

Declaration of the European Academy of Yuste on Europe and the issue of ageing

The European Academy of Yuste, in its plenary meeting at the Royal Monastery of Yuste on October 12, 2004,

Welcoming the increase in life expectancy, which represents significant progress for humankind,

Taking note of the fact that ageing is a lifelong process and a challenge for every individual, and, in all likelihood, an irreversible phenomenon,

Aware of the deep demographic imbalances experienced by our societies due to the increasing number of aged people and the decreasing number of young people,

Considering the tensions caused by this ageing process at social and individual levels, tensions which threaten the quality of life of the elderly,

Recalling the necessary solidarity between Europe and the other regions of the world,

issues the following *declaration*, based on the report prepared by the Advisory Committee of the European Academy of Yuste Foundation (annex I) and on the resolutions adopted by international organisations such as the United Nations, the Council of Europe and the European Union.

The Academy,



- 1. Pays tribute to the beneficial role played by aged people in our societies;
- 2. Wishes that all population issues be dealt with fully respecting the rights of the human person, that is their dignity and their intrinsic worth, without distinction as to nation, race, sex or religion;
- 3. Recognises the wealth of knowledge and experience that senior people store up and believes that this potential should be more fully exploited for the common well-being of the community as a whole;
- 4. Believes that, in view of the cost of the health care of elderly people, efforts should be redoubled in order to keep the elderly in good health as long as possible so that they can carry on with an active life in society;
- 5. Thinks that, although Europe needs a regular flow of immigrants, immigration itself cannot be the solution for the problems caused by the growing ageing of population;
- 6. Acknowledges that the modern family is often in crisis, but believes that, at the same time, it can play an important role as a centre of solidarity among generations;
- 7. Believes that the conflict between generations, forecast by some, should be avoided at all costs, and that investments in favour of the young should not be neglected;
- 8. Asks that the necessary sacrifices, required from active workers and retired people alike, be shared in a fair manner through the agreement between all interested parties;
- 9. Thinks that quick fix solutions through which present generations clear themselves of their responsibilities by passing them on to future generations should be avoided;
- 10. Warns against any attempt to dismantle the social model established in Western Europe during the last century, to which our populations feel attached;



- 11. Calls the attention of the European public at large to these issues, which will be relevant for their future;
- 12. Draws the attention of governments and international organisations to a list of measures (annex II), which, in the view of the Academy, could contribute to a solution of the problems resulting from the continuous ageing of our populations.



Annex I

Report of the Advisory Committee of the European Academy of Yuste on the Issue of Ageing

The dream of humanity to reach the mythic age of 100 years is a reality for 210,000 people worldwide, according to a United Nations (UN) report. That figure is expected to increase fifteen-fold in the next 50 years to 3,290,000. Centenarians in the European Union (EU) of 15 are currently some 40,000 and this figure will double every 10 years. Ageing is by no means a European but a worldwide phenomenon, which is spreading now to rapidly developing countries such as China or India.

The phenomenon of ageing is difficult to define and it has evolved through the years. The expressions *third age* for people from 60 to 79 and *advanced old age* (*fourth age*) for those over 80 have become quite common, but they do not reflect reality in a precise manner. Demographic average data often conceal disparities. Some 60 year-old people look already *old* whereas others at 70 may be perfectly fit to continue performing their job. A man may need attention at an old people's home when he turns 80, whereas many 95 year-old women live an independent live at their homes.

For a long time, ageing was attributed only to the decrease of birth and fertility rates. It is true that the decline in fertility rates, usually associated with progress, contributes to the ageing of our societies. In 2002 fertility rates were 1.89 in France, 1.31 in Germany, 1.25 in Spain, or 1.23 in Italy. In the EU of 15 the average fertility rate (1.49) is below the replacement level (2.1), and the rate of the 10 new members (1.24) only contributes to worsen the situation.

But the ageing of European population – unavoidable in the long run – may also be explained by the extraordinary rise in life expectancy at birth, which is longer for women than for men. Life expectancy at birth began to increase at the very beginning of the 19th century, first very slowly, then moderately accelerating at the turning point of the 19th and 20th centuries and from 1950 it has been soaring. This growth is related to a series of factors that, according to all projections, will continue to work in the future (better food, better hygiene, medical progress, improved conditions at the workplace, better education and information, etc.). Certain health risks (tobacco,



alcohol and other drugs, obesity) are beginning to draw the attention of public authorities, who are trying to limit the damage.

To give an example, in 1980 life expectancy in four great countries (Germany, France, Great Britain and Spain) was 70,7 for men and 77,4 for women. In 2002 the figures have gone up to 75,6 and 81,5 respectively. In two decades, men's life expectancy has increased by 4.9 years, that of women by 4.1 years. Nothing indicates that this development, positive in itself though challenging for our society, is going to stop soon. The diversity of Europe appears when one compares recent average data of the EU of 15 with that of the ten new members: 75.7 (men) and 81.8 (women) against 69.9 (men) and 78.2 (women). Average data hide important social differences in life expectancy. Well-off and well-trained people usually organize better their old age and live longer that poor and uneducated people. These tend to live less and are *cheaper* to society, since they benefit from their pensions for a shorter period.

Higher life expectancy means that a decreasing number of people at work will have to support an increasing number of retired people. This phenomenon will still be accentuated when baby-boomers reach retirement age. There may be slight differences among the countries, but in general the years 2010-2025 are beginning to be considered as the fifteen years of all dangers. The imbalance between active and non-working populations is still accentuated by an apparent paradox: healthy lifetime is prolonging but working life is shrinking. Young people start working at the age of 20 to 25, sometimes even later. Hardly some thirty years of working life for people many of whom will reach the age of 90! One century ago, most people had started work by the age of 15-16 and left it as late as possible: Work was the pension of the poor. When pensions legislation started at the end of the 19th century, retirement age was generally fixed at 70 years, an age that few had the chance to reach. The 20th century is characterized by a long struggle of the working class to shorten the number of working hours per week (48 hours, then 45, finally 40 and even 35 for France) and to reduce the number of years at work. The reluctance of many when there is talk of increasing it again is understandable.

Present developments will not allow either keeping up future pensions at their current level or limiting oneself to the present working time, because this goes against the rules of economy. J.M. Keynes said, *Old*



age is better than the alternative, but not necessarily for the economy. These words go back to 1937, when the welfare state only existed at the planning stage. The financial bottleneck of the pensions is still aggravated by the fact that senior citizens require often more medical care, above all at the end of their life. Certainly, it is medical progress that has allowed, among other factors, to prolong life, but it becomes more and more expensive (very sophisticated facilities, increased possibilities of intervention, better information of patients, etc.) In other words, as the French say la santé n'a pas de prix mais elle a un coût. Health is priceless, but at a cost. The deficit of health insurance companies makes the welfare state fall ill.

The image of European senior citizens enjoying a golden retirement is widespread. It is true that many of them have a comfortable purchasing power, as tour-operators soon discovered. Generally, the house is paid off and the children are settled. But this image corresponds only in part to reality. First, because it does not take into account that many retired persons, often widows, have to get along with meagre pensions and have difficulties to make ends meet. Besides, because it ignores the generosity and solidarity that many senior citizens show towards their children and grandchildren, whom they help financially or otherwise. They make an important contribution to maintain the fabric of the family. For example, by looking after grandchildren, many women can work outside their homes. In the inter-generation relations seniors help more often the young generation than the other way round. As U. Lehr puts it, a policy for the aged should not be determined only by the question 'What can we do for the aged?' It should also be asked: 'What can the aged do for society?' Nevertheless, senior citizens are often marginalized and kept on the sidelines in our societies.

*

Under the impetus of theories and different forces (socialism, trade unionism, the social doctrine of the Church, ideas of the English liberalism, etc.) social reforms which started in the last decades of the 19th century have resulted in the creation of what is commonly called the *Welfare State* towards the mid-20th century. People speak of a *Bismarck model* or a *Rhineland model*. The difference in the appellation must not hide the fundamental unity. Certainly, strictly speaking there is no *European social model*, since the history of our nations is made up of peculiarities. Nevertheless, through the years



there has been such convergence in national social legislations that the series of rules which have emerged are in many respects characteristic of concepts associated with Europe. The originality of this type of social relations – the *European social exception*- seems clearer when compared with American, Soviet or Asian models. Our model is today under strong economic constraints and, although the great majority of Europeans remain very attached to it, it is obvious that it can only survive on two conditions. First, that it adapts to the demographic and economic realities of the newborn 21st century. Second, that solidarity between social groups and generations will persist.



Annex II

A List of Measures Proposed by the Academy

The present situation requires rapid action. Demographers and economists have provided thorough analyses and proposed solutions that do not always follow the same lines. Politicians are reluctant – understandably so, as the considered solutions are not popular to go into the heart of the problem. However, some significant though very timid efforts have been made lately, for example in Germany, France, Italy and Sweden.

It will not be possible to guarantee pensions or medical care in the future without a series of actions to maintain economic growth and to increase the number of working people.

1) All over Europe, authorities consider raising retirement age. At the Lisbon summit (2000) EU Heads of State and Government set themselves an ambitious goal: an increase in working population rates to 60% in 2005 and to 70% in 2010. The Stockholm summit (2001) wants to push employment of the 55-64 age group up to 50% in 2010 – still far short of the target. The current EU average rate is 40.6%, with 53.3% in Britain, 39.7% in Spain, 38.4% in Germany, 34.2% in France and 28.9% in Italy. The EU Commission strongly advises against the practice of early retirement. The rates in Switzerland (71%) and Norway (72%) show that progress can be made.

Working population rates must urgently be raised so as to increase the contributions which support the pensions of the individuals whose age or health do not permit them to work any longer. It would undoubtedly not be advisable to resort to austerity measures, because the right to retirement is a basic right our ancestors had to struggle fervently for. It is important that implementation conditions remain flexible. More laborious and demanding jobs, though fewer than in the past, require special stipulations, especially for manual labourers.

Reforms based only on profitability criteria could cause a massive rejection. Taking measures only at the employees' expense, as for example raising retirement age for everyone and at the same time reducing pensions, would be felt as an injustice. People can be



stimulated to stay longer in their job by offering them the possibility of improving their pension and more part-time jobs.

- 2) It is also essential to develop women's employment through the creation of a higher number of day nurseries and day-care centres. The average rate of women's employment (2002) in the EU is 55.5%, with Germany (58.8%) and France (56.4%) at the head of the list, and Spain (44%) and Italy (41.9%) at the bottom.
- 3) Young people will also have to be encouraged to start working earlier. The creation at European level of a bachelor diploma after only three years of academic studies is an interesting initiative.
- 4) Immigration is obviously an efficient means to increase working population. But it also entails problems, especially that of integration. Zero immigration, as advocated by some, is unacceptable, both from a human and an economic point of view. But will immigration help increase birth rates and offset the native population deficit? The fact that fertility rates of immigrant women are higher than those of local women might indicate so. But immigrants also grow older and reach retirement age, and besides, in the second generation, they tend to adopt the European reproductive patterns with a low birth rate. A new call for immigration will be the consequence.
- 5) In the light of the high number of senior citizens, it becomes necessary to adapt the environment to their needs, from transportation to administrative formalities, from accessibility to buildings to availability of individual-size products in supermarkets. Car manufacturers should think a bit more of the many elderly people who continue to drive they cause less road accidents than young people adapting the vehicles to their mobility, which is so important for their self-fulfilment.
- 6) It is vital to enable seniors to continue to live in their usual environment. Even at an advanced old age, many prefer living at home and they can do so with the help of «meals on wheels», the visits of social workers particularly for personal hygiene-, etc. Seniors' physical and mental activities should also be developed by creating the necessary facilities to that end. That will cost society less than forcing elderly people prematurely to old people- or nursing homes. In most European countries gerontology and geriatrics are insufficiently developed both from the point of view of academic



education and continued vocational training of the medical and other professions.

7) With the prolongation of life, health expenditure increases, above all during the last years of life. Will the number of persons requiring intensive care increase at the same pace as the figure of people over 65? Not necessarily. Nowadays most octogenarians are capable of performing satisfactorily their normal daily tasks, with the tactful assistance of the family and public authorities. It is above all after 85 years that disability cases increase. So it is absolutely essential to bring these persons under the best conditions to the fatal end.

With this aim in view, an ambitious prevention and rehabilitation programme will have to be set up, allowing to reduce the number of disabled people or to push disability to the very last stage of life. Recent studies show that senior citizens keep fit longer. The frequency of old-age related illnesses is decreasing. Anyway, intensive care for disabled persons will put a serious strain on the budget of health insurance companies, though probably less heavy than some forecasts did suggest.

With the help of the family, ambulatory services will in many cases be sufficient for a long time. But families with one or two children find the task increasingly difficult, because children and parents do not live in the same town, because the burden becomes too heavy for the only child or because the child itself is already in retirement. Caring for ageing parents is a burden that eventually falls upon women. Public authorities may not count as much as in the past on the family availability. Consequently the transfer to a nursing home or other housing conditions becomes inevitable.

8) One last measure is left, of which a lot could be expected at first sight, the rise in birth rate. Since the 1970s – for some countries like France, since the 1940s – most Western European countries have established policies to increase birth and fertility rates, without succeeding in reversing the trend, but not without results, as in the case of France. Half failure or half success, it does not matter. Increasing birth rates should continue to be encouraged, not only with financial measures but also with genuine child and youth policies. Only in that way the ratio of the under 20 to the over 60 age groups will be prevented from deteriorating further. We must not forget that for the first time in the history of mankind the rate of



senior citizens will be higher than that of children and adolescents. This must not be a reason for sacrificing the interests of the young generation.

It is obvious that the progressive ageing of the population will not only be expensive for public authorities, but it will also demand considerable financial efforts both from the working population and the retired persons. Measures such as raising retirement age, reducing pensions, increasing contributions and capitalization have already been mentioned. But these measures would be more easily accepted by high-income than by low-income groups. Should authorities provide for saving incentives and resort to taxation of part of the pension funds, out of a concern for social justice, in order to achieve a certain redistribution of the income among retired people?