GREECE NATIONAL REVIEW for MERI

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Objectives of the MERI project

One of the great successes of the 20th century in Europe has been an average increase in life expectancy by some 25 years. As a result almost every fifth person in the European Union in 2004 is a woman aged 50 or more years. Despite this fact, information on the living conditions of older women is sparse and they tend to be neglected in scientific studies and official statistics (1).

In a European seminar in 2001, a list of suggestions for future research was drawn up and agreed upon with representatives of the European Commission, national governments within the European Union, EFTA and Accession countries, as well as relevant European and national umbrella associations. This formed the basis for an application to the Commission from representatives of twelve of the, at that time, fifteen E.U. countries for a project with the following main objectives

- to increase knowledge about the specific living conditions and problems of older women
- to improve the empirical basis for
  - work by national and European associations aimed at older women and/or intergenerational relations,
  - government tasks at social policy level, and
  - current and future research work on the living conditions of older women
- to raise awareness amongst the general public on the situation of older women.

In line with the themes selected for the MERI project, this report uses the very limited research and statistical data available in Greece concerning older women for the study period 1993 – 2003. This paper presents a summary of available studies and these are included in the comparative European overview of available statistics and the research situation on the living conditions of older women (MERI) in the twelve European countries participating in the project. Sextant Research Group at the National School of Public Health, undertook the research for Greece.

In the MERI-project, after debates on the issue of who should be in the category of ‘older women’, it was agreed that the researchers would take the definition of an “older women” as being those aged 50+. While this definition does not agree with international or national usage, it helps focus on this very heterogeneous but ignored social category that includes both women who are working, and retired, those in the prime of life and those whose are physically dependent or at the end of their life span.

INTRODUCTION

The general lack of data and research on the socio-economic situation, health and well being of Greek citizens and residents, is partly explained by the residual or peripheral nature of the Greek welfare state which has traditionally not required extensive assessments of their citizens, since welfare benefits and services were and remain very limited, discretionary and often awarded on the basis of personal and political patronage. Thus the lack of data and research on older women is not unique to this population group. As will be discussed below, the increase in data gathering that has occurred in the past five years is not in response to national policy makers, but mainly comes from the demands of the European Union that, in seeking to help the development and convergence of Member States, requires base line data. Some Greek politicians, policy makers and administrators concerned with issues relating to...
socio-economic development, social inclusion and equity are becoming increasingly sensitive to the needs for data and research on many aspects of Greek society, including older women, since only in this manner can socio-economic policies be developed systematically and effectively. The absence of an umbrella organization representing the interests, knowledge and needs of older people in Greece, in contrast to all other Member States, remains a weakness in Greek civil society since no systematic advocacy takes place on behalf of older people.

1. THE RESEARCH PROCEDURE

The researchers sought data and research findings not only in Greece but internationally. The major source of information for Greece comes from published official statistics including demographic data, available by age and sex on www.statistics.gr (2), and which also includes regular administrative data gathered within the public sector, and special reports based on periodic research undertaken mainly by the National Statistical Service of Greece (NSSG) which, in contrast to other Member States, is the main source of social, employment (3) and health (4) data. The data referred to here covers the past decade and much of it has been sent as official government data to the international bodies that request it – e.g. Eurostat, the European Commission, the Council of Europe, and the OECD, and is published by such organizations in their various statistical, demographic, and socio-economic reports (5,6,7) and is generally available on line or in special publications. This data is being described for all the countries working in the MERI project. Other data was obtained from two of the main social insurance funds (IKA (8) and OGA (9) ) that cover approximately 70% of the population and increasingly this data is also available on line\(^1\).

Unfortunately there are very few databases supported by either private or public organizations and only in recent years are attitudes about making data publicly available changing. Many studies and surveys have been produced almost entirely in response to demand by Eurostat and the European Union for social and economic data, reflecting the very low priority and investment in research in Greece, a situation which is only very slowly changing. As in other countries, many of the themes and sub-themes selected for analysis by the MERI team are not dealt with in official statistics. Basic data on housing, employment, marriage and mortality are primarily available through the NSSG as official statistics, though other social research on behalf of government research departments is limited. Although the NSSG has made considerable steps forward in extending their original statistical work, it is still unable to play an effective role in developing national statistics in all areas of social and political life. Most publications that are available are nearly always now available on the Internet or can be purchased or obtained directly. The main Ministries (Employment, Health and Welfare, National Economy) that produce documents and data of direct interest for this study, all do so using the NSSG. Although they have in some cases published special reports on specific aspects of social and economic life, the data they use are supposed to be drawn from the NSSG statistical service\(^2\). There are several employment related research organizations\(^3\) and EKKE (National Centre for Social Research) that have produced reports

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\(^1\) The other large social insurance fund covering the self employed and small employers (OAEE and TEBE) does not publish analytic data by age and gender.

\(^2\) A recent strike early in 2004 by NSSG staff concerned the doubtful nature of some of the figures being produced by the government, not based on work by independent staff of the NSSG.

\(^3\) Many of these are run as Institutions, Research Centres and Observatories in conjunction with the social partners – INE, IOBE, or by government bodies e.g. the Employment Observatory of OAED (National Manpower Employment Organization). They use and analyze some partial data from the organization to which they are allied, in addition to that produced by NSSG.
containing official statistics based on NSSG data (10) and a recent report on the social profile of Greece (11) - in the latter case a major part of the official statistics referred to are drawn from data collected in the context of

• Eurostat (see also NewCronos, Eurostat’s online reference database containing summary data from three surveys – see below. Detailed data extractions can be obtained on CD-ROM from Eurostat.
• Eurobarometer,
• the European Community Household Panel,
• the Labour Force Surveys,
• the Household Budget Survey and
• the Women in Science database.

The major source of statistical information on older women (and men) is from the Census data which, as in other countries is conducted every 10 years, the last full Census being in 2001⁴). Full analysis of Census data and related publications takes many years. Emke-Poulopoulou, 1999, (12) produced a useful book that summarized all available demographic, social and economic data on older people including details on income and pensions, social life, household, and social participation though with limited break down by age in combination with gender.

There are virtually no independent sources of data at the level of local authorities, as stated by EETAA (the Greek Association of Local Authorities) and thus no data on the situation of older women in local areas. Profiles of the inhabitants of local areas are only available in the analyses in the official Census or irregular data collections by the NSSG.

Extensive and accessible public libraries providing access to official data hardly exist.

The second source of information comes from the minute amount of research referring to older women in Greece in the past decade. The lack of social and economic research, given the paucity of private or public funding for social science research⁵, does not uniquely affect research and knowledge concerning older women, Even the existing research reports published since 1993 rely heavily on secondary analysis and not primary research.⁶ Socio-economic research also depends on the interests and research work of professors or students in higher education and since gerontology is not studied in any university in Greece, is not a course in social science departments and is not taught within the medical faculties, the lack of studies on older women is not a surprise.

Even when studies of relevance to older women exist, they are not readily accessible. Organizations, including the Greek government, libraries, research bodies and universities have only begun presenting themselves and data on-line in the past 3 years, and thus data and references are difficult to find. The researchers had to visit the major libraries in Athens (The Universities of Athens and Panteios, institutes, research centres and relevant organizations); they also visited publishing houses known for their scientific publications. Other searches for data on older women involved online research in Greek university libraries outside Athens; online research in British and American universities and research centres, as a large number

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⁴ Some of the post-war census have been based on population samples.
⁵ The National Centre for Social Research (EKKE) is under funded and has to rely often on EU research projects in order to undertake any kind of data collection and analysis.
⁶ The only study ever completed entirely on the subject of older Greek women was in 1985 by Aphrodite Teperoglou.
of Greek students undertake postgraduate and doctoral research in these countries; online research in scientific journals, mainly British and American (e.g. the Gerontologist, Age and Ageing, European Sociological Review, Health Policy and Planning, The European Journal of Public Health, American Journal of Geriatric Psychiatry, International Journal of Quality Health Care etc) for any information on Greece and older women after 1993; online research through relevant databases; online research on NGOs, Associations, Institutes etc dealing with the target group. Even where references in various articles occurred concerning gender and age, on examination the actual content was often not specific or broken down to allow analytic conclusions on the subject of older women.

2. WHAT IS KNOWN ABOUT GREEK OLDER WOMEN THROUGH AVAILABLE STATISTICS AND RESEARCH?

2.1 Health, functional ability and services

• General health aspects

The main source of statistics is from the NSSG using administrative data provided by the Ministry of Health and Welfare. The Social Welfare and Health Statistics Report of 1997 published in 2001 (4) gives detailed descriptions of hospital admission/discharge by age (by 10 year age groups up to 80 years of age and over), gender and category of disease. Greece has not produced a Health for All report for the WHO Europe. Studies on life expectancy for men and women in Europe show life expectancy of 81.18 years for Greek women compared with 75.87 years for men. Another study (13) shows that life expectancy for Greek women 65 years and over has been steadily rising from 17.6 years in 1986 to 18.1 years in 1992.

A study of a sample of 30 women aged 65-80, engaging in activities like swimming, walking, exercise and trips, showed that these older women enjoyed such physical exercise and experienced feelings of relaxation and euphoria through them, without being competitive and without having specific goals but participating for the pleasure derived from such exercise.(14)

• Physical disorders and disabilities

There is still no official data available on disability levels for the general Greek population and none on disability in older age groups, hence there is also no data on disability levels amongst older women.

Data from the largest social insurance fund (IKA- Urban Workers Fund) provides figures on the numbers receiving pensions by virtue of disability (8). This data cannot easily be generalized to the whole population of older people since during the 1980s and early 1990s people were allowed to leave the labour force early with disability pensions as a way of guaranteeing some kind of income for the older unemployed. Although this is no longer a common practice and the share of disability pensions is slowly declining, it makes the use of the data difficult. In 2001 9.67% of all IKA pensions for people of all ages were awarded in 2001 on the grounds of disability. OGA (9) figures indicate that disability pensions are most common for those over 65 (59%) of all disability pensions, and more women aged 50+ are dependent on disability pensions than men. Overall for both insurance funds though women are less likely to receive disability pensions this reflects their lower participation in the paid labour force rather than levels of disability.
From a research study in Member States presenting the percentage of women aged 65+ said to suffer from a physical disability after serious illness (15), the number of Greek women who responded “yes, some (disability)” was the highest among all counties included, while the number reporting to suffer from severe disability is average compared with other Member States. In the same study the percentage of women aged 50-64, who are not well-informed about HRT is presented, with Greece having a very high percentage, the second highest after Spain. Eurobarometer 1996 also contains information on health and disability. (16).

• Mental disorders and disabilities

There appear to be no official statistics on mental disorder and disabilities for the general population, and thus they are not available for older women. Administrative data exists only for some very limited cases of mental illness.

No research was found on the mental disorders and disabilities of older women.

• Medical treatment (cure) and health care

Hospital admissions and discharges data is available by age and gender, though data on visits to doctors is not. Visits to IKA doctors are not analyzed by age and gender.

No research information was found on this topic

• Care at home

There are no official statistics on those receiving care at home whether from informal carers e.g. family carers, or formal carers e.g. paid individuals, paid services. There is also no official data on the numbers of older women involved in caring, working and caring, or the gender and age of those being cared for. IKA data provides data on the numbers working as family workers by gender though these are not exclusively for the care of older people.

A research study that compared the care received at home in “Northern” and “Southern” countries by older women over 60 years of age compared to older men and that included Greece, showed that women in Southern countries receive more care as they grow older, but less than men in the same countries. (17) However older women in general received more care than either men and women in the Northern countries. Reference is made to the inadequacy of state services to provide care for the increasing number of elderly people in Greece and the role of families in providing such services. It is noted that women of all ages are those who shoulder this burden.

• Care in institutions

No regular official data is collected on the numbers of older people in different types of residential institution and indeed many such residential institutions are not registered officially. Again the Census (2) is the only regular and reliable source.

No research information was found on this topic

• Healthy lifestyles, self-care, prevention

Data exists on smoking, alcohol consumption, drugs and covers ages 36-65 in one category but this is not broken down by gender (11).
The study mentioned earlier on elderly women (65-80 years of age) engaging in exercise (14), showed that the subjects did not rely on doctors and drugs, but tried to maintain their good health through physical activities and positive feelings about their body. Such exercise helped them reduce stress levels and anxiety about the future, as well as keeping fit and reducing health problems.

- Other

Data on pedestrian and other accidents is available by age and gender but only up to 50 years and over (18). A half of all accidents are in this older age group and thus remain unanalyzed. Suicide data is published by age and gender for 1999 but up to age 41 years and over. Since the majority of suicides occur in this age group they remain unanalyzed.

In one study, a table presents the self-perceived health status of women aged 65-74. In Greece, “BAD” is the most common answer (37.3%), followed by “VERY GOOD” (29.9%) and “FAIR” (22.4%). (19)

2.2 Education

- General education

National statistics (2) provide data on the levels of education of women 45-64 and 65 years of age and plus; figures show that 8 out of 10 older women did not complete more than basic education. The younger the age, the more years of education have been completed, but the differences between those aged 50-55 and those aged over 80 are considerable.

Just one research paper made a brief reference to the fact that many of the women currently 50-60 years of age in Greece have received little if any education and tend to limit themselves to specific roles, with the most important being that of family caregiver. (20)

- Professional training

Official data is available on numbers of older women having completed higher and technical level education.

No research was found on this topic.

- Vocational training and life-long learning

Participation in vocational training by older workers is generally very low for all those aged 55-64 years (0.1%) and older women are even less likely than men to participate, but gender specific data is not available.

There is no data available on the numbers attending all forms of life long learning. Since many institutions including the KEK (Centres for Technical Education, the Agricultural Training Centres, the Open University and others explicitly put age barriers e.g. 45, 55 years of age, this means that most older women have very little access to publicly funded vocational training.

No research was found on this issue.

2.3 Work

- Labour market participation
Detailed official data is available through the NSSG Labour Force surveys (3) on employment, unemployment, and the economically non-active, by gender and age (the main division is 45-64 and 65+ though more detailed age breakdowns are available and used by researchers in employment) and by educational level. Data is also available by age and gender related to the economic sector of employment, specific areas of employment work (NIACE codes) - , and by region. IKA also has data on those insured by age and gender up to 70 years and over (8). Additionally it has data on wage levels for women and women in the age groups 50-54, 55-59, 60-69, 70 years and above. This data is striking in the fact that it shows that the wage levels of older women as being progressively lower than men’s with increasing age and compared to women in younger age groups i.e. gender wage differentials are highest for those aged 50 years and over. Work on the NSSG figures has been undertaken on women’s position in the Greek labour market by age (21)

Older women have amongst the lowest rates of labour market participation in Europe with family reasons being cited as the sole factor associated with inactivity. Older women still play a major role in agriculture, a fact often ignored by those involved in agricultural policy and the support of agriculture generally.(22) Though the numbers have been systematically declining, the proportions of women aged 45+ in agriculture has risen (3).

- Working areas, conditions and attitudes towards older workers

The Labour Force Surveys (3) show the concentration of women in selected occupations by age. Self employment is the highest in Europe amongst older workers of both sexes (47% of those aged 55-64 and 75% of 60-64 year olds in 1998), and older women are also more likely to be self-employed than younger women- 40% of women aged 45-64 were self employed in 1998.

Wage levels are reported by the General Secretariat for Equality based on NSSG Labour Force Statistics 1998. IKA data (8) also shows average monthly/hourly earnings by age and gender; it is striking that the older the age the greater the difference between male and female earnings. Thus those over 50 years of age earn only approximately 52% of average male earnings.

No research on gender and attitudes towards older workers was found.

- Exit from the labour market

Unemployment though lower than for other age groups, rose for women aged 55-64 from 1.2% in 1990 to 4.4% in 2000.

Figures are available for Greece on the average age of transition to inactivity by gender 1950-2000. (23) IKA data (8) provides the exact age at which women and men take their pension; the average age for women is 57.82 years compared to 60.76 years for men in 2001 Details are available for the exact age at which women receive their pension up to the age of 75 years.

Research on the negative emotional consequences of retirement, related to the perception of the self, exist in one study, where the identity issue of people in the third age is discussed, and this includes older women. (14)

- Unpaid work in the family
The LFS (3) show 40% of women overall are estimated to be unpaid family workers, data being available by five year age groups (50-54, 55-59, 60-64, 65-59, 70-74, 75+) Numbers have declined slowly, related partly to the declining participation of women in agriculture. The European Network on Policies of Unpaid and Paid Work has also discussed this issue.(24)

A very brief overview of the situation of women in Greece regarding the provision of care within the home is found in one research report. Reference is made to the traditional model and roles with which women have been raised in Greece, including the provision of care to family members, husbands, children, grand-children, in-laws etc, a model which is still prevalent, though increasing numbers of 50+ work in paid employment outside the home in addition.(17)

In another study, the percentage of female unpaid family workers in Greece is given as almost 75% of the total, for the period 1990-1997, the source being the Human Development Report in 1999 of the United Nations Development Programme. Notable is that the largest proportion of these women are aged 50+. (25)

In one study that does not specifically separate Greece, but refers to "Southern" countries, where Greece is included., women over 60 are compared to men of the same age in a chart presenting the amount of care provided by older people in the extended family. The chart shows that women in “Southern” countries provide a great deal of childcare, gradually diminishing with age, followed by women in “Northern” countries. Men of the same age provide distinctly less childcare, with those in the “Southern” countries contributing least of all. All categories tend to converge at the age of 80, where the provision of childcare is minimal for all.(14)

- Unpaid work in social networks

There is no official data on this subject. Greece does not participate in the World Values Survey. (90 countries participate) Greece began participating in the European Social Survey in the late 1990s. From the ECHP data it is evident that group membership e.g. in civil society such as NGOs is one of the lowest in Europe (8.9%) (26) and older people are less likely than those in younger age groups to participate.

- Other Data

Some official data is available on migrant older women from the white cards applying for residence and work permits, showing that many Bulgarian women are aged 40-49, substantially older than the majority of migrants. (27) IKA figures (8) do not break down their data on migrants by their age. There is some data on crime by women showing that 36% of prisoners were aged 45-59 and of low educational level (28)

2.4 Material situation and its effects to living conditions

- Sources and levels of income

Poverty, noted in many demographic and social and economic reports (22% of Greek households live below the poverty line (29,30), is still strongly related to age and gender, with older women most likely to suffer from poverty. The majority of older women depend
on pensions after the age of 60 years for income – other sources of income are property and family. The Greek State (KASE) provides an allowance to dependent people aged 60 and more who have an income below the poverty line. The numbers receiving this are provided by the government but not by gender and age. Figures on income are presented by gender and age groups (60-74; 75-84; 85 and more) and are published periodically from the Labour Force Surveys (3).

One research article focuses on the income of older women in Greece, but does not so much present data as make a general description of the situation and the difficulties faced by older women. There is reference to the pensions women are entitled to, the extreme financial difficulties faced by those whose only income is an insufficient pension, but have to rent housing and require support from children and other family members (31).

- Social protection systems affecting older women

Data on the numbers of older women insured by IKA and OGA by age are available (8,9). Both insurance funds provide details on pension levels; for IKA women pensioners in 2003 average retirement pensions were 30% less than men’s reflecting the shorter number of years worked and the lower levels of wages. They were 17% less for disablement pension, and for widows pensions, the few men receiving pensions by virtue of being widowed, received 34% less than widows, again reflecting women’s lower wages and fewer years of contribution. Widow’s pensions were 61% of the level of the basic retirement pension. Data is also available on the numbers receiving the supplementary pension (EKAS) to ensure they receive an adequate pension. These figures are not available by age or gender from IKA- since the numbers and determination of eligibility depend on total income. However judging by the large numbers receiving it who are recipients of a pension as a result of being a dependent (widows/widowers) it can be assumed that a considerable proportion of older widows on pensions have very low incomes.

There was no research found on the subject.

- Consumption of goods and services

There is no official data available by age and gender. There was no research found on the subject.

- Housing conditions and equipment

The housing conditions of the Greek population do not provide a breakdown by age and gender e.g. which sections of the population have no indoor toilet etc.. Ownership of housing is available by age and gender. (2) There was no research found on the subject.

- Financial support given to family members

No official research data is available on this theme. There was no research found on the subject.

2.5 Social integration, participation and other social issues

- Household structure and marital status
Data giving a detailed breakdowns by age, region, gender, cohabitation and marital status is available from the Census.(2) There is no statistical data on the role of grandmothers and grandfathers e.g. in looking after their grandchildren. One study focuses on the living arrangements of older European, providing data from the ECHP. A table shows that the number of women in Greece, aged 65+, who live alone is lower than in the “Northern” countries, while that of women living with their children is higher than that in the “Northern” countries. In general, this study reveals Greece as having similar patterns of living arrangements as other “Southern” countries, which present considerable differences from the “Northern” countries. The respective data on men, presented in the same table, reveals the same pattern.(32)

A second study with a very similar focus, namely the living arrangements of elderly European women, includes data that shows more than half of non-married Greek women who have had children, live with their children after the age of 70, while the number of women living alone is close to that for the other “Southern” countries and significantly lower than that in the “Northern” countries. (33) However, the majority of women who have not had children live alone, with only 19 per cent living with other people, a figure bringing Greece closer to the “Northern” countries, than the rest of the “Southern” countries. Another chart shows that the probability of living alone for women over 70 steadily diminishes in the “Southern” countries, while it rises in the “Northern” ones, beginning to diminish after the age of 80, but still remaining higher than the “Southern” countries. Moreover, a chart presenting the effect of income on the probability of a non-married woman living alone over 70, shows that those without children had higher average incomes (8060 euro compared to those with children (7400 euro) – total annual personal income, PPP equivalent. The probability of living alone rises with income, especially for the third quintile (compared to second for Northern countries.

In another study, a Table presents the percentage of women aged 65+ to the total female population as 15,1% (1991 census), the largest part of whom are widowed, as opposed to the men who are married. This is explained in the paper by the greater number of years women live, linked to age differentials between the age of marriage of men and women leading a high incidence of widows. Similarly, the number of divorced women over 65 is almost double that of men, indicating that men tend to remarry, while women stay alone more.(34)

- Partnership relations

No information was found on this topic

- Intergenerational relations (macro level)

No information was found on this topic

- Sexuality

This does not belong to the domain of official statistics. The identity problem for all women as far as their appearance and body are concerned and difficulty in relating to the images of women promoted through the media, and especially advertising, is discussed in one article that uses the example of older women. (14)

- Kinship networks
This does not belong to the domain of official statistics.
No research information found on this topic

- Friendship, neighbourhood and community networks (local level)
This does not belong to the domain of official statistics.

One study mentions the positive consequences for older women of their participation in physical activities and exercise within the framework of a team and of an association for the elderly. The importance of sharing, support and reciprocity available to these older women is emphasised in the study.(14)

- Mobility and accessibility
This does not belong to the domain of official statistics.
There appears to be no data on care ownership by age and gender. Nor were studies found concerning the accessibility of neighbourhoods to older people.

- Leisure and cultural activities
This does not belong to the domain of official statistics.7.

One study focused on a group of older women (65-80), participating in a range of leisure activities, such as exercise and trips in the framework of an association for the elderly, but the focus of the analysis is more on the exercise and health issues and not so much on the leisure aspects.(14)

- Volunteering
This does not belong to the domain of official statistics.

- Ageism and other kinds of discrimination
This does not belong to the domain of official statistics.

One study mentions the psychological effects of modern advertising for older women, who cannot identify with the images of the woman and of the female body used in advertising and are made to feel unhappy about their appearance. Moreover, the stereotyping used in advertising, with older women always pictured as grandmothers or in the kitchen, is also briefly mentioned (14)

- Socio-psychological aspects
This does not belong to the domain of official statistics.

- Other

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7 The recent distribution of subsidized culture passes for older people could be analyzed by age and gender by the Ministry of Culture.
One research study examines from a psychological perspective issues of identity and the way the self is perceived, with the emphasis on older women and the changes in self-perception, which accompany old age. In one study, women in Greece for the age groups 35-64 and 65+, asked about being happy with their weight. There is a table showing that women in the older age group are less satisfied with their weight, perhaps revealing a difficulty in accepting changes to their body, occurring with age.(14)

2.6. Violence
There are no official data concerning violence experienced by older women in the family, or in residential institutions for older people, and only recently has a report been written on domestic violence against women. (35) but this covers women up to the age of 60 years. Official data exists on accidents, road accidents and suicides (18). With respect to road accidents the analysis concerns only those up to 50 years and over and is not broken down by gender, yet over half of road accidents occur in this age group. Driving accidents are broken down by gender but up to age 50+. Suicide figures are provided by age and gender but only up to age 41+

No other studies were available on violence and older women.

2.7. Interest representation

- Political participation

In the new National Parliament (2004) 13% of MPs are women, an increase from the previous 9%; however this is not broken down by age. (36), It should be noted that older people do not normally talk about their age and indeed it is considered bad manners to ask,

One paper mentions very briefly the lack of political participation, as well as of interest in public affairs and politics, on the part of a large proportion of women in Greece, especially older women, due to the way they were raised and the traditional model they still adhere to.(20)

- Representation in interest groups and lobby groups

No statistics or research was found on older women.

- Participation in formal and informal decision-making processes

Data is available from the General Secretariat for Equality concerning women’s participation in decision making bodies e.g. judiciary, national and local government. However this is not freely available.

- Others

The over 900 Open Care Community Centres attended by men and women (KAPIs) have varying levels of membership and all members are over 60 years of age. However, details on this is not gathered regularly, does not appear as part of regular official statistics and we have no details on the age of office holders.
3. Conclusions and recommendations

General remarks

The absence of data and research on the subject of older women is evident in this presentation. Even within the wide parameters of the MERI study that were given – from aged 50 upwards, almost nothing in written. This may be interpreted as the result of older women’s political and social invisibility, the result of patriarchal systems of protection which are still prevalent, yet the reality of older Greek women’s lives is often harsh⁸. There are specific aspects of women’s lives not covered in this report e.g. the transfer of property to children with the right of usage by the older couple or surviving widow, that immediately underlines the lack of control women have over their lives in Greece. While a few older women, either through exceptional careers or through inheritance from much older husbands may be amongst the wealthier sections of the population, they remain a tiny minority.

Politically it is important that we point out that it is older women in particular who suffer from being ignored in research and statistical analysis. Even the very limited data presented here gives clear indications of the accumulated and accumulating disadvantage of being a Greek older woman in economic terms – whether as a wage earner or a pensioner. Poverty data indicates that older women are particularly hard hit. In other areas of life almost nothing is known about what happens to older Greek citizens, and older women share in this general fate of ignorance concerning the life situations of older people.

3.2. Specific national data gaps

Very little socio-economic research is occurring on various aspects of growing old, on the living conditions, health and well-being of older people in Greece. There is also little gender research that covers older women. Thus such recommendations that are made here start from the minimal conditions pertaining in Greece with respect to official data and research.

Fortunately there are signs of changes in the philosophy and attitudes in the public sector so that data is increasingly being kept as a source of information for policy makers and for public use.

In each area mentioned above there is all too often a virtual complete gap in what we know. Thus what we have as data on the health of older women gives some clue that their levels of disability, of self reported health may be lower than in other countries- but we know very little. We have no measures of general disability in the population.

There are so many gaps in official statistics and few resources given to them. Even the Census questions are very limited.

3.3. Recommendations to improve the situation

The statistical service essentially began in early 1960s and has consistently suffered from under funding and the need for a central plan and organization of all its departments.

- Thus both investment in and reorganization of the statistical service are recommended. Training of statistical staff in the potential use of national statistics by central and regional planners and policy makers would help them be sensitive to gender issues and specifically older women.

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⁸ This is not to say that younger Greek women’s lives are not also harsh as exemplified in their high levels of unemployment, the lack of services to support them e.g. in maternity,
• There needs to be a much stronger coordination between government services to ensure the production of adequate statistics for the NSSG.
• Deeper analyses are needed of existing data and their production in an ever more readily available form. Again such analyses should ensure that age and gender data are readily available.
• Local Authorities should take seriously their role in producing local statistics on those living in their areas and this must include data by age and gender. However this needs to be planned and supported by central government
• All the social insurance funds should publish their data reports broken down by age and gender and make them available on line.
• Official police statistics should be broken down to cover adequately those in older age groups.
• Health Statistics – given that morbidity and mortality are increasingly associated with older age group, it would be appropriate for the Health and Welfare Statistics gathered from hospital admissions and discharges to be presented in 5 year age groups and to go up to 85+ or 90+ since the using hospitals (morbidity and mortality) are in the older age groups. The Ministry of Health and Welfare reported that is developing its own data base.

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