March, 2006

Newsletter

AGEING AND DEVELOPMENT
In Latin America and the Caribbean

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EDITORIAL

Karoline Schmid

Caribbean challenges of a global phenomenon

Population Affairs Officer at the ECLAC Sub-regional Headquarters for the Caribbean.

NEWSLETTER AGEING AND DEVELOPMENT

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Latin American and Caribbean Demographic Centre (CELADE)-Population Division of ECLAC

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Available data show that the Caribbean is one of the fastest ageing regions in the world and it is expected that over the next 50 years, almost all of its countries will experience at least a doubling of the percentage of persons over age 60. Already relatively advanced are Barbados, Cuba and Puerto Rico whereas Haiti, Belize, the Dominican Republic and Guyana still have rather “young” populations.

In expression of its commitment to strengthen the region in its capacity to respond to these challenges, the ECLAC Sub-regional Headquarters for the Caribbean has embarked on various initiatives. These include the publication of two studies on population ageing in the Caribbean and the support of the First Caribbean Symposium on Population Ageing, an intergovernmental meeting convened in Port of Spain, Trinidad and Tobago in November 2004.

The first day of this event was devoted to academic research on population ageing in the Caribbean while the second and third day provided a platform for Of critical importance to the region are issues related to ageing and economic and social security, health care, housing, transport and living conditions and the establishment of a legal framework to regulate various aspects affecting the lives of the elderly. Further, the meeting expressed a definitive need to recognize gender specific aspects in ageing and to work towards enhancing intergenerational solidarity at the country level.

To fill these gaps, it was suggested to set up a Caribbean Ageing Network as a mechanism to share best practices and to develop modalities for south-south cooperation. The academia present suggested the establishment of a resource center to share and coordinate research on ageing in the region.

Accepting an invitation by the University of the West Indies in early 2005, the ECLAC sub-regional Headquarters has been serving at the national team of Trinidad and Tobago to implement phase III of the “Integrated Response of Health Care Systems to Rapid Population Ageing” (INTRA).

Of critical importance to the region are issues related to ageing and economic and social security, health care, housing, transport and living conditions and the establishment of a legal framework to regulate various aspects affecting the lives of the elderly.

The ECLAC Sub-regional Headquarters reiterates its commitment to support this and other initiatives of the Caribbean countries in their thrive to implement pledges made at global and regional gatherings to make growing older a happy, healthy and enjoyable experience for all peoples in the region.

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To mainstream the perspective of the human life cycle into development processes, with a special emphasis on the poorest older adult population, has been a constant objective of the United Nations Population Fund (UNFPA) in the English- and Dutch-speaking Caribbean nations.

The possibility of carrying forward this objective, which arose from the second World Assembly on Ageing (Madrid, 2002) and from the Regional Strategy (Santiago 2003), depends to a great extent on the availability of data on the situation of the elderly in the countries concerned. It is impossible to build responses to their needs into general public policies and into plans and programmes to deal with the social demands of ageing unless sufficient and reliable information is available.

The compilation of data about the conditions in which the region’s elderly live and manage their lives is a key component to mainstream the ageing perspective into public policies.

In much of the Caribbean, the absence of data on the implications of the ageing process and on the situation of older adults has been an obstacle to the preparation and implementation of strategies to improve this population group’s quality of life and to the promotion of their rights.

UNFPA has undertaken an active role in this regard, conducting situation analyses in Belize, Suriname, Saint Lucia, and Guyana. Similar activities have been planned for Jamaica and for Trinidad and Tobago. All these countries constitute priorities for UNFPA work in the subregion.

The results of these analyses have formed the basis for an initial appraisal of the situation of the elderly in those countries, but more in-depth work is needed. Using this information, UNFPA organized roundtable meetings during 2005 in Belize, Guyana and Saint Lucia, as a starting point for the different stakeholders to discuss policy proposals. It is hoped to extend these activities to Suriname, Trinidad and Tobago and Jamaica during 2006.

The compilation of data for a better understanding of the conditions in which the region’s elderly live is a key component of a whole range of processes directed at convincing the decision makers to mainstream the ageing perspective into public policies. Another key part of this is involving older persons in actions to lay the groundwork for the society for all ages to which we aspire.

UNFPA has adopted the United Nations approach of encouraging the greatest possible participation of the different stakeholders in a bottom-up strategy to oversee progress in the implementation of the Madrid International Plan of Action on Ageing. This approach is designed to incorporate the views of older people and will be an essential part of the review of the Plan to be conducted in 2007.

From this forum, UNFPA reiterates its standing offer to work collaboratively with governments and regional institutions that share these objectives, as well as agencies of the United Nations system. All are encouraged to devise creative ways to make the most of the tremendous human capital represented by the elderly and foster their participation in society.

Harold Robinson
Information is the basis for effective action

PUBLICACIONES

“LIVING ARRANGEMENTS OF OLDER PERSONS AROUND THE WORLD”
A first global survey and analysis on the patterns and trends in the living arrangements of older persons. It presents data for more than 130 countries.
Department of Economic and Social Affairs, Population Division United Nations, 2005

“AGEING: DISCUSSING THE ISSUE IN TRINIDAD”
A look into the main points on debate about ageing topics in the island.
Joan Rawlins University of the West Indies, St. Augustine, Trinidad. 2004

“HEALTH, WELL-BEING, AND AGEING IN LATIN AMERICA AND THE CARIBBEAN”
A special edition of the Pan American Journal of Public Health focused on different ageing issues in the region.
Pan American Health Organization Vol.17. May-June 2005

“ADULTOS MAYORES EN PLENETUD: RIQUEZA DE VIDA”
Interviews to sixteen Chilean older persons who play important roles in different social scopes.
Macarena Moreno Servicio Nacional del Adulto Mayor, Gobierno de Chile, 2005.
The countries of this subregion are trying to face the demographic challenges with an inclusive and holistic approach.

The progress of ten of these Caribbean countries, with respect to the development of policies, initiatives and the establishment of programmes is highlighted in this section.

Further information about the achievements of the countries in our online version:
http://www.cepal.org/celade/envejecimiento

ANTIGUA & BARBUDA

Brightening the lives of the elderly

A draft National Policy for the Elderly was produced by the Social Improvement Sector of the Ministry of Health in Antigua in 2002. Prior to that, in 1995, there was an amendment to the Social Security Act of 1972. This resulted in a non-contributory pension scheme designed to provide financial assistance to older persons who previously would not have qualified, because they did not contribute to the Social Security Scheme during their working life.

The Government, through the Citizens’ Welfare Division, has also developed programmes to address the social needs of the vulnerable elderly, by filling the gaps in service to relieve loneliness and the stress of ageing. One such programme is the Welfare Aides Service which provides facilities and services aimed at fulfilling the recreational, social and emotional needs of the elderly population. “Housebound” elderly with physical limitations also receive social assistance through the Home Help Service. This organization ensures the provision of assistance with domestic activities in their homes, which allows the elderly to stay in familiar environments.

Additional services are provided by two active non-government organizations, the Antigua & Barbuda Pensioners’ Association, which is actively engaged in discussions with the Government to provide additional medical, social and financial benefits for the older population and the Senior Citizens’ Association.

ARUBA

Committed to autonomy

The Aruban Government has committed to an immediate plan of action to assist the elderly in remaining autonomous for as long as possible in their environments, while fully developing their potential and contributing actively to society. To this end, a number of objectives have been identified and a commitment has been made to carry out the necessary studies to guarantee the solvency of existing social security systems.

The Government has recognized that the present social infrastructure will not support the demographic transition expected over the next 10 to 20 years. An alternative organizational structure is proposed, with emphasis on a continuum of care between the home, institutional and community based long-term care and relevant welfare institutions, as well as a focusing of resources on the needs of older persons, including long term care and assistance and treatment of chronic diseases.

This action plan also seeks to guarantee income security for the elderly now and in the future. The Aruban Government has adopted an official old-age pension programme, designed to ensure a minimum income for the elderly.

There is also a plan to promote health and well-being in old age by focusing on the preventive aspect of health and medical care and by encouraging the active participation of the older population in the social mainstream.
BAHAMAS
A network for health

In 1999 a National Council on Older Persons was established in acknowledgment of ageing as an issue of priority. The areas of health and social planning were of particular importance given that medical and social services are essential to the well being of the elderly.

A number of policies already exist in the Bahamas, with more recent programmes established to cater to the needs of the older population. Health care is widely available through a network of community clinics and hospitals to all persons aged 60 and over. Medication is provided free of charge to persons over age 65 at Government hospitals, while a 10% discount is offered to elders at several private pharmacies. In addition, home health care is available through district nursing services. The Government provides partial salary replacement during illness, as well as disability and death benefits.

Since 1972, all insured persons over 65 years of age are entitled to retirement benefits, and receive a pension according to their particular contributions. An Old Age Non-Contributory Pension in the amount of 200 dollars has been introduced to those older persons who have not made any or sufficient contributions.

Over the last six years various private and public residential care and assisted living facilities have become available to older persons. The Government has since enacted legislation to regulate these facilities to ensure appropriate quality standards.

BARBADOS
Working for social inclusion

In 1975 Barbados became the first Caribbean country with more than 10% of its population being elderly. In 2001 the Government established the draft of the National Policy on Ageing under the Ministry of Social Transformation and a Committee appointed to review the proposals for submission to Cabinet.

A number of programs have since been implemented through the 2003 Occupational Pensions Benefits Act to ensure that the elderly can maintain their economic independence. One such provision is the establishment of universal pension coverage through contributory and non-contributory pensions paid to persons aged 65 and over.

The Government has also embarked on an initiative to provide universal health care and medication services to all people aged 60 and over. Health service delivery has been divided into seven program areas, two of which focus specifically on the older population. There are also plans to create a program to facilitate accommodation needs for the ill elderly.

The social inclusion of the aged population is another priority area which has been targeted in Barbados by the construction of a number of recreational centers where the elderly can go to get involved in craft, exercise programmes and other social activities. In 2002 the Government began the construction of the Vauxhall Senior Citizen Village Complex which will have three segments, residential, recreational and day care.

DOMINICA
Planning for the future

A National Policy on Ageing was developed and adopted by the Government in October 1999. The goal of the policy is to ensure that older persons will be provided with protection, care and opportunity to participate in the development of the nation.

The National Health Plan 2001–2005 addresses the needs of the elderly over age 60 as a priority area. Included in the plan is the provision of free basic health care, including medication and home care delivery, through an island-wide network of clinics. In addition, specialist services in mental health and ophthalmology care are offered and routine hypertension and diabetic tests are conducted in all communities.

Prior to this, since the early 1990’s, the curriculum of the Nursing School has included a module for care for the elderly and since 1997 the Dominica Council on Ageing has been providing training for informal community care givers.

There are a number of planned future activities including public awareness programs, development of standards of care and implementation of follow-up on the Regional Strategy of the Madrid Plan of Action.
GUYANA

Preparing a policy

The Government of Guyana is preparing a policy document on the elderly. Concern has been raised on the quality of service offered to the elderly and the need to address it in a comprehensive manner. As such a National Commission has been established to determine the social, financial and medical needs of the ageing population.

Despite the fact that Guyana still has a fairly young population, many provisions are already in place to ensure that the ageing citizens are economically independent and socially included. Through the Social Impact Amelioration Program a number of schemes have been introduced to deal with the situation of the vulnerable and older population.

Old age pensions are provided to all persons age 65 and over and delivered to disabled pensioners at their homes. In addition, limited access is available to primary health care services including free medication. There has also been the introduction of the “Food for the Poor Incorporated” programme, which offers food and other items to communities which include the elderly in difficult economic circumstances.

The extended family concept still prevails in Guyana, through which the majority of the elderly are taken care of by their families. However, to cater to the rest of the ageing population, there has been the promotion of senior citizens clubs and annual subventions are provided to senior citizens homes.

JAMAICA

Productive ageing

In 1997 Jamaica became the first country in the Caribbean region to adopt a National Policy for Senior Citizens. This policy reflects the United Nations International Principles for Older Persons, which places emphasis on independence, participation, care, self fulfillment and dignity.

The National Council for Senior Citizens adopted a mission statement in 1997 which partly reads, “to meet the challenge of a growing, healthier and more active ageing population by ensuring that senior citizens are able to meet their basic human needs, that those in need are assisted and that older persons are protected from abuse and violence and are treated as a resource and not as a burden...”

The Council undertakes a variety of programmes and activities arranged into health, income security and education. Given limited resources, the strategies of the National Policy for Senior Citizens are implemented though an island-wide network of senior citizens clubs. Loans and grants for small enterprises, training programmes (including healthy lifestyles, managing finances and creating wills) and referral services are provided with the aid of civil society groups.

In an effort to reduce the incidence of poverty among the ageing, a number of initiatives have been introduced. These include a reform of the Social Safety Net in 1999 and a major reform of the Pension System through the introduction of a National Pension Act.

ST. KITTS & NEVIS

Focus on poverty

Subsequent to the writing of a draft policy on ageing, the Government of St. Kitts and Nevis has made changes to some existing policies and implemented new programs geared specifically to benefit the elderly. One such change is the provision of a non-contributory assistance pension for older persons who have not contributed to the social security scheme but are in financial need.

Universal access to health care, medication and dental and eye care for citizens over 55 years of age is provided through a network of clinics and health care facilities. A public facility in St. Kitts caters exclusively to the chronically ill, disabled and geriatric cases, and Nevis has a 22 bed infirmary that houses psychiatric patients and the aged poor. In addition, the Home Care Program for Older Persons assists the elderly and disabled in their homes with hot meals, food packages, medical assistance and social interaction.

These are all a result of the Government’s efforts to ensure the elderly population is provided with adequate health care and services.

The Ministry of Social Development, Community and Gender Affairs has been instrumental in establishing the “Adopt an Older Person Program” which facilitates interaction and collaboration between older citizens and school children throughout the country.
ST. VINCENT & THE GRENADINES

Five year strategic plan

The Government is actively engaged in formulating a National Policy on Ageing and the development of a Five Year Strategic Plan. However, already in existence are a number of systems and services aimed at ensuring financial stability and guaranteed health care for the older population.

The Ministry of Social Development provides a monthly financial contribution of EC $100 for persons under 65 and EC$110 for persons over 65, in addition to immediate cash assistance, medication, help with utility bills, toiletries, food and burials, as may be required.

The National Insurance Service (NIS) provides pensions to 4,000 older persons, 2,200 receiving contributory pensions and 1,800 non-contributory. There are plans however to expand this service to the informal sector.

Free health services are provided for sufferers of infectious diseases as well as indigent and unemployed persons over 60 years through the Medical Officers Act.

HelpAge International and the National Council for Older Persons (NCOP) of St. Vincent & The Grenadines are also conducting research on the situation of older persons. Their findings will contribute to the development of the National Policy on Ageing.

TRINIDAD & TOBAGO

Eight areas of action

The Draft National Policy on Ageing was approved in September 2004, identifying eight priority areas for action: social security, income security, social inclusion, healthcare, housing, education, recreation and legislation. A Division of Ageing was established to prepare and implement the National Policy, emphasising community-based services, dignity, independence, education public awareness on ageing, and access to affordable healthcare for older persons.

A Community Care Act is being developed to provide the legal framework for care and protection of the rights of older persons. The Homes for Older Persons Act ensures the licensing, regulation and control of homes for the elderly.

The Government provides old age pensions. A task force has been established to review the pensions system.

There is universal access to health care through an island-wide network of hospitals and clinics. In addition, a “Chronic Diseases Assistant Plan” has recently been instituted.

A Geriatric Adolescent Partnership Program and the Retiree Adolescent Partnership Program have been designed to encourage intergenerational solidarity.

HelpAge International:

24 YEARS EMPOWERING OLDER CARIBBEAN

Putting ageing at the center of development processes, supporting livelihoods and mitigating the effects of natural disasters are HelpAge International’s guidelines for its work in the Caribbean, which started in 1982.

A key issue for the goals of the organization is to support older people to advocate for their rights and influence the policies that affect them. For those purposes HelpAge works with local partners, such as the St. Lucia National Council of and for Older Persons, the Old People’s Welfare Association, in Montserrat; Extended Care Through Hope & Optimism (ECHO), in Grenada, and other English and French speaking organizations in 10 countries.

Two concrete main programmes are currently being successfully conducted by HelpAge Caribbean. The “Older citizen’s monitoring project” in Jamaica supports older persons in three poor farming communities to allow them to exercise their right to access to government social-protection programmes, and lobby the authorities for improvements.

The Caribbean is a subregion with high risk of natural catastrophes – hurricanes, floods, earthquakes and volcanic eruptions, and older people are particularly vulnerable in these extreme situations. HelpAge developed the project “Preparing older people and their communities for disasters”, which enables older persons and other community members to work together, protect themselves and help others in case of natural catastrophes.
Montevideo:

**ECLAC called the attention of countries on social protection**

The last Session of the Commission was focused on the need of a new rights-based social covenant.

One of the most challenging problems faced by the Latinamerican and Caribbean countries beginning the new millennium is to cope with the vulnerable situation under which a large proportion of the population lives because of the fragility of the social security systems.

With differences from one country to other—and with particularities in the English-speaking Caribbean, where social security systems are rather young-, low coverage, fragmentation, deficient quality, limited access and the trend to rely on contributory mechanisms—that do not address the extended labour informality—are common in the region. And the consequences of it are by and large visible throughout the lives of the citizens, especially among the aged.

**In the new rights-based social covenant proposed by ECLAC, social rights should be the normative horizon.**

Social protection was the central issue of the last ECLAC Session, held in Montevideo from March 20th to 24th. The discussions were focused in the need of a new approach to social protection, given the structural changes the region is experiencing in its age structures, labour markets and family dynamics, among others. This approach, as raised at the meeting, should be the result of a new rights-based social covenant, in which social rights are seen as the normative horizon, and existing inequalities and budgetary restrictions are the limiting factors to be addressed.

During the meeting, the Secretary General launched the document “Shaping the future of social protection: access, financing and solidarity”, in which ECLAC proposes a framework of integral solidarity that combines contributory and no contributory mechanisms and places emphasis on an efficient use of the resources, with a view to expanding the coverage and raising the quality of services, especially for the lowest-income sectors of the population.

The need to incorporate the gender perspective in social protection policies was also underlined in Montevideo.

The challenge for the region is to build bridges between social rights and policy guidelines in order to make them more enforceable through improved access, better financing and greater solidarity. On this purpose ECLAC called special attention the reform and design of health and pension systems, taking into consideration the labour market dynamics and the countries’ fiscal capacities.

A number of countries have made advances in the right direction. Bolivia introduced universal pensions through the Bonosol; Costa Rica improved women's position in the welfare system by conferring a value to unpaid domestic work in terms of contributions. Belize has put in place a non-contributory pension for all women over 65.

These are a few evidences of the momentum that the social protection debate is gathering in the region. The new ECLAC document and the discussions generated by it in Montevideo are expected to generate fruitful debates at the national level.
A lack of awareness that our society is ageing. If people are aware of this situation, they need to get involved. There are too many seniors just sitting around. I suggest that functioning groups need to do outreach drives to religious organizations, community groups and public and private companies in order to raise awareness at an early age, maybe 40 or 50.

If you had an audience with the Prime Minister, what would be the most important issue you would like to address?

The need for social and recreational homes for the elderly. There should be the construction of senior citizen complexes, where elderly persons can go on a daily basis to engage in social and recreational activities with each other. The complex can be constructed with apartments on the upper levels, which can be rented to those seniors who can afford them, and that income can be used to offset the cost of running the recreational activities. The Prime Minister is ageing as well, he should recognise the need for senior homes and allocate spaces for construction in the north, south and Tobago.

Do you think some older people's failure to keep active once they retire is a function of society?

I think it may be a loss of will or pride, or due to illness. Some people age with illness and can not function like they used to, so they remove themselves from active society.

What is your motivation for being involved in this organization?

I retired at age 52 and after a few months of relaxing I decided that I did not want to sit at home doing nothing. So I joined the SAATT and also got back into the work of relaxing I decided that I did not want to sit at home doing nothing. So I joined the SAATT and also got back into the work force through the Child Welfare League.

What importance do you see in the organization of elderly people?

It is important to be organized to raise ageing issues. However, not enough older people are involved with groups such as the SAATT. In order to get more seniors engaged I think it is necessary to make senior groups available to more people. As it stands now there are a few organizations functioning for certain categories of people -retired teachers, civil servants and Government

Yvonne O’Neill: “It is necessary to make senior groups available to more people”

Secretary Senior Achievers Association of Trinidad and Tobago says, organized elderly need to do outreach drives to raise awareness on ageing.

Yvonne O’Neill runs the Woodbrook branch of the CHOICES organization, which is a day care and education centre for pregnant teens and teenage mothers and their babies. But that doesn’t seem to be enough for her free spirit, strong will and desire to maintain a youthful heart and mind. She is also Secretary of the Senior Achievers Association of Trinidad and Tobago (SAATT), a vibrant, diverse non-governmental organization of about 100 retired persons, with a mission to “provide a forum for members and friends to enhance the quality of their lives”.

An objective of the association is to instill in members their importance and usefulness in their community as a result of their age and experience.

What are your main activities?

We are involved in community projects both locally and regionally, for example we give a scholarship of $1,200 per term to a high school boy and we donated funds to Haiti and Grenada after natural disasters. We also visit other Caribbean countries, go on cruises and have 'Know Your Country' tours. Since we receive no Government assistance, we hold many fund raising activities: tea parties, an annual carnival party, a market day/breakfast and bar-b-ques. In addition, at some of our monthly meetings individuals are invited to lecture on various topics including financial management, preparation of wills, heart ailments and Alzheimer’s disease.

What are the critical issues on ageing in Trinidad and Tobago?

A lack of awareness that our society is ageing. If people are aware of this situation, they need to get involved. There are too many seniors just sitting around. I suggest that functioning groups need to
Nearly 60 million people aged 60 or over live in North America, possibly the most developed region in the western world, with the United States and Canada members of the G-8, the group of the eight most industrialized countries on the world.

The majority of North American adults have benefited from development. The region has social protection systems with broad coverage and community support structures that meet many of the needs of the elderly. However, there are vulnerable groups which pose special challenges, such as immigrants and war veterans.

In both Canada and the United States, civil society is an important ally in dealing with the question of ageing. Both countries enjoy a tradition of civic organization, a trait which includes the elderly, who have been active in forming community groups.

Canada appears to be well placed to face the process of demographic change. It has a solid fiscal base and has set up a series of programmes for its elderly population. Furthermore, Canada’s pension system is one of the world’s most successful as regards the effort to avoid poverty in old age; in fact, the number of low-income elderly in Canada is among the lowest of any of the Organisation for Economic Cooperation and Development (OECD) countries. Nationwide, older Canadians have a lower probability of receiving a low income than other age groups do.

The challenge for policymakers is to make headway in terms of health and well-being, with emphasis on vulnerable groups, such as older people living alone, those managing on low incomes and immigrants.

To this end, the Government established a National Seniors Secretariat to be responsible for ascertaining the well-being of elderly men and women, not only from the financial point of view, but also as regards health, security, social isolation and community-based support.

In the area of health, the Federal Government, together with the Division of Aging and Seniors (DAS), has taken measures to enhance the well-being and independence of older persons through the promotion of active ageing and physical and mental health and the prevention of falls. On this last point, DAS is cooperating with the World Health Organization to raise awareness of the impact that such falls can have on older persons’ quality of life and independence.

Canada is endeavouring to make a global contribution in the design of guidelines for disasters and emergencies, during which older people are vulnerable.

In the United States, Administration on Aging, the federal organization responsible for older persons’ affairs, has worked for over 40 years on maintaining the independence of the elderly.

This line of government action has been successful in offering elderly people community-based services, promotional and preventive health programmes and initiatives to provide carers with services and support. The broad coverage and good quality of these services are well rated by their users.

A report prepared by the Federal Interagency Forum on Aging Related Statistics found that the majority of older persons were healthier, better educated and enjoyed a better quality of life than their peers of earlier generations. The report did warn of inequalities, however.

For example, 76% of white non-Hispanic older people had a complete school education, but only 52% of older Afro-descendant and 35% of older Hispanics had finished the school.

Elderly are financially better-off too.

In both Canada and the United States, civil society is an important ally in dealing with the question of ageing.
Ageing around the World

Ageing statistics:

Two realities on the same side of the world

The proportion of older adults living in North America is twice as large as in Latin America and the Caribbean.

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<th>Northern America</th>
<th>Latin America and the Caribbean</th>
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<tr>
<td>2005</td>
<td>36,3</td>
<td>25,9</td>
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<tr>
<td>2050</td>
<td>41,5</td>
<td>39,9</td>
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<th>Fertility rates</th>
<th>Children per woman</th>
<th>Northern America</th>
<th>Latin America and the Caribbean</th>
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<td>2005-2010</td>
<td>1,98</td>
<td>2,38</td>
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<tr>
<td>2045-2050</td>
<td>1,85</td>
<td>1,86</td>
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<th>Northern America</th>
<th>Latin America and the Caribbean</th>
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<tr>
<td>2005-2010</td>
<td>78,2</td>
<td>72,9</td>
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<tr>
<td>General</td>
<td>75,5 80,8</td>
<td>69,8 76,1</td>
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<td>2045-2050</td>
<td>82,7</td>
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<tr>
<td>General</td>
<td>80,2 85,2</td>
<td>76,4 82,5</td>
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<th>Old-age dependency ratio</th>
<th>Number of persons over 65 per 100 persons in working age (14-64)</th>
<th>Northern America</th>
<th>Latin America and the Caribbean</th>
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<tbody>
<tr>
<td>2005</td>
<td>18</td>
<td>10</td>
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<tr>
<td>2050</td>
<td>34</td>
<td>29</td>
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Proportion of Older Persons (60+)

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<th>Northern America</th>
<th>2005</th>
<th>2050</th>
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<tr>
<td></td>
<td>16,8%</td>
<td>27%</td>
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<th>2005</th>
<th>2050</th>
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<tr>
<td></td>
<td>8,8%</td>
<td>24,1%</td>
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Population over 100 years old (in thousands)

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<tr>
<th>Northern America</th>
<th>2005</th>
<th>2025</th>
<th>2050</th>
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<tbody>
<tr>
<td></td>
<td>200</td>
<td>200</td>
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When the First World Assembly on Ageing took place in Vienna in 1982, Dr. Alexandre Sidorenko had already been four years conducting experimental research at the Kiev Institute of Gerontology. Those were the first steps of a prominent career in the field of ageing, which included the organization of the International Year of Older Persons (1999) and the Second World Assembly on Ageing, in Madrid (2002).

Today, as the United Nations Focal Point on Ageing, his energies are set on promoting and monitoring international policy and programmes on ageing, and to this point of time, on the review and appraisal process, starting next year.

What's your global evaluation four years after the Second World Assembly?

It is difficult to answer this question now. The site of action in the implementation of the Madrid International Plan of Action on Ageing (MIPAA) are the national and local levels; the review and appraisal exercise scheduled to begin in 2007 will show the achievements and obstacles.

Do you think there is enough awareness on ageing in the international community?

Every United Nations organization is undertaking action on the field of ageing, within the scopes of their mandates, their professional interest and qualifications. WHO is putting forward many projects, including their major policy background on active ageing; ILO is looking in employment in the older age; World Bank is working on the pensions reform and providing advisory services to member states...

On the other side, important UN documents, like the Millennium Declaration do not mention ageing. Do you see a contradiction in this?

There is definitely a contradiction, but also an explanation: ageing is not seen as an immediate threat in developing countries and won't become a major issue before a decade or two. For political reasons they feel they can put it aside because it does not require an immediate action. Ageing has not become an absolute priority in the world; that's exactly the major obstacle that we experience.

Which progresses do you see in Latin America and the Caribbean?

An obvious progress is the development of a regional implementation strategy for the MIPAA, and the work of ECLAC in consolidating national and regional implementation efforts. I attended the recent meeting in Buenos Aires for the South American countries and was quite impressed of the level of awareness and commitment by the representatives of national governments; they know what to do and they are dong quite important things, including pensions reform and rethinking long-term care. Things are happening, unfortunately not as quickly as people would like.

What are the main points for the review and appraisal process?

I should mention two: the site of action of the review and appraisal has to be at the national and local level and with participation of older persons. The bottom-up approach is the core content of the review and appraisal and means involving older persons themselves, listening to their voices and trying to understand how they feel about the changes in their situation, if any happened since Madrid. We are not overoptimistic: in many countries people never heard about the MIPAA, and that's perhaps the main obstacle in the implementation.

How can the countries make this bottom-up approach concrete?

It is important that member states "domesticate" this approach and feel this is the way to assess the progresses; we can not instruct countries how to do things. The mechanisms of participatory assessment mean meeting in focus groups to find out what the feelings and thinking of ordinary people are about the changes in their quality of life following the introduction of policies promoted at the Madrid Assembly. Even more important through the review and appraisal exercise is to engage older persons into the entire process of policy design, implementation and monitoring.

"The mechanisms of participatory assessment mean meeting in focus groups to find out what the feelings and thinking of ordinary people are about the changes in their quality of life".

You have often raised the need of a policy-related research agenda on ageing. How advanced is the response to that need?

The research agenda is a project conducted by our office together with the International Association of Gerontology, to identify research priorities related to the policy process to support the implementation of the MIPAA. There's lack of awareness about ageing issues, the MIPAA and the research agenda itself; lack of coordination and a sense of disintegration of research and policy development in many countries and within ageing research itself. We are trying to support the network of researchers and their communication with policy makers, and build a feedback mechanism, so that the policy makers are aware that the research is available, and researchers are in position to offer their findings and support policy development implementation. So far that has been missing in many parts of the world.