Older people in Europe
EU policies and programmes

SUMMARY
Older people are assuming a greater importance in the European Union as both their numbers and their proportion of the population increase due to the ageing of the population. The European Union (EU) and its Member States have adopted a number of policies and programmes that affect older people directly or support them in various ways.

Discrimination on the basis of age is prohibited in general terms by the treaties of the European Union. There is specific legislation against age-based discrimination in the area of employment, but it allows for exceptions where the differential treatment of older people is justified by societal goals and is necessary and appropriate. Legislation to extend anti-discrimination measures to other areas has been proposed but not yet adopted.

The EU has helped to put in place a range of policies and programmes that promote active ageing, particularly in terms of helping older people to work longer. The EU supports Member States in trying to find adequate and sustainable solutions for pensions, healthcare and long-term care – issues that are important for seniors and the elderly, particularly in the face of the deepest recession in decades. The EU is also considering, or has adopted, measures relating to the accessibility of publicly available services that can help elderly persons who are frail or suffer from age-related disabilities. EU-funded research also supports activities directly aimed at improving the wellbeing of older segments of the population.

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Context
Due to increasing longevity, low birth rates and the greying of the baby boom generation, the European Union (EU) is facing major demographic change as older people make up an increasingly large proportion of the population. As of 2013, 18% of Europeans are aged 65 or more (more than 92 million individuals) but this is predicted to rise to 30% by 2060. Over the same period, the proportion of those aged 80 and over will more than double from 5% to 12% of the population, becoming almost as numerous as young people under the age of 15. It is therefore perhaps not surprising that older people are the focus of a range of EU policies and programmes, including those concerned with discrimination, active ageing, social protection and accessibility of public services as well as research and innovation.

Age-based discrimination
Age discrimination can affect younger people, but discrimination against older people is more pervasive. According to a Eurobarometer survey in 2012, only 18% of Europeans believe that age discrimination against people aged 30 or younger is common, whereas 45% think that discrimination against people over 55 years old is widespread. (Note, however, that half think that discrimination against older people is rare or non-existent). When it comes to employment, 54% of Europeans cite being over 55 as a factor that puts job applicants at a disadvantage – more than any of a dozen other characteristics including disability, skin colour, religion, gender and sexual orientation.

In terms of EU treaties, Article 19 of the Treaty on the Functioning of the European Union empowers the EU to legislate against discrimination in terms of age as well as sex, racial or ethnic origin, religion, disability and sexual orientation. Article 21 of the Charter of Fundamental Rights of the EU (legally binding on EU bodies and on Member States when implementing EU law) explicitly prohibits discrimination based on age. Article 25 of the Charter also recognises the right of the elderly to lead a life of dignity and independence and to participate in social and cultural life. The European Convention on Human Rights (established by the Council of Europe but to which EU Member States have acceded, and to which the EU is expected to accede) does not explicitly bar age discrimination in relation to the exercise of Convention rights, but the scope of its anti-discrimination clause (Article 14) has been interpreted as extending to age. Moreover the European Court of Justice has acknowledged in its judgement in the Mangold case that non-discrimination on the basis of age is a 'general principle' of EU law. The Court undertakes to ensure compliance of all EU laws with such general principles.

Employment
In terms of secondary law, the EU’s Employment Equality Directive (2000/78/EC) generally prohibits age discrimination in employment and occupation. Nevertheless the Directive allows for differential treatment on the basis of age if two conditions are met: the differential treatment must have a legitimate aim (e.g. facilitating employment of the young or avoiding the humiliating dismissal of older workers for underperformance)
and the means to achieve that aim must be appropriate and necessary. This provides potentially broad grounds for justifying age discrimination, leading to criticism that the test is too lenient and can be applied unevenly. However in applying the justification test, the burden of proof is reversed: the respondent to a complaint must justify the different treatment, not the person who claims to have suffered the discrimination.

Almost half of the more than 20 age-discrimination cases on which the European Court of Justice has ruled deal with compulsory retirement. Nevertheless the majority of Member States have abolished mandatory retirement ages except for specific professions, such as the civil service, police and the armed forces. This is in line with popular sentiment: a Eurobarometer poll carried out in 2011 showed that 61% of the population aged 15 or over believed that people should be able to continue work beyond any statutory retirement age. However some experts are concerned that the abolition of a compulsory retirement age could lead to greater emphasis on 'reduced capability' of older workers as a reason for dismissals, in effect reducing their employment protection.

In 2014, the European Commission (EC) reviewed the application of the Employment Equality Directive, noting that in transposing the Directive into national law, most Member States had included exceptions for occupational social security schemes. The main obstacle to enforcement of this Directive remains uncertainty as to the legitimate grounds for exceptions. According to a 2012 European Parliament (EP) study, the EP should request that the Commission clarify conditions for identifying valid exceptions.

Another problem is lack of general knowledge of the anti-discrimination law, though the EC concluded that the Directive has led to increased awareness. The EU also supports an information campaign begun in 2003 entitled 'For Diversity. Against Discrimination'. Support to good practice in this area has been provided under the EU's PROGRESS programme (2007-2013), now continued by the 'Rights at work' component of the EU Programme for Employment and Social Innovation.

Beyond the workplace

In 2008, the EC proposed an Equal Treatment Directive that would extend the prohibition of discrimination on the basis of age (as well as other characteristics) to social protection, healthcare, education and the provision of goods and services. Although the EP adopted its position in 2009 (including 80 amendments), the Directive is still being considered in Council where the proposal needs unanimity for approval. During discussions in November 2013, some Member State delegations expressed reservations on the need for the proposal, the inclusion of social protection and education in the scope, questions of legal certainty and the practical impact of the Directive. A 2014 EP impact assessment found that the Directive could create significant costs for small and medium-sized enterprises and public service providers (e.g. in terms of healthcare). In addition, an updated Commission review of measures in Member States concluded that many countries already have specific legislative provisions regulating age discrimination, either as part of their constitutional provisions or through sector-specific legislation. However a number of jurisdictions do not include age discrimination in social protection or healthcare; and several others provide general justification defences in relation to differential treatment based on age. As of April 2014, the Council Presidency was continuing to work on drafting suggestions for the proposed Directive.
Active ageing

In the EU, active ageing involves encouraging older people to remain active by working longer and retiring later, by engaging in volunteer work or caring for young or very old family members, and by leading healthy and autonomous lives. Perhaps inevitably in the light of the recent recessions in many Member States, the EU’s Europe 2020 target of an employment rate of 75% of the working age population, and the anticipated shrinkage of the workforce by 1 to 1.5 million workers a year over the next thirty years, greater emphasis has been placed on keeping older workers in employment. For some seniors, working longer may be necessary or beneficial financially, but for many it is a way to contribute to society and to keep physically and socially active.

Employment policies are principally the responsibility of Member States. However the EU’s European Employment Strategy provides a framework for coordination of policy and sharing of experience in line with overall EU recommendations. According to guidelines adopted in 2010, Member States are to increase labour market participation of people aged 50 and over through active ageing policies dealing with work organisation and lifelong learning. The EU also supports dialogue between the European Social Partners (employer organisations and trade unions) that has led to EU-level framework agreements on subjects such as part-time working, teleworking and working conditions for temporary workers that can make it easier for seniors to continue working.

Reforms over the past few years have focussed principally on:
- Reducing incentives for early retirement in tax and benefits systems.
- Providing financial incentives (such as reduced social contributions) to seniors who continue work or to employers who hire older workers.
- Promoting lifelong learning and training opportunities for older workers to ensure that they remain productive.
- Developing new roles involving intergenerational teams and mentoring or coaching roles that make effective use of the expertise of older workers.
- Making work organisation more flexible to meet the needs of seniors, including flexibility in working time, part-time work and temporary employment, as well as developing opportunities to reconcile work and care responsibilities (e.g. spouses and adult children caring for the elderly, or grandparents caring for grandchildren).

The EU declared 2012 to be the European Year for Active Ageing and Solidarity between Generations, which provided the focus for a wide range of initiatives. For example, the ESF-Age Network, supported by the European Social Fund, provided a showcase for good practice examples in the management of ageing workers in 14 Member States. The EU helped to fund a Best Agers initiative in the Baltic Region to encourage people aged 55 or older to work with different age groups in business and skills development. The Active Ageing Index was developed as a synthetic measure based on 22 measurements of how well Member States do in terms of social and employment participation of older people and their capacity to age actively (see box on next page).

At the end of the European Year, the Council adopted Guiding principles for active ageing to serve as a checklist for what needed to be done beyond 2012, continuing many of the education, benefits and employment measures mentioned above, as well as providing support for healthy and independent living. Promoting active and healthy ageing is also one of the investment priorities of the new European Social Fund for 2014-20.
Social protection

One of the major consequences of the ageing of the population in the EU is the increase in the cost of providing adequate pensions, health care and long-term care for a growing number of older people, and over a longer period of time. Whilst Member States have principal responsibility for social protection, the EU supports and complements their activities through the Open Method of Coordination (a voluntary process for political cooperation based on common objectives and progress indicators). It also provides recommendations to Member States within the context of the European Semester.

Pensions

The sustainability of pensions is a particular concern in the light of the growing number of pensioners and a smaller number of active workers. (The problem is particularly acute as many public pension schemes are based on the 'pay as you go' principle whereby current expenditures are financed by the current contributions made by, or on behalf of, active workers.) Public pensions accounted for an average of 11.3% of GDP in 2010 in the EU27 and the proportion is expected to rise to 12.9% of GDP by 2060.

A 2012 Pensions Adequacy report highlighted the beneficial effect of pension reforms introduced over the past decade or more by Member States. Although each Member State decides its own measures, these reforms have generally consisted of linking benefits paid out to contributions paid in, linking required contributory periods to life expectancy, increasing the pensionable age (with changes often phased in over a long period of time), increasing reliance on pre-funded pensions such as defined contribution schemes, and reducing access to early retirement (including through unemployment, sickness or disability schemes). Nevertheless early retirement retains a strong attraction for many, and the average effective retirement age in Member States is usually lower than the official retirement age (e.g. more than three years difference for male workers in Austria, Belgium, Finland, France, Greece, Italy and Luxembourg). In the future, Member States may need to do more to discourage early retirement.

The ability of pensions to provide an acceptable level of replacement income is an important determinant of the proportion of older people at risk of poverty and social exclusion. Whilst the 2012 EU28 average of people over 65 years old at risk (19.3%) is lower than the rate for people under 65 (26.9%), the rate for the older category varies...
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widely (from 6% in Luxembourg to almost 60% in Bulgaria) and for different groups (e.g. more than 25% on average for women over 75). Over the longer term, individuals will need to increase their reliance on occupational and private pension schemes to supplement public pensions in order to ensure an acceptable income in retirement. The EU has adopted rules that facilitate the portability of occupational pensions as workers move within Europe and the creation of pan-European occupational pension schemes.

Healthcare

Healthcare also raises issues of financial sustainability and cost-effectiveness, since older people consume proportionally more health care than most of their fellow citizens. Managing chronic diseases as seniors live longer is another challenge. In most Member States, more than 70% of health expenditure is funded by the public sector. These public health costs represented in 2011 approximately 8% of GDP (expected to increase by 1.1 percentage points by 2060). According to the Commission, most countries could improve efficiency and cost-effectiveness in such areas as hospital and ambulatory care, pharmaceutical spending and administration.

Co-funded by the EU Health programme, the project on Healthy ageing supported by Internet and community (HASIC) started in January 2014 for a period of over two years; it encourages people over 65 to follow a healthy diet, exercise, and be involved socially. Other age-related projects can be found in the Commission's health projects database.

Long-term care

Long-term care is another social service that disproportionately affects the elderly since their needs (especially those of the very elderly) are greater than those of other age groups. The average cost of long-term care is predicted to rise from 1.8% of GDP in 2010 to between 3% and 5% in 2060, a rate much faster than that of healthcare. All Member States support the principle of universal access to long-term care, but approaches and financing vary widely from one country to another. In order to provide adequate services at a sustainable cost, many Member States are seeking to increase informal care by relatives or friends, to provide more home-based care, and to ensure the availability of professional carers capable of delivering quality care. The EU also supports research initiatives (some of which are described below) that involve encouraging healthy lifestyles, supporting prevention and rehabilitation and using technology, e.g. for remote monitoring systems or assistive devices.

Accessibility

Older people are not the only group that may have disabilities that hinder them from participating fully in society. However over a third of people over 75 years of age have physical, mental or sensory impairments that restrict them to some extent; and more than 20% are considerably restricted. These figures are expected to rise as longevity increases. A 2010 Communication on a European Disability Strategy 2010-20 promised to support national activities aimed at ensuring access to goods and public services, removing administrative barriers to full participation in society, eradicating discrimination based on disability and fostering equal access to health services. The Strategy identifies EU actions that can supplement national measures (e.g. in terms of promoting assistive devices) and asks Member States to remedy shortcomings in accessibility legislation, especially as regards public transport and passenger rights.

The EC has also been considering the development of a European Accessibility Act that would improve the accessibility of goods and services to consumers with disabilities and
older people. The European Disability Forum, an NGO representing Europeans with disabilities, has set out its expectations in terms of such legislation. In addition, in February 2014 the EP voted in first reading on the amendments tabled on a proposed directive that aims to ensure accessibility of public sector websites, particularly by persons with disabilities and elderly persons. This proposal awaits a formal reaction from Council, where concerns were raised earlier about duplication of standards, added value of EU legislation, and the nature of the services targeted.

### Opportunities to get involved

According to AGE Platform Europe, in many countries the seniors’ community is fragmented. Nevertheless many Europeans have the opportunity to be involved in policies affecting older people, through national institutions (e.g. the Czech National Council for Seniors and Ageing Population) or local/regional bodies (e.g. the Centre for Senior Citizens Initiatives in Poznan, Poland). Citizen involvement is important: almost a quarter of local and regional authorities indicated in an online survey that a major problem in establishing age-friendly environments was the lack of consultation with older people and their organisations.

Individuals and organisations can also participate in the European Innovation Partnership on Active and Healthy Ageing (see below) by registering as a member. Members receive information, and can find an initiative or an Action Group in which they can be involved. Older people’s organisations can also become involved in tests of products and services developed under the AAL JP programme. They, or individual citizens, can contribute to consultations on EU actions such as that on the European Accessibility Act (now closed) or on Mobile Health, i.e. how mobile devices can be used to enhance healthcare. They can also get involved by joining the AGE network’s affiliate and member organisations that campaign on issues that concern older people. Activities of these organisations include collecting examples of good practice on age-friendly practices and disseminating information to local and regional authorities.

### Research and innovation

The EU also supports, or has supported in the recent past, a variety of research and innovation projects that have a direct application for older people, principally through the 7th Framework Programme (2007-13) or the current Horizon 2020 programme (2014-20). For example, in 2014, the European Institute for Technology is setting up a Knowledge and Innovation Community for innovations for healthy living and active ageing. The EU has helped to create a joint programming initiative between 12 Member States, Norway, Switzerland, Turkey and Canada called 'More Years, Better Lives'; the initiative’s common research agenda includes topics such as measures of wellbeing, the effects of learning on quality of life, ageing 'in place' and ways of engaging older people in society. Farseeing is another collaborative research project to create an EU-wide network focusing on using technology for predicting and preventing falls of older people.

One of the better known initiatives is the Ambient Assisted Living Joint Programme (AAL JP) created in 2008 under the 7th Framework programme. This initiative, co-funded by the EU and Member States, provides applied research on ICT-based products and services for elderly citizens, particularly to support independent living and energy efficiency. For example, it supplied funding to the Companionable project which developed a robot that monitors a senior’s health, gives cognitive training and provides reminders to take medication. Given the positive impact of the AAL JP, particularly on small and medium-sized enterprises, the EC proposed that the funding (originally a maximum of €175 million) be continued beyond 2013 within the Horizon 2020 research
programme under the revised name 'Active and Assisted Living Research and Development Programme'. The EP adopted a first reading text in April 2014.

Arguably the highest profile research and innovation activity in this area is the European Innovation Partnership for Active and Healthy Ageing. Established in the context of the Europe 2020 strategy, this is the first 'Innovation Union' initiative designed to use research and innovation to enhance European competitiveness and tackle societal changes. Six action plans focus on helping older patients to adhere to medical treatments, preventing falls, understanding frailty and functional decline, and managing chronic conditions as well as promoting independent living and the development of age-friendly environments. The Partnership has identified more than 30 projects in 12 Member States that incorporate excellent innovations. The overall target is to increase the average healthy lifespan of Europeans by two years by 2020.

European Parliament

Under the ordinary legislative process, the EP is co-legislator for many measures that affect older people and that fund innovative forms of work organisation or increase employability through mechanisms such as the European structural and investment funds, in particular the European Social Fund. Parliament approved the designation of 2012 as the Year for Active Ageing, and has also frequently highlighted the importance of older people and active ageing in its 'own initiative' resolutions on subjects such as volunteering (including cross-border volunteering), safe and sustainable pensions and the European Innovation Partnership on Active and Health Ageing. There is an EP Intergroup on ageing and intergenerational solidarity.

Further reading


Role of governments and social partners in keeping older workers in the labour market / Eurofound, 2013.


The EU contribution to active ageing and solidarity between generations / European Commission, 2012.


Mandatory retirement and age discrimination under EU law / M. Schlachter, Int. journal of comparative labour law and industrial relations v. 27 n. 3 (2011), p. 287-299.

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