Regional Cooperation

The ministries and NGOs maintain international professional relations, in the areas of their concern, with a broad range of non-profits. They also are members of international associations and organizations, including the UN. This activity contributes greatly to learning, enrichment, and the sharing of knowledge and experience. Professionals in the field and researchers participate in international conferences and seminars, cooperate in research, and initiate international conferences in Israel. There are also mutual exchange visits enabling professionals to share, develop and expand their knowledge in the field.

2. Conclusions and Priorities for the Future

The ageing of the population has considerably raised the awareness of these issues among decision-makers and professionals. This is reflected in a number of government resolutions and legislation, as well as in the designation of the ageing population and its ramifications as a topic of national importance in preparing the work plans of government ministries. Of particular note is the involvement of those government ministries that are responsible for overall policy and are not necessarily responsible for direct service delivery to the elderly population. These include the Prime Minister's Office and the National Council for Economy, the Ministry of Finance and the Ministry of Economy. Until recently, these ministries did not address the issue directly, but in recent years not only are they allocating it an important place, they are also creating cooperative ventures with other ministries around the issue of how society is dealing with the ageing of the population. Moreover, ministries that traditionally were involved in caring for the elderly have raised the topic to a higher priority. Especially notable is the national planning, led by the Ministry of Social Affairs, in cooperation with stakeholders, and the fact that the Ministry of Health has made the preparation of the health system for the ageing of the population one of its strategic health policy priorities for the coming years. The health plans, whose job it is to deliver medical care under the National Health Insurance Law, have in recent years developed advanced technological tools that contribute to the sharing of information among various units in the health system and to improving the quality of care. They also developed distance-medicine technologies, which are particularly important for the elderly population because of their extensive utilization of the health system.

Major achievements identified during the preparation of this document:

- **Accelerated development of community programs:** The rate of institutionalization is low in Israel, mainly as a result of service development in recent years, which allows the elderly to continue to live at home in a protected environment that is adapted to their needs.
- **Family caregivers:** Israel has decided to recognize family caregivers as a target population and to develop services tailored to their needs. Until recently, the role of family members did not receive official recognition. Raising the awareness of the size of the population that is providing care to elderly relatives, the major role that they play in keeping the elders at home, and the burden that they carry, has led to a decision in the Ministry of Social Affairs to recognize them as a target population for development of services.
- **Units for prevention and treatment of abuse, from pilot programs to expansion and implementation:** Based on models that were developed and validated by evaluation studies of experimental programs for the prevention and treatment of abuse and neglect, the past three years have witnessed the expansion and implementation of these models countrywide. This is reflected in budget allocations, the establishment of 72 units, job openings for professionals, training offered by the service system and activity for raising public awareness.
- **Development of an innovative model providing social and nutritional solutions to elderly in need – "MOFET Clubs":** The uniqueness and success of this model is reflected in the provision of an extensive package of combined services to meet the basic needs of elders with low incomes. The package includes hot meals, transportation, social activity in an intimate atmosphere, with no stigma and at a low cost to the participants. Currently, 250 such clubs are active and another 50 are being developed for Holocaust survivors.
- **Achievements in the health system:** In recent years, the health system has advanced the computer systems that allow for sharing information, and is currently working toward greater transparency of information for health system clients. In the area of ageing, this is reflected in making inspection reports of long-term care services for the elderly accessible to the general public. In addition, in order to improve the health system's preparedness for ageing, steps have been taken to improve healthcare at home to prevent hospitalization and to maintain the quality of care for older people.
- **Social security rights:** As part of the attempts to reduce poverty among the elderly, the NII promoted legislation to ease the criteria for receiving income supplement benefits for elderly who depend on these funds for subsistence. The NII has also taken steps to improve services for older citizens and to make the most of their rights, by improving computer systems and making the information more accessible to clients.

Main Challenges identified during the preparation of this document: Despite the accelerated development of services and responses to the needs of the elderly, their fast-growing number has posed considerable challenges to society in general and to the service system in particular. There is already a shortage at the infrastructure level as well as a shortage of manpower to care for elderly in all areas – doctors, nurses, social workers, caregivers etc. There is a need to enhance disability-preventing and rehabilitative services in order to mitigate the effect of ageing on the Israeli service system.

Other challenges currently facing Israel are:

- **Coordination among service systems:** Israel provides a broad and diverse basket of services, provided by many agencies. The challenge is to create a coordinated, accessible and efficient system. The fragmented system makes it difficult for the elderly and their families to make the best use of the service system and creates inefficiency.
- **Adapting the job market to the ageing population:** Israel raised the retirement age in 2004 and consequently the participation rate of the older population in the job market grew. Still remaining is the challenge of adapting the job market to the needs of older workers, and changing perceptions among employers and the general public. Yet another raise of the retirement age is currently being debated. One issue in question is whether there should be a mandatory retirement age at all.
- **Person-centered services:** The system is facing a challenge of adapting and refining the services to the specific needs of the elderly. There is a transition from inflexible criteria to criteria that are adapted to the needs of the elderly and their family. This creates a challenge, because systems want to maintain budgetary frameworks, equality in service provision and supervision of their quality. However, the systems do recognize that allowing for choice and making the basket of services and its provision more flexible would improve the quality of life of the elderly, and therefore are searching for ways to achieve the best possible balance between these two approaches.

Future Programs

The main organizations engaged in planning and providing services to the elderly population, including the Ministry of Social Affairs, the National Insurance Institute, the Ministry of Health, the Ministry for Social Equality and JDC-Israel-Eshel have been developing responses to the changing needs of the elderly, currently and in the future. One of the programs is an experimental project to provide integrated care to community-dwelling elderly. The Myers-JDC-Brookdale Institute is following the program with a comprehensive evaluation study, with the goal of providing the basis and tools to create successful models to be disseminated countrywide. Also in planning is a targeted response for independent elderly – before and after retirement – to ensure that they have a meaningful life, economic security and health maintenance, so that society may continue to tap into the human assets that this population has to offer, in light of the increased life expectancy.

In order to develop a policy that is compatible with the changes the society is undergoing due to ageing, there is a need to expand the applied research activity which supplies tools and a factual basis for decision making . A high priority should be given to demonstration projects of innovative models and interventions that are accompanied by evaluation. In addition, administrative information systems and the connections between them should also be upgraded, in order to obtain decision-supporting information and data.

Israel would welcome cooperation with other countries to learn about and to advance the major issues it is facing, such as the development of manpower, models for adapting services and making them more flexible, integrated care models and programs for enhancing the activity of the elderly.

Annex

List of Parameters of the National Ageing Situation

Population (2014)	
General population	8,296,900
Aged 65+	900,100
Percentage of aged 65+	10.8
Percentage of aged 65-74	5.9
Percentage of aged 75-84	3.4
Percentage of aged 85+	1.4
Percentage of aged 0-19-0	36.0
Ratio between the sexes among aged 65+	788 men/1,000 women
Median age of population	29.72
Median age of 65+	73.79
Elderly dependency ratio	204
Children dependency ratio	678
General dependency ratio	882
Education (2014)	
Percentage of aged 65+ with 0-4 years of schooling	11.5
Percentage of aged 65+ with 9-12 years of schooling	30.7
Percentage of aged 65+ with 13 and more years of schooling	41.5
Participation in the labor force (2013)	
Participation in the labor force of aged 65+	18.0
Men	26.6
Women	11.2

Participation in the labor force of aged 65-69	37.7
Men	49.5
Women	27.0