

Editorial: The importance of comparative analyses of ‘active ageing’ in drawing policy-relevant insights.

Marvin Formosa¹ and Rosette Farrugia-Bonello²

The new millennium brought crucial changes to the latter stages of the life course. In the not so distant, past people used to retire from work to take on a more passive role. Nowadays, combination of increased longevity and other social factors, such as improving health, establishment of the welfare institutions of retirement and pension schemes, and positive values and beliefs towards older persons, have opened up a new phase in life, where older persons spend a considerable amount of time in relatively active years following their exit from the labour market. This period is best encapsulated by the notion of ‘active ageing’, defined as follows:

Active ageing refers to the situation where people continue to participate in the formal labour market, as well as engage in other unpaid productive activities (such as care provision to family members and volunteering), and live healthy, independent and secure lives as they age (European Commission and the United Nations Economic Commission for Europe, 2013).

An Active Ageing Index (AAI) was developed in the context of the 2012 European Year for Active Ageing and Solidarity between Generations, aiming at raising awareness of population ageing and the positive solutions towards the challenges it brings. In the longer term, one of the purposes of the AAI is to track the progress in European Union countries as a result of implementing the policy recommendations included in the *Madrid International Plan of Action on Ageing* (United Nations, 2002) and *Guiding Principles on Active Ageing and Intergenerational Solidarity* (European Commission, 2012). Reflecting the multi-dimensional concept of ageing, the AAI is constructed from four different domains (table 1).

Each domain presents a different aspect of active and healthy ageing. Whilst the first three domains refer to the actual experiences of active ageing (employment, unpaid work/social

¹ International Institute on Ageing United Nations - Malta (marvin.formosa@inia.org.mt).

Department of Gerontology and Dementia Studies, Faculty for Social Wellbeing, University of Malta (marvin.formosa@um.edu.mt)

² International Institute on Ageing United Nations - Malta (rosette.bonello@inia.org.mt).

participation, independent living), the fourth domain captures the capacity for active ageing as determined by individual characteristics and environmental factors. The AAI is a composite index and a multi-disciplinary tool of measurement, meaning that a range and number of individual indicators contribute to each of the domains. In total, there are 22 individual indicators across four domains. Each individual indicator can be positively interpreted: the higher the indicator value, the better the active ageing outcome. For example, the more care older people provide for others, the better are their active ageing outcomes.

Table 1: Active Ageing Index Conceptual Framework

Active Ageing Index			
Employment	Participation in Society	Independent, Healthy and Secure Living	Capacity and Enabling Environment
Employment rate 55-59	Voluntary activities	Physical exercise	Remaining life expectancy at 65
Employment rate 60-64	Care to children, grandchildren	Access to health and dental care	Share of life expectancy at 65
Employment rate 65-69	Care to older adults	Independent living	Mental wellbeing
Employment rate 70-74	Political participation	Financial security	Use of ICT
		Physical safety	Social connectedness
		Lifelong learning	Educational attainment

Source: European Commission and United Nations Economic Commission for Europe, (2013).

The articles in this second number dedicated to the AAI, highlights the importance of comparative analyses of active ageing in drawing policy-relevant insights. As Zaidi and colleagues (2018:8) asserted, “the premises the research reported here is that the AAI as a tool can be applied to contrast active ageing outcomes across countries to evaluate the current situation and identify the most desired directions for the policy changes”. The article *Population ageing and policy responses in the Russian Federation* (Olga Mikhailova, Gaiane Safarova, and Anna Safarova) focuses on population ageing in Russia and policy responses to its multifaceted consequences. To show the development of population ageing in Russia, a number of ageing indicators have been considered. Life expectancy dynamics, including that at older ages, and the contribution of older age groups to the life expectancy increase have been described. Future trends of population ageing have been examined based on medium-term population projections given by the United Nations’ (2017) *World Population Prospects*. Special attention has been given to the heterogeneity of the ageing process in Russia, which is characterised by significant gender imbalance and significant regional differentiation. The

country's place according to international rankings of ageing indicators has been depicted. Policy responses to progressing population ageing in the Russian Federation have been discussed with regard to the Regional Implementation Strategy of the Madrid International Plan of Action on Ageing. It is concluded that the Russian government views ageing as an issue of major concern.

The second article titled *Reflection on the Madrid International Plan of Action on Ageing, and its adaptation to the emerging ageing context in Bangladesh: A 'Medium Human Development' country's initiative* (Mehedi Hasan Khan) points out Bangladesh as the 8th most populous and a 'Medium Human Development' country which is gradually adapting to the emerging ageing context in accordance with the Madrid International Plan of Action on Ageing (MIPAA). As the promulgation of ageing care related acts, national policy and integration of ageing issues in some major related policies and programmes raises valid concern, the objective of this article is to explore the different initiatives and activities taken with regards to older persons, in the context of the three priority directions of the MIPAA, in Bangladesh. MIPAA has brought about enthusiasm towards addressing the welfare issues of the huge number of emerging older population. The 'National Policy on Older Persons 2013', the 'Parents Maintenance Act 2013', and the declaration of older persons as 'Senior Citizens' in 2014, are some of the country's responses to MIPAA's principles. The article also addresses ageing welfare issues in some other major related policies, plans and acts. Research and academic activities related to ageing, the need of expanding different social safety net programmes, and recent initiatives such as celebrating days dedicated to ageing are also discussed. The article concludes that Bangladesh is still a long way off from properly implementing different policies and plans on ageing, and the article investigates the impacts of these legislative, policy, and planning changes on emerging demographic trends in Bangladesh.

In *The influence of the Madrid International Plan of Action on Ageing (MIPAA) in formal support infrastructure development for the Ghanaian older persons*, (Delali A. Dovie) notes that older people have a variety of needs even in the midst of extended life. However, the once buoyant safety net of the traditional social support system is failing. Societies worldwide have moral codes and normative expectations for the protection, nurture and support of older people. In some societies, these are backed by statutes and enforcement. The article explores the extent to which MIPAA adoption has facilitated the creation of enabling and supportive environments for the formal development of a support infrastructure for older persons in Ghana. It argues that the adoption of the MIPAA is reflected in policy promulgation and implementation such as the national disability policy, national social protection policy, National Health Insurance Scheme, and national ageing policy, among others. The concomitant actions were executed by various stakeholders, both governmental and not. The implementation of these policies took the form of social services provision, which yielded old age entitlement outcomes such as livelihood empowerment against poverty, healthcare, the elderly welfare card, and property rebate. These entitlements address older people's needs in diverse ways, namely economic security and healthcare, and are age- and needs-based. The paper also argues that the adoption of the MIPAA has influenced the state development of a support infrastructure in a variety of expected and unexpected ways. The transformation of aspects of an old age-oriented support infrastructure has equally left visible imprints on the

modicum of the support mechanism. The article concludes that more needs to be done as far as ageing policy measure in Ghana are concerned and efforts must be directed establish more public care homes for older persons as well as establishing stronger non-contributory pensions.

The third article, *Suicide prevention in old age in China 2002–2017: The linkage to the Madrid International Plan of Action on Ageing (MIPAA)* (Jing Wu, Xianyun Li and Shengming Yan) points out that whilst China has become an ageing country, the high rate of suicide among older people remains an urgent issue that can no longer be ignored. A notable feature of suicide among older people is the rural-urban differences. Suicide in old age is linked to a number of risk factors, such as the increasing proportion of older people in the population; social isolation, *inter alia* in rural areas; a lack of social support; intergenerational family conflicts; and physical and mental illnesses, amongst others. Suicide in China, like most of the low-income countries and countries with economies-in-transition, has social and cultural characteristics beyond psychiatric mechanisms. Therefore, the issues associated with rapid socioeconomic changes and population ageing need to be taken into account when developing specific suicide prevention programmes and strategies targeted at older people. MIPAA has put forward the guidelines for action on ageing at macro-, meso- and micro-levels - that is, improving the living conditions of older people, strengthening intergenerational family solidarity, and meeting the physical and mental health needs of older people. The article describes how in line with the objectives of the MIPAA, suicide prevention programmes in old age from social and cultural perspectives, to some extent, have been developed and implemented as follows: 1) welfare support at country level, i.e. improving the physical and mental healthcare and pension systems; 2) caring support at community level, i.e. strengthening neighbourhood networks and mutual help groups; and 3) emotional support at family level, i.e. advocating emotional closeness and intimacy among the generations within families. In order to promote older people's wellbeing, and in turn decrease suicide risk at the individual level, suicide prevention work for older people in the future should take into consideration the incorporation of the framework of active ageing and its relevant concepts.

In *The wellbeing of older people in micro perspective: The case of Poland and Ukraine during the MIPAA period* Radoslaw Antczak and Asghar Zaidi assess the development of actions on ageing in Poland and Ukraine during the period of the Madrid International Plan of Action on Ageing (MIPAA). The two countries have a similar legacy, starting at a similar level of economic development after the fall of communism, but taking different paths of transitions. As of 2000, Poland have had a GDP that is six-times higher per capita, and boasts a life expectancy that is six years longer, than those of the Ukraine. Despite an increase in both indicators, this difference was the same in 2015. The research builds a picture of the wellbeing of older people (60 years and over) from a micro-perspective, based on more than 20 indicators grouped into three specific areas of the MIPAA: 1) Older persons and development, 2) Health and wellbeing in older age, and 3) Enabling and supportive environments. The analysis was based on the results of the European Social Survey in 2004 and 2012. The results showed a lower level of wellbeing of older persons in Ukraine when compared to Poland, especially in

the area of development and health. Older Ukrainians more often live in poverty, and have much lower self-rated health and life satisfaction than older Poles. The enabling environment, though, is a domain where Ukraine scores better than Poland, with higher social participation and trust and lower isolation. The eight-year period since 2004 marked positive changes in both countries, mainly in self-rated health and life satisfaction as well as in the reduction of poverty in Ukraine. However, despite these changes, the level of wellbeing of older people in Ukraine is still much lower than those in the neighbouring country. As the authors conclude, these results suggest a strong relationship between economic development and the wellbeing of older persons from a micro perspective, yet points that some areas, namely an enabling environment, are not directly related to macro indicators.

The final paper, *Implementing the MIPAA in Belarus: review and lessons from the progress* (Katsiaryna Padvalkava), focuses on reviewing progress made in Belarus, relevant to MIPAA priority directions and presents a critical reflection on the main issues, milestones and challenges of this process. To illustrate concomitant contradictions, the paper focuses on changes in pension regulations in Belarus since 2002. It reflects on attempts to create an effective system of motivators for postponing the receipt of pensions in later life, and pointing out inconsistencies and lessons it presented. The paper concludes with outlining possible avenues for development and underlining the value of research and engagement with the public in designing programmes addressed to improve wellbeing in an ageing society.

All the above articles point to the simultaneous promise and challenges of promoting the recommendations inherent in MIPAA. While the invigoration of ageing public policy is an imperative in all locations, all articles demonstrate that the reality is that change cannot occur without the understanding and co-operation of older people themselves. We trust that you will find all articles intellectually stimulating and welcome additions to your library.

References

- European Commission. (2012). *Council declaration on the European Year for active ageing and solidarity between generations (2012): The way forward*. Accessed 24/1/14 from: <http://register.consilium.europa.eu/pdf/en/12/st17/st17468.en12.pdf>
- European Commission and the United Nations Economic Commission for Europe. (2013). *Policy brief: Introducing the Active Ageing Index*. Accessed 12/6/13 from: www1.unece.org/stat/platform/download/.../activeageingindex.pdf
- United Nations. (2002). *Madrid International Plan of Action on Ageing*. New York: United Nations.
- Zaidi, A., Harper, S., Howse, K., Lamura, G., & Perek-Białas, J. (2018). Towards an evidence-based active ageing strategy. In A. Zaidi, S. Harper, K., Howse, G. Lamura, & J. Perek-Białas (Eds.), *Building evidence for active ageing policies: Active Ageing Index and its potential*. Singapore: Springer Verlag.