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Policy Briefs are a publication series providing a synthesis of topics of research and policy advice on which European Centre researchers have been working recently.

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

Asghar Zaidi

Why active ageing?

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

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

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

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



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

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

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

What do we mean by active ageing strategies?

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

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

Development of the Active Ageing Index

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

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



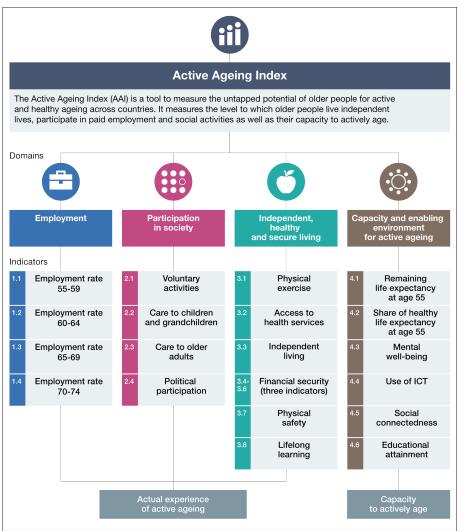
Composite indices such as the AAI always raise difficult methodological issues, e.g. of weighting their constituent indicators (see also HelpAge International, 2013). In this respect, the development of the AAI benefited enormously from the consultations of members of the AAI Expert Group, comprising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

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

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

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

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





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

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

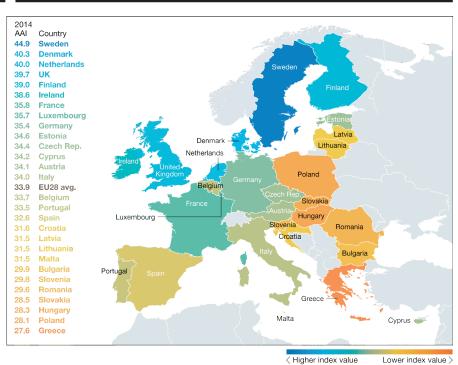
The latest results of the Active Ageing Index give a clear indication that a healthy and active life during old age is a reality for many Europeans and it has now become a genuine possibility for many more!

Key findings based on the latest 2014 AAI

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

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

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





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

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

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

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

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

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



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

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

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

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

Rank	Querall		Employment		Participation in society		Independent living		Capacity for active ageing	
1	Sweden	44.9	Sweden	43.4	Ireland	24.1	Denmark	79.0	Sweden	69.2
2	Denmark	40.3	Estonia	39.7	Italy	24.1	Finland	79.0	Denmark	65.1
3	Netherlands	40.0	Denmark	35.8	Sweden	22.9	Netherlands	78.9	Luxembourg	63.6
4	UK	39.7	UK	35.8	France	22.8	Sweden	78.6	Netherlands	61.8
5	Finland	39.0	Germany	34.4	Netherlands	22.4	Luxembourg	76.7	UK	61.3
6	Ireland	38.6	Netherlands	33.9	Luxembourg	22.2	France	75.9	Finland	60.5
7	France	35.8	Finland	33.7	UK	21.6	Ireland	74.9	Belgium	60.3
8	Luxembourg	35.7	Portugal	32.6	Finland	20.5	Germany	74.4	Ireland	60.0
9	Germany	35.4	Latvia	32.0	Belgium	20.2	Slovenia	74.2	France	59.1
10	Estonia	34.6	Cyprus	31.4	Denmark	19.6	Austria	73.8	Austria	58.2
11	Czech Rep	34.4	Romania	31.0	Czech Rep	18.8	UK	73.7	Malta	57.1
12	Cyprus	34.2	Ireland	30.6	Croatia	18.7	Belgium	72.5	Spain	56.3
13	Austria	34.1	Lithuania	30.5	Austria	18.3	Czech Rep.	71.2	Germany	55.8
14	Italy	34.0	Czech Rep.	28.0	Cyprus	18.0	Malta	70.1	Czech Rep.	54.3
15	Belgium	33.7	Bulgaria	25.1	Spain	17.8	Spain	69.8	Italy	53.4
16	Portugal	33.5	Austria	24.7	Malta	17.3	Croatia	69.5	Croatia	52.8
17	Spain	32.6	France	24.1	Slovenia	16.3	Italy	69.0	Bulgaria	52.2
18	Croatia	31.6	Spain	23.3	Hungary	15.4	Hungary	68.0	Portugal	52.1
19	Latvia	31.5	Italy	23.0	Lithuania	14.7	Cyprus	68.0	Cyprus	50.4
20	Lithuania	31.5	Poland	22.4	Portugal	14.1	Estonia	67.3	Slovenia	50.0
21	Malta	31.5	Slovakia	21.9	Latvia	13.8	Portugal	67.3	Latvia	48.2
22	Bulgaria	29.9	Luxembourg	21.9	Slovakia	13.7	Lithuania	66.2	Poland	47.9
23	Slovenia	29.8	Croatia	21.7	Greece	13.7	Slovakia	65.8	Estonia	47.5
24	Romania	29.6	Belgium	21.0	Germany	13.6	Poland	64.9	Slovakia	47.1
25	Slovakia	28.5	Greece	20.4	Estonia	12.8	Greece	64.9	Hungary	46.9
26	Hungary	28.3	Malta	20.1	Romania	12.7	Bulgaria	62.7	Greece	45.8
27	Poland	28.1	Hungary	19.3	Bulgaria	12.5	Romania	61.8	Lithuania	45.3
28	Greece	27.6	Slovenia	19.1	Poland	12.1	Latvia	58.7	Romania	40.9
	EU28 avg.	33.9		27.8		17.7		70.6		54.1
	The goalpos	t 57.5	The goalpost 54.2		The goalpost 40.6		The goalpost 87.7		The goalpost 77.7	



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

Trends in the Active Ageing Index for 28 European Union Countries

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

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

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

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

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

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

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



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

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

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

≀an ∙Al	k 2014	2010 AAI	2012 AAI	2014 AAI	Change 10-14 Overall	Change 10-14 MEN WOMEN
1	Sweden	42.6	44.2	44.9	2.3	2.7
2	Denmark	38.8	40.0	40.3	1.5	1.5
3	Netherlands	38.6	38.9	40.0	1.4	1.5
4	UK	38.0	39.7	39.7	1.7	1.1
5	Finland	36.9	38.3	39.0	2.1	1.4
6	Ireland	35.8	38.5	38.6	2.8	0.7 4.7
7	France	33.0	34.3	35.8	2.9	3.1 2.6
3	Luxembourg	31.8	35.2	35.7	3.9	4.9 3.0
9	Germany	34.3	34.3	35.4	1.1	0.4
10	Estonia	33.4	32.9	34.6	1.2	-0.6 2.5
11	Czech Rep.	31.0	33.8	34.4	3.4	3.2
12	Cyprus	32.4	35.7	34.2	1.7	-0.1 3.4
13	Austria	31.3	33.6	34.1	2.7	2.9
14	Italy	30.1	33.8	34.0	4.0	3.8
	EU28 avg.	32.0	33.4	33.9	1.8	1.3
15	Belgium	32.4	33.2	33.7	1.3	1.2 1.6
16	Portugal	32.3	34.1	33.5	1.2	1.4 1.1
17	Spain	30.4	32.5	32.6	2.3	1.1 3.3
18	Croatia	28.3	30.8	31.6	3.3	4.0
19	Latvia	32.2	29.6	31.5	-0.7	-4.1 1.5
20	Lithuania	30.1	30.7	31.5	1.4	-0.2 2.6
21	Malta	28.0	30.6	31.5	3.5	4.4 2.3
22	Bulgaria	26.9	29.4	29.9	2.9	2.5
23	Slovenia	30.0	30.5	29.8	-0.2	-0.2 0.0
24	Romania	29.4	29.4	29.6	0.3	-1.1 1.3
25	Slovakia	26.8	27.7	28.5	1.7	0.8 2.5
26	Hungary	26.3	27.5	28.3	2.0	2.1
27	Poland	27.0	27.1	28.1	1.1	0.0
28	Greece	28.7	29.0	27.6	-1.1	-2.0 -0.2



Concluding remarks

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

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

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

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

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

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



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