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Senior Policy in Hungary, Poland and Russia



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The number of elderly has multiplied, but our societies are not organised well enough to make room for them, with proper respect and practical consideration for their frailty and their dignity.

(Pope Francis audience, 4 March 2015, as quoted at https://opoka.org.pl/biblioteka/W/WP/franciszek_i/audiencje/ag_04032015.html (accessed: 10 Aug. 2019).


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Introduction

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The writing of this monograph was inspired by discussions at the Joint Workshop of the EAST Research Network¹ on ‘Silver Economy in Central and Eastern Europe’, which was held at the Faculty of Economics and Sociology, University of Łódź, between 22 and 23 June 2018.² The workshop provided participants with an opportunity to present different aspects of the silver economy, such as active ageing, public-private partnerships in the silver economy, and the lifelong workplace, and to discuss national ageing policies and the role of governments and other actors in shaping the living conditions of ageing populations in selected countries in Central and Eastern Europe and Russia.

The workshop meetings prompted the idea of producing a work that specifically analyses policies on seniors in two EU countries (Poland and Hungary) and, in more general terms, in Russia. The research assumption was that while the global nature of population ageing implied the probability of all three countries using similar senior policy measures, their different history, culture, the course of ageing processes, and legal solutions justified collecting their policies on older citizens in a single volume to enable comparisons and the identification of best practices.

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¹ EAST is the Central and Eastern European Research Network of the Oxford Institute of Population Ageing ‘for information exchange between its members, numbering almost 200 individuals and institutions who research migration and population ageing in Eastern European countries’ – for more information: <https://www.ageing.ox.ac.uk/research/regions/east/> (accessed: 20.06.2019).

² <https://www.ageing.ox.ac.uk/events/view/348> (accessed: 20.06.2019).

The resultant monograph considers the notion and scope of senior policy vis-à-vis similar policies, such as social policy on ageing, social policy on old age, and social policy on the elderly. Although retirement policy is unrelated to senior policy, it is also covered in the monograph because of its influence on the financial situation and well-being of the elderly and older adults. A brief review of the demographic situation and main population trends in EU-28 countries is followed by a presentation of senior policies in Hungary, Poland and Russia, and the impact of their retirement policies on the economic situation of older people.

The chapter by László Patyán opens with a review of international guidelines on ageing policies. The author uses the review to explain the main assumptions underlying the ageing-in-place concept, the age-friendly environment principle, active ageing policies, care policies, the main directions of care-related policies, and retirement policy requirements that national governments should consider when designing their ageing policies. The presentation of senior policies in Hungary starts with a brief discussion of the country's demographic situation and population projections to the year 2080. Then, the state and municipality planning levels and the decentralised approach to changes in social services, social care and the pension system are discussed. In Hungary, the ageing policies are developed in the framework of the National Senior Strategy 2034. In Central European Countries, including Hungary, the preparation of documents on active ageing measures was prompted by the European Year of Active Ageing and Solidarity between Generations 2012, but the long-term impact of the event on national senior policies in the region proved to be limited.

The Hungarian government has taken on the responsibility for creating age-friendly environments and implementing an employment policy for older people. Its special focus is on care policy. Social is organised following the EU concept, but activities in this area are carried out in an irregular manner. In his chapter, László Patyán gives special attention to municipal policies, which are discussed based on two programmes aimed at seniors: 'Újbuda 60+' and 'Nyíregyháza gives more...'.

As a non-EU country, Russia does not have to comply with the EC's directives or recommendations in designing its policies

on seniors. Nevertheless, its initiatives in this field reflect the ideas of the Madrid International Plan of Action on Ageing (MIPAA 2002). The aim of the initiatives, like in other countries affected by population ageing, is to protect the interests of older citizens. In her chapter on senior policy in Russia and Moscow, Yaroslava Evseeva discusses its development from the historical perspective of social policy evolution and gives a comprehensive presentation of social services, social care, the pension system, labour policy, and educational and cultural policy. While emphasising the dominant role of the central government, she also points to the growing number of NGOs focused on the needs of older people, especially those related to social care.

Bogusława Urbaniak's chapter on Poland's policy on seniors is based on two key strategic documents prepared by the government. These are 'Założenia Długofalowej Polityki Senioralnej w Polsce na lata 2014–2020' (Long-term Senior Policy in Poland 2014–2020) and Social Policy for Older People 2030. SECURITY-PARTICIPATION-SOLIDARITY. As in Hungary, policy planning in Poland also takes place on two levels – central and regional/local. The chapter shows the scope of responsibility of the central government and local authorities in creating senior policy. The retirement policy in Poland is discussed more at length because of ongoing reforms which will influence the living standard of future pensioners. In making comparisons between Russian, Hungarian and Polish senior policies, it is important to remember that Russia has a population of 144,500,000 (its capital city alone has 12,500,000 inhabitants) (World Bank 2017 data) whereas Hungary and Poland have populations of 9,800,000 and 38,000,000, respectively. Nonetheless, comparing Russia and the other two countries is rational because all three countries share a similar communist past.

Hungary, Poland and Russia are experiencing population declines. Between 2000 and 2008, the population of Hungary decreased by 4.3% and the Russian and Polish populations by 1.4% and 0.7%, respectively. Worse still, population projections for the next few decades are not optimistic for any of the three countries. In 2018, the share of the population aged 65 and above was 19% for Hungary, 17% for Poland, and 15% for Russia (World Bank 2018 data, <http://wdi.worldbank.org/tables> (accessed: 30.07.2019)).

The scale of demographic problems in Russia is well illustrated by comparing the average life expectancies for men and women in Russia, Poland, Hungary and the EU28 in 2015. According to the data in Table 1, the life expectancy at birth for Russian men is lower by 11.4 years compared with the EU 28 average.

Table 1. Life expectancy at birth in EU28, Hungary, Poland and Russia (2015)

Countries	Men	Women	Difference in favour of women
EU28	77.9	83.3	5.4
Hungary	72.3	79.0	6.7
Poland	73.5	81.6	8.1
Russia	66.5	77.0	10.5

Source: based on Eurostat data (online data code: TPS00205), <https://ec.europa.eu/eurostat/data/database> (accessed: 16 Jun. 2019) and the chapter by Yaroslava Evseeva.

The difference in life expectancy at birth between Russia and the other two countries shows the scale of challenges confronting Russian social policy.

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1. The European Union is going grey – main trends

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Abstract

Changes in the demographic structure of societies and the problems they bring call for adjustments to social policies. The chapter provides an insight into population ageing processes in European countries and Russia. According to the statistics it presents, the proportion of the population aged 65 and over increased between 2008 and 2018 in all EU countries. Population projections indicate that by 2100 almost every third person living in the EU will be at least 65 years old. The demographic trends and the double-ageing phenomenon (a fast-growing share of the oldest-old people (aged 80+)) are a special challenge for social policies.

Keywords: demography, ageing population, double ageing

The world's population is ageing at a fast pace. While in 2017 one in eight people was older than 60 years of age (one in five in Europe and North America), estimates show that in 2030, the ratio will be one in six. The global number of people aged 60+ will rise by 2030 to 1.41bn (by 56%), so it will exceed the number of children under ten years of age, which will reach 1.35bn. According to projections, as much as 35% of Europe's population in 2050 will be at least 60 years old (United Nations 2017, pp. 1–5).

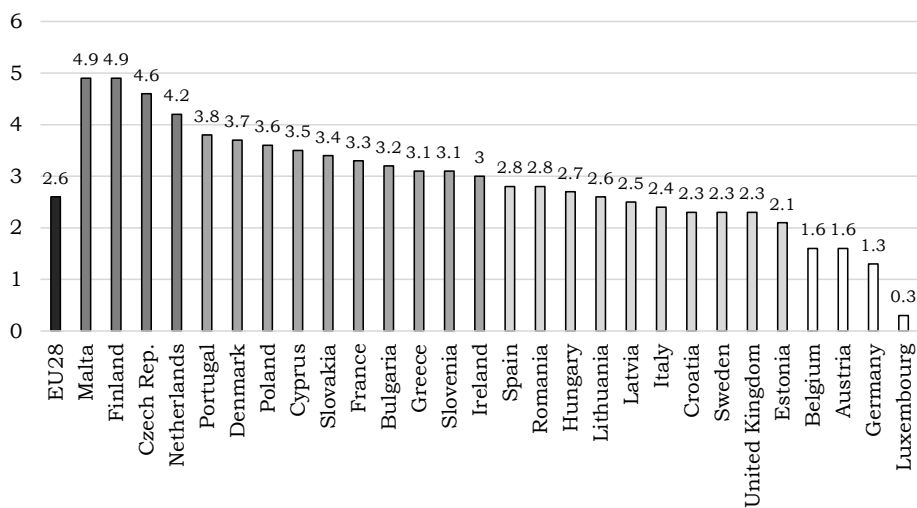
The EU's population increased between 2018 and 2019 by 1,100,000 (data as of 1 January 2019) but only because of positive

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net migration – the number of deaths exceeded births (5,300,000 vs 5,000,000). In 2018, the largest declines in population were noted by Latvia (–7.5%) and Bulgaria and Croatia (–7.1%). At the same time, the population share of older people increased in the EU – in 2019, almost every fifth citizen (19%) was at least 65 years old. In all member states, the share of people aged 65+ increased between 2008 and 2018 in the wake of the ageing of the post-World War II baby boomers (Graph 1). The growth rates ranged from 0.3 percentage points in Luxembourg to 4.9 p.p. in Malta and Finland.

The median age of the EU's population has increased, too. Between 1 January 2008 and 1 January 2018, it rose by 2.7 years on average, to 43.1 years. Portugal, Spain, Greece, and Lithuania noted median age increases of 4 years.

The consequence of population ageing is a higher old-age dependency ratio in the EU. Its level as of 1 January 2018 was estimated at 30.5%, meaning that one person aged 65+ was supported by three people of working age. The respective values of the ratio for Hungary, Poland, and Russia were 28.5%, 25.3%, and 22% (World Bank).

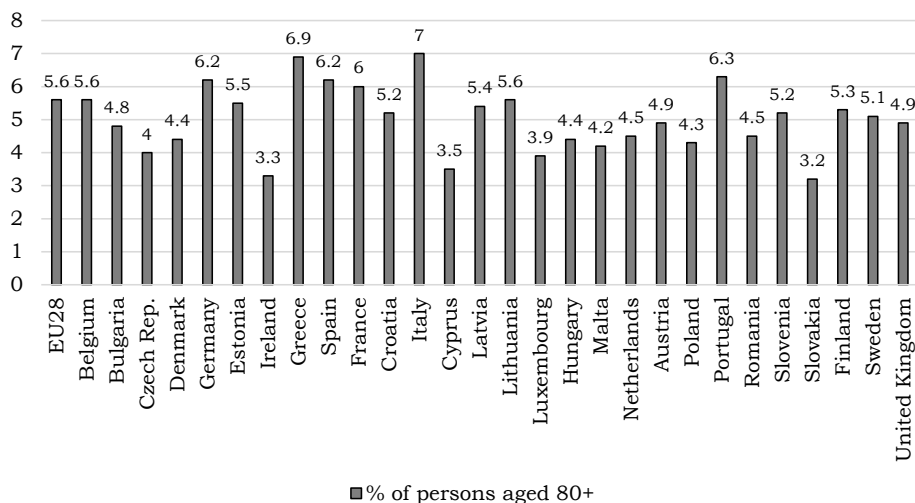


Graph 1. Percentage increases in the share of the 65+ age group by EU member state, 2008–2018

Source: based on Eurostat data (online data code: demo_pjanind)
<https://ec.europa.eu/eurostat/data/database> (accessed: 20 Aug. 2019).

The double-ageing of the EU's population means that the shares of people older than 65 and 80 (the very old²) increase at the same time (Szukalski 2012, p. 27). Unfortunately, the latter group is growing faster than any other age group in the EU. According to the demographic data, on 1 January 2018, it accounted for 5.6% of the population in the EU-28. The highest shares were noted in Italy (7.0%), Greece (6.9%) and Spain (6.2%), and the lowest in Slovakia (3.2%) and Ireland (3.3%, respectively) (Graph 2).

Demographic projections leave no doubt that population ageing will continue into the coming decades. The EUROSTAT data show that 31.3% of the EU's population will be older than 65 by the year 2100; almost every third citizen will be a senior, and almost every seventh will be older than 80 (Graph 3).

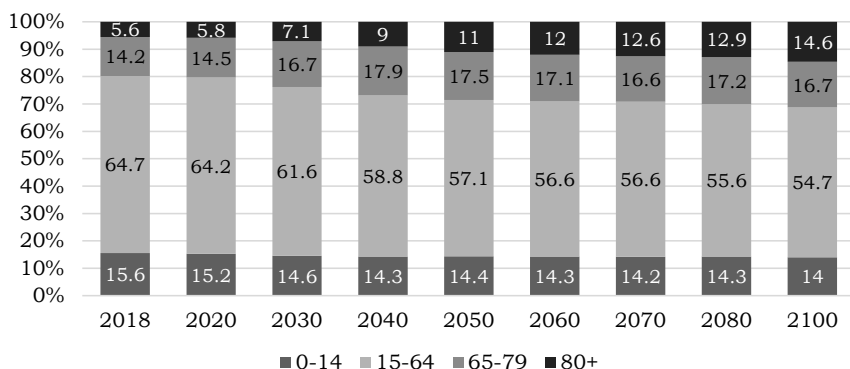


Graph 2. People aged 80+ in relation to the population of the EU28 as of 1 Jan. 2018 (%)

Source: Eurostat (on line data code: demo_pjanind), <https://ec.europa.eu/eurostat/data/database> (accessed: 20 Aug. 2019).

The highest rates of people aged 80+ are predicted to occur in Italy and Greece (7% and 6.9%, respectively), and only slightly lower in Poland and Hungary (around 4.3% and 4.4%).

² Because of the heterogeneity of the older population, it is examined with respect to three age groups: young old (age 60/65–69), middle old (age 70–79) and very old (age 80 years and older).



Graph 3. Population structure by major age groups in the EU28 in 2018–2100

Source: Eurostat (online data codes: demo_pjanind and proj_18ndbi), <https://ec.europa.eu/eurostat/data/database> (accessed: 20 Aug. 2019).

The overall ageing of populations, marked by increasing shares of the 60/65+ age group, is accompanied by the ageing of working-age populations, among which people aged 45–64 years start to predominate (in 2018, in Poland and Hungary, they accounted for 39% and 40.7% of the population aged 15–64 years, respectively). The trend is worrying because the working-age population is responsible for securing the living standard of the oldest generations.

Currently, one-fifth of the EU28 population is at least 65 years old, so countries should embark on preparing long-term action plans and adjust the main areas of their social policies to changes in the demographic structure. While they may take different paths to achieve this, the ultimate goal for all of them should be to create an environment that is conducive to the healthy and independent living of all citizens, including the increasing number of seniors, and enabling the intergenerational exchange of goods and services, benefitting the whole of society.

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<https://www.ageing.ox.ac.uk/research/regions/east/> (accessed: 20 Jun. 2019).

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2. Senior policy – what are we talking about? A terminological analysis

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Abstract

Senior policy is different from other social policies created to support older people. Chapter 2 provides a terminological analysis of five distinct social policies concerned with population ageing processes and older people: social policy on ageing, social policy on old age, social policy on older people, active ageing policy, and senior policy. Most attention in the chapter is devoted to senior policy. In Poland, its scope has been defined in a strategic document that presents the long-term measures aimed at ensuring the appropriate and healthy ageing of the population.

Keywords: public policy, social policy, senior policy, active ageing policy

Senior policy differs from other social policies aimed at older people. It has developed from one social policy that aimed ‘to ensure independent living of older people and create conditions enabling integration between older generations and other members of society (and local communities) and intragenerational integration’ (Błędowski 2003, p. 7) into several policies covering the issues that affect older members of society. This evolution happened because the growing complexity of population ageing problems, and the emergence of new areas requiring collaborative efforts from many entities, necessitated the creation of separate policies on old age.

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In the studies reviewed by Szatur-Jaworska (2016), the following types of policies relating to ageing and older citizens were referred to: (1) social policy on ageing, (2) social policy on old age, (3) social policy on older people, (4) active ageing policy, and (5) senior policy. Although differently named, the policies focus on basically the same target group of the population. Szatur-Jaworska understands social policy on ageing as '(...) purposeful activities undertaken by different entities – mainly the state – in order to solve public problems and accomplish social objectives arising from age structure changes' (2016, p. 76). The scope of the policy is determined both by needs which require that institutional support be met (health, economic security, education, employment, participation in social life, etc.) and the methods and instruments that can be used to this end (laws on access to social services and social benefits, the setting of minimum wage and pension levels). More specific policies are formulated to address particular problem areas (health, welfare, old-age and disability pensions, etc.) or the needs of different groups of citizens (e.g. social policy on older people). As for social policy on old age, its purpose is to 'help individuals cope with developmental and situational crises typical – in the specific historical circumstances – of this stage of life' (2016, p. 82). It is designed to make sure that old age is treated as one of the equivalent stages of life and is positively perceived by the public.

Social policy on older people aims to create environments allowing senior citizens to live independent lives (now and in the future) and to advance intergenerational integration and solidarity. The adequacy of its measures depends on the knowledge of older people's needs and of the specific situations in which they live. The policy is set in an axiological framework consisting of values such as equality, individual freedom, solidarity, and independence, and it is guided by the vision of social order, the role of the family, the government, NGOs, local communities, and local authorities. A special kind of social policy on older people is an active ageing policy, which emphasises the value of living actively at all stages of life. A more detailed description of the policy is provided in the chapter by Patyán. The concept of the active ageing policy was formulated in the late 20th c., and the first document that explained its nature was the EC Communication of 21 May 1999 *Towards a Europe for All Ages-Promoting Prosperity and Intergenerational*

Solidarity (Communication from the Commission COM (1999) 221 final). The WHO (2002, p. 12) views active ageing policy as a lifelong strategy which encompasses ‘the process of optimising opportunities for health, participation and security in order to enhance quality of life¹ as people age’. It is important to note that the word ‘activity’ should be understood here as referring not only to keeping fit or working life but also to participating in social, economic, cultural, spiritual and civic activities throughout one’s lifetime. Activity in all spheres of life is a right that all members of society have, regardless of health, age or disability. However, for people to be able to exercise this right and to lead active and independent lives until very old age, assistance measures are necessary.

In recent years, the WHO shifted its emphasis from ‘active ageing’ to ‘healthy ageing’ as a prerequisite of the former, and it started working on a strategic document on healthy ageing in the next decade. The WHO’s *Decade of Healthy Ageing 2020–2030* (2019)² deals with a cross-section of healthy-ageing issues, but there is a special focus on people after the prime of life. The document stresses that coordinated initiatives undertaken by the authorities, public and private entities, international organisations and the civil society have the potential to create conditions that enhance the functional abilities of ageing people so that they can live the lives of their choice despite the passing of time.

According to the classification of policies compiled by Szatur-Jaworska, a senior policy is a construct that encompasses areas included in social policy for old people, old age policy and active

¹ Quality of life is ‘an individual’s perception of his or her position in life in the context of the culture and value system where they live, and in relation to their goals, expectations, standards and concerns. It is a broad ranging concept, incorporating in a complex way a person’s physical health, psychological state, level of independence, social relationships, personal beliefs and relationship to salient features in the environment’, *Quality of Life Assessment*. The WHOQOL Group, 1994. *What Quality of Life?* The WHOQOL Group, [in:] World Health Forum. WHO, Geneva, 1996 as quoted in WHO (1998), *Health Promotion Glossary*, WHO/HPR/HEP/98, Geneva, p. 17).

² The main documents underlying the provisions of The Decade for Healthy Ageing 2020–2030 are the Madrid International Action Plan on Ageing (MIPAA) of 2002 initiated by the UN and WHO’s *Global Strategy on Ageing and Health 2016–2030*. Both documents refer to the 17 Sustainable Development Goals of the 2030 Agenda for Sustainable Development; see World Health Organization (2019).

ageing (or rather, active and healthy ageing) policy that together form social policy on ageing (Szatur-Jaworska 2016, p. 81). This definition of senior policy offers neither new solutions nor perspectives. It also seems incomplete because a senior policy is, in fact, directed to the whole of society, and it should make sure that the socio-economic life is organised at the national, regional and local levels so that all citizens can live healthy, autonomous and independent lives until old age. This requires a new social contract that will help build a fairer society, i.e. one where everyone has an equal chance to attain economic and social well-being (World Bank 2019, p. 123).

The notion of 'senior policy' became part of the public debate in Poland with the establishment of the Department of Senior Policy by the Ministry of Labour and Social Policy (MLSP), and the Senior Policy Council as the Minister's consultative and advisory body in 2012. Thereafter, senior policy objectives for the years 2014–2020 were defined, and support programmes for the older age groups in Poland were developed using the outcomes of comprehensive surveys of the environmental determinants of older people's needs, which were co-funded by the EU. In the strategic document 'Założenia Długofalowej Polityki Senioralnej w Polsce na lata 2014–2020' (Long-term Senior Policy in Poland 2014–2020), senior policy was defined as encompassing 'all purposeful activities undertaken by public administration bodies at all levels and by other organisations and institutions implementing tasks and initiatives aimed at creating conditions for decent and healthy ageing'. The definition has been further elaborated on in the Act on the elderly of 2015 (art. 4.2), where senior policy is

[...] understood broadly as all activities at all stages of human life intended to create conditions enabling people to extend the period of economic and social activity and to ensure that older people will live self-reliant, healthy, safe and independent lives (...) (Long-term Senior Policy in Poland 2014–2020).

Therefore, senior policy should not be narrowly interpreted as only referring to the advanced stage of life because ageing is a process that starts in the past and ends in the future.

A senior policy is planned and carried out at the strategic level by the central government. The regional and local authorities

formulate and implement their own senior policies in keeping with the overall goals set by the government. At the lowest level, NGOs implement specific projects for senior citizens (Urbaniak 2018).

Szatur-Jaworska emphasises that a senior policy should be designed horizontally so that it is consistent with other areas of social policy, such as social security (including retirement and pensions, the labour market, health, education, and housing and infrastructure development policies). It should also be built on intergenerational dialogue and solidarity, and understand that people's needs change as they become young old, middle old and very old-old, and that old age may span a period of 30 years or more, depending on what we take as the threshold of old age.

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3. Senior policies in Hungary

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Abstract

The demographic ageing of modern societies and the associated challenges made the twentieth century a period of ageing politics. Multiplexity and complexity became keywords for elderly policies, but of course, they must be interpreted in the context of the given social, cultural and welfare conditions. This chapter focuses on the socio-political actions in handling the issues of the ageing process in Hungarian society. Among the descriptions of the demographic situation and current policy actions, the article analyses the country-specific specialities of ageing policies. It discusses the peculiarities of the organisational levels of policies, the main organisation processes, and it tries to shed light on the social, administrative and organisational issues that form the image of Hungarian senior policies today.

Keywords: senior policies, policy domains, active ageing, service policy, care policy, ageing in Hungary, recentralisation

3.1. Preface

The rapid change in elderly demography in modern societies in the twentieth century has resulted in new ageing policies.

The demographic ageing of modern societies and the associated challenges made the twentieth century a period of ageing politics.

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Multiplexity and complexity became keywords for elderly policies, but of course, they must be interpreted in the context of the given social, cultural and welfare conditions.

In order to make any policy effective, the latter detailed guiding directions include several sectors at the same time (e.g. employment, pension, social activities, etc.). This paper studies the international guidelines of ageing policies, their origins, the changes, and the effects on the national policy level.

The chapter also presents the situation and the demographic characteristics of the elderly in Hungary, as well as the change of the main features of the Hungarian senior policy. It discusses the peculiarities of the organisational levels of policies, the main organisation processes, and it tries to shed light on the social, administrative and organisational issues that form the image of the Hungarian senior policies today. It is not possible to avoid a short historical analysis of the field, the decentralisation and re-centralisation processes, the important international movements related to the senior policies, and the impact of the European Union. There are two planning levels in the focus of the processes: the state and local government. Their place, roles, tasks and results are presented at the end of the chapter, with concrete examples that illustrate the Hungarian practice.

3.2. International guidelines for ageing policies

3.2.1. Ageing in place

The elderly have the right and opportunity to live the best quality of life in their own homes if they so wish. Policies supporting this aim appeared in the spirit of 'ageing in place'. Critics of residential care (Goffman 1957) have already pointed out that these institutions influence human relationships (Scott 2011), build an artificial world and limit the person's freedom. Emphasising institutional systems in care has particular consequences in service policy, which can mainly be characterised by the dominance of actions targeting the self-sustaining of the institutions instead of taking the needs of the elderly into account (Townsend 1980; Townsend 2006).

The right of older people to live in their own environment – and the related discourses – are based on the 1994 OECD Declaration.

According to the declaration, 'older people should be able to live in a sheltered and supportive way in the environment which is close to their social and geographical sense' (OECD 1994, p. 3). In fact, the quality of life of the elderly is significantly influenced by their neighbourhoods and place of residence.

Some studies suggest that as they age, elderly people are more emotionally attached to their homes (Rioux 2005). Thus, 'ageing in place' has been interpreted in several ways in policies. According to some approaches, it means the organisation of care and health services close to the home of the elderly (Bartlett, Carrol 2011), while other interpretations are more complex, including all the factors that could make the life of the elderly more complete in their own homes and neighbourhoods (Mestheneos 2011). The latter approach considers the ideology of 'ageing in place' not only as a tool for defining service policies but as an ideology that develops in the dynamics of living and directs environmental factors and individual characteristics.

It can appear in different policies (public transport, settlement planning, neighbourhood and community services, care services, etc.), and it points to the role and significance of planning levels. National policies can define the role of community care and its quality criteria. The scene of regional or local policies is settlement-level planning and strategy-development. Meanwhile, new solutions, like the introduction of new technologies that help the independent life of the elderly, while enhancing their security (ICT¹), can strengthen the spirit of 'ageing in place'. Effective policies require the active participation of the elderly in the planning processes. They should be able to represent the rights of the elderly in the planning process. In addition, local-level activities help the social participation of the elderly and their inclusion.

3.2.2. The age-friendly environment

The demographic ageing of the population, the changes to and modernisation of the built residential environment, and developments in technology have led to the emergence of the age-friendly environment (AFE) domain. The cohorts of the elderly

¹ Information communication technologies.

population have different needs, and attention should be paid to the role of environmental factors in maintaining their health and quality of life. The approach was based on the WHO Ottawa Convention in 1986, which emphasised the role of the environment in maintaining health. The Convention approached the reaching of goals in a complex way, emphasising the role of settlements in health promotion, supporting community-level actions, and strengthening the role of health promotion through a lifecourse.

The approach has two main directions. One emphasises environmental factors to make the environment more liveable and suitable for a wide age-range of people in order to help their lives and health. The other approach takes individuals' different situations and needs into consideration. The two approaches are usually interpreted together in policies (Buffel et al. 2018).

The WHO (2017) divided the policy tasks into two main groups in its program. Appropriately creating the physical environment can be connected to three main areas: the outdoor environment, transport and mobility, and housing. Policymakers need to plan interventions at these critical points, reducing physical barriers that exclude people from the community and strengthening the participation of the elderly regardless of age or physical or mental condition.

The other group includes social participation, social inclusion and non-discrimination, civic engagement and employment, access to communication and information, and the provision of appropriate community and health services.

These are the basic directions that help to create and develop an age-friendly environment in a complex way. The policy approach is based on the development of a bottom-up strategy with the participation of the local senior citizens and with the development of local-level action programs.

While speaking about age-friendly environment programs, two questions arise: 1) Are they able to involve elderly people in decision-making processes? 2) At what level can they develop national strategies in the spirit of the above values?

The essence of AFE strategies is that it is very difficult to perform them well, but it is very easy to perform these programs badly. If AFE strategies cannot be combined into a systemic strategy, it can easily happen that the programs are designed without the involvement of the elderly, or that the values, which

are different from the expectations of the elderly, will dominate during the program's implementation. A further problem is the lack of systemic thinking, which means no strategies are developed in the short, medium and long term; instead, they try to achieve goals with occasional project-based activities.

3.2.3. Active ageing policies

In presenting active ageing policies and discourses, the multidimensional approach of the United Nations and the European Commission is used, which is applied to measure the active ageing index. According to the index,

[...] active ageing refers to the situation where people continue to participate in the formal labour market, as well as engage in other productive unpaid activities (such as care provision to family members and volunteering) and live healthy, independent and secure lives as they age' (European Commission – United Nations 2017).

From the 1970s to the 1980s, policy directions for maintaining old-age activity addressed the economic and social challenges of the ageing population. In addition to active ageing, many other domains appeared, and it is worth highlighting the concepts of 'successful ageing' and 'healthy ageing', which are more common in the geriatric literature (Bowling 2005).

One of the risks of successful ageing policies is that they focus on the younger elderly. The theory of activity is closely related to the activity interpreted by the majority of society, which means, in many cases, the focus is on the employment of the elderly and the issue of retirement (Foster, Walker 2015). The exclusion of the older elderly from the interpretative framework becomes visible in many areas.

According to some approaches, active ageing programs are not aimed at older people in need of care (Boudiny 2013); therefore the programs focusing on the target group contain less valuable elements and, in addition, block elderly people from participating in policy decisions affecting them (Townsend 1980), suggesting that the elderly are passive and uninterested in the issues of political participation. The process can stigmatise those who are not active

(very old, frail) over-emphasising their personal responsibility for not being active (Martinson 2006).

Another problem with active ageing policies is that former goals have been heavily distorted by the strategy of the European Union, which aimed to increase employment, strengthen flexible employment, and thereby strengthen economic competitiveness (Perek-Białas, Ruzik and Vidovicová 2006). In this environment, active ageing programs can easily become one-channel ones (Walker, Maltby 2012). Its dominance was preserved by the basic philosophy of the European Year of Active Ageing and Solidarity Between Generations (European Year 2012), although it tried to address active ageing in a multidimensional way.

There is one principle of active ageing programs that should not be ignored: it is the right of older people to decide how long they will stay on the labour market. This principle typically means measures against early exclusion from the labour market, while it may also include care (grandchild, spouse care) as well as local community activities or volunteering.

Some critics emphasise the ‘top-down’ nature of active ageing policies in this regard, i.e., they are decided upon by experts who often ignore the preferences of the elderly. The ‘relativity of activity’, i.e., the interpretation of actions, is a good example of this. If younger seniors are the focus of active ageing programs, then those programs which are considered appropriate, from their point of view, can be emphasised. However, in many cases, activities that focus on the needs of older elderly people are excluded (Boudiny 2013).

3.2.4. Care policies and the main directions of care-related policies

Providing long-term care and its sustainability together with ensuring its accessibility and quality are important for ageing societies. At the European level, the synergy and development of these welfare systems are difficult to reconcile with the application of the open method of coordination (OMC) adopted in this field. According to Guillemard (1983) caring for older people has become a central challenge for the welfare state, while the biggest differences in the practices of the Member States can be found in the development level, financing, and the operation of long-term care systems (Marin et al. 2009).

Taking the demographic trends and the need for care into account, the cost of long-term care in the EU-15 countries may double by 2060 and might increase fourfold in Central-Eastern European countries (Maisonneuve and Martins 2015). In addition to the increase in care burdens, there is a significant difference in the cost of long-term care. For example, while in the Netherlands the cost of care per capita was €955,9 in 2015, in that same year only €1,5 was spent in Bulgaria (Eurostat 2015).

The decommodification of care services (Esping-Andersen 1990), i.e. the increase in the responsibility of welfare societies, has had a number of effects. One of them is the rise in state responsibility together with the responsibility of the family, which has allowed a change of the traditional gender roles of women and means that they now appear more frequently on the labour market. On the other hand, the focus of care policies has been on formal institutional systems for a long time.

The discourse on formal systems has placed the coverage of care, its accessibility, and the rate and the role of institutional services and community services into the centre of care policies. However, as a result of changes in the funding policy of long-term care systems, and due to the growing need for care, the issue of care as a product has emerged. As a result of the higher pensions available in certain countries, new financial forms for supporting care (cash-for-care), and new ideologies that have appeared in public services and public administration (Gow-Dofour 2000; Pollit 2007), the care sector has undergone major changes in many countries over the past two decades.

The elderly or their family members can purchase public and private care services as well as support the caring role of the family, or they can purchase care from migrant caregivers.² The rediscovery of family care and the need to support family members have returned to the forefront of policies since the early 2000s (Mesteneos, Triantafyllou 2006; OECD 2011).

The reimbursement of care costs and the increasing role that the individuals who are cared for and their families play in their care draw attention to the changes in the role distribution of

² Migrant caregivers refers to the groups of caregivers who have moved from eastern EU countries to the west and north, as well as migrant care workers from third countries too.

the individual and the state. The increase in contributions paid by the individuals and their family is described in the care policies as the 'ethics of care'. The increasing rate of contributions from the individuals and their families has transformed care services into goods; however, this may include risks, like the exclusion of the poor from the care sector.

The relationship of the power and role in these systems determine the image of care systems in the Member States. Regarding formal systems, the deinstitutionalisation of services has been discussed in many countries in recent years, but substantial steps have only been taken in one or two Scandinavian countries, although even there, no actions were taken without criticism (Ulmanen, Szebehely 2015).

In Central and Eastern Europe, the deinstitutionalisation of services was mainly due to EU funding (Stefania et al. 2016). However, when transitioning from residential systems to community care systems, the same professional level can only be maintained at higher costs, which is contrary to general assumptions (Swinkels et al. 2015).

In order to use capacities more effectively, access-conditions have been tightened in several places. In most cases, this is done by clarifying the conditions of the need assessment, by tightening the criteria, or by extending the age of those receiving care.

Redesigning the roles and responsibilities of those involved in care is also an important policy issue. As the responsibility of the welfare state started to flourish, defamilisation started to appear, and theories and practices emphasising family roles and responsibilities started to emerge in the 2000s (Leitner 2003; Michoń 2008).

3.2.5. Pension policy

Some principles of pension and retirement-related policies focus on two main areas. One of them aims to draw the attention of the Member States to the problem of maintaining the value of pensions, while the other focuses on the issues of reconciling work and retirement.

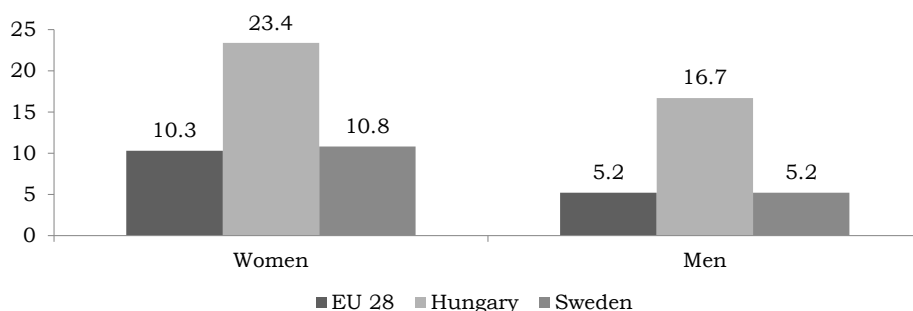
The rate of pensions and preserving their purchasing value, which tends to be provided by the indexing of pensions, seems to be an important way to prevent old-age poverty. It is an important tool to determine the level of the minimum pensions and their relationship to poverty thresholds, as well as the social support of old people who have not received pension rights.

As regards the reconciliation of work and retirement, the tightening of the early retirement programs, the gradual, flexible organisation of work and retirement, as well as the employee's own decision which is free from compulsion should be mentioned in terms of choosing when to retire (2000/78/EC). Options include postponing the retirement age and establishing a multi-pillar pension liability system (Eichhorst et al. 2011).

There is no unified strategy for pension systems in the European Union, and managing retirement remains within national frameworks.

3.3. The major demographic characteristics of Hungary

The population of Hungary was 9,778,371 on 1st January 2018. The demographic processes follow the European ageing trends due to the composition of the population, while ageing trends across the country are in line with the levels of economic development in particular regions. Accordingly, at birth, the elderly in Budapest can expect to live three years longer than those living in the most underdeveloped regions of Eastern Hungary. Life expectancy at birth is 78.99 years for women (2017), and 74.4 years for men (2017), which is about four years below the EU average. The gender gap in life expectancy in Hungary is 7.1 years, which is higher than the EU average of 5.4 years. There is also a great difference in the number of years living in poor health.



Graph 1. Difference between life expectancy ratio and the expected healthy life years in birth in selected countries and the EU in 2016

Source: based on Eurostat 2018 data, <https://ec.europa.eu/eurostat/data/database> (accessed: 12 Mar. 2018).

As shown in Graph 1, Hungarian women have to be cared for 13 years longer than the EU average, and Hungarian men 11 years longer. This can be attributed to health-related loss of life and the loss of self-sufficiency, coupled with a longer life span. The operation of long-term care systems, improving their quality and guaranteeing their sustainability pose serious future challenges to Eastern European countries, including Hungary.

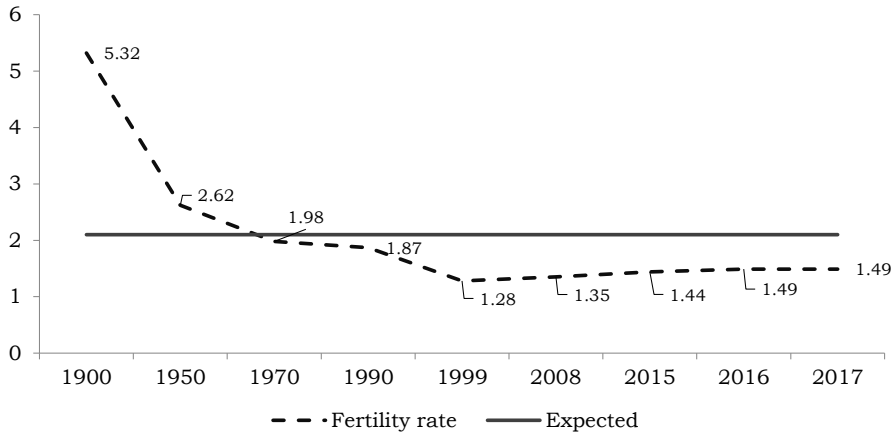
The rate of the national ageing index was 99.9 in 2005, which increased to 130.2 by 2018. The highest values of the index are found in the capital (148.5), while the lowest values can be found in the north-eastern and south-western parts of the country (114.6). Due to the economic backwardness of these areas, considerable migration within the country is expected. The migration trend has doubled over the last ten years and occurs primarily in the 20–35 age group (Central Statistical Office 2018). There is also significant emigration from Hungary, although the amount of emigration is based upon estimates and not actual data. According to the official data of the Central Statistical Office, 2% of the population settled abroad in the last ten years; however, it is estimated that more than 600,000 Hungarians lived and worked abroad in 2017, which is more than 6% of the population, and represents 9% of the working-age population (15–64 years).

Another reason for the decline in the population is the very low fertility rate across Europe. The average fertility rate in the EU was 1.6 children per woman (2017). Looking back a few decades, the rate reached its lowest level in most Member States in the first decade of the 2000s. Since then, it has shown a very slow rise. However, there is still a lag behind the desired value which is necessary for a self-sustaining population.

The fertility rate in Hungary (Graph 2) shows differences even by region. The lowest values are found in the capital (1.15), the Central Hungary region (1.3), and in the western regions (1.44), while the highest can be seen in the economically disadvantaged northern (1.76) and eastern regions (1.64).

The increase in life expectancy at birth and the low fertility rate have resulted in the rising old-age dependency ratio. In Hungary, the rate was 22.7% in 2005, 24.2% in 2010 and 28.5% in 2018. The highest values are found in the capital (30.7%) and in the southern

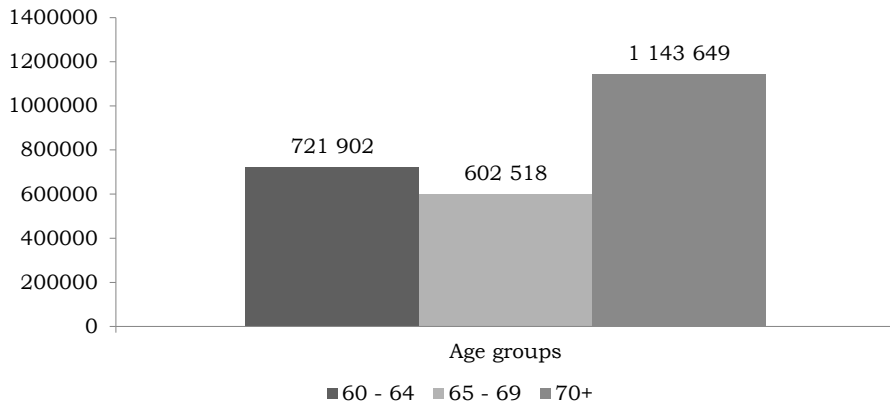
region (30.2%), while the lowest value can be found in the Northern Great Plain region (26%).



Graph 2. The fertility rate in Hungary between 1900 and 2017

Source: Central Statistical Office, 2018.

In 2018, 17.7% of the population was over the age of 65. The figure below shows the numerical distribution of the age groups over 60.

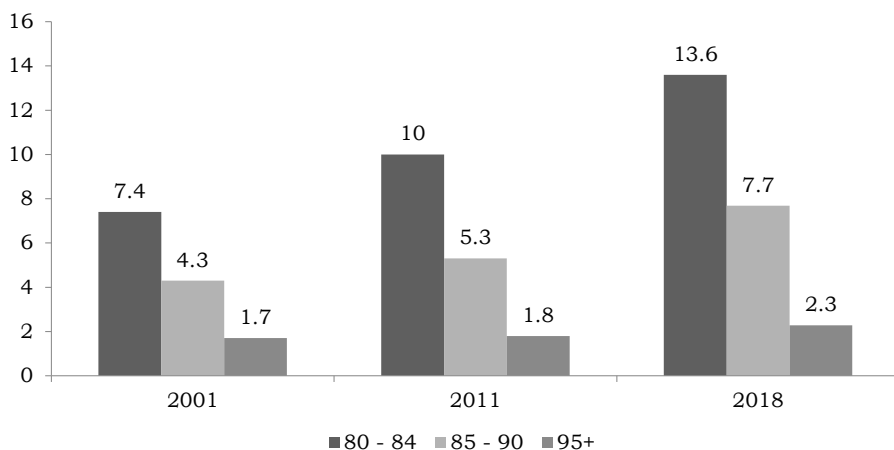


Graph 3. The number of the older age cohorts in Hungary, 2018

Source: Central Statistical Office, 2018.

Further cohorts of baby boomers will reach the age of 65 in the coming years, increasing the number of older people.

The rise in the number of older people can be explained by the increase in the 65+ age groups, and in addition, by the increasing number of people over the age of 70. The reason for this increase is that people generally live longer.



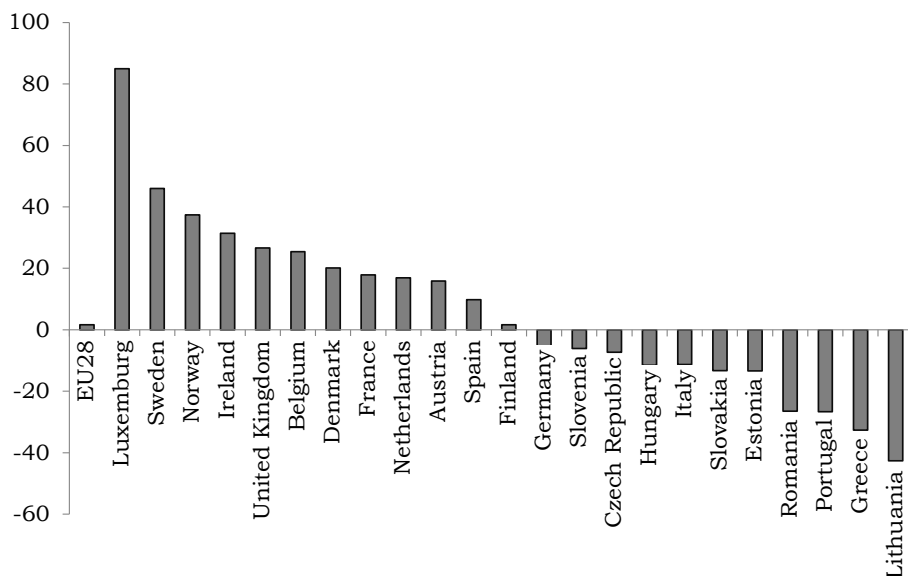
Graph 4. The rate of the oldest old cohorts in the 65+ population in Hungary

Source: Central Statistical Office, 2018.

The increase in the number of very old people raises several social-political issues beyond the challenges of long-term care. As their age increases, the proportion of lonely older people living alone gets higher. Living alone is a risk that poses a challenge for the organisers of social services.

According to the longer-term EUROSTAT forecasts, which include the demographic ageing of the population, fertility rates, as well as migration processes, Eastern European and Southern European countries face serious challenges. In Hungary, the population might fall by up to 11.6% by 2080, while in other countries, the population might fall even further. In Romania, the population might decrease by 26.5% (Graph 5).

Knowing the trends of ageing, these scenarios can jeopardise the large support systems of the elderly. Questions are raised about the sustainability of the pension system, the value retention of the retirement rate, and the operation and maintenance of care systems.



Graph 5. Demographic projection in selected countries, 1 January 2016 – 1 January 2080 (2016=100%)

Source: based on Eurostat data (online data codes: demo_gind and proj_15npms), <https://ec.europa.eu/eurostat/data/database> (accessed: 12 Mar. 2018).

Overall, the demographic situation in Hungary is aligned with the average of the European Union. However, some indicators are worse than the EU average. Three factors that affect the elderly population should be highlighted.

- There is a significant difference in the EU average with regard to the years spent in good health, which reinforces the need for care in Central and Eastern European countries – including Hungary – that have underdeveloped care systems (Srakar et al. 2015; Carrera et al. 2013).

- Due to the low fertility rates and migration processes, the decline in the active age population may endanger the welfare tools that can guarantee the safety of the elderly in the long run.

- In a country with fewer than ten million inhabitants, there are large regional differences, which, in addition to economic indicators, also have demographic correlations. As a result of younger people moving out of the capital, the proportion of older people in Budapest is extremely high. As a result of internal migration from northern and eastern Hungary towards the capital and western Hungary, the settlements in the eastern region are depopulated, and only the

elderly who are unable to move and the disadvantaged population stay in these parts of the country. Hence, policies relating to older people have to deal with a number of local characteristics in each region and settlement.

As a result of the generous Hungarian family policy, the government spent 4.6% of the GDP on family support systems in 2016. However, support from the government is not age-related and does not include designated support for the elderly. The government's clear goal is to raise fertility rates in order to achieve a self-sustaining population. These benefits are provided to those who are able to raise their children, i.e., those who are employed and have higher education. However, according to the data of the Central Statistical Office, the fertility rate of the low-skilled population (those who have completed only eight grades of elementary school) continued to increase by nearly 10%, while the fertility indicators of the population of adult graduates increased by only 4%. A simple reason is that those who have graduated give birth later in life; thus they have less time to have more children.

3.4. Policies supporting the ageing process and older adults in Hungary

3.4.1. Policy planning levels: state and municipality

In Hungary, the planning scenes of policies related to older adults typically appeared in national (NUTS 0) and municipal (NUTS 4–5) units. The timing process of the planning is also specific; it is influenced by the activities of the EU policy.

Since the political change in 1989, the main policy steps have been directed to building the social care and service system and to stabilising the pension system. A major event in social policy planning was the Act on Municipalities that came into force in 1990. This Act led to a significant decentralisation of tasks and planning. As a result most of the tasks related to the organisation of social care and social services were transferred to local governments, enabling the settlement-level organisation of services provided and developed by the networks between settlements. This period lasted up to the beginning of the 2000s.

3.4.2. The success and failures of decentralisation

In terms of the organisation and provision of services, the development of the municipal self-government structure should also be mentioned. It is not surprising that critics of decentralisation called Hungary the country of 3100 small kingdoms. In 1992, there were 3109 municipalities in Hungary, compared with the 2476 municipalities in Poland. The rate of settlements with a population of less than 100 was 54.3% in Hungary, while in Poland, such small municipalities could not be found (Pálné et al. 2010).

These small organisational units were not able to organise the social tasks required by the legislation for those in need, including the elderly, and local municipalities were severely criticised. Most of them pointed to the lack of professional knowledge and responsibility, and to the lack of law-abiding behaviour. The chronic inadequacy of financing compulsory social tasks should also be mentioned.

The lack of funding led to the lack of community services for the elderly, among others, although institutional residential care was more developed. It was the task of the local government to organise community services, while the organisation of institutional residential care was the responsibility of county seats and cities with county rights (Patyán 2006). As a result, there was virtually no improvement in the number of community services available regarding homes for the elderly from the beginning of the legislation on social services and benefits in 1993. From 2010, when the funding of the services was increased, the proportion of those receiving benefits doubled in a few years. The question is thus more of a financial problem than an organisational one.

However, many attempts have been made to extend the planning levels. From the very beginning, local government law made it possible for local governments to cooperate as well as plan and perform joint tasks, but only a few settlements took advantage of this opportunity. Later, there were more attempts to strengthen the collaboration of municipalities (1997, 2004, 2013), where the extra costs of common task were supported by incentive support; however, they also had mixed results.

In 2004, the government made serious preparations to decentralise the powers of social administration and planning.

Experts tended to concentrate the planning level at the NUTS 2 and 3 levels, instead of state and settlement levels. This would have resulted in the decentralisation of resource allocation, but it was not accepted by the government.

Since 2010, a new direction has emerged in the planning of social policy, as well as in the planning, organisation and provision of social administration, social care and social services. This new direction regarded the re-centralisation (re-nationalisation) of competences as the key to effective service provision. Criticising the local governments and the co-operating non-governmental actors suggested the concept of a new caring state, which was promising for the Hungarian population that had grown up on paternalistic traditions (Patyán 2015). The effects of the re-nationalisation (re-centralisation) of powers could be felt from the late 1990s (Gyekiczki 2009).

Nowadays, we can witness the re-arrangement of powers and responsibilities in the market of personal services. The state has become a service provider again, and in addition, church service providers are given a prominent role and support. Thus, they provide a large amount of elderly care while the municipalities have fallen behind, although the responsibility for the care still lies with them.

Decentralisation appeared in the management of the pension funds too, although to a lesser extent. In 1993, the government accepted the Law on the Establishment of Social and Pension Insurance Municipalities. Despite the ideological concepts, financing problems were in the background of this measure, as the municipalities did not receive the capital needed for their operation (Varga 2016), and it was terminated by the Orbán government among its first measures.

3.4.3. New paternalism

The ideology of the caring state was not far from the governments even before the change of regime. The economic and social uncertainty of the years following the political change further increased the need for state responsibility for social benefits and pensions. The reorganisation of these areas from local governments to the state had a significant impact on welfare systems in both areas and thus influenced the responsibility of the state and society.

In terms of benefits, the ‘we are eligible for the support, only there is not enough money for all of us’ approach further weakened the enforcement of the social rights of citizens.

The number of in-home social care recipients who did not pay any contributions grew as the role of church service providers increased. By 2012, about half of care recipients received their service for free. In the case of services received as gifts, the clients do not complain about the quality of the service; they are happy to get the service.

The situation was similar with the pension system, which was under constant reform in 1997. The reorganisation of the indexation of the system aimed to preserve the value of pensions, while the gradual introduction of the private pension system, which was launched in Eastern European countries mainly by the pressure of the World Bank, tended to aim for the long-term sustainability of the system (Augusztinovics et al. 2002).

The reform of the system has severely been criticised, for example, for the decreasing income of the state social security pillar. As a result, in 2011, the government took steps to reorganise the pension system into a social security pension fund (a pay-as-you-go system). Part of the huge revenue earned by re-nationalisation was used by the government to settle public debts while a big part of the funded pensions returned to the social security pension system. However, the system was still not able to meet the conditions for indexing. In recent years, raising pensions and providing benefits were manifested more as a ‘gift’ approach, rather than as a rational consequence of indexation (Matits 2014).

A fundamental feature of paternalistic systems is losing trust in the citizens. In Hungary, it could be seen in the strategy of supporting family care. Despite the ratification of the family’s responsibility for elderly care in the new Hungarian Constitution in 2011, the government did not confirm support for those who became the caregivers of their family members. The number of beneficiaries decreased by half between 2005 and 2012, and since 2015, as a result of the centralisation of public administration, the form of nursing allowance which can be claimed for caring for an elderly family member has shrunk. The benefit was fundamentally income-dependent, which meant the determining principle of access was the income-substitution function, not the fact that someone was a carer.

The Government also confirmed the regulation on the maintenance obligations of the elderly, which was ratified in the early 1950s. Relatives who are obliged to and who are able to provide care should take care of their elderly relatives. The regulation did not support family care in practice, but it attempted to reinforce the financing of the increasing care costs for the elderly in residential care.

Decentralisation, re-nationalisation and the paternalistic distribution of services have fundamentally influenced the development of senior policies.

3.5. Active ageing policies in Hungary

3.5.1. Change of situation

International documents on active ageing reached Hungary with a delay of three decades. The first and most important document was accepted by the Parliament in 2009 after long preparatory work. Prior to this, a kind of traditional approach only focused on maintaining the physical activity and social participation of the elderly. To emphasise the ideology of active ageing would have been very important in the years following the change of regime.

As a result of economic destabilisation, unemployment skyrocketed, reaching a peak in 1994. Thus, early retirement seemed to be a chance to create income security for many ageing employees. In the first decade following the change of regime (1990), the number of people receiving a pension steadily increased, exceeding 3 million (CSO, 2010). The reason for the increase was the rising number of people reaching retirement age and the high number of people who retired for other reasons (e.g., disability pension). The government responded to this issue by gradually increasing the retirement age and tightening the rules of retirement before reaching the retirement age. Thus, supporting the exit from the labour market was an instrument of employment policy, while tightening measures were introduced for the stability of the pension system, although in many cases they produced contradictory results. After the change of regime, the hope of reviving the Hungarian Community College movement (education with formal and non-formal education) appeared, but it was not successful.

3.5.2. National Senior Strategy

The development and ratification of the National Senior Strategy³ was a milestone in the development of the concept of and interpretation frameworks for active ageing in Hungary. The strategy, which included both international senior policy guidelines and Hungarian values, was considered a progressive document. It set development guidelines for the area until 2034, and the plan was to implement it in two steps. However, concrete action plans were lagging behind, so the strategy itself remained only a document that set values and guidelines for the future and it did not shake active ageing-related fields fundamentally.

Instead of comprehensive strategies, the area was changed according to current political values, which lacked synergy, communication between systems, or conscious sector-to-sector planning. The strategy itself was somewhat ahead of its time. It set goals and values, like a typical European document, but without the need to achieve concrete, measurable results.

3.5.3. European Year 2012

2012 was declared European Year of Active Ageing and Solidarity between Generations by the European Commission. Unfortunately, the community devoted the least amount of money to the campaign of the European Year. Accordingly, a rather modest set of Member State strategies was developed in the year of the program. Basically, the aim was to raise awareness of the issue of active ageing.

Nonetheless, the evaluation analysis of the EC published in 2014 regarded the results of the European Year as successful, although it highlighted the Member States that had paid less attention to the program and those that had taken the program seriously. Hungary was not included in any of the groups. The reason for this was the EU's compatible report, which presented the best practices implemented in Hungary. However, it would have been worth taking a closer look at the programs because, according to the preparatory studies for the year, 78% of the respondents in Hungary said that

³ 81/2009 (IX. 2) Ogy. hat. (Governmental Order about the National Senior Strategy) <https://mkogy.jogtar.hu/jogszabaly?docid=a09h0081.OGY> (accessed: 15 Feb. 2018).

the government did not take into account the differences between generations in employment and in developing intergenerational relations (Zaidi et al. 2012).

Among the national programs, a number of sample programs to promote intergenerational relationships, walking with a cane, health screening, community organisation and employment can be found. However, outstanding programs were only organised if the implementation of the programs could be supported by EU funding, for example, the promotion of employment among older employees (National Program Hungary 2012).⁴ The program emphasised elements of intergenerational solidarity, which included stereotypical elements (kindergarten and school programs for the elderly).

However, the biggest challenge of the European Year, which was a systemic and cross-sectoral strategy, could not be developed in the field of active ageing. The programs were implemented in a project-like and mosaic-like way, with little energy and resources left for conscious planning and systematic implementation. The typical problems of the Hungarian policy planning were seen in the program year: a lack of cross-sectoral consultation and joint planning as well as the lack of resources, which shifted the events of the program year towards programs which were eligible for EU funds.

Examining the critical directions of active ageing programs (Walker, Maltby 2012) the Hungarian programs focused more on strengthening inter-generational relationships and the inclusion of the active age group; very few programs were addressed to those whose inclusion would have been more important: lonely, isolated age groups or those who live alone or who are physically and mentally impeded.

3.5.4. The age-friendly environment

The idea of developing age-friendly settlements appeared in the WHO program in 2005. In 2010, the European Union announced its Towards an Age-Friendly EU by 2020 program. The basis of this program was integrated into the Age-Friendly Cities and Communities Program from 2013. Programs appeared all over the world: age-friendly settlement planning, proper development of

⁴ <http://ec.europa.eu/social/ajax/BlobServlet?docId=7655&langId=hu> (accessed: 8 Mar. 2018).

services, proper development of the availability of public services, and providing equal rights and opportunities regardless of age.

Many European countries and cities have joined the program and the related EU projects. Research shows that the neighbourhoods and the environment where the elderly live have a direct impact on the quality of life of the elderly, so age-friendly programs have great importance in preventing the exclusion of older people.

The Hungarian Ministry of Health, Social and Family Affairs established the Award for Elderly-Friendly Self-Government in 2004. The prize can be awarded to local governments through submitting an application that provides a well-prepared, well-considered, complex set of measures to turn the settlement into an elderly-friendly one. Despite the low cost of the program, it has attracted attention to the elderly-friendly efforts of the settlements.

In spite of the efforts of the European Union, active ageing programs did not help to develop a carefully planned, systematic strategy that could fundamentally change the attitudes of the areas that had an impact on maintaining the quality of life, health and activities of the elderly, and that would ensure a lifestyle that fits the choices of older people.

The values of the Active Ageing Index also show the effectiveness of the efforts taken to promote the activity of the elderly. The index was developed jointly by the European Commission and the United Nations using the most relevant indicators determining the activity of the older people (Zaidi 2013). The three main dimensions include employment, social participation and the conditions necessary for an independent, safe and healthy life. Hungary has been among the last countries in the ranking of the complex indicators since 2014, sharing this position with Slovakia and Poland. Hungary's low position can clearly be explained by the poor employment data of older people.

3.6. Current strategies and processes

3.6.1. Employment of the older people

Employment, the protection of older employees who are considered vulnerable in the labour market, and the labour market integration of unemployed groups are included in the endeavours of the

employment policy of the European Union, which are heavily criticised even at the community level. European experience shows that senior employment programs provide help primarily to older people who are able to work. The losers of the employment policies are the low-skilled older people and the ageing age groups who have been seeking employment for a long time, and who cannot successfully be brought back to the world of work even using Western European support systems (Stöger, Schmit 2017).⁵

In Hungary, barely half of the population over 55 are still active in the labour market. Supporting the employment of older workers is, therefore, essential. Among the employment support tools used in previous years, wage subsidies and benefits were the most effective way to help employment. However, due to the atypical forms of employment and the low level of flexible or part-time employment, it does not significantly affect the employment of this age group. Governmental efforts to employ older people have emerged in the triangle of active ageing, pension policy, and economic policy in recent years, but the latter two areas have dominated. Extending the retirement age will further increase the lack of care for the vulnerable and excluded groups and increase their risk of poverty.

As a result of government measures to promote employment, in 2018, the government cancelled the contribution allowance that could be claimed for people over the age of 55, but it introduced a number of measures to assist the employment of elderly people. In 2017, the possibility of creating co-operatives for the retired appeared. They provide employment opportunities for this age group under very favourable conditions.⁶ From 2018, those who work after retirement can have contribution exemption if they continue to be employed.

With these measures, the government tends to address labour shortages in certain economic areas. The primary question is which senior workers can move back into the labour market with these exemptions and who cannot.

⁵ <http://www.euronews.com/2017/11/24/view-europe-s-employment-policies-are-not-working> (accessed: 12 Mar. 2018).

⁶ Az egyes törvényeknek a közérdekű nyugdíjas szövetkezetek létrehozásával összefüggő módosításáról szóló 2017. évi LXXXIX. Törvény./2017. LXXXIX (Law about the Foundation of Public Pensioner Cooperatives), (Law about the Foundation of Public Pensioner Cooperatives), <https://mkogy.jogtar.hu/jogszabaly?docid=A1700089.TV> (accessed: 12 Mar. 2018).

3.6.2. Promoting the social participation of older people: the Elderly Council and Senior Citizen Rapporteur program

In the absence of a coherent ageing strategy, programs promoting the social participation of the elderly are implemented on an ad-hoc basis. The Elderly Council, which is a board that comments on government decisions, was set up with the 2014 decision of the government⁷. The members of the board are selected by invitation; they are not elected. Thus, they typically do not represent the elderly population but come from groups working on senior issues, for example, service providers in elderly care. In practice, the body intervenes little in the processes that affect the elderly.

Elderly Councils have also been established at the municipal level. They draw the attention of local decision-makers to the problems of the elderly, as well as to the decisions that impact the age group. Municipalities are not bound by the law to establish such councils. The European Union has also provided support for a program to alleviate the info-communication lag of the elderly. Within the program, since 2014, 5,000 people over the age of 45 with low education have been given access to Internet-enabled computers, and they were able to participate in free training.

Special training for professionals has long been planned. The task of these professionals would include the organisation and coordination of older people-related programs and the promotion of the activity of the elderly at the local level. The program is implemented in the framework of a European Union-funded program, and one element includes the training of Senior Rapporteur.⁸ As a result of the program, 1000 senior citizen rapporteurs are trained to promote local policies and programs at the local level.

The training materials of the program have been completed, the trainers have been trained, and the training of the rapporteurs

⁷ 1712/2014 (XII. 5.) Korm. hat. Az Idősek Tanácsáról. /1712/2014 (XII. 5.) (Governmental order about the Council of the Elderly), <https://net.jogtar.hu/jogszabaly?docid=A14H1712.KOR×hift=20170101&txtreferer=00000003.TXT> (accessed: 12. Mar. 2018).

⁸ EFOP-1.2.6-VEKOP-17-2017-00001 Családbarát ország project / (Family-friend State Project). Senior citizen rapporteurs will be responsible for supporting active ageing programmes and help older adults participate in society, <https://www.csbo.hu/> (accessed: 12. Mar. 2018).

will be completed by 2020. In addition to experts dealing with local elderly issues, the training is expected to include members of organisations and NGOs that represent the interests of retired people who can and want to participate in local processes.

3.6.3. Care policy

It is the task of the nation-states to develop and maintain sustainable long-term care systems. In Hungary, approximately one in ten people over the age of 65 has access to some kind of social care service. One-third can use residential care, while two-thirds can get care services in their own homes. The structure of the system has not changed much since the 1990s. The policy of the 1990s was characterised by the dismantling of large institutions and the improvement of service conditions, while in the first decade of the 2000s, policies focused on individual-centred care.

In addition to this, the need for care has increased. Currently (2019), residential care can provide care for about fifty thousand elderly people, and there are about thirty thousand registered people waiting for a place. The introduction of a care needs test in 2007 was a major milestone for access to care. The test regulated access to the services and had no connection with the quality of care. The rules have been tightened several times (2012, 2015), which has clearly increased the burden of home-based care, as the same care needs that could previously have been covered by institutional care now make the elderly eligible only for home care.

Parallel to this, the development of social care at home was realised. As a result, the number of care recipients had doubled by 2014, within four years (Patyán 2018). However, the number of caregivers did not increase at the same rate, and this resulted in them having a significant overload and a decrease in the level of quality of care, and a reduction of time spent on care. Hence, home care (care close to the home of the clients) was unable to provide its deinstitutionalising, substituting functions, and instead of residential care, it provided more accessible, low-quality care (Patyán 2014a).

The system is not sensitive to helping people in financial need. Due to the problems of coordination and funding rules, serious territorial inequalities emerged in the development of services. Special services, such as alarm-assisted home care or daycare for

people suffering from dementia, can be accessed in a very limited way. Service policy strategies of recent years (2004, 2011) were swept away by the government (Győri 2012; Czibere et al. 2011; Patyán 2017); warnings of the profession and the representatives of the policy remained unanswered (Patyán 2013; Széman 2015).

In the absence of strategies for maintaining and developing long-term care systems, Hungary may face a serious challenge as demographic predictions⁹ expect a significant drop in the number of the active age population in Central and Eastern European countries. According to the estimations of EUROSTAT, the decrease of the 2016 population may be 11.58% in Hungary, 26.47% in Romania, and 13.26%, in Slovakia by 2080, while the proportion of elderly people within the population is increasing.

3.7. The senior policy of municipalities

There are no direct requirements for planning and coordinating programs for municipalities at the local level. However, indirectly, municipalities that wish to apply for EU funds must have a Local Equality Program (HEP) from 2013. The compulsory elements of HEP include a presentation of the situation of groups that can be regarded as vulnerable based on their situation and age, and the development of strategies to improve the situation. In the planning of the strategy, the situation of the elderly should be specified according to particular criteria.¹⁰

In addition, more and more municipalities are preparing their own Senior Strategies. The programs are based on local problems and resources, and they set goals for short periods (two years). Larger cities are developing a more serious package of programs for older people, while small towns generally do not use the elements of conscious planning, and programs for the older people are limited to traditional leisure, cultural and festive events.

⁹ EUROSTAT (2018), *Projected population, EU28, 1-st January 2016* (online data codes: demo_gind and proj_15npms), <https://ec.europa.eu/eurostat/data/database> (accessed: 15 Mar. 2018).

¹⁰ 2/2012. (VI. 5.) EMMI rendelet a helyi esélyegyenlőségi program elkészítésének részletes szabályairól (Order of Health Ministry about the detailed regulations of the local equal chance programme) <https://net.jogtar.hu/jogszabaly?docid=a1200002.emm> (accessed: 6 Apr. 2018).

The level of settlement planning correlates with the proportion of older people living in the settlement. In the districts located on the Buda side of the capital, the proportion of people over the age of 60 is close to 30% of the population; thus, these districts devote considerable resources to the planning of senior policies and the provision of a wide range of services.

Below, the senior programs of two municipalities¹¹ are presented.
‘Újbuda 60+’

In Újbuda, 28.9% of the population is over the age of 60. The district, therefore, pays close attention to the involvement of the elderly at community and social levels. The Local Government and its institutions have organised the ‘Újbuda 60+’ programs since 2008. The program has now become an example of good practices, as it has become increasingly complex over the years and has met diverse demands. The program organisers have come to the conclusion that if the programs are broader, and the elderly can be better integrated into the organisation and planning, more elderly people can be involved.

The program aims to activate and involve the elderly into the life of the district, from the decision-making processes through the organisation of the programs to their activation on the community scene. Nowadays, the ‘Újbuda 60+’ programs have a separate program office, which is responsible for coordinating the programs, and events that can be attended by senior citizens are organised in the district almost every day. Cultural, leisure and sports facilities are available to everyone. Seniors who have the 60+ discount cards can visit these programs for one-third of the normal price. For the organisation of the programs, the local government uses its own resources and the funds from tenders like PRO-HEALTH 60+ (Tambor et al. 2016), Q-Ageing project, and Norwegian Grant: Caring City.

The ‘Nyíregyháza gives more...’ program

Nyíregyháza has been researching the well-being of the population of the city with the Faculty of Health at the University of Debrecen since 2008. The survey is conducted every two years, and the changes in the situation of the older population are analysed separately (Patyán 2010, 2012) (Patynán 2014b). The empirical

¹¹ More regional programmes are available at: https://www.unece.org/fileadmin/DAM/pau/age/country_rpts/2017/HUN_report.pdf.

information served as the basis of the city's Ageing Strategy. The 'Nyíregyháza gives more...' program did not specifically target the senior age group, although it had many program elements that older people could use.

- To promote the participation of the elderly in local decision-making mechanisms: the Council for Senior Policies started to work in the city in 2014. Local affairs involving older people are discussed with the participation of the management of the city.

- Lifelong Learning programs: The Senior Academy of Older People has been operating in Nyíregyháza since 2015. Its programs are organised by the University of Debrecen Faculty of Health. The presentations are about topics that the Council for Senior Policies proposes: healthy and successful ageing, lifestyle, leisure, art, etc.

- 'Move Nyíregyháza' is a program to promote physical activity. It matches physical activities to the daily life of the seniors in the following forms: Physical training prevents falls, Senior dance house, Osteoporosis prevention, Senior sports activities in the local sports hall, Spine – exercises and Mediball.

- Allowances: Social allowances are adjusted to the local situation and the income situation of the elderly within the scope of the local authority of the municipality.

- The development of an elderly-friendly environment: the development of an obstacle-free environment, the development of age-friendly squares and parks, and the development of public transport for elderly people.

- Reduced or free entrance fees to the theatre or spa.

The city provides programs to elderly people free of charge. As a result of its conscious urban policy, Nyíregyháza won the Elderly-Friendly City Award for the third time despite the fact it could not mobilise significant EU funding to implement the above programs.

3.8. Conclusions

Central and Eastern European countries, including Hungary, are facing serious challenges as a result of demographic changes. The different health status of the population, early retirement, and displacement from the labour market together with lower pensions, strengthens community responsibility in

this area. The study draws attention to the shortcomings of the development of conscious senior policies, the likelihood of them being realised and the strong dependence of the sector on EU funds and resources.

Without conscious and cross-sectoral strategic planning, the spirit of active ageing cannot provide lasting and sustainable security for older people, it cannot keep them active, and it cannot increase their social participation. This process lacks state co-ordination measures. The state reorganises many areas to its own competence with the aim of completing the tasks more cost-effectively. Municipal-level programs can achieve results sporadically and typically at the level of big cities, where these cities can acquire greater intellectual and material resources, in order to increase the country's results in these areas.

In many cases, the senior policy is subordinated to the guidelines of other sectors, such as the economic policy directives, which may exclude part of the target group from the opportunities that match their age. In the absence of adequate resources, sectoral ministries are unable to carry out effective programs, and their actions are blended into the 'best practices' of the European Union.

The senior policy of the government often aims to stabilise the situation of the target group primarily by creating social security for older people and by using these tools. A new approach is necessary. The first steps can already be seen, but without broader social consensus, it is difficult to comprehensively introduce it.

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4. Senior policy in Poland

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Abstract

Societies are aware of the need to take efforts to create conditions allowing all members to have longer, healthier and independent lives. The chapter describes the socio-political measures that national, regional, and local governments in Poland have implemented since 2008 in response to the challenges of population ageing. Although pension policy is considered separate from senior policy, the main solutions of Poland's reformed pension system are also presented because pension policy has a significant bearing on the living conditions of older people and the national labour market policy. The examples of specific solutions developed by regional and local governments in Poland in relation to senior policy were derived from the city and voivodeship of Łódź.

Keywords: national strategy for seniors, retirement policy, regional senior policy, ageing in Poland

4.1. Senior policy in Poland – an outline

Until 2012, when the senior policy became a topic of political debate and social dialogue at the national and local government levels and in the media, the situation of older people attracted interest insofar as it concerned social welfare, retirement and pension policy, labour policy, and age management in organisations. The first strategic

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document to notice the role of seniors in society was the *Raport o kapitale intelektualnym Polski* (Report on Intellectual Capital in Poland) of 2008, which was drawn up by the Prime Minister's Team of Strategic Advisors. In the same year, the Council of Ministers adopted the 'Program Solidarność Pokoleń. Działania dla zwiększenia aktywności zawodowej osób w wieku 50+' (Solidarity between Generations Programme – measures to increase the labour force participation of people aged 50+) as an instrument for increasing employment among people aged 50+.

The labour market activity of the ageing labour force was included in projects that were mostly funded through the Operational Programme Human Capital by the European Social Fund and national funds (e.g. the Labour Fund). For example, the EQUAL Community Initiative contributed financially to research projects on the employment of ageing workers, thus enabling the preparation of reports such as *Pracownicy po 45. roku życia wobec barier na rynku pracy* (Workers Aged 45+ (Urbaniak, eds. 2007)).

Naming 2012 the European Year for Active Ageing and Solidarity between Generations inspired the Polish authorities to promote healthy and active ageing in the country. The Senate of the Republic of Poland named 2012 the Year of Third-Age Universities (UTA), following which their number started to rise fast across the country.¹

Most UTAs are organised as associations, and their purpose is to provide older people with access to various educational and cultural activities through lectures and arts and cultural events. Following the popularity they enjoy among older people, especially women, they have been incorporated into official senior policies.

The senior policy in Poland is formulated by authorities at the central level (parliamentary and senate commissions, the Ministry of Family, Labour and Social Policy) and regional and local levels. Regional social policies that set strategic and operational goals for improving the living quality of older people were created as part of regional development plans as early as 2002 (Szatur-Jaworska 2016, p. 355). Specific measures are set out in programmes dedicated to

¹ One of the first UTAs in Poland was the Helena Kretz University of the Third Age in Łódź, which was established in 1979. By 2018, their number had risen to 640. Most of the students were aged 61–75 (71.9%), half of whom had secondary education; GUS (2019a), *Uniwersytety trzeciego wieku w Polsce w 2018 r.* (2019) (Universities of the Third Age in Poland in 2018), Informacje sygnałne 29.03.

older people or in special documents that explain regional senior policy, such as Wielkopolski Program na Rzecz Osób Starszych do 2020 roku (The Wielkopolska Programme for Older People 2020) (more in Urbaniak 2018). Examples of local programmes created by municipalities for elderly residents include Miejski Program Pomocy dla Osób Starszych i Niepełnosprawnych Siedemdziesiąt Plus (The City Assistance Programme for the Elderly and People with Disabilities 70+) in Katowice and the Elbląski Program na Rzecz Osób Starszych 2014–2020+ ‘Jesień życia ma barwy lata’ (The Elbląg Programme for the Elderly 2014–2020+ ‘Autumn has the Colours of Summer’).

The Polish Parliament’s interest in the issues of older citizens resulted in the establishment of the Parliamentary Team for the Elderly. Its activities accelerated legislative work on solutions aimed at assisting older people. Other significant events were the appointment of the standing Senior Policy Commission responsible for shaping the state’s policy on older citizens and the presentation of an overview of the current situation of seniors in Poland at its first sitting on 28 May 2014. The Senate equivalent is the Family and Senior and Social Policy Commission.

In 2013, the Council for Senior Policy was appointed as a consultative and advisory body to the Minister of Labour and Social Policy (now the Minister of Family, Labour and Social Policy). Its 30 members represent non-governmental organisations, labour unions, public entities, and the academic community. The Council actively assisted the government in setting its objectives for senior policy for the years 2014–2020 and until the year 2030.

Before the national policy on seniors was formulated, population ageing was an element of social policy. The social policy on ageing conducted between the 1970s and 2013 had many weaknesses that made it less effective in achieving its main goal – a decent standard of living for ageing people (Szatur-Jaworska 2016a, p. 126). Some of the criticisms against it are still true, despite the government’s efforts to improve it by specifying goals and tasks for successive years until 2030.

Among the main shortcomings of Poland’s social policy on ageing raised by its critics are:

- a lack of solutions that enable the socio-economic environment to be adapted to the ongoing demographic changes based on the cooperation of government ministries responsible for different

aspects of the social policy, such as healthcare, social assistance, education and housing. Because no coherent vision of the senior policy measures has been created, they are frequently applied in a chaotic and uncoordinated manner. This results in emergencies being allocated disproportionate resources and in a lack of systemic solutions for persistently neglected areas. For example, geriatric care suffers from a shortage of trained medical personnel (Bień 2018).

- public debate practically ignoring issues of population ageing. The political debate and the media took note of them only in the late 1990s, but even then more attention was paid to identifying the dominant interest groups than to working out solutions that would be beneficial to the public (Szatur-Jaworska 2016a, p. 127). Demographic changes have for a long time been perceived in terms of the looming 'grey tsunami' rather than an opportunity to promote the development of the silver economy (Urbaniak 2016a);

- citizens' limited knowledge of healthy and active ageing and the inability of non-expert journalists to explain the intentions of experts and decision-makers (Szatur-Jaworska 2016a p. 127) mean that the public does not have confidence in the changes they propose and stereotypes persist regarding the needs and behaviours of older people;

- insufficient promotion and communication of the government's vision of the senior policy increases uncertainty among the public as to the course of the projected changes and prompts people to adopt the 'grab an opportunity before it's too late', as the pension system reforms have shown.

In 2015, a survey of government and municipal decision-makers and officials was conducted to determine how they viewed the role of central and local authorities in the senior care system. In the respondents' opinions, the system should be primarily based on family care as neither central nor local authorities could afford to fund the institutionalised care. While the opinions are consistent with the 'ageing-in-place' concept, which emphasises the role of family care, families with dependent members are largely left to their own resources. This naturally leads us to a question about what the family support system should be like and how to give care to older people living alone without families to care for them, especially that the number of such people is growing for demographic reasons and due to the emigration of their younger relatives. The survey respondents proposed establishing a special ministry, such as the

German Bundesministerium für Familie, Senioren, Frauen und Jugend, which could coordinate the activities of several ministries in the area of public welfare (e.g. the Ministry of Family, Labour and Social Policy, the Ministry of Health, and the Ministry of Finance) (Szweda-Lewandowska 2016, p. 129).

The strategic directions for the development of senior policy in Poland are set out in two fundamental documents and a parliamentary statute:

- Założenia Długofalowej Polityki Senioralnej w Polsce na lata 2014–2020 (Long-term Senior Policy in Poland for the years 2014–2020) adopted by the Council of Ministers on 24 Dec. 2013 (Uchwała nr 238 Rady Ministrów, M. P. z 2014 r.),
- the Act on the Elderly of 11 Sept. 2015 (Ustawa z dnia 11 września 2015, Dz.U. z 2015 r.),
- 'Polityka społeczna wobec osób starszych do 2030. BEZPIECZEŃSTWO – UCZESTNICTWO – SOLIDARNOŚĆ' (Social Policy Towards Older Persons 2030. Security – Participation – Solidarity) adopted by the Council of Ministers on 26 Oct. 2018 (Uchwała nr 161 Rady Ministrów, M.P. z 2018 r.).

The main areas covered by the first of the documents include:

1) Health and independence: a) the development of medical services for the elderly; b) health promotion and prevention; c) the development of social and care services tailored to the needs of the elderly; d) the prevention of abuse of the elderly; e/ elderly-friendly housing and external spaces.

2) Professional activity: a) promotion of employment for older people; b) creating working environments enabling older workers to stay in employment until retirement; c) the promotion of education among older workers and adapting their training programmes to labour market demands.

3) The educational, social and cultural activity of elderly people, the development of voluntary services of elderly people.

4) The development of the silver economy and ICT solutions for the benefit of an ageing society.

5) Measures strengthening intergenerational solidarity as a social, political, labour market and cultural norm.

In accordance with the Act of 11 Sept. 2015 on elderly persons, the implementation of the social policy on elderly people must be monitored by competent public administration bodies and agencies.

In 2016, the Ministry of Family, Labour and Social Policy published *Informacja o sytuacji osób starszych w Polsce za rok 2015* (Information on the situation of elderly persons in Poland in 2015), which was used to formulate a new strategy for seniors² to the year 2030 (bip.kprm.gov.pl/download/75/43399/InformacjaosytuacjiosobstarszychwPolscezarok2015.pdf). The new strategy was released in 2018 as part of the 'Strategia na rzecz Odpowiedzialnego Rozwoju do roku 2020' (z perspektywą do 2030) (Strategy for Responsible Development till 2020) (<https://www.gov.pl/web/fundusze-regiony/informacje-o-strategii-na-rzecz-odpowiedzialnego-rozwoju>). Its main objectives include:

- 1) Shaping a positive perception of old age in society.
- 2) Participation in social life and support for all forms of civic, social, cultural, artistic, sports and religious activities.
- 3) Creating conditions which enable the elderly to use their potential as active participants of economic life and the labour market, adapted to their psychophysical abilities and family situation.
- 4) Promoting health, preventing diseases, access to diagnostics, treatment and rehabilitation.
- 5) Increasing physical security – preventing violence and neglect of the elderly.
- 6) Creating conditions for intergenerational solidarity and integration.
- 7) Education for old age (care and medical staff), until old age (the entire society), by old age (from the youngest generation), and education in old age (older people).

Special attention in the strategy has been given to older, dependent people. The following measures to increase their independence have been proposed:

- 1) Facilitating access to services which strengthen independence and the adaptation of the living environment to the functional capabilities of dependent people.
- 2) Ensuring optimal access to health, rehabilitation and care services adapted to the needs of older dependent people.
- 3) Establishing a network of environmental and institutional services focused on the needs of elderly, dependent people.

² *Polityka społeczna wobec osób starszych do 2030. BEZPIECZEŃSTWO – UCZESTNICTWO – SOLIDARNOŚĆ* (Social Policy Towards the Older Persons 2030. Security – Participation – Solidarity).

4) Establishing a public system of support for informal carers of older, dependent people.

The action areas indicated by the 2014–2020 strategy and the 2030 strategy are basically similar. The main differences between them are that the second strategy omits ‘the silver economy’ and emphasises the need to increase the accountability of organisations involved in its implementation by having them prepare detailed annual action plans and regularly report on their outcomes. It is designed to ensure that the strategy will not remain a collection of empty slogans.

The 2030 strategy was criticised by the Human Rights Defender’s Commission of Experts on the Elderly for failing to indicate how the projected measures will be funded and for not involving seniors in its preparation (for the palpable paternalism in handling their problems). The Commission also stressed the need for a consistent government policy, effective cooperation of different ministries, and the coordination of senior policy and the evaluation of its outcomes.

In formulating a senior policy, the definition of an elderly person plays a key role. The Polish act on the elderly defines them as people who attained the age of 60 years. The first official document in Poland to have observed that the threshold of 60 years is not quite consistent with the functional age or the economic age³ is the 2030 strategy for seniors. It is quite certain that in the long term, the threshold separating the middle-aged population from the elderly will have to be redefined. The change seems unavoidable because already today, many business people, artists, and politicians, e.g., the new President of the European Commission, Ursula von der Leyen, are still very active in public life, and are not deemed old despite attaining the age of 60. It is perhaps interesting to note that some government documents in Poland use a higher threshold of old age than 60. For instance, in the Ministry of Health’s programme ‘Leki 75+’ (‘Medicines 75+’) offering free-of-charge drugs to seniors, the eligibility age was set at 75.

The strategy ‘Social policy Towards the Older Persons 2030’ shows the government’s priorities in improving the situation of older citizens, but also bring to light the problem of discrimination

³ The economic age is understood as the period of life when a person can work and earn income. It should not be viewed as an equivalent of working age because it is longer for people persons who continue employment after retirement.

against older people (ageism), their disadvantaged position in the labour market, and the humiliation and violence they sometimes experience.

4.2. Between the central and local governments' activities

In 2012, the Ministry of Labour and Social Policy (MLSP) created the Senior Policy Department which was to

define and develop areas of activities directed to seniors and the conditions prerequisite to the improvement of the support system for seniors, carry out tasks falling within the area of active ageing and engage in other forms of within- and between-generational cooperation related to a broadly understood senior policy, while monitoring the extent and manner of implementing the pertinent solutions (www.gov.pl/web/rodzina/departament-polityki-senioralnej, accessed: 18 Aug. 2019).

In the same year, Rządowy Program na rzecz Aktywności Społecznej Osób Starszych (ASOS) (Government Programme for Senior Citizens Social Activity) was established as a vehicle for funding projects on a competitive basis submitted by seniors' organisations. The 2019 edition of the programme had a budget of PLN 40m (€9.2m) and four priority areas: (I) education for older people, (II) social activity promoting integration within and between generations, (III) the social participation of older people, and (IV) social services for older people. Of 1,346 project proposals submitted to the programme, 300 related to priorities 1 and 2 were awarded funding (http://senior.gov.pl/program_asos).

In 2014, the then government launched the 'Senior-WIGOR' programme 2015–2020, yet another initiative aimed at improving the well-being of senior citizens and at increasing their participation in social life. The next government renamed it the Multiannual Programme 'Senior+' 2015–2020, but its goals have remained the same. The programme is intended for local governments with social welfare strategies providing for the establishment of care facilities for older residents and those where such facilities are not available. It

offers one-off grants that can be used to establish or equip a facility, fund the needs of the existing facilities, or develop a network of Senior+ Centres and Senior Clubs+. By the end of 2018, local authorities had established 226 Senior+ Centres and 274 Senior+ Clubs.

The Senior+ Clubs are facilities administered by municipality-run welfare centres, which offer free socialisation and integration activities to occupationally inactive people aged 60+. The Senior+ Centres are intended for the same group of beneficiaries (priority is given to people who live alone), who are offered free assistance and support in handling daily problems, a hot meal (sometimes two) for a small charge, and the possibility of participating in sports and recreational and educational activities every weekday from morning to afternoon. Some centres have a transportation service for people with motor disabilities and those who live far from them.

The rising demand for at-home care services prompted the Ministry of Family, Labour and Social Policy to create a new welfare programme 'Opieka 75+' (Care 75+) intended for municipalities which struggle financially to deliver services,⁴ including specialist services, to people aged 75+. The task is especially challenging for small municipalities with populations up to 40,000 and a per-capita income below the national average. The programme's funding can be used to purchase additional hours of services for their current (or last year's) users, or to purchase care services for new users. The programme is an opportunity for local governments to improve the safety, security and living conditions of older people.

In the assessment of municipalities' and counties' senior policies that the Supreme Audit Chamber (SAC) conducted between 7 May and 27 August 2015, special focus was given to the effectiveness of assistance for older residents. The SAC's report showed that almost 90% of people who needed care in residential nursing centres for reasons such as old age, disease, or disability were granted it. The SAC also noted that local governments were not willing to establish locally-run care facilities for people with special needs, sheltered

⁴ Polish law provides that the organisation and delivery of care services is a local authorities' own task that they have to finance from their own budgets.

flats, family care homes, or daily care homes as an alternative to the state welfare centres (www.nik.gov.pl).

An interesting example of innovative services for older people is a post-industrial structure from the 19th c. that the Łódź authorities thoroughly modernised and converted into a residential building to be occupied by people with children, young and old people, and people with disabilities. The model of several generations living together has been successfully tested in several countries, e.g., Germany, the Netherlands, and Switzerland.

4.3. The Human Rights Defender's activities on behalf of older people

The Human Rights Defender (HRD) is an independent institution which was established to protect the freedoms and rights, including the principle of equal treatment, of all people and citizens laid down in the Constitution of the Republic of Poland and other laws. The HRD's responsibilities towards older people include giving opinions on how the drafts of programmes and specific measures can be improved so that they respect their rights.

The HRD has established a vehicle called *Za starość naszą i waszą – akcja RPO* (For your and our old age) for presenting expert opinions on the degree of protection of older people's rights and for proposing specific measures to improve it (more at <https://www.rpo.gov.pl/>).

The HRD's awareness of the need that older people are supported within their communities resulted in the publication *System wsparcia osób starszych w środowisku zamieszkania* (A support system for older people ageing in the local community). The HRD also lent its auspices to the preparation of the monograph *Strategies of action in an ageing society. Theses and recommendations*, which provides a review of implemented and recommended measures on behalf of active and healthy ageing.

The Expert Commission on the Elderly was established by the HRD in 2011 to prepare the opinions on the government's senior policy, to propose systemic changes, to indicate major infringements of seniors' human rights which require intervention from the HRD, and to prepare publications for seniors or the

organisation and institutions that assist them. By way of illustration, the Commission has drawn attention to the fact that the shortage of geriatric wards in Polish hospitals hinders older people's access to medical care. In 2017, Poland had 1 311 geriatric beds for the whole population aged 60/65+ year, meaning that the ratio between available beds and potential patients was 1 to 6000. The demographically oldest voivodeship of Łódź only had 55 beds for geriatric patients, and in two voivodeships, there were none at all. Neither first-level hospitals nor second-level hospitals offer geriatric care, even though geriatrics was put on the Ministry of Health's list of priority medical specialisations in 2009 (Bień 2018).

The HRD and the Expert Commission on the Elderly are of the opinion that Poland should join the United Nations Open-Ended Working Group on Ageing, which has been preparing the Convention on the Rights of Older Persons since 2010. Each year the group works on a different subject. In 2019, it is older people's right to work and access the labour market. The HRD and the Commission believe that Poland's participation in the group would increase Poles' awareness of the rights of older people and would induce the government to take more effective action against ageism.

The HRD supports Polish seniors in their efforts to establish formal bodies representing and defending their interests, such as the Civic Parliament of Senior Citizens, which is described as

a non-partisan and religiously and ideologically neutral national body representing the interests of 9 million Polish seniors. The CPSC is unique as a form of older people's activity and participation in the creation of a civic society that allows them to propose new directions for senior policy and enter in a constructive dialogue with public actors on improving the situation of seniors and ensuring that they have decent lives (<http://parlamentsseniorow.pl/>, accessed: 10 Sept. 2019).

The inaugural sitting of the CPSC was held in 2015 in the Sitting Room of the Lower Chamber of the Polish Parliament (the Sejm). It was the crowning of more than decade-long efforts of Polish seniors' to integrate their community.

4.4. The government's policy towards older people in the labour market

The government policy on older workers is a distinct area of the senior policy. Its purpose is to influence the labour market activity of adults and older people and to ensure that they can safely continue employment until the mandatory retirement age or beyond if they so wish. It has been observed that even workers as young as 45 are faced with employment barriers and meet with reluctance from employers caused by prejudices and negative age stereotyping (ageism).

The choice between a policy aimed at retaining older workers in the labour market and a policy encouraging them to retire is frequently determined by the availability of young workers and the shortage or oversupply of some occupations. For instance, a shortage of specialist physicians and nurses in the healthcare system may result in a policy that encourages them to continue employment beyond retirement age.

In developing its policy on older workers, the government considers the overall condition of the labour market and its other policies, mainly the population, retirement, social security, income, welfare, and health and education policies. The supply of older workers in the labour market can be regulated by the government by:

- adjusting the mandatory retirement age (upward or downward to respectively increase or decrease the supply),
- tightening or loosening the rules of retirement,
- increasing or reducing the number of exceptions determining the eligibility for early retirement,
- tightening or loosening the eligibility criteria for disability pensions,
- allowing or banning working and drawing a pension at the same time (pensioners may decide for or against taking a job depending on whether their pensions will be reduced or suspended as a result), change tax policy (workers paying lower income tax after retirement, tax privileges for employers hiring unemployed or economically inactive persons aged 50+),
- encouraging public administration bodies to make wider use of teleworking arrangements in order to increase employment among people aged 50+,

- restricting or promoting voluntary work and work for non-governmental organisations that allow people to acquire skills useful in paid jobs,

- increasing or reducing the number of labour market programmes for unemployed people aged 50+ and potential employers.

The government can also influence the skills and qualifications of older workers by:

- promoting life-long learning,
- increasing the number of courses intended for unemployed workers, including people aged 50+;
- promoting digital skills courses among the oldest citizens,
- certifying skills that people have acquired through informal and incidental education.

It is important to note that the above measures take time to produce effects and benefit successive generations reaching the retirement age (Urbaniak 2016b).

In December 2013, the Polish government adopted Program Solidarność pokoleń. Działania na rzecz zwiększenia aktywności zawodowej osób w wieku 50+ (Solidarity of Generations. Activities to increase the economic activity of people aged 50+), the first government programme aimed at increasing the labour market activity of older people. The programme encouraged employers to implement age-management tools and labour offices to offer training and retraining courses for older workers so that they could stay in employment. The wider intention behind the programme was to lay the ground for the projected reform that would increase the mandatory retirement age.

Emphasising the need to create incentives encouraging older workers to stay in the labour market, the new strategy 2030 ('Social Policy Towards Older People 2030. Security – Participation – Solidarity') does not provide for any specific instruments that could be used to this end (e.g. lower taxation on pensioners' wages). The very indication of mentoring, coaching, and tutoring as forms of employment suitable for older people and encouraging the social economy entities to recruit older workers and offer them flexi-working arrangements may not bring the expected results in the long term. Another weakness of the strategy is that its vision of what older people need appears to be very conservative when contrasted with the challenges of the economy 4.0. A question

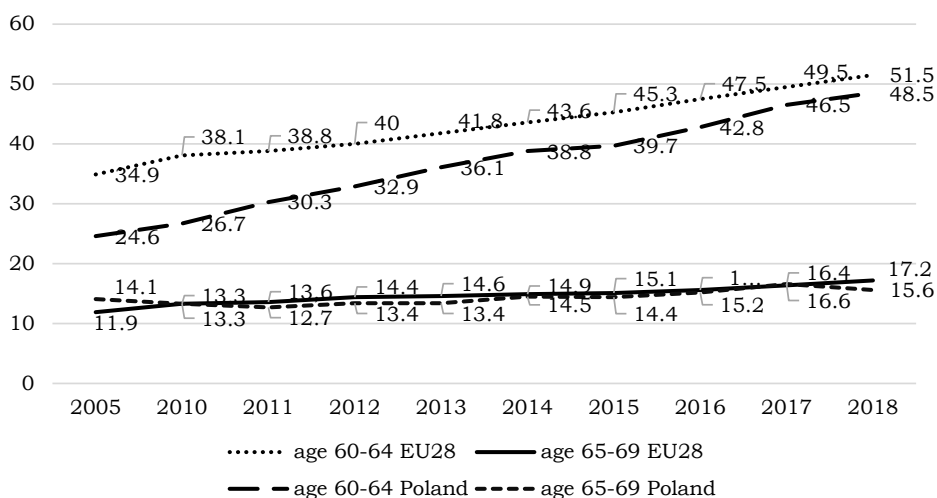
arises, therefore, about whether older workers will find their place in the new reality.

The decision about whether one should retire or continue employment past retirement age is influenced by many factors (for instance, Urbaniak 2016b, Chybalski 2018). A reflection of this is the value of the index: employment rate for people aged 50+. For many years, Poland's employment rate for people of pre-retirement age has been much lower than the EU average (Graphs 1 and 2). In 2012, the Polish government decided to change the retirement age by raising it from 60 years (women) and 65 years (men) to 67 years for all workers, which was to be mandatory for women in 2020 and for men in 2040. The early retirement option was retained for workers born before 1 January 1949, but its availability was to be restricted over time. As might be expected, the reform met with reluctance, as the public realised that the reform delayed their steady pension income⁵ into the distant future and made them face an unstable labour market with high rates of unemployment, especially among older people. The retirement age reform became a handy political argument during the 2015 election, which was won by the biggest opposition party, largely on the promise that it would bring back the previous retirement ages of 60 (women) and 65 (men) years. The initiative was welcomed by labour unions but almost all employers' organisations (the exception was Pracodawcy RP (Employers of Poland) were against it.

Workers of pre-retirement age are protected by the Labour Code. Article 39 of the Code prohibits an employer from terminating an employment contract with a worker who is four years short of retirement age if, on attaining the age, the worker becomes eligible for a pension. The article does not apply to workers who refuse the employer's offer of new working and pay conditions.

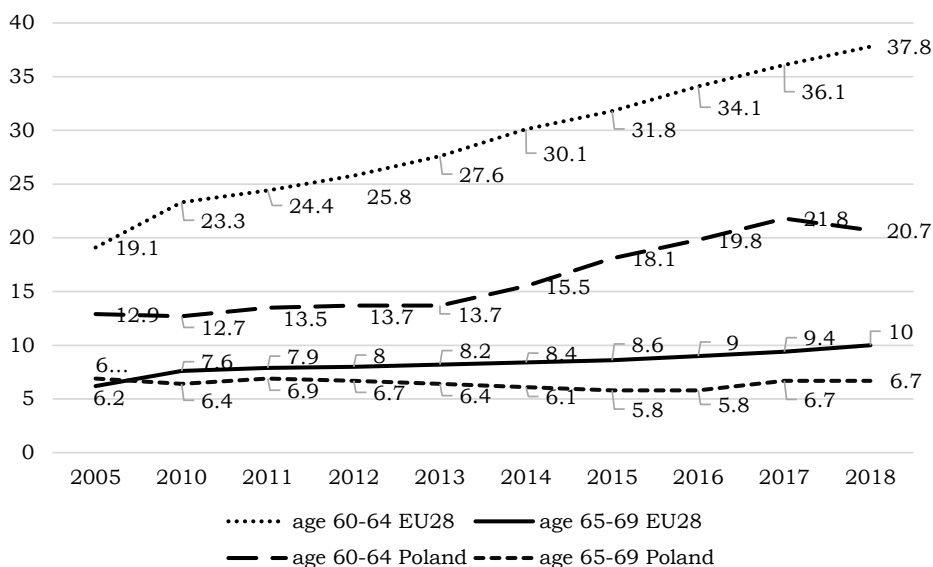
Both graphs show that Polish employment rates for older people, especially women, are below the EU average. Notably, despite the fall in the unemployment rate for women aged 60–64 in 2018 (caused by the reduction of the retirement age, etc.), the rate was still higher than in the period when the retirement age was being gradually increased following the 2012 reform.

⁵ The reluctance was all the more understandable since the income replacement rate in 2012 was quite high, amounting to around 65%.



Graph 1. Employment rates for men aged 60–64 and 65–69 in EU28 and Poland, 2005–2018 (%)

Source: based on EUROSTAT data (online data code: lfsa_ergan), <https://ec.europa.eu/eurostat/data/database> (accessed: 20 Jul. 2019).



Graph 2. Employment rates for women aged 60–64 and 65–69 in EU28 and Poland, 2005–2018 (%)

Source: based on EUROSTAT data (online data code: lfsa_ergan), <https://ec.europa.eu/eurostat/data/database> (accessed: 20 Jul. 2019).

4.5. Retirement policy

As the living standards of the present and future generations of pensioners largely depend on the country's retirement system, the discussion of the senior policy needs to be extended to the basic information about the shape and development of the retirement policy in Poland. The Polish retirement system is relatively complex, not only for historical reasons but also because of frequent reforms that change its objectives and the pension saving rules. As well as increasing the system's complexity, the reforms also cause anxiety among workers about whether the system in force when they retire will pay them decent pensions.

The retirement system in Poland consists of three parallel pension systems for different categories of workers. Most workers are required to pay defined contributions to the non-agricultural (general) pension system administered by a state agency – the Social Insurance Institution (ZUS). The other two pensions systems are the agricultural social security system (for farmers), which is partially funded by the budget, and a special non-contributory system for uniformed personnel (the military, police, etc.).

The amount of pension an employee will receive from the general pension system depends on the balance of their contributions. A pension is calculated by dividing the total of (indexed) contributions (plus the starting capital in the case of workers who entered the labour force before 1999) by the average number of years a person is expected to live after retirement. The information about the further life expectancy of men and women is published in annual life expectancy tables. This solution is meant to encourage workers to postpone retirement. At present, pension contributions are mandatory for all types of employment arrangements and providers (employment contracts, contracts of mandate, entrepreneurs). A contribution is always 19.52% of the base amount, which varies depending on the employment relationship.

Poland's pension system was redefined with the introduction of a three-pillar system in 1999. The first pillar is a pay-as-you-go system funded by employee contributions, while the second and third pillars are funded pensions schemes. Participation in the first two pillars is mandatory for all employees. The contributions employees pay to the first pillar are credited to their personal accounts

and pooled to pay pensions to the current pensioners. The solution is widely used by pension systems based on intergenerational and social solidarity. Employees' savings are indexed by the rate of economic growth (its value cannot be lower than the rate of inflation).

The second pillar is funded from part of the employees' contributions that, before 1999, were all used to finance current pensions. The contributions employees pay to the second pillar are credited to their personal accounts in the open pension fund (OFE) and invested in the capital market. Participation in the OFE was made mandatory for all employees born after 31 December 1968, but older employees were allowed to choose between paying the whole amount of the contribution to ZUS or dividing it between ZUS and the OFE. The 2011 reform of the OFE system reduced the amount of contributions from 7.3 to 2.3% of income (Jarocki 2017, p. 146). The next two reforms of the OFE were carried out in 2013 and 2014. Following the 2014 reform, 51.5% of the funds that the OFE had mostly invested in treasury bonds were transferred to ZUS, thus increasing the first pillar's budget (Jarocki 2017). The value of the OFE accounts is estimated today at PLN162.3m (€37.6m).⁶

The second pillar, as we know it today, will probably disappear soon because of government plans to liquidate the OFE. Insured employees will be able to choose between transferring their savings to personal pension accounts in the third pillar or to the first pillar (administered by ZUS). The first decision involves paying an upfront transfer fee of 15% (a tax on the right to keep funds in a capital account). Employees choosing the second option will pay personal income tax on their income. The plan has met with strong criticism from the opposition parties, which have called it the expropriation of employees' money. Depending on which option prevails, the government will be able to reduce the budget deficit (because of the ZUS budget receiving extra funding), or it will use the transfer fees to fund the rising costs of its social projects.

The third pillar was designed as a voluntary system supplementing pillars I and II. The intention behind it was to make people aware that their future pensions would depend on their foresight and savings. The third pillar has been provided with three instruments: *Pracownicze*

⁶ The PLN amounts were converted into euros using the average NBP exchange rate of PLN 4.3194 on 07 Aug. 2019.

Plany Emerytalne (PPE; the Employee Pension Plans), Indywidualne Konta Emerytalne (Personal Pension Accounts), and Indywidualne Konta Zabezpieczenia Emerytalnego (IKZE; Individual Retirement Security Account; since 2011). The third pillar is not very popular (Jarocki 2017, p. 151) and has relatively few users. Because in 2016 there were only 1120 employers in Poland who had implemented an Employee Pension Plan, the third pillar cannot be treated as a major source of extra income for the retired population.

In order to tackle the problem, the government has initiated a new reform of the pension system, which started to be gradually implemented in 2019. According to the reform, employers and employees will pay one more mandatory pension contribution to Pracownicze Plany Kapitałowe (PPK; Employee Capital Plans), which are private, long-term saving plans (with inheritable savings) managed by investment fund companies (TFI). The new system is intended to increase the financial security of Poles. Despite its mandatory nature, employees can cancel their participation by making a declaration of withdrawal, with the option of re-applying to it after four years. According to the reform's schedule, employers with more than 250 workers are due to enter the PPK after 1 July 2019, small- and medium-sized organisations and general government entities by mid-2020, and all other employers after 1 January 2021. The weak point of the PPK is that they will increase employers' labour costs and will reduce workers' net wages.

The PPK funds will come from monthly contributions of PLN 240 (€56) paid by employees and employers. The government will make a contribution in the same amount once a year (in monthly terms, this will be less than €5 per month). The government has undertaken to make a 'welcome payment' of PLN 250 (€58 euro) to each new account. The base contribution to be paid by an employee (in addition to pay-as-you-go contributions to the first pillar) has been set at the level of 2% of the employee's gross wage, but it can be raised to 4%. The employer's base contribution is 1.5% of an employee's gross wage, but it, too, can be raised, to 2.5%. Regardless of their gender and job, all employees will pay contributions until the age of 60, when they will be able to claim their savings. One-fourth of the saved amount will be paid out forthwith and the remaining three-fourths in at least 120 monthly instalments, i.e. over a period of 10 years. The law allows longer saving periods and

provides for cases when funds can be withdrawn before the age of 60 years. The main difference between the PPK and the OFE is that the PPK participants retain private ownership of their savings and the right to decide about them. Financial simulations show that participation in the PPK is more profitable than trying to save on one's own (Gazeta Prawna.pl 2019).

Poland's pension policy has until recently been focused on extending employees' working lives, so it was similar to the policies of developed countries which were faced with population ageing. Accordingly, the Polish government raised the mandatory retirement age to retain older workers in employment in order to compensate for the demographically-determined decline in the number of new labour market entrants. The law of 1 January 2013 established a gradual increase of the retirement age from 60 (women) and 65 (men) to 67 for both genders, but in 2017 it was reversed, and the previous retirement ages were restored.

The mandatory retirement age in post-war Poland has always been 60 for women and 65 for men. However, depending on their job, the length of service, the labour market condition or other circumstances, the law allowed some workers to exercise the early retirement option and leave the labour force usually five years before the retirement age.

The restoration of the earlier mandatory ages of 60 and 65 (effective from 1 October 2017), which was a pre-election pledge by the now ruling party, has been accompanied by a number of social transfers to pensioners, older people, and selected groups of society. These are:

- a parental allowance (available from March 2019) granted by the ZUS president to mothers or fathers who turned 61 (women) or 66 (men) and who raised four children (whether natural and fostered), and who have no income or whose old-age pensions or disability pensions are lower than the minimum pension; the benefit is known as 'parental pension', 'maternal pension', or 'Mama 4 Plus',
- 'Pension+' (widely termed the 13th old-age/disability pension), i.e. a lump sum benefit of PLN 1100 per person (ca. PLN 888 net of tax, i.e. €205.5) that the government paid in 2019 to 9.8m citizens (ca. 6,960,000 old-age pensioners and 2,620,000 disability pensioners, including 282,000 people with social pensions). The total value of the transfer was PLN 10.8bn (€2.5bn).

- a monthly benefit called ‘500+ for old-age pensioners’ who are unable to live independently and have an income below a specific threshold; the number of eligible applicants is estimated at 850,000. The benefit will be available from October 2019.

The discussion of changes in the needs of the Polish retirement system involves the dilemma of whether ageing workers should be retained in the labour market or allowed to retire, which is not easy to resolve. One problem is that the high replacement rate and the increasing life expectancy in Poland (between 1950 and 2013, it increased from 56.1 to 73.1 years for men, and from 61.7 to 81.1 for women – Russel 2016, p. 179) make the government uncertain about whether the pension system will have enough funding to secure decent pensions without raising the mandatory retirement age. The decision may not be necessary as projections show that the future income replacement rate in Poland will be low (as will the pensioners’ standard of living). The awareness of this may encourage older workers to postpone retirement.

The OECD data show that in 2017, Poland had a gross pension replacement rate for men by earnings⁷ from mandatory public pension schemes (excluding private schemes) of 31.6% (percentage of individual earnings, average earner), which ranked it last among 41 OECD countries. The Hungarian rate was 58.7%.⁸ (OECD 2018). Poland is one of 8 EU countries (with Austria, Finland, Germany, Hungary, Italy, Spain, Sweden) that do not have preferential pension replacement rates for low earners. Most OECD countries protect low-income workers from old-age poverty by providing higher replacement rates for them than for average worker earners. The average gross pension replacement rate for all Polish pensioners retiring at the age of 67 after the reform was estimated at 43.1% for all pensioners (OECD 2015, pp. 138–139). Unfortunately, the successive reforms of the pension system do not provide for special

⁷ The gross replacement rate is defined as gross pension entitlement divided by gross pre-retirement earnings. It is a measure of how effectively a pension system provides income during retirement to replace earnings, the main source of income prior to retirement, <https://stats.oecd.org/Index.aspx?DataSetCode=PAG> (accessed: 26 Sept. 2019).

⁸ Iceland’s high employment rates among older people and the phenomenon of late retirement are probably due to the gross pension replacement rate from the mandatory private pension scheme of 65.8% (the mandatory public scheme only pays 3.2%).

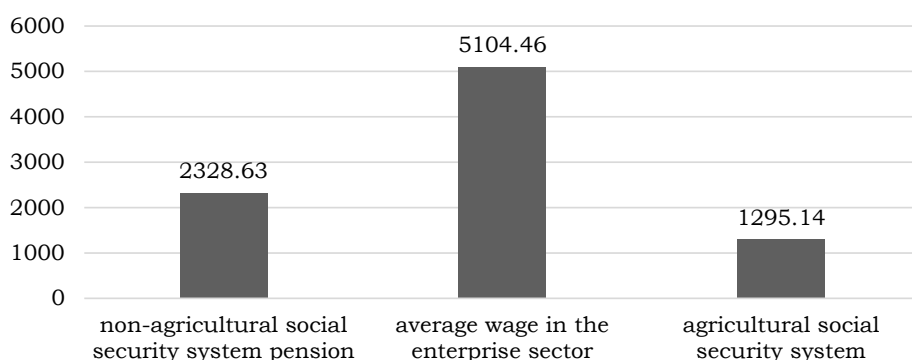
treatment of workers who earned low or minimum wages, meaning that their financial situation will deteriorate after retirement.

Changes in the retirement system also need to be considered in a wider context of the influence on businesses' interest in implementing state-of-the-art technologies as a way of reducing the burden of social insurance increasing labour costs. An alternative to raising the retirement age is modernising production processes and replacing human labour with hi-tech digital technologies and artificial intelligence systems, which is already happening in developed countries. However, that solution would require that workers of all ages wishing to stay in the labour market should take intensive training to align their knowledge and skills with new workplace requirements.

Unfortunately, the EU cohesion countries are affected by a structural gap in adjustment to changing technology and skill requirements, aggravated by outward migration. In the survey by the European Investment Bank (2018, p. 9), 77% of firms pointed to the limited availability of high-skilled specialists as a major obstacle to new investment projects. In Poland, the limited use of advanced digital technologies coincides with the insufficient availability of high-skilled specialists and workers who could do simple, manual jobs which are too strenuous to be done by older workers.

4.6. Old-age and disability pensions in Poland in 2019

In mid-2019, Poland's population of old-age and disability pensioners was estimated at around 9,265,000, 87.9% of whom were insured by the non-agricultural (general) social security system and 12.1% by the agricultural social security system (GUS 2019, p. 22). As can be seen in Graph 3, in June 2019, the average monthly gross retirement and other pensions paid by the first of the systems constituted 45.6% of the average monthly gross wage in the enterprise sector. From June 2018, pensions and wages increased by 4.7% and 5.3%, respectively, meaning that the financial situation of old-age and disability pensioners improved less than that of workers. The amount of pension (old-age and disability) paid by the agricultural social security system increased by 6.1% and exceeded half of the pensions paid by the non-agricultural social security system.



Graph 3. The average amounts of monthly gross retirement and other pensions paid by the non-agricultural social security system and agricultural social security system in relation to the average gross wage in the enterprise sector in Poland (PLN, June 2019)

Source: author's own elaboration based on GUS (2019b), *Sytuacja społeczno-gospodarcza kraju w I półroczu 2019* (Socio-economic situation in the country in the first six months of 2019), Warszawa, p. 22, and ZUS 2019a.

Despite the increasing financial polarization between Polish old age and disability pensioners, the ZUS Department of Statistics and Actuarial Forecast indicates that income inequalities in this population are still smaller compared with the working-age population (ZUS 2019a).

One of the problems that the pension system has yet to solve is very low benefits (widely called the 'penny pensions') paid by the Pension Insurance Fund to people who are not fully eligible for the minimum pension.

A pension is adjusted upwards to the level of the minimum pension if the amount due to a retiring worker is smaller than the minimum pension. To be eligible for it, a worker must have 25 (men) or 20 (women) pensionable years, and the number of non-pensionable years (related to parental leave, etc.) may not exceed 1/3 of the mandatory pensionable period. Since 1 March 2019, the minimum pension in Poland has been PLN 1,100 (PLN 934.6 net, i.e. €216)⁹. The minimum pension and other pensions are indexed every year based on the real

⁹ For the sake of comparison, since 1 Jan. 2019, the minimum wage has been PLN 2,250 (PLN 1,634 net, i.e., around €379), which constitutes ca. 47% of the average wage in the national economy.

wage growth rate and the rate of inflation. Also in 2019, a minimum rise in pensions of PLN 70 was paid to 70.7% of pensioners.

The aforementioned ‘penny pensions’ (lower than the minimum pension) are paid to workers who do not have the prescribed number of pensionable years. For instance, the pension of a 62-year-old woman who has only worked one day in her life is 2 groszy (less than €0.01). (<https://tvn24bis.pl/z-kraju,74/emerytury-w-polsce-rzecznik-zus-o-groszowych-swiadczeniach,920266.html>). In December 2018, penny pensions were paid to 218,800 pensioners (85.8% of them were women). In the space of 7 years between December 2011 and December 2018, the number of ‘penny pensioners’ increased more than ninefold, and their share rose from 4.2% to 8.5% of the total number of pensioners (ZUS 2019). Although the penny pensioners’ share of all pensioners is not significant, their number is growing fast: between March 2018 and March 2019, the number of pensioners with pensions up to PLN 500 (ca. €116) rose by 31.3%. This increases the pressure on social welfare services that need to ensure that older people have decent living conditions.

A natural consequence of the increasing life expectancy in Poland is the larger number of people who reach one hundred years old (in March 2019, there were 1,900 of them on the ZUS register, of whom 84% were women). The Polish one-hundred-olds are entitled to a special honorary pension called the EDWS, which is a supplement to the regular old-age or disability pension (ZUS 2019a). Because the EDWS is not subject to indexation, its current beneficiaries will always receive the same amount of PLN 4,003.88 gross (ca. €927), which was set on 1 March 2019.

Despite the numerous attempts that have been made in recent years to improve the Polish pension system, it still has areas that need addressing, such as:

- the citizen’s pension – despite calls to institute an equal basic pension for all citizens, the idea is not likely to materialize, as it is criticised for releasing people from the responsibility for their future (Koczur 2017, p. 12);
- education about social insurance and the pension system for citizens – to be able to make informed retirement decisions, people should know how to use the pension calculator to calculate their first pension from the Social Insurance Fund (ZUS) depending on the age at which they retire, etc.;

- working and drawing a pension – this is still a controversial issue; there is the dilemma of whether early pensioners should be allowed to work and draw pensions under certain conditions regulating the suspension of pensions, as it is now, or whether a pension should be suspended with a pensioner getting a job.

4.7. Senior policy in the city and voivodeship of Łódź

As municipal authorities are increasingly aware of the presence of older residents, they seek solutions to better serve their needs. For instance, senior citizen departments are established in public administration offices. The range of services offered to older residents by local authorities depends on their sensitivity to the problems of ageing people and resources. The most impressive of them are taxi fare refunds for people aged 60+ who have to consult a doctor (Kraków), the Taxi 75+ project (Wrocław), and skill improvement courses for drivers aged 55+ (Mazowsze). There are also ambitious projects aimed at encouraging entrepreneurial activity among seniors in the NGO sector.

The 2018 representative survey of 14,000 households showed that the voivodeship of Łódź was one of two (the other one is the voivodeship of Lublin) that had the lowest rates of residents who are ‘generally’ satisfied with life. The rate for the voivodeship of Łódź (77%) was lower than the national average (83%). The survey also revealed that the voivodeship of Łódź had the lowest proportion of households with good living conditions¹⁰ (20%) and the highest rate (on a par with the Lubuskie voivodeship) of households with poor living conditions¹¹ (7%) (GUS 2019c, pp. 1, 3). These, as well as some other factors, seem to explain why men and women aged 65

¹⁰ A household has good living conditions if it does not meet any of 30 criteria for poor living conditions relating to housing quality, durable goods owned the household, and sufficient income to meet tangible and intangible needs – GUS (2019c), *Regionalne zróżnicowanie jakości życia w 2018 r. Wyniki Badania spójności społecznej 2018*, p. 4 (Regional Variations in the Standard of Living in 2018. The Outcomes of the Social Cohesion Survey 2018).

¹¹ A household has poor living conditions when it meets at least 10 of 30 criteria for poor living conditions relating to housing quality, durable goods owned by the household, and sufficient income to meet tangible and intangible needs – source: see above.

and older living in the towns and villages of the voivodeship have life expectancies below national averages (Table 1).

Table 1. Average life expectancies for men and women aged 65+^{a)} living in the towns and villages of the voivodeship of Łódź and Poland in 2016 (years)

Specification	Women aged 65+		Men aged 65+	
	Voivodeship of Łódź	Nationally	Voivodeship of Łódź	Nationally
Total	19.7	20.4	15.4	16.0
Towns	19.6	20.4	15.5	16.3
Villages	19.9	20.2	15.2	15.4

a) the mean number of years still to be lived by a man or a woman who has reached the age 65, if subjected throughout the rest of his or her life to the current mortality conditions (age-specific probabilities of dying), <https://ec.europa.eu/eurostat/databrowser/view/tps00026/default/table?lang=en> (accessed: 19 Aug. 2019).

Source: *Potrzeby osób w wieku 60+ z terenu województwa łódzkiego. Raport końcowy (2018)* (Needs of the Voivodeship of Łódź Residents Aged 60+. A Final Report (2018) Regionalne Centrum Polityki Społecznej w Łodzi, Regionalne Obserwatorium Integracji Społecznej, p. 26.

Both the City Hall of Łódź and the Łódź Voivodeship Office have established special departments for handling the affairs of senior citizens. The Senior Policy Department of the City Hall of Łódź was created in 2012 to plan and coordinate activities aimed at increasing older residents' participation in social life, especially in the areas of education, health, culture and sport (<https://uml.lodz.pl/seniorzy/informator-60/oddzial-ds-polityki-senioralnej/>). In early 2018, an ombudsman for seniors was appointed, whose main responsibility is to initiate various forms of support for people aged 60+, to give opinions on projects aimed at them, to propose educational and intervention activities, and to cooperate with public institutions, NGOs and businesses on behalf of older residents. A website dedicated to seniors was also created (www.seniorzy.uml.lodz.pl (accessed: 18 Aug. 2019)). The Łódź Voivodeship Office has created the Seniors Bureau as a unit of the Health, Family and Social Policy Department in charge of handling the affairs of older people. The voivodeship's government tasks related to the social welfare act, as well as tasks delegated by the government, are carried out through the Regional Social Policy Centre, which primarily concentrates on

ensuring that people in need of support and at risk of exclusion have the same life opportunities as everyone else (www.rcpslodz.pl (accessed: 18 Aug. 2019)).

The senior policy of the voivodeship of Łódź is set out in *Wojewódzka Strategia w zakresie Polityki Społecznej 2020* (The Voivodeship Strategy on Senior Policy 2020) of 2017, which is an updated version of *Wojewódzka Strategia w zakresie Polityki Społecznej na lata 2007–2020* (The Voivodeship Strategy on Senior Policy 2007–2020) (<http://www.obserwatorium-rcpslodz.pl/index.php/aktualnosci/34-wojewodzka-strategia-w-zakresie-polityki-spoecznej-2020> (accessed: 15 Aug. 2019)). One of the specific aims of the senior policy indicated in the strategy is to prevent the social exclusion of older people and to encourage their participation in social, cultural, educational, physical, etc., activities with a view to improving their health and well-being. The priority areas of the aim include increasing the off-work activity of older people and creating a senior-friendly society. The need for pro-health activities and adjusting medical services to the needs of older people is also indicated, as is the need to improve social assistance for dependent older people, not only because only 6% of them receive care services at home, but also because projections show that the demand for care services for the dependent elderly will increase considerably in the foreseeable future, while the capacity of their families to provide such services will decrease.

Older people, especially those living in rural areas, have few opportunities to meet and participate in educational, cultural and sports activities. The number of free events organised by local authorities and NGOs does not meet the demand for them. Also, they are organised on an ad-hoc rather than on a regular basis. The Strategy recommends, therefore, encouraging NGOs and religious and informal organisations to extend the range of activities in which seniors could participate in their free time, stressing that the activities should be regular and free. It also offers institutional support for educational activities that should be designed so that they reach large groups of older people, including those living in small towns and villages. The Strategy emphasises the importance of organising and supporting volunteerism among older people, as they can be valuable carers, educators, or sport, recreation, culture, and social instructors (*Potrzeby osób ...* 2018) (Needs of the..., 2018).

The ways of creating a senior-friendly society promoted by the Strategy include encouraging the mass media to show older people in a positive light, fostering intergenerational relations, and promoting seniors' councils as bodies that represent the interests of older citizens to local governments. Seniors' civic participation has been included in the Municipal Government Act of March 1990 by its amendment in 2013 (art. 5c):

1. The municipality shall support intergenerational solidarity and shall provide conditions for stimulating the civic activity of older members of the local community; 2. On its own initiatives or on a motion from interested groups, the municipal council may form a municipal seniors' council; 3. The municipal seniors' council is a consultative, advisory and initiating body (Dz.U. of 2019, items 506, 1309, 1571, 1696, 1815 (accessed: 27 Nov. 2019))

By including the senior policy in the range of affairs that older people could directly control, the amendment legitimised, rather than initiated, the creation of municipal seniors' councils, as a few of them had already been established as advisory bodies to mayors or municipal councils.¹² However, although the new law left the formation of a senior's council to the discretion of the municipal authorities, it certainly contributed to their larger number in the country.

The voivodeship seniors' councils¹³ that the voivodeship governments started to create in 2017 are consultative and advisory bodies. Their responsibilities include the development and improvement of the regional senior policy and the representation and promotion of the interests of older people living in the voivodeship. The councils are named differently in different voivodeships. For instance, the Łódź voivodeship has Społeczna

¹² Because Łódź already had a Seniors' Council for two years before the amendment was made, it only resulted in the Łódź Council adopting a resolution in 2015 in which it was indicated as a legal basis for the activities of the Seniors' Council. The voivodeship of Łódź has a total of 14 seniors' councils in towns, counties and municipalities (www.rcpslodz.pl).

¹³ Established in accordance with art. 41 item 1 of the act on voivodeship government of 5 June 1998 (consolidated text), Dz.U. 2019, items 512, 1571, 1622, 1690, 1818) and art. 21 item 1 of the social welfare act of 12 March 2004 (consolidated text), Dz.U. 2019, items 1507, 1622, 1690, 1818 (accessed: 27 Nov. 2019).

Wojewódzka Rada Seniorów (the Civil Voivodeship Council of Seniors), while its counterpart in the Świętokrzyskie voivodeship is called Wojewódzka Społeczna Rada Seniorów (the Voivodeship Civil Council of Seniors), and the Kujawsko-Pomorskie Voivodeship has formed Wojewódzka Rada ds. Polityki Senioralnej przy Marszałku Województwa Kujawsko-Pomorskiego (the Senior Policy Council to the Marshal of the Kujawsko-Pomorskie Voivodeship). Non-governmental organisations and the capital city of Warsaw also create initiating-and-advisory bodies, such as the Branżowa Komisja Dialogu Społecznego do spraw Osób Starszych i Kombatantów (Social Dialogue Commission for Older Persons and Veterans).

The range of services that municipalities can offer to residents aged 60+ can be illustrated by the activities of the City Hall of Łódź, which, in addition to running cultural, educational and assistance programmes, also supports projects and the civic activity of older people. A project that has become very popular with older residents is the Miejska Karta Seniora (the Senior's City Card), which entitles its holders to buy admission tickets at reduced prices and to use promotional offers from institutions and companies. The Karta Seniora Województwa Łódzkiego (the Łódź Voivodeship Senior's Card) is somewhat less popular because there are fewer service providers in the programme.

The '60+Wolontariat' project (Volunteerism 60+) was established in order to form a group of senior-leaders who would participate in monthly thematic meetings to gain knowledge that they would then share with their peers and relatives.

The City Hall of Łódź also runs three projects that aim to help older residents stay healthy and live independent lives. These are Pudełka życia (Boxes of Life), Karty życia (Save a Life Cards), and the technologically advanced 'Łódź – Miasto (Tele)Opieki' project (Łódź – the City of Tele(Care)) carried out under the Regional Operational Programme of the Voivodeship of Łódź 2014–2010. The project is partly funded by the European Social Fund.

The Boxes of Life are small containers where older, ailing people who live alone can keep vital information about their health, medications and allergies for medical personnel to have it readily available when emergency treatment is required and verbal communication is not possible. The Boxes, which are available with first-aid guides, have already been distributed to ca. 40,000

Łódź residents. The most recent project of the Łódź authorities is Karta Życia (an In-Case-of Emergency (ICE) card), which is a small card with information about the holder's illnesses and allergies, and with the contact data of people that should be contacted in case of an emergency. The card has been designed to easily fit into a wallet or a purse.

In September 2018, the Łódź authorities started a long-term care pilot programme for older and sick people in partnership with two firms and a foundation.¹⁴ The programme has two components which offer at-home care to 20 residents a year and telecare to 2,000 residents aged 60+. The second component involves the use of advanced telemedicine technology that consists of a telemedicine band, a telemedicine platform and a mobile application. The telemedicine band monitors the user's pulse, reports falls and sends an SOS signal to the telemedicine platform in an emergency. The programme's participants can use the bands for free for one year.

Other projects carried out in the city of Łódź on behalf of older residents are 'Senior w Sieci' (The Senior Online) which offers computer courses and workshops, and a peer-support project 'Telefon Życzliwości dla Seniorów' (A Listening Line for Seniors).

A major event that the city of Łódź has been organising for senior residents since 2014 is Łódzkie Senioralia. This type of festival, which offers cultural and recreational activities to seniors, is also popular in other parts of the country. In some areas of the voivodeship of Łódź, the Wojewódzkie Dni Seniora (Voivodeship Seniors' Days) are held every year. They are an opportunity for ensembles of singing, dancing and acting seniors to perform and demonstrate their skills. The organisers of Senioralia invite once-famous artists to grace the event. Senioralia are intended for older people, mostly those living in small towns and villages. They are attended by up to a thousand visitors, as well as the representatives of local organisations that act for older people.

¹⁴ The health of ageing Łódź residents has attracted the interest of the *Centrum Badań nad Zdrowym Starzeniem* (Research Centre for Healthy Ageing) of the Medical University of Łódź. In 2013, the Centre established the *Akademia Zdrowego Starzenia* (Healthy Ageing Academy), which offers lectures and workshops to seniors. The University also holds an annual *Drzewo Pokoleń* (the Tree of Generations) competition to promote the best projects and initiatives for seniors.

In 2016, the Łódź authorities started the 'Program Mikrogranty dla Seniorów' (micro-grants for seniors) which offers on a competitive basis non-repayable funding for projects submitted by informal groups of seniors and groups of mixed ages (at least one person must be aged 60+). Each year the programme receives project proposals from a dozen or so groups of seniors. The focus of the 2019 edition is on projects promoting volunteerism, neighbourly assistance, social activity, and popularising the artwork and activities of the senior residents of Łódź.

The 'Aktywizacja 60+' programme (Activation 60+) that the Łódź authorities started in 2012 has resulted in the establishment of seven centres called Centra Aktywnego Seniora (Active Seniors' Centres; ASC) in five districts of the city. The purpose of the centres is to engage and socially integrate local communities of residents aged 60. Another initiative of the Łódź authorities has been called the Centrum Zdrowego i Aktywnego Seniora (the Healthy and Active Seniors' Centre (HASC)). The HASC offers education on health and promotes healthy and active ageing among local residents. There are two HASCs in Łódź now, both situated in municipal health centres. The ASCs and HASCs have financial support from the government.

The range of activities that the Łódź authorities and the Łódź voivodeship government have undertaken in support of their senior policies clearly shows that the problems of older people constitute a vital part of their strategic documents.

The character of senior policy presented in strategic documents can indirectly influence society's perception of its elderly members. Depending on its design, they can be viewed as a homogeneous group with growing health, care and social needs that increasingly require institutional support, or as a group of people who, especially the younger old, are relatively healthy, independent, committed, culturally and socially active, and eager to participate in the life of the region. The analysis of 21 strategic documents of 16 Polish voivodeships has shown that, in terms of their influence on regional policies on seniors up to the year 2020, the policies were quite conservative, in that their main focus was on the development of social services for seniors with reduced capabilities. The financial and social security consequences of demographic changes were given little attention. However, some voivodeship strategies

appreciated the benefits of developing tourism for the elderly and the role of the elderly as consumers (Urbaniak 2018, p. 103). The updated voivodeship strategies up to the year 2030 and beyond give more emphasis to the social participation of the elderly and their potential to enrich the social capital of the regions.

4.8. Conclusions

Poland has made progress in developing institutional solutions aimed at regulating the area of senior policy. Proposals of activities for improving the situation of older people are accompanied by major projects such as the annual government programme which is intended to stimulate civic activity and social entrepreneurialism of older people (ASOS). Moreover, senior citizens organise themselves and establish bodies such as the Civic Parliament of Senior Citizens to represent their interests. However, there are still problems that need to be addressed, for instance:

- the Ministry of Health and the Ministry of Family, Labour and Social Policy do not coordinate their efforts on behalf of ageing people,
- it is not known which entities should execute the tasks of 2–3 year programmes or how nor by whom they should be controlled; the assignment of responsibilities is necessary to increase the effectiveness of senior policies implemented at the central, regional and local levels,
- the number of geriatricians in Poland is insufficient compared with the number of potential patients,
- insufficient support for families taking care of older members,
- a lack of local coordinators in charge of social assistance in municipalities and neighbourhoods;
- the underestimated potential of ICT in providing assistance to older people.

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5. Senior policy: Russia and Moscow

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Abstract

Chapter 5 gives an overview of the history and contemporary state of the social policy towards older people in Russia (social services and social care; the pension system; labour policy; educational and cultural policy). The paper traces what social policy alternatives existed after the fall of the Soviet Union; scholarly and public discussions about them; what was realised and why; and what future perspectives it brought. The author shows that with paternalistic tendencies persisting, the government still plays the main role in realising social policy, particularly in the pension system, as the core of the country's policy towards older people. At the same time, in the course of the past decade, the scope of ageing issues in focus has widened so much that one can speak of a paradigm shift in understanding ageing, in research as well as in governmental policy.

Keywords: social policy, ageing, pension system, Russia

5.1. Demography

As of 2015, the average life expectancy in Russia was estimated by Rosstat (Russian Federal State Statistic Service)¹ at 66.5 years for men and 77 years for women, thus gaining around two and

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¹ <https://eng.gks.ru/> (accessed: 20 May 2019). For 2019, Rosstat estimated the life expectancy for men at over 68, and for women at over 78. However, in 2018, the World Bank came up with 66 years for men, and the CIA's World Factbook with 65 and women 77 (Barnes 2018).

three years since 1965, respectively (64.5/73.7). Russian social scientists, particularly demographers, take 1965 as the point of reference, because in the mid-1960s, the Soviet state attained its classical form which would be preserved until the collapse of the regime. Average life expectancy had rapidly increased, although the demographic profile did not change considerably afterwards, and the pension system and other social service systems had taken shape by then. In the first post-Soviet decade, however, as Russia was undergoing a deep economic crisis, life expectancy fell, primarily for men, in their case dropping below 60 years. In the first two decades of the 2000s, it slowly grew, although it still noticeably lagged behind all the countries of the Global North, in actual figures as well as the speed of change. At the same time, differences can be observed in regional indicators. In rural areas, due to the prevalence of hard manual work and the lack of primary or specialised health care, people tend to live, on average, less than in the largest cities. At the same time, while the ageing index, i.e. the correlation between the number of people beyond working age and that of children under 14, is higher for big Russian cities, the so-called demographic burden, i.e. the ratio of the former to those of working age, is higher for rural areas. Given the gender imbalance, one of the most significant issues for Russia in the future, according to Safarova (2005), should be the situation of older rural women. For its part, the capital, with its varied material (the greatest state funding and private business investments in the country) and non-material resources, e.g. social and cultural opportunities, provides greater possibilities for the development of senior policy. It also ensures better access to all kinds of services, and while this is not the sole factor that might ensure the well-being of older people, it is an important one. In 2018 in Moscow, out of the total population of 12.5 mln officially stated by Rosstat,² there were 3.403 million pensioners. Of these, 1.1 million men and 2.3 million women, 436,900 people were 80 and older, and 736 were 100 and older. Of the 17 oldest Muscovites born in 1911 and earlier, there were 14 women and three men.

² Alternative estimations, based on consumption, provide different figures, i.e. 18–20 million people. However, the majority of the ‘unaccounted’ people should be of working age, particularly those living and working in Moscow illegally, thus they should not considerably influence the number of older Muscovites.

5.2. Social services and social care

Historically, in Russia, the needy were taken care of by churches and monasteries. Depending on their means, the latter fed beggars and ran orphanages and poorhouses for the old and disabled. Help could also be obtained at the courts of princes. In the 16th century, with the centralisation of the country and the simultaneous rise of bureaucracy, the state started to control the activities of charitable organisations. Peter I forbade the giving of alms in the street; instead, all orphans, beggars, cripples and the like were to be put in appropriate institutions. Under Catherine II, provincial administrative departments (*prikazy*) were organised, which were in charge of public schools, hospitals, poorhouses, workhouses and prisons. As a reaction to their chronic failure to perform their duties and help most people in need, in the 19th century, private charity emerged in Russia (Kastarnaya 2010). Meanwhile, the modern pension system was developing, and after the revolution, a new social services system started to take shape. During the interwar period, the young Soviet state gradually spread its care to cover its citizens, primarily workers and soldiers, while members of the former ruling classes were initially excluded from the system. Invalid homes for disabled military personnel emerged, as well as ‘baby homes’ and orphanages; given the millions of orphaned and abandoned children, the latter were probably the most pressing issue in the early 1920s. In the late 1920s to the early 1930s, more workers became entitled to pensions; pensions for the loss of a breadwinner were introduced, as well as personal pensions assigned for special merit, e.g. remarkable service to the country. The Soviet centralised system of paternalistic social services was being formed. Medical services for working people started to develop, holiday homes were organised, while in the late 1930s, the state fully assumed responsibility for the healthcare and pension provision of its citizens. By the mid-1960s, the Soviet social services system had taken its classical shape. In the 1970s and 1980s, the system of care of the disabled developed; they were entitled to benefits, and a whole ‘disability’ infrastructure was built (specialised schools, healthcare centres, enterprises, etc.). However, it might be regarded more as a ‘medical’ approach and a system of exclusion (e.g., Volkova 2016). Meanwhile, home care for needy older people without close relatives started to be provided.

The core element of the late Soviet social policy system was 'sobes' (social security), a network of state agencies in charge of pensions, allowances and benefits, as well as socio-medical services, such as the arrangement of sanatorium treatment and institutional care. According to Harris (2016), Soviet 'aging policy originated as a means to provide a minimum 'safety net' for older persons lacking family care (...). Sobes functioned to alleviate (the care –Y.E.) 'burden', but rarely considered the individual perspective, the manner of care, or the environment' (Harris 2016, p. 157). In Soviet times, exemptions and benefits served not as a means of overcoming poverty in the country but either as a recognition of merit or to identify the few supposedly needy, like those with a disability. Education and healthcare were free; thus, without much extra support, most people could enjoy a more or less satisfactory lifestyle. However, with the collapse of the Soviet Union, the social services system collapsed as well.

As Gontmakher (2005) points out, the idea of poverty did not exist in the Soviet Union. It was something associated with Western countries. And it was only in the late 1980s, in the times of Gorbachev, that a low-income allowance was first introduced, mostly for the Caucasus and Central Asia. Gontmakher, who had worked in the Central Economic Institute of the State Planning Committee, and then in the Ministry of Labour in the 1990s, states that in 1992, 80% of the Russian population found themselves below the poverty line; thus it no longer meant anything, and a lower, subsistence level had to be established instead. One-third of the population, it was estimated, were poorer than this level; thus, they had to be sustained in the first place. However, the economic situation was deteriorating disastrously, and the government could not even achieve this goal. As they could not be paid more, the allegedly needy (the disabled, veterans, Chernobyl liquidators) would pay less themselves; therefore, they were all entitled to numerous benefits (e.g. transportation, rent, utilities, medication, sanatorium treatment, prosthesis). In the typical universalist manner, the initiative did not consider whether all the people falling into these categories were, indeed, needy and whether they all required regular transportation, etc. It still proved very costly, since the benefits had turned into a means of support for millions of people (about 35 million, as of 2005, out of a population of approximately 143.5

million), mostly pensioners. Yet, to call a halt to what had once been given would have been political suicide. Thus, the federal and regional budgets had to continue to provide those benefits, which meant they were unable to realise other initiatives or support other categories, and they were accumulating debt. This is in addition to the widely discussed corruption, when means were allocated but people were given cheaper medication than intended or they had to wait for a long time to be sent to a sanatorium, though they were entitled to that service. In 2002, the Ministry of Finance came up with a plan to monetise the payments in question, and in 2005, the law was ready to be passed. Instead of benefits, each category would receive a certain fixed amount of money monthly. For retirees, who were in the majority, the money was to be added to their pension. However, the information of the coming reform caused mass protests; people were afraid that their welfare would be jeopardised as the monetised equivalent might not cover the actual benefits. When the law was eventually passed, it contained an alternative: people could choose the money or the so-called social package (the three main benefits – medication, suburban transportation, sanatorium treatment – in their natural form). For Gontmakher, the monetisation reform and the way it was carried out, proved to be a complete failure. He calls it ‘a mine laid under the future of Russia’ (Gontmakher 2005, p. 252), because:

- the government did not stand its ground and did not carry out the reform as planned,
- lacking money, while realising the reform, the federal government lay a significant part of the payments upon regional authorities; as a result, in different regions, due to different resources, payments differed,
- even the provided alternative (the money or the benefits) did not mean real equality or justice, either, as the approach was not at all individualised: e.g. if someone was given money for sanatorium treatment that he/she did not need, he/she would spend that money on current needs, but might not be able to receive the specific medical procedures they really required; or, say, there might be a person with a disability, or a veteran, living in a well-to-do family, and who was not in great need of that rather small sum of money, but they would still be entitled to it simply due to his/her status while nearby, people would be living in abject poverty.

Now, more than almost 15 years later, we can see that people have just accepted the state of affairs, though the monetisation reform did not alleviate any acute issues or radically change the socio-economic situation.

In the sphere of social care, as in other fields, the 1990s marked a new, post-socialist perspective. It was a time of collapse and disruption, but it was also a time of change and chances, few of which were ultimately realised. It was a time to imagine and attempt something new and original, when experts and researchers gained an opportunity to collaborate with and work for the government, thus designing truly scientific innovative perspectives. In 1995, with the assistance of gerontologists and socially oriented politicians who aimed to modernise the country and its institutions, two federal laws were passed, *On Social Services for the Elderly and Disabled* and *On the Basis of Social Services in the Russian Federation*. Recognising the 1991 UN Principles for Older Persons, the documents posited humane treatment on the part of medical and social workers, claimed to promote senior citizens' rights and social participation, and advocated ageing in place. In addition to institutional care, the following new forms of care were introduced:

- home care for the disabled of any age and homebound citizens of pension age without families (medical and social help, including food and medication delivery, cleaning the premises, accompanying the person to medical organisations, legal help, arrangement of funerals, etc.),
- day/night care centres (meals, leisure, feasible work),
- emergency care for older people in dire need (one-time food and clothes provision, temporary accommodation, emergency psychological and legal help),
- psychological and legal consultations of senior citizens and their families.

These services were now provided through the newly created community-based centres of social services; additional services could be obtained for a fee.

In reality, the emerging positions of social workers were occupied by unemployed women who had no professional if any education and had not received any special training. Their work was mostly reduced to cleaning and buying food and medicines for out-of-pocket reimbursement. Years later, sociologists acknowledged that,

to a considerable extent, the services provided by the community-based centres still implied basic home help and emergency relief (mainly grocery kits, plain clothes and footwear) (see, e.g., Golianich et al. 2007). The idea of the sociocultural empowerment of older people and their overall support was mostly never realised. According to Grigorieva (2005), the development of individualised help was obstructed by the constant checking of need, which was quite formal in nature. At the same time, the system made little use of the community, as the presence of neighbours and other potential local helpers was ignored. The state, she claimed, should finance concrete individual initiatives and projects like older people's mutual crediting, redecoration services for them, vegetable storages, etc. The aim of home care, in her view, involved providing longer independent living for seniors and overcoming socialist paternalism, but the medical and social care spheres still ensured the older people's passive role.

As pointed out by Saralieva and Petrova (2016), in Russia, the ideology of social work lags behind trends in social policy. The two original first post-Soviet laws proved highly influential and persisted for two decades. At the end of 2013, they were replaced by a new law, which came into force on the 1st of January 2015. Ideologically, it retained their general outline but aimed to integrate features of the new cultural reality characteristics of a world that had changed over the years. In the new law, in line with the global marketisation trend, the two parties involved were named social service provider and social service recipient. The document also acknowledged the impact of the new media; information on the providers was now to be made available online while information on the recipients could be posted with their consent or that of their legal representatives. The law introduced a social service standard. Namely, for nursing homes and similar institutions, it specified the number of staff members for a certain number of clients, the number of articles of furniture and other equipment, bed linen, as well as the amount of food. Service providers would now be entered into the official register of social service providers. Individual carers, like family members, could receive payments if they managed to obtain accreditation. The law presumed that contracts would be signed with each service recipient (or his/her representative), according to an individual program. Prevention was also stated in

the law as it aimed to identify and eliminate the causes that led to the deterioration of living conditions of citizens, reducing their ability to independently provide for their own basic living needs.

Apart from state control, the law implied independent assessment by public organisations (at least once every three years). The goal of developing a non-state market of social services was declared, although the nomenclature of the services themselves was mainly preserved. As the first professional discussions demonstrated (see, e.g. Rondik 2015), smaller NGOs were hopeful of becoming part of the official structure of service providers. However, many pointed out that the innovations would mean more bureaucracy and that many NGOs, especially in rural areas, would not be able to comply with the new requirements. As of 2018, the Register for Moscow, for instance, mainly included state organisations (nursing homes, health centres, social housing providers, social services centres) and several larger and established NGOs, some of which were affiliated with the Russian Orthodox Church. The resources of minor provincial NGOs would be even smaller. Saralieva and Petrova confirmed that in many regions, social services are, as before, almost exclusively provided by the state.

In their study, Saralieva and Petrova (2016) explored the potential of religious organisations as social service providers. In several regions, these organisations are included in the official local registers. Most of these organisations function under the auspices of the Orthodox Church, although in regions like Tatarstan, there are also Muslim ones. Among their clients are retired priests, priests' widows, the homeless, and single and chronically ill older people. Between 2008 and 2013, the researchers conducted interviews with 59 priests and Orthodox social workers; they all spoke of their clients as passive recipients of help, people to be taken care of. The goal of religious social work, as Saralieva and Petrova discovered (2016, p. 101), involved integrating the person into the local religious community and leading him/her to accept the religious perspective on life difficulties and diseases. In 2013 and 2014, another study, carried out in Nizhny Novgorod, threw light on citizen's attitudes towards the activities of religious organisations in the sphere of social care. The majority of respondents (in total, 1976 people, aged 18–90) believed that the organisations in question had a certain influence on society, the oldest and the poorest trusting their real

help the least. The older respondents (55+) saw religious social workers as a source of compassion but regarded social workers provided by the state as more reliable from the point of view of their professionalism and availability.

The fate of a social service NGO in Russia is outlined in a case-study by Harris (2016), which was devoted to one of the most remarkable non-profit organisations in the country, 'Dobroe Delo' (Good Deed) whose director is gerontologist Eduard Karyukhin. Founded in Moscow in 2000 by two gerontologists and an experienced nurse, it aimed to improve home care in Russia, based on the principles of the Madrid Plan. In the early 2000s, it accumulated funds from American and British foundations, the European Commission and Russian charities. 'Dobroe Delo' developed its three-fold mission: to improve the quality of life of older people, to support regional gerontological NGOs, and to organise research in social gerontology.³ The doctors working for the foundation visit older people at home and in state veteran homes (200 people initially, and over 1,500 people in 30 regions now) and organise hospitalisation if needed. The social workers help on a regular or emergency basis, and they provide medications, clothes, food and vitamins. Other NGOs are consulted online and at offline events; literature on ageing issues is disseminated. The specialists of the foundation carry out research, compile lists of references and supervise theses. The foundation publishes UN documents and other materials related to the interests and rights of older people, and it collaborates with educational institutions in the spheres of gerontology and social management.

Soon after it was established, the foundation started a website (and later a Facebook page and a Twitter account). Thanks to the use of the Internet, it could spread important information on ageing issues and establish a network of gerontological NGOs. Starting in 2002, seminars and training sessions were carried out all over the country for members of NGOs working in the sphere of home care as well as local administrations. In 2004, the Fund participated in the first all-Russian meeting of social organisations, and in 2007, in the Congress of the International Association of Gerontology and Geriatrics in St. Petersburg (where Kariukhin was one of the presenters). In 2006, a coalition of gerontological NGOs led by

³ <http://dobroedelo.org/> (accessed: 15 May 2019).

Dobroe Delo was created. Throughout the decade, print publications and CDs (distributed for free) appeared as well. Between 2014 and 2015, an electronic bulletin, *Pravo Pozhilykh* (Rights of the Elderly),⁴ encompassing articles, interviews, media digests, examples of best practices, basic information for non-professionals, etc., was published (now available on the website). The foundation collaborated with the government to help develop its senior policy, especially as regards the implementation of the Madrid Plan and the promotion of healthy and active ageing. Partnerships were established with lawyers, and the foundation regularly appealed to the authorities to defend the rights of older individuals as well as groups. Meanwhile, cooperation was maintained with HelpAge International.

Due to the 2012 Foreign Agent Law, which demanded that organisations either abandon their foreign funding or register as foreign agents, the foundation lost financial support from abroad. It criticized the law on its website and Facebook page as harming Russia's civil society, but it continued its activities and retained considerable influence (e.g. as a result of its appeal to the Ministry of Health, cases of elderly abuse, including in nursing homes, were now to be documented). In 2016, a joint research project 'How to Strengthen Rural Associations of Older People' was carried out with HelpAge International; the foundation was also instrumental in launching a Russian-American exchange, implying reciprocal visits of gerontologists. As Harris (2016) concludes, Dobroe Delo has had a significant impact on the vision of ageing issues and social care in Russia, especially at the regional level. Still, ideas expressed by the foundation in the early 2000s, like a National Centre on Aging Policy, making elder law a separate legal discipline, or employing the Declaration of Rights of Older People in all old-age facilities, are yet to be realised.

5.3. The pension system

Originally, pensions were designed as compensation for those unable to work so that they might survive without working. In Western countries, where they were initially introduced, the minimum age was established at a level as high as 70, and later 65. In the Soviet

⁴ <http://dobroedelo.org/tag/elektronnyj-byulleten-pravo-pozhilyx/> (accessed: 15 May 2019).

Union, the pension age was introduced in 1932 and was set at 55 for women and 60 for men. This relatively low pension age reflected the average, quite low, life expectancy (around 43 years in the late 1920s) and was intended to demonstrate the care of its citizens taken by the Soviet state and the advantage of the Soviet regime compared to the capitalist regimes.

The first pensions in Russia were introduced under Peter I and were paid to retired naval officers. In the 1820s, pensions were due to all military and state officials after 35 years of unblemished service. On the verge of the revolution, doctors, teachers and workers at state enterprises (the latter in the case of disability) could count on a pension as well. After the revolution, the existing pension system was abolished. In the 1920s, a new system started to be built. In the mid-1920s, teachers were covered, and in the late 1920s, it covered workers of the important and arduous mining and textile industries. By the mid-1930s, all workers and employees were entitled to a pension (5–10% of the last wage/salary). However, as many had lost their documents in the revolution, the civil war, population displacements, etc., and lacked the documents to prove the necessary number of working years (at least 20 and 25 years for women and men, respectively), they could not claim their pension. Farmers were not included in the system.

In the 1950s, as the Soviet state was developing and accumulating resources, it became possible to pay up to 50% of the previous year's average wages/salary. However, the value of work was emphasised: a bonus was paid for extra years, the largest if they had worked all their life for the same employer, whereas, if someone retired without having worked the necessary number of years, he/she was paid the minimum pension, which could not be regarded as a means of livelihood. In 1964, farmers were finally entitled to a pension, but they could retire only five years later than the rest of the pensioners; in 1967, their retirement age was aligned with other Soviet citizens, though their pension was still lower, around 15% of their wages compared with 50% for others. Thus, when the Soviet state was on the verge of collapse, the average Soviet pension was estimated at 1/3 of the person's wages/salary (calculated from any two or five years). A lower pension age was established for those working in harsh (the Far North and similar regions) and dangerous conditions – five and ten years lower, respectively.

In the early 1990s, though, with the market liberalisation, all state payments, including pensions, were radically depreciated and kept falling in value throughout the decade. Pensions were continuously raised for current retirees, but still, the latter were among the poorest and most affected by the economic situation in the country (Shakhbanov 2011). Pensions for working retirees were lowered, and there were delays in payments, which led to retirees rioting. The reform carried out at the turn of the millennium stated that the pension for those born after 1967 would be calculated not from one or several, but from all working years, and all sources of income legally formalised (labour contract) were now to be taken into account (self-employment, freelance and other activities beyond regular employment were thus officially recognised).

According to Maleva and Sinyavskaya (2005), in the mid-1990s, when the Pension Fund failed to fulfil its obligations to retirees, it became clear that the system was in deep crisis and reform was needed. The main causes of the crisis were identified as:

- population ageing, hence more people had to be paid,
- severe unemployment and non-payment of wages/salaries in the 1990s, hence there were fewer contributors to the Pension Fund,
- a low retirement age, plus possibilities for even earlier retirement (disability, work in harsh or dangerous conditions),
- the rise of the informal economy in the 1990s (which persisted afterwards).

Three alternatives were discussed as potential models for the reform to be realised, namely:

- raising the income of the Pension Fund by increasing pension contributions (therefore increasing the tax burden of enterprises),
- decreasing the expenses of the Pension Fund by reducing the number of retirees (i.e. banning early retirement and raising the retirement age),
- making the system less dependent on demographic factors (the only alternative bringing about structural changes to the system) which implied: making a person the agent of his/her own pension (in other words, the individual would accumulate means throughout his/her working life and personally control the process); securing the financial stability of the pension system; easing the tax burden; and eliminating the state's monopoly in the given sphere.

What became of those possibilities? All Russians received personal accounts where all components of their legal income were accumulated, thus forming the insurance (contribution) part of their pension. However, the government failed to get this information across to the population, who mostly remained quite indifferent to the way their pension was formed. Then, in 2005, a big stir in society was caused by the monetisation of benefits. To alleviate the shock, the government, quite in accordance with its tradition of 'manual management' (i.e. making decisions not on the basis of laws or discussed and approved schemes, but on the assumption of the current, short-term political and economic situation and/or the given local conditions), indexed pensions by 36%, thus breaking the balanced provision-contribution pension model and returning to the state care system. Moreover, the pension sphere thus remained politically dependent, not exclusively based on economic mechanisms.

The pension reform continued throughout the 2000s and in the 2010s. The current stage of the reform (2015) consolidated the present state of the pension system, which now embraces the following. Pensions may belong to the following types: the insurance pension (payment compensating for the salary/wages/other income); the state pension (a similar payment for particular categories); and the funded pension (payment of pension savings formed with the return on the investment of insurance contributions). There are three types of insurance pensions: old-age (the most common pension type in Russia), disability, and loss-of-breadwinner pensions. The state pension embraces: long-service pensions (federal civil servants, military, astronauts, test pilots); old-age pensions (those who suffered health damage in radiation or man-made accidents); disability pensions (military, astronauts, those who suffered health damage in radiation or man-made accidents, WWII veterans, holders of the Besieged Leningrad Resident badge); loss-of-breadwinner pensions (received by unemployable family members of deceased military personnel, astronauts, or citizens whose health was harmed by radiation or man-made accidents).

Pensioners have a right to work, which does not influence the amount of their pension paychecks; thus the pension system is still characterised by a rather undifferentiated attitude. However, since

2016, the pensions of working pensioners have not been indexed, unlike those of non-working pensioners. Experts associate this with there being more retirees – who feel that their rights were infringed – moving into the informal economy (Stepanov 2019). One more kind of pension, the social pension, is paid five years later than the regular one and covers those who cannot prove their work experience. The pension replacement rate is estimated at 37% (up to 70% in some regions, but this is due to low salaries/wages rather than high pensions). The government plans to stimulate individuals to be more active in building up their funded pension (in particular, placing their financial means in private pension funds). The guiding and controlling role of the state is, nevertheless, evident.

A significant aspect of the pension reform has been the raising of the retirement age. Throughout the 2000s, against the background of the seemingly achieved economic stability (compared with the turbulent 1990s), the issue was discussed by the government and academia. Sinyavskaya (2005) gives an overview of the debate, and the arguments for the increase could be summarised as follows:

- the Russian retirement age is among the lowest in the world; it was established in the early 1930s, and since then, the nature and conditions of work have changed considerably,
- the population is ageing; by the early 2000s, the 60+ population had almost tripled (18.5% compared to 6.9% in the mid-1920s),
- 1/5 of retirees are employed; in the first five years after retiring, more than half keep working.

The arguments against the increase could be formulated as follows:

- life expectancy in Russia is still rather low, particularly for men. The raising of the retirement age would mean that almost half of Russian men born in the mid-1970s would not live to collect their pension (Sinyavskaya 2005, p. 200). In an attempt to avoid the latter scenario, some may claim to be disabled, which would lead to an increase in the already high number of people with disability in the country (around 9% in the 2000s),
- considerable numbers of retirees are working, regardless. In the conditions of relatively high unemployment (around 8% in the mid-2000s on average, and significantly higher in some regions), there is no particular need for old age employment. This is especially true when taking into account the supposedly high demand for

work among the large 1980s cohort and older people's allegedly outdated knowledge and skills.

Then, in the 2000s, several solutions, based on international experience, were proposed:

- higher pensions for those leaving the labour force later than the official retirement age,
- lower pensions for those retiring earlier than the official retirement age,
- introducing funded pensions, plus a decrease in state participation with the rise of life expectancy; all those proposals were oriented at stimulating people to work longer.

According to Sinyavskaya, Soviet, Russian, as well as Western experience shows that many people prefer freedom and leisure to a higher pension.⁵ As regards the third perspective, we can now see that formally, this has been introduced, but actually, Russia has a long way to go before this becomes part of the mindset and routine everyday practices. The efficiency of mandatory contributions made by the employer will only be evident in the mid-2020s. Meanwhile, the amount of individual contributions, in the form of placing means in non-state funds, is still very small, almost negligible (some may be storing money at home, as they always did).

Between 2016 and 2018, preparations for raising the retirement age were in full swing. Publicly, the government justified its plan by the need to align the retirement age with the objective contemporary trends in Russia's life. In particular, this referred to the improving health of older people as well as their ability and wish to work longer (based on the actual numbers of those stopping work immediately after retirement, i.e. less than half). However, it also referred to the continuously increasing average life expectancy in the country (supposed to reach 80 years in 2030). The leading Russian demographer Vishnevsky (2018) finds this view ungrounded. According to him, the average life expectancy in the country has only slightly risen since the mid-1960s, and after raising the retirement age, both men and women in Russia will have fewer retirement years than their compatriots 60 years ago. Nevertheless, starting from 2017, the retirement age was first raised for state officials (to

⁵ World Bank (2000), *Retirement: Can Pension Reform Reverse the Trend to Earlier Retirement?* 'World Bank Pension Reform Primer Series', Washington.

65 for men and 63 for women, respectively). After discussing the proposals put forward by the Ministry of Finance and the Ministry of Labour, the government decided to raise the retirement age in the country by one year every 12 months until it reached 65 for men and 63 for women. However, later President Putin proposed several 'cushion' corrections, namely,

- 60 not 63 as the new retirement age for women,
- the introduction of the category pre-pensioners, who would enjoy special rights,⁶
 - a chance for women with three or more children to retire earlier (with three children it would be three years earlier; with four children, four years earlier; and with five or more children, at 50, as before),
 - a reduction of the number of work experience years allowing retirement (to 37 for women and 42 for men),
 - preterm retirement (six months earlier) for those retiring in 2019 and 2020,
 - a 25% pension supplement for rural retirees who have worked for no less than 30 years,
 - preserving earlier retirement for those working in the Far North and similar localities (60 and 55 years instead of 55 and 50 previously),
 - no changes for those working in dangerous conditions (e.g. people involved in lifesaving, miners, chemical workers, bus drivers, sailors), Chernobyl liquidators and other victims of the Chernobyl disaster, as well as the small peoples of the North.

Pensions are also to be annually indexed.

The passing of the law was accompanied by mass protests across the country, demonstrations and petitions, which showed that many Russians did not believe that the law was passed to their benefit. They regard themselves as poor and/or are not certain whether they will have a stable job in the coming years. However, they are almost sure that if in their forties, and especially in their

⁶ An elevated unemployment benefit; administrative and criminal liability for employers firing workers of that age (the initiative was highly criticised by experts and businesses as employers might not hire people of that age at all or fire them in advance); 3-month free training and retraining courses; free, annual 2-day medical examination, counted as workdays; no property and land taxes; by decision of local authorities also some benefits, e.g. in Moscow, free urban transportation and a 50% discount for utilities.

fifties, they lose their job, it will be practically impossible for them to find a new one. The pre-retirement unemployment benefit, though raised, is still not enough for a decent lifestyle, especially in cities with a high cost of living, like Moscow. For those for whom work is a forced necessity and nothing but a way of making money, the pre-retirement years are not a time to enjoy the work they do; it is a time to wait and last long enough. Therefore, they feel that they are being robbed of their leisure time (or, rather, time without mandatory labour) that they have earned – time for themselves and their families.

The increase in retirement age will not solve all problems by itself. Those who are relatively healthy and are satisfied with their work usually continue working beyond the official retirement age, anyway. The reform did not radically change their position, but it did hit those in unstable, precarious employment as unemployment benefit is not an adequate substitute for employment. Before a new retirement age is introduced, policymakers ought to make sure that most people will be able to work up to that age. Apart from health, another barrier to a longer working life is the age discrimination which persists on the Russian labour market and which may even increase later. The government has ruled that businesses should be fined for firing people of the pre-retirement age. However, formal, repressive measures will not yield positive results and will only make people try to find ways around them. Companies should be given bonuses or provided with more opportunities for development in return to employing/(re)training older workers rather than punished for not having them.

5.4. Labour policy

Labour policy in the sphere in question concerns various issues of the employment of older people. Until 2019, the number of working pensioners had been growing in Russia (we will see how this dynamic will change, owing to the raising of the retirement age, in the coming years). Starting with the early 1970s, in order to motivate people to continue working beyond the retirement age, pensions started to be paid to those still working in addition to their wages and salaries. Full pensions were paid to industrial workers, mail carriers, those

engaged in trade and services, cashiers and accountants, nurses, and teachers in rural areas. Meanwhile, 50% payments (75% in the Ural Region, Siberia and the Far East) were given to engineers, several categories of doctors and pharmacists, vets, teachers, heads and administrative staff of rural councils of people's deputies, as well as some other workers. All the payments in total were not to exceed a certain sum (300 roubles when introduced); otherwise, the pension was to be lowered. Those measures were directed at reallocating human resources where they were particularly needed (Kozina, Zangieva 2016). The list of workers entitled to a full or reduced pension was expanded over the next decade (e.g. security personnel, archive employees, artistic staff (directors, choreographers, etc.) working with children, and some others were included). Several categories of miners, metallurgists and metro builders could now receive a full pension regardless of the sum of their wages. In late Soviet times, the number of those still working constituted about $\frac{1}{4}$ of all pensioners. In 1997, however, as it was seen as a means to alleviate the pressure experienced by the pension system in the country, it was forbidden to receive both a pension and a salary/wages; consequently, the number of working retirees fell dramatically. The ban was lifted in 2002, resulting in the resumption of the uptrend. Between 1997 and 2015, the number of working pensioners increased almost by half, as shown by the Russian Federal State Statistics Service Rosstat in 2016 (Kozina, Zangieva 2016, p. 8).

Having a source of income is the main reason why people continue to work after they reach the official retirement age. People would like to possibly maintain their lifestyle and the amount of spending they are accustomed to, a wish practically unrealisable if they were to only rely on their pension. Considerable numbers of Russians have been employed in the grey market in post-Soviet times, thus earning significantly more than their official paycheck. However, their pension would only be based on their meagre contributions to the Pension Fund, and unless they save enough – or keep working – they are likely to join the older poor (Lezhnina 2014). The second wave of the national survey which studied demographic, social and economic behaviour (Dormidontova 2015) showed that as of 2015, 25.7% of women aged 55–74 and men aged 60–74 were working, 41.6% had worked for a certain period of time, while 32.7% had stopped working immediately

after reaching the retirement age. According to the first wave of the said survey (2013) (Dormidontova 2015), the reasons for work termination included health issues (42.9%), fatigue (32.6%), family circumstances (10.6%), dismissal (10.5%), a wish to change one's lifestyle (5.9%), caring responsibilities (5.3%), a high enough pension (5.1%), and sufficient savings (1.4%); all the other reasons made up 10.9%. Meanwhile, the reasons for continuing to work included the wish not to lose the salary/wages (51.5%), the need to financially support relatives (21.3%), love of the profession (20.1%), the social significance of the work performed (14.2%), and the wish to save enough in order to quit working (12.7%); all the other reasons totalled 12.8%. Thus, apart from financial reasons, there are, naturally, social ones for continuing or ceasing work. By carrying on with paid work, people may also resist the social role of the pensioner and all the aspects of age categorisation related to it, as they insist on seeing themselves as they have done for the most of their life (Rogozin 2012).

Except for a very limited number of employees (e.g. rectors and vice-rectors of state institutions of higher education who cannot hold office after 65 – the term can be extended to 70 years if recommended by the institution), for most occupations, the maximum age is not officially stated. In addition to usual rights, working pensioners can rely on unpaid extra holidays (up to 14 days). Furthermore, several privileges have recently been granted to the so-called pre-pensioners (like an annual, free 2-day medical examination, counted as workdays, and 3-month free training and retraining courses; see the section on pension reform in this chapter). However, according to many researchers, this sphere in Russia is still underregulated, which allows for ageism and other rights violations.

The 2006 amendment to the Labour Code permitted employers to enter into fixed-term contracts with pensioners. This is seen as more favourable for the employer than for the employee (Bogdanova 2014) as such a contract can be terminated with just three days' notice at the end of a given period, without any explanation. Employers have the right to decide what is the best age for performing the duties involved in the job (Kozina, Zangieva 2016).

Practice shows that few employers are willing to hire pensioners. At the age of 40–45, those seeking a new job may already face

difficulties because of their age. Employees 45+ are regarded as an aged workforce. By means of content analysis, Kozina and Zangieva (2016) studied all the job advertisements (2,200) for Moscow and the Moscow Region posted on three major specialised websites (HeadHunter, Future Today and Rabota dlya Vas (Work for You)) in the course of one week in November 2012; as a follow-up, expert interviews were conducted with 15 Moscow HR specialists. The content analysis demonstrated that 45% of the advertisements stated the desired age of the candidates. The maximum age was mainly restricted to 40; 10% of ads considered those older than 45; 4% accepted those older than 55. Newer spheres like IT, sales and marketing were less welcoming to older candidates while traditional – industrial production and building – proved more tolerant. The 2013 Federal Law banned all employment requirements not related to candidates' professional qualities, e.g. sex, age, nationality, etc.

Nevertheless, the HR specialists interviewed after the law had been adopted revealed that companies would, in any case, hire the appropriate people, and the rest, particularly older candidates, would just be wasting their time. In the interviews, older employees were often described as slow, tired, reluctant to work overtime, and it was said that they did not fit the mobile (i.e. young) image of the company. In September-October 2015, the research office of Russia's leading hiring agency, HeadHunter, carried out their own study to find out the expectations of candidates 45+ and companies' requirements of them (Kabakova 2015). Two-hundred and thirty-five companies and over 3,200 job seekers participated in the two surveys. In the six months prior to the study, 3% of those hired had been older than 45 (the most desired age being 25–30). Men of this age appeared to have the best chances of finding a job as security workers, while women were mainly employed as domestic workers. According to the employers, age was among the least important factors in their choice, the most significant being personal qualities and that the candidates corresponded to the company's corporate culture (however, as the previous study showed, this could be related to age as well). The job seekers 45+ suspected that their age mattered almost as much as work experience. When it came to assessing workplace discrimination in Russia in general, 81% of employers and 74% of aspiring employees over 45 recognised

its existence. One more noteworthy fact was mentioned in the study: in the nine years prior to the surveys, of the 650+ projects nominated for the prestigious HR Brand Award, only four had been focused on older employees (35% devoted to young specialists). Older job seekers, too, indicated the lack of special programmes for employees of their age.

Those seeking a new job after 40, and especially after 45, constitute the most vulnerable group, and it is, therefore, safer for an older employee to stay with the same company. This is possible in the spheres of education (all levels) and research, healthcare, housing and communal services, as well as the military-industrial complex, where there are considerable numbers of pre-pensioners and even pensioners. Highly qualified specialists usually continue working after retirement without significant changes to their duties and salary. According to the data acquired by Maleva et al. (2016), 71% of such specialists retain their position while 19% even increase it (for instance, a senior researcher aged 60 or older may well be promoted to the position of a leading/chief researcher); only 5% of them experience downward mobility. For those who change jobs, the latter tendency is more typical, especially if they are not highly qualified. As stated by Sonina and Kolosnitsyna (2015), more than 30% of retired men find work as janitors and gatekeepers, while more than 40% of retired women are hired as cleaners, ticket inspectors, shop assistants and concierges. Downward mobility is usually paired with declining earnings. Among those who have changed job, three times more employees work without a labour contract than among those who have stayed with the same employer (Kozina, Zangieva 2016). An alternative for a pensioner on the labour market may be self-employment. The number of such older workers is on the rise (Maleva et al. 2016). Moskvina and Dolzhikova (2016) describe startups organised by pensioners in St. Petersburg in the branch of social entrepreneurship. Among their activity directions were handicraft, tourism, creative work with young children, the prevention of stray dogs, and education and work provision for adults with disabilities, as well as help for their burnt-out parents. Some of the enterprises became profitable; yet, the researchers believe that more incentives, along with legal guarantees, are needed so that it may become a consistent trend.

Given the gaps in state labour policy regarding older employees, particularly working pensioners, labour relations between them and their employers are of quite an indefinite nature and are often shaped intuitively. On the one hand, the state does not provide any special programmes for older employees, like a gradual transition to retirement, employment as consultants or special work regimes (e.g. part-time work). Pensioners cannot be officially unemployed; therefore, they are not supposed to be protected from unemployment or helped with job seeking. On the other hand, they are an object of the state's care; they are paid pensions like those who have lost the ability to work. Since Soviet times, the moral stance persists that old age is to be honoured (Bogdanova 2014); thus, older people are associated with respect, not with opportunities and success. Here, the ethics of care, highly morally loaded, comes into conflict with the liberal discourse of rights, neutral and universal (Robinson 2011).

Consequently, relations between employers and older employees are a combination of mutual care and manipulation, as shown by Bogdanova (2014). The interviews she conducted with both parties demonstrate that it is often morally difficult for employers to fire older employees, or to ask them to retire when they are no longer thought to be efficient enough (even if such an employee regularly takes sick leave, for example). In turn, working pensioners do not want to be a burden, to let down the company; thus, not all of them use their extra holiday entitlement, for instance. Working beyond retirement age, they have to consider at some point when it is time (for them to leave), to decide if they are going to work as long as possible or give way to the young and, as they see it, not overuse the company's favour.

The Government's Strategy of Actions for the Benefit of Senior Citizens in the Russian Federation up to 2025⁷ (described in detail in the Afterword) prohibits age discrimination and, as a perspective to be realised in the future, names professional education for older people as well as the development of flexible, short-term and remote work. The latter initiative is not likely to gain popularity with pensioners as it may imply even more precarious employment and even less social protection (Kozina, Zangieva 2016). Researchers analysing the current labour policy and the situation on the Russian

⁷ <http://government.ru/docs/21692/> (accessed: 20 Aug. 2019).

labour market believe that companies could be stimulated to hire and keep older employees with economic measures like a reduction of social insurance payments or preferential taxation.

5.5. Educational and cultural policy

Projects in the branch of educational and cultural policy towards older people are probably the most visible initiatives. They position Russia as part of modern global trends. All over the country, though unevenly from region to region and from locality to locality, there are now clubs and education centres where older people can learn how to use the computer and the Internet, study foreign languages, have drawing classes, sing, dance, take part in sports and so on. One of the places where a broad programme of this kind was realised at the municipal level was Tuymazy, a town in Russia's Republic of Bashkortostan, chosen to represent the country, along with Moscow, in the WHO's Global Age-Friendly Cities programme. As a result, several projects took shape in this Bashkir town, including the Wisdom Ripening senior resource centre (launched in 2006), encompassing three major directions:

- a 50+ TV channel (created by and for people of that age),
- a tourist club, as well as
- the People's University with the following departments: English and German; Computer Science; Painting; Singing; Folk and Contemporary Dance; Religious Studies; TV Journalism; Handicraft; Gymnastics; and Chess.⁸

In big cities, these initiatives are related to the cultivation of a new class of third-agers. In Moscow, which is one of the leaders in this sphere, various senior clubs, UTAs, and activities for older people in neighbourhoods have recently been united under the flagship programme called *Moskovskoye dolgoletie* (Moscow Longevity). As of early 2019, the programme embraced 211,000 Muscovites aged 55 and older (85% women, 15% men).

Why and in what ways do older people participate in educational and cultural events? During the focus groups conducted in Moscow and Tuymazy, as a component of the implementation of the age-friendly programme, older people indicated some factors

⁸ <https://wisdomripening.org/> (accessed: 20 May 2019).

that prevented them from feeling safe and confident when getting around, for example, there is not enough time to cross the street (in the capital, the time when the green light is on has recently been extended at some zebra crossings) or overcrowded public transport (e.g., in Moscow). The respondents also complained about not being well informed about cultural events. For those who either do not use the Internet or who do not do it regularly, TV remains the main source of information, and to a lesser degree, radio and newspapers. According to Privalova (2015), when people are not satisfied with the urban environment, its accessibility and comfort, they may try to compensate for not attending central events by participating in local ones. For instance, among those who attended events of the previous Museum Night in the centre of Moscow, 7% were older than 55 while at the Book Night occasions in various locations around the city, 26% belonged to that age group. As pointed out by Napreenko (2015), after retirement age, 80% of Muscovites no longer actively participate in the city's cultural life. Nevertheless, working pensioners remain 35% more active than those who have stopped working. They regard participation in such events, along with work, as a means of retaining their social usefulness. Therefore, non-attendance may also be ascribed to the 'it's-not-for-people-my-age' attitude.

In a telephone survey carried out in 2012 on 1,204 randomly selected respondents aged 50+ in Ivanovo and the Ivanovo Region (Rogozin 2012), the informants were asked if they thought that people older than 50 could be educated and whether they personally wanted to receive some sort of training. While 65% gave an affirmative answer to the former question, the latter question only yielded 34% of positive replies. Four groups of respondents with different attitudes towards education were identified as a result of the study. The first group represented people with flexible views, open to new experiences, confident of capabilities of people 50+ and ready to learn themselves; 46% were younger than 54; 34% lived in the regional centre; 46% had higher education; 53% used the Internet at least once a month. The second group consisted of practical people with a stable position in life (the majority were aged 55–70, with 41% still working); they were sure of seniors' educability, but did not see much sense in their own training as that would mean unnecessary effort while their current

professional and other duties could be performed with the amount of knowledge and skills they already had. The third group expressed a wish to learn but did not believe in their own ability to fulfil that; 14% had dropped out of university (as a symbol of a life of unrealised dreams). The fourth group, consisted of people who were mostly focused on the family and who were disillusioned and often complained about poor health, doubted their own as well as their peers' ability to learn something new; 55% were older than 70; 38% were villagers; 55% had dropped out of high school; 38% did not use a computer; 38% had quit work a long time ago. According to Rogozin (2012), this is exactly the image of dull old age massively exploited by the media.

However, that is only one perspective – many others lead more satisfying lives well into advanced age, and are open to new knowledge and skills, for their own sake or if needed for practical purposes. A series of in-depth interviews was carried out in the Volgograd Region between 2011 and 2012 with members of a senior club as well as older students of a computer course. Based on these interviews, Kuznetsov and Sergeeva (2014) emphasise the following factors of the use (non-use) of the computer (and the Internet) which is the most in-demand skill among older learners:

- need (for work if still working, for communication and information),
- a wish to keep socially active, to preserve their self-respect ('the kids can while I can't') and a general interest which gradually turns into a need ('I can't do without it any longer'),
- the presence (absence) of guides (e.g. supportive course teachers or younger relatives who are ready to help; older people who have already mastered the computer may later become guides for their novice peers),
- competition of media (preference for the Internet over other sources of information and communication, like TV, books, written letters, etc., or vice versa),
- reflexivity (fear as too high a barrier between themselves and the new reality; fear of damaging the alien technology; fear they are incapable of using the technology; the necessity to take risks, and later fear of wasting their precious time on this new kind of entertainment).

As pointed out by Agapova (2016), in Russia, within the scope of educational theory, older adult education (or educational gerontology, or geragogy) is considered a constituent of adult education, or adragogy. After the October Revolution in 1917, the focus of adult education was the eradication of illiteracy; later, up to the 1970s, it focused on professional training and retraining, as well as night schools for working youth. In the last decades of the Soviet Union, the aim was to provide general cultural education for citizens. Meanwhile, the theory and methodology of adult education rapidly developed in that period.

The current shift towards older adult education reflects contemporary tendencies, the influence of Western experience and even immediate Western involvement. The latter case is illustrated by Agapova (2016), drawing on the example of the Society for the Dissemination of Political and Scientific Knowledge which was established in 1947, and later renamed the All-Union Society 'Znanie' (*knowledge* in Russian). It was the largest people's university in the Soviet Union and provided (ideologically loaded) lectures in various branches of science and executed anti-religious propaganda. In post-Soviet Russia, the organisation lost its popularity with citizens as well as the government's endorsement. Eventually, in 1996, with the support of the German Adult Education Association, it became the basis of a Third Age University, one of the first specialised older adult education institutions in the Russian Federation. The most important issues at that time, specifies Agapova, were the lack of teachers trained to work with older students and stereotypes regarding the role of older people in societal development. Consequently, the German organisation arranged training in Europe. Between 2002 and 2004, with the support of the European Union, a project entitled *The empowerment participation of older persons in the social and political processes of democratic development of Russia* was realised. Further training, seminars and conferences followed. A major forum on older people and education, which presented geragogy as a concept, took place in 2005 in Orel. By the mid-2000s, more than 250 teachers had been professionally certified and trained in innovative (activity-based) methods in older adult education. Research papers, as well as handbooks on geragogy, were published. During this period, multiple institutions, both state and non-state, were being established throughout the country.

The All-Russian Society 'Znanie' now functions in 65 regions. Each branch has its own focus, for example, biographical and intergenerational learning (Orel, Yaroslavl, Severodvinsk), volunteering (Kursk), creativity development (Chelyabinsk), information and computer technologies (Stavropol), or protection of the rights and interests of older people (Nizhny Tagil, Kamensk-Uralsk, Altai Region). Among other organisations which changed the quality of older adult education in Russia, Agapova (2016) mentions:

- the Siberian Association of Adult Education (created in 2000);
- the Centre of Women's Initiatives (since 1997 in Tosno, Leningrad Region; it now supports older women who arrange their own self-learning groups with a focus on history, psychology and legal knowledge);
- the Centre of Social Adaptation and Retraining Programmes in Novosibirsk (older people working as instructors for their peers);
- the ORT – St. Petersburg High Tech Centre (since 1995; it develops computer skills which can later be used for various projects, e.g. digital memoirs of victims of totalitarian regimes);
- the School of the Third Age (since 2004 in St. Petersburg; modelled on traditional Danish folk high schools, focusing on practical results and, apart from particular chosen courses, it embraces two basic, compulsory ones, Foundations of Democracy and Philosophy of Age).

Currently, however, as Agapova points out, the existing spectre of institutions of older adult education in Russia (community-based organisations; courses in libraries, museums, and cultural centres; third-age universities, etc.) cannot be described as a system. The theory of geragogy has made progress, but it has scarcely found its way into actual practice. There is no legal framework, while manuals are few and training is irregular. In 1994, the speciality of adult education was approved by the Ministry of Education; however, in 2000, the branch was excluded from bachelor's and master's degree programmes. Andragogy chairs have been established in some universities and state educational agencies, one of the leaders being the Chair of Andragogy of the Academy of Postgraduate Pedagogical Education in St. Petersburg. Agapova believes that a system of senior education training and research could be built based on the 'Znanie' network. In particular, the interregional branch in Orel has all the

necessary resources, but this can hardly be accomplished without state support and stable funding.

Many senior education institutions in Russia view learning in older age as a form of leisure/entertainment. Nevertheless, one can observe less typical cases, distinct from the standard computer-languages-art-sports model and differing from the mainstream senior policy as advanced by the authorities. One example is the above-mentioned School of the Third Age in the Nevsky District in the south-east of St. Petersburg within the NGO 'Dom Proektov' (House of Projects);⁹ an outline of the school activities can be found, an outline of which can be found in the case study by Dmitrieva (2016). Established in 2004 within one of the centres of social services of the district (so that it may fit in the state structure), it was patterned on Danish folk high schools (non-formal education) and partnered with HelpAge International (since April 2019). It did not initially focus on seniors, although this was how it was seen by the authorities, and it attracted older people, regardless. The motto of the organisation is civil society through civil enlightenment; thus, its objective when founded was the inclusion of older people in the process of building civil society at the grassroots level. The school claims to aspire to assist older people in their self-realisation and the development of social skills and leadership potential. It also wants to motivate them to participate in the life of their city and district, to facilitate mutual understanding and cooperation between generations, and to strengthen links with related organisations in other countries (arranging study trips, forums, seminars). The staff regard providing pure entertainment in their school as unethical because they believe that at this stage in life, people are at a crossroads and ought to take responsibility for themselves and the direction of their life. Through communicating with peers and participating in courses and projects, the students undergo self-identification and decide on desired future activities. Apart from the basic courses on the foundations of democracy and the philosophy of age, numerous standard and unique courses (based on the participants' own interests and experience) have been realised since 2004, among which are healthy lifestyle; handicraft; ICT; foreign languages; publishing; photography and filmmaking; journalism;

⁹ <https://hprojects.ru/> (accessed: 10 Aug. 2019).

creative writing; travel consulting; fairytale therapy; the history of religions; nature reserves; fashion; community volunteering; and house management.

According to the staff interviewed by Dmitrieva and the students who took part in the focus groups she conducted, the most successful projects realised by the students as a result of participating in the course were a travelling fashion club, which demonstrated the elegant style of women 55+, and a publishing house, where students publish their poetry, as well as fiction and non-fiction works. Other projects include a tourist club, a cycling club, the Third Age photo project (photos of students taken during school activities, which were exhibited in several venues around the city), and working as guides in St. Petersburg, among others. Some former students attempted to start and manage their own smaller schools of a similar kind, though as practice showed, bureaucracy may become an insurmountable barrier. In 2016, the social service centre abandoned its alliance with the school; therefore, the latter had to move into a smaller building and could no longer provide education in the same format and volume. Thus, according to Dmitrieva, the state organisation showed that it was not ready to see older people other than as consumers indulging in entertainment. Recently, the school won a presidential grant (allocated for NGOs), and the future will show how the situation unfolds.

5.6. Conclusions

With the number of people 60+ growing, they cannot be ignored by society, including policymakers. The Federal Project ‘The Older Generation’¹⁰ (run by the Ministry of Labour), which belongs to the National Project ‘Demography’, is devoted to older people.¹¹

¹⁰ <http://government.ru/rugovclassifier/475/events/>; <https://rosmintrud.ru/ministry/programms/demography/3> (accessed: 11 Aug. 2019).

¹¹ National Projects are successors of the National Priority Projects, a federal ‘human capital growth programme’, set out by President Putin in 2005, to be implemented by various departments at the federal and regional level; the current Projects, approved in 2018, include the following dimensions: human capital (healthcare, education, demography, culture); comfortable environment (safe high-quality roads, housing and urban environment, ecology); and economic growth (research, small and medium-sized enterprises, the digital economy, labour capacity, infrastructure modernisation).

They are also mentioned in the Healthcare National Project, in connection with the objective to raise life expectancy in the country and improve the quality of primary healthcare for older people.

In 2016, in the framework of 'The Older Generation' project, the Strategy of Actions for the Benefit of Senior Citizens in the Russian Federation up to 2025¹² was formulated. It declared that a society for all ages would be created which would involve using the potential of older people and taking care of them. It acknowledges the diversity of this population and the various needs of its assorted groups, and implies that it would make use of the system of legal, as well as organisational and economic measures, to ensure a decent standard of living; social inclusion; the prevention of elder abuse; accessibility of social services, geriatric medical care, medication provision, transportation, banking, information and communication technologies; equal access to basic and extra educational programmes; feasible employment; guarantees in terms of work conditions and salaries/wages; the prevention of workplace discrimination; the creation of conditions for volunteering, leisure, cultural and sports activities; and the development of a market of goods for this age category. The Strategy pledges to be instrumental in preparing the country for population ageing; to take into account older people's own opinions; to ensure the cooperation at all – federal, regional and local – levels as well interaction with the private sector; and not to forget rural seniors. It even envisages something unheard of in Russia, namely foster families for older people. Between 2015 and 2025, it plans to increase:

- the percentage of people 60+ practising sports from 3 to 10%;
- the number of geriatric beds from 1.26 to 5 per 10,000 people 60+;
- the percentage of older people in need of social care who receive it from 50 to 100%;
- the number of people in need of social care who are satisfied with it from 50 to 90%;
- the number of shops on wheels from 193,200 to 250,000–270,000;
- the number of buses for people with limited abilities from 1,173 to 2,370.

¹² <http://government.ru/docs/21692/> (accessed: 20 Aug. 2019).

The government regularly gathers and reports to Prime Minister Medvedev on the implementation progress. According to governmental reports, the current stage is as follows. In 12 regions, geriatric centres/wards/consultation rooms have been created (there are currently 350 certified geriatricians; 19 departments are now training those specialists). Senior clubs and other similar institutions function in many regions; in some of them, older people act as teachers and volunteers. In several regions, there is now specialised transportation for older people, particularly in rural areas, used to take them to geriatric centres, for instance. As a means of 'improving long-term care, support has been given to the NGO 'Starost' v Radost' (Old age is joy; the name was given to counter the traditional Russian saying 'starost' ne radost', that is 'old age is no joy')¹³ which sends volunteers to nursing homes (previously doing it without any state support). NGOs now constitute 10% of the organisations in the sphere of long-term care. According to Andrey Bocharov, Governor of the Volgograd Region, in some areas of the region he represents, it is the first time that up to 80% of older people have received any kind of help. The main mandates of the Prime Minister to the accountable ministries and regional authorities as a result of the latest governmental meetings were: to monitor the prices of mobile medical complexes and the products needed for them; to work through the issue of additional financing of the long-term care system; to approve the standard model of long-term care; to endorse and test the Active Ageing Index (euphemistically termed active longevity index in Russia's official, non-academic, discourse); to analyse the realisation of measures aimed at developing active longevity with examples of best practices to be made public; to elaborate the reform of neuropsychiatric clinics for older patients; to extend beyond January the 1st, 2020, the application of the zero tax rate for organisations providing social services; and to ratify regional programmes of active longevity and ensure older people's participation in them.

A policy may not necessarily be put into practice, or it may outpace practice, as was shown in this chapter in the sphere of social care, for instance. At the same time, some initiatives may arise at the grassroots level and may or may not receive the support of the state, as is the case with some NGOs and private

¹³ <https://starikam.org/> (accessed: 21 Aug. 2019).

enterprises working with and for older people; this is also true for older people's self-employment and volunteering. In some spheres, for example, education and the labour market, there are still gaps in the policy regarding older people. Even in cities which have the necessary material resources, a lot is wanting before those places can be considered truly age-friendly. However, if one traces back the government's agendas devoted to senior policy, one can see that just a few years ago, in the mid-2010s, they mostly involved another pension rise, or wishing the best to WWII veterans on Victory Day (and paying them some money before it) and on the International Day of Older Persons. Since then, the scope of ageing issues in focus has widened so much that one can speak of 'a paradigm shift in understanding ageing' (Grigorieva 2016), and not only in research, but at other levels, primarily in governmental policy. Naturally, not everything has been achieved. In the years to come, senior policy in Russia has challenges to face and perspectives to develop.

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Conclusions

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Ensuring a decent living standard for older people is the responsibility of the whole of society, and it arises from the principles of social justice. Zamelski argues that the state of evading this responsibility can hardly be called the common good of all citizens (art. 1 of the Constitution of Poland). 'The primary aim of activities undertaken by public administration bodies on behalf of older people is to provide them with the rights that are due to them, and which secure spiritual and material goods necessary to live a decent quality life' (Zamelski 2013, p. 322). A key to achieving the aim is designing the senior policy segment of the social policy so that it protects older people's rights and interests and enables the employment of diverse measures to meet their needs.

The necessarily brief outline of Hungarian, Russian and Polish senior policies presented in this monograph, and the examples of programmes for seniors implemented by the authorities in Moscow, Łódź, Újbuda and Nyíregyháza, lead to the following conclusions:

1. The development of senior policies in Hungary, Russia and Poland shows the increasing recognition of the consequences of population ageing.

2. Each of the three countries uses the main instruments of senior policy (social services, care, labour, education and recreation policies) in its own way to create an elderly-friendly society.

3. The Hungarian, Russian and Polish approaches to creating social services for older people are dominated by paternalism arising

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from the authorities' feeling of responsibility for providing seniors with decent living conditions. Unfortunately, paternalism means that services are created 'for' seniors rather than 'with' them.

4. In all three countries, the importance of local government programmes for older people has been increasing, as has the importance of NGOs acting for and with seniors. In Russia, the activities of the NGO sector have been subjected to politically-determined restrictions.

5. Hungary, Russia and Poland have created national strategies for senior citizens. These are: The National Strategy for Seniors (Hungary), The Strategy of Actions for the Benefit of Senior Citizens in the Russian Federation up to 2025 (Russia), and Social Policy for Older People 2030. SECURITY – PARTICIPATION – SOLIDARITY (Poland).

6. The Hungarian, Russian and Polish approaches to planning and implementing senior policy measures use conventional solutions such as family care, basic care services, or voluntary work, and they focus on people who need assistance because of old age and disabilities. Only Łódź decided to exploit the potential of ICT to support active and healthy ageing by launching a programme developed around telemedicine technology.¹ The wide range of ICT solutions capable of supporting the health and well-being of ageing societies implies that future social policies on older people will be increasingly designed with their availability in mind.

7. Older people gradually self-organise themselves and form different bodies that represent their interests before public authorities, such as the Senior Citizens' Parliament in Poland, which held its first sitting on 1 October 2015, the International Day of Older Persons. The process is a manifestation of seniors raising

¹ The EC's recent report *Research and innovation in the field of ICT for health, wellbeing and ageing. An overview* (https://ec.europa.eu/information_society/newsroom/image/document/2019-33/health_ageing_projects_list_2019_6BC92EFF-90F3-8A94-09FBFA3C4DFD150E_61321.pdf) (accessed: 15 Aug. 2019) presents HORIZON 2020 projects that offer solutions within elderly care, independent living, and active and assisted-living. Technological trends imply that, in the future, older adults will increasingly be supported by intelligent social robots (such as the Virtual Support Partner which can fuse facial expressions, intonation, gestures and other contextual information of the user's environment to provide empathic responses and services), ICT-based, personalised systems supporting ageing workers, worker-centric AI systems for work ability sustainability, and personalised assistants for smartphones.

awareness that they have the right to public participation. In Poland and Hungary, municipal seniors' councils, which are advisory and consultative bodies to local authorities, are being established more and more often to further the interests of older citizens.

8. The common characteristic of Poland, Hungary and Russia is that their governments' efforts to convince workers to delay retirement decisions meet with employers' general reluctance towards ageing workers. The labour market is unfriendly to people aged 50+, and even those who have turned 46.

9. The dull image of people aged 60+ should be largely blamed on the media, which are apparently unaware of how much weight official strategic documents attach to presenting older people as individuals who can be creative and contribute to building social capital despite their age, and to the importance of fostering intergenerational understanding.

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