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Ageing Policy in Europe, North America and Central Asia in 2017-2022

Synthesis Report

on the implementation of the Madrid International Plan of Action on Ageing in the ECE region between 2017 and 2022

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Synthesis Report on the implementation of the Madrid International Plan of Action on Ageing in the ECE region between 2017 and 2022

I. Introduction

This document presents the synthesis of progress made between 2017 and 2022 in implementing the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy (MIPAA/RIS) in the ECE region.

40 national reports submitted by member States were included in the analysis.

The Synthesis Report commences with an Executive summary of the context and main findings of the fourth review and appraisal of MIPAA/RIS implementation. It is followed by an introduction describing the MIPAA/RIS review process and the national reports received in the fourth review and appraisal cycle.

Section four forms the core of the Synthesis Report. It details progress achieved and reported by ECE countries in a range of ageing-related areas, centred around the three priority goals of the 2017 Lisbon Ministerial Declaration on Ageing:

(1) Recognizing the potential of older persons;

(2) Encouraging longer working life and ability to work;

(3) Ensuring ageing with dignity.

In its fifth part, the Synthesis Report summarises the contribution of countries' ageing-related policies to the implementation of the 2030 Agenda for Sustainable Development, mapping interlinkages and mutually reinforcing elements between MIPAA/RIS and the Sustainable Development Goals (SDGs), and reporting on the reflection of ageing issues in national development planning.

The sixth section of the Synthesis Report is devoted to lessons learned from the COVID-19 pandemic, reflecting on the impact of the pandemic on older persons in the ECE region, and reporting on specific measures targeting older persons adopted by countries in response to COVID-19 crisis.

Finally, an overall summary of findings is presented, along with countries' views on future challenges and opportunities related to ageing, as well as some recommendations for future actions.

II. Executive Summary

A. The context of the fourth cycle of the Madrid International Plan of Action on Ageing implementation

1. Population ageing continues to be a dominant trend in the United Nations Economic Commission for Europe region

Since the adoption of the Madrid International Plan of Action on Ageing and the ECE Regional Implementation Strategy (MIPAA/RIS) in 2002, population ageing has continued to transform the demographic structure of countries in the region. In two decades between 2002 and 2022, the number of people who are 65 years old and above has risen by 70.3 million, and their proportion increased from 13.4 per cent in 2002 to 17.5 per cent in 2022, according to United Nations population estimates.[11] Rising life expectancy, enduring low fertility, as well as migration have affected the extent and pace of population ageing. The ongoing trends of these factors indicate that, by 2030, people aged 65 years and older are set to account for a fifth of the total population in the ECE region. Persons aged 80 and above will make up 5.4 per cent. By 2050, persons 65 years old and above are expected to make up almost a quarter of the region's population, while older persons aged 80 and above are projected to account for 8.7 per cent. The median age of the ECE population is set to rise from 39.5 years in 2020 to 41.8 years by 2030 and 43.9 by 2050. It is important to note, however, that population data cited throughout the report are based on the United Nations population projections from 2019 and may undergo revisions in the future, as the full and long-term impact of the COVID-19 pandemic on demographic data gradually becomes more evident.

[11] Demographic data and estimates in this section are from the United Nations, Department of Economic and Social Affairs, Population Division (2019). World Population Prospects: The 2019 Revision. New York: United Nations. Available at https://esa.un.org/unpd/wpp/. Due to the impact of COVID-19, the cited data are expected to undergo some revisions in the forthcoming 2022 issue of the World Population Prospects.

Between 2010 and 2020, life expectancy at birth increased on average by almost three years in the ECE region, and life expectancy at the age of 65 grew by more than a year. In a number of ECE countries, in particular Estonia, Latvia and Lithuania, as well as Belarus, Kazakhstan and the Russian Federation, the latest gains in longevity were markedly higher than the region's average. This contributed to offsetting the losses in life expectancy of their population, particularly among men, experienced during the 1990s. Nevertheless, the disparities in life expectancy among ECE countries, and between men and women (among and within countries) remain large. In 2020, life expectancy for men at birth varied from 81.6 years in Switzerland to 64.5 years in Turkmenistan, and for women, from 86.1 years in Spain to 71.5 years in Turkmenistan.

The average total fertility rate in 2020 remained below the so-called replacement level (i.e. 2.1 children per woman) in 46 out of 52 ECE countries,[12] with Central Asian countries and Israel continuing to have fertility rates above this level. In 14 ECE countries, the fertility rate stayed below 1.5 children per woman. Over the last decade, there was some marginal recovery of fertility in a number of low-fertility ECE countries, especially in Central and Eastern Europe, while in others, particularly in Southern and South-Eastern Europe, fertility rates declined further. As a result, the average total fertility rate for the region remained at 1.8 children per woman in 2020, the same level as in 2010.

Another important factor influencing the age structure and population growth rate of ECE countries has been migration. As a combined effect of declining fertility and significant out-migration, especially in the working age, 18 out of 52 ECE countries[13] saw their populations decline in the 20 years between 2002 and 2022, with many of them recording heavy drops in their working-age populations in particular. Countries in South-East Europe, the Baltics, Eastern Europe and the Caucasus were the most heavily affected.

2. Socio-economic development in the region endured major disruptions with an uncertain recovery

Socio-economic development during the fourth cycle of MIPAA/RIS implementation was marked by a major disruption caused by the onset of the COVID-19 pandemic at the beginning of 2020. Before this crisis emerged, output in the ECE region increased at a steady but decelerating rate, averaging around 2.5 per cent annually. In 2020, severe GDP contractions were observed in practically all countries in the region. High-income countries and countries more dependent on tourism and other services based on social interaction were hit hardest. Most countries reacted with massive monetary and fiscal stimuli, which in combination with strong consumer spending, drove a rapid recovery in 2021. As a result, around half of the countries in the ECE region brought their output back to pre-pandemic levels. Growth in 2022 was expected to slow down, amid rising inflationary pressures, still unresolved supply-chain disruptions and lingering concerns on new waves of COVID-19 infection. But the war in Ukraine has exacerbated tensions in commodity markets, in particular food and energy, heightened uncertainty and severely depressed the economic outlook in the region.

The labour market has seen major disruptions as well, although differential policy responses within the region have led to considerable divergence. Prior to the pandemic, unemployment had been declining steadily across the region. The COVID-19 crisis and related mobility restrictions brought about a sharp dislocation to the labour market, leading to unemployment rates in the United States shooting up briefly to levels surpassing those seen during the global financial crisis of 2008–2009. By 2022, unemployment rate returned to pre-pandemic levels. In Europe, the use of job retention schemes during the crisis resulted in lower variability in the labour market. While employment has fully recovered, the number of hours worked remained below pre-crisis levels. In many countries, unemployment and surplus labour co-existed with acute labour shortages, fuelled by rapid shifts in demand for some occupations, in particular in the area of health and social care.

Poverty reduction efforts have been negatively affected by the COVID-19 crisis as well. In the EU, after years of steady decline, the share of people at risk of poverty and social exclusion increased in 2020. However, country performances differed, with some economies continuing to report reductions. In the economically less advanced parts of the region, which are marked by more precarious social support systems, earlier gains in poverty reduction were reversed as a result of the pandemic, and recent gradual improvements are yet to prompt a return to previous levels.

3. The COVID-19 crisis has had a disproportional negative effect on older persons

The COVID-19 pandemic has had far-ranging implications for the economy and for society. However, it is first and foremost a health emergency which has affected millions across the ECE region, with particularly grave implications for older age groups. As has been widely reported, the fatality rate for older people is higher than for younger age groups, and while evidence shows significant variation in the infection-fatality ratio across geographic locations and as the virus developed over time, the mortality risk for older persons has been

[12] Excluding Andorra, Liechtenstein, Monaco and San Marino.
[13] Excluding Andorra, Liechtenstein, Monaco and San Marino.

consistently significantly higher across data sources.[14] Beyond the threat to life, the pandemic has put older people at greater risk of physical and social isolation, loneliness, discrimination and various human rights abuses, necessitating innovative responses beyond the economic and health domains.

B. Main findings from the fourth review and appraisal of the Madrid International Plan of Action on Ageing and the ECE Regional Implementation Strategy

In recent years, population ageing has been recognized as a determining trend throughout the ECE region, and increasingly so not only in countries which already experience its economic and social implications but also in member States which are still relatively youthful compared to the regional average. In testimony of this growing awareness, ECE member States engaged in a broad range of policy initiatives to advance active and healthy ageing, to promote the participation, autonomy and self-determination of older persons, and to reform social protection and long-term care systems to ensure their sustainability and intergenerational fairness. Countries such as Belarus and the Republic of Moldova have benefited from ECE assistance in developing and evaluating road maps for mainstreaming ageing that provided concrete policy guidance on ageing grounded in a profound analysis of the situation in the country.

Apart from reinforced policy work and action by countries, the economic and social challenges presented by population ageing have also stimulated innovation and cross-sectoral response in which not only governments but also civil society, the private sector and the research community have been mobilized. The national MIPAA/RIS review reports of ECE countries are evidence in particular to the crucial role of non-governmental organisations and of technological innovations and digitalisation.

Despite diversity across the region, the fourth review and appraisal of the implementation of MIPAA/RIS for the period 2017-2022 has identified common trends in the way countries have addressed the three priority goals agreed in 2017 at the ECE Ministerial Conference on Ageing in Lisbon. ECE member States set out to (1) recognize the potential of older persons; (2) encourage longer working life and ability to work; and (3) ensure ageing with dignity. The following paragraphs briefly outline the key findings from the regional review.

1. Recognizing the potential of older persons

Realizing the potential of living longer cannot be achieved without taking ageing and older persons' issues into consideration in all policy fields across all levels of government. There has been an increasing recognition of the importance of mainstreaming ageing and of better coordination among all relevant actors. Some form of mainstreaming ageing in public policies is in application in most ECE countries and a number of them have integrated ageing and older persons' issues in key long-term national development strategies. Councils and advisory bodies on ageing, often including multiple governmental and non-governmental stakeholders, are in place in several member States. Significant advances have also been made with regard to the involvement of older persons and their representatives in policy processes affecting them. In particular, older persons' councils at the local level have become more widespread.

ECE member States have also facilitated older persons' participation in social and cultural life by providing various opportunities for volunteering, entertainment and physical and cultural activities tailored to their needs and preferences. Apart from playing a positive role in facilitating healthy and active ageing, such actions have also aimed to combat feelings of loneliness and social isolation, which continue to be widespread in older age groups. Several countries highlighted the crucial role of civil society in promoting active ageing and participation among older persons.

Countries have also made efforts to promote a positive image of ageing and to counteract negative stereotypes and other manifestations of ageism against older persons. The measures adopted, including information campaigns, intergenerational dialogue or various competitions, played an important role in creating conditions for a more active engagement of older persons in society. Several countries highlighted the crucial role of media in this endeavour. Member States have also launched various initiatives promoting work and volunteering in intergenerational settings, aiming to enhance intergenerational solidarity, learning and dialogue, and to promote a more realistic image of ageing.

2. Longer working life

ECE countries approached the policy objective of extending working lives from two main angles in the reporting period between 2017 and 2022. Firstly, significant attention was devoted to measures combatting unemployment among older persons, developing their skills, and promoting age management at the workplace and age-friendly working conditions. Older jobseekers were identified as a key target group

[14] COVID-19 Forecasting Team. Variation in the COVID-19 infection–fatality ratio by age, time, and geography during the pre-vaccine era: a systematic analysis. The Lancet. February 24, 2022. Available at https://www.thelancet.com/action/showPdf?pii=S0140-6736%2821%2902867-1.

for employment policies in many countries. They are offered tailored support, which increasingly includes also comprehensive rehabilitation and labour force reintegration programmes.

Moreover, the employment prospects of older persons were boosted through lifelong learning, which was highlighted by an impressive number of countries. In particular, efforts to increasing digital skills and literacy to facilitate labour market and social participation among older persons was reported in about two thirds of national reports. Enhancing the ability to work has naturally not been the sole objective of lifelong learning opportunities offered to older persons in ECE member States. Promoting healthy ageing, improving financial literacy, or facilitating the transition to retirement were prominently represented as well.

Countries have also been encouraging longer working lives by adjusting pension systems. A broad range of actions was reported by ECE member States in this area. They included direct measures, such as raising and harmonizing retirement ages between women and men, or restricting access to early retirement, but also a number of more indirect incentives. Some of the innovative measures introduced by member States included partial and gradual retirement, the promotion of flexible and shared work, the possibility of cumulating pension and employment income, or higher pensions in return for additional contributory years.

The long-term financial sustainability and adequacy of pensions in the face of demographic changes and rising costs of living have also been high on countries' policy agendas. In response, there has been an increasing trend of linking retirement age to life expectancy in several ECE member States, and many countries reported on raising pensions through revised indexation rules or additional allowances targeting older persons with the lowest pensions. Poverty in older age, especially among women, received significant attention as well and the existence of a gender pension gap was recognized as a serious shortcoming. Efforts were made by countries to compensate for and, importantly, also to prevent the emergence of a gender pension gap, through measures that compensate for pension contributions during periods of care work and through an enhanced drive to reduce the gender pay gap.

3. Ageing with dignity

Dignified ageing requires the conjunction of many elements including the full enjoyment of human rights, freedom from violence and abuse, access to high quality health and social care, autonomy to make decisions, choose one's preferred living environment and participate in society, and self-determination up to the end of life. National reports from ECE member States have been a testimony for the growing awareness of the importance of all these features for well-being in older age. In particular, the human rights, autonomy and self-determination of older persons received increased attention, and declared policy objectives in these areas have taken the shape of concrete action in several countries. Reforming legal guardianship rules and introducing measures to increase self-determination at the end of life and in palliative care settings were most prominently represented.

Ensuring that older persons can stay in their preferred living environment for as long as possible was also highlighted as a means of strengthening their autonomy and self-determination. Countries reported on advances in deinstitutionalisation and in enabling independent living within the community, by developing integrated care and support infrastructures at the local level. Progress was also made in leveraging technology and digitalisation to enable ageing in place and countries introduced support schemes to promote further research and development in the area of assisted-living technologies. Apart from the increased support for ageing in place, alternative living arrangements meeting older persons' needs for company and support with daily activities were expanded in several countries. They took various forms, such as intergenerational or supported housing.

Preventing abuse and violence has been another key concern with regard to safeguarding the dignity of older persons. Measures undertaken included awareness-raising, training to better detect and respond to cases of abuse, as well as improved legislation and procedures to protect victims. Addressing financial abuse and fraud in particular has been a priority for several ECE member States, and violence, abuse and neglect in the health and social care sectors also received attention.

Most policy interventions and measures related to ageing with dignity have traditionally focused on ensuring quality and accessible health and social care for older persons. The period of the fourth review cycle of MIPAA/RIS has been no exception and a significant number of countries reported on piloting, introducing, updating or reforming their frameworks to respond to the long-term health and social care needs of their ageing populations. The major aspects addressed by countries included quality assurance, integration, financial sustainability, decentralisation and deinstitutionalisation of long-term care. Notably, an expansion of home care services in ECE member States was discernible from national reports.

Persons providing care, whether professional or informal carers, received significant attention. Providing a sufficient number of health and social care personnel that is adequately trained has been identified as a major challenge by a considerable number of countries, and many of them have taken concrete steps to address it, including enhanced training, financial incentives, or improving working conditions. There has also been an

increasing recognition of the crucial role of informal and family carers in the long-term care infrastructures of countries. An important number of countries adopted measures to support them and alleviate the strain of informal caregiving, for example through expanded respite care services. Moreover, several countries highlighted the growing importance of non-governmental organisations in long-term care service provision.

ECE member States also continued to address the growing prevalence of dementia associated with increased longevity. A significant number of countries adopted or updated strategies and action plans responding to the increasing burden of dementia and/or mental and behavioural disorders on health systems and on informal caregivers, with a particular focus on areas such as prevention, early diagnosis, awareness-raising, reduction of stigma, ethical treatment, autonomy, and research. In addition, several countries reported on advances to turn living environments and communities, more dementia-friendly, and to expand community-based care options and possibilities for social participation for persons with dementia and their caregivers.

C. Mainstreaming ageing in sustainable development policy and in COVID-19 response

Apart from reviewing progress made towards the achievement of the three above-detailed goals of the 2017 Lisbon Ministerial Declaration, countries have used the opportunity provided by the fourth review and appraisal of MIPAA/RIS to also report on the interlinkages between ageing and sustainable development, and on managing the impact of the COVID-19 pandemic on older persons.

The implementation of MIPAA/RIS have been recognized as an important accelerator to realize the 2030 Agenda and its Sustainable Development Goals (SDGs). Several ECE member States established explicit links between their national ageing strategies and sustainable development plans, and highlighted mutually reinforcing actions in these two issues areas. A number of countries also considered ageing in their voluntary national review(s) (VNR), presented to the High-Level Political Forum on Sustainable Development (HLPF), underscoring the importance of taking individual and societal ageing into account when addressing broader sustainability questions.

A significant part of the fourth cycle of MIPAA/RIS implementation was affected by the COVID-19 pandemic, which has left a distinctive mark on many policies and measures adopted by countries in this period. Older persons were counted among the most vulnerable population groups both to the health and to the social impacts of the pandemic, triggering targeted response throughout the ECE region. Restrictions of movement, in some cases with special provisions concerning older age groups, were introduced around the region, limiting the spread of COVID-19 but also hindering social interactions, often leading to and increased feeling of loneliness. Countries responded by promoting volunteering and digital accessibility and literacy initiatives to mitigate the isolation of older persons. They also adopted a range of measures to provide special support to long-term care providers, offered additional financial support to older persons, and several countries prioritised older persons' access to COVID-19 vaccines, among many other actions.

A number of ECE member States also emphasised initiatives taken to ensure the dignity and the right to health of older persons in difficult health-care decisions. The participation of older persons and their representatives in decision-making during the pandemic was highlighted as well by some countries. Finally, despite the many adverse effects of COVID-19 for older persons, several countries reported on good practices arising from the enhanced information sharing and coordinated response across policy fields and levels that were triggered by the pandemic.

D. Outlook and priorities for the future

Despite the significant progress achieved, further reforms and investments are needed to realize the potential of every older person, create a society for all ages, and ensure the sustainability of social protection systems and long-term care..

1. Mainstream ageing across all policies at all levels

Increased longevity offers an enormous potential for economies, societies and individuals, which is yet to be fully realized. Moreover, population ageing creates a pressing demand to adapt existing systems, services and infrastructures to be able to respond to the needs of all. Mainstreaming an ageing perspective across all policy areas at all levels of government, and joining forces between multiple stakeholders across various sectors will be instrumental in achieving progress in these areas.

2. Promote active and healthy ageing across the life course

To reap the benefits of living longer and ensure well-being at older age, support and investment is necessary throughout the life course, in areas such as health promotion, lifelong learning, equal access to services, poverty reduction, or participation in the labour market and social life. Measures aimed at prevention and at creating equal opportunities in all fields of life are

important prerequisites for health, participation and income security at older age. In addition, supportive and enabling environments need to be created in homes, communities and workplaces to support independent living and continued participation in economic and social life, even when functional ability declines.

3. Make long-term care of choice accessible for all and support caregivers

Population ageing increases the demand for long-term care and for skilled care professionals. To prepare for this surge in demand, long-term care services need to be continually adjusted and expanded, to be able to maintain high quality while securing access for all, including in rural and deprived areas. Apart from ensuring appropriate care, it is equally important to uphold the dignity and highest possible level of autonomy and self-determination of older persons across long-term care settings. Facilitating the choice of the preferred form of long-term care – whether at home, in the community, in supported housing, or in a residential facility – by individual older persons, will be an important step towards strengthening their self-determination and making sure that their respective needs for care and social interaction are met.

High-quality long-term care is, of course, unthinkable without dedicated professional and informal carers. To ensure the sustainability of long-term care systems, the terms of employment and working conditions of health and social care workers need to be improved, including ensuring adequate staffing. At the same time, comprehensive support has to be provided to informal and family carers, helping them to reconcile paid employment and care responsibilities.

III. The process of the fourth review and appraisal of MIPAA/RIS

A. The MIPAA/RIS review process

The Madrid International Plan of Action on Ageing, adopted at the Second World Assembly on Ageing in Madrid in 2002, provides the global policy framework to guide the efforts of countries in response to population ageing. The Regional Implementation Strategy adopted in Berlin in 2002, further highlights ten region-specific commitments that ECE member States agreed to focus on when implementing MIPAA (see table 2).

At the onset of MIPAA, it was agreed to carry out a review and appraisal of its implementation every five years at both regional and global levels. In 2007, the ECE Ministerial Conference in León (Spain) concluded the review and appraisal for the first five-year cycle of MIPAA/RIS and in its Ministerial Declaration re-endorsed the ten commitments of the RIS. In 2012, the ECE Ministerial Conference in Vienna (Austria) concluded the second review and appraisal exercise at the regional level. The Vienna Ministerial Declaration with its four goals endorsed the concept of active ageing. The third regional review and appraisal culminated at the ECE Ministerial Conference in Lisbon (Portugal) held in 2017, with the Lisbon Ministerial Declaration paving the way to realizing the potential of living longer.

The fourth review and appraisal for the period 2017-2022 was launched in September 2020, when the ECE Standing Working Group on Ageing issued reporting guidelines[15] to facilitate the preparation of national reports. Countries were requested to report progress on each of the three priority goals specified in the 2017 Lisbon Declaration: (1) recognizing the potential of older persons; (2) encouraging longer working life and ability to work; and (3) ensuring ageing with dignity. Member States were also requested to reflect on the interlinkages between ageing and sustainable development, as well as on the impacts of the COVID-19 pandemic on older persons and lessons learned.

The Synthesis Report summarizes the main trends of MIPAA/RIS implementation, and highlights progress and challenges identified in the national reports. It will inform discussions at the fifth ECE Ministerial Conference in Rome (Italy), which is expected to result in the adoption of a ministerial declaration to shape MIPAA/RIS implementation in the next five years.

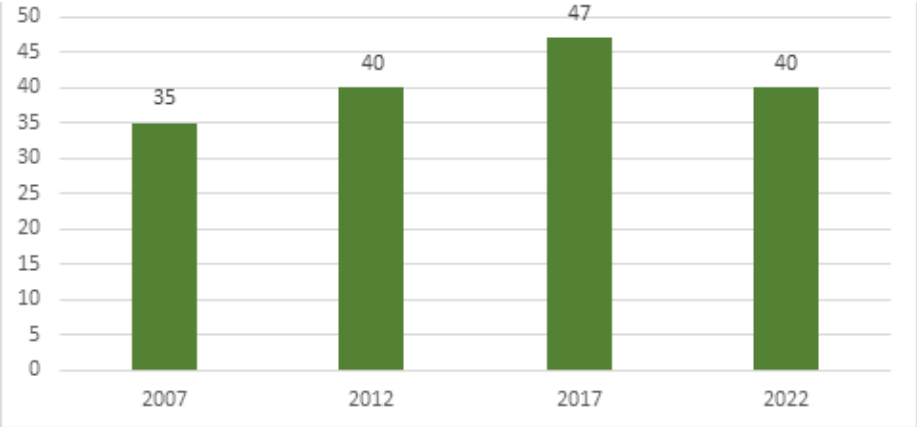
B. National reports

A total of 40 national reports were submitted for the fourth cycle review between September 2021 and February 2022. This represents a decrease compared to 47 reports in 2017 but an increase from 35 reports in 2007 (see figure 1). The lower number of submissions can be in part attributed to the ongoing COVID-19 pandemic, as continuing restrictions and conflicting priorities of national administrations related to COVID-19 pandemic response have in some cases hindered planned national reporting. Reports were submitted in all three official languages of ECE: English, French and Russian. All reports submitted to the ECE Secretariat can be accessed online.[16]

Reports were between 19 and 76 pages long, excluding annexes. Most countries further provided statistical data on a range of indicators for the statistical annex of the Synthesis Report. Some countries provided additional materials, such as national ageing strategies and action plans, information about laws and regulations, major achievements and descriptions of good practice examples.

[15] https://unece.org/fileadmin/DAM/pau/age/Review_and_appraisal/Guidelines_for_National_Reports-final_EN.pdf
[16] https://unece.org/mipaa20-country-reports

Figure 1
Number of submitted national reports per MIPAA/RIS review cycle



Virtually all reports adhered to the general structure suggested in the guidelines, providing an executive summary, an overview of the national ageing situation, an explanation of the methodology used to prepare the report, national actions and progress under each of the three goals of the Lisbon Declaration, reflections on the links between MIPAA and relevant global frameworks and initiatives, and conclusions and priorities for the future. In general, reports outlined achievements and areas of activities. Several, but not all, mentioned areas where difficulties and challenges remain that will be addressed in the years ahead.

The guidelines for preparing the MIPAA/RIS implementation report suggested using a combination of quantitative and qualitative sources to develop national reports, emphasizing the importance of stakeholder participation, including civil society and older persons. In most countries, national focal points on ageing coordinated the collection of necessary information, aided in some cases by experts or UNFPA country offices. Data and policy analysis was conducted based on the information available to the ministries in charge of ageing-related policies, complemented by additional inputs from other ministries, departments, government agencies, commissions, committees or other relevant bodies. Several countries invited inputs from regional and local governments. In addition, national reports drew on existing research and surveys, recent reports on the implementation of related national strategies or action plans, as well as statistical data available from national statistical offices and other official sources. Many countries have also consulted a range of non-governmental stakeholders including civil society organizations, research institutions, service providers, and relevant interest groups, such as older persons' associations and unions. Several countries made use of dedicated surveys and questionnaires to solicit the views of stakeholders, while a few countries organised meetings, discussions, or consultations for this end.

Table 1
National reports considered in the Synthesis Report

	Country	Abbreviation	Language of report	Additional materials submitted
1.	Albania	ALB	English	Statistical data
2.	Armenia	ARM	English	
3.	Austria	AUT	English	Statistical data
4.	Azerbaijan	AZE	Russian	"Active Ageing Index 'AAI' for Azerbaijan: A comparison with EU countries" Report
5.	Belarus	BLR	Russian	Statistical data; National Strategy on "Active Longevity 2030"; indicators of achievement of SDGs taking into account population ageing
6.	Belgium	BEL	French	Institutional structure and distribution of powers in Belgium; demographic references; good practices inspired by the COVID-19 crisis
7.	Bulgaria	BGR	English	Statistical data
8.	Canada	CAN	English, French	Statistical data
9.	Cyprus	CYP	English	Additional information on major programmes
10.	Czech Republic	CZE	English	Statistical data
11.	Denmark	DNK	English	
12.	Estonia	EST	English	Statistical data
13.	Finland	FIN	English	
14.	France	FRA	English, French	NGO contribution to the review
15.	Germany	DEU	English, German	Statistical data
16.	Greece	GRC	English	
17.	Ireland	IRL	English	Statistical data, information on activities by sector and mapping of policies linked to SDGs
18.	Italy	ITA	English, Italian	
19.	Kazakhstan	KAZ	Russian	Active Ageing Index for the Republic of Kazakhstan
20.	Latvia	LVA	English	Statistical data; employment policy measures implemented
21.	Lithuania	LTU	English	Statistical data
22.	Luxembourg	LUX	French	Statistical data
23.	Malta	MLT	English	National Strategic Policy for Active Ageing: 2021-2027; National minimum standards in care homes; EMPOWERING CHANGE: A National Strategy for Dementia in the Maltese Islands 2015-2023
24.	Monaco	MCO	French	
25.	Netherlands	NLD	English	Statistical data; list of stakeholders
26.	Norway	NOR	English	
27.	Poland	POL	English	Statistical data; "Social Policy for Elderly People 2030: Safety – Participation – Solidarity"; extract from "The situation of elderly people in Poland for the year 2020"
28.	Portugal	PRT	English	

Table 1
National reports considered in the Synthesis Report (continue)

	Country	Abbreviation	Language of report	Additional materials submitted
29.	Republic of Moldova	MDA	English	Statistical data
30.	Romania	ROU	English	
31.	Russian Federation	RUS	Russian	Statistical data; "Strategy of Actions for the Benefit of Senior Citizens up to 2025"
32.	Serbia	SRB	English	Research papers; list of interviewed institutions and organisations
33.	Slovakia	SVK	English	Statistical data; table on content overlaps between the goals of the National Plan of Action on Ageing I, MIPAA/RIS and the Lisbon Declaration; questionnaire for interviewed institutions and organisations
34.	Slovenia	SVN	English	
35.	Spain	ESP	English	
36.	Sweden	SWE	English	
37.	Switzerland	CHE	French	
38.	Tajikistan	TJK	Russian	
39.	Türkiye	TUR	English	
40.	United States of America	USA	English	

IV. Implementing MIPAA/RIS in the ECE region from 2017 to 2022

A. Main achievements and challenges with regard to RIS

ECE member States were requested to identify three to five major achievements since the last MIPAA/RIS review in 2017, and three to five important aspects to be improved in the future. An overview of these by the 10 commitments of MIPAA/RIS (table 2) is presented in table 3.

As in the previous review cycle of MIPAA/RIS (2012-2017), Commitment 7 received by far the largest attention by member States, indicating that improving the health and well-being of older people remained a priority concern and field of activity between 2017 and 2022 as well. Virtually all ECE member States identified Commitment 7 as a key are area for future action, despite progress in a significant number of countries.

Commitment 2 received considerable attention as well, demonstrating the increasing prominence of the full inclusion and participation of older persons on the policy agendas of member States. Commitment 4 on social protection was also an area of intensive policy action by member States, although its dominant position in terms of policy attention decreased somewhat compared to the previous review cycle, as countries accorded more significance to commitment 2.

Commitment 1 on mainstreaming ageing, commitment 5 on the employment of older persons, and commitment 6 on life-long learning were assigned a moderate level of priority by ECE member States. For commitments 1 and 5, the level of attention has been comparable to the previous review cycle (2012-2017), however, significantly more progress was reported on commitment 6 on life-long learning.

Very few of the countries participating in this review cycle reported commitments 3, 8, 9, and 10 among the top areas in which they had done important progress or saw most need for improvement, in line with the previous review.

Finally, it needs to be acknowledged that a considerable number of countries also identified ageism, violence and abuse against older persons as prominent issues needing increased policy action. This well demonstrates the broadening of the issues addressed in relation to ageing and older persons since the adoption of RIS in 2002, in which these issues were only addressed sparsely and indirectly.

Table 2
The 10 commitments of MIPAA/RIS

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

B. Progress made towards the goals of the Lisbon Declaration

1. Recognizing the potential of older persons (Lisbon Declaration Goal 1)

"Goal 1a: Empowering individuals to realize their potential for physical, mental and social well-being throughout their lives and to participate in and contribute to society according to their capacities, needs, and desires."

Mainstreaming ageing

ECE member States reported on the increased recognition of older persons as an important asset to societies, and many of them adopted policies and measures to mainstream ageing and older persons' issues, with the aim of further enhancing the realization of older persons' potential. A number of countries took steps to reflect ageing across different sectoral policies (AUT, BLR, CYP, ESP, IRL, KAZ, LTU, LVA, MDA, NOR, SRB, SVN) and at various levels of government (AUT, CAN, CZE, ESP, ITA, MDA), in particular at the local level. Moreover, ageing was mainstreamed as an important issue area in the national development strategies of ALB, BLR, ESP, KAZ, MDA, POL, TJK, TUR.

In the reporting period, several countries also developed or updated comprehensive strategies at the national level dedicated to ageing and older persons (e.g. BEL, CZE, FIN, IRL, LTU, NOR, POL, RUS, TUR). In some countries, these were specifically linked to the concept of active ageing (BLR, EST, KAZ, LVA, MLT, ROU, SVK, SVN), which was endorsed as an important concept by ECE member States in Vienna in 2012. In **Italy**, about half of the country's regions have a regional law on active ageing.

An important prerequisite for the effective mainstreaming of ageing into all policy areas at all levels is the existence of **coordination mechanisms** and stable institutional frameworks. Several ECE countries reported on having set up such mechanisms taking the form of councils and committees encompassing public sector entities at various levels, and in virtually all cases also civil society representatives, social partners and academia (e.g. ARM, BLR, ESP, EST, FIN, ITA, LTU, KAZ, MDA, MLT, NOR, POL, SVN). In the **Czech Republic,** a regional coordinator was established in each region with the aim of institutionally anchoring the policy of preparation for population ageing in regions. Interdisciplinary cooperation takes place on regional platforms, where information is exchanged between the national level and self-governments. In **Ireland**, an Age Friendly Alliance has been established in each local area, involving senior decision-makers from public, private and non-profit organisations, providing a local perspective on needs in a variety of areas.

Table 3
Major achievements and challenges as reported by countries in their national reports*

Countries	C1		C2		C3		C4		C5		C6		C7		C8		C9		C10	
Albania	X							X					X	X						
Armenia			X	X			X							X						
Austria			X	X			X		X		X	X	X	X			X			
Azerbaijan			X		X					X	X		X	X			X	X		
Belarus	X			X		X	X	X	X	X		X	X	X						
Belgium			X							X	X		X	X			X			
Bulgaria	X	X		X										X					X	
Canada	X		X			X	X	X	X		X		X	X	X					
Cyprus	X						X						X	X						
Czech Republic	X					X	X	X		X				X					X	
Denmark													X	X						
Estonia						X	X	X	X				X	X						
Finland	X	X			X	X				X			X	X						
France			X						X				X	X						
Germany				X			X				X	X	X	X			X			
Greece		X					X		X	X	X	X		X	X					
Ireland									X				X	X						
Italy	X	X											X	X		X				
Kazakhstan	X		X	X			X		X		X		X	X			X			
Latvia	X						X	X						X						
Lithuania			X	X			X	X	X	X	X		X	X				X		
Luxembourg		X	X	X			X						X	X						
Malta			X								X		X	X			X			
Monaco													X	X						
Netherlands		X	X	X			X		X				X	X						
Poland	X		X	X			X	X		X		X	X	X				X		
Portugal							X	X	X		X	X	X							
Republic of Moldova	X		X	X						X		X	X	X						
Romania				X			X	X		X			X	X						
Serbia	X		X	X					X				X	X	X		X	X		
Slovakia			X	X				X	X	X	X	X	X	X				X	X	X
Slovenia	X	X	X	X			X	X	X	X		X	X	X						
Spain			X	X		X	X		X		X		X	X	X					
Sweden			X	X			X						X	X	X					
Tajikistan			X					X		X	X			X						
Türkiye			X					X			X		X	X		X				
United States of America													X	X						
	13	**6**	**19**	**19**	**1**	**6**	**19**	**13**	**14**	**12**	**14**	**9**	**29**	**35**	**5**	**2**	**6**	**4**	**3**	**1**

* Information provided in this table is only based on the Executive Summary and Conclusion sections of submitted national reports. It serves as a snapshot of top achievements and challenges as reported by countries and it does not provide an overall picture of all the RIS commitment areas in which countries achieved progress or face challenges.

Regulatory impact assessment is another potentially very powerful tool to ensure that ageing and older persons' issues are reflected across all policies and laws. In Estonia, the Rules for Good Legislative Drafting and Technical Rules for Drafts of Legislative Acts set the obligation to assess the impact of changes in legislation or strategic planning on various areas of life. As part of the mandatory impact assessment on equality and non-discrimination, the impact of legislative changes on the rights, quality of life, opportunities to find work, and social inclusion of older persons are systematically assessed by means of a questionnaire.

In addition, some countries decided to appoint dedicated **ministers focusing on older persons' issues** to enhance policy coordination at the national level. In **Canada**, a Minister of Seniors was appointed in 2018, whose role is to ensure that federal programmes and services are developed to respond to Canada's ageing population and champion issues that affect them the most. In **Malta**, a Ministry for Senior Citizens and Active Ageing was created in 2020, renamed to Ministry for Active Ageing in 2022. The separation of the responsibility for older persons' issues from the Ministry for Health reflected a shift in mentality from focusing on older persons from a primarily medical point of view towards a heavier emphasis on active ageing, including through promoting opportunities for the lifelong learning, volunteering, and paid employment of older persons.

Loneliness and social isolation

Older people, particularly when they live alone and experience frailty and reduced mobility, are at increased risk of social isolation and feelings of loneliness. ECE countries have taken initiatives to combat isolation and loneliness, in particular as these became even more pronounced during COVID-19 related restrictions. Plans, programmes and projects targeting explicitly lonely and isolated older persons were reported by AUT, AZE, BEL, DEU, ESP, FRA, LTU, LUX, MLT, NLD, NOR, POL, PRT, SWE, TJK. Systems to detect and signal loneliness were developed, using local coalitions at the municipal level in the **Netherlands**, and community-based radars (volunteers, neighbours and local businesses) and patrolling in remote areas in **Portugal**. The project "Silver Line" was launched in **Lithuania**, aiming to combat loneliness and isolation by providing emotional, psychological and informative help to older persons by phone.

Social participation of older persons

Involving and engaging older people in diverse realms of societal life, reduces the risk of social isolation and loneliness, contributes to health and well-being and carries many benefits for the whole society. Initiatives to promote the social participation of older persons, including through lifelong learning, physical activity, volunteering, intergenerational activities, arts etc., were reported by many ECE countries, such as AUT, AZE, BEL, CZE, FIN, KAZ, LTU, MDA, MLT, POL, RUS. In **Austria**, the "Healthy and Active Ageing Dialogue" was launched to bring together stakeholders to implement good practice models for the participation of older persons. In **Malta**, an annual event is held to celebrate older persons who show exceptional contribution in the field of active ageing, with nominations open to the general public. In Azerbaijan, the "Building society for all ages: promoting wellbeing of the elderly persons in **Azerbaijan** through active ageing" programme promoted a positive image of ageing through the engagement of older persons in active and healthy activities such as intellectual competitions, sports, arts and crafts, education and training activities, audio books etc.

Some countries reported on initiatives to promote cultural participation in particular (BGR, BLR, CYP, LTU), including subsidizing cultural activities to make cultural participation more affordable to older people. A number of countries highlighted the active political and civic participation of older age groups, especially at the community level (BLR, KAZ).

Countries facilitate social participation for older people also through community centres and senior clubs. The increased formation of active longevity centres and groups in the reporting period was highlighted by ARM, KAZ, MDA, POL, RUS. Engaging older persons through celebrations linked to the International Day of Older Persons on 1 October was also stressed by a considerable number of ECE countries (AZE, BGR, BLR, CAN, EST, LUX, LVA, MDA, SRB, TUR).

Volunteering, as a means of social participation and contribution to society by older persons, has also been increasingly promoted in ECE member States (ALB, AUT, AZE, BLR, DEU, EST, KAZ, LTU, NOR, RUS, SVN, TJK, TUR, USA). Volunteering by older persons has taken many forms and involved both peer-to-peer support (such as hospital visits, neighbourly support, or teaching digital skills to other seniors, as in the "Digital Angel" project in **Germany**, or the "Older for Older" project in **Slovenia**) and intergenerational support (such as support for school meals, or mentoring to youth, as in the AmeriCorps Seniors Foster Grandparent Program in the **United States**).

Across the various initiatives to foster social participation among older persons, UNECE member States have acknowledged the crucial role of **civil society organizations** (ARM, AUT, CHE, DEU, IRL, ITA, LVA, POL, SRB, SVN). Moreover, a number of countries highlighted the significant increase in the number and importance of NGOs targeting older persons, in line with the growing awareness of the pertinence of population ageing (ALB, AZE, KAZ, MDA, TUR).

"Goal 1b: Developing and implementing socially responsible and future-oriented economic and financial strategies that encompass the needs, capacities and expectations of current and future generations, while valuing the potential of older persons, their life experience, their responsibility and support for all generations and for society."

Future-oriented economic and financial strategies

Against a backdrop of rapid demographic ageing, solidarity between current and future generations implies socially responsible, financially sound and sustainable economic and financial strategies that respond to the needs of and promote equal opportunities for people living today and in the future. Several ECE member States have taken steps in these directions, with some of them introducing more comprehensive and far-sighted approaches. For example, **Finland** is pursuing ecologically and socially sustainable economic growth, and to this end it has adopted measures supporting extended working lives and rationalising age-related expenditures (mainly pensions and health and social services) by means of transferring the responsibility for their organisation to larger "health and social service regions". **Spain** developed a national strategic development plan until 2050, with one of its key policy areas on preparing the welfare state for longer living. In **Italy**, regional development has been an important policy area, with measures targeting small municipalities and rural areas, often characterized by a greater ageing of the population, also as a result of migration to large cities.

Creating opportunities for the realization of the potential and utilisation of the life experience of older persons is an important feature of future-oriented strategies. A considerable number of ECE countries has taken measures to enable prolonged economic contribution by extending working lives (see goal 2a and 2e) or by promoting volunteering (see goal 1a and 1e). An interesting example of valuing the potential and experience of older persons is the Silver Economy Summit, hosted by the Government of Nova Scotia, **Canada**, every two years, which brings together people from the government, service providers, business community, civil society organizations, academics, and older adults to confer on the economic opportunities present in an ageing population. The Summit explores and celebrates the economic contribution of older adults to the economy as older workers, and entrepreneurs, as well as consumers of products and services.

"Goal 1c: Fostering effective consultations with, and involvement of, older persons and their representatives at the national, regional and local levels in designing policies, strategies and measures that directly or indirectly influence their lives, taking into account the diversity of older persons and their needs."

Participation of older persons in decision-making

There are different ways in which older people feed into policy design and decision-making in areas that affect them, either directly or via organizations that represent their interests. In many ECE countries, governments have set up advisory bodies on ageing and older persons' issues, through which older people, their representatives, as well as social partners and experts from related fields are given voice and a place at the table (AUT, AZE, CAN, CYP, ESP, EST, KAZ, LTU, LUX, MDA, MLT, NLD, NOR, SRB, SVK, SWE). In addition, several countries reported on the important role of older persons' organisations, veteran organisations or trade unions, and their active engagement in various advisory and decision-making bodies (e.g. BLR, DEU, LVA, SRB, SVN).

The creation of representative and advisory bodies at the **local level** has been particularly remarkable. The presence of some form of older persons' council or advisory committee on older persons' issues at the local level was reported by ARM, AUT, BEL, BLR, DNK, EST, FIN, FRA, LTU, LUX, MDA, NOR, POL, SVK, SVN, SWE, TUR. In some countries, similar structures have also been established at the regional level (AUT, BEL, ESP, FIN, ITA, NOR, SVK).

In several countries, legal frameworks and institutional mechanisms have been established obligating the regular and systematic consultation and involvement of older persons in decision-making affecting them (e.g. AUT, CYP, DNK, FIN, NOR, SWE). In Cyprus, the Elders' Parliament has been active since 1999, bringing together representatives of civil society to give voice to older persons and their issues and to facilitate the participation of older persons' representatives in the policy making process. It is made up of 56 «elderly MPs» who actively contribute to the policy-making process related to social welfare and to the health domain. The Elders' Parliament meets once a year at the House of Representatives in Cyprus, at the presence of the members of the House of Representatives and ministers, and is chaired by the President of the House of Representatives. Besides the yearly assemblies, the Elders' Parliament engages in a range of consultations with policy makers, advocacy and awareness raising. In **Denmark**, all municipalities are by law required to establish a Senior Citizens Council, elected by citizens above 60 years old in direct election. The Council gives older people formalized access to influence the concerned municipality's ageing policy.

Public consultation has been an additional form of engagement employed by CAN, FRA, NOR, SWE, aiming to obtain knowledge and consult older persons, their representatives and experts on issues related mainly to pensions and care. In British Columbia, **Canada**, a Patient Voices Network is in place, which is a community of patients, families and caregivers that work together

with health care partners to improve British Columbia's health care system. The network connects patient partners with health care partners who are seeking to engage the patient voice in their efforts to improve quality of care.

Capacity building and training are important tools to empower older persons and their representatives to influence and contribute to decision making on matters affecting them. Recognising this, **Estonia** has developed training programmes for elderly advocacy organisations to raise their competences in cooperation and networking, policy development, advocacy and media relations. In **Norway**, training is provided to members of municipal councils of older persons by the Center for Age-friendly Norway. In **Bulgaria**, training has been provided by the Bulgarian Red Cross to older persons and to authorities to facilitate older persons' engagement in policy making at the local level.

"Goal 1d: Promoting a positive image of older persons, acknowledging their contributions to society and strengthening multigenerational discourse and intergenerational learning by all stakeholders, cultivating a life-course perspective in education, the media and other areas to promote better understanding of individual and societal ageing and the opportunities it presents."

Positive image of older persons

Fostering a positive image of older persons and ageing is an important means of fighting ageism and stigma which may hinder older persons from realizing their full potential and contributing to society. Various initiatives were undertaken by ECE member States in this direction, including awareness raising campaigns, competitions, public dialogue, and cultural events (AUT, AZE, CAN, CHE, CZE, DEU, ESP, LTU, MDA, MLT, NLD, SRB, SVN, TUR, USA). Many of these received further impetus due to the narrowed and more negative image of old age as a consequence of the COVID-19 pandemic.

In **Germany**, the «New Images of Ageing» programme aims to create a positive and realistic image of older persons, demonstrating their diversity and sensitising social actors of the negative effects of specific ageing images. In the **United States**, the "Reframing Aging Initiative" follows a similar approach, aiming to improve the public's understanding of ageing and older persons' contribution to society. In **Canada**, strategic frameworks, action plans, and funding mechanism are in place to promote a positive image of older persons and to acknowledge their contribution. As part of its "A Quebec for All Ages 2018 to 2023 Action Plan", Quebec is developing an annual awareness strategy to promote the contribution of older persons among the Quebec population.

In **Serbia**, the most massive form of promotion of the positive image of older persons and of the concept of healthy ageing is the "Third Age Sports, Health and Culture Olympics" organised since 2008. It has seen considerable expansion in scope in recent years and in 2019, the representatives of Hungary, North Macedonia, Slovenia and the Republic of Serbia founded the European Third Age Movement to further develop this concept.

Media also play an essential role in forming the perception of ageing and older persons. Many countries have recognised this fact in their national reports and reported on awareness raising initiatives through various media on active and healthy ageing, the rights and dignity of older persons, or their contribution to society (AZE, BLR, LTU, LUX, TUR). In **Kazakhstan**, journalists were trained on the principles of active ageing, older people's rights, age-related stereotypes and the role of the media in overcoming ageism and creating a positive perception of older people. The **Austrian** Senior Citizens Council has been attracting public attention to these issues by conferring each year the "Senior Citizen Nettle" award to media that continue to present outdated attitudes to ageing in their choice of images and wording, and the "Senior Rose" award to media that seek to present the diverse realities of older persons in a realistic manner.

Multigenerational discourse and intergenerational learning

Intergenerational solidarity and relations have been highlighted as crucial for social cohesion and for wellbeing at all ages by many ECE countries. To foster this solidarity, countries across the ECE region have implemented a range of projects promoting and strengthening multigenerational dialogue and intergenerational learning (AZE, BEL, CZE, FRA, ITA, MCO, MLT, SVN, TUR). Initiatives had diverse focus areas, including knowledge and skills transfer in **Azerbaijan**, cultural transmission in the **Czech Republic**, inter-generational mentoring in **France**, or bringing together older persons and children/youth from disadvantaged backgrounds in AUT, BEL, TUR.

"Goal 1e: Fostering work and volunteering of younger and older persons in intergenerational settings to help them understand how important and rewarding communication, exchange of experiences, cooperation and intergenerational solidarity are in all areas of life, within and outside the family."

Work and volunteering in intergenerational settings

A number of countries reported on activities to facilitate intergeneration exchange and contact by means of joint work or volunteering. **Joint work between older workers and junior employees** was facilitated through a range of initiatives in AZE, CZE, FIN, ITA, SVK, RUS. Apart from focusing on knowledge and experience transfer, they also supported older employees to

better cope in their work, e.g. with regard to the use of new technologies. In Italy, the Generational Pact in Agriculture for the 2018-2020 period was piloted, presenting the possibility for people aged 18-40, who had a business idea but were not landowners, to enter into a contract with a farmer over 65 (retired or not) for a maximum duration of 3 years, to benefit from a period of shadowing aimed at the transfer of skills.

Volunteering in intergenerational settings has become more widespread in recent years. Initiatives range across education, caregiving, assistance and arts, and were reported by several ECE countries, including AUT, BLR, CAN, CZE, DEU, FRA, ITA, SRB. Multi-generations homes (GER) and cohabitation projects targeting older persons and students (CZE) have also contributed to tightening intergeneration ties and exchange. In Tyrol, Austria, intergenerational activities were taking place in so-called computerias, a blend of cafeteria setting and interactive computer skills training.

"Goal 1f: Encouraging businesses, non-profit organizations and public enterprises to involve older persons as consumers in the planning and design of goods and services to match their needs and preferences, and to engage them in monitoring the quality of such goods and services."

Engagement of older persons as consumers

Another way of engaging older people and assuring that their needs and perspectives are taken into account is by **involving older persons in the design and improvement of goods** and services, and by collecting their feedback as consumers. Countries reported on design guidelines to meet older persons' needs and awareness raising initiatives, including awards (CAN, DEU, FRA, USA). In **France**, the «Tested and approved by seniors» label has been created, indicating to consumers that the product is ergonomic and adapted to the abilities of the greatest number of people, in particular older persons. The label is issued following a series of tests taking into account various criteria (unpacking of the product, ease of installation and use, intuitiveness of handling), carried out by people aged over 60, ergonomists and occupational therapists.

Apart from products and technologies, the **age-friendly design of services** is equally important. A number of countries reported examples of involving older persons in the design of social services and age-friendly environments (AUT, MLT, NOR, POL). In **Malta**, Active Ageing and Community Care actively involves older persons in developing its services, including through dedicated surveys. An example is the telecare on the move service designed to ensure the safety and wellbeing of persons with dementia with the least possible restrictions. It enables two-way communication with relatives or a 24-hour call centre, and includes Geo-fencing, fall-detection, and GPS detection in case of emergencies.

"Goal 1g: Ensuring that older persons can attain and maintain their highest possible level of health and functional capacity by supporting the development of age-friendly environments and housing, and adapting health and social care systems to provide integrated, prevention- and person-oriented services, including in deprived urban, rural and remote areas."

Age-friendly environments and accessibility

The recognition that enabling environments are key for realising the potential of increased longevity has been on the rise in the region. Efforts to enhance the accessibility of physical (AUT, AZE, BGR, BLR, CHE, DEU, EST, POL, NOR, ROU, SVK, SWE, TUR) and digital environments (EST, NOR, SWE) were reported by a significant number of ECE member States. Moreover, some countries adopted comprehensive frameworks to ensure that accessibility is systematically taken into consideration in the design, procurement and realisation of products and services.

The creation of an age-friendly society, including increased accessibility, has been the cornerstone of **Norway's** ageing strategy. To follow up on the cross-sectorial strategy "More Years – More Opportunities", a dedicated programme, a council and a centre for an age-friendly Norway has been set up. The programme includes a range of actions, such as a campaign to plan ahead for older age, promotion of work and volunteering of older persons, and a broad national network of age-friendly communities, supported by the Centre for an Age-friendly Norway, which provides them with training and guidelines on participation in local planning and decision-making. Tested solutions in the various areas of services for older persons, such as participation, healthcare, nutrition, or services, have become integral parts of the Live Your Whole Life 2019-2023 reform, aiming to guide municipalities with planning, design and implementation of age-friendly measures in the local community and in municipal care services.

Related to these efforts, Norway has also drawn up action plans on universal accessibility to implement universal design in transport, built environment and in the ICT-sector. In particular, promoting universal design in the digital area has been a priority, along with providing digital training and assistance to older persons but also maintaining non-digital services.

Estonia pledged to ensure full physical and digital accessibility for all by 2035. As a part of this endeavour, it established a high-level Accessibility Task Force, which mapped shortcomings and developed proposals for the public and private sectors on ensuring the accessibility of new environments to be created and on improving the accessibility of existing environments in the fields of housing, public buildings, road infrastructure, public transportation, audio-visual media, tourism, education,

culture, sports, emergencies and e-services. An advisory service for the adaptation of living environment has been launched as well, and financial support for home adaptations has been provided.

The „Accessibility Plus" 2018-2025 government programme was adopted in **Poland**, the first government document with a comprehensive approach to the subject of accessibility in the country, including for older people. The programme focuses on adapting public spaces, architecture, transport and products to the requirements of all citizens. As a part of the programme, the Act on providing accessibility to people with special needs was adopted in 2019, defining the obligations of public entities in terms of architectural, information and communication and digital accessibility. The Act specifies that accessibility should be included in each public policy and should be ensured by way of universal design and rational improvements.

The Public Procurement Act of **Sweden** was amended proclaiming that in the case of acquisitions intended for use by natural persons, the needs of all users, including accessibility needs, have to be taken into account. A national procurement strategy was adopted as well, stressing the importance of the principle of universal design at an early stage of the purchasing process, and providing support and guidance about how social considerations can be taken into account in all parts of the procurement process.

The role of awareness and training for managers and technical staff (TUR) as well as for older persons (AUT) was highlighted too. The project of "mobility scouts" was launched in **Austria**, providing older persons wishing to volunteer as mobility scouts with training on topics such as accessibility and age-friendly design, thus equipping them with necessary knowledge to contribute to shaping their environments and participate in discussions and planning.

Housing

Age-appropriate, barrier-free housing is particularly important for enabling people to stay in their homes as long as possible. A number of countries reported on providing financial support for home adaptations and/or for the construction of new housing units adapted to the needs of older persons (CAN, CZE, DEU, DNK, FIN, FRA, ITA, MLT, NLD, NOR, SWE, USA). Increased emphasis on the provision of social housing for older persons was reported by ALB, CZE. In **Germany**, as part of the «age-appropriate conversion» programme, funds have been allocated not only to eliminate barriers in residential buildings, but also to create community spaces and make structural anti-burglary alterations.

Transportation

Having access to adapted means of transportation that allow mobility when one´s functional capacities decline is key to continued social participation, and wellbeing, in older age. It is also essential to enable people to independently access needed goods and services. Countries in the ECE region have reported progress towards barrier-free and accessible public transportation options (AUT, AZE, BLR, CYP, IRL, KAZ, NOR, POL, ROU, SVK, TUR). A number of countries also reported on subsidising public transport for older persons (ALB, CYP, IRL, LTU, LUX, MLT, NOR, SVK, SVN, TUR). In **Malta**, for instance, the Silver T service is in operation, a free transport service for older adults to enable them to run errands within the community they live in.

Age-friendly cities and communities

At local level, a number of countries promote the development of enabling environments through age-friendly community initiatives, following the age-friendly city concept developed by the World Health Organization or having developed independent approaches (ALB, AUT, CAN, ESP, IRL, KAZ, LUX, NOR, PRT, SRB, SVN, USA). **Ireland's** Age Friendly Cities and Counties Programme is in operation across all local authorities in the country, aiming to practically prepare communities for the rapid ageing of our population, including housing and transportation options, access to services, and participation. In 2018, Age Friendly Ireland was established to provide technical guidance and support to local authorities. In addition, in each local authority area, an Age Friendly Alliance is established, involving representatives of the public, private and non-profit sector. A similar structure is in place in **Slovenia**, where the Network of Age-friendly Cities and Communities provides support to municipalities, including on implementing targeted age-friendly local development strategies. Local Honorary Committees are appointed to support the implementation of the strategies, representing various generations. In **Luxembourg**, a «Senior Friendly Communities» guide has been developed, aiming to guide municipalities in the elaboration of action plans targeting older persons. A competition of «senior-friendly municipalities» is organised as well. In **Canada** funding programmes to support local, regional and provincial initiatives aimed at adapting living environments to the realities of older persons and at creating age-friendly and inclusive communities have been reported in Quebec, Yukon and Nova Scotia.

Health and social care systems promoting healthy ageing

Apart from enabling environments, health and social care systems that are integrated, person-centred and that place a strong emphasis on prevention are also crucial for attaining and maintaining as long as possible the highest possible level of health and functional capacity of individuals. Among many other examples, **Albania** has recently adopted a Strategy

for the development of primary health care services in Albania 2020-2025, which for the first time provides for the integration of social and health service in primary health care centres. It also newly introduces home health assistance for diseases treatable without hospitalisation. In **Canada**, several integrated care strategies, processes and models of integrated social and health services have emerged in the past two decades. Recent developments have taken place in Ontario, where Ontario Health Teams made up of hospitals, doctors and home care providers have been introduced to provide integrated and patient-centred home and community care services through an innovative service delivery model. In **Austria**, in recent years, it was recognised that in order to achieve a society for all ages, social and health matters cannot be addressed separately, but only as interacting and complementary fields. An initiative referred to as "Healthy and Active Ageing Dialogue" (Dialog Gesundes Aktives Altern) was launched, bringing together stakeholders to take action in several areas of the health and social care system.

Prevention

Health is key to being able to seize the opportunities that longevity offers. Investing in the promotion and protection of health throughout the life course to prevent illness and functional decline, rather than dealing with these only as and when they occur, is an investment with benefits throughout life, and especially in later years. Health promotion and prevention efforts across the life course received prominent attention in the health strategies of a number of countries (e.g. CHE, ITA, NOR). Older persons received specific focus in national health promotion programmes in GRC, POL, USA; and awareness raising and training was conducted on detecting age-related non-communicable diseases in AZE, POL. In Monaco, the **Monaco** Prevention Motivation Project has supported retiring older persons to help them adapt to changes associated with retirement, to delay dependency as much as possible and to support ageing in place. In **Greece**, the National Pilot Programme for the Prevention and Promotion of Health of Older Persons has focused on sensitizing older persons and middle-aged people, in order to promote early detection and diagnosis of diseases, and the formation of healthy attitudes, habits and behaviours.

A couple of countries reported on measures to ensure the safety of older persons in their home environments and in transport. The housing and living conditions of older persons were preventively inspected to ensure their safety in BLR, DNK, NOR; and specific measures and trainings to prevent seniors from suffering injuries from falls and traffic-related accidents were reported by FIN, LTU, NLD, USA. **Finland** adopted in 2020 the "Safely at All Ages - Programme for the Prevention of Home and Leisure Accidents 2021-2030," comprising measures on preventing falls, poisoning, road traffic accidents, burns and drownings occurring at home and within care service centres. In the **Netherlands**, a programme for safe cycling in older age was introduced, featuring adaptations to improve safety of bicycle lanes and bicycle parking. Ensuring the safety of older persons is also the ambition of a proximity patrolling initiative in Portugal called Support 65 Programme (Elderly in Security), supporting older persons living in remote areas and signalling isolated older persons.

Most frequently, health promotion in the region has focused on healthy behaviours, primarily physical exercise and a healthy diet. The benefits of **physical exercise** are widely known. It maintains functional capacity and plays an important role in promoting health and well-being, as well as in maintaining social relations. Several countries developed guidelines and launched initiatives and campaigns to promote sports and physical activity among older persons (AUT, AZE, BEL, BGR, CYP, ITA, LTU, MLT, NOR). **Belarus** and the **Russian Federation** in particular reported on continued pronounced support to sports and healthy lifestyles as a means of active longevity and geriatric disease prevention. In the Flemish region, **Belgium**, and in Austria, the creation and dissemination of special sports offers tailored to older persons has been facilitated.

In order to promote **healthy nutrition** across the life course, including in older age, the Dietary Guidelines for Americans 2020-2025, adopted in 2020, included nutrition guidance by life stage for the first time since these guidelines have been published in the **United States**. In **Greece**, the National Nutrition Guide for People 65 and older was developed, and posters and leaflets were distributed in health centres and other relevant institutions. In **Luxembourg**, the brochure «Eating healthy and moving more», targeting older persons, was published as part of the National Healthy Eating and Physical Activity Programme. Moreover, as part of the country's heat wave plan, people aged 75 and over have the possibility of registering with the relevant organisations to benefit from monitoring visits and help with hydration in the event of high temperatures.

Early diagnostic as an important measure to prevent non-communicable diseases was highlighted by KAZ, POL. **Kazakhstan** introduced a strong prevention and early diagnostic focus in its State Programme of Health Development for 2020-2025 and increased the coverage and frequency of preventive health check-ups for older persons for early detection of age-related diseases.

Provision of services in deprived areas

The provision of adequate health and social care services is particularly important in deprived urban, rural and remote areas. In **Belarus**, mobile medical diagnostic complexes have been in use to ensure better diagnostic coverage in sparsely populated areas with a high

proportion of older patients. In the **Czech Republic**, a network of homes for peaceful and active ageing in the countryside (so-called KLAS homes) is being developed, aiming to enable older persons in the countryside to age with dignity and quality in a familiar and close rural environment and ensure the appropriate quality and availability of health and social services.

2. Encouraging longer working life and ability to work (Lisbon Declaration Goal 2)

"Goal 2a: Recognizing the potential embedded in the employment of older workers and developing labour market strategies to promote maximum participation opportunities for workers of all ages."

Labour market strategies promoting the participation of older workers

In the reporting period covered by this Synthesis Report, ECE member States adopted a range of measures and initiatives to promote increased labour market participation in all age groups, with several focusing on older persons as a target group of particular importance. Interventions range across various areas of employment policy, such as combatting unemployment, developing skills or promoting age management and age-friendly working conditions. These will be addressed in detail under goal 2b to 2d.

A number of countries reported on comprehensive labour market strategies ranging across various fields of policy interventions that specifically target older persons. Maintaining and supporting work ability at all ages is a key element of **Finland's** labour strategy. Its main elements are ensuring competence, mainly through lifelong learning, and maintaining functional capacity through health promotion and decent working conditions. Another important feature is the development of a multi-sector service system, which responds to individuals' work ability and functional capacity needs in a timely and individualised manner. In the **Netherlands**, a comprehensive action plan was implemented to support the labour market participation of older persons above 50 through dedicated education programmes and support for long-term unemployed persons in this age group, among others. In **Lithuania**, the Action Plan of Motivation of Older People and Promotion of Voluntary Activities for 2016-2020 provided a frame to promote older persons' labour market participation and the recognition of the potential of older workers by employers.

Kazakhstan reported on the growing recognition of the development potential associated with the employment of older workers in recent years, demonstrated by the adoption of strategic documents and projects promoting their longer working life. The Action Plan to Improve the Situation of Senior Citizens «Active Longevity» until 2025 includes measures to maximize the labour force participation of older people through monitoring available jobs for older persons, informing them about the situation on the labour market and about employment opportunities, and holding specialized job fairs for older persons. In **Malta**, the Jobsplus framework is aiming to make better use of the potential, experience and skills of older workers, providing them opportunities to re-join the workforce through the Mature Workers Scheme, among others. The scheme features individualised employment advisory and various training opportunities.

Ireland singled out the needs of older workers who develop a disability in later life (either through work or non-work factors) in its Comprehensive Employment Strategy for People with Disabilities (2015 – 2024). The strategy seeks to ensure that people with disabilities who are able and willing to work, are supported and enabled to do so. The onset of disability is often a trigger to leave work and the prospect of a return to work diminishes sharply the longer the individual is absent. Early interventions are therefore highlighted as a key support to return and reintegrate into work life. Stemming from the strategy many pilot approaches have been developed which focus on a recovery model of mental health integration, including job coaches in mental health teams and 'disability champions' to support colleagues returning to work following onset of disability.

"Goal 2b: Fostering access to and promoting lifelong learning opportunities and development of skills as a prerequisite of an active and fulfilling life at all ages."

Lifelong learning and skills development

The promotion of lifelong learning was highlighted in many national reports. Following years of gradual increase in the participation of older persons in education and training, participation rates fell between 2019 and 2020 in all ECE countries for which data are available, as a direct consequence of COVID-19 related restrictions. While countries tried to adapt to this new reality by mobbing part of the lifelong learning into online space, the long-term effects of the pandemic on the participation rates of older persons in education and training are yet to be seen.

Digital literacy and skills

Literacy, and increasingly digital literacy, are important facilitators of social participation. In times where digital relations with administrations and services are on the rise (e-government, tele-medicine), people's digital literacy and connection are important factors of inclusion and quality of life. There has been impressive growth in Internet use by older persons in the age range 55 to 74 over the past decade. If in 2010, 38.4 per cent

of men and 27.1 per cent of women in the ECE region were using the Internet at least once a week, in 2020, these proportions had increased to 72 per cent of men and 67.6 per cent of women in this age group. These figures are also evidence of the narrowing gender gap in ICT use (see Table 9c in the Annex). Efforts to further enhance digital literacy skills were explicitly mentioned in more than half of the national reports (AUT, AZE, BEL, BGR, CYP, DEU, DNK, EST, GRC, IRL, ITA, KAZ, LTU, LUX, LVA, MDA, MLT, NLD, NOR, POL, RUS, SVK, SVN, SRB, TUR, USA). Some of the notable initiatives in the reporting period include the "Digital Angel" project in **Germany**, aiming to empower older persons to confidently use technologies with a team of experts touring the country and providing training as well as technical support. In **Austria**, quality criteria were developed for teaching how to use digital media, tailored to the needs of older persons. Brochures on current digital issues and a comprehensive set of working materials was elaborated that can be used both for self-study and for the purposes of webinars and workshops. To increase the quality of IT training programmes offered, the professionalisation of trainers working in adult education was promoted through the "Digital fitness" programme, focusing on the areas of digital literacy and education at an advanced age. Older persons are also one of the main targets of the «fit4internet» scheme, aiming to give everyone an opportunity to expand their digital skills and benefit from digitalisation. In **Türkiye**, within the framework of the Digital Spring Project, technology rooms have been established in nursing homes, where older persons can use and experience technology. In **Lithuania**, intergenerational digital literacy projects were supported, whereby older persons could acquire basic digital skills, including the use of e-health and e-government, and young persons were trained how to transmit skills and competences to older persons in the field of information technologies. A Network for digital inclusion was established in **Denmark**, made up of citizen organizations, relevant private organizations and local and central authorities. Organisations provide authorities with knowledge of the challenges older citizens experience in a digital environment, and support the development and implementation of initiatives. In the **Netherlands**, public authorities partnered with libraries to open digital information points. A platform was created to improve the digital skills of health care providers and citizens in response to the uptake of e-health solutions, such as telemonitoring. A public-private alliance was established to make digital equipment better accessible to citizens. The alliance collects used computers and allocates refurbished computers to those in need of digital equipment. In addition, the alliance provides digital support where needed. One of the main target groups for this initiative are older persons. In **Luxembourg**, the «Silver Surfer» website offers information and advice for seniors on the safe use of the internet. In **Ireland**, a new economic pathway called Future Jobs Ireland was launched in 2019, based on embracing innovation and technological change, transitioning to a low carbon economy, improving productivity, increasing labour force participation, and enhancing skills and developing talent. As a part of this framework, a number of initiatives have been put in place to address deficiencies in digital skills, particularly among the older workforces. In **Slovenia**, the Act on Promoting Digital Inclusion was adopted in 2022, prioritizing basic digital skills training for older persons, as well as pupils and students. The Act also introduces digital vouchers for the purchase of computer equipment.

Employment-related training

The inclusion of older persons in employment and vocational training initiatives received significant attention as well (AUT, AZE, BGR, BLR, CAN, DEU, ESP, EST, ITA, KAZ, LTU, LUX, POL, RUS, SRB, SVK). In British Columbia, **Canada**, for example, the Skills Training for Employment program for Older Workers 55+ seeks to help individuals over 55 years overcome barriers and achieve sustainable employment through skills training and employment supports. Programmes specifically designed for older workers include: From Retired to Rehired – Putting Your Experience to Work, Vintage Advantage, AMPED (Assisting Mature Persons in Employment Development), Experience Matters!, Experience Works, Encore – The 55+ Advantage, and Encore Careers. To support job transitions at any age, **Sweden** raised the upper age limit for the right to student aid and education entry grant from 56 to 60 years of age.

A number of countries reported on specific trainings offered to develop the entrepreneurial skills of older persons (BGR, BLR, KAZ, LTU, MDA). In **Kazakhstan**, short-term training programmes on in-demand professions and the basics of entrepreneurship are offered to persons of preretirement age under the State Programme for the Development of Productive Employment and Mass Entrepreneurship 2017-2021.

A system of lifelong learning credits has been in place in FRA, NLD. In **France**, each working person has an access to a professional training account, allowing them to accumulate training rights from the time they start working until retirement, and facilitating the increase of qualifications or job transitions. The account remains active after retirement. In the **Netherlands**, several types of subsidy schemes are available to working age persons for lifelong learning, including training credits. Small- and medium-sized enterprises are also targeted by some of the schemes.

Other developments related to lifelong learning

Boosting employment prospects has not been the sole objective of lifelong learning opportunities offered to older persons in ECE member States. Promoting **healthy**

ageing (AUT, ITA, MDA, MLT), improving **financial literacy** (AZE, ITA, MLT, RUS, SVK, TUR, USA), or facilitating the **transition to retirement** (AUT, ITA, LUX, RUS) were among the key topics of training courses targeting older persons. A range of initiatives was reported by countries, including, for example, the implementation of the Decade of Literacy and Basic Education 2016–2026 in **Germany**, aiming to strengthen adult literacy and promote lifelong social participation. **Slovakia** launched a new national television channel ("Trojka") in 2019 targeting older persons, with awareness raising and education features. In **Türkiye**, a lifelong learning portal was launched in 2018, allowing citizens of all ages to access lifelong learning activities from a single point. **Bulgaria** reported on strengthening the role and funding of community centres, museums and libraries as lifelong learning centres. **Luxembourg** offers a «Retirement Coach» training course, targeting volunteers of retirement age, who acquire coaching and presentation skills to be able to offer preparation to future retirees or to support retirees in adapting to their new life situation.

Some countries also reported on developing their **strategic framework** on lifelong learning. In **Bulgaria**, the National Strategy for Lifelong Learning for the period 2014- 2020 was followed up by the comprehensive Strategic Framework for the Development of Education, Training and Learning in the Republic of Bulgaria (2021 - 2030), which has Lifelong Learning as one of its priority areas. National qualification frameworks for lifelong learning were adopted in AZE, ITA, PRT.

Finally, national reports demonstrated the continued popularity and broadening of networks of so-call **third age universities** in ECE countries (BEL, BLR, CZE, ESP, EST, ITA, KAZ, LTU, MLT, PRT, RUS, SVK, TJK, TUR, USA). This framework has been further extended in Malta through the establishment of the University of the Fourth Age, which provides learning programmes to older adults in residential homes.

"Goal 2c: Developing strategies to fight unemployment at all ages, reducing financial inequalities and poverty, taking up measures to reduce the gender pay gap as well as other gender inequalities, and preventing age-related discrimination in employment."

Fighting unemployment at all ages

Fighting unemployment at all ages, including among older persons, has received significant policy attention in ECE countries. Unemployed older persons were mentioned as an important target group for employment support schemes by an impressive number of countries (ALB, AUT, AZE, BEL, BGR, CYP, CZE, DEU, ESP, EST, FRA, KAZ, LTU, LUX, LVA, MDA, MLT, POL, PRT, ROU, SRB, SVK, SVN) with interventions ranging across a variety of mechanism, including in most cases, wage and/or tax subsidises to employers, reduced social insurance contributions, integration allowances, training allowances, counselling, retraining, and employment intermediation. In the **Czech Republic**, employment support schemes take the form of regional individual projects, which emphasise the challenges of particular regions and various target groups, enabling the selection of a suitable mix of tools and measures of active employment policy for different geographic locations and population groups.

In addition to the above-mentioned employment services, **Estonia** supports the adjustment of workspaces and working equipment, as well as the lending (free of charge) of assistive equipment needed to carry out work to older jobseekers. In the **Canadian** province of Manitoba, the Age is an Asset programme complements assistance and training for older jobseekers with a 2-week work experience opportunity. Finally, in **Austria**, special counselling and support facilities have been developed to supplementing traditional employment services and to better support the reintegration of unemployed older persons into the labour market. Age counsellors provide information to older jobseekers and set up contacts between them and businesses interested in hiring workers aged 50 or over. Workshops are also offered, addressing topics such as healthy ageing, advantages and barriers for older persons on the labour market, or the use of new media.

Other measures aiming to support older jobseekers in ECE countries include priority access to social employment (FRA, KAZ, SVK, USA), entrepreneurship support (EST, KAZ, LTU), reserved jobs in the public sector in Belarus, or a special subsidy programme to create new employment for highly disadvantaged unemployed older persons in **Greece**. In addition, unemployment benefits can be combined with work income in case of older persons who meet specific criteria in ESP, PRT.

Finally, a number of countries have special rules in place regulating or restricting the possibility of dismissal of older workers of pre-retirement age (BLR, ESP, FIN, KAZ, LTU, RUS). In **Finland**, a new change security package was outlined in 2020 for all those made redundant when over the age of 55. The package includes a dismissal allowance and change security training. In **Spain**, in case of a collective layoff, special provisions apply to older workers in terms of compensation or prioritisation for permanence in posts. In **Lithuania**, longer notice periods are applicable in case of the termination of the contract of a person close to retirement age, and the continued employment of older persons is prioritised in case of collective layoffs.

Reducing old-age poverty

Poverty puts older people at risk of social exclusion and negatively impacts their ability to meet their basic needs and participate in social life. Member States

have reported on several approaches to support older persons with the lowest incomes. Additional allowances for older persons with low pensions were introduced or expanded in ARM, AUT, BGR, BLR, CAN, CYP, DEU, LTU, LVA, PRT, SRB, SVN, SWE. In **Portugal**, this supplement has also been linked to other benefits including subsidies for health care, energy, and public transport. So-called 13th pensions were introduced in POL, SVK. In addition, **Poland** also offers 14th pensions targeting older people with the lowest incomes, and pension increases through indexation are proportionally higher for persons receiving lower pensions. Special allowances for single pensioners and surviving spouses were in place in LTU, LVA. **Italy** introduced a universal basic pension for the first time in 2019.

Reducing the gender pay gap

Old-age poverty affects women disproportionately. One of the reasons is lower income in older age due to persistent gender pension gaps in many ECE countries. Member States have taken different approaches to tackle this problem, with some promoting actions that prevent the gender pension gap in the future by attempting to equalise pay levels in the present. The equal wages for equal work principle has been promoted strongly in recent years in CYP, DEU, ESP, FRA. Obligatory reporting mechanisms for the private sector concerning gender equality and pay levels, which also need to be accessible to employees, have been created in DEU, ESP. In **Germany**, the application of these mechanisms has been supported, among others, through the German Equal Pay Award. Germany also adopted its first inter-ministry equality strategy in 2020 with specific measures including the promotion of more women in management positions. In **France**, since 2019, companies have been required to calculate and publish an annual gender equality index on their website, measuring the equality of wage levels, equal access to promotions and pay raises, and the proportion of women in the highest salaries. If the score is below 75 points out of 100, the company has three years to implement a corrective plan. If the score is still lower after this period, a fine is imposed. In **Cyprus**, the National Certification Body has been responsible for granting certifications to enterprises and organizations that apply policies and practices promoting gender equality in the workplace, and awareness raising and media campaigns have been conducted. In **Austria**, the gender pay gap has been addressed by a number of interventions, ranging from dedicated labour market programmes to expanding childcare facilities, and organising information campaigns to raise awareness of the detrimental consequences of part-time work and gaps in social security contribution payments.

Preventing age-related discrimination in employment

A number of ECE countries reported on existing legal provisions prohibiting discrimination in employment on the basis of age (AUT, AZE, BLR, CYP, DNK, ESP, EST, FIN, LTU, LUX, NLD, NOR, RUS, SVN, TUR, USA). In **Denmark**, this takes the form of a ban on inquiries about age in the job application process, aiming to prevent employers from screening applicants by age. Countries also specified that dissimilar treatment is not considered as discrimination if it has a reasonable objective, for example older applicants are entitled to special treatment under some employment schemes, while in other cases there may be an objective need to work on the position for a certain period before retirement.

"Goal 2d: Encouraging employers to value the experience of, and to retain and hire, older workers, promoting age management in both the public and private sectors, and supporting age-adapted, safe, health-promoting, and flexible working conditions throughout the entire working life."

Age management in the workplace

Apart from state interventions, employers are key to enabling the shift to longer working lives by adopting more positive attitudes towards hiring and retaining older workers, and through utilising age management practices. Countries have taken a variety of steps to encourage employers to embrace this shift, ranging from awareness raising and training (CAN, CYP, EST, LTU, NOR, USA) to financial incentives reducing the cost of work of older persons (BEL, NLD, SWE). In **Slovenia**, the "ASI project – Companies' comprehensive support for the active ageing of the workforce" aims to increase employers' competencies in the management of older workforces and to improve older people's position in the labour market. In Nova Scotia, **Canada**, employer engagement specialists have worked directly with employers on recruitment and retention issues, including the benefits of hiring and keeping older workers in the workforce. In **Estonia**, the «Age is a Value» campaign promoted the value older workers among both employers and older persons themselves through broadcasts in various media and through issuing recommendations for both employees and employers. In the United States, the National Employ Older Workers Week takes place annually, seeking to help tapping more into this workforce. The Employer Pledge Program is operational in the **United States** as well, educating employers on the value of older workers and a multigenerational workforce and featuring a Job Board where job opportunities offered by employers taking part in the programme can be filtered.

Initiatives related to age management and multigenerational work environments were undertaken in several ECE countries (AUT, CZE, FIN, ITA, SVK, SVN, USA), including, among others, trainings, guidelines and campaigns promoting better knowledge management by employers and more effective transfer of skills between senior and junior workers.

Age-friendly working conditions

ECE countries have placed a strong emphasis on improving work environments in recent years and thus contribute to prolonged working lives. Assessments were undertaken and national frameworks or guiding tools developed in FRA, MDA, SWE. The **Republic of Moldova** developed the Concept of Older people Friendly Jobs, providing for a new approach to working conditions, productivity and work organization, stimulating the motivation for employment among older people, and presenting measures to prevent age-based discrimination. As a part of this framework, capacity building is offered to companies on creating older people-friendly jobs, and inspections of older people-friendly work practices are conducted. As an additional example of age-adapted working conditions, in **Norway**, workers aged 60 years and over are accorded an extra week of leave (senior days).

Safety (ESP) and health (AUT, ITA, MCO, POL) at the workplace have also been recognised as key determinants for enabling a longer working life. Countries reported on counselling and training activities on health management at work, with a focus on ageing workforces. In addition, **Monaco** adopted a reform of occupational medicine in 2017, allowing for personalised «health-work» monitoring for each employee, directly benefiting senior employees.

To promote flexible employment conditions throughout the entire working life, **Italy** launched an experimental scheme providing relief from social security contributions to companies with initiatives aiming at improving work-life balance. Funding was also made available through calls for proposals.

"Goal 2e: Providing incentives for longer working life opportunities and more flexible retirement choices and fostering alternatives to early retirement including, but not limited to, rehabilitation, reintegration into work and flexible employment options to retain older workers."

Incentives for longer working life

In most ECE member States, pension law allows for the beginning of retirement to be postponed beyond the normal retirement age. In several countries, postponement of retirement is financially rewarded through increased future pensions (ALB, BGR, BLR, CYP, DEU, DNK, EST, FIN, FRA, LTU, SVN), reduced pension insurance contributions post retirement age (AUT, GRC), or the possibility to cumulate wages from employment with pension or similar benefits (AZE, BEL, CAN, DNK, EST, FRA, GRC, LUX, MCO, SVN).

Flexible retirement choices

A number of ECE countries reported on adopting new measures in recent years to enhance the flexibility and gradualness of transition from employment to retirement (DEU, ESP, EST, FRA, LUX, NOR). Partial retirement enabling persons of pre-retirement age to continue working part-time and receive part of their pension has been possible in AUT, BEL, ESP, FIN, FRA, MCO, SVN, NOR. In addition, countries highlighted early retirement options without penalty for employees who started working at a very young age or who faced hardship work conditions (AZE, DNK, EST, FIN, FRA, ITA, NLD, PRT).

Alternatives to early retirement

While early retirement remains an option for certain categories of workers (especially employees who started working at a very young age or who faced hardship work conditions), ECE countries have taken steps to discourage early withdrawal from the labour force and instead promote alternatives to early retirement, including rehabilitation and reintegration (AUT, FIN, IRL, USA), shared employment (CZE, LTU, SVK) and part-time employment schemes specifically targeting older persons (ITA, LUX). In **Italy**, the facilitated part-time employment scheme has provided for a gradual exit for workers close to retirement age, matched by the entry of younger workers. In **Luxembourg**, the provision of flexible part-time employment options for older persons has been encouraged by a mechanism, through which the state covers the employer's share of social security contributions if an unemployed jobseeker is hired to occupy the job partially vacated by the employee who had switched to part-time work.

"Goal 2f: Planning and implementing pension reforms, as far as not yet done, that take into account the increasing longevity and the extension of working lives, to ensure intergenerational fairness as well as the sustainability and adequacy of pension systems."

Adequacy of pensions

Countries across the ECE region have taken steps to reform or update their pension systems to ensure the adequacy as well as the long-term sustainability of pensions. Measures taken to enhance the adequacy of pensions included the regular increase of pensions based on respective indexation rules (AUT, AZE, EST, KAZ, LTU, LVA, MLT, NOR, POL, PRT, SRB, SVK), efforts to increase the replacement rate of contributory pension plans (ALB, CAN), or the greater recognition of having raised children in some pension systems (CZE, SVK). For instance, in **Slovakia**, legislative process is ongoing to accord workers the right to earmark part of their pension insurance contribution to the pension of the person who raised them. Participation in voluntary supplementary pension insurance schemes has been promoted as well, for example through state co-financing and awareness raising in Belarus, or through tax credits in the case of Malta. Awareness raising campaigns on

securing adequate pension have been highlighted by BLR, USA. The **United States** also reported on making available pooled employer retirement plans targeting smaller employers, offering them a workplace retirement savings option with reduced burdens and costs compared to sponsoring their separate retirement plan. Finally, mechanisms for the periodic review of the adequacy as well as long-term sustainability of pension systems has been in place in AUT, EST.

Sustainability of pension systems

A significant number of ECE member States have recognised the long-term sustainability of pension systems as a continuing challenge and took varies steps to address it. A gradual increase of the retirement age according to prescribed schedules is underway in a number of countries (ALB, BGR, BLR, FIN, LTU, MLT). Other countries have linked retirement age to progresses in life expectancy (CYP, EST, FIN, GRC, ITA, LUX, NDL, NOR, PRT). For instance, in the **Netherlands**, the decision was made in 2020 (replacing an arrangement from 2006 to increase the pension age) that after 2025, the pension age will be fixed to life expectancy and that each additional year increase in life expectancy shall result in a rise of the retirement age by eight months, leading to increased sustainability and strengthening intergenerational solidarity. Some countries reported on moderate increase of the retirement age during the reporting period (DEU, PRT, SWE), contributing to long-term financial sustainability and intergenerational fairness. **Sweden** has in parallel been gradually increasing the age limit for the guaranteed right to remain in employment. The gradual equalization of the retirement age for men and women has also been underway in several countries (ALB, AUT, AZE, BGR, BLR, KAZ, LTU, SRB). Finally, a number of countries reported on expanding their existing redistributive pension schemes by creating conditions for the investment of pension savings (GRC, TJK). This introduction of a funded system element in the public insurance system seeks to enhance sustainability and intergenerational fairness towards younger generations who could be disadvantaged in the future due to higher support ratios.

ECE countries also reported shifts in their attitudes towards **early retirement**. The general trend has been towards a stricter access to early retirement schemes and reduced pension entitlements in case of early retirement (e.g. CYP, LTU). For example, **Estonia** reported on the gradual phaseout of early retirement and pension based on years of service or on favourable terms which has been an option in certain occupations. Nevertheless, a few countries introduced flexible schemes allowing earlier retirement to facilitate generational turnover in the labour market (ITA, PRT). In **Italy**, the so-called «Quota 100» was implemented on an experimental basis, giving workers the choice to retire with no cut in pension benefits, but with the final pension amount reduced as a result of lower contributions.

"Goal 2g: Facilitating the reconciliation of employment and care work, providing access to flexible working arrangements and appropriate care services, and promoting an equal division of care work between women and men, while considering a possibility to account for the time spent on tasks of family care in the calculation of the old-age pension."

Reconciliation of employment and care work

Caring for older relatives while continuing to participate in the labour market can pose difficulties for family carers. When the time intensity of care tasks or the inflexibility of employers force carers to give up paid work, they are faced with lost earnings, reductions in their own social security and ability to save for their own old age. To alleviate this burden, a number of countries in the region adopted provisions for care leave entitlements (AUT, CZE, DEU, FRA, NOR) and increased financial support to family carers in the reporting period (CZE, DEU). Moreover, in the **Czech Republic**, shared work was introduced to allow a person caring for an older person to at least partially remain in employment.

Informal and family care responsibilities are still taken on by women more frequently than men, which affects future pensions and is one of the causes of the gender pension gap. Recognising this, **Slovenia** conducted awareness raising activities to promote a more equal division of care responsibilities between partners. One example is the project "Active Dad", which raises awareness among (prospective) parents, employers, professional staff, and the general public about the importance of active fatherhood, and more equal distribution of parental care.

Accounting for the time spent on informal and family care tasks in the calculation of old-age pension is an important measure to reconcile employment and caregiving, prevent poverty at older age and reduce the gender pension gap. Measures falling into this category were reported by AUT, BLR, CHE, DEU, ESP, IRL, KAZ, SVN. In **Austria**, individuals taking full-time or part-time care leave to accommodate care obligations are provided with social security coverage (health and pension insurance). In addition, they are protected against termination of employment on grounds of taking care leave. Since January 2020, two weeks of full-time or part-time care leave have been enshrined in law as a legal claim, provided that specific requirements are met. Analogous provisions apply to end-of-life care for close relatives. In **Germany**, the recognition of care in pension insurance was further improved by the Second Care Support Acts adopted in 2017. As under the new Act, care periods and levels of care are

taken into consideration, considerably more caretakers have claims to the payment of pension insurance contributions from long-term care insurance funds, also supporting the sustainability of the system. In **Switzerland**, the revision of the division of occupational benefits in the event of divorce ensures that a spouse who is not in gainful employment or who works part-time, for example to take on care responsibilities, is not at a disadvantage compared with the other spouse when it comes to building up their pension provision. A number of countries also reported on advances in better reflecting time spent on childcare in pension entitlements (CZE, NOR, POL, SVK).

3. Ensuring ageing with dignity (Lisbon Declaration Goal 3)

"Goal 3a: Protecting older persons' enjoyment of all human rights and dignity, promoting their autonomy, self-determination and participation in society, and making sure that no law, policy or programme leaves room for discrimination of any kind."

Human rights of older persons

The human rights of older persons received increased attention in ECE countries in the reporting period. A number of member States were particularly strongly engaged and have driven global efforts towards the adoption of a dedicated legally binding instrument to protect the human rights of older persons (AUT, DEU, SVN). Other countries expressed their opposition and belief that existing mechanisms are sufficient (POL, RUS), while yet others called for the more effective implementation of existing standards to better protect and promote the human rights of older persons (CHE, FRA).

Increased attention to issues related to the human rights of older persons were also reported by the **Czech Republic**, which set up a dedicated Working Group for the Protection of Rights of Older Persons. Ombudspersons for Older Persons were established in **Norway** in 2020 and in **Finland** in 2021 to monitor the status of older people and the implementation of their rights as well as related legislation. **Malta** appointed an independent Commissioner for Older Persons to create more awareness on the rights of older persons, to push for stricter legal measure against age discrimination and investigate any alleged breaches. Moreover, a number of countries organised international events on the human rights of older persons (AUT, CZE, DEU, SVN).

Dignity, autonomy and self-determination

Advances in the protection of rights and **dignity** of older persons in residential facilities and care settings were reported by several ECE countries. In **Denmark**, the National Center for a Dignified Elderly Care was established in 2018 to assist the municipalities in ensuring dignity in elderly care, by offering training, guidance, and information on best practice. Trainings on human rights and dignity in elder care were also reported by FIN, TUR. Preventive human rights monitoring was ensured in residential facilities for older persons in AUT, BEL, TUR, to ensure no undue restrictions of their rights and freedoms.

Advances in the preservation of the right to **self-determination** were reported by countries as well, in particular during guardianship (AUT, DEU, SWE, USA). In **Austria**, the Second Protection of Adults Act, which entered into force in 2018, introduced an enhanced guardianship scheme referred to as "adults representation". The new Act introduced the principle of "representation only where absolutely unavoidable", enabling adults who are limited in their decision-making capability due to a mental illness or similar impairment to take care of their affairs independently, to the extent they are able and with appropriate support. Modifications also included the expansion of alternatives to court-appointed representation and the establishment of adult protection associations to serve as counselling centres for legal support and representation. To ensure a smooth transition, training workshops were held throughout the country targeting judicial staff, employees at residential facilities, doctors and other groups concerned. In **Germany**, the Right to Guardianship and the Care Act was reformed to better preserve the right to self-determination. The reformed law seeks to ensure that the person concerned is better informed and more involved in all stages of the guardianship process, especially the appointment of the specific legal guardian and the monitoring of the guardianship by the guardianship court. In **Serbia**, the Law on Free Legal Aid, adopted in 2018, guarantees the right to free legal aid for persons placed in social protection institutions without their consent.

Closely linked to the above issues, **France** devoted considerable efforts in recent years to prevent the loss of autonomy and enhance self-determination in case it occurs through promoting advance actions. In 2020, the national strategy for the prevention of loss of autonomy, entitled «Healthy Ageing» was adopted, introducing elements such as prevention meetings at the time of retirement and frailty detection. In addition, communication actions have been enhanced in recent years to raise awareness of the future protection mandate, which allows people to anticipate their loss of autonomy and organize their own protection in advance.

No room for discrimination

No discrimination, including on the basis of age, is enshrined in the legislation of several ECE member States (e.g. CAN, FIN, LVA, NOR, SWE). In addition,

independent institutions dealing with discrimination exist in a number of countries, some of which have paid special attention to age discrimination (EST, SRB, SVN). For example, the Commissioner for the Protection of Equality in **Serbia** has implemented trainings on discrimination against older people and on protection mechanisms, targeting older persons themselves and various stakeholders, including public authorities, representatives of the social protection and healthcare sectors, law enforcement agencies, civil society, judiciary, inspection services, and media.

A number of countries also reported on special campaigns and initiatives to combat ageism, i.e. the stereotypes, prejudice and discrimination towards others or oneself based on age. **Albania** conducted a campaign against ageism in healthcare, while in **Latvia**, the annual awareness raising campaign "Openness is a value" focused on age discrimination in 2021. The campaign featured media outreach, lectures and video stories promoting employment, education and social participation at older age, and festivals were held where, among other activities, participants could take an interactive "Guess the age" test to determine the age of a person and thus dispel age-related stereotypes. **Estonia** has been implementing the Diversity Agreement, a voluntary agreement by which a company, non-governmental organization or public sector organization affirms that it respects diversity and upholds the principle of equal treatment among its employees, partners and customers, irrespective of their age, among other factors.

"Goal 3b: Supporting the necessary infrastructure and assistance to prevent all types of abuse and violence against older persons, ensuring their economic, physical, and psychological safety."

Prevention of abuse and violence against older persons

A key concern with regard to safeguarding the dignity of older persons relates to the prevention of abuse and violence against older persons. A considerable number of ECE member States reported on stepping up efforts in this respect in the fourth implementation cycle of MIPAA/RIS. Most actions focused on **awareness-raising and training**. Countries organised information campaigns, published information leaflets or increased awareness on violence and abuse through workshops or cultural events (AUT, BLR, FRA, MDA, RUS, USA). Training on violence and abuse against older persons was provided to various groups of professionals who come in contact with older persons in their work in AUT, BEL, CAN, MLT, ROU, SWE, USA namely workshops to enable law enforcement officers to more readily identify and better respond to crimes of violence committed against older persons in **Austria**, or trainings on the same subject targeting general practitioners in **Flanders, Belgium. Norway** conducted a mapping of examples of municipalities that are successful in preventing and following up to violence and abuse in nursing homes, and provided support to municipalities and hospitals to further their work of preventing violence against older persons.

Some countries adopted **strategies or legislation** cutting across different areas of safety and security of older persons. **Finland** published an action plan "A Safe and Secure Life for Older People" in 2018, a cross-sector programme containing recommendations for preventing and combating abuse, violence and crimes against older persons, improving the safety of older people's housing, as well as reducing the number of accidents. In **Quebec, Canada**, the "Act to combat the maltreatment of seniors and other persons of full age in vulnerable situations" was adopted in 2017, and an action plan was developed focusing on promoting good treatment and combating material and financial abuse. **Ireland's** law enforcement body, An Garda Síochána, undertook public consultations which unveiled a requirement for better information on crime prevention, including local media campaigns, and better response rates. As part of this consultation, older people were identified as a vulnerable group within the community, leading to the development of the An Garda Síochána Older People Strategy.

Financial abuse and fraud

The prevention of financial abuse and fraud has attracted particular attention and inspired a range of actions among ECE member States. Police departments, often in cooperation with regional or local authorities and other relevant actors, have provided guidance geared specifically towards older persons on how to avoid becoming a victim of fraud, including information on specific scams, tips for protection, brochures, movies, or training (AUT, CZE, DEU, MLT, SWE). In the **United States,** awareness programmes and other initiatives aimed to enhance financial literary and fraud detection among older persons and their caregivers. In **Luxembourg**, older volunteers were trained in various areas of safety and prevention, including scams and theft but also traffic accidents, with the aim of sensitizing older persons through their peers.

Some countries adopted stricter legislation with respect to fraud targeting older persons. In **Canada**, the Criminal Code and the common law have been amended to include age as one of the aggravating factors when sentencing an individual for the offence of fraud or for other offences under the Criminal Code. In the **United States**, the Elder Abuse Prevention and Prosecution Act, adopted in 2017, includes provisions for increasing penalties for criminals who target seniors, enhancing data collection and information sharing of abuse and fraud cases, increasing training of federal prosecutors and investigators, and establishing at least

one Assistant United States Attorney as an elder justice coordinator in each federal judicial court.

Responding to abuse and violence against older persons

Apart from activities aimed at prevention, countries also reported on measures to address abuse and violence against older persons in cases when it occurs. Anonymous free hotlines for older persons affected by violence are in place in AUT, FRA, NOR, SVK, TUR. **Belarus** provides psychosocial counselling and information services, social foster care services, and temporary shelter to older persons who are victims of domestic violence. A procedure to report instances of abuse and violence against older persons and to ensure a comprehensive response has been in place in IRL, MLT, and a procedure to report incidents related to home care with three levels of severity has been developed in Monaco.

"Goal 3c: Fostering the development of innovative methods and services as well as user- and age-friendly technology and products for reliable, accessible and affordable support and care suited to the varied and changing needs of older persons, allowing them to maintain social connections and stay in their preferred living environment for as long as possible."

Ageing in place and alternative living arrangements

Supporting ageing in place

Many countries have oriented their ageing policies to enable older people to remain in their own homes for as long as possible and in as good health as possible (e.g. CHE, IRL, ITA, NOR). The emphasis is put on independent living and deinstitutionalization by building and strengthening a comprehensive and integrated care and support infrastructure at the local level, and thus assisting older people and their caregivers within the community. An example of such a comprehensive and integrated approach is the system of gerontological rehabilitation which is in place in **Luxembourg**. It constitutes a set of multi- and interdisciplinary steps for the benefit of a person affected by dependence assessed as temporary and reversible. The aim is to give the person concerned back the skills they had before the incident. In addition, it tries to enable the person to return to their home and resume an independent lifestyle. If reintegration in the home environment is not possible, revalidation directs the person to services that can best manage their dependency situation. In **Norway**, a comprehensive framework promoting ageing in place has been put in practice as well, including support for home adaptions, and counselling to municipalities on ways to support ageing in place and integrate assistive technology in welfare provision.

Technology and digitalisation can go a long way in supporting ageing in place, and some countries have leveraged this potential in the reporting period. In **Germany**, the Digital Pact for Older Persons, a joint initiative between Federal, State and Municipal Governments, business, scientific research, and civil society, aims to improve autonomy and self-determination in older age in the areas of housing, mobility, social integration, health and care, and social spaces. The state of Vorarlberg, **Austria**, has taken a broad range of initiatives to provide age-friendly environments and make homes and assisted living facilities accessible for older persons, including providing homes with ambient assisted living systems. Tele-alarm services provided by municipalities were reported to be widespread in a couple of countries (BEL, LUX).

Further technological research and development has the potential to open up new possibilities for assisted-living that enables ageing in place and provides support for family members, informal carers and professional care providers. Countries reported on investments in the research and development of products and services that increase the safety and security of older persons, support their independent living and enhance their social participation (AUT, EST, ITA, LVA, NOR, SWE, USA). These were in some cases targeted mainly at local authorities (EST, SWE), while in the **United States** they often took the form of health and longevity innovation challenges and competitions to identify and support innovative, scalable technological solutions supporting the health and well-being of older persons and persons with dementia. In Norway, a national welfare technology programme was launched to pilot and implement digital services and technological tools. In addition, the **Austrian** Bioethics Commission has been advancing discussions on robotics in care, focusing on its ethical implications and social impacts.

Some countries reported on their participation in smart or virtual care projects. A Smart Care project implemented in a health centre in Kraljevo, **Serbia**, connects social protection and healthcare services, by using a software that covers the needs of social and medical health service users and connects service providers. The **Bulgarian** Red Cross, along with other partner organisations, participated in the «Virtual social assistant in support of active ageing» project, aiming to develop a prototype of a virtual social assistant to support the social well-being and health monitoring of older persons.

In **Canada**, older persons themselves have been actively involved in ageing and technology research and development through the OA-INVOLVE project, which focuses on establishing models of best practice for the meaningful involvement of older adults in aging and technology projects to support technology development that is 'fit for purpose' for improving the independence, health, wellbeing and quality of life of older adults.

Alternative living arrangements

Alternative living arrangements that meet older persons' needs for company and support with activities of daily living have also been gaining in popularity. A number of countries introduced or expanded the concept of **intergenerational homes**, bringing together the older and younger generations in shared housing or neighbourhood settings and facilitating meaningful exchanges and intergenerational support (AUT, BEL, CHE, DEU, ITA). The French Community Commission (COCOF), **Belgium**, supported a project called "Neighbourhoods in solidarity for harmonious ageing in one's own home", bringing together older people who live at home and express a feeling of loneliness and social isolation with their younger neighbours. In Tyrol, **Austria**, intergenerational housing schemes have been set up in many places to bring together the older and the younger generations. The "Wohnen für Hilfe" (Living for help) project, for instance, promotes shared accommodation, mutual assistance and intergenerational dialogue. In the context of the COVID-19 pandemic and related mobility and contact restrictions that severely affected older persons, **Germany** implemented a project with multi-generation homes, aiming to support interpersonal exchanges and the provision of services in a remote or partially digital format. Additional funds were allocated to establish or develop digital contact infrastructures and remote services to be able to reach older persons affected by the restrictions.

Several countries have shared and/or **supported housing** arrangements in place to promote independent living, while also facilitating social contacts and ensuring necessary support (e.g. GRC, LUX). In **France**, a system of semi-common living called "béguinage" for older persons has been developing in recent years, comprised of individual housing and common areas for meals and activities. Spaces are adapted to people with loss of autonomy and/or reduced mobility, offering an alternative to residential facilities. In **Germany**, communal forms of living that can help older persons lead independent lives have been stimulated through the «Shared Housing, Self-Determined Lives» programme. In **Belarus**, collective (seasonal) independent living, or so-called winter homes have been in place, where several older people can live together and support each other, usually during the winter. In **Luxembourg**, supervised housing offers independent or lightly dependent older persons the opportunity to live in a structure adapted to their needs and to take advantage of services related to daily activities, leisure, as well as on-site care and assistance. Most of these structures have agreements with care homes or structures that care for dependent persons, thus facilitating the transition from one structure to another in the event that the state of health of the resident of a supported housing facility should worsen.

In addition to the above-mentioned forms of alternative living arrangements, some countries reported on the growing popularity of **substitute families** (BLR, RUS), a form of social service whereby dependent older persons or persons with disabilities live together in a common household with another individual who is not a close relative.

"Goal 3d: Raising quality standards for integrated social and long-term care and health services, as appropriate, and continuously adapting the status, training and working conditions of professional care workers, including migrant care workers, to the growing need for culturally-sensitive care and health services, thus alleviating the strain on family and informal caregivers while also recognizing and supporting them in their fundamental role of providing care."

Long-term care

Long-term care strategy and reform

Older people have specific health and social care needs that differ from other age cohorts. In the context of population ageing and the growing number of older patients, there continues to be growing demand for geriatric health care and long-term care services. In some countries of the ECE region, the foundations of geriatric health service have been laid during the fourth implementation cycle of MIPAA/RIS (ARM, AZE, BLR, KAZ), while in others existing geriatric health services have been developed through new regulations, protocols or manuals (MDA, TJK), and additional professional education and training (RUS, TJK). Other countries in the region piloted (RUS), introduced (ALB, BGR, ITA, SVN), updated (FRA, NLD) or are in the process of reforming (AUT, ESP, EST, GRC, LUX) their comprehensive frameworks to respond to the long-term health and social care needs of their ageing populations.

A number of common features are discernible in these developments, among others the ambition to expand long-term care systems (AUT, ESP), to improve the efficiency of their administration (ESP, FIN, LUX), to enhance the use of data (EST, FRA), or an increased emphasis on ageing in place and home care as a part of long-term care (ALB, GRC, ITA, RUS, SVN). A couple of countries reported on adopting legislation advancing decentralisation and confirming the leading role of municipalities in the provision of long-term care (ALB, BGR), while **Estonia** piloted a care coordination project focusing on strengthening the role of local-level authorities, based on the close cooperation between local governments, family practitioners and regional hospitals. In **Denmark**, a deregulation pilot has been undergoing in a number of municipalities since 2021, removing most regulations and aiming to reduce bureaucracy and inflexibility.

Several countries reported on developments in a range of areas of long-term care, meriting showcasing the comprehensive nature of these reforms. The long-term care system in the **Netherlands** underwent a thorough reform in 2015, leading to increased financial sustainability, more decentralization, and deinstitutionalization. Several adjustments have been made since this reform, particularly to better promote ageing in place. One of them is the creation of the «alliance for elderly care» in 2018, focusing on tackling loneliness and improving the quality of home care. In another programme, "ageing in place", initiated in 2018, additional funds were allocated to facilitate more age-friendly living environments for older persons, and to relieve the burden of informal caregivers and volunteers, including the introduction of a respite care initiative.

In **Luxembourg**, an update of the long-term care insurance law, in force since 2018, brought more person-centred services, better quality of care thanks to clear standards and criteria with appropriate controls, as well as simplified administrative procedures. Moving forward, Luxembourg is in the process of developing a comprehensive set of strategies to serve the different stages of the increasingly long lifespan of older age: an active ageing strategy, a gerontological plan and an end-of-life plan. The active ageing strategy should be aimed at people who want to actively shape, plan and organise their retirement and who are also prepared to take on new roles (e.g. social engagement or mentoring for young people). The gerontological plan is aimed at people who need care, support or assistance in their daily lives. The end-of-life plan is aimed at people at the end of their lives and deals, among other things, with palliative care and the will at the end of life. These plans aim to highlight the great diversity of age. They are not linked to a specific age category but rather they are tailored to the individual circumstances of the person concerned.

A legislative reform of the **Finnish** social and health service sector has been undergoing in recent years, resulting among others in the expansion of the use of risk assessment indicators (RAI) to assess the service needs and functional capacity of clients. Through its nationwide use, the RAI help to ensure the uniform availability of services across the country. In its second phase, the reform aims to enhance the adequacy of home care and strengthen the service monitoring system. The reform of social and health services also entails a shift of the responsibility for organising social and health services from municipalities to "health and social service regions", in order to enhance the equal availability of services and to improve efficiency of operations and administration.

In **Slovenia**, a comprehensive Long-Term Care Act was adopted for the first time in 2021, integrating health and social care and covering a range of areas, such as home care, care in residential facilities, e-care, services to maintain independence and compulsory long-term care insurance. The reform aims to promote independent living, and to ensure that persons with comparable needs receive comparable support and services provided from public means.

In **France**, a nationwide consultation called «Ségur de la santé» took place in 2020, leading to conclusions and major investments based on four pillars: transforming health and care professions and upgrading those who provide care; defining a new investment and financing policy to improve the quality of care; simplifying the organisation and day-to-day life of health teams so that they can focus on their patients; and federating health professionals in the regions to serve users.

When reporting on the provision of long-term care services to older persons, several countries also highlighted the increasing role of **non-governmental organisation** in service provision (ARM, BLR, RUS, SRB) as well as in training professional and family carers (ARM, BLR).

Raising the quality standards of long-term care

Ensuring the quality of care provided across a broad landscape of care providers and settings is a challenge that countries have been addressing through the introduction of quality standards, quality measurement tools and their enforcement, among others (AUT, DEU, DNK, EST, FIN, FRA, IRL, LVA, MCO, MLT, ROU, TUR).

New quality assurance systems were introduced for inpatient and outpatient care in **Germany**. For fully inpatient facilities, these include the publication of care results based on ten quality indicators, which can be compared against the average from all of the residential care homes in Germany. It is complemented by external quality evaluations. Quality instruments for outpatient care include regular quality audits and reports by the National Association of Health Insurance Funds, and quality instruments are further being revised.

In **Denmark** in 2020, an agreement was reached to develop quality indicators in the elderly care sector witing three main areas, along with an annual national user satisfaction survey among recipients of home care and older persons living in nursing homes. A supplementary audit with a specific focus on the quality of nursing- and social care in elderly care was established in 2018. As part of a pilot, care units that receive comments must undergo follow-up training conducted by the National Centre for a Dignified Elderly Care.

In **France**, improving the quality and relevance of care is at the heart of the «Ma Santé 2022» strategy ("My Health 2022) adopted in 2018. It aims to put an end to unnecessary procedures or examinations, organise better care, improve the management of certain specific

disease pathways, and take into account patients' and residents' experience in all care settings by measuring their satisfaction and identifying good practice.

In **Finland**, self-monitoring has been a crucial tool for developing and monitoring the quality of services and client safety by service providers. Public service providers in Finland have been required by law to introduce systematic self-monitoring from 2015, and to keep self-monitoring plans publicly available. Supervision by national and regional supervisory authorities ensures the legal protection of the clients of care services for older people, the appropriateness and quality of the services they receive, and fair and respectful treatment. As a means of enhanced quality assurance, legislative reform in the social and health service sector was adopted increasing personnel needs and reviewing training requirements for care professionals working in services for older persons.

To ensure that home residents enjoy the best possible quality of life, a National Quality Certificate for Old Age and Nursing Homes in **Austria** has been developed, based on the recognition of quality excellence as well as the identification of potential for improvements that go beyond legal requirements. In **Estonia**, activity licenses for care homes have been introduced to increase the quality of social services, and a local government counselling unit on the same subject was established. Standardisation efforts to ensure equal access to and quality of services for persons with comparable needs were undertaken in LVA, ROU.

Integrated long-term care services

Older person often have multiple health conditions and a range of health and social care needs, placing high demands on integrated, efficient and cost-effective care, which is available regardless of the place of living of the individual and of their ability to bear the costs. A number of countries reported on having stepped up efforts to integrate health and social care elements in long-term care (e.g. BEL, BLR, ITA, LTU, MDA, TUR), relying on cross-sectoral cooperation between different institutions and service providers. In the **Republic of Moldova**, multidisciplinary teams and integrated person-centred care plans were developed, while in Italy, single points of access are being established for people requiring multidimensional care and continuity of care. **Malta** has a wide range of integrated services offered by Active Ageing and Community Care, spreading across health and social care, promotion of active ageing, and support and training to informal caregivers, among many others.

Affordable and financially sustainable long-term care systems

The questions of affordability and especially of the financial sustainability of long-term care have been raised by several countries, with a number of them reporting on concrete measures that have been taken to address them. Flanders, **Belgium**, is currently implementing a shift to a person-to-person financing model of long-term care. In its essence, it constitutes an integration of the various premiums and allowances related to the policy for the elderly, including assistance allowance, support for rehabilitation and assisted living, or demand-based financing of residential and home care, with own contributions that are linked to the person's income. **Austria** reported on the abolishment of the recourse to the assets of persons in residential care homes to cover costs. In **Finland**, a structural reform entailing the transfer of the responsibility for organising health and social care services from municipalities to larger health and social services regions is underway, with the aim of ensuring the social and financial sustainability of services. In a similar vein, in **Latvia**, administrative territorial reform carried out in 2021 contributed to the creation of a more efficient and financially sustainable network of public services, including health and social care. In addition, **Cyprus** and **Estonia** reported on the adoption of financing schemes to enhance the financial sustainability of long-term care.

Long-term care supporting ageing in place

Long-term care services in the ECE region are provided through a broad infrastructure of formal health and social care services provided at home, in the community, in day care centres, and in nursing and residential care homes. The emphasis has broadly been on supporting ageing in place as long as possible, and delaying or preventing unnecessary hospitalisation or admission to residential and nursing homes through home and community health and social care services.

In this vein, several countries reported on the introduction (ALB, AZE, BLR, KAZ) or expansion (BGR, LUX, TUR) of **home care** services in the reporting period. **Belarus**, for instance, reported on the introduction of new social services to ensure that older people stay in their familiar home environment for as long as possible, including mobile teams servicing rural areas. Aiming to enhance the quality of home care, **Monaco** has been in the process of setting up the «Autonomy» platform, a digital tool interlinking all the actors involved in home care and facilitating information sharing. Community-based care services have also been highlighted, for example an Elderly Support Programme called YADES was put into practice in 2016 in **Türkiye**, aiming to activate local dynamics to support older persons in their communities through home care and day care services, and thus prevent their isolation. A number of other countries reported on some general progress and further ongoing efforts in deinstitutionalisation, i.e. the transition from institutional care to care provided in the family environment and the local community (BGR, BLR, ESP, ITA, LVA, POL, SVK).

Networks of **day-care** centres for older persons were expanded in several countries (ARM, AZE, BLR, POL). **Poland** has been developing its network of day-care facilities through the establishment of "Senior+" Day Care Centres and "Senior+" Clubs. Self-governments could apply for funding for the creation, equipping and maintenance of such facilities through the "Senior+" Programme, while the "Care 75+" Programme provides municipalities with financing for specialist care services to persons aged 75 and above.

Professional care workers

Providing a sufficient number of health and social care personnel that is adequately trained has been identified as a major challenge by a considerable number of countries, and many of them have taken concrete steps to address it. Expansion of **training** capacities for health and social care workers was reported in BLR, CYP, DEU, FIN, MLT, SWE. Training was also considerably reorganised and training requirements were reviewed in a number of countries (CAN, DEU, FIN). Enhanced geriatric training of health professionals took place in BLR, KAZ, RUS. Recognising the importance of migrant workers in health and social care provision, Austria set up the "migrants care" project with the aim of preparing individuals not having German as their first language to receive training in nursing and care work.

A number of countries adopted a comprehensive approach to reaching adequate levels of care professionals, moving beyond training to also cover working conditions and wage conditions, among others. In Germany, the training to become a care professional has been fundamentally reorganised under the Care Professions Act. A three-year general care training course, recognised across the European Union, provides future professional carers with the necessary specialised knowledge. The absence of tuition fees, the guarantee of claiming an appropriate training allowance and the possibility of higher-level care training make the training course more attractive. In order to ensure sufficient training facilities and to increase the number of trainees, a Vocational Training Initiative for the Care Sector (2019-2023) was launched, accompanied by a nationwide public relations campaign. The training initiative is part of the broader Concerted Action for Nursing that was initiated in 2018, focusing on working conditions, wage conditions, innovative care methods and digitalisation. Further advances include the extension of the decision-making power of professional caregivers and the expansion of medical activities that can be assigned to them.

In Flanders, **Belgium**, the fourth action plan on employment in the care and welfare sector was adopted in 2018, addressing shortages in the nursing and care professions and newly targeting also people who are in normal employment and not looking for work to move to the care or social assistance sectors. Other measures include introducing the care sector to young people, career orientation, elimination of involuntary part-time work, the transfer of the exercise of care tasks to the appropriate level of qualification and the recruitment of social or care workers from abroad.

In **Norway**, a national competence plan for 2021-2025 was adopted covering recruitment, competence and professional development in municipal health and social care services.

Working conditions were also tackled in **Sweden**, where a «recovery bonus» was introduced in 2021 to enhance a sustainable working life in the health and social care sectors, while in **France**, improving the status and working conditions of the providers of care was of the main conclusions of the «Ségur de la santé» consultation in 2020, leading to major investments in this area.

Informal and family carers

Even in countries where a comprehensive care infrastructure is in place, a very significant part of the care and support needed by older people experiencing health problems and functional decline continues to be provided by families, friends and neighbours. Their share and responsibility grow where alternative sources of care and support are insufficient to meet demand. Providing care for older family members can negatively impact the health and well-being of those caring. Particularly when the care provided is time-intensive and emotionally straining it can enhance the risk of social isolation. There has been an increasing recognition of the crucial role of informal and family carers in the long-term care infrastructures of countries, and an important number of ECE countries adopted measures to support them and alleviate the strain of informal caregiving.

Specific measures have included the introduction (BLR) or expansion (FRA, LTU, MLT, NLD) of respite care services, the provision of advice to informal caregivers through a care hotline (DEU) and free home visits and supervision sessions by certified health workers (AUT), as well as training targeting informal carers (BLR, CYP, PRT).

Some countries reported on developing legislation, strategies or plans focusing on informal care (CHE, CZE, IRL, ITA, PRT). The Informal care law of 2018 provided the **Italian** legal system with a first form of recognition for the activity of unpaid caregivers and established the Fund for the support of the role of family caregivers in care and assistance. In 2019, legal recognition was awarded to informal caregivers in **Portugal** as well, regulating their right and duties, as well as supporting measures, including a support allowance, a social

support network, training, caregivers' rest and measures to support reintegration into the labour market. The National Carers' strategy in **Ireland** aims to recognise, support, and empower carers to manage their physical, mental, and emotional health and wellbeing, enable their participation in economic and social life, and provide them with necessary assistance and training. The **Czech Republic** put in place and Emergency Care Plan in 2021, to enable the transfer of care responsibilities to a substitute carer in case of the sudden incapacity of the main carer. The Emergency Care Plan system is supported by a free telephone line. The development of comprehensive informal and family care strategies was reported to be underway in SWE, USA.

"Goal 3e: Supporting research on individual and population ageing processes to better address emerging needs in ageing societies, with special attention to the situation of persons with dementia and/or mental and behavioural disorders, and their families."

Ageing research

Research on the situation and needs of older persons is of fundamental importance to identify problems, monitor trends and allow evidence-based policymaking. A number of countries reported greater interest and enhanced investments in ageing-related research.

In the reporting period, research related to ageing focused mostly on the following areas: technological innovation in the care sector, cognitive function and cognitive diseases, in particular dementia, employment in older age, and the impact of COVID-19 on older persons. Countries also undertook a range of specialised surveys to better understand older persons' needs and preferences. Several countries highlighted the Survey of Health, Ageing and Retirement in Europe (SHARE), and a number of countries mentioned the Generations and Gender Survey (GGS) as a useful source of ageing-related information. In addition, several non-EU countries collected data on and calculated the Active Ageing Index in recent years (e.g. AZE, BLR, KAZ, MDA).

Ageing-related research has mostly been conducted by public institutions, NGOs and academia. In a number of ECE countries, dedicated public institutes and research centres have been established on the topic (e.g. German Centre for Ageing; Centre for Care Research in Norway; National Institute on Aging in the United States).

"Goal 3f: Promoting the participation of both persons with dementia and/or mental and behavioural disorders and their informal carers in social and community life, and ensuring integrated care on a local basis with treatment, care, and support after diagnosis as needed, especially through community-based services."

Strategy and action concerning dementia

Dementia is a syndrome that affects memory, thinking, behaviour and the ability to perform everyday activities. According to WHO Europe, it is the leading cause of dependency and disability among older persons in the European region.

During the fourth implementation cycle of MIPAA/RIS, a considerable number of ECE member States responded to the increasing burden of dementia and/or mental and behavioural disorders on health systems and on informal caregivers by adopting or updating dedicated **strategies** or action plans aiming to improve the quality of life of persons with various forms of dementia and of their caregivers (AUT, BEL, CAN, CZE, DEU, DNK, ESP, GRC, MLT, NLD, NOR, SWE, USA). The following have been some of the key focus areas of these strategies: prevention, early diagnosis, awareness raising, reduction of stigma, dementia-friendly environments and communities, participation, autonomy, ethical treatment and research.

In 2019, **Denmark** also adopted a specific action plan to prevent and tackle aggressive behaviour, which may occur as a person's dementia progresses, and which can be a cause of significant distress for both the people suffering from dementia and for those around them, including professional caregivers. The action plan focuses on disseminating knowledge and methods to prevent extroverted and aggressive behaviour by people suffering from dementia and aims to strengthen the knowledge and competencies of managers and employees in the professional care sector on how to handle such situations.

Supporting community-based care for persons with dementia

Integrated care on a local basis, especially through community-based services has been recognised as key for the quality of life and care for persons with dementia. Several countries reported on adopting such approaches in organising their dementia response frameworks. In Flanders, **Belgium**, the Quality of Life, Living and Care for People with Dementia Framework was developed in 2018, inspiring home care settings, residential care centres and hospitals in their journeys towards a more person-centred and responsive care and support. In **Sweden**, a standardised sequence of interventions and daily activities for persons with dementia was developed, as a model for multi-professional collaboration for person-centred health and social care for dementia aimed at regions and municipalities. In **Estonia**, a Dementia Competence Centre was founded to support Estonia in becoming dementia-friendly. It focuses on the integration of service provision; the training of service providers and stakeholders; support to people with dementia and their families, including

training, activities and a phone helpline; as well as the coordination of academic research, communication and social awareness on dementia-related topics. Funds for dementia-friendly environmental design in care homes have been provided as well, and the use of assistive technology and digital solutions has been supported. In **Germany**, "Local Alliances for People with Dementia" have been expanded, comprising networks of professionals and volunteers working in the area of dementia. In **Lithuania**, mutual support groups supervised by specialists were organised for older persons with dementia and their caregivers.

Increasing the quality of life of persons with dementia and their caregivers

ECE countries reported on a range of measures and initiatives aimed at increasing the quality of life of persons with dementia and their caregivers. They include:

- respite care facilities and home respite care services to specifically support caregivers of persons with dementia in **Malta**;
- initiatives to reduce the misuse of antipsychotics in nursing homes caring for dementia patients in the **United States**;
- the development of clinical protocols and guidelines for the protection and promotion of mental health of older people in **Azerbaijan**;
- the introduction of day care services to ensure that older persons with dementia can remain in their familiar home environment for as long as possible in **Belarus**;
- dementia care trainings for professionals working in this area (AZE, USA);
- awareness-raising trainings for the general public, public transportation personnel, retail workers, banking personnel, fire departments and law enforcement officers about how to deal with persons with dementia in **Germany**.

In **Serbia**, the Red Cross of Serbia in cooperation with innovative community care centres aimed at older persons diagnosed with dementia implemented a project in which older persons, with the aid of volunteers, used tablets to do cognitive exercises several times a week in order to preserve mental capacities and slow down cognitive deterioration.

As **social participation** is an essential component of a fulfilled life, countries have taken initiatives aimed at persons with dementia and their caregivers in this direction as well. In **Germany**, the dementia-sensitive design of social spaces has been encouraged, along with the creation of suitable mobility services and volunteering opportunities. Moreover, religious, cultural, sport and training institutions and facilities are requested to implement concepts that include persons with dementia and their caregivers to further enable them to participate in society. In **Austria**, the Albertina and the Kunsthistorisches Museum, two major national museums located in Vienna, offer guided tours and workshops for people with dementia, while the Belvedere Museum has a dedicated art appreciation programme in place for this target group. In Canada, the Cog@Work programme supports employers to provide affordable, sustainable and inclusive workspace models for employees with mild cognitive impairment and dementia.

"Goal 3g: Respecting the self-determination, independence and dignity of older persons, especially, but not limited to, towards the end of life, through patient-centred medical and social care, including access to appropriate palliative care and aspiring to facilitate where possible the preferences of older couples to be cared for together."

Self-determination in palliative care and at the end of life

ECE member States reported on diverse measures to enable people to approach the end of their lives with more self-determination and in dignity.

Canada's Medical Assistance in Dying law, enacted in 2016, establishes the eligibility criteria that must be met and safeguards that must be applied before medical assistance in dying can lawfully be provided. The law was amended in 2021, strengthening the self-determination for older and chronically ill adults.

In **France**, additional legal provisions were introduced in 2016 to further strengthen the rights of patients in the management of the end of life. Under the new law, conditions for stopping treatment are clarified and healthcare professionals are required to implement all the means at their disposal to ensure a dignified end of life accompanied by the best possible relief of suffering. Doctors are required to inform patients about the possibility and conditions of drafting advance directives, and they are obliged to respect the wishes of the patient, after having informed them of the consequences of their choice to refuse or not to receive treatment.

In **Luxembourg**, the brochure «My Will at the End of Life» has been developed to provide citizens with impartial information about the laws governing the end of life and the options available to them. In order to ensure that the wishes of a person at the end of life are respected, even if they can no longer express themselves, part of the brochure consists of «advance directive» and «end-of-life provision» forms, which can be used by citizens to document their choices. Any patient can fill out both an advance directive and an end-of-life provision.

Access to appropriate and culturally sensitive palliative care

A society with a long lifespan is characterised by an increasing need for palliative medical and care services. In **Austria**, the new Hospice and Palliative Care Funds Act provides for a gradual expansion of hospice and palliative care services with the aim of being able to provide the needed services to all.

Facilitating self-determination and dignity at the end of life and supporting relatives and loved ones are challenging tasks. It places high demands on culturally appropriate palliative care systems and qualified professional and volunteer end-of-life carers. To ensure culturally sensitive palliative care on reserve and in Inuit communities, **Canada** put in place the First Nations and Inuit Home and Community Care program. It provides a range of home and community-based care services for First Nations people and Inuit. The program is community-driven and provides services that are culturally sensitive, accessible, and responsive to the unique health and social needs of First Nations people and Inuit. In **Germany**, innovative, digital informational and training services about dealing with dying and death wishes have been developed to support professionals working with older persons and volunteer end-of-life carers. Through the «Young Volunteers in Terminal and Grieving Assistance Services» project, young adults have been recruited and qualified for hospice services.

Respecting, where possible, the preferences of **older couples** to be cared for together, is another important aspect of a dignified and self-determined end of life. Nova Scotia, **Canada**, introduced the Life Partners in Long Term Care Act in 2020, enshrining the right for spouses who are both eligible for admission to a Department of Health and Wellness licensed and funded long-term care facility to be placed together, regardless of the level of care at which they have been assessed, so long as they both require facility-based care.

V. Contribution of ageing policies to the implementation of the 2030 Agenda and its Sustainable Development Goals

The 2030 Agenda for Sustainable Development, adopted by all United Nations Member States in 2015, provides a shared blueprint for peace and prosperity for people and the planet, now and into the future. Out of the 17 Sustainable Development Goals (SDGs), 9 were identified as involving areas for policy integration with MIPAA/RIS (Goal 1, Goal 3, Goal 4, Goal 5, Goal 8, Goal 10, Goal 11, Goal 16, and Goal 17).[17] Therefore, the implementation of MIPAA/RIS makes important contributions to accelerating progress towards the realization of the 2030 Agenda.

A. Links between ageing issues and the 2030 Agenda with regard to RIS

Most ECE member States that presented national MIPAA/RIS review reports have developed national strategies for sustainable development to implement the 2030 Agenda. A number of these have also made efforts to establish links between ageing issues and long-term development plans in their national context (AZE, BGR, BLR, CAN, CZE, EST, FIN, IRL, MDA, POL, SVK). For instance, the National Strategy for Sustainable Development of the Republic of **Belarus** for the period up to 2035 set strategic goals to increase the duration of the healthy active life of the population, and to ensure access of all citizens, regardless of their place of residence, to quality health care.

Further examples of integration between ageing issues and the SDGs include the **Austrian** Federal Plan for Senior Citizens "Ageing and the Future", covering 14 fields for SDG action at all levels of government. Kazakhstan has established a working group on "People" under its SDGs Coordination Council, bringing together measures aimed at poverty eradication, gender equality, healthy lifestyles, and quality education, including measures targeting older persons.

A number of ECE member States have also reported on addressing population ageing and older persons' issues in their countries' voluntary national review(s) (VNR), presented to the High-Level Political Forum on Sustainable Development (HLPF). **Austria**, in its 2020 VNR addressed older persons' issues in various contexts, such as the Austrian Health Targets, the dialogue on healthy and active ageing, and digital transformation. **Belarus** noted the country's achievements in creating conditions for a quality life in old age in its 2017 VNR. **Canada's** 2018 VNR presented data on issues of particular relevance for older persons, including risks of low income. The **Czech Republic**, in its 2021 VNR, addressed population ageing in relation to disease prevention, ageism and unequal pensions. **Denmark** addressed older persons' issues in relation to health, gender and inequalities, among other areas, in its 2021 report. **Estonia** presented major challenges accompanying population ageing in policy areas such as health, financial sustainability, and labour market participation in its 2016 and 2020 reports. **France** mentioned the health and social inclusion of older persons in various VNRs submitted during 2016-2019. **Latvia**, in its 2017 VNR, identified ageing as a challenge for the country, especially in the area of securing adequate income and ensuring well-being at older age.

[17] A mapping of the connections between MIPAA/RIS and the SDGs, see https://unece.org/fileadmin/DAM/pau/age/PS2018/00_MIPAA_RIS_2030_Agenda_Areas_for_Policy_Integration.pdf

Malta's VNR reported on care homes and wellbeing services for older persons. The **Netherlands**' 2017 VNR referred to older persons in the context of social security system. **Switzerland's** 2018 VNR addressed the needs of older people in terms of well-being, labour force participation, and accessibility of public transport.

Table 4
SDGs that can be nourished by ageing policy measures as reported by countries in their national MIPAA/RIS review reports

Countries	SDG 1	SDG 2	SDG 3	SDG 4	SDG 5	SDG 8	SDG 10	SDG 11	SDG 16	SDG 17
Albania	X		X	X	X	X		X		
Austria	X	X	X	X	X	X	X	X		
Belarus	X		X		X	X				
Belgium			X							
Bulgaria			X							
Canada	X		X	X	X	X	X	X		
Cyprus	X		X	X	X	X	X	X	X	X
Czech Republic	X		X				X			
Denmark			X		X		X	X		
Finland	X	X	X	X	X	X		X		
France	X		X		X	X	X	X		
Germany			X							
Ireland	X	X	X					X	X	
Italy			X							
Kazakhstan	X		X	X			X			
Latvia	X		X	X	X	X	X			
Luxembourg	X		X	X	X		X	X		
Malta	X		X	X			X	X	X	
Netherlands		X	X		X		X	X		
Poland	X		X				X			
Portugal	X			X	X	X	X			
Republic of Moldova			X	X	X	X			X	X
Slovakia			X			X				
Slovenia	X	X	X	X	X		X	X	X	
Spain	X		X	X	X	X	X	X	X	
Sweden			X		X		X			
Switzerland	X				X	X				
Tajikistan			X		X					
Türkiye	X	X	X	X	X	X	X	X	X	X
United States of America	X	X	X				X			X

VI. Managing the impact of the COVID-19 pandemic on older persons

The COVID-19 pandemic has put significant pressure on states and societies in the ECE region and it has had particularly grave impact on older persons. Data provided by ECE countries in their MIPAA/RIS review reports showed the disproportionate health impact of the pandemic on older population groups, which had higher shares of hospitalization and higher mortality rates resulting from COVID-19.

Apart from these direct consequences for individual health, a number of countries reported that the COVID-19 pandemic has also highlighted and aggravated several structural deficits in national health and social care systems. The provision of basic care services was affected by restrictive measures introduced by member States, such as nation-wide lockdowns, mandatory self-isolation or bans on visits. Movement restrictions also caused disruptions in informal and family care, and often led to the suspension of related services, such as supervision sessions or respite care services. In situations where household visits were required, visiting care staff observed protective measures, such as wearing protective equipment and maintaining distance. Moreover, older persons residing in care homes were prevented from receiving visits from family members in order to limit the spread of COVID-19.

Overall, countries reported that while measures aiming at reducing physical contact have contributed greatly to reducing the health impacts of the pandemic, they were nevertheless a source of distress for older persons and their relatives. The pandemic has aggravated feelings of loneliness in later stages of life and diminished opportunities for participation in social life – a crucial element of mental and physical health and well-being. ECE member States also pointed out in their national reports that as a result of the COVID-19 pandemic, older persons have been increasingly associated with images of vulnerability, illness and need for protection and help. They concluded that the need to promote a positive image of ageing is now more acute than ever. In addition, a number of countries have reported on conducting studies to determine the social and psychological impacts of these measures on older persons, as well as to draw broader lessons from managing the consequences of the pandemic and the ramifications of measures taken on older persons (AUT, CAN, CHE, FRA, LVA, LTU, NOR, SVN).

A. Measures in response to the COVID-19 pandemic targeting older persons

1. Restrictions on mobility and social interactions

At the beginning of the pandemic, countries introduced different restrictive measures that significantly limited the movement of inhabitants. A few ECE member States (AZE, FIN, KAZ, MDA, MLT, TUR) introduced specific measures targeting older persons. As an example, **Türkiye** declared a partial curfew for senior citizens aged 65 and over, while persons of 65 years and over in **Malta** were encouraged not to leave their homes except to attend medical appointments, obtain medical care or treatment, acquire food or medicine, other daily necessities, or to attend to any other essential or urgent personal matter.

COVID-19-related restrictions placed an unprecedented burden on nursing homes and on older persons residing in them. Several countries (ALB, CYP, EST, ESP, FIN, GRC, ITA, KAZ, MLT, NLD, RUS, SWE, USA) reported on the introduction of restrictions on visits from any person external to the residential facility, including family and friends, in order to prevent the infection of residents. Residents were also advised to minimise physical contact with other residents and staff. For example, in the **Russian Federation**, residential care institutions were switched to a closed regime in order to prevent the spread of COVID-19, whereby staff self-isolated with resident for two-week shifts.

The restrictions introduced in residential facilities as well as outside of them limited social interactions, as older persons were often unable to meet relatives and friends for a long time. In many cases, these circumstances led to an increased feeling of loneliness among older persons. Several member States reported on initiatives to promote the social inclusion and participation of older persons in order to combat loneliness (AUT, FRA, MLT, NLD, NOR, POL, ROU, RUS, SVN, SWE). The role of volunteers has been instrumental in the fight against isolation. AZE, CYP, POL reported on actions promoting volunteering, aiming to support seniors in everyday activities such as doing shopping or providing meals. In **Slovenia**, city bus drivers were delivering food to older persons at a time when public transport was not operating.

2. Supporting the digital transformation

In many aspects, the COVID-19 pandemic accelerated the digital transformation of our societies. In this regard, some countries (AZE, DEU, LVA, RUS) reported on the introduction of initiatives to support older persons' access to digital services, which were particularly important given the above-mentioned measures adopted to limit physical interactions. The **Russian Federation** established a network of volunteers under the "Digital Volunteer" programme, who helped older persons to gain digital skills, which allowed them to order products or medicines online, as well as to access pandemic-related information on their own. In **Latvia**, seniors were trained to access the Internet so that they

could engage in "Senior School" activities remotely, since due to the pandemic, in-person meetings were restricted.

In order to compensate for the reduced accessibility of **health care services** during lockdowns, a number of countries (BLR, IRL, KAZ, LUX, MDA, POL, RUS, SRB, SVK) reported on shifts towards online services during the pandemic. As a part of this change, online consultations and remote monitoring and support for older persons were facilitated. In **Slovakia**, older persons could consult their health issues with their general practitioners or specialists by telephone or online. Several legislative amendments were adopted to facilitate such remote access to healthcare, e.g. in the area of prescribing medicines and medical devices, access to examinations by specialists or access to vaccination. In ECE countries, several programmes were also introduced to ensure home delivery of medicines and medical devices. It **Italy**, the delivery of these items to vulnerable population groups was ensured through a toll-free telephone line.

3. Alleviating long-term care providers across different care settings

As was already mentioned, **residential long-term care facilities** were subjected to particularly challenging limitations during the COVID-19 pandemic. Professional carers at **nursing homes** were asked to maintain the quality of care services, while struggling to contain the number of infections among residents and staff. In response to these challenges, a number of countries supported nursing homes with additional budget allocations (AUT, CAN, POL). Some countries have reported that the main pressure on residential facilities during the pandemic resulted from the shortage of employees. In this regard, **Spain** made hiring rules in long-term care facilities and other social service providers more flexible on an exceptional and temporary basis.

Family carers have significantly helped in relieving the burden on the care system during the COVID-19 pandemic, but they were also subjected to additional challenges as a result of the pandemic. Significant pressures emerged from the limitation of social care activities, such as home care provision or daytime activities, and the increased risk of transmission. In many countries, household visits and support sessions with family carers ceased temporarily. In order to alleviate such burden, **Germany** introduced measures to extend the right of employees to stay away from work for family care purposes from 10 working days to 20. **Austria**, on the other hand, advanced the payment of long-term care allowance in order to mitigate the negative impact caused by suspended or delayed visits of family carers.

4. Other COVID-19-related measures targeting older persons

A range of other measures targeting older persons were implemented in the ECE region as well. Among the most important, a large number of ECE countries (AUT, AZE, CYP, CZE, DNK, ESP, EST, FRA, GRC, ITA, KAZ, LVA, NOR, SRB, SVK, SVN, TUR) reported prioritising older persons' access to COVID-19 **vaccines** when those first became available in 2020. In ESP, EST, FRA, TUR residents and personnel of care homes were given special priority.

Member States also established dedicated **information channels**, including hot lines, to raise the awareness of older persons on the importance of following COVID-19-related regulations, on recommended behaviours to avoid COVID-19 and on procedures to follow in case of infection (AUT, AZE, CYP, CZE, EST, FRA, ITA, MDA, NOR, POL, ROU, SVK, SVN, SWE, TUR, USA). For example, **Sweden** set up a website informing on the spread of the infection in different formats targeting, in particular, older persons, while **Estonia** established a phone-based helpline providing specific advice related to COVID-19 to people with dementia. In **Slovenia**, mental health professionals were available for relief talks during the COVID-19 epidemic, moreover, a free chat room, ČvekiFON, was set up specially for the older persons, enabling them to connect and socialise. **Romania** launched a free hotline to support older adults in residential centres, providing counselling and psychosocial assistance but also aiming to prevent and identify potential cases of abuse to which they may fall victim in the context of the COVID-19 pandemic.

Additionally, some ECE countries (GRC, LVA, NOR, RUS, SRB, SVN, TUR) reported on special **financial support** to older persons during the pandemic, as a compensation for any extraordinary expenses they might have incurred.

B. Commitment to the dignity and the right to health of older persons in difficult health-care decisions

The pandemic has brought upon a need to ensure that difficult health-care decisions affecting older persons were guided by a commitment to dignity and the right to health, in line with the recommendations of the United Nations Secretary-General's Policy Brief "The impact of COVID-19 on older persons". Several ECE countries have taken initiatives in this direction. **Austria**, for instance, commissioned an assessment study of the measures introduced to contain the spread of COVID-19, with specific attention to older persons, which resulted in relevant recommendations and guidance. **France** issued specific recommendations for the care of older persons and people with disabilities, emphasising, in particular, that in no case does the level of dependence or disability constitute in itself a criterion for refusing hospitalisation. **Canada** reported on the development of a COVID-19 Ethical Decision-Making Framework in British Columbia, aiming to ensure fair treatment for

all and to guide difficult decision-making in the face of potentially limited health care resources during the pandemic.

C. Enhanced information sharing and participation of older persons to improve decision-making on COVID-19

Despite its many adverse effects, the COVID-19 pandemic brought about unprecedented cooperation and coordination among various actors within countries, as containing COVID-19 and managing its consequences required simultaneous and coordinated response in many policy fields. Several countries reported (BLR, CZE, ESP, FRA, IRL, SVK, SVN, USA) that the above-mentioned recommendations and measures targeting older persons were drawn up by inter-ministerial or inter-departmental working groups, which also allowed for sharing knowledge and good practices, instrumental in supporting decision-making. For example, the Finnish Institute for Health and Welfare gathered good practices from municipalities in order to inform decision-makers on how to best support the functional capacity of older people during the pandemic.

Other countries reported (CZ, FRA) on consultation mechanisms to ensure the **participation** of older persons in the decision-making process during the pandemic. In the **Czech Republic**, regular meetings of the Government Council for Older Persons and Population Ageing and of the Working Group for the Protection of Rights of Older Persons took place to discuss pandemic-related issues and challenges affecting older persons, with participation by older persons themselves. In **France**, residents of nursing homes are invited to express their views and concerns on the management of the centre through residents' councils.

VII. Conclusion and the way forward

In the past five years, the priority focus of governments in the ECE region continued to be on adapting labour markets, social protection systems and the health and social care sectors to the implications of population ageing. However, measures aimed at better inclusion and respect for the human rights of older persons have also gained in prominence. Based on the account of 40 member States, areas that have seen the greatest progress as well as challenges in the fourth cycle of MIPAA/RIS implementation have been identified and are listed below.

A. Main achievements

1. Employment and pension

Extended working lives were identified as a major achievement, which was made possible thanks to a variety of policy measures introducing more flexible working arrangements and retirement options. Changing perceptions of older persons in the labour market have also played a positive role.

Pension reforms adopted in recent years have contributed to the long-term sustainability of pension systems in several countries. Some ECE member States introduced systemic measures in this area, for example by linking retirement age to life expectancy or enabling work beyond retirement age. Moreover, financial incentives for a prolonged working life have been made more attractive in several countries. Nevertheless, the great span in the retirement age in the region points at a further untapped potential of longer working life.

Progress has also been achieved with regard to the income security of older persons. Several countries highlighted measures taken to ensure adequacy of pensions, with particular focus on raising the pensions or pension supplements of older persons with the lowest incomes. The COVID-19 pandemic also triggered some special financial support destined to vulnerable older persons.

2. Health and social care

Advances in independent living and ageing in place were reported as an important success by several countries, helping older persons to live dignified lives close to friends and families. A range of measures were adopted towards this end, including increasing deinstitutionalisation efforts and building more age-friendly communities. In particular, progress has been made with regard to the accessibility of public transportation, residential buildings and public spaces, with dedicated subsidy schemes in a number of ECE countries.

Along with the shift towards more independent living in older age, countries also devoted greater attention to ensuring dignity, autonomy and self-determination in situations of dependency, cognitive decline, and in residential care settings. Guardianship rules were amended in a number of countries and advances were made with regard to self-determination towards the end of life.

Several countries noted with content the improvements made in the general health situation of older persons, demonstrated by the continued rise of life expectancy and healthy life expectancy in the region, although setbacks have also been recorded in this area as a result of the COVID-19 pandemic.

Finally, countries have made progress in providing long-term care in a more integrated manner, and some have adopted more advanced quality assurance mechanisms in this area. There has also been an increased focus and commitment towards providing more domestic and community-based long-term care options to older persons.

3. Full inclusion

The full inclusion of older persons in society has been advanced through a variety of actions and initiatives by ECE member States in the past five years. There has been a notable increase in the focus on the human rights of older persons, on combatting ageism and on preventing and addressing violence, abuse and neglect. Actions included the establishment of dedicated institutions devoted to the protection of the rights of older persons, a variety of awareness campaigns, and the introduction of mechanisms to detect violence, abuse and neglect, and support victims.

Countries reported on progress with regard to the perception of ageing and older persons as well. There has been growing awareness of the contributions of older persons to societies and economies, and some surveys indicated that older persons themselves have started to perceive older age differently. COVID-19 brought about some setbacks in this area as well, highlighting the vulnerabilities of older persons.

Nevertheless, older persons' issues and ageing have been increasingly finding their ways into sectoral policies others than just health and social protection, and they were also better reflected in policies at the regional and local levels. Hand in hand with the progresses made in mainstreaming ageing across policies, coordination and advisory bodies on ageing and older persons' issues were created or expanded, especially at the municipal level. In such bodies, the active involvement of older persons and their representatives has become the norm.

Last but not least, as a consequence of COVID-19-induced restrictions and the resulting increase in loneliness and isolation experienced by older persons, combatting social isolation received much attention in policy as well as research circles. A renewed impetus was given to initiatives in a range of areas, such as digital inclusion, volunteering, or intergenerational relations.

B. Main challenges and progress needed

1. Long-term care

Despite massive efforts and a myriad of reforms and initiatives in the health and social care domain, ECE member states still reported the largest amount of challenges with regard to long-term care. Shortages of qualified health and social care personnel in long-term care and geriatric care were among the most prominent. Closely related, countries had difficulties to provide sufficient domestic and community-based care services to meet growing demand and to enable independent living and ageing in place for all as long as possible. In addition, countries acknowledged the need for better coordination within the system of long-term care. In several member States, the financial sustainability of long-term care systems in the face of ageing population structures remained an unresolved question as well, requiring urgent action.

ECE countries further noted that more work needs to be done to support informal and family carers. The COVID-19 crisis highlighted the vast reliance of care systems on informal caregivers and led to better acknowledgment of their vital contribution. Notable efforts were made in several countries to alleviate informal caregivers through respite care, financial subsidies, expert support, as well as initiatives to better account for time spent with providing care in future pension and to ensure more flexibility at workplaces. Nevertheless, many countries identified the need to provide more comprehensive and systemic support to informal carers.

2. Housing

The issue of housing for older persons was highlighted as a major challenge by countries across the ECE region. Many countries reported on a shortage of affordable housing adapted to the needs of older persons so as to allow them to age in place even in case of disability, functional decline or mild cognitive diseases. There is a need for more innovative, alternative and supported housing arrangements, meeting accessibility criteria. Accessibility remains a considerable challenge in other areas as well, such as transport, public areas and digital space.

3. Inequalities and poverty

Countries noted persistent inequalities among older persons in health, access to services, as well as income security as a major challenge. Health inequalities within older populations mostly reflect differences in income levels and education attainment, while access to health and social care services tends to be more limited in remote and rural areas. Inequalities may further deepen in the years to come, as older populations are getting increasingly diverse in many ECE countries as a result of decades of strong immigration.

Some countries adopted concrete steps to diminish inequalities in quality and access to services but significant efforts and progress are needed across the region. Poverty and income security at older age also remains a challenge in several ECE countries.

4. Discrimination and increased vulnerability

Despite growing attention and action, ECE member States recognised discrimination, stereotypes and other forms of ageism against older persons as persistent and deeply rooted challenges. They require interventions across the life course and in a range of areas, such as

education, media, culture, employment and health and social care.

Older persons also remain at greater risk of social isolation, neglect and abuse than other population groups. Prevention and early response measures need to be stepped up in all these areas, ensuring that older persons are well informed about social participation opportunities, about their rights and about existing mechanisms to deal with cases of violence, abuse and fraud. Moreover, it is necessary to expand opportunities for active ageing to ensure that all older persons have a chance to engage, and to develop more effective oversight mechanism to combat violence and abuse.

C. Regional collaboration

ECE member States highlighted data collection, research, innovation and technological development as key enablers to address these challenges. They also singled out the value of exchanging experiences and best practices on ageing-related topics, through engagement in various regional and international fora. At the global level, countries reported on collaborating on ageing issues within the framework of the **United Nations Open-ended Working Group on Ageing** (ALB, ARM, AUT, BGR, BLR, CAN, DEU, DNK, ESP, FRA, IRL, LVA, MLT, NLD, POL, RUS, SRB, SVN, TUR, USA). A significant number of ECE countries have supported and contributed to the **United Nations Decade of Healthy Ageing**, predominantly as part of their existing strategies and activities related to active and healthy ageing (AUT, BEL, BLR, CAN, CYP, CZE, DEU, ESP, FIN, FRA, GRC, IRL, ITA, LUX, LVA, MDA, MCO, NLD, NOR, PRT, ROU, RUS, SVK, SVN, SWE, TJK, TUR, USA). Countries have also collaborated with the World Health Organization (WHO) on raising awareness on ageism and its serious and far-reaching consequences for older people's health, well-being and human rights, within the framework of the **Global Campaign to Combat Ageism**. Moreover, several countries have been fostering age-friendly environments through the WHO **Global Network of Age-friendly Cities and Communities**. Some countries have also benefited from support by United Nations entities, such as the United Nations Population Fund, in implementing MIPAA/RIS (ALB, AZE, BLR, KAZ, MDA, SRB).

On the level of the ECE region, cooperation on ageing issues received a renewed impetus in 2020, when the ECE Working Group on Ageing was upgraded to a Standing Working Group on Ageing by resolution of the Economic and Social Council (2020/19). The Standing Working Group on Ageing has continued to serve as an important regional platform for international cooperation, exchange of experience and policy discussion on ageing, with ECE member States actively participating in and driving its activities. The annual meeting of the Standing Working Group on Ageing plays a constructive role in following up on activities related to MIPAA/RIS implementation. These have included since 2017 a number of road maps on mainstreaming ageing, guidelines on mainstreaming ageing and a related toolkit, and several policy briefs and policy seminars on ageing. Topics covered have been: realizing the potential of living longer, innovative social services and supportive measures for independent living in advanced age, combating ageism in the world of work, informal care, gender equality in ageing societies, ageing and the Sustainable Development Goals, ageing in sustainable and smart cities, older persons in emergency situations, ageing in the digital era, and mainstreaming ageing.

The activities of ECE member States during the fourth implementation cycle of MIPAA/RIS testify the continuing commitment of ECE countries to the implementation of MIPAA/RIS and to adapting their societies, communities and economies to the implications of population ageing. The Lisbon Ministerial Conference in 2017 called for realizing the potential of living longer, which has guided policy priorities for the fourth implementation cycle. Notably, it has brought with itself a growing recognition of the need to mainstream ageing in all policies at all levels, as a prerequisite for fulfilling the potential of increased longevity. Further policy action is planned to ensure that this potential can be realized by every older person, across diverse social groups and geographical areas. The Rome Ministerial Conference in 2022 calls for solidarity and equal opportunities throughout life, to ensure a sustainable world for all ages. Reaching this objective will require expanding existing initiatives and services to respond to growing needs, and to ensure equal access to services and opportunities for all older persons. Importantly, it will also require that all stakeholders and generations join forces in a coordinated and forward-looking effort.

STATISTICAL ANNEX
UNECE COUNTRIES:
POPULATION AGEING IN FIGURES

GENERAL DEMOGRAPHIC INDICATORS

Table A1: Population of UNECE countries in 2020 and projections for 2030 and 2050

2020											
Countries	Total population thousands*	Percentage of population at age									Median age, year
		50-64			65-79			80+			
		Male	Female	Total	Male	Female	Total	Male	Female	Total	
Albania	2,878	9.7	10.2	19.9	5.7	6.1	11.8	1.4	1.6	2.9	36.4
Andorra	77	..	..	..	..	..	..	..	..	..	..
Armenia	2,963	8.1	10.8	18.9	3.5	5.2	8.7	1.1	2.0	3.1	35.4
Austria	9,006	11.0	11.1	22.1	6.3	7.5	13.8	2.0	3.4	5.4	43.5
Azerbaijan	10,139	8.2	9.3	17.5	2.4	3.1	5.4	0.5	0.8	1.3	32.3
Belarus	9,449	9.6	11.7	21.3	4.2	7.5	11.7	0.9	3.0	3.9	40.3
Belgium	11,590	10.2	10.0	20.1	6.4	7.2	13.6	2.1	3.6	5.7	41.9
Bosnia and Herzegovina	3,281	10.9	11.7	22.6	6.3	7.9	14.2	1.4	2.4	3.8	43.1
Bulgaria	6,948	9.9	10.4	20.3	7.0	9.8	16.8	1.6	3.1	4.7	44.6
Canada	37,742	10.3	10.3	20.5	6.6	7.1	13.7	1.8	2.7	4.4	41.1
Croatia	4,105	10.3	10.9	21.2	6.8	8.8	15.5	1.8	3.9	5.7	44.3
Cyprus	1,207	8.7	8.9	17.6	5.3	5.8	11.1	1.3	2.0	3.3	37.3
Czechia	10,709	9.3	9.3	18.6	7.1	8.9	16.0	1.4	2.7	4.2	43.2
Denmark	5,792	10.0	10.0	20.0	7.4	8.0	15.5	1.9	2.8	4.7	42.3
Estonia	1,327	8.9	10.0	18.9	5.5	8.9	14.4	1.6	4.4	6.0	42.4
Finland	5,541	9.7	9.8	19.4	7.9	9.0	16.9	2.0	3.6	5.6	43.1
France	65,274	9.4	9.9	19.3	6.7	7.9	14.6	2.2	3.9	6.2	42.3
Georgia	3,989	8.8	10.6	19.4	4.5	7.0	11.5	1.1	2.6	3.7	38.3
Germany	83,784	11.5	11.6	23.0	6.8	7.9	14.7	2.7	4.3	7.0	45.7
Greece	10,423	10.1	10.8	20.9	6.8	8.0	14.7	3.1	4.4	7.5	45.6
Hungary	9,660	9.0	10.0	19.0	6.4	9.3	15.7	1.3	3.2	4.5	43.3
Iceland	341	9.1	9.2	18.3	5.9	6.0	11.9	1.6	2.2	3.7	37.5
Ireland	4,938	8.5	8.7	17.2	5.5	5.8	11.4	1.3	1.9	3.2	38.2
Israel	8,656	6.4	6.8	13.2	4.4	5.0	9.4	1.2	1.8	3.0	30.5
Italy	60,462	10.9	11.4	22.4	7.4	8.5	15.8	2.8	4.7	7.5	47.3
Kazakhstan	18,777	6.9	8.3	15.2	2.3	3.9	6.3	0.5	1.2	1.6	30.7
Kyrgyzstan	6,524	5.7	6.6	12.3	1.6	2.3	3.9	0.2	0.6	0.8	26.0
Latvia	1,886	9.5	11.4	20.9	5.4	9.6	15.0	1.4	4.3	5.7	43.9
Liechtenstein	38	..	..	..	..	..	..	..	..	..	..
Lithuania	2,722	10.2	12.1	22.3	5.2	9.1	14.3	1.8	4.5	6.3	45.1
Luxembourg	626	10.4	9.7	20.1	5.0	5.4	10.4	1.5	2.4	4.0	39.7
Malta	442	9.5	9.4	18.9	7.9	8.6	16.5	1.8	3.0	4.9	42.6
Monaco	39	..	..	..	..	..	..	..	..	..	..
Montenegro	628	9.4	9.7	19.1	5.5	6.9	12.4	1.3	2.1	3.4	38.8
Netherlands	17,135	10.7	10.6	21.3	7.4	7.8	15.2	1.9	2.9	4.9	43.3
North Macedonia	2,083	9.8	10.0	19.8	5.5	6.5	12.0	1.0	1.5	2.5	39.1
Norway	5,421	9.7	9.2	18.9	6.5	6.8	13.3	1.6	2.6	4.2	39.8
Poland	37,847	9.3	10.0	19.3	6.0	8.1	14.1	1.4	3.2	4.6	41.7
Portugal	10,197	9.9	11.2	21.1	7.1	8.9	16.1	2.4	4.3	6.7	46.2
Republic of Moldova	4,034	8.7	10.6	19.3	4.0	6.3	10.3	0.6	1.6	2.2	37.6
Romania	19,238	9.7	10.4	20.1	6.1	8.4	14.4	1.6	3.2	4.8	43.2
Russian Federation	145,934	8.8	11.1	19.9	4.2	7.4	11.6	0.9	2.9	3.9	39.6
San Marino	34	..	..	..	..	..	..	..	..	..	..
Serbia	8,737	9.2	9.9	19.1	6.7	8.4	15.2	1.5	2.4	3.9	41.6
Slovakia	5,460	9.5	10.1	19.6	5.6	7.8	13.4	1.0	2.3	3.3	41.2
Slovenia	2,079	10.8	10.7	21.5	7.1	8.1	15.2	1.8	3.7	5.5	44.5
Spain	46,755	10.6	10.8	21.4	6.4	7.4	13.7	2.3	3.9	6.3	44.9
Sweden	10,099	9.3	9.1	18.5	7.3	7.7	15.1	2.1	3.1	5.3	41.1
Switzerland	8,655	10.8	10.6	21.5	6.6	7.2	13.8	2.1	3.2	5.3	43.1
Tajikistan	9,538	4.8	5.1	9.9	1.3	1.4	2.7	0.2	0.3	0.5	22.4
Türkiye	84,339	7.0	7.7	14.6	3.2	4.1	7.2	0.6	1.1	1.7	31.5
Turkmenistan	6,031	5.6	6.6	12.2	1.7	2.3	3.9	0.3	0.5	0.8	26.9
Ukraine	43,734	8.9	11.3	20.2	4.6	8.2	12.8	1.1	3.1	4.2	41.2
United Kingdom	67,886	9.5	9.8	19.3	6.5	7.1	13.6	2.1	3.0	5.1	40.5
United States of America	331,003	9.4	9.6	19.0	5.9	6.8	12.7	1.6	2.4	4.0	38.3
Uzbekistan	33,469	6.0	6.7	12.7	1.8	2.2	4.0	0.3	0.5	0.8	27.8
UNECE region	**1,301,671**	**9.3**	**9.9**	**19.2**	**5.5**	**6.9**	**12.4**	**1.6**	**2.8**	**4.4**	**39.5**

Source: United Nations, Department of Economic and Social Affairs, Population Division. World Population Prospects: The 2019 Revision.

Notes and definitions

Definitions:

Median age is the age that divides the population in two parts of equal size, that is, there are as many persons with ages above the median as there are with ages below the median.

Notes:

* Data refer to mid-year population estimates and may differ from national statistics.

Table A1 (cont): Population of UNECE countries in 2020 and projections for 2030 and 2050

2030											
Countries	Total population thousands*	Percentage of population at age									Median age, year
		50-64			65-79			80+			
		Male	Female	Total	Male	Female	Total	Male	Female	Total	
Albania	2,787	8.2	9.0	17.2	7.9	8.7	16.6	1.9	2.2	4.2	40.7
Andorra	78	..	..	..	..	..	..	..	..	..	..
Armenia	2,967	7.0	9.3	16.3	5.6	8.8	14.4	0.8	1.7	2.5	39.8
Austria	9,176	10.0	10.2	20.2	8.0	8.9	16.9	2.8	4.0	6.8	45.5
Azerbaijan	10,740	7.9	8.8	16.7	4.7	6.0	10.7	0.4	0.7	1.1	36.8
Belarus	9,265	8.7	10.2	18.9	6.4	10.7	17.1	0.8	2.6	3.4	43.2
Belgium	11,904	9.6	9.4	19.0	7.9	8.5	16.4	2.7	3.9	6.6	43.7
Bosnia and Herzegovina	3,127	10.3	10.5	20.7	8.7	10.6	19.3	1.7	3.0	4.8	46.6
Bulgaria	6,417	11.1	11.2	22.3	7.3	9.9	17.2	2.1	4.1	6.2	47.1
Canada	40,834	8.8	8.9	17.7	8.1	8.5	16.6	2.6	3.5	6.2	43.0
Croatia	3,877	10.2	10.5	20.7	8.4	10.5	18.9	2.1	4.1	6.2	47.0
Cyprus	1,275	9.3	9.9	19.3	6.5	7.2	13.7	1.9	2.7	4.5	41.6
Czechia	10,745	11.4	11.1	22.5	7.2	8.5	15.7	2.5	4.0	6.5	46.3
Denmark	6,002	9.3	9.4	18.8	7.4	8.0	15.4	3.1	4.1	7.2	42.3
Estonia	1,280	9.6	9.8	19.4	7.0	10.1	17.0	1.9	4.6	6.5	45.0
Finland	5,581	8.9	8.8	17.7	8.2	9.2	17.4	3.5	5.1	8.6	45.1
France	66,696	9.1	9.5	18.6	7.6	8.8	16.4	3.1	4.7	7.8	44.1
Georgia	3,853	8.4	9.8	18.2	5.9	9.1	15.0	1.0	2.5	3.5	40.4
Germany	83,136	9.9	9.9	19.8	8.9	9.9	18.8	3.0	4.4	7.4	47.0
Greece	9,917	11.4	11.7	23.1	8.2	9.8	17.9	3.7	4.9	8.6	49.7
Hungary	9,338	10.9	11.5	22.5	6.7	9.4	16.1	1.8	4.0	5.9	45.9
Iceland	360	8.7	8.7	17.4	7.3	7.6	14.9	2.4	2.8	5.2	40.5
Ireland	5,248	9.9	10.3	20.2	6.4	6.9	13.3	2.2	2.7	4.9	41.5
Israel	9,980	7.1	7.3	14.4	4.6	5.2	9.8	1.6	2.2	3.8	31.3
Italy	59,031	11.5	11.8	23.2	8.9	10.0	18.9	3.6	5.4	9.0	50.8
Kazakhstan	20,639	6.9	7.8	14.7	3.7	5.8	9.5	0.4	1.1	1.5	32.0
Kyrgyzstan	7,446	5.7	6.5	12.2	2.7	3.9	6.6	0.1	0.5	0.6	27.3
Latvia	1,720	9.3	10.6	19.9	7.1	11.2	18.3	1.7	5.0	6.7	46.1
Liechtenstein	39	..	..	..	..	..	..	..	..	..	..
Lithuania	2,485	9.2	10.6	19.9	7.4	11.8	19.2	1.9	5.3	7.2	46.7
Luxembourg	690	10.4	9.6	20.0	6.7	6.8	13.5	1.9	2.6	4.6	41.9
Malta	449	9.5	9.1	18.5	8.5	8.8	17.4	3.4	4.6	8.0	45.8
Monaco	42	..	..	..	..	..	..	..	..	..	..
Montenegro	624	9.0	9.6	18.6	7.0	8.4	15.5	1.3	2.4	3.7	41.3
Netherlands	17,450	9.6	9.6	19.2	8.5	8.9	17.5	3.2	4.0	7.2	44.7
North Macedonia	2,051	10.3	10.3	20.6	7.0	8.1	15.1	1.3	1.9	3.2	42.9
Norway	5,876	9.6	9.0	18.6	7.1	7.2	14.2	2.6	3.4	6.0	41.5
Poland	36,945	9.8	10.2	20.0	7.4	9.7	17.1	2.1	4.0	6.1	46.0
Portugal	9,913	10.8	12.0	22.7	8.3	10.3	18.6	3.2	5.3	8.4	49.8
Republic of Moldova	3,886	8.7	10.1	18.8	5.6	9.1	14.7	0.6	1.7	2.2	42.4
Romania	18,306	11.4	11.8	23.2	6.7	9.1	15.7	1.8	3.5	5.3	45.5
Russian Federation	143,348	8.4	10.1	18.5	5.8	9.9	15.7	1.0	2.9	3.9	42.7
San Marino	34	..	..	..	..	..	..	..	..	..	..
Serbia	8,250	10.0	10.6	20.5	7.2	9.2	16.4	1.8	3.0	4.8	44.1
Slovakia	5,403	10.6	10.7	21.3	7.0	9.2	16.3	1.6	3.1	4.7	45.2
Slovenia	2,056	11.1	10.5	21.6	8.9	9.7	18.6	2.6	4.2	6.8	48.0
Spain	46,230	12.3	12.2	24.4	8.1	9.2	17.4	3.0	4.7	7.7	49.6
Sweden	10,630	9.1	8.9	18.1	7.2	7.4	14.6	3.3	4.2	7.5	42.2
Switzerland	9,185	10.0	9.9	19.9	8.0	8.3	16.3	3.0	4.1	7.1	45.2
Tajikistan	11,557	4.8	5.2	10.1	2.1	2.6	4.7	0.2	0.2	0.4	23.2
Türkiye	89,158	8.2	8.8	17.0	4.4	5.5	9.9	0.9	1.6	2.4	35.0
Turkmenistan	6,782	6.2	7.0	13.2	2.6	3.8	6.3	0.3	0.5	0.8	28.8
Ukraine	40,882	9.4	11.2	20.6	5.9	10.2	16.1	1.0	3.0	3.9	44.5
United Kingdom	70,485	9.1	9.3	18.4	7.2	7.8	15.0	2.8	3.7	6.5	42.4
United States of America	349,642	8.3	8.5	16.8	7.0	7.8	14.8	2.2	3.2	5.4	39.9
Uzbekistan	37,418	6.5	7.2	13.7	3.0	3.9	6.9	0.2	0.4	0.7	31.0
UNECE region	**1,333,235**	**9.0**	**9.5**	**18.4**	**6.8**	**8.3**	**15.0**	**2.1**	**3.3**	**5.4**	**41.8**

Source: United Nations, Department of Economic and Social Affairs, Population Division. World Population Prospects: The 2019 Revision.

Notes and definitions

Definitions:

Median age is the age that divides the population in two parts of equal size, that is, there are as many persons with ages above the median as there are with ages below the median.

Notes:

* Data refer to mid-year population projections (medium fertility variant) and may differ from national projections.

Table A1 (cont): Population of UNECE countries in 2020 and projections for 2030 and 2050

2050											
Countries	Total population thousands*	Percentage of population at age									Median age, year
		50-64			65-79			80+			
		Male	Female	Total	Male	Female	Total	Male	Female	Total	
Albania	2,424	12.9	11.6	24.5	7.8	8.3	16.2	4.1	5.2	9.3	50.0
Andorra	76	..	..	..	..	..	..	..	..	..	..
Armenia	2,816	9.8	11.4	21.2	6.2	9.4	15.6	1.8	4.0	5.7	43.2
Austria	9,131	10.0	9.8	19.8	8.5	9.1	17.6	5.2	6.6	11.8	49.3
Azerbaijan	11,065	10.5	10.7	21.2	6.1	7.5	13.6	1.4	2.5	3.9	40.3
Belarus	8,634	9.7	10.2	19.9	7.0	9.8	16.8	2.0	5.1	7.2	44.0
Belgium	12,221	9.0	8.9	17.8	8.0	8.4	16.4	4.7	5.9	10.5	45.4
Bosnia and Herzegovina	2,685	11.0	10.8	21.8	9.7	10.7	20.4	4.0	6.0	10.0	51.4
Bulgaria	5,385	9.7	9.6	19.3	9.4	11.2	20.6	3.0	5.0	8.0	48.1
Canada	45,669	9.8	9.6	19.4	7.5	7.8	15.3	4.3	5.4	9.7	45.5
Croatia	3,365	10.2	10.1	20.3	9.6	10.7	20.3	4.1	6.4	10.5	50.9
Cyprus	1,355	11.0	10.2	21.2	8.4	9.4	17.8	3.5	4.7	8.2	47.9
Czechia	10,546	9.0	8.9	17.9	9.9	10.5	20.3	3.7	4.9	8.5	46.9
Denmark	6,245	9.4	9.3	18.6	7.1	7.6	14.7	4.3	5.3	9.5	44.2
Estonia	1,158	9.9	9.5	19.4	8.8	10.1	19.0	3.6	6.2	9.8	48.2
Finland	5,486	9.7	9.5	19.2	8.0	8.5	16.6	4.6	6.4	11.0	47.3
France	67,587	8.4	8.9	17.3	7.7	8.7	16.4	4.6	6.8	11.4	45.9
Georgia	3,517	8.8	9.6	18.4	6.5	9.2	15.7	1.9	4.2	6.1	40.9
Germany	80,104	9.8	9.2	19.0	8.4	8.8	17.2	5.6	7.2	12.8	49.2
Greece	9,029	9.1	8.7	17.8	10.7	11.6	22.3	6.0	7.9	13.9	53.4
Hungary	8,470	9.8	9.9	19.7	8.9	10.8	19.8	3.0	5.2	8.2	48.0
Iceland	377	9.7	9.3	19.0	8.0	8.0	16.0	4.1	5.0	9.2	45.1
Ireland	5,678	8.2	8.1	16.2	8.8	9.5	18.3	3.8	4.5	8.3	44.2
Israel	12,720	7.1	6.9	14.0	5.5	5.8	11.3	2.4	2.9	5.3	34.2
Italy	54,382	9.3	8.9	18.2	10.2	10.9	21.1	6.2	8.7	14.9	53.6
Kazakhstan	24,024	7.5	8.2	15.7	4.5	6.1	10.7	1.1	2.4	3.5	34.2
Kyrgyzstan	9,126	7.6	8.1	15.7	3.5	4.8	8.3	0.4	1.4	1.8	31.5
Latvia	1,479	9.0	9.3	18.3	7.6	10.2	17.7	3.2	6.9	10.1	45.8
Liechtenstein	40	..	..	..	..	..	..	..	..	..	..
Lithuania	2,121	9.5	9.8	19.3	7.2	9.7	16.9	3.9	8.2	12.1	48.1
Luxembourg	790	9.8	9.5	19.2	7.9	7.9	15.8	4.0	4.7	8.7	45.0
Malta	427	10.7	10.1	20.8	9.8	9.6	19.4	4.9	6.0	10.9	51.0
Monaco	46	..	..	..	..	..	..	..	..	..	..
Montenegro	589	10.1	9.7	19.8	7.9	9.2	17.1	2.7	4.0	6.7	44.8
Netherlands	17,165	9.5	9.2	18.7	8.0	8.4	16.4	5.3	6.3	11.6	47.4
North Macedonia	1,857	11.2	11.0	22.2	9.1	10.1	19.2	2.7	3.7	6.4	48.3
Norway	6,600	9.6	9.0	18.6	7.7	7.5	15.2	4.0	4.8	8.8	44.1
Poland	33,295	10.1	10.1	20.2	9.8	11.1	20.9	3.9	6.2	10.2	51.2
Portugal	9,085	8.8	9.1	17.9	9.9	11.8	21.6	5.1	8.1	13.2	52.2
Republic of Moldova	3,360	12.3	13.4	25.7	7.5	10.5	18.0	1.3	3.7	5.0	48.9
Romania	16,260	9.8	9.6	19.3	8.7	10.5	19.2	3.3	5.2	8.5	47.4
Russian Federation	135,824	8.5	9.6	18.1	6.6	9.8	16.4	1.8	4.6	6.4	41.7
San Marino	34	..	..	..	..	..	..	..	..	..	..
Serbia	7,084	11.0	10.8	21.7	8.9	10.5	19.4	2.8	4.5	7.3	48.8
Slovakia	4,984	10.1	10.1	20.2	9.6	11.0	20.6	3.2	5.1	8.3	49.1
Slovenia	1,940	8.9	8.5	17.5	10.2	10.1	20.3	5.0	6.9	11.9	49.6
Spain	43,637	8.4	8.3	16.7	11.0	12.0	23.0	5.7	8.2	13.9	53.2
Sweden	11,389	9.3	9.0	18.3	7.6	7.6	15.2	4.3	5.1	9.4	43.8
Switzerland	9,818	9.3	9.2	18.5	8.3	8.7	17.0	5.2	6.4	11.6	47.5
Tajikistan	16,208	6.4	6.7	13.1	2.8	3.4	6.3	0.5	0.8	1.2	26.9
Türkiye	97,140	9.2	9.3	18.5	7.1	8.0	15.1	2.3	3.5	5.7	41.7
Turkmenistan	7,949	7.8	8.6	16.5	3.7	5.0	8.7	0.6	1.3	1.9	33.0
Ukraine	35,219	9.9	11.0	20.9	7.8	11.4	19.2	1.8	4.6	6.4	46.6
United Kingdom	74,082	9.2	9.2	18.4	7.7	8.1	15.8	4.3	5.2	9.5	44.5
United States of America	379,419	9.2	9.2	18.4	6.6	7.1	13.7	3.8	4.8	8.6	42.7
Uzbekistan	42,942	9.3	9.6	18.8	4.5	5.6	10.1	0.7	1.3	2.1	35.4
UNECE region	**1,364,059**	**9.1**	**9.3**	**18.4**	**7.4**	**8.4**	**15.8**	**3.6**	**5.1**	**8.7**	**43.9**

Source: United Nations, Department of Economic and Social Affairs, Population Division. World Population Prospects: The 2019 Revision.

Notes and definitions

Definitions:

Median age is the age that divides the population in two parts of equal size, that is, there are as many persons with ages above the median as there are with ages below the median.

Notes:

* Data refer to mid-year population projections (medium fertility variant) and may differ from national projections.

Table A2. Fertility and adult mortality rates in UNECE countries in 2000, 2010 and 2020

Countries	Total fertility rate			Adult mortality								
	2000	2010	2020	2000			2010			2020		
				Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	2.4	1.6	1.6	140.1	71.8	107.4	105.9	59.5	83.3	94.5	49.9	72.2
Armenia	1.8	1.7	1.8	219.7	110.3	162.0	200.7	90.8	141.9	175.0	66.3	116.4
Austria	1.4	1.4	1.5	133.8	64.1	99.5	103.7	51.1	77.6	82.5	44.3	63.6
Azerbaijan	2.3	1.8	2.1	241.4	114.4	177.6	191.5	91.9	141.1	150.3	89.9	119.6
Belarus	1.3	1.4	1.7	366.0	131.2	251.2	344.7	118.3	233.3	224.3	78.5	150.3
Belgium	1.6	1.8	1.7	131.6	69.9	101.3	109.4	61.5	85.8	88.1	53.0	70.9
Bosnia and Herzegovina	1.7	1.3	1.3	171.9	88.5	130.0	141.5	72.3	107.0	116.9	60.6	88.7
Bulgaria	1.2	1.5	1.6	236.3	100.6	169.5	210.3	90.4	151.3	184.7	85.3	136.5
Canada	1.6	1.6	1.5	108.5	63.5	86.3	90.2	55.4	73.0	76.2	48.2	62.3
Croatia	1.6	1.5	1.4	179.3	72.3	126.5	150.4	62.5	107.1	119.4	50.5	85.2
Cyprus	1.9	1.5	1.3	94.9	50.0	72.8	81.5	41.7	61.7	65.9	33.3	49.7
Czechia	1.2	1.4	1.6	183.8	79.1	132.1	144.0	64.8	105.0	105.0	53.3	79.8
Denmark	1.8	1.9	1.8	133.1	84.7	109.5	110.8	67.2	89.4	87.3	53.1	70.4
Estonia	1.3	1.7	1.6	349.7	120.9	236.5	259.1	90.0	174.1	153.0	56.9	105.2
Finland	1.7	1.8	1.5	149.8	62.2	107.3	129.6	57.0	94.2	98.4	44.8	72.2
France	1.8	2.0	1.9	146.0	63.4	105.4	120.4	55.3	87.9	101.5	50.4	75.8
Georgia	1.7	1.8	2.1	247.3	103.3	173.4	265.6	95.7	179.0	223.8	78.1	150.2
Germany	1.3	1.4	1.6	133.4	66.3	100.8	106.0	55.2	81.1	94.1	48.8	71.9
Greece	1.3	1.4	1.3	118.1	51.3	85.2	110.4	45.9	78.4	95.8	43.2	69.5
Hungary	1.4	1.3	1.5	292.4	121.6	207.4	239.0	102.1	170.4	170.1	76.4	123.0
Iceland	2.1	2.1	1.8	92.8	60.3	76.9	70.8	44.2	57.8	59.1	35.1	47.3
Ireland	1.9	2.0	1.8	122.5	69.5	96.5	92.1	55.7	74.1	73.6	46.6	60.1
Israel	2.9	2.9	3.0	103.3	57.8	80.3	83.4	46.3	64.5	65.1	38.1	51.5
Italy	1.2	1.4	1.3	109.6	53.9	81.9	80.5	42.6	61.5	61.6	36.4	49.0
Kazakhstan	2.0	2.5	2.8	421.2	178.0	302.7	380.4	154.7	269.2	222.9	95.4	158.3
Kyrgyzstan	3.0	2.8	3.0	297.8	149.7	225.3	302.7	139.8	222.4	212.5	95.0	153.3
Latvia	1.2	1.5	1.7	358.5	132.8	245.8	304.6	111.5	207.2	229.4	88.9	158.9
Lithuania	1.5	1.4	1.7	326.8	117.0	222.1	304.7	107.5	206.1	238.7	80.4	159.7
Luxembourg	1.7	1.6	1.5	138.0	70.9	105.6	106.4	58.6	83.2	75.0	44.8	60.5
Malta	1.8	1.4	1.5	85.7	48.8	67.2	74.0	42.1	58.3	64.9	35.5	50.6
Montenegro	1.9	1.8	1.8	179.5	96.8	138.0	159.4	92.9	126.5	126.8	66.9	97.1
Netherlands	1.6	1.7	1.7	102.2	67.0	85.1	78.7	58.0	68.5	66.8	44.1	55.6
North Macedonia	1.8	1.5	1.5	161.3	93.9	128.0	146.6	79.3	113.6	121.1	64.2	93.2
Norway	1.9	1.9	1.7	106.6	62.1	85.0	83.3	51.8	68.0	70.2	43.5	57.3
Poland	1.5	1.4	1.4	236.7	90.4	164.5	200.8	77.2	139.9	155.4	60.4	108.8
Portugal	1.5	1.4	1.3	163.9	69.9	116.6	129.0	53.3	90.7	99.3	41.7	69.6
Republic of Moldova	1.7	1.3	1.3	330.7	167.0	247.8	307.5	149.0	227.7	239.2	96.5	167.0
Romania	1.3	1.5	1.6	269.0	118.1	195.0	219.1	92.7	156.8	173.6	74.1	124.7
Russian Federation	1.2	1.5	1.8	418.3	151.1	290.1	412.7	152.6	286.2	289.9	111.1	200.2
Serbia	1.8	1.6	1.5	195.6	103.1	150.0	183.1	91.5	137.7	143.4	75.8	109.6
Slovakia	1.4	1.3	1.5	224.5	86.4	155.4	192.5	75.3	134.5	145.7	61.6	104.2
Slovenia	1.2	1.4	1.6	178.6	78.0	130.0	135.4	56.2	97.5	90.2	44.0	67.9
Spain	1.2	1.5	1.3	126.7	50.6	89.1	98.2	42.9	70.9	74.6	36.1	55.5
Sweden	1.6	1.9	1.9	92.3	56.7	74.9	76.3	47.7	62.3	63.6	39.9	52.0
Switzerland	1.5	1.5	1.5	106.9	57.0	82.3	78.8	44.8	62.0	59.3	36.0	47.8
Tajikistan	4.3	3.6	3.6	267.8	216.3	243.0	203.6	143.5	173.8	166.2	97.8	132.0
Türkiye	2.6	2.2	2.1	210.4	108.2	159.5	163.5	82.8	122.3	121.4	63.4	92.2
Turkmenistan	3.0	2.7	2.8	313.2	172.4	243.5	273.4	148.2	209.8	245.0	129.4	186.3
Ukraine	1.2	1.4	1.4	374.5	138.5	258.7	382.6	142.6	264.1	275.8	103.5	188.8
United Kingdom	1.7	1.9	1.8	114.2	69.7	92.1	96.4	59.7	78.1	82.8	53.8	68.3
United States of America	2.0	2.1	1.8	150.7	85.3	118.2	137.7	79.5	108.9	139.9	82.8	111.9
Uzbekistan	3.1	2.5	2.4	249.4	143.5	197.4	219.9	126.2	173.0	170.5	101.8	135.6
UNECE region	**1.7**	**1.8**	**1.8**	**211.6**	**95.0**	**154.0**	**190.7**	**86.8**	**139.3**	**147.3**	**72.0**	**109.9**

Source: United Nations, Department of Economic and Social Affairs, Population Division. World Population Prospects: The 2019 Revision.

Definitions:

Total fertility rate is the estimated average number of children that would be born alive to a woman during her lifetime if she were to pass through her childbearing years conforming to the age-specific fertility rates of a given year.

Adult mortality rate is the probability of dying between the ages of 15 and 60 per 1,000 persons.

Table A3. Life expectancy in UNECE countries, at birth and at age 65, in 2000, 2010 and 2020

Countries	Life expectancy at birth									Life expectancy at 65								
	2000			2010			2020			2000			2010			2020		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	70.2	76.1	73.0	73.2	78.5	75.6	76.7	80.1	78.4	13.5	16.8	15.1	14.3	17.8	16.0	16.9	18.4	17.7
Armenia	66.8	73.4	70.2	69.4	75.8	72.7	71.1	78.3	74.9	13.2	16.1	14.9	13.6	16.5	15.2	14.0	17.2	15.8
Austria	74.2	80.6	77.5	77.3	82.8	80.1	78.9	83.8	81.4	15.3	19.0	17.5	17.4	20.7	19.2	18.1	21.4	19.8
Azerbaijan	62.7	69.8	66.2	66.9	73.4	70.1	70.3	75.3	72.8	12.5	15.3	14.1	12.7	15.8	14.4	13.5	15.9	14.8
Belarus	62.0	73.1	67.4	63.6	75.2	69.3	69.3	79.3	74.5	10.5	14.5	12.9	10.8	15.7	13.7	12.8	18.2	16.0
Belgium	74.1	80.6	77.4	76.8	82.3	79.6	79.0	83.7	81.4	15.2	19.4	17.4	17.0	20.6	19.0	18.4	21.6	20.1
Bosnia and Herzegovina	70.9	76.1	73.6	72.9	78.1	75.5	74.7	79.7	77.2	13.6	16.0	15.0	14.4	17.2	16.0	15.1	17.9	16.6
Bulgaria	67.5	74.6	71.0	69.7	76.8	73.1	71.3	78.5	74.8	12.6	15.2	14.0	13.4	16.5	15.1	14.1	17.7	16.1
Canada	75.8	81.3	78.6	78.4	83.0	80.8	80.2	84.3	82.2	16.2	20.0	18.2	18.2	21.3	19.8	19.3	22.2	20.8
Croatia	70.9	78.1	74.6	72.6	79.5	76.1	75.0	81.4	78.2	13.4	16.9	15.5	14.0	17.9	16.2	15.4	19.2	17.5
Cyprus	75.6	79.8	77.7	76.9	81.1	79.0	78.7	82.8	80.7	15.4	17.8	16.6	15.8	18.5	17.2	17.0	19.9	18.5
Czechia	70.7	77.7	74.2	73.8	80.1	77.0	76.5	81.8	79.1	13.2	16.6	15.2	15.0	18.4	16.9	16.4	19.6	18.1
Denmark	73.7	78.6	76.1	76.4	80.8	78.6	78.7	82.7	80.7	14.7	17.9	16.4	16.5	19.3	18.0	17.9	20.6	19.3
Estonia	63.6	75.3	69.4	68.3	79.0	73.8	74.0	82.5	78.5	12.2	16.5	14.9	13.5	18.6	16.5	15.7	20.6	18.6
Finland	73.4	80.7	77.1	76.1	82.9	79.5	78.8	84.5	81.6	14.9	19.0	17.3	17.0	21.0	19.2	18.5	22.0	20.4
France	74.6	82.3	78.4	77.5	84.3	81.0	79.4	85.4	82.5	16.3	20.9	18.8	18.2	22.4	20.5	19.4	23.2	21.5
Georgia	65.5	73.4	69.5	66.2	75.3	70.7	69.1	77.9	73.5	12.5	15.4	14.2	12.3	16.0	14.3	13.1	17.2	15.4
Germany	74.0	80.4	77.3	77.0	82.4	79.7	78.7	83.6	81.1	15.1	18.9	17.3	17.0	20.4	18.9	18.3	21.3	19.9
Greece	75.4	80.8	78.1	77.3	82.8	80.0	79.5	84.5	82.0	16.2	18.9	17.6	17.6	20.4	19.1	19.2	21.9	20.6
Hungary	66.5	75.4	70.9	69.6	77.8	73.7	73.0	80.1	76.6	12.4	16.2	14.6	13.6	17.6	15.9	14.9	19.0	17.2
Iceland	77.0	81.3	79.1	79.6	83.2	81.4	81.2	84.3	82.8	16.6	19.5	18.1	18.3	20.7	19.5	19.4	21.4	20.4
Ireland	73.3	78.8	76.0	77.4	82.0	79.7	80.4	83.7	82.0	14.0	17.6	15.9	17.0	20.1	18.6	19.2	21.4	20.3
Israel	76.2	80.3	78.3	79.0	82.8	80.9	81.0	84.3	82.7	16.5	18.7	17.7	18.3	20.5	19.5	19.6	21.6	20.7
Italy	75.6	81.9	78.8	78.8	84.1	81.5	81.0	85.4	83.3	16.0	20.1	18.2	17.9	21.6	19.9	19.3	22.5	21.0
Kazakhstan	57.5	69.0	63.0	60.6	71.9	66.1	68.8	77.4	73.2	10.6	14.6	13.0	10.7	15.1	13.2	13.1	17.4	15.6
Kyrgyzstan	62.0	70.0	65.9	63.5	71.7	67.5	67.2	75.4	71.2	12.1	15.1	13.9	11.6	14.7	13.3	11.0	15.8	13.5
Latvia	62.9	74.5	68.7	66.0	77.0	71.6	69.9	79.8	75.1	12.0	16.4	14.8	12.7	17.5	15.6	14.2	19.5	17.4
Lithuania	64.5	76.1	70.3	66.0	77.8	71.9	70.0	81.1	75.7	12.2	17.2	15.1	12.4	18.1	15.7	14.7	20.5	18.1
Luxembourg	73.6	80.2	77.0	76.7	82.2	79.5	79.8	84.2	82.0	14.8	19.2	17.3	16.7	20.4	18.7	18.7	21.7	20.3
Malta	76.2	80.9	78.6	78.1	82.4	80.3	80.4	84.1	82.3	15.8	18.9	17.4	17.1	20.1	18.7	19.0	21.5	20.3
Montenegro	70.6	76.2	73.4	71.9	76.5	74.2	74.2	79.1	76.7	13.5	16.2	15.0	14.0	16.3	15.2	14.4	17.4	16.0
Netherlands	75.1	80.5	77.8	78.0	82.2	80.2	80.3	83.8	82.1	15.0	19.1	17.2	17.0	20.4	18.8	18.8	21.2	20.1
North Macedonia	70.4	75.0	72.7	72.1	76.3	74.2	73.6	77.7	75.6	13.2	15.1	14.2	13.7	15.4	14.6	14.4	16.5	15.5
Norway	75.5	81.1	78.3	78.3	82.8	80.6	80.2	84.2	82.2	15.6	19.5	17.7	17.5	20.7	19.3	18.8	21.7	20.3
Poland	68.4	77.1	72.7	71.3	79.8	75.6	74.5	82.4	78.5	13.0	16.8	15.2	14.6	18.8	17.0	16.3	20.7	18.7
Portugal	72.4	79.6	76.0	76.0	82.5	79.3	78.7	84.6	81.8	15.0	18.6	17.0	16.8	20.5	18.8	18.4	22.0	20.3
Republic of Moldova	62.7	70.5	66.6	64.4	72.1	68.3	67.4	75.9	71.7	11.4	13.9	12.9	11.4	14.2	13.0	12.0	16.2	14.3
Romania	66.1	73.6	69.7	69.5	76.7	73.1	72.4	79.3	75.8	12.8	15.3	14.1	13.8	16.8	15.5	14.9	18.3	16.8
Russian Federation	59.6	72.3	65.7	61.0	73.7	67.1	66.8	77.5	72.3	11.1	15.1	13.6	11.5	16.0	14.2	13.3	18.1	16.2
Serbia	69.1	74.8	71.9	70.8	76.2	73.4	73.2	78.4	75.8	12.8	15.4	14.2	13.2	15.5	14.4	14.3	17.1	15.8
Slovakia	68.7	76.8	72.7	70.8	78.6	74.8	73.7	80.8	77.3	12.7	16.4	14.7	13.7	17.5	15.9	15.2	19.1	17.4
Slovenia	71.3	79.0	75.3	75.0	82.0	78.6	78.3	83.9	81.1	13.9	18.0	16.3	16.0	20.0	18.3	17.6	21.3	19.6
Spain	75.2	82.3	78.8	78.1	84.4	81.2	80.6	86.1	83.4	16.3	20.3	18.5	17.8	21.8	20.0	19.4	23.2	21.4
Sweden	76.8	81.8	79.3	79.0	83.1	81.1	80.8	84.4	82.6	16.3	19.9	18.2	17.8	20.8	19.4	19.1	21.7	20.4
Switzerland	76.1	82.2	79.2	79.3	84.1	81.8	81.6	85.4	83.6	16.5	20.4	18.6	18.5	21.8	20.3	19.9	22.7	21.4
Tajikistan	58.3	62.0	60.1	65.6	70.1	67.7	68.6	73.1	70.8	11.8	12.9	12.4	12.5	14.4	13.4	12.4	14.3	13.4
Türkiye	64.7	72.5	68.5	69.9	76.9	73.4	74.3	80.2	77.3	13.3	16.7	15.1	14.1	17.8	16.0	16.2	19.6	18.0
Turkmenistan	59.2	67.3	63.2	62.2	69.6	65.9	64.5	71.5	68.0	12.1	15.0	13.7	12.6	15.2	14.0	12.9	15.5	14.3
Ukraine	61.9	73.0	67.4	62.3	73.8	67.9	66.8	76.6	71.8	11.5	15.0	13.7	11.8	15.7	14.1	12.5	16.8	15.1
United Kingdom	74.6	79.6	77.2	77.5	81.8	79.7	79.4	82.9	81.2	15.1	18.4	16.9	17.4	20.1	18.8	18.7	20.9	19.8
United States of America	73.5	79.3	76.5	75.7	80.7	78.2	76.3	81.3	78.8	15.8	19.1	17.6	17.5	20.1	18.9	18.4	20.9	19.7
Uzbekistan	63.6	69.9	66.7	66.1	72.2	69.1	69.4	73.6	71.5	13.4	16.0	14.9	13.4	16.0	14.8	12.9	15.0	14.0
UNECE region	**69.1**	**76.9**	**73.0**	**71.9**	**79.1**	**75.5**	**75.0**	**81.1**	**78.1**	**14.4**	**17.8**	**16.3**	**15.8**	**19.0**	**17.6**	**17.2**	**20.3**	**18.9**

Source: United Nations, Department of Economic and Social Affairs, Population Division. World Population Prospects: The 2019 Revision.

Definitions:

Life expectancy at birth is the average number of years a newborn is expected to live if the prevailing patterns of mortality at the time of his/her birth were to stay the same throughout his/her life.

Life expectancy at 65 is the average number of years a person at the age of 65 is expected to live if the prevailing patterns of mortality at the time when he/she has reached the age of 65 stay the same throughout the rest of his/her life.

INDICATORS OF ACTIVE AGEING

PARTICIPATION IN THE LABOUR MARKET

Table A4: Statutory retirement age and average effective labour market exit age

Countries	Retirement age				Average effective labour market age			
	2015[a]		2020		2015		2020	
	Male	Female	Male	Female	Male	Female	Male[b]	Female[bc]
Albania	65.0	60.0	65.0	61.0	..	..	..	..
Armenia	63.0	63.0	63.0	63.0	..	..	..	..
Austria	65.0	60.0	65.0	60.0	60.5	59.3	62.0	60.7
Azerbaijan	63.0	60.0	65.0	62.0	..	..	..	..
Belarus	60.0	55.0	62.0	57.0	..	..	..	..
Belgium	65.0	65.0	65.0	65.0	59.2	58.9	60.9	60.1
Bosnia and Herzegovina	65.0	65.0	65.0	65.0	..	..	..	..
Bulgaria	63.7	60.7	64.3	61.5	61.6	60.6	64.5	61.7
Canada	65.0	65.0	65.0	65.0	63.4	61.8	63.9	62.6
Croatia	65.0	61.5	65.0	62.5	61.2	60.7	61.1	58.0
Cyprus	65.0	65.0	65.0	65.0	64.0	61.5	64.6	59.4
Czechia	62.7	61.3	63.7	63.7	62.0	60.1	63.1	61.5
Denmark	65.0	65.0	65.5	65.5	62.3	60.5	63.8	63.5
Estonia	63.0	62.5	63.8	63.8	61.8	62.6	64.1	65.4
Finland	65.0	65.0	65.0	65.0	61.3	62.2	63.0	63.6
France	62 / 67	62 / 67	62 / 67	62 / 67	58.9	59.5	60.4	60.9
Georgia	65.0	60.0	65.0	60.0	..	..	..	..
Germany	65.3	65.3	65.7	65.7	61.9	61.6	63.1	63.2
Greece	62 / 67	62 / 67	62 / 67	62 / 67	60.8	59.1	60.9	58.1
Hungary	62.5	62.5	64.5	64.5	62.5	59.7	62.1	59.7
Iceland	67.0	67.0	67.0	67.0	68.2	67.1	66.0	63.5
Ireland	66.0	66.0	66.0	66.0	64.7	62.3	63.6	63.8
Israel	67.0	62.0	67.0	62.0	66.2	65.5	65.4	64.8
Italy	66.3	6.3 / 63.	67.0	67.0	60.4	59.9	62.3	61.3
Kazakhstan	63.0	58.0	63.0	59.5	..	..	..	..
Kyrgyzstan	63.0	58.0	63.0	58.0	..	..	..	..
Latvia	62.5	62.5	63.8	63.8	60.6	59.9	66.3	64.5
Liechtenstein	64.0	64.0	65.0	65.0	..	..	..	..
Lithuania	63.2	61.3	64.0	63.0	62.2	61.6	63.4	63.0
Luxembourg	65.0	65.0	65.0	65.0	59.3	58.4	59.2	60.1
Malta	62.0	62.0	63.0	63.0	60.6	62.2	62.4	62.4
Monaco	60.0	60.0	65.0	65.0	..	..	..	..
Montenegro	65.5	60.8	66.0	61.8	..	..	..	..
Netherlands	65.3	65.3	66.3	66.3	62.7	60.9	63.9	62.8
North Macedonia	64.0	62.0	64.0	62.0	..	..	..	..
Norway	67.0	67.0	67.0	67.0	64.0	63.6	64.9	63.1
Poland	65.8	60.8	65.0	60.0	60.6	58.4	62.2	60.1
Portugal	66.0	66.0	66.4	66.4	64.2	63.4	64.9	63.3
Republic of Moldova	62.0	57.0	63.0	59.0	..	..	..	..
Romania	65.0	60.3	65.0	61.3	63.0	61.3	65.4	64.6
Russian Federation	60.0	55.0	61.5	56.5	62.0	59.1	62.0	59.8
Serbia	65.0	60.5	65.0	63.0	..	..	..	..
Slovakia	62.0	62.0	62.7	62.7	60.4	58.8	60.2	59.8
Slovenia	64.5	62.5	65.0	65.0	61.2	58.8	61.5	60.5
Spain	65.0	65.0	65.8	65.8	61.6	62.1	61.0	60.4
Sweden	61 / 65	61 / 65	62 / 68	62 / 68	64.7	63.9	65.8	64.9
Switzerland	65.0	64.0	65.0	64.0	64.3	63.3	65.4	64.1
Tajikistan	63.0	58.0	63.0	58.0	..	..	..	..
Türkiye	52 / 60	49 / 58	52 / 60	49 / 58	60.9	62.3	60.7	59.3
Turkmenistan	62.0	57.0	62.0	57.0	..	..	..	..
Ukraine	60.0	57.0	60.0	59.5	..	..	..	..
United Kingdom	65.0	62.5	66.0	66.0	63.0	61.8	63.7	63.2
United States of America	66.0	66.0	66.0	66.0	63.3	62.7	64.9	64.7
Uzbekistan	60.0	55.0	60.0	55.0	..	..	..	..
UNECE region*	**52-67**	**49-67**	**52-68**	**49-68**	**62.1**	**61.2**	**63.1**	**62.3**

Source: Organisation for Economic Co-operation and Development, national reports and sources.

Notes and definitions

Definitions:

Statutory retirement age is an age set by national laws at which one can retire without losses in pension benefits. In some countries deviations may apply for specific occupations, family circumstances, years of contribution etc. A more detailed definition of the calculation used to establish the statutory retirment age in OECD countries in 2020 is available from https://stats.oecd.org/Index.aspx?QueryId=111939.

In a number of countries pension reforms are being implemented and the statutory retirement age is being increased gradually (see notes b and c). For more information on individual countries' situation see OECD country profiles of pension systems available from https://www.oecd.org/publications/oecd-pensions-at-a-glance-19991363.htm and UNECE national reports on the implementation of MIPAA/RIS available from https://unece.org/mipaa20-country-reports.

Average effective labour market exit age is the average age of exit from the labour fource for workers aged 40 and over.

Notes:

* For retirement age, figures refer to the range of the lowest and the highest age in the region; for average effective labour market exit age, data refer to the weighted average for countries with data available.

[a] For Bulgaria, Czechia and Estonia data refer to 2014; for Croatia and Montenegro data refer to 2016.

[b] Retirement ages for both men and women are undergoing incremental increase in Belarus, Bulgaria, Czechia, Denmark, Estonia, Germany, Hungary, Latvia, Lithuania, Portugal, Russian Federation, Slovakia, Spain, therefore, current 2022 retirement ages may be somewhat higher than the 2020 figures indicated in the table.

[c] Retirement ages for women are undergoing incremental increase in Albania, Azerbaijan, Croatia, Kazakhstan, Montenegro, Republic of Moldova, Romania, Serbia, Ukraine, therefore, current 2022 retirement ages may be somewhat higher than the 2020 figures indicated in the table.

Table A5. Employment rate by age group and sex in 2000, 2010 and 2020

Countries	Age group 25-49									Age group 50-54								
	2000[a]			2010[b]			2020[c]			2000[d]			2010[e]			2020[f]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	..	..	..	..	..	..	..	79.1	61.1	70.3	80.5	68.9	74.5
Armenia	..	..	..	..	..	..	..	..	..	..	..	..	78.3	56.2	66.2	69.4	50.7	58.7
Austria	90.7	75.5	83.1	88.4	79.9	84.1	86.8	80.7	83.8	83.7	60.6	72.1	84.3	73.9	79.1	87.3	81.4	84.3
Azerbaijan	..	..	..	..	..	..	..	..	..	87.1	88.4	87.8	94.7	76.6	85.3	95.7	91.9	93.7
Belarus	..	..	..	..	..	..	91.2	92.3	91.8	..	..	..	..	..	..	86.2	90.4	88.5
Belgium	89.9	71.8	81.0	86.0	76.2	81.2	84.5	77.0	80.8	76.3	45.6	61.0	83.1	65.7	74.4	82.6	73.4	78.1
Bosnia and Herzegovina	..	..	..	65.6	39.2	52.5	71.6	48.1	60.0	..	..	..	54.4	32.9	43.2	70.1	38.0	53.4
Bulgaria	73.0	68.1	70.5	78.4	72.6	75.5	84.6	75.5	80.2	67.6	63.8	65.6	73.6	72.4	73.0	83.6	80.9	82.2
Canada	86.5	75.1	80.8	84.3	77.3	80.8	87.0	79.9	83.5	81.9	67.1	74.5	82.0	75.3	78.7	83.0	75.8	79.4
Croatia	79.0	66.0	72.4	77.7	70.7	74.3	84.2	75.4	79.9	71.2	45.2	57.5	69.9	60.1	64.9	71.4	70.4	70.9
Cyprus	92.8	66.0	79.1	88.8	78.3	83.3	87.0	78.1	82.5	91.0	51.8	71.2	85.8	67.4	76.5	87.4	66.0	76.6
Czechia	90.2	73.1	81.8	91.2	71.8	81.8	93.9	76.7	85.6	84.5	76.3	80.4	86.7	82.0	84.3	93.2	90.5	91.9
Denmark	89.2	80.9	85.1	85.3	79.7	82.5	85.5	77.6	81.6	83.9	77.9	80.8	83.8	80.9	82.4	87.0	81.4	84.2
Estonia	80.0	74.5	77.2	76.8	73.3	75.0	87.8	77.0	82.6	68.3	73.9	71.3	70.8	77.3	74.3	85.3	84.9	85.1
Finland	85.5	77.1	81.4	84.6	78.4	81.6	85.1	78.7	82.0	80.7	79.5	80.1	80.3	82.7	81.5	82.7	86.1	84.4
France	88.0	70.3	79.0	87.5	76.9	82.1	85.1	76.3	80.6	83.8	66.2	74.9	86.6	76.2	81.3	84.8	78.6	81.6
Georgia	..	..	..	..	..	..	..	..	..	..	..	..	76.3	68.2	72.1	60.2	49.9	54.9
Germany	88.0	72.2	80.2	87.2	76.4	81.8	88.0	81.8	84.9	83.8	64.7	74.3	85.0	76.2	80.6	89.0	82.3	85.7
Greece	89.4	55.1	72.2	85.8	63.1	74.4	79.5	61.4	70.6	84.6	40.1	62.1	82.6	50.7	66.5	80.3	59.5	69.7
Hungary	80.7	67.4	74.0	79.6	66.6	73.1	90.0	74.2	82.2	69.7	63.2	66.4	69.0	69.4	69.2	88.9	84.2	86.5
Iceland	96.0	86.6	91.3	85.6	78.5	82.1	86.9	82.2	84.7	96.3	92.7	94.6	89.5	85.2	87.4	89.6	79.1	84.4
Ireland	89.0	65.2	77.1	75.4	65.6	70.5	85.8	72.6	79.1	82.7	45.7	64.4	74.0	62.4	68.2	83.0	70.1	76.5
Israel	78.0	63.6	70.7	78.6	69.4	74.0	83.4	77.4	80.4	78.1	59.0	68.2	77.4	66.1	71.5	80.8	75.3	78.0
Italy	85.6	53.0	69.4	83.3	59.4	71.3	79.0	58.7	68.9	78.9	37.7	58.1	85.1	55.1	69.8	84.2	60.9	72.4
Kazakhstan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	85.9	82.9	84.3
Kyrgyzstan	..	..	..	..	..	..	..	..	..	..	..	..	79.9	61.1	70.0	81.4	62.4	71.8
Latvia	76.0	72.1	74.0	72.4	74.1	73.3	84.3	80.2	82.3	69.9	69.8	69.8	67.8	71.0	69.5	81.0	82.6	81.9
Liechtenstein	..	..	..	..	..	..	..	..	..	90.9	59.1	75.6	87.8	66.6	77.1	89.3	74.8	81.9
Lithuania	75.4	76.7	76.1	71.3	76.7	74.1	84.9	83.5	84.2	68.6	75.0	72.1	70.2	72.0	71.2	79.8	83.1	81.5
Luxembourg	94.0	65.6	80.1	92.9	74.6	83.8	88.3	80.4	84.4	85.2	46.2	66.4	86.7	61.1	74.2	86.1	77.4	82.0
Malta	90.2	35.6	63.1	89.5	51.6	71.0	93.0	76.6	85.5	82.8	22.0	52.5	86.9	29.0	57.9	90.1	70.8	80.9
Monaco	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	82.0	60.3	71.3
Montenegro	..	..	..	65.2	55.0	60.1	67.5	57.6	62.6	..	..	..	63.6	52.4	58.0	67.9	49.8	58.7
Netherlands	93.3	73.7	83.6	91.1	79.5	85.3	89.0	81.8	85.4	86.7	55.5	71.4	87.1	73.1	80.1	88.7	78.2	83.5
North Macedonia	..	..	..	65.7	45.5	55.7	75.0	58.9	67.1	..	..	..	68.3	43.2	56.0	75.4	51.1	63.3
Norway	89.7	82.3	86.1	87.2	82.3	84.8	85.3	80.4	82.9	87.0	78.4	82.8	86.4	81.8	84.1	82.7	80.1	81.5
Poland	79.7	65.9	72.8	84.6	73.1	78.9	90.9	76.7	83.9	65.7	57.4	61.4	73.0	65.7	69.2	82.2	76.9	79.5
Portugal	90.7	76.3	83.4	84.5	75.6	80.0	86.4	82.9	84.6	84.8	59.8	71.8	81.7	68.8	75.0	88.5	76.8	82.3
Republic of Moldova	..	..	..	52.6	52.9	52.7	..	..	..	..	..	..	57.5	58.5	58.0	52.3	59.4	56.1
Romania	85.7	74.2	79.9	86.3	70.6	78.6	89.8	71.7	81.1	77.4	63.3	70.3	76.8	58.3	67.4	87.0	69.7	78.6
Russian Federation	..	..	..	..	..	..	..	..	..	79.8	73.5	76.5	82.1	78.6	80.2	86.2	83.9	85.0
Serbia	..	..	..	72.1	57.9	65.0	80.8	69.3	75.1	..	..	..	64.7	51.1	57.6	78.3	68.1	73.1
Slovakia	79.8	70.2	75.1	82.1	69.7	76.0	87.3	72.5	80.1	74.4	63.9	69.0	77.6	71.9	74.7	83.9	82.5	83.2
Slovenia	86.7	84.4	85.6	86.1	83.8	85.0	90.9	85.7	88.5	77.7	51.2	64.4	80.7	73.9	77.3	88.0	84.9	86.4
Spain	86.3	53.4	69.9	75.9	65.1	70.6	78.7	68.0	73.4	82.6	35.5	58.8	75.4	56.6	65.9	79.4	64.4	71.9
Sweden	84.1	80.3	82.2	87.4	80.7	84.1	87.4	81.3	84.4	84.0	83.6	83.8	85.3	82.0	83.7	89.7	86.3	88.0
Switzerland	95.2	75.9	85.7	91.0	77.8	84.4	91.5	82.6	87.1	94.8	73.7	83.7	89.0	78.5	83.9	91.0	82.1	86.6
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..	76.2	36.3	55.7	65.7	44.4	54.3
Türkiye	..	..	..	83.3	31.2	57.4	80.3	37.4	58.9	66.1	24.9	45.6	60.2	22.0	41.1	66.9	27.8	47.6
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	72.0	70.7	71.3
United Kingdom	88.5	73.6	81.0	85.9	74.0	79.9	90.8	79.5	85.1	82.3	70.7	76.5	82.3	75.7	79.0	86.4	80.0	83.2
United States of America	89.1	74.6	..	86.9	71.2	..	..	..	..	84.6	72.5	78.4	77.9	69.7	73.7	80.1	68.3	74.0
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
UNECE region*	**87.5**	**70.5**	**77.5**	**84.8**	**68.3**	**75.5**	**85.3**	**70.2**	**77.8**	**81.1**	**63.9**	**72.3**	**79.4**	**68.3**	**73.7**	**82.2**	**71.4**	**76.7**

Source: Eurostat, Organisation for Economic Co-operation and Development.

Notes and definitions

Definitions:

Employment rate (employment-to-population ratio) is the share (in per cent) of employed people of a given age in the total number of people in that same age group.

Data generally come from labour force surveys, where the **persons in employment** or the **employed population** comprise all those of working age who, in a short reference period, were engaged in any activity to produce goods or provide services for pay or profit (in cash or in kind) (International Labour Organization).

Notes:

* Weighted average for countries with data available.

[a] For Croatia data refer to 2002.

[b] For United States of America data refer to 2006; Montenegro data refer to 2011.

[c] For the Belarus, Bosnia and Herzegovina, Canada, Israel, United Kindgdom data refer to 2019.

[d] For Croatia data refer to 2002.

[e] For Tajikistan data refer to 2009; for Montenegro data refer to 2011.

[f] for Monaco, Tajikistan data refer to 2016; for Liechtenstein, Ukraine data refer to 2017; for Kyrgyzstan data refer to 2018; for Albania, Armenia, Azerbaijan, Belarus data refer to 2019.

Table A5 (cont). Employment rate by age group and sex in 2000, 2010 and 2020

Countries	Age group 55-59									Age group 60-64								
	2000[a]			2010[b]			2020[c]			2000[d]			2010[e]			2020[f]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	75.8	44.1	60.3	79.7	61.1	70.4	..	..	..	53.7	14.9	33.0	66.5	30.4	48.7
Armenia	..	..	..	71.6	54.9	62.0	61.6	44.6	52.3	..	..	..	69.1	47.6	56.6	53.4	36.3	43.4
Austria	60.0	25.6	42.4	69.2	50.4	59.6	79.0	70.9	74.9	16.7	7.9	12.1	28.7	14.4	21.3	42.6	18.8	30.4
Azerbaijan	90.9	90.9	90.9	90.9	58.7	74.0	69.9	46.4	57.5	80.9	20.5	47.8	53.7	25.6	38.6	32.5	26.8	29.5
Belarus	..	..	..	..	..	..	82.1	55.4	67.6	..	..	..	..	..	..	44.5	22.7	32.0
Belgium	52.0	24.1	37.9	63.3	43.1	53.1	75.9	65.3	70.6	18.1	7.0	12.4	26.2	14.4	20.2	39.4	29.3	34.3
Bosnia and Herzegovina	..	..	..	41.7	21.1	31.1	55.2	32.9	43.7	..	..	..	28.9	13.9	20.6	35.2	17.3	25.8
Bulgaria	53.6	16.2	33.5	63.5	61.6	62.5	76.9	75.4	76.1	15.7	6.1	10.5	38.3	17.0	26.7	61.6	44.2	52.4
Canada	68.6	50.1	59.3	71.6	62.5	67.0	74.1	65.3	69.6	43.3	25.6	34.2	52.5	39.6	46.0	57.5	43.9	50.6
Croatia	45.0	20.8	32.1	61.5	35.3	48.2	68.5	53.4	60.6	20.2	10.3	14.9	36.6	20.8	28.2	39.3	23.7	31.3
Cyprus	80.8	40.7	60.6	83.4	56.2	69.7	84.3	57.3	70.4	50.0	21.5	35.3	56.7	28.0	42.1	61.7	40.9	51.0
Czechia	71.6	30.4	50.2	78.9	55.9	67.1	89.0	85.8	87.4	23.5	11.2	16.9	36.6	15.0	25.2	60.6	36.8	48.4
Denmark	79.7	64.3	72.6	77.9	74.0	75.9	82.6	78.9	80.8	37.8	23.4	30.9	43.9	28.1	36.0	67.8	53.7	60.7
Estonia	62.9	55.3	58.7	58.9	66.7	63.2	76.6	83.1	80.0	33.1	26.6	29.3	43.4	42.7	43.0	60.1	66.8	63.8
Finland	56.6	60.3	58.5	69.9	75.0	72.5	78.1	79.5	78.8	25.6	20.3	22.8	41.8	39.9	40.8	54.3	57.4	55.9
France	53.9	42.5	48.1	64.4	57.2	60.7	76.6	70.2	73.3	10.6	9.8	10.2	19.1	16.6	17.8	33.7	32.5	33.1
Georgia	..	..	..	71.4	63.4	66.8	59.3	44.9	51.4	..	..	..	67.4	56.5	61.5	53.3	33.3	42.3
Germany	66.1	46.6	56.4	78.2	65.3	71.7	84.8	77.6	81.2	27.2	12.1	19.6	49.4	33.1	41.1	64.5	56.9	60.7
Greece	69.2	30.0	48.4	69.9	38.0	54.0	69.8	41.9	55.1	44.6	20.3	31.9	42.1	20.5	30.6	44.7	25.6	34.6
Hungary	50.2	19.8	33.7	56.3	46.6	51.1	80.5	70.4	75.2	10.8	5.1	7.6	16.5	9.5	12.6	63.3	31.0	45.6
Iceland	97.1	79.8	88.3	85.9	82.4	84.2	85.5	76.9	81.2	93.4	70.5	81.8	80.0	69.1	74.6	84.4	69.9	77.2
Ireland	71.7	34.0	53.1	65.8	52.0	58.9	76.0	63.5	69.6	52.6	19.1	35.8	48.8	32.1	40.5	62.4	43.9	53.0
Israel	63.6	48.1	55.9	70.6	61.2	66.0	76.4	68.9	72.7	49.3	26.3	36.9	61.1	44.3	52.2	70.6	55.7	62.8
Italy	50.8	22.9	36.5	65.6	40.5	52.7	77.5	54.1	65.5	29.4	7.6	18.0	29.5	11.8	20.4	49.2	33.5	41.1
Kazakhstan	..	..	..	..	..	..	82.8	71.9	76.8	..	..	..	..	..	..	53.9	21.8	35.4
Kyrgyzstan	..	..	..	80.1	45.4	61.4	75.6	49.2	61.0	..	..	..	51.9	21.9	35.0	62.3	24.0	41.5
Latvia	64.7	37.4	49.3	60.3	66.8	64.0	75.9	76.4	76.2	31.5	14.8	21.8	30.7	28.3	29.3	62.5	59.5	60.8
Liechtenstein	86.4	51.8	69.4	83.8	59.7	71.8	85.9	67.5	76.7	67.5	23.8	45.6	51.5	31.2	41.6	57.8	37.3	47.6
Lithuania	63.9	50.1	56.2	61.7	60.4	61.0	74.3	75.7	75.0	37.9	17.1	25.8	40.2	29.0	33.7	61.7	57.9	59.6
Luxembourg	56.5	20.9	38.9	65.3	45.5	55.7	66.8	59.5	63.3	16.5	12.5	14.5	25.9	14.1	20.1	22.7	17.7	20.2
Malta	78.1	..	45.3	76.3	23.2	49.7	84.9	52.6	69.2	21.7	..	10.8	24.6	5.7	15.0	49.5	23.6	36.6
Monaco	..	..	..	..	..	..	75.1	50.7	62.9	..	..	..	..	..	..	49.8	25.2	37.8
Montenegro	..	..	..	55.9	34.2	44.9	59.4	45.6	52.0	..	..	..	32.3	10.8	20.9	47.6	23.3	35.6
Netherlands	69.2	38.6	54.1	80.3	58.5	69.4	84.9	71.6	78.3	26.2	10.9	18.5	46.4	26.3	36.4	73.2	52.6	62.8
North Macedonia	..	..	..	57.6	28.9	43.1	69.7	41.5	55.6	..	..	..	32.3	14.3	22.9	50.1	20.5	35.1
Norway	82.1	71.2	76.7	81.3	75.0	78.2	83.5	76.8	80.2	57.8	44.2	50.8	62.9	54.8	58.9	68.5	60.9	64.8
Poland	47.5	28.9	37.7	59.4	33.6	45.9	74.3	64.3	69.1	27.5	15.4	20.9	26.7	12.7	19.1	54.3	21.8	37.1
Portugal	70.2	46.9	57.8	65.2	51.3	57.9	77.9	69.3	73.3	54.0	37.1	45.0	45.4	35.7	40.2	52.2	42.6	47.1
Republic of Moldova	..	..	..	59.1	40.6	48.7	55.1	50.7	52.9	..	..	..	42.1	20.6	30.0	40.4	18.3	28.1
Romania	63.1	51.1	56.6	61.0	40.6	50.3	76.8	57.2	66.9	52.5	44.1	48.0	36.5	23.3	29.4	46.2	22.1	33.4
Russian Federation	65.9	35.9	49.0	71.7	48.6	58.6	77.7	57.6	66.5	33.5	19.4	25.3	38.3	24.3	30.1	41.6	28.0	33.6
Serbia	..	..	..	52.5	31.6	41.8	71.7	55.1	63.1	..	..	..	33.3	12.1	22.0	53.3	32.6	42.4
Slovakia	55.3	16.8	34.5	72.1	45.0	57.9	80.7	76.2	78.4	10.4	2.7	6.1	28.5	7.7	17.2	42.0	35.0	38.3
Slovenia	40.3	17.5	29.0	59.0	34.0	46.9	74.6	72.4	73.5	19.8	11.2	15.1	26.5	13.0	19.5	33.2	21.5	27.3
Spain	68.4	24.8	46.2	67.4	41.5	54.3	72.6	57.3	64.8	39.4	14.9	26.7	40.4	24.2	32.0	48.9	37.5	43.1
Sweden	80.6	76.5	78.6	82.3	78.3	80.3	86.0	84.3	85.1	49.0	43.2	46.0	66.3	56.4	61.3	72.9	65.5	69.2
Switzerland	89.3	65.6	77.6	85.9	70.0	77.9	86.9	78.5	82.6	61.5	32.9	46.5	64.7	43.2	53.9	70.1	54.4	62.4
Tajikistan	..	..	..	72.7	25.5	47.1	66.6	33.0	49.4	..	..	..	47.2	15.6	33.2	52.9	19.4	35.6
Türkiye	56.6	24.2	40.2	46.3	18.8	32.4	51.5	19.5	35.4	46.5	18.5	32.1	37.7	14.9	25.8	38.6	13.2	25.7
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	..	..	..	..	..	..	63.2	48.4	54.9	..	..	..	..	..	..	21.9	16.1	18.5
United Kingdom	70.6	56.5	63.5	74.8	65.8	70.2	77.6	70.3	73.9	48.1	25.5	36.6	55.2	33.5	44.1	60.4	50.4	55.3
United States of America	75.3	59.9	67.3	72.3	64.2	68.1	73.3	61.7	67.3	53.5	39.2	46.0	55.1	47.5	51.2	59.0	47.8	53.2
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
UNECE region*	**66.3**	**44.5**	**55.0**	**69.6**	**53.8**	**61.4**	**74.8**	**60.8**	**67.6**	**38.8**	**23.3**	**30.6**	**44.0**	**30.4**	**36.8**	**52.0**	**38.0**	**44.7**

Source: Eurostat, Organisation for Economic Co-operation and Development.

Notes and definitions

Definitions:

Employment rate (employment-to-population ratio) is the share (in per cent) of employed people of a given age in the total number of people in that same age group.

Data generally come from labour force surveys, where the **persons in employment** or the **employed population** comprise all those of working age who, in a short reference period, were engaged in any activity to produce goods or provide services for pay or profit (in cash or in kind) (International Labour Organization).

Notes:

* Weighted average for countries with data available.

[a] For Croatia data refer to 2002.

[b] For Tajikistan data refer to 2009; for Montenegro data refer to 2011.

[c] For Monaco, Tajikistan data refer to 2016; for Liechtenstein, Ukraine data refer to 2017; for Kyrgyzstan data refer to 2018; for Albania, Armenia, Azerbaijan, Belarus data refer to 2019.

[d] For Croatia data refer to 2002.

[e] For Tajikistan data refer to 2009; for Montenegro data refer to 2011.

[f] For Monaco, Tajikistan data refer to 2016; for Liechtenstein, Ukraine data refer to 2017; for Kyrgyzstan data refer to 2018; for Albania, Armenia, Azerbaijan, Belarus data refer to 2019.

Table A5 (cont). Employment rate by age group and sex in 2000, 2010 and 2020

Countries	Age group 65-69									Age group 70-74								
	2000[a]			2010			2020			2000[b]			2010[c]			2020[d]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Armenia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Austria	7.2	4.0	5.5	11.5	6.6	8.9	11.3	5.6	8.3	3.9	..	2.8	7.2	4.5	5.7	7.3	3.4	5.2
Azerbaijan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Belarus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Belgium	3.1	..	2.3	5.7	2.7	4.1	7.6	4.2	5.8	..	..	1.8	2.8	1.0	1.8	3.7	1.1	2.3
Bosnia and Herzegovina	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Bulgaria	7.1	2.9	4.8	10.7	4.0	6.9	21.3	12.3	16.3	4.0	..	2.5	4.0	..	2.3	6.3	2.8	4.2
Canada	15.5	6.9	11.0	28.3	15.6	21.8	29.9	18.4	24.0	8.4	3.0	5.5	14.5	5.6	9.8	17.0	8.3	12.4
Croatia	11.7	8.8	10.1	11.3	8.2	9.6	7.5	4.1	5.7	9.2	5.5	7.1	7.4	6.0	6.6	3.3	:	2.0
Cyprus	29.7	9.1	18.7	29.6	11.7	20.3	23.6	9.5	16.6	16.1	:	8.9	19.6	5.8	12.4	15.8	5.0	10.0
Czechia	13.2	5.2	8.5	12.4	7.1	9.5	18.9	11.6	15.0	5.2	1.8	3.2	5.3	2.4	3.6	7.1	4.3	5.5
Denmark	11.3	5.4	8.1	21.4	9.1	15.0	30.8	13.9	22.2	7.5	..	4.3	10.3	4.0	7.0	13.1	4.0	8.4
Estonia	19.3	16.8	17.8	20.7	16.8	18.4	31.6	35.2	33.7	..	..	7.5	12.8	12.2	12.4	21.3	13.7	16.6
Finland	8.3	2.5	5.0	14.7	7.0	10.6	18.9	10.7	14.6	4.8	..	2.9	6.6	2.2	4.2	11.4	3.6	7.3
France	2.9	1.4	2.1	5.1	3.0	4.0	8.6	6.4	7.5	1.5	..	0.9	1.7	0.8	1.2	4.3	2.1	3.1
Georgia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Germany	7.4	2.8	4.9	10.8	6.5	8.6	20.6	13.4	16.8	3.4	1.4	2.3	5.0	2.4	3.6	11.1	5.6	8.1
Greece	16.8	6.5	11.3	15.1	5.4	9.6	17.9	8.6	12.9	6.4	1.5	3.8	5.3	1.9	3.6	4.0	1.0	2.4
Hungary	5.2	2.5	3.6	6.5	3.6	4.9	12.3	8.1	9.9	2.9	1.2	1.8	2.2	1.1	1.5	6.2	3.1	4.4
Iceland	67.3	36.1	51.2	57.4	38.4	47.7	59.6	33.7	46.7	29.1	..	17.0	25.3	..	17.9	21.8	..	14.3
Ireland	23.3	6.6	14.7	23.2	11.1	17.1	30.9	16.8	23.8	14.0	..	7.7	13.0	3.8	8.2	17.6	5.9	11.6
Israel	23.5	7.7	14.9	40.5	18.1	28.8	49.1	30.9	39.5	19.9	5.3	11.5	23.6	8.3	15.0	29.6	15.6	22.1
Italy	10.1	2.4	6.0	10.6	3.6	6.9	17.8	9.5	13.5	4.5	1.4	2.7	6.1	1.2	3.5	6.5	2.2	4.2
Kazakhstan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Kyrgyzstan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Latvia	17.5	9.7	12.7	14.2	12.3	13.0	30.8	26.1	28.0	7.9	4.8	5.8	8.7	5.8	6.8	10.7	11.6	11.3
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	13.2	12.1	12.5	12.0	9.5	10.5	32.0	22.1	26.1	..	..	6.6	..	..	4.1	15.0	7.6	10.3
Luxembourg	..	..	3.4	8.6	..	5.5	7.8	:	5.7	..	..	..	..	..	3.0	..	..	2.5
Malta	..	..	..	10.4	..	6.2	15.2	6.8	11.0	..	..	..	7.1	..	3.7	10.2	3.3	6.6
Monaco	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	..	..	..	..	..	..	20.7	15.4	17.8	..	..	..	..	..	..	..	..	7.0
Netherlands	7.2	3.1	5.1	16.8	7.7	12.2	26.5	13.9	20.1	4.4	1.8	2.9	9.7	3.1	6.2	10.4	4.8	7.5
North Macedonia	..	..	..	6.7	3.3	4.9	11.3	4.7	7.9	..	..	..	6.2	2.8	4.3	2.8	1.2	1.9
Norway	18.6	13.4	15.9	32.4	20.5	26.3	36.3	21.0	28.6	6.9	..	4.1	9.8	4.4	6.9	9.5	4.2	6.8
Poland	17.7	8.2	12.3	13.4	6.4	9.4	15.8	7.9	11.3	12.4	5.4	8.2	7.5	3.3	5.0	7.8	2.6	4.7
Portugal	35.2	20.6	27.2	28.7	20.0	23.9	26.8	16.1	21.0	24.2	14.1	18.5	24.2	15.2	19.2	18.4	5.9	11.4
Republic of Moldova	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Romania	48.9	41.6	44.8	27.1	21.9	24.2	16.0	11.5	13.5	44.5	35.9	39.7	22.5	19.5	20.7	9.9	9.0	9.4
Russian Federation	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Serbia	..	..	..	17.5	10.0	13.3	24.3	13.5	18.5	..	..	..	10.5	6.1	8.0	16.1	8.8	12.0
Slovakia	3.2	..	1.8	4.6	2.9	3.6	11.4	7.7	9.4	..	..	..	..	..	1.8	4.3	2.4	3.2
Slovenia	13.8	7.2	10.2	14.8	8.2	11.4	7.7	5.5	6.6	10.7	5.7	7.6	11.9	6.6	8.7	3.6	1.8	2.6
Spain	5.4	2.5	3.9	6.2	4.5	5.3	9.1	6.3	7.6	1.6	0.5	1.0	2.2	1.1	1.6	2.4	1.1	1.7
Sweden	17.5	11.2	14.2	23.2	11.6	17.3	30.1	20.5	25.2	11.3	..	5.6	11.3	3.8	7.4	16.2	7.8	11.9
Switzerland	24.1	12.5	17.7	24.6	14.6	19.2	28.2	17.1	22.5	15.2	6.5	10.1	11.9	5.5	8.4	16.0	9.2	12.4
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Türkiye	41.3	17.2	28.6	29.1	10.6	19.0	23.8	8.5	15.8	30.2	10.1	18.8	20.7	6.3	12.7	17.3	4.3	10.1
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
United Kingdom	14.2	8.6	11.3	22.8	14.7	18.6	27.6	20.5	23.9	6.6	3.1	4.7	9.1	5.1	7.0	12.1	6.9	9.4
United States of America	29.3	18.9	23.7	33.5	25.2	29.1	35.9	25.8	30.5	17.3	9.8	13.1	20.8	13.9	17.0	21.1	14.3	17.4
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
UNECE region*	**18.1**	**10.4**	**13.8**	**20.9**	**13.5**	**17.0**	**25.1**	**16.4**	**20.5**	**11.0**	**6.4**	**7.9**	**11.6**	**6.6**	**8.7**	**13.4**	**7.6**	**10.2**

Source: Eurostat, Organisation for Economic Co-operation and Development.

Notes and definitions

Definitions:

Employment rate (employment-to-population ratio) is the share (in per cent) of employed people of a given age in the total number of people in that same age group.

Data generally come from labour force surveys, where the **persons in employment** or the **employed population** comprise all those of working age who, in a short reference period, were engaged in any activity to produce goods or provide services for pay or profit (in cash or in kind) (International Labour Organization).

Notes:

* Weighted average for countries with data available.

[a] For Croatia data refer to 2002.

[b] For Denmark, Estonia data refer to 2001; for Croatia data refer to 2002.

[c] For Slovakia data refer to 2011.

[d] For Luxembourg data refer to 2017; for Montenegro data refer to 2018.

Table A6. Unemployment rate by age group and sex in 2000, 2010 and 2020

Countries	Age group 25-49									Age group 50-54								
	2000[a]			2010[b]			2020[c]			2000[d]			2010[e]			2020[f]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	9.8	14.1	11.8	11.0	11.1	11.0	..	..	..	10.5	11.7	11.0	9.1	7.9	8.5
Armenia	..	..	..	15.9	19.7	17.7	17.1	19.9	18.3	..	..	..	13.8	17.6	15.6	14.8	14.5	14.7
Austria	3.9	4.1	4.0	4.6	4.2	4.4	5.3	5.3	5.3	6.1	6.6	6.3	4.4	4.0	4.2	3.6	3.5	3.6
Azerbaijan	9.1	10.2	9.6	2.9	5.7	4.3	5.4	7.3	6.3	11.5	10.3	10.9	2.7	7.1	4.8	2.6	4.2	3.4
Belarus	..	..	..	6.2	3.1	4.7	2.9	2.9	3.7	..	..	..	..	..	..	4.3	2.0	3.1
Belgium	4.7	7.5	5.9	7.4	7.7	7.6	5.4	5.0	5.2	4.4	6.7	5.3	6.0	5.9	6.0	3.8	4.0	3.9
Bosnia and Herzegovina	13.1	16.0	14.1	23.2	29.6	25.7	13.1	18.4	15.2	..	..	..	21.6	20.2	21.0	9.8	13.9	11.3
Bulgaria	14.8	14.6	14.7	10.0	8.9	9.5	5.4	4.8	5.1	13.1	15.1	14.1	8.8	8.7	8.7	4.7	3.7	4.2
Canada	5.8	5.8	5.8	7.5	6.6	7.1	7.9	8.0	8.0	5.1	5.4	5.2	6.8	5.2	6.0	6.6	6.8	6.7
Croatia	10.7	15.9	13.2	9.8	11.7	10.7	7.3	7.3	7.3	9.0	11.1	9.9	6.0	8.2	7.1	4.9	3.1	4.0
Cyprus	3.1	6.8	4.7	5.7	5.6	5.6	6.9	7.4	7.2	2.2	5.9	3.6	4.2	3.1	3.7	4.8	8.6	6.5
Czechia	6.0	10.6	8.1	5.1	8.1	6.4	2.2	3.0	2.5	6.0	7.3	6.6	5.7	7.6	6.6	1.6	2.2	1.9
Denmark	3.5	5.0	4.2	7.4	6.2	6.8	4.6	6.1	5.3	3.9	3.1	3.5	7.0	4.8	5.9	3.2	3.2	3.2
Estonia	14.0	11.9	13.0	17.6	12.8	15.3	5.7	6.4	6.0	18.4	12.4	15.1	16.3	12.6	14.3	6.4	4.3	5.4
Finland	7.1	9.3	8.2	7.2	6.4	6.8	6.0	6.0	6.0	7.2	6.8	7.0	7.8	5.5	6.6	5.4	4.7	5.0
France	7.6	11.9	9.6	7.7	8.4	8.0	7.4	7.5	7.4	6.7	8.8	7.7	5.0	5.6	5.3	5.5	5.2	5.3
Georgia	12.5	12.1	12.3	21.2	18.3	19.9	14.2	12.6	13.5	6.8	10.3	8.5	16.9	12.9	15.0	18.4	13.4	16.1
Germany	6.6	7.2	6.9	7.0	6.2	6.6	4.5	3.3	3.9	7.7	10.2	8.8	6.6	6.0	6.3	2.7	2.5	2.6
Greece	6.5	15.9	10.3	9.9	16.3	12.7	13.6	21.2	17.0	3.8	7.4	5.0	7.4	10.3	8.5	10.8	14.7	12.5
Hungary	6.6	5.6	6.1	10.8	10.5	10.6	3.7	4.4	4.0	4.7	3.7	4.2	9.9	8.4	9.1	2.8	2.8	2.8
Iceland	0.5	2.6	1.5	7.6	6.2	6.9	5.9	5.6	5.8	3.7	3.0	3.4	4.1	2.5	3.3	0.9	1.5	1.2
Ireland	4.3	3.7	4.1	15.8	10.7	13.5	4.8	4.7	4.8	4.1	3.5	3.9	12.5	6.8	10.0	3.9	..	3.7
Israel	7.2	8.1	7.6	6.2	5.9	6.1	3.5	3.7	3.6	9.8	7.1	8.6	8.7	5.3	7.1	3.7	2.4	3.1
Italy	6.9	13.2	9.4	6.9	9.6	8.1	8.5	11.3	9.7	3.5	6.5	4.5	4.3	4.5	4.4	5.7	6.7	6.1
Kazakhstan	7.5	11.3	9.4	5.1	6.9	6.0	4.5	5.7	5.1	5.8	9.0	7.5	4.0	6.5	5.3	5.3	5.0	5.1
Kyrgyzstan	9.1	12.8	10.8	5.9	7.9	6.8	4.0	5.7	4.7	10.1	6.8	8.6	5.0	5.9	5.4	2.8	2.1	2.5
Latvia	14.8	13.3	14.0	21.1	14.8	17.9	8.9	7.0	8.0	16.5	12.9	14.5	22.1	15.3	18.5	8.8	6.8	7.7
Liechtenstein	3.7	3.6	3.6	3.6	3.4	3.5	4.5	2.9	3.7	..	..	..	..	..	..	..	..	..
Lithuania	17.3	13.4	15.4	20.7	13.3	16.9	8.1	6.5	7.4	19.0	12.8	15.6	16.7	14.8	15.7	7.8	7.3	7.5
Luxembourg	1.4	3.0	2.0	3.1	5.1	4.0	5.6	6.7	6.1	2.0	1.6	1.9	2.7	4.6	3.5	3.6	3.3	3.4
Malta	5.2	..	5.1	6.1	5.7	6.0	3.5	3.9	3.7	4.3	..	4.1	4.4	9.4	5.7	..	5.0	3.8
Monaco	..	..	..	..	..	..	..	..	..	2.4	5.7	3.7	..	..	..	3.5	6.7	4.8
Montenegro	19.8	32.3	25.5	17.9	20.7	19.1	18.4	18.2	18.3	..	..	..	12.7	13.9	13.3	9.8	17.1	13.1
Netherlands	1.8	2.9	2.3	3.0	4.8	3.8	2.9	3.1	3.0	1.4	3.5	2.2	3.5	4.0	3.8	2.1	2.5	2.3
North Macedonia	..	..	..	30.1	31.5	30.7	16.1	15.5	15.8	17.8	19.0	18.2	23.9	24.5	24.1	14.8	12.2	13.8
Norway	2.7	2.3	2.6	3.6	2.7	3.2	4.5	3.9	4.2	2.1	0.8	1.5	2.2	1.5	1.9	..	..	2.1
Poland	12.6	17.3	14.8	7.9	8.9	8.3	2.6	3.1	2.9	9.9	9.4	9.6	8.2	7.8	8.0	2.2	2.3	2.3
Portugal	2.6	4.3	3.4	9.4	12.8	11.1	5.9	6.5	6.2	3.8	3.5	3.7	8.4	8.2	8.3	3.8	5.8	4.8
Republic of Moldova	10.0	7.1	8.5	8.7	5.5	7.1	5.6	5.0	5.3	5.0	2.7	3.8	6.3	3.9	5.0	3.8	3.1	3.4
Romania	7.3	7.2	7.2	6.8	5.8	6.4	4.9	4.3	4.7	5.5	2.6	4.2	6.4	4.6	5.6	3.0	3.4	3.2
Russian Federation	9.9	9.1	9.5	6.9	5.9	6.4	..	..	..	7.3	7.0	7.1	6.3	5.3	5.8	4.7	3.9	4.3
Serbia	..	..	..	17.8	21.8	19.7	8.7	10.2	9.4	..	..	..	14.2	14.3	14.3	6.5	6.8	6.6
Slovakia	15.9	16.7	16.3	12.6	13.4	13.0	6.1	7.1	6.5	15.2	11.0	13.3	11.5	12.8	12.2	4.5	4.5	4.5
Slovenia	5.4	5.7	5.6	7.3	7.2	7.3	3.9	5.7	4.8	7.7	8.4	8.0	6.0	4.8	5.4	4.3	3.0	3.7
Spain	8.1	19.4	12.7	18.4	19.5	18.9	13.0	17.1	15.0	6.7	12.0	8.4	14.5	15.0	14.7	10.6	14.2	12.3
Sweden	4.9	5.1	5.0	6.4	7.0	6.7	6.9	7.4	7.2	6.1	3.2	4.6	5.7	4.8	5.3	4.3	5.4	4.8
Switzerland	1.7	3.4	2.4	4.4	5.1	4.7	4.2	5.3	4.7	1.0	1.6	1.3	3.2	4.0	3.5	4.1	4.0	4.0
Tajikistan	..	..	..	..	..	..	35.5	4.9	6.3	..	..	..	9.5	8.4	9.1	5.5	4.2	4.9
Türkiye	5.1	4.7	5.0	9.2	10.4	9.6	11.3	13.7	12.1	4.2	2.8	3.8	8.2	4.8	7.3	9.9	6.7	9.0
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	11.1	10.9	11.0	8.9	6.7	7.8	8.0	7.9	8.0	7.6	6.3	6.9	6.9	5.7	6.2	10.5	7.4	8.9
United Kingdom	4.8	4.2	4.5	6.7	5.8	6.3	2.6	3.0	2.8	5.2	3.1	4.2	6.1	3.6	4.9	2.5	2.2	2.4
United States of America	2.9	3.3	3.0	9.4	8.1	8.8	7.1	7.4	7.2	2.5	2.3	2.4	8.5	6.6	7.6	5.9	7.0	6.4
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
UNECE region*	**6.5**	**7.9**	**7.1**	**8.7**	**8.5**	**8.5**	**7.2**	**7.7**	**7.3**	**5.4**	**5.7**	**5.5**	**7.5**	**6.4**	**7.0**	**5.6**	**5.7**	**5.6**

Source: International Labour Organization, UNECE statistical database.

Notes and definitions

Definitions:

Unemployment rate is the share (in per cent) of unemployed persons in the total number of persons in the labour force.

Data generally come from labour force surveys, where the **unemployed population**, when measured for a short reference period, relates to all persons of working age not in employment who had actively looked for ways to obtain a job or start an enterprise in the near past and who would have accepted a suitable job or started an enterprise during the reference period if the opportunity had arisen (International Labour Organization).

Notes:

* Weighted average for countries with data available.

[a] For Bosnia and Herzegovina, Kazakhstan data refer to 2001; for Croatia, Kyrgyzstan data refer to 2002; for Montenegro data refer to 2004.

[b] For Belarus data refer to 2014.

[c] For Tajikistan data refer to 2016; for Albania, Armenia, Belarus, Georgia, Israel, Kazakhstan, Kyrgyzstan, Republic of Moldova, Ukraine, United Kingdom data refer to 2019.

[d] For Croatia, Kazakhstan, Kyrgyzstan, North Macedonia, Republic of Moldova data refer to 2002; for Iceland, Ukraine data refer to 2004.

[e] For Tajikistan data refer to 2009; for Montenegro, Romania data refer to 2011.

[f] For Monaco, Tajikistan data refer to 2016; for Iceland, Ukraine data refer to 2017; for Kyrgyzstan data refer to 2018; for Albania, Armenia, Azerbaijan, United Kingdom data refer to 2019.

Table A6 (cont). Unemployment rate by age group and sex in 2000, 2010 and 2020

Countries	Age group 55-59									Age group 60-64								
	2000[a]			2010[b]			2020[c]			2000[d]			2010[e]			2020[f]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	6.7	11.9	8.7	6.5	8.6	7.4	..	..	..	8.1	..	6.8	8.2	4.5	7.1
Armenia	..	..	..	14.0	17.1	15.6	15.2	14.9	15.1	..	..	..	10.2	10.0	10.1	12.7	14.6	13.7
Austria	7.5	5.8	7.0	3.4	2.3	2.9	4.4	3.9	4.1	5.4	6.3	5.7	1.3	0.6	1.1	4.4	..	3.8
Azerbaijan	6.0	5.0	5.5	5.2	3.5	4.5	2.1	5.3	3.5	2.9	..	2.2	0.7	..	0.5	3.0	..	1.6
Belarus	..	..	..	..	..	..	4.2	2.1	3.2	..	..	..	..	..	..	3.9	4.7	4.2
Belgium	3.4	3.3	3.4	4.4	5.7	4.9	4.8	3.6	4.2	3.4	..	2.8	3.8	3.9	3.8	4.3	3.8	4.1
Bosnia and Herzegovina	..	..	..	18.5	14.5	17.2	13.2	7.6	11.1	..	..	..	13.3	..	9.4	8.2	6.2	7.5
Bulgaria	14.0	12.4	13.6	10.2	8.9	9.5	4.6	3.8	4.2	7.5	6.4	7.2	7.7	7.7	7.7	4.2	4.7	4.4
Canada	5.4	5.6	5.5	7.1	5.3	6.3	7.9	7.3	7.6	5.5	5.4	5.5	7.9	6.2	7.1	8.8	8.2	8.5
Croatia	8.0	6.7	7.6	6.8	7.7	7.2	3.5	6.3	4.8	8.2	..	6.6	7.9	0.9	5.3	5.1	3.4	4.5
Cyprus	3.0	4.6	3.5	4.9	4.0	4.5	6.0	7.2	6.5	3.3	..	3.4	5.4	4.4	5.1	5.7	..	4.7
Czechia	5.6	5.2	5.5	7.5	7.2	7.4	2.0	2.7	2.4	4.0	5.2	4.4	4.2	3.6	4.0	1.1	1.6	1.3
Denmark	3.9	5.0	4.4	8.8	5.0	7.0	4.0	4.1	4.1	4.0	1.3	3.0	3.5	..	3.1	4.3	4.6	4.4
Estonia	8.6	5.9	7.3	21.9	17.1	19.1	8.6	5.8	7.1	7.0	..	4.2	14.7	8.1	11.0	6.8	5.6	6.1
Finland	11.6	9.5	10.5	8.3	6.1	7.2	6.9	6.7	6.8	..	..	6.2	5.8	4.8	5.3	9.7	7.1	8.4
France	7.9	7.9	7.9	6.4	5.8	6.1	5.1	5.7	5.4	4.1	5.3	4.7	4.6	4.4	4.5	7.5	6.0	6.7
Georgia	7.8	7.4	7.6	19.3	13.6	16.3	14.4	12.8	13.7	7.1	4.5	5.9	18.9	3.7	12.0	12.7	8.0	10.7
Germany	13.1	16.2	14.4	7.8	7.3	7.6	3.2	2.6	2.9	8.7	6.1	7.9	8.2	6.9	7.7	4.0	3.2	3.6
Greece	3.9	5.1	4.3	6.7	7.7	7.0	12.1	13.9	12.8	2.9	3.1	2.9	5.1	4.2	4.8	10.8	11.7	11.2
Hungary	4.1	1.7	3.3	9.5	7.7	8.6	3.6	2.7	3.1	2.3	..	2.0	4.4	4.3	4.3	2.7	2.8	2.8
Iceland	6.7	..	4.2	5.0	2.5	3.8	..	..	4.5	5.5	..	5.1	5.4	4.8	5.1	1.9	1.2	1.6
Ireland	2.9	2.8	2.9	9.8	7.6	8.8	4.6	..	4.0	2.1	1.6	1.9	10.7	5.4	8.7	..	..	4.2
Israel	8.6	6.2	7.6	5.4	5.0	5.2	3.5	3.0	3.2	13.2	5.7	10.4	8.9	7.1	8.1	3.8	1.8	2.9
Italy	4.9	5.4	5.0	4.0	3.0	3.7	5.1	5.5	5.3	4.1	3.1	3.9	3.6	2.8	3.4	5.0	3.9	4.5
Kazakhstan	5.5	7.4	6.4	5.4	7.2	6.4	5.8	6.6	6.2	4.4	2.8	3.7	5.0	5.0	5.0	4.1	4.0	4.0
Kyrgyzstan	3.4	15.3	8.3	3.6	4.1	3.8	2.6	2.5	2.5	3.0	3.1	2.7	2.9	2.2	2.6	2.2	1.4	1.9
Latvia	11.7	8.0	10.2	21.5	14.4	17.4	10.8	6.6	8.6	7.5	7.8	7.6	15.6	9.4	12.2	7.9	7.2	7.5
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	16.0	7.3	11.9	18.9	15.9	17.3	10.6	10.4	10.5	6.7	..	4.2	12.7	2.1	7.7	10.8	7.3	8.9
Luxembourg	2.5	..	1.8	2.8	1.6	2.4	5.3	..	4.4	..	..	..	..	..	2.1	3.8	2.5	3.2
Malta	3.8	..	3.9	4.6	3.9	4.4	4.0	..	4.2	..	..	..	4.2	..	3.4	5.4	..	5.6
Monaco	3.3	6.2	4.3	..	..	..	3.0	7.1	4.6	1.4	9.8	4.1	..	..	..	4.1	10.6	6.3
Montenegro	..	..	..	13.0	13.9	13.4	11.5	9.6	10.6	..	..	..	10.8	..	8.9	7.6	9.3	8.2
Netherlands	1.6	1.6	1.6	4.6	4.3	4.5	2.4	2.6	2.5	2.2	4.3	2.9	4.0	4.8	4.3	3.0	3.3	3.1
North Macedonia	20.0	11.9	17.6	26.8	27.4	27.0	13.6	12.6	13.2	19.4	6.0	16.2	33.1	21.6	29.7	13.9	6.9	12.0
Norway	1.1	..	0.7	1.9	1.1	1.5	..	..	2.0	1.3	..	1.3	1.6	0.7	1.2	2.4	1.0	1.7
Poland	9.3	10.3	9.7	8.0	7.5	7.8	2.6	2.0	2.3	8.8	11.2	9.8	6.2	..	5.1	2.3	..	1.8
Portugal	3.5	3.4	3.5	11.1	9.3	10.3	6.1	4.6	5.3	4.1	1.6	3.0	7.9	5.0	6.6	7.5	6.0	6.8
Republic of Moldova	5.0	2.1	3.7	5.5	2.4	4.1	4.9	1.9	3.5	1.9	0.4	1.2	1.9	1.4	1.7	2.1	..	1.7
Romania	2.7	0.8	1.8	6.0	2.4	4.5	3.4	3.6	3.5	0.6	..	0.3	2.7	0.3	1.7	3.4	..	3.3
Russian Federation	7.6	7.3	7.5	6.0	4.1	5.1	4.7	3.0	3.9	7.2	6.9	7.1	4.5	4.2	4.3	3.2	2.4	2.8
Serbia	..	..	..	14.9	10.9	13.4	6.5	5.4	6.0	..	..	..	9.9	4.5	8.3	5.1	3.1	4.3
Slovakia	15.6	8.3	13.8	11.0	12.0	11.4	4.2	5.7	5.0	..	..	4.5	3.9	2.8	3.7	4.7	4.4	4.6
Slovenia	9.6	..	8.2	4.5	4.2	4.4	3.2	3.8	3.5	3.2	..	2.0	3.3	1.5	2.6	4.1	4.8	4.4
Spain	9.8	12.7	10.6	15.0	15.1	15.1	11.0	14.3	12.5	8.2	8.6	8.3	13.3	11.6	12.6	12.2	12.9	12.5
Sweden	6.5	3.4	5.0	6.6	4.7	5.7	6.9	5.3	6.1	8.3	7.2	7.8	6.7	5.0	5.9	6.0	4.8	5.4
Switzerland	2.3	2.0	2.1	3.6	3.6	3.6	4.3	3.3	3.8	4.3	3.2	3.9	3.4	3.2	3.3	4.8	3.2	4.1
Tajikistan	..	..	..	10.0	5.6	8.6	4.3	6.4	5.0	..	..	..	7.3	0.0	5.5	6.5	0.4	4.9
Türkiye	3.0	0.4	2.2	7.4	1.4	5.7	9.0	4.5	7.8	2.7	0.6	2.1	5.0	0.9	3.8	7.3	2.4	6.1
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	6.2	2.3	4.4	6.6	0.2	3.8	8.9	5.2	7.1	0.7	0.7	0.7	0.1	0.0	0.1	0.0	..	0.0
United Kingdom	5.4	3.0	4.4	6.1	3.6	4.9	3.1	2.3	2.7	6.1	2.4	4.8	5.7	2.3	4.4	3.5	3.1	3.3
United States of America	2.3	2.5	2.4	7.8	6.2	7.0	6.1	7.2	6.7	2.6	2.6	2.6	8.2	6.3	7.3	6.7	7.0	6.8
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
UNECE region*	**6.0**	**5.8**	**5.9**	**7.5**	**5.6**	**6.7**	**5.7**	**5.4**	**5.6**	**5.0**	**4.5**	**4.8**	**6.4**	**5.0**	**5.7**	**5.7**	**5.2**	**5.4**

Source: International Labour Organization.

Notes and definitions

Definitions:

Unemployment rate is the share (in per cent) of unemployed persons in the total number of persons in the labour force.

Data generally come from labour force surveys, where the **unemployed population**, when measured for a short reference period, relates to all persons of working age not in employment who had actively looked for ways to obtain a job or start an enterprise in the near past and who would have accepted a suitable job or started an enterprise during the reference period if the opportunity had arisen (International Labour Organization).

Notes:

* Weighted average for countries with data available.

[a] For Estonia data refer to 1999; for Croatia, Kazakhstan, Kyrgyzstan, North Macedonia, Republic of Moldova data refer to 2002; for Iceland, Ukraine data refer to 2004.

[b] For Tajikistan data refer to 2009; for Montenegro data refer to 2011; for Belarus data refer to 2014.

[c] For Monaco, Tajikistan data refer to 2016; for Ukraine data refer to 2017; for Kyrgyzstan data refer to 2018; for Albania, Armenia, Azerbaijan, United Kingdom data refer to 2019.

[d] For Estonia data refer to 1999; for Croatia, Kazakhstan, North Macedonia, Republic of Moldova data refer to 2002; for Iceland, Kyrgyzstan, Slovenia, Ukraine data refer to 2004.

[e] For Tajikistan data refer to 2009; for Montenegro data refer to 2011.

[f] For Monaco, Norway, Tajikistan data refer to 2016; for Iceland, Luxembourg, Ukraine data refer to2017; for Kyrgyzstan, Malta data refer to 2018; for Albania, Armenia, Azerbaijan, United Kingdom data refer to 2019.

Table A6 (cont). Unemployment rate by age group and sex in 2000, 2010 and 2020

Countries	Age group 65+								
	2000[a]			2010[b]			2020[c]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	3.2	0.9	1.2	1.0
Armenia	..	..	..	7.5	3.7	5.7	11.3	9.4	10.5
Austria	13.6	5.1	9.8	0.4	..	0.3	1.3	..	0.9
Azerbaijan	25.2	40.1	32.3	..	..	..	..	..	..
Belarus	..	..	..	..	..	..	4.7	4.7	4.7
Belgium	..	..	2.6	..	..	0.9	1.3	2.7	1.7
Bosnia and Herzegovina	..	..	..	5.1	..	3.2	1.0	1.1	1.0
Bulgaria	2.3	3.9	2.8	2.2	3.6	2.7	..	..	2.7
Canada	2.5	2.9	2.7	5.0	4.4	4.8	7.0	8.1	7.4
Croatia	..	..	..	..	..	1.2	..	..	3.7
Cyprus	..	..	..	..	..	0.6	1.8	..	1.3
Czechia	..	5.3	2.5	0.9	2.0	1.3	..	..	0.4
Denmark	..	..	3.7	1.8	2.2	1.9	..	..	..
Estonia	8.4	..	5.2	3.1	3.2	3.2	..	..	3.3
Finland	..	..	..	0.3	1.3	0.6	1.2	2.1	1.5
France	..	..	1.2	2.3	2.6	2.4	2.3	3.1	2.6
Georgia	3.2	1.1	2.2	1.6	0.4	1.0	9.1	5.2	7.3
Germany	0.9	..	0.8	1.1	0.8	0.9	0.7	..	0.8
Greece	1.1	..	1.0	1.4	1.3	1.3	8.4	9.2	8.6
Hungary	18.9	24.7	21.1	0.9	..	0.6	..	0.7	0.4
Iceland	..	..	3.8	3.6	3.6	3.6	..	..	..
Ireland	..	..	0.4	0.4	0.4	0.4	..	..	..
Israel	7.6	0.0	5.5	5.6	0.0	3.8	2.6	1.8	2.3
Italy	1.8	5.6	2.8	1.1	1.2	1.2	1.8	2.0	1.9
Kazakhstan	0.4	0.1	0.2	..	..	..	0.6	0.9	0.6
Kyrgyzstan	1.4	3.9	2.5	1.2	1.7	1.4	0.4	0.8	0.6
Latvia	..	..	1.6	7.4	2.6	4.7	5.6	1.7	3.3
Liechtenstein	..	..	..	..	..	..	..	..	..
Lithuania	4.5	10.8	7.4	2.3	1.9	2.1	..	..	..
Luxembourg	..	..	..	..	..	..	4.2	..	5.9
Malta	..	..	..	..	..	..	..	..	..
Monaco	..	..	..	..	..	..	2.6	5.7	3.4
Montenegro	..	..	..	4.1	..	3.2	4.7	..	4.0
Netherlands	1.0	..	0.8	..	..	1.3	2.8	1.6	2.4
North Macedonia	3.2	1.7	2.7	8.3	..	6.3	1.4	..	1.2
Norway	3.9	..	2.7	0.5	1.0	0.7	1.2	..	0.9
Poland	4.6	..	4.0	1.4	1.1	1.3	1.2	0.7	1.0
Portugal	0.5	..	0.3	0.3	0.9	0.5	..	..	2.0
Republic of Moldova	0.8	..	0.4	0.7	..	0.4	..	..	..
Romania	..	..	..	0.1	..	0.0	..	0.2	0.2
Russian Federation	3.3	5.6	4.5	3.5	4.0	3.8	2.5	2.4	2.5
Serbia	..	..	..	3.5	2.4	3.0	0.5	0.3	0.4
Slovakia	..	28.8	16.5	..	4.2	2.7	2.0	1.7	1.9
Slovenia	5.0	10.8	7.8	..	..	..	..	..	..
Spain	..	4.4	1.7	3.4	1.3	2.5	4.3	6.7	5.3
Sweden	2.0	..	1.7	1.6	3.0	2.1	..	..	1.9
Switzerland	..	..	2.3	0.7	..	0.7	..	..	1.0
Tajikistan	..	..	..	..	..	..	1.7	0.0	1.2
Türkiye	0.8	0.0	0.5	1.7	..	1.3	3.2	1.2	2.7
Turkmenistan	..	..	..	..	..	..	..	..	..
Ukraine	0.4	0.6	0.5	0.1	0.1	0.1	0.6	..	0.3
United Kingdom	2.5	0.9	1.9	3.1	1.6	2.5	1.7	1.3	1.5
United States of America	3.3	2.7	3.1	7.1	6.2	6.7	6.9	8.3	7.5
Uzbekistan	..	..	..	..	..	..	..	..	..
UNECE region*	**2.9**	**4.2**	**2.8**	**3.4**	**3.1**	**3.1**	**3.7**	**4.5**	**3.7**

Source: International Labour Organization.

Notes and definitions

Definitions:

Unemployment rate is the share (in per cent) of unemployed persons in the total number of persons in the labour force.

Data generally come from labour force surveys, where the **unemployed population**, when measured for a short reference period, relates to all persons of working age not in employment who had actively looked for ways to obtain a job or start an enterprise in the near past and who would have accepted a suitable job or started an enterprise during the reference period if the opportunity had arisen (International Labour Organization).

Notes:

* Weighted average for countries with data available.

[a] For Belgium, Slovenia data refer to 1996; for Austria, France, Hungary data refer to 1998; for Azerbaijan, Estonia, Switzerland data refere to 1999; for Portugal data refer to 2001; for Kazakhstan, Kyrgyzstan, Republic of Moldova, the Netherlands, North Macedonia data refer to 2002; for Lithuania data refer to 2003; for Sweden, Ukraine data refer to 2004.

[b] For Ireland data refer to 2006; for Denmark data refer to 2007; for Bulgaria, Germany, Republic of Moldova, Romania, Switzerland data refer to 2009; for Croatia, Cyprus, Poland data refer to 2011; for Bosnia and Herzegovina, Montenegro, Serbia data refer to 2012; for Ukraine data refer to 2014.

[c] For Belgium, Monaco, Norway, Tajikistan data refer to 2016; for Austria, Croatia, Cyprus, Finland, Hungary, Latvia, Luxembourg, North Macedonia, Poland, Romania, Slovakia, Ukraine data refer to 2017; for Kyrgyzstan data refer to 2018; for Albania, Armenia, Bulgaria, Czechia, Germany, Montenegro, Portugal, United Kingdom data refer to 2019.

PARTICIPATION IN SOCIETY[18]

Table A7a: Volunteering and political participation

Countries	Percentage of persons aged 55 and above engaging in volunteering						Percentage of persons aged 55 and above involved in political and civic life					
	2012[a]			2016[b]			2012[c]			2016[d]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	..	..	..	..	..	..	..
Armenia	..	..	..	..	..	..	..	..	..	..	..	..
Austria	20.8	12.0	15.9	22.0	13.6	17.4	27.0	18.5	22.3	34.5	16.4	24.8
Azerbaijan[e]	..	..	..	3.8	1.1	2.4	..	..	..	29.7	14.1	21.3
Belarus[e]	0.5	0.4	0.4	0.8	1.0	0.9	..	..	..	..	..	..
Belgium	15.3	7.7	11.1	13.7	15.9	14.9	17.3	15.9	16.5	31.4	23.6	27.2
Bosnia and Herzegovina	..	..	..	..	..	..	..	..	..	..	..	..
Bulgaria	0.6	1.4	1.0	1.2	1.7	1.5	9.7	7.9	8.7	9.5	9.6	9.6
Canada[e]	39.2	38.0	38.6	34.4	38.3	36.5	25.2	17.0	20.9	..	..	..
Croatia	6.7	4.7	5.6	5.1	1.7	3.2	29.3	15.6	21.5	17.8	14.7	16.0
Cyprus	4.4	3.1	3.7	6.0	4.6	5.2	19.9	11.9	15.6	16.3	4.6	10.1
Czechia	7.1	5.5	6.2	1.8	1.4	1.6	22.6	13.6	17.5	12.7	16.2	14.6
Denmark	19.8	14.8	17.2	16.6	22.1	19.4	38.3	28.7	33.2	36.9	29.6	33.1
Estonia	0.7	5.2	3.5	1.9	3.3	2.8	11.1	5.7	7.8	13.6	7.0	9.6
Finland	10.4	14.3	12.6	12.6	13.5	13.1	20.4	23.2	22.0	29.8	32.5	31.3
France	14.6	16.3	15.6	15.4	11.8	13.3	34.7	24.8	29.2	28.3	29.0	28.7
Georgia	..	..	..	..	..	..	..	..	..	..	..	..
Germany	10.9	8.5	9.6	12.3	11.3	11.8	25.9	15.8	20.4	33.7	22.8	27.9
Greece	1.1	1.0	1.1	1.5	1.6	1.6	11.3	3.6	7.2	10.1	6.0	7.8
Hungary	2.5	1.8	2.1	1.2	0.8	1.0	8.8	2.7	5.2	6.1	6.8	6.5
Iceland	11.3	14.2	12.9	..	..	..	55.8	49.0	52.4	..	..	..
Ireland	18.6	21.6	20.1	18.5	10.4	14.3	25.2	18.0	21.5	22.6	18.6	20.6
Israel	..	..	..	..	..	..	..	..	..	..	..	..
Italy	12.1	10.0	10.9	5.0	6.4	5.8	18.1	10.0	13.6	24.8	6.9	15.1
Kazakhstan[e]	..	..	..	2.0	3.1	2.7	..	..	..	7.8	7.0	7.4
Kyrgyzstan[e]	..	..	..	..	..	..	29.1	29.1	29.1	..	..	..
Latvia	0.8	1.8	1.4	5.8	3.6	4.4	9.2	14.0	12.1	7.7	7.2	7.4
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	0.7	2.5	1.8	2.8	2.2	2.4	10.1	7.5	8.4	10.8	10.7	10.8
Luxembourg	18.4	12.9	15.5	20.4	12.4	16.2	46.1	19.5	32.1	38.2	21.6	29.6
Malta	11.3	8.5	9.8	6.8	9.9	8.4	17.4	7.5	12.0	24.7	14.6	19.4
Monaco	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	..	..	..	..	..	..	..	..	..	..	..	..
Netherlands	21.9	19.4	20.6	27.1	23.3	25.1	28.1	25.6	26.8	34.1	29.8	31.8
North Macedonia[e]	..	..	..	0.7	0.6	0.6	..	..	..	17.8	9.9	13.6
Norway[e]	16.8	13.0	14.8	12.1	14.3	13.3	..	..	..	46.1	37.2	42.2
Poland	4.0	1.8	2.7	1.9	5.3	3.9	10.7	8.3	9.3	8.2	9.7	9.1
Portugal	4.7	6.5	5.7	3.2	4.2	3.8	8.6	4.3	6.2	10.3	4.6	7.1
Republic of Moldova[e]	2.6	5.6	4.4	3.1	2.6	2.8	3.1	1.4	1.9	15.8	7.0	10.7
Romania	2.2	3.0	2.7	3.2	1.9	2.4	9.7	5.6	7.3	3.9	4.7	4.4
Russian Federation	..	..	..	..	..	..	..	..	..	..	..	..
Serbia[e]	3.0	1.3	2.0	3.1	3.4	3.3	23.2	13.5	17.7	15.4	8.4	11.6
Slovakia	2.9	0.0	1.3	2.7	0.5	1.4	13.0	8.3	10.3	15.4	15.5	15.5
Slovenia	8.8	3.6	5.9	6.9	5.2	6.0	8.2	5.5	6.7	16.5	15.4	15.9
Spain	5.4	5.6	5.5	5.1	1.9	3.4	18.4	8.4	12.9	10.2	5.8	7.8
Sweden	16.3	18.3	17.3	18.5	17.0	17.7	41.7	45.5	43.7	46.2	50.5	48.4
Switzerland[e]	25.7	17.7	21.4	..	..	..	50.5	38.7	44.6	..	..	..
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..
Türkiye[e]	1.0	0.0	0.5	..	..	..	6.4	1.5	3.9	..	..	..
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	..	..	..	..	..	..	..	..	..	..	..	..
United Kingdom	13.8	17.0	15.5	13.0	15.0	14.1	31.7	29.7	30.6	31.8	31.7	31.8
United States of America	..	..	..	..	..	..	..	..	..	..	..	..
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..

[18]Note: Detailed information on the indicators presented in tables 7 to 9 can be found at the wiki-space of the Active Ageing Index project: https://statswiki.unece.org/display/AAI/Active+Ageing+Index+Home.

Source: Eurofound (European Quality of Life Surveys (EQLS) 2012, 2016), national time use surveys and other national surveys, data collected under the Active Ageing Index project.

Notes and definitions

Definitions:

The indicator of **volunteering** refers to the percentage of persons aged 55 and above who regularly do unpaid voluntary work through organisations. For the countries covered by the EQLS the indicator takes into account volunteering at least once a week over the period of 12 months preceding the survey.

Indicator of **political participation** refers to the percentage of persons aged 55 and above who are involved in political and civic life. For the countries covered by the EQLS the indicator takes into account the following activities: attending a meeting of a trade union, political party or political action group, attending a protest or demonstration, signing a petition, including an e-mail or on-line petition, or contacting a politician or public official over 12 months preceding the survey.

Notes:

[a] For Canada data refer to 2010; for Norway data refer to 2011; for Republic of Moldova data refer to 2014; for Belarus data refer to 2015.

[b] For Canada data refer to 2018; for Belarus data refer to 2019; for Azerbaijan and Republic of Moldova data refer to 2020.

[c] For Canada data refer to 2013; for Republic of Moldova, Switzerland data refer to 2014; for Kyrgyzstan data refer to data refer to 2015.

[d] For Azerbaijan, Republic of Moldova data refer to 2020.

[e] Data for Azerbaijan, Belarus, Canada, Kazakhstan, Kyrgyzstan, North Macedonia, Norway, Republic of Moldova, Serbia, Switzerland and Türkiye may not be comparable with other countries due to the different data sources and methodology used.

Table A7b: Provision of informal care

Countries	Percentage of persons aged 55 and above providing care to their children, grandchildren						Percentage of persons aged 55 and above providing care to older or disabled relatives					
	2012[a]			2016[b]			2012[c]			2016[d]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	..	..	..	..	..	..	..
Armenia	..	..	..	..	..	..	..	..	..	..	..	..
Austria	21.9	27.2	24.9	25.6	18.9	22.0	10.9	13.0	12.1	9.4	16.5	13.2
Azerbaijan[e]	..	..	..	59.4	59.3	59.3	..	..	..	22.8	21.5	22.1
Belarus[e]	11.2	18.0	15.7	16.6	21.0	19.2	..	..	..	..	..	..
Belgium	40.0	36.2	37.9	25.0	32.2	28.9	14.4	14.5	14.4	31.8	38.5	35.4
Bosnia and Herzegovina	..	..	..	..	..	..	..	..	..	..	..	..
Bulgaria	26.4	26.9	26.7	15.2	17.9	16.8	11.5	12.0	11.8	8.2	12.3	10.6
Canada[e]	19.4	21.0	20.3	19.4	21.3	20.4	18.8	24.2	21.7	20.8	24.1	22.5
Croatia	34.8	32.7	33.6	20.7	34.5	28.6	10.4	18.3	14.9	16.8	14.8	15.6
Cyprus	38.0	50.0	44.4	50.0	43.4	46.5	8.6	9.7	9.2	13.1	16.6	14.9
Czechia	37.1	35.9	36.4	26.3	36.4	32.0	17.4	12.5	14.6	15.1	16.9	16.1
Denmark	26.6	26.7	26.6	13.3	22.2	18.0	5.4	7.2	6.4	13.9	23.9	19.1
Estonia	20.7	29.5	26.1	27.1	28.5	28.0	13.9	11.9	12.7	15.7	15.8	15.8
Finland	28.0	32.5	30.5	20.2	20.5	20.4	16.0	18.2	17.2	22.7	29.9	26.7
France	37.7	32.5	34.8	20.9	26.6	24.1	11.2	14.4	13.0	32.3	40.8	37.1
Georgia	..	..	..	..	..	..	..	..	..	..	..	..
Germany	17.1	18.0	17.6	17.5	18.3	17.9	7.3	9.5	8.5	10.4	9.0	9.7
Greece	27.7	39.7	34.0	20.4	23.2	22.0	6.9	15.1	11.2	10.0	18.4	14.7
Hungary	35.4	40.3	38.2	32.3	27.5	29.5	13.6	13.3	13.4	9.8	8.4	8.9
Iceland	49.4	51.9	50.6	..	..	..	16.7	13.1	14.9	..	..	..
Ireland	34.6	43.2	39.0	22.2	22.6	22.4	12.2	20.4	16.7	16.0	20.7	18.4
Israel	..	..	..	..	..	..	..	..	..	..	..	..
Italy	49.5	56.4	53.3	25.0	34.1	29.9	15.2	18.4	16.9	13.6	21.8	18.0
Kazakhstan[e]	..	..	..	45.1	45.5	45.4	..	..	..	25.2	25.0	25.1
Kyrgyzstan	..	..	..	..	..	..	..	..	..	..	..	..
Latvia	22.7	36.0	31.1	29.2	26.5	27.5	6.6	12.6	10.4	31.2	25.7	27.8
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	32.6	33.1	32.9	12.0	18.7	16.1	16.7	11.8	13.6	10.7	16.6	14.3
Luxembourg	31.6	30.8	31.2	29.6	22.1	25.7	14.8	8.9	11.7	22.6	26.6	24.7
Malta	31.5	31.3	31.4	30.9	35.7	33.4	12.7	17.0	15.1	19.8	23.6	21.8
Monaco	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	..	..	..	..	..	..	..	..	..	..	..	..
Netherlands	32.0	29.5	30.7	26.7	24.2	25.3	14.2	14.0	14.1	26.3	24.6	25.4
North Macedonia[e]	..	..	..	34.9	33.1	34.0	..	..	..	11.2	11.1	11.1
Norway[e]	..	..	..	27.7	29.4	26.0	..	..	..	16.5	20.1	18.3
Poland	17.2	25.9	22.3	19.0	25.6	22.7	10.9	14.9	13.2	10.8	18.9	15.4
Portugal	29.2	26.7	27.8	27.8	24.9	26.2	12.8	15.9	14.6	10.2	10.0	10.1
Republic of Moldova[e]	26.4	33.3	31.0	17.9	25.3	22.1	3.0	4.2	3.8	13.1	17.3	15.5
Romania	28.2	29.2	28.8	21.9	33.6	28.7	7.1	14.1	11.2	14.2	18.3	16.6
Russian Federation[e]	13.2	22.2	19.1	10.5	18.0	15.1	6.0	7.9	7.2	5.0	7.2	6.3
Serbia[e]	54.0	46.7	49.8	37.2	29.6	33.0	15.6	9.0	12.0	19.9	23.7	21.8
Slovakia	26.6	34.4	31.1	31.3	36.7	34.5	9.4	13.3	11.6	11.5	14.6	13.3
Slovenia	36.6	43.4	40.4	23.9	28.4	26.4	12.7	8.8	10.5	11.9	17.1	14.8
Spain	30.3	40.3	35.8	33.9	34.4	34.2	13.2	18.0	15.8	15.3	19.1	17.4
Sweden	26.6	25.4	25.9	25.6	18.4	21.8	10.5	9.9	10.1	17.4	25.1	21.5
Switzerland[e]	11.3	22.6	17.1	..	..	..	15.0	20.4	17.9	..	..	..
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..
Türkiye[e]	27.6	33.4	30.6	..	..	..	10.9	17.8	14.3	..	..	..
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	..	..	..	..	..	..	..	..	..	..	..	..
United Kingdom	26.2	26.7	26.5	17.9	19.9	19.0	14.2	17.6	16.1	14.9	25.2	20.3
United States of America	..	..	..	..	..	..	..	..	..	..	..	..
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..

Source: Eurofound (European Quality of Life Surveys (EQLS) 20012, 2016), national time use surveys and other national surveys, data collected under the Active Ageing Index project.

Notes and definitions

Definitions:

Indicator of **provision of care to children**, grandchildren refers to the percentage of persons aged 55 and above who regularly provide care to their children or grandchildren. For the countries covered by the EQLS the indicator takes into account provision of care at least once a week.

Indicator of **provision of care to elderly or disabled** relatives refers to the percentage of persons aged 55 and above who regularly provide care to elderly or disabled relatives. For the countries covered by the EQLS the indicator takes into account provision of care at least once a week.

Note on changes in definitions:

A modification of the questions on the provision of care to children and grandchildren and on the provision of care to elderly or disabled relatives was introduced between the EQLS 2012 and 2016. For details see https://statswiki.unece.org/display/AAI/Annex+A.2%3A++Information+on+AAI+indicators+for+the+second+domain%3A+Participation+in+Society.

Notes:

[a] For Canada data refer to 2010; for Russian Federation data refer to 2011; for Switzerland data refer to 2013; for Republic of Moldova data refer to 2014; for Belarus data refer to 2015.

[b] For Canada, data refer to 2015; for Russian Federation data refer to 2018; for Belarus data refer to 2019; for Azerbaijan, Kazakhstan and Republic of Moldova data refer to 2020.

[c] For Canada data refer to 2010; for Russian Federation data refer to 2011; for Republic of Moldova data refer to 2014.

[d] For Canada, data refer to 2015; for Russian Federation data refer to 2018; for Azerbaijan, Kazakhstan, Republic of Moldova data refer to 2020.

[e] Data for Azerbaijan, Belarus, Canada, Kazakhstan, North Macedonia, Norway, Republic of Moldova, Russian Federation, Serbia, Switzerland and Türkiye may not be comparable with other countries due to the different data sources and methodology used.

INDEPENDENT, HEALTHY AND SECURE LIVING

Table A8a. Physical activity and access to health services

Countries	Percentage of persons aged 55 and above taking part in sports or physical exercise						Percentage of persons aged 55 and above who report no unmet need for medical and dental examination or treatment					
	2012[a]			2016[be]			2010[c]			2018[d]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	..	..	..	..	..	..	..
Armenia[f]	..	..	..	..	..	..	76.0	76.0	76.0	..	..	..
Austria	22.5	22.0	22.2	29.0	19.3	23.7	93.8	92.6	93.1	99.0	98.7	98.8
Azerbaijan[f]	7.5	3.5	5.3	36.8	27.4	31.7	..	..	..	49.1	35.3	41.7
Belarus[f]	..	..	..	17.7	22.5	21.0	88.0	83.5	85.0	95.9	90.9	92.9
Belgium	21.3	12.4	16.4	16.5	14.9	15.6	97.3	97.2	97.2	94.7	93.2	93.9
Bosnia and Herzegovina	..	..	..	..	..	..	..	..	..	..	..	..
Bulgaria	0.6	0.9	0.8	2.9	0.9	1.8	78.4	75.6	76.8	74.5	75.8	75.3
Canada[f]	48.6	42.3	45.3	51.2	45.8	48.4	90.9	90.2	90.5	97.0	96.4	96.7
Croatia	8.5	6.6	7.4	2.3	2.2	2.2	81.0	79.1	79.9	79.6	81.9	80.9
Cyprus	19.0	10.0	14.1	20.4	8.8	14.2	85.3	84.3	84.8	90.1	89.6	89.8
Czechia	3.8	5.8	4.9	5.4	6.6	6.1	92.1	93.6	93.0	92.4	93.7	93.2
Denmark	25.0	25.4	25.2	28.2	27.5	27.8	94.1	95.8	95.1	88.7	92.6	90.8
Estonia	17.9	21.0	19.8	29.4	21.6	24.6	87.8	89.8	89.1	77.9	74.1	75.5
Finland	47.2	50.4	49.0	46.5	48.0	47.3	90.7	88.4	89.3	81.0	75.9	78.0
France	27.4	18.5	22.5	17.6	10.5	13.5	92.3	90.4	91.2	89.2	88.2	88.6
Georgia	..	..	..	..	..	..	..	..	..	..	..	..
Germany	14.2	10.7	12.3	18.8	17.8	18.3	91.7	90.8	91.2	97.2	97.6	97.4
Greece	8.5	5.0	6.6	11.0	4.8	7.6	87.5	84.6	86.0	44.9	41.1	42.8
Hungary	7.4	4.0	5.4	1.8	5.8	4.2	87.4	89.8	88.8	62.8	64.9	64.0
Iceland[f]	31.2	37.5	34.4	..	..	..	87.3	88.2	87.3	..	..	..
Ireland	21.5	29.0	25.4	20.0	23.0	21.5	95.7	94.7	95.1	96.6	95.2	95.9
Israel[f]	20.3	15.0	17.4	..	..	..	..	..	..	..	..	..
Italy	6.3	4.6	5.4	6.5	2.5	4.3	86.6	84.7	85.5	81.1	80.1	80.5
Kazakhstan[f]	..	..	..	35.1	32.1	33.3	..	..	..	77.4	67.4	71.4
Kyrgyzstan	..	..	..	..	..	..	..	..	..	..	..	..
Latvia	11.4	12.2	11.9	14.5	10.8	12.2	67.1	64.6	65.5	47.2	52.8	50.8
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	12.8	21.9	18.5	15.3	17.9	16.9	92.9	91.1	91.8	77.7	75.8	76.5
Luxembourg	25.0	23.7	24.3	25.8	15.8	20.6	95.6	95.1	95.3	97.6	97.7	97.7
Malta	19.0	14.9	16.8	20.9	12.3	16.4	91.7	91.5	91.6	93.8	86.8	89.9
Monaco	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	..	..	..	..	..	..	..	..	..	..	..	..
Netherlands	22.5	24.0	23.3	36.2	25.1	30.2	97.7	97.5	97.6	85.8	86.1	86.0
North Macedonia[f]	..	..	..	0.6	0.9	0.8	..	..	..	80.2	82.1	81.8
Norway[f]	33.3	27.1	30.1	40.4	40.8	40.6	94.4	93.8	94.1	96.8	97.4	97.2
Poland	8.2	6.2	7.0	7.0	5.8	6.3	78.3	76.2	77.1	60.9	64.3	62.9
Portugal	6.5	5.6	6.0	14.0	5.8	9.4	85.0	83.2	84.0	81.7	79.7	80.6
Republic of Moldova[f]	12.0	15.2	14.7	25.2	23.3	24.1	73.1	72.4	72.6	72.2	62.0	66.3
Romania	1.3	1.3	1.3	1.9	1.4	1.6	70.7	66.8	68.5	81.2	78.4	79.6
Russian Federation[f]	1.7	2.2	2.0	..	..	..	..	..	..	..	..	..
Serbia[f]	..	..	..	2.1	2.3	2.2	..	..	..	77.3	77.7	77.5
Slovakia	5.0	5.5	5.3	7.3	3.9	5.3	90.3	91.1	90.7	89.6	90.2	90.0
Slovenia	9.4	10.0	9.7	21.7	12.9	16.9	98.6	97.8	98.1	77.8	79.3	78.7
Spain	16.2	15.5	15.8	24.3	9.1	16.1	88.6	90.0	89.4	84.6	87.4	86.2
Sweden	42.4	42.9	42.7	36.3	39.0	37.7	87.1	86.0	86.5	85.7	83.6	84.5
Switzerland[f]	39.3	43.4	41.4	..	..	..	94.8	93.4	94.1	..	..	..
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..
Türkiye[f]	9.5	2.6	6.0	..	..	..	73.3	73.4	73.4	..	..	..
Turkmenistan	..	..	..	..	..	..	..	.	..	..	..	..
Ukraine[f]	13.3	9.2	10.8	..	..	..	..	..	..	..	..	..
United Kingdom	17.3	16.6	16.9	19.3	20.0	19.7	95.8	95.6	95.7	91.6	89.1	90.3
United States of America	..	..	..	..	..	..	..	..	..	..	..	..
Uzbekistan[f]	41.2	28.7	34.3	..	..	..	..	..	..	..	..	..

Source: Eurofound (European Quality of Life Survey (EQLS) 2012, 2016), Eurostat (European Union Statistics of Income and Living Conditions (EU-SILC) 2010, 2018), national reports, national time use surveys and other national surveys.

Notes and definitions

Definitions:

Physical activity indicator refers to the percentage of persons aged 55 and above who regularly take part in sports or physical exercise. For the countries covered by the EQLS the indicator takes into account engaging in physical activity every day or almost every day.

Indicator of **no unmet need for medical and dental examination or treatment** refers to the percentage of persons aged 55 and above who report that over the last 12 months there was no instance of not receiving such examination or treatment when needed. For more information on health variables of the European Union Statistics of Income and Living Conditions (EU-SILC) see http://ec.europa.eu/eurostat/cache/metadata/en/hlth_silc_01_esms.htm.

Notes:

[a] For Canada data refer to 2010; for Russian Federation data refer to 2011; for Azerbaijan, Canada, Israel, Norway and Switzerland data refer to 2014; for Ukraine data refer to 2015.

[b] For Canada data refer to 2014; for Belarus data refer to 2015; for Serbia data refer to 2018; for Azerbaijan, Kazakhstan, Republic of Moldova data refer to 2020.

[c] For Republic of Moldova data refer to 2013.

[d] For Canada data refer to 2019; for Azerbaijan, Belarus, Kazakhstan, Republic of Moldova data refer to 2020.

[e] For Belarus, persons aged 60 and above are considered.

[f] Data for Armenia, Azerbaijan, Belarus, Canada, Iceland, Israel, Kazakhstan, North Macedonia, Norway, Republic of Moldova, Russian Federation, Serbia, Switzerland, Türkiye, Ukraine and Uzbekistan may not be comparable with other countries due to the different data sources and methodology used.

Table A8b. Financial security

Countries	Ratio of the median income of persons aged 65 and above to that of persons aged below 65						Percentage of persons aged 65 and above who are not at risk of poverty						Percentage of persons aged 65 and above who are not severely materially deprived					
	2010[ah]			2020[b]			2010[ch]			2020[d]			2010[e]			2020[f]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	99.0	100.0	99.0	..	..	..	92.8	91.5	92.2	..	..	..	61.3	61.5	61.4
Armenia[g]	106.0	106.0	106.0	..	..	..	93.5	93.5	93.5	..	..	..	..	..	..	..	..	..
Austria	94.1	86.4	89.8	101.0	93.0	97.0	93.0	88.2	90.2	92.7	91.4	91.9	98.7	97.6	98.1	99.4	98.6	99.0
Azerbaijan[g]	..	..	..	92.6	92.6	92.6	..	..	..	95.4	95.4	95.4	..	..	..	83.2	74.0	78.0
Belarus[g]	102.9	92.9	96.3	102.3	97.4	99.3	97.9	95.5	96.2	98.3	97.8	97.9	..	..	..	99.5	99.6	99.6
Belgium	77.5	73.8	74.5	76.0	74.0	75.0	91.8	92.5	92.2	93.4	92.3	92.8	97.1	97.2	97.2	98.8	98.2	98.5
Bosnia and Herzegovina	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Bulgaria	79.8	69.9	73.8	72.0	61.0	65.0	85.1	73.0	77.9	83.4	71.6	76.3	46.2	38.9	41.9	77.1	69.0	72.2
Canada[g]	94.0	86.8	90.1	92.2	87.7	89.8	95.1	93.3	94.1	93.9	91.6	92.7	..	..	..	..	..	..
Croatia	84.1	73.1	78.2	80.0	71.0	76.0	83.9	78.8	80.8	84.1	75.7	79.2	87.4	82.4	84.3	91.1	90.1	90.5
Cyprus	66.1	64.4	65.4	86.0	76.0	79.0	81.9	75.1	78.2	91.8	90.1	90.9	93.9	91.8	92.7	96.9	97.4	97.1
Czechia	82.5	79.9	81.5	75.0	72.0	73.0	99.3	98.2	98.7	97.8	93.2	95.2	96.3	95.2	95.7	98.6	98.4	98.5
Denmark	74.2	70.7	71.5	80.0	77.0	78.0	95.0	94.2	94.5	97.5	97.2	97.4	98.6	99.4	99.1	99.1	98.8	98.9
Estonia	79.0	68.7	73.3	64.0	57.0	60.0	98.2	95.4	96.3	83.7	74.1	77.4	96.3	92.0	93.4	98.2	95.8	96.6
Finland	83.8	73.6	78.2	88.0	76.0	80.0	97.5	93.8	95.3	96.4	94.2	95.2	98.8	97.9	98.3	98.5	98.9	98.7
France	100.0	93.4	97.8	99.0	97.0	98.0	96.7	95.8	96.2	95.2	93.2	94.1	96.9	96.3	96.6	98.1	97.3	97.6
Georgia[g]	111.7	105.6	108.0	..	..	..	88.9	87.2	87.9	..	..	..	..	..	..	..	..	..
Germany	89.8	87.9	88.5	87.0	82.0	84.0	93.5	92.6	93.0	..	..	..	98.4	97.5	97.9	95.6	94.9	95.2
Greece	88.3	82.6	84.1	104.0	98.0	101.0	92.6	88.7	90.4	94.7	93.8	94.2	90.2	85.6	87.6	90.8	86.9	88.6
Hungary	100.0	99.3	100.0	90.0	85.0	87.0	99.1	98.3	98.6	93.3	94.2	93.8	89.9	83.6	85.9	94.7	92.4	93.3
Iceland	94.0	87.5	90.1	96.0	91.0	94.0	98.0	97.6	97.8	95.0	98.1	96.6	99.3	99.3	99.3	99.8	99.5	99.7
Ireland	87.8	84.2	84.8	91.0	87.0	89.0	93.4	94.5	94.0	95.8	96.1	95.9	98.7	98.3	98.5	98.3	98.4	98.3
Israel[g]	79.9	79.9	79.9	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Italy	94.3	90.1	91.7	105.0	98.0	101.0	93.7	90.8	92.1	92.6	90.4	91.3	94.6	93.0	93.7	94.8	92.1	93.3
Kazakhstan[g]	..	..	..	99.0	100.0	100.0	..	..	..	79.4	80.9	80.3	..	..	..	56.9	42.4	47.7
Kyrgyzstan[g]	..	..	..	..	..	..	72.4	72.8	72.6	..	..	..	..	..	..	..	..	..
Latvia	83.6	73.8	77.6	66.0	60.0	62.0	94.2	93.7	93.9	79.5	67.7	71.7	77.5	70.1	72.5	93.5	89.9	91.2
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	100.0	89.9	92.9	72.0	61.0	65.0	96.3	96.4	96.3	86.9	75.1	79.2	78.9	74.5	76.0	91.8	88.7	89.8
Luxembourg	100.0	100.0	100.0	130.0	125.0	128.0	97.0	96.9	96.9	97.1	95.0	96.1	100.0	99.8	99.9	100.0	100.0	100.0
Malta	82.2	80.9	81.2	79.0	74.0	77.0	89.4	91.4	90.5	91.5	90.5	90.9	95.4	94.7	95.0	96.9	95.2	96.0
Monaco	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	..	..	..	..	..	..	..	..	..	88.9	90.4	89.8	..	..	..	90.2	88.2	89.1
Netherlands	89.0	86.4	87.1	82.0	79.0	80.0	98.5	97.4	97.9	95.2	95.6	95.4	99.8	99.6	99.7	99.3	99.1	99.2
North Macedonia[g]	108.2	96.5	101.6	116.0	109.0	113.0	86.9	89.0	87.9	90.1	90.4	90.3	66.7	63.9	65.1	72.3	69.6	70.8
Norway	89.2	80.3	84.7	96.0	85.0	90.0	98.9	96.7	97.7	98.1	98.6	98.4	99.7	99.4	99.5	99.5	99.7	99.6
Poland	100.0	87.7	92.9	90.0	82.0	85.0	95.4	91.9	93.2	93.2	89.1	90.7	87.1	81.4	83.5	97.9	96.6	97.1
Portugal	88.4	77.8	82.1	96.0	89.0	91.0	92.7	88.0	89.9	92.8	89.7	91.0	92.1	89.2	90.4	95.2	94.0	94.5
Republic of Moldova[g]	64.3	47.3	54.6	78.1	66.7	71.6	84.5	83.8	84.1	89.1	80.5	83.7	58.6	56.1	57.4	50.7	38.2	43.5
Romania	100.0	91.1	96.6	93.0	81.0	86.0	94.4	87.3	90.2	90.2	81.5	85.0	70.6	65.6	67.6	88.4	84.0	85.8
Russian Federation	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Serbia	113.8	94.2	101.9	94.0	90.0	92.0	90.1	85.2	87.2	88.1	85.0	86.3	77.2	70.1	73.1	87.7	82.8	84.9
Slovakia	86.1	82.1	83.2	86.0	85.0	86.0	99.4	96.7	97.8	96.5	95.9	96.1	90.7	87.7	88.9	95.0	93.8	94.3
Slovenia	96.2	81.0	87.0	88.0	79.0	83.0	94.8	84.6	88.6	94.2	88.4	90.9	94.6	93.1	93.7	96.6	95.5	96.0
Spain	90.2	85.8	88.0	104.0	99.0	100.0	89.2	88.8	89.0	89.6	89.2	89.4	98.3	97.3	97.8	96.5	97.0	96.8
Sweden	84.8	72.5	78.6	88.0	74.0	80.0	97.5	94.6	95.9	95.7	94.0	94.8	98.8	99.2	99.0	99.6	99.7	99.7
Switzerland	84.0	77.3	79.6	84.0	76.0	80.0	84.3	81.7	82.8	85.7	82.2	83.9	99.4	99.4	99.4	99.8	99.6	99.7
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Türkiye	107.8	108.0	107.4	110.0	107.0	109.0	85.6	85.5	85.6	88.4	86.5	87.3	48.8	46.2	47.4	80.9	77.8	79.2
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine[g]	104.6	91.2	95.7	..	..	..	99.8	98.5	98.9	..	..	..	..	..	..	..	..	..
United Kingdom	84.6	78.8	81.3	91.0	85.0	88.0	90.4	85.9	87.9	89.6	86.8	88.1	98.8	98.6	98.7	98.7	98.5	98.6
United States of America[g]	88.6	88.6	88.6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
UNECE region*	**91.8**	**87.6**	**89.5**	**94.1**	**88.7**	**91.0**	**93.3**	**91.3**	**92.2**	**92.1**	**89.5**	**90.6**	**91.7**	**89.7**	**90.6**	**94.5**	**92.6**	**93.4**

Source: Eurostat (European Union Statistics of Income and Living Conditions (EU-SILC) 2010, 2020), national reports, national statistics of income and living conditions and other national surveys.

Notes and definitions

Definitions:

Relative median income indicator refers to the ratio of the median equivalised disposable income of persons aged 65 and above to the median equivalised disposable income of those aged below 65.

For the countries covered by the EU-SILC, disposable household income includes: all income from work; private income from investment and property; transfers between households; all social transfers received in cash including old-age pensions. For more information on the methodology see Eurostat metadata for the EU-SILC http://ec.europa.eu/eurostat/cache/metadata/en/ilc_esms.htm.

National equivalence scales may differ in the other UNECE member States.

No poverty risk indicator refers to the percentage of persons aged 65 and above with disposable income above the poverty line. The methodology of setting the poverty line or at-risk-of-poverty threshold varies across the UNECE member States.

For the countries covered by the EU-SILC, the at-risk-of-poverty threshold here is set at 50 per cent of the national median equivalised disposable income after social transfers. For more information on the methodology see Eurostat metadata for the EU-SILC http://ec.europa.eu/eurostat/cache/metadata/en/ilc_esms.htm.

No severe material deprivation indicator refers to the percentage of persons aged 65 and above who are able to afford at least six out of the following nine items: to pay their rent, mortgage or utility bills; to keep their home adequately warm; to face unexpected expenses; to eat meat or proteins regularly; to go on holiday; a television set; a washing machine; a car; a telephone. For more information on the methodology see Eurostat metadata for the EU-SILC http://ec.europa.eu/eurostat/cache/metadata/en/ilc_esms.htm.

Notes:

[*] Weighted average for countries with data available.

[a] For Iceland, North Macedonia data refer to 2012; for Israel, Republic of Moldova, Serbia, United States data refer to 2013.

[b] For Iceland, Kazakhstan, United Kingdom data refer to 2018; for Albania, Canada, Italy, North Macedonia data refer to 2019.

[c] For Iceland data refer to 2012; for Republic of Moldova, Serbia data refer to 2013.

[d] For Iceland, Kazakhstan, United Kingdom data refer to 2018; for Albania, Canada, Italy, Montenegro, North Macedonia data refer to 2019.

[e] For Iceland data refer to 2012; for Republic of Moldova data refer to 2013.

[f] For Iceland, United Kingdom data refer to 2018; for Albania, Italy, Montenegro, North Macedonia data refer to 2019; for Kazakhstan data refer to 2020.

[g] Data for Armenia, Azerbaijan, Belarus, Canada, Georgia, Kazakhstan, Kyrgyzstan, North Macedonia, Republic of Moldova, Ukraine and the United States of America may not be comparable with other countries due to the different data sources and methodology used.

[h] No breakdown by sex is available for Armenia for both the median income and the risk of poverty indicators, and for Israel and the United States of America for the relative median income indicator.

Table A8c. Independent living arrangements, physical safety and lifelong learning

Countries	Percentage of persons aged 75 and above who live in a single-person or a couple household						Percentage of persons aged 55 and above who are feeling safe in their local area						Percentage of persons aged 55-74 involved in training or education					
	2010[a]			2018[b]			2010[c]			2018[d]			2010[e]			2020[f]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Armenia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Austria	81.7	83.5	82.8	86.3	86.8	86.6	83.6	63.2	72.3	93.3	75.5	83.7	4.5	6.4	5.5	3.5	4.4	3.9
Azerbaijan[g]	..	..	..	52.9	52.0	52.6	..	..	..	93.3	85.7	89.2	1.8	1.0	1.4	11.2	10.8	10.9
Belarus[g]	22.9	47.9	41.2	27.4	55.2	45.8	..	..	..	..	..	..	..	..	..	7.6	4.4	5.8
Belgium	88.6	88.0	88.2	93.0	93.7	93.4	86.4	66.3	76.4	84.8	72.1	78.3	2.9	3.2	3.1	2.7	2.5	2.6
Bosnia and Herzegovina	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Bulgaria	73.6	70.2	71.5	81.4	86.0	84.4	66.4	42.5	53.0	53.7	32.1	41.5	..	..	..	..	..	..
Canada[g]	91.8	79.4	84.7	92.0	79.7	85.2	86.1	51.6	67.8	87.7	65.4	76.1	..	..	..	..	..	..
Croatia	74.8	75.3	75.1	77.2	76.9	77.0	93.3	82.6	87.3	94.1	83.3	88.1	0.2	0.2	0.2	:	0.3	0.2
Cyprus	85.5	84.6	84.9	92.6	92.0	92.3	84.1	64.4	73.7	79.4	68.8	73.9	2.1	3.3	2.7	0.9	1.2	1.1
Czechia	87.1	85.4	86.1	89.3	89.9	89.6	77.1	58.1	66.5	84.5	67.9	75.3	1.9	1.7	1.8	2.0	2.2	2.1
Denmark	98.9	99.3	99.2	99.2	99.5	99.4	94.7	75.3	84.4	97.3	80.5	88.5	15.9	31.6	23.8	8.4	15.6	12.0
Estonia	83.7	83.7	83.7	85.9	85.8	85.9	77.2	59.2	65.9	87.5	73.8	79.1	1.8	4.4	3.4	3.8	8.5	6.5
Finland	94.2	94.7	94.5	96.4	97.9	97.3	96.3	78.8	86.7	97.6	83.0	89.8	8.1	14.0	11.2	8.8	15.6	12.3
France	94.3	94.0	94.1	94.6	96.1	95.5	82.1	52.4	65.9	85.6	62.5	73.3	1.2	1.8	1.5	4.3	6.9	5.7
Georgia	40.0	31.7	34.9	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Germany	97.0	94.9	96.0	96.5	96.0	96.2	84.6	63.8	73.3	84.5	64.5	73.9	1.9	2.2	2.0	2.0	2.3	2.1
Greece	75.4	79.8	77.9	78.4	79.5	79.0	55.5	39.3	46.7	..	..	..	0.3	0.3	0.3	0.5	0.6	0.5
Hungary	83.9	77.2	79.5	86.6	83.4	84.6	70.5	55.3	61.6	82.6	73.9	77.5	0.3	0.2	0.3	1.0	1.2	1.1
Iceland	94.5	95.6	94.5	..	..	..	97.0	71.8	83.8	..	..	..	15.0	17.2	16.1	8.7	10.4	9.6
Ireland	91.3	85.7	88.0	92.9	94.0	93.5	83.6	62.5	72.5	88.3	65.6	76.6	1.9	3.5	2.7	4.7	6.7	5.7
Israel[g]	..	..	..	..	..	..	88.4	83.5	85.7	..	..	..	..	..	..	..	..	..
Italy	78.0	84.5	82.0	80.8	87.2	84.6	..	..	..	69.3	60.3	64.4	1.8	1.9	1.9	2.6	2.9	2.7
Kazakhstan[g]	..	..	..	62.9	74.4	71.1	..	..	..	83.0	71.7	76.1	..	..	..	6.0	7.7	7.0
Kyrgyzstan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Latvia	75.4	73.5	74.0	77.2	78.5	78.2	54.1	34.8	41.9	89.9	66.4	75.2	0.9	1.2	1.0	1.1	2.6	2.0
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	84.2	83.3	83.6	86.8	85.1	85.6	48.8	39.9	43.3	71.7	58.8	63.8	0.2	0.2	0.2	1.8	4.3	3.3
Luxembourg	86.3	84.1	85.1	91.6	93.9	92.8	..	..	..	..	..	..	4.3	4.3	4.3	5.2	4.0	4.6
Malta	77.3	81.6	79.9	84.7	88.7	87.0	..	..	..	..	..	..	2.2	2.7	2.4	3.5	3.9	3.7
Monaco	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	55.8	57.5	56.8	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Netherlands	97.4	97.6	97.5	98.3	98.7	98.5	89.7	72.9	80.9	92.2	73.0	82.2	6.5	7.6	7.0	8.0	8.4	8.2
North Macedonia	..	..	..	56.5	55.0	55.7	..	..	..	..	..	..	..	..	..	0.5	0.4	0.4
Norway	98.1	99.3	98.8	95.0	88.2	91.6	96.0	75.9	85.4	97.3	86.0	91.8	7.6	9.0	8.3	6.7	7.5	7.1
Poland	64.3	71.2	68.9	64.3	62.5	63.1	87.7	78.6	82.5	91.9	83.5	87.2	0.8	0.8	0.8	0.7	1.1	0.9
Portugal	79.9	80.9	80.5	83.0	82.3	82.6	69.7	64.2	66.6	82.7	72.5	77.0	0.7	1.0	0.9	3.1	3.3	3.2
Republic of Moldova[g]	80.7	68.7	72.6	72.1	54.5	66.3	49.4	33.3	39.6	56.7	38.9	47.6	0.1	0.2	0.3	2.0	2.0	2.0
Romania	76.4	75.3	75.7	75.8	74.5	75.0	70.7	62.4	66.0	..	..	..	0.3	0.3	0.3	..	..	..
Russian Federation[g]	45.1	56.0	53.2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Serbia[g]	61.8	65.0	63.7	64.1	66.2	65.4	83.8	62.9	74.4	..	..	..	..	..	..	0.4	0.3	0.3
Slovakia	70.3	74.5	72.9	67.8	73.8	71.6	73.8	54.3	62.5	85.0	70.1	76.5	0.5	0.5	0.5	0.8	0.7	0.8
Slovenia	82.4	85.2	84.2	86.1	86.0	86.1	97.4	87.0	91.6	96.2	89.3	92.5	4.6	6.3	5.5	2.5	3.6	3.0
Spain	69.9	72.5	71.5	77.3	78.1	77.8	78.3	69.7	73.6	85.8	71.4	78.1	3.4	6.0	4.7	3.2	3.9	3.6
Sweden	99.1	98.9	99.0	97.2	98.7	98.1	91.4	72.7	81.5	94.0	76.4	85.2	9.6	20.3	15.0	10.9	21.8	16.3
Switzerland[g]	94.3	97.2	96.0	..	..	..	92.0	68.4	80.0	..	..	..	18.8	17.8	18.3	15.0	14.9	15.0
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Türkiye[g]	56.2	58.6	57.6	..	..	..	77.3	65.6	71.8	..	..	..	0.1	0.2	0.1	0.3	0.5	0.4
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine[g]	..	..	..	..	..	..	60.6	35.6	45.0	..	..	..	..	..	..	..	..	..
United Kingdom	93.6	95.3	94.6	95.0	95.1	95.0	80.7	58.2	69.0	84.6	67.8	75.8	7.4	12.2	9.9	6.9	9.5	8.2
United States of America	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

Source: Eurostat (European Union Statistics of Income and Living Conditions (EU-SILC) 2010, 2020), national reports, national statistics of income and living conditions and other national surveys.

Notes and definitions

Definitions:

Independent living arrangements indicator refers to the percentage of persons aged 75 and above who live in a single household or in a couple household consisting of two adults without dependent children.

Physical safety indicator for most countries is based on the ESS and refers to the percentage of persons aged 55 and above who feel safe walking alone in their local or neighbourhood area after dark.

Lifelong learning indicator refers to the percentage of persons aged 55-74 who report receiving training or education within a certain period before the survey. For the European Union (EU) countries, it is based on the EU Labour Force Survey and takes into account attending any courses, seminars, conferences or receiving private lessons or instructions within or outside the regular education system during the four weeks preceding the survey.

Notes:

[a] For Belarus data refer to 2009; for Canada, Montenegro, Russian Federation data refer to 2011; for Iceland data refer to 2012; for Republic of Moldova, Serbia refer to 2013.

[b] For Germany data refer to 2014; for Canada, Malta data refer to 2016; for Belarus data refer to 2019; for the Azerbaijan, Republic of Moldova data refer to 2020.

[c] For Türkiye data refer to 2008; for Canada data refer to 2009; for Republic of Moldova data refer to 2011. The following ESS waves were used: Latvia and Romania-2008.

[d] For Canada data refer to 2019; for Azerbaijan, Kazakhstan, Republic of Moldova data refer to 2020. The following ESS waves were used: Denmark-2014.

[e] For Azerbaijan data refer to 2009; for Iceland, Republic of Moldova data refer to 2012. Results for Croatia and Lithuania are drawn from LFS 2007, and results for Romania are drawn from LFS 2013. For Croatia, Lithuania and Romania no gender differences assumed.

[f] For the United Kingdom data refer to 2019.

[g] Data for Azerbaijan, Belarus, Canada, Israel, Kazakhstan, Republic of Moldova, Russian Federation, Serbia, Switzerland, Türkiye and Ukraine may not be comparable with other countries due to the different data sources and methodology used.

CAPACITY AND ENABLING ENVIRONMENT FOR ACTIVE AGEING

Table A9a. Life expectancy and healthy life expectancy at age 60

	Life expectancy at age 60									Healthy life expectancy at age 60								
	2000			2010			2019			2000			2010			2019		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	17.1	21.2	19.0	19.9	22.6	21.3	20.2	21.9	21.0	13.5	16.7	15.0	15.7	17.7	16.7	15.9	17.3	16.6
Armenia	17.1	20.2	18.8	16.8	20.5	18.8	18.2	22.2	20.4	13.3	15.5	14.5	13.2	15.7	14.6	14.3	16.9	15.7
Austria	19.7	23.7	22.0	21.4	25.2	23.4	22.4	25.6	24.1	15.1	18.0	16.7	16.3	19.2	17.8	17.2	19.4	18.4
Azerbaijan	15.1	17.9	16.6	15.0	17.6	16.4	15.7	18.3	17.1	12.1	13.9	13.1	12.0	13.7	12.9	12.4	14.2	13.4
Belarus	14.1	19.5	17.2	14.1	20.5	17.7	16.0	22.5	19.7	10.7	14.9	13.1	10.8	15.7	13.6	12.3	17.2	15.1
Belgium	19.3	23.7	21.6	21.1	24.9	23.1	22.3	25.6	24.0	15.0	17.9	16.6	16.3	18.7	17.5	17.2	19.1	18.2
Bosnia and Herzegovina	17.7	21.1	19.6	18.2	21.0	19.7	18.6	21.6	20.2	13.6	16.1	15.0	13.9	16.1	15.1	14.1	16.3	15.2
Bulgaria	15.9	19.2	17.6	16.7	20.9	18.9	17.4	22.0	19.8	12.3	14.9	13.7	12.9	16.2	14.6	13.4	16.9	15.2
Canada	20.5	24.3	22.5	22.8	25.7	24.4	23.8	26.4	25.2	16.0	18.5	17.3	17.6	19.4	18.6	18.2	19.7	19.0
Croatia	16.7	20.9	19.0	18.1	22.4	20.4	19.4	23.8	21.8	12.7	15.8	14.4	13.7	16.9	15.4	14.6	17.7	16.2
Cyprus	20.4	23.2	21.9	22.2	24.8	23.5	23.3	26.4	24.9	15.9	17.6	16.8	17.1	18.7	17.9	18.1	19.9	19.0
Czechia	17.0	21.3	19.3	18.8	23.0	21.0	19.9	24.0	22.1	12.9	16.1	14.6	14.0	17.2	15.7	14.8	17.8	16.3
Denmark	19.0	22.1	20.6	20.8	23.5	22.2	22.3	24.9	23.6	15.1	16.8	16.0	16.4	18.0	17.2	17.6	18.9	18.2
Estonia	15.4	20.9	18.6	17.3	23.2	20.8	19.3	25.0	22.5	11.8	16.1	14.3	13.4	17.9	16.0	14.8	19.1	17.3
Finland	19.2	23.6	21.6	21.0	25.3	23.3	22.4	25.8	24.2	14.9	17.9	16.5	16.3	19.1	17.8	17.3	19.5	18.5
France	20.4	25.3	23.0	22.4	26.8	24.7	23.3	27.2	25.3	16.3	19.5	18.0	17.9	20.6	19.3	18.5	20.8	19.7
Georgia	15.2	18.5	17.0	15.9	20.1	18.2	16.1	21.0	18.8	12.1	14.4	13.4	12.5	15.5	14.1	12.4	16.1	14.4
Germany	19.5	23.6	21.8	21.4	24.8	23.2	21.9	26.9	24.4	15.3	18.0	16.8	16.7	18.8	17.8	17.0	19.9	18.5
Greece	19.9	23.1	21.5	21.7	24.9	23.3	22.1	25.5	23.8	15.8	17.7	16.8	17.1	19.0	18.1	17.3	19.5	18.4
Hungary	15.3	20.1	18.0	17.0	21.8	19.7	17.7	22.3	20.2	11.6	15.2	13.6	12.9	16.6	14.9	13.4	16.8	15.3
Iceland	21.2	24.0	22.6	22.7	25.0	23.9	23.7	25.5	24.6	16.7	18.1	17.4	17.8	18.9	18.4	18.6	19.5	19.0
Ireland	18.3	21.9	20.2	21.7	24.6	23.2	23.0	25.3	24.2	14.6	16.8	15.7	17.1	18.7	17.9	18.0	19.2	18.6
Israel	20.6	23.1	22.0	22.8	25.3	24.2	23.6	26.0	24.9	16.4	17.7	17.1	18.0	19.2	18.6	18.7	19.9	19.3
Italy	20.3	24.5	22.5	22.4	26.1	24.4	23.4	26.5	25.0	15.6	18.4	17.1	17.1	19.6	18.4	17.9	19.8	18.9
Kazakhstan	12.3	17.8	15.3	14.6	19.2	17.2	16.8	21.4	19.5	9.7	13.5	11.8	11.3	14.6	13.1	13.0	16.2	14.8
Kyrgyzstan	14.9	18.3	16.7	15.5	19.3	17.6	17.8	21.7	20.0	11.8	14.1	13.1	12.4	15.1	13.8	14.2	16.8	15.7
Latvia	15.1	20.6	18.3	15.8	21.7	19.2	17.3	23.0	20.5	11.4	15.6	13.9	12.1	16.6	14.7	13.2	17.5	15.6
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	16.5	21.7	19.5	16.4	22.5	19.9	17.6	23.5	20.9	12.4	16.4	14.7	12.4	17.1	15.1	13.4	17.8	15.9
Luxembourg	19.4	23.7	21.8	21.6	25.2	23.5	22.9	25.8	24.4	15.2	18.0	16.7	16.8	19.0	18.0	17.7	19.3	18.5
Malta	19.0	22.4	20.8	21.5	24.7	23.2	23.0	25.9	24.5	15.1	17.2	16.2	16.9	18.9	18.0	18.0	19.6	18.9
Monaco	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	17.7	20.6	19.2	17.5	20.3	19.0	17.4	21.3	19.4	13.7	16.0	14.9	13.5	15.7	14.7	13.5	16.3	14.9
Netherlands	19.2	23.2	21.3	21.6	24.8	23.3	23.0	25.1	24.1	15.2	17.9	16.6	17.0	19.0	18.1	17.9	18.9	18.4
North Macedonia	15.2	17.7	16.4	16.1	18.8	17.5	17.0	19.6	18.3	11.8	13.5	12.7	12.5	14.3	13.4	13.1	14.9	14.0
Norway	20.0	23.7	22.0	21.9	25.0	23.5	23.5	25.8	24.7	15.3	17.9	16.7	16.6	18.6	17.6	17.8	19.1	18.5
Poland	16.5	21.4	19.2	18.2	23.3	21.0	19.5	24.3	22.1	12.7	16.3	14.7	13.9	17.7	16.0	14.9	18.5	16.8
Portugal	19.1	23.1	21.2	20.9	25.0	23.1	22.1	26.3	24.3	14.9	17.4	16.3	16.3	18.8	17.6	17.3	19.8	18.7
Republic of Moldova	14.0	17.2	15.8	14.5	18.2	16.5	16.6	20.9	19.0	10.8	13.2	12.1	11.2	13.9	12.7	12.8	16.0	14.6
Romania	16.4	19.7	18.2	17.1	21.1	19.2	17.8	22.4	20.3	12.7	15.4	14.1	13.3	16.5	15.0	13.8	17.3	15.7
Russian Federation	13.3	18.7	16.4	14.5	20.2	17.8	16.8	22.2	19.9	9.9	14.0	12.3	11.0	15.2	13.4	12.8	16.7	15.0
Serbia	15.7	18.4	17.1	17.1	20.0	18.6	17.9	21.1	19.6	12.2	14.2	13.2	13.2	15.3	14.3	13.7	16.0	14.9
Slovakia	15.9	20.7	18.5	17.2	21.9	19.8	19.3	23.9	21.8	12.2	15.9	14.2	13.1	16.8	15.2	14.6	18.2	16.6
Slovenia	17.7	22.7	20.5	20.3	24.8	22.8	21.8	25.6	23.8	13.2	17.0	15.3	15.2	18.6	17.0	16.4	19.2	17.8
Spain	20.3	24.8	22.7	22.2	26.5	24.4	23.3	27.3	25.4	15.7	18.7	17.3	17.2	19.8	18.5	18.0	20.3	19.2
Sweden	20.6	24.1	22.4	22.2	25.0	23.7	23.3	25.6	24.5	16.3	18.4	17.4	17.5	19.0	18.3	18.3	19.4	18.9
Switzerland	20.8	24.8	23.0	22.9	26.2	24.7	24.1	26.7	25.4	16.2	18.9	17.7	17.8	19.8	18.9	18.8	20.2	19.5
Tajikistan	16.4	18.0	17.2	14.7	16.7	15.6	15.1	17.2	16.1	13.1	14.1	13.6	11.8	13.1	12.4	12.1	13.4	12.7
Türkiye	20.1	22.7	21.5	19.8	22.6	21.2	20.6	23.2	22.0	15.6	17.0	16.3	15.1	16.8	15.9	15.8	17.3	16.6
Turkmenistan	14.4	17.8	16.3	15.3	18.9	17.2	17.1	20.1	18.7	11.6	13.9	12.9	12.3	14.7	13.6	13.6	15.7	14.7
Ukraine	14.0	18.8	16.8	14.9	19.8	17.7	16.4	21.7	19.5	10.7	14.4	12.8	11.5	15.3	13.6	12.7	16.7	15.0
United Kingdom	19.5	22.9	21.3	22.0	24.6	23.4	23.0	25.2	24.1	15.1	17.3	16.3	16.9	18.6	17.8	17.6	18.9	18.3
United States of America	19.8	22.8	21.4	21.5	24.2	23.0	21.8	24.4	23.1	14.7	16.6	15.7	15.6	17.2	16.5	15.6	17.1	16.4
Uzbekistan	14.8	17.1	16.1	15.7	18.7	17.3	17.3	19.8	18.6	11.8	13.4	12.6	12.5	14.5	13.5	13.7	15.3	14.5
UNECE region*	**18.3**	**22.1**	**20.3**	**20.2**	**23.6**	**22.0**	**21.1**	**24.5**	**22.9**	**14.1**	**16.6**	**15.4**	**15.4**	**17.6**	**16.6**	**16.0**	**18.1**	**17.1**

Source: World Health Organization Global Health Observatory data repository.

Definitions:

Life expectancy at 60 is the average number of years that a person of 60 years old could expect to live, if he or she were to pass through life exposed to the sex- and age-specific death rates prevailing at the time of his or her 60 years, for a specific year, in a given country, territory, or geographic area.

Healthy life expectancy at 60 is the average number of years that a person at the age of 60 can expect to live in "full health" by taking into account years lived in less than full health due to disease and/or injury.

Notes:

* Weighted average for countries with data available.

Table A9b. Mental well-being and social connectedness

Countries	Percentage of persons aged 55 and above who report being in positive mood and good spirits						Percentage of persons aged 55 and above who meet regularly with friends, relatives or					
	2012[a]			2016[b]			2010[c]			2018[d]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania	..	..	..	..	..	..	47.3	46.8	47.1	..	..	..
Armenia	..	..	..	..	..	..	..	..	..	..	..	..
Austria	86.8	75.6	80.6	84.7	85.0	84.9	51.9	49.4	50.5	61.7	63.4	62.6
Azerbaijan[e]	..	..	..	65.7	46.9	55.6	..	..	..	47.6	32.5	39.5
Belarus	..	..	..	..	..	..	..	..	..	..	..	..
Belgium	81.7	76.1	78.6	88.1	80.7	84.1	63.9	63.5	63.7	56.8	63.7	60.4
Bosnia and Herzegovina	..	..	..	..	..	..	..	..	..	..	..	..
Bulgaria	67.1	53.7	59.8	71.0	63.1	66.5	46.3	47.5	47.0	39.6	43.5	41.8
Canada[e]	77.0	76.3	76.6	76.9	78.9	77.9	72.9	78.1	78.1	..	..	..
Croatia	69.9	66.5	68.0	50.6	57.6	54.6	54.2	53.3	53.7	64.3	60.2	62.0
Cyprus	71.3	50.0	59.8	67.8	55.5	61.2	41.1	38.1	39.5	37.3	27.5	32.2
Czechia	68.8	66.8	67.7	73.1	70.9	71.8	44.9	49.7	47.6	41.3	44.5	43.1
Denmark	90.4	87.6	88.9	88.7	86.4	87.5	70.1	75.4	72.9	65.5	67.3	66.5
Estonia	57.7	60.3	59.3	67.6	61.1	63.6	22.4	35.8	30.8	31.5	39.0	36.1
Finland	87.5	87.3	87.4	89.8	86.7	88.1	53.8	68.8	62.0	57.1	64.7	61.2
France	74.6	70.4	72.3	79.1	74.0	76.2	55.0	58.2	56.8	62.6	63.6	63.2
Georgia	..	..	..	..	..	..	..	..	..	..	..	..
Germany	82.9	78.3	80.4	80.2	79.9	80.1	45.8	51.4	48.8	50.6	51.0	50.8
Greece	61.6	49.7	55.3	68.7	60.8	64.3	30.0	24.4	27.0	..	..	..
Hungary	70.6	64.0	66.8	80.2	79.7	79.9	23.8	22.1	22.8	19.7	12.3	15.3
Iceland	89.8	86.2	88.0	..	..	..	55.9	69.5	62.5	..	..	..
Ireland	86.8	78.6	82.6	83.2	82.9	83.1	65.7	55.9	60.5	63.0	61.6	62.3
Israel	..	..	..	..	..	..	74.7	74.6	74.7	..	..	..
Italy	78.9	69.4	73.6	66.7	63.2	64.8	58.7	58.9	58.8	50.1	48.8	49.4
Kazakhstan[e]	..	..	..	78.9	73.0	75.4	..	..	..	63.2	65.7	64.7
Kyrgyzstan	..	..	..	..	..	..	..	..	..	..	..	..
Latvia	65.9	53.5	58.0	73.0	65.3	68.3	41.9	37.2	38.9	43.0	47.4	45.7
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	59.6	51.5	54.5	62.4	63.6	63.1	29.2	33.0	31.6	30.9	33.1	32.3
Luxembourg	90.7	78.3	84.2	79.6	81.7	80.7	..	..	..	..	..	..
Malta	67.7	68.8	68.3	75.9	64.3	69.8	..	..	..	..	..	..
Monaco	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	..	..	..	..	..	..	..	..	..	..	..	..
Netherlands	81.0	74.4	77.5	88.6	79.1	83.5	65.8	71.2	68.6	63.6	72.5	68.2
North Macedonia	..	..	..	81.9	81.1	71.5	..	..	..	..	..	..
Norway	87.9	88.3	88.1	86.8	81.1	83.9	69.3	75.0	72.2	65.9	76.3	71.1
Poland	55.7	55.4	55.5	69.4	62.9	65.7	30.5	30.6	30.6	21.3	27.5	24.8
Portugal	74.9	67.0	70.4	74.6	63.2	68.2	79.7	75.9	77.6	76.1	65.5	70.2
Republic of Moldova[e]	66.5	59.9	62.1	91.6	86.5	88.6	27.0	36.0	32.2	31.8	23.7	27.1
Romania	55.0	42.3	47.8	61.2	49.1	54.1	24.8	25.1	25.0	..	..	..
Russian Federation	..	..	..	..	..	..	..	..	..	..	..	..
Serbia	42.8	34.8	38.2	50.6	45.7	47.9	38.2	42.4	40.4	..	..	..
Slovakia	60.7	61.0	60.9	79.1	69.9	73.7	52.7	47.3	49.6	45.7	37.9	41.3
Slovenia	55.5	61.9	59.1	76.1	66.0	70.6	47.1	43.9	45.4	42.5	45.3	44.0
Spain	78.0	69.0	73.1	83.0	66.7	74.2	70.7	71.7	71.2	67.4	71.3	69.5
Sweden	92.7	79.6	85.8	84.6	82.0	83.2	64.4	67.6	66.1	69.5	68.5	69.0
Switzerland	93.3	88.9	91.0	..	..	..	59.0	64.8	61.9	..	..	..
Tajikistan	..	..	..	..	..	..	..	..	..	..	..	..
Türkiye	53.0	43.8	48.1	..	..	..	51.4	45.6	48.6	..	..	..
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine	..	..	..	..	..	..	31.0	39.0	36.0	..	..	..
United Kingdom	77.4	67.3	72.0	80.6	75.1	77.7	66.8	72.0	69.5	64.2	63.7	64.0
United States of America	..	..	..	..	..	..	..	..	..	..	..	..
Uzbekistan	..	..	..	..	..	..	..	..	..	..	..	..

Source: Eurofound (European Quality of Life Surveys (EQLS) 2012, 2016), European Social Survey (ESS) 2010, 2018, national reports, national time use surveys and other national surveys, data collected under the Active Ageing Index project.

Notes and definitions

Definitions:

Mental (psychological) well-being indicator for most countries is based on the EQLS and refers to the percentage of persons aged 55 and above who are in the state of positive psychological well-being. Mental well-being is considered positive if the score exceeds 13 points based on the WHO-5 questionnaire (http://www.who-5.org/).

Social connectedness indicator for most countries is based on the ESS and refers to the percentage of persons aged 55 and above who meet socially with friends, relatives or colleagues at least once a week. "Meet socially" implies meet by choice rather than for reasons of either work or pure duty.

Notes:

[a] For Canada data refer to 2010; for Switzerland data refer to 2013; for Republic of Moldova data refer to 2014.

[b] For Canada data refer to 2019; for Azerbaijan, Kazakhstan, Republic of Moldova data refer to 2020.

[c] For Canada, Türkiye data refer to 2008; for Albania, Iceland, Italy, Republic of Moldova data refer to 2012. The following ESS waves were used: Latvia and Romania-2008.

[d] For Azerbaijan, Kazakhstan, Republic of Moldova data refer to 2020. The following ESS waves were used: Denmark 2014.

[e] Data for Azerbaijan, Canada, Kazakhstan and Republic of Moldova may not be comparable with other countries due to the different data sources and methodology used.

Table A9c. Educational attainment and Internet use

Countries	Percentage of persons aged 55-74 with upper secondary or higher level of education						Percentage of persons aged 55-74 who use the Internet regularly					
	2010[a]			2020[b]			2010[c]			2020[d]		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Albania[ef]	46.1	29.5	38.0	55.0	43.3	49.1	..	..	..	40.0	35.0	37.0
Armenia[ef]	89.5	87.6	88.5	93.7	94.7	93.4	..	..	..	..	..	..
Austria	79.9	59.1	69.0	85.8	70.5	77.9	48.0	29.0	38.0	72.0	62.0	67.0
Azerbaijan[ef]	79.2	68.9	73.6	85.6	84.3	84.9	8.0	7.2	7.7	38.7	37.5	38.1
Belarus[ef]	76.7	71.8	73.8	92.2	92.6	92.5	6.2	4.5	5.2	44.2	49.9	47.8
Belgium	51.8	45.5	48.6	65.9	63.0	64.4	57.0	40.0	48.0	80.0	77.0	78.0
Bosnia and Herzegovina[ef]	54.5	22.8	37.8	70.0	39.5	53.9	..	..	..	56.0	36.0	45.0
Bulgaria	62.3	60.9	61.5	78.2	78.0	78.1	13.0	12.0	12.0	39.0	40.0	40.0
Canada[e]	76.7	75.5	76.1	84.8	86.2	85.5	60.5	58.6	59.5	89.3	89.6	89.5
Croatia	70.3	46.1	57.2	79.7	65.1	71.9	17.0	9.0	12.0	52.0	41.0	46.0
Cyprus	52.1	38.1	44.9	67.4	60.7	64.0	19.0	8.0	14.0	71.0	71.0	71.0
Czechia	92.3	76.4	83.7	94.7	85.4	89.8	33.0	23.0	28.0	65.0	63.0	64.0
Denmark	70.3	56.9	63.5	74.3	71.7	73.0	71.0	63.0	67.0	94.0	92.0	93.0
Estonia	77.3	80.0	78.9	84.2	90.3	87.7	31.0	34.0	33.0	65.0	70.0	68.0
Finland	61.8	62.8	62.3	77.1	82.0	79.6	61.0	55.0	58.0	87.0	89.0	88.0
France	56.2	45.7	50.7	70.6	63.4	66.8	50.0	39.0	44.0	72.0	71.0	71.0
Georgia[ef]	87.2	85.5	86.2	94.3	93.1	93.6	..	..	..	..	..	..
Germany	89.5	72.3	80.5	87.4	80.6	83.9	57.0	38.0	47.0	85.0	79.0	82.0
Greece	37.7	30.3	33.8	59.5	48.9	53.8	13.0	5.0	8.0	55.0	43.0	48.0
Hungary	69.1	55.1	61.2	85.2	74.7	79.4	31.0	23.0	27.0	60.0	62.0	61.0
Iceland	71.1	46.8	58.9	76.5	59.4	68.0	81.0	68.0	75.0	96.0	97.0	97.0
Ireland	42.6	46.6	44.6	60.1	66.3	63.2	30.0	28.0	29.0	77.0	83.0	80.0
Israel[ef]	50.1	52.5	51.4	53.4	59.1	56.4	..	..	..	81.7	79.4	80.4
Italy	78.9	69.4	73.6	66.7	63.2	64.8	58.7	58.9	58.8	50.1	48.8	49.4
Kazakhstan[ef]	74.3	69.2	71.3	87.1	87.1	87.1	..	..	..	25.3	23.7	24.5
Kyrgyzstan[ef]	74.0	70.8	72.2	81.0	85.9	83.7	..	..	..	..	..	..
Latvia	73.7	79.0	76.9	91.0	92.8	92.0	22.0	20.0	21.0	66.0	72.0	70.0
Liechtenstein	..	..	..	..	..	..	..	..	..	..	..	..
Lithuania	74.7	69.4	71.6	95.2	95.4	95.3	20.0	19.0	19.0	53.0	61.0	58.0
Luxembourg	74.7	55.9	65.1	69.6	59.3	64.5	80.0	57.0	69.0	90.0	87.0	88.0
Malta	21.1	12.2	16.5	31.7	24.5	28.1	29.0	18.0	23.0	66.0	60.0	63.0
Monaco	..	..	..	..	..	..	..	..	..	..	..	..
Montenegro	74.3	48.9	60.6	84.3	68.8	76.1	23.0	14.0	18.1	50.0	47.0	48.0
Netherlands	66.0	47.1	56.4	70.6	58.5	64.5	77.0	63.0	70.0	91.0	89.0	90.0
North Macedonia	..	..	..	67.5	47.9	57.3	15.0	14.0	15.0	61.0	47.0	54.0
Norway	78.5	73.2	75.8	81.3	76.5	78.9	79.0	66.0	72.0	89.0	87.0	88.0
Poland	76.1	67.6	71.4	88.0	84.1	85.8	23.0	15.0	18.0	54.0	54.0	54.0
Portugal	13.5	11.7	12.5	28.4	27.9	28.1	23.0	15.0	19.0	51.0	47.0	49.0
Republic of Moldova[e]	60.8	44.1	51.1	79.8	68.6	73.4	2.1	3.3	2.9	56.3	49.9	52.5
Romania	59.7	38.4	48.1	75.5	60.8	67.5	9.0	6.0	7.0	51.0	47.0	49.0
Russian Federation	..	..	..	..	..	..	..	..	..	..	..	..
Serbia	71.5	61.3	66.3	75.3	62.0	68.2	12.4	7.3	9.6	50.0	45.0	48.0
Slovakia	86.0	68.9	76.5	92.3	84.3	88.0	38.0	28.0	32.0	70.0	69.0	69.0
Slovenia	78.8	59.5	68.6	84.3	74.8	79.4	30.0	22.0	26.0	65.0	63.0	64.0
Spain	31.3	21.3	26.1	45.4	40.5	42.8	29.0	17.0	23.0	76.0	77.0	77.0
Sweden	68.2	62.2	65.2	78.0	77.8	77.9	73.0	67.0	70.0	91.0	90.0	90.0
Switzerland	85.8	70.1	77.6	89.3	80.5	84.9	..	..	..	91.0	84.0	87.0
Tajikistan[ef]	81.0	59.5	70.7	91.5	80.9	85.9	..	..	..	..	..	..
Türkiye[ef]	20.3	8.9	14.1	31.2	15.9	22.9	9.0	2.0	6.0	49.0	33.0	41.0
Turkmenistan	..	..	..	..	..	..	..	..	..	..	..	..
Ukraine[ef]	82.5	79.4	80.7	90.7	92.2	91.6	3.8	2.9	3.3	..	..	..
United Kingdom	69.9	52.5	61.0	76.1	70.4	73.2	60.0	52.0	56.0	90.0	89.0	90.0
United States of America[ef]	87.4	87.3	87.4	88.8	90.1	89.5	65.5	66.1	65.8	77.3	79.4	78.4
Uzbekistan[e]	..	..	..	..	..	..	..	..	..	28.3	24.3	26.2
UNECE region*	**69.8**	**61.9**	**65.6**	**76.5**	**72.9**	**74.6**	**46.3**	**38.3**	**42.0**	**72.2**	**69.5**	**70.9**

Source: UNECE Statistical Database, Eurostat, Organisation for Economic Co-operation and Development, Wittgenstein Centre for Demoraphy and Global Human Capital, national reports, time use surveys, census and other national surveys.

Notes and definitions

Definitions:

The indicator of **educational attainment** refers to the percentage of persons aged 55-74 who have a full secondary or higher education (level 3 and above in terms of the International Standard Classification of Education (ISCED)).

The indicator of **Internet use** refers to the percentage of persons aged 55-74 who use the Internet at least once a week. OECD definition of Internet use: Percentage of individuals aged 55-74 who accessed the Internet within the last three months prior to being surveyed.

Notes:

[*] Weighted average for countries with data available.

[a] For Montenegro data refer to 2011; for Iceland data refer to 2012; for Republic of Moldova data refer to 2013.

[b] For Kazakhstan data refer to 2016; for the United Kingdom data refer to 2019.

[c] For Montenegro, Republic of Moldova data refer to 2012.

[d] For Albania, Belarus, France, Israel, Kazakhstan, Switzerland, United States of America, Uzbekistan data refer to 2019.

[e] Data for Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Canada, Georgia, Israel, Kazakhstan, Kyrgyzstan, Republic of Moldova, Tajikistan, Türkiye, Ukraine, United States of America and Uzbekistan may not be comparable with other countries due to the different data sources and methodology used.

[d] For Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Georgia, Israel, Kazakhstan, Kyrgyzstan, Tajikistan, Türkiye, Ukraine and the United States of America educational attainment data for 2010 and projections for 2020 are from the Wittgenstein Centre Human Capital Data Explorer (2018).