



Economic and Social Council

Distr.: General
24 November 2008

Original: English

Commission for Social Development

Forty-seventh session

4-13 February 2009

Agenda item 3 (b) of the provisional agenda*

**Follow-up to the World Summit for Social Development and
the twenty-fourth special session of the General Assembly:
review of the relevant United Nations plans and programmes
of action pertaining to the situation of social groups**

Further implementation of the Madrid International Plan of Action on Ageing: strategic implementation framework

Report of the Secretary-General

Summary

Prepared in response to resolution 46/1 of the Commission for Social Development, the present report sets out a strategic implementation framework for the Madrid International Plan of Action on Ageing through the year 2012.

* E/CN.5/2009/1.



Contents

	<i>Page</i>
I. Introduction	3
II. Strategic implementation framework	3
A. Purpose, objectives and content of the framework	3
B. Determining key priority areas for further action on ageing	4
C. Implementation approaches	6
D. Essential tools	11
E. International cooperation	15
III. Recommendations	16
Annex	
Instrumental and outcome indicators regarding selected ageing-related programmes	18

I. Introduction

1. In its resolution 46/1, the Commission for Social Development requested the Secretary-General to propose a strategic implementation framework for the Madrid International Plan of Action on Ageing, 2002.¹ The present report is prepared in response to that resolution. The framework is based on an analysis of national activities since 2002, with a view to identifying policy priorities for the future, including measures for international cooperation to support national implementation activities.

II. Strategic implementation framework

A. Purpose, objectives and content of the framework

2. The strategic implementation framework is intended to assist Member States as they focus their efforts on implementing the Madrid Plan of Action through the remaining years of its first decade, to 2012. Much of the guidance to Member States has been derived from the results of the global first review and appraisal of the Madrid Plan, which started in 2007 and concluded in 2008, at the forty-sixth session of the Commission for Social Development. The framework builds on the lessons learned from the review and appraisal, including identification of the areas where effective implementation has been lacking, and seeks to chart a course for the next phase of the implementation process. Although the framework is intended to be universal, it acknowledges that countries are at different stages of economic and social development, as well as in the midst of different phases of population ageing. National actions on ageing should therefore be based upon what is useful, feasible and realistically achievable.

3. The framework emphasizes the need to determine key priority areas for the second half of the first decade of implementation of the Madrid Plan of Action in order to advance its forward-looking recommendations on ultimately improving the quality of life of older persons around the globe.

4. The present report explores several approaches for advancing the implementation process within the determined priorities, including empowering older persons and promoting their rights, raising awareness of issues on ageing and building national capacity on ageing. In addition, it introduces essential implementation tools aimed at developing national capacity on ageing, such as evidenced-based policymaking, mainstreaming, and participatory approaches to policymaking and to indicators development.

5. It should be emphasized, however, that the strategic implementation framework should be viewed as a promotional document, rather than as a technical one, since the recommendations contained in the Madrid Plan of Action continue to serve as an unwavering guide.

6. Although the focus of the framework is on national implementation activities, a corresponding objective is to improve international cooperation on ageing, including the institutional capacity of the United Nations system to support national

¹ *Report of the Second World Assembly on Ageing, Madrid, 8-12 April 2002* (United Nations publication, Sales No. 02.IV.4), chap. I, resolution 1, annex II.

policy efforts on ageing. This includes, for example, maintaining and strengthening the role of the United Nations regional commissions, which may facilitate the exchange of best practices at the regional level. It would also be necessary to strengthen focal points on ageing within all United Nations entities, thus enabling them to fulfil their responsibilities for furthering the implementation of the Madrid Plan of Action. In addition, there is a need to increase awareness among the specialized agencies, funds and programmes of the United Nations system of the growing significance of population ageing and the need to integrate it in the advisory and technical support they provide to Member States. Ageing needs to be mainstreamed into all development policies and programmes, such as poverty alleviation, health, education, agriculture, employment, infrastructure development and humanitarian assistance. It is therefore important for all organizations and bodies of the United Nations system to be increasingly involved in core dialogues on tackling ageing-related issues. While the regional commissions provide an overarching intergovernmental forum for the exchange of experiences, it is the specialized agencies and other bodies to which line ministries at the national level often relate most.

B. Determining key priority areas for further action on ageing

7. A key dimension of the strategic implementation framework is determining how to select priorities for continuing national action on ageing. The selection process could be carried out by analysing recent experience after the Second World Assembly on Ageing; reviewing past and current progress; selecting priorities against national challenges and opportunities and the recommendations contained in the Madrid Plan of Action; and choosing methods and indicators for monitoring and evaluation. Details of the process are elaborated in the present report.

8. The first review and appraisal of the Madrid Plan of Action pointed to major developments and significant trends in the area of ageing since the convening of the Second World Assembly on Ageing in 2002. In his report on the review (A/63/95), the Secretary-General identified both the major accomplishments and the persistent obstacles of the process. In determining priorities on which to focus in the coming years, countries may wish to build upon the areas in which they have demonstrated success, while also paying attention to areas where there have been shortcomings, with a view to developing strategies and practical approaches to overcome the obstacles and improve policy development in the future.

9. During the review and appraisal, Member States reported on the successful implementation of a number of policies and programmes benefiting older persons. Among these, were the establishment of new social protection mechanisms, including social pensions in developing countries, or reforms to secure existing pension schemes in more developed countries while buttressing their sustainability. New social pension schemes, for example, have been introduced in a number of countries, including Bangladesh, Bolivia, Namibia and Zambia, and have been shown to improve the economic situation of older persons.

10. There were also reports of extending health-care benefits to older persons and of providing training in geriatrics and gerontology to better correspond to the health needs of older persons. In Argentina, for example, a programme was instituted in 2002 to supply free generic medicines to older persons, and in Chile, older persons

currently receive physical check-ups at community centres that offer primary medical attention. Some success has also been reported in increasing the participation of older persons in various facets of society, including the workplace, along with greater awareness of, and attention to, such ageing-related issues as preventing the abuse of older persons. In Australia, for instance, the reporting of accusations of abuse within long-term care facilities became mandatory in 2007, following an incident of abuse in one of the country's aged-care homes. In addition, greater efforts have been made to help prevent discrimination against older persons and to promote intergenerational solidarity programmes.

11. Efforts to link ageing and development have also demonstrated some success, including greater recognition of the important contributions that people make to socio-economic development as they age, often in ways that cannot be measured in monetary terms. The *Guide to the National Implementation of the Madrid International Plan of Action on Ageing*, prepared by the Department of Economic and Social Affairs of the United Nations Secretariat, elaborates upon this, providing practical means for promoting a harmonious relationship between development and demographic ageing.²

12. Whereas the review and appraisal highlighted some successes, it also revealed a variety of common obstacles to implementing the Madrid Plan of Action, indicating significant gaps in progress. For example, while some countries reported on having extended formal social protection schemes to older persons, many others reported on having limited provisions for coverage. As a result, guaranteeing income security for older persons, in particular through sustainable social protection schemes, remains an ongoing challenge in many countries. Similarly, gains in the area of health care for older persons in some countries have been counterbalanced by a continual lack of access to, or even availability of, adequate care and health services in others. In particular, inadequate provision of long-term care services remains a persistent concern in many countries.

13. Other obstacles to implementation of the Madrid Plan of Action uncovered during the review and appraisal process included unsatisfactory arrangements for independent living, which undermine the opportunity for older persons to remain in their communities as they age; and a lack of education and training opportunities for older persons. Although there have been some signs of increased participation of older persons in society, in general, they continue to be excluded from full participation in political, social and cultural areas of societal life. Moreover, there remains an overriding need to empower older persons to claim their rights as citizens.

14. Largely because of age discrimination and the greater physical and emotional vulnerability that can accompany ageing, older persons in many countries experience assaults on their rights, and most legal systems fail to sufficiently protect them. An infraction of human rights can range from simply not being informed or consulted by policymakers on decisions that will have an impact on the lives of older persons, to acts of psychological abuse or physical violence, whether carried out by family members, caregivers or other members of society.

15. Unfortunately, in many cases, older persons are not fully appreciated and valued as members of society, and prevailing images of and corresponding attitudes

² Available from <http://www.un.org/esa/socdev/ageing/documents/papers/guide.pdf>.

towards older persons are often negative. Age discrimination also persists, often dubbed “ageism” — a systematic stereotyping and discrimination against people simply because they have reached a certain chronological point and are considered “old”. A particularly dangerous effect of age discrimination is the impact that it can have on the self-image of older persons themselves. Older persons can incorporate society’s negative stereotypes, creating and reinforcing feelings of disempowerment.

16. Both the successes and obstacles revealed during the review and appraisal pointed to lessons learned, which can provide a valuable guide to Member States as they develop the proposed framework. Among these, are the needs to overcome the lack of political will to confront ageing issues; to renew efforts to secure adequate resources, both human and financial; and to build national capacity on ageing, including through improved international cooperation.

17. Since each country had a unique experience during its review and appraisal of the Madrid Plan of Action, the selection of key priority areas on which to focus in the coming years will vary by country. Factors such as the pace of demographic ageing, a country’s stage of economic development and the degree of political power that older persons yield all contribute to the selection process. Despite these inherent differences, all countries are likely to share common priorities, including emphasizing the link between ageing and development, including treating ageing as an opportunity for development; establishing or maintaining sustainable systems of social protection to guard against poverty in old age; ensuring the participation of older persons in labour markets; meeting the growing demand for quality and accessible health care, including long-term care, for older persons; creating age-friendly environments; and guaranteeing the rights and participation of older persons in society. All of these priorities are interrelated and interdependent; for example, access to quality and affordable health care for older persons is directly related to maintaining the economic security and social participation of persons as they age.

18. The selection of methods and indicators for monitoring and evaluation is integral to the process of determining priorities for continuing national action on ageing. The development of targets and indicators is essential for monitoring and measuring progress in implementation and will help countries gauge whether they are truly moving forward towards reaching the goals set out in the Madrid Plan of Action. A selection of possible indicators is contained in the annex to the present report.

C. Implementation approaches

19. In order to help advance the achievement of the selected priorities on ageing, Member States can focus on a number of principal approaches for national policy actions. The approaches may correspond to the following areas: empowerment and participation; awareness-raising; and developing national capacity on ageing.

Empowerment and participation

20. Empowering older persons to become full and active participants in society is at the core of the Madrid Plan of Action, and entails actions of two sorts: immediate and long-term. Immediate action includes legislative measures to guarantee the basic rights of older persons and to prevent violence and abuse against them.

Legislative measures can range from guaranteeing equal access to health care, ensuring basic economic security and assuring the participation of older persons in important decisions that affect their lives. The long-term action should focus on establishing or sustaining positive images of ageing, not only in society in general but, more importantly, among older persons themselves.

21. At the international level, there are no legally binding documents specifically addressing the rights of older persons. Among the milestone documents of the United Nations on human rights are the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights, the International Covenant on Civil and Political Rights, the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of Persons with Disabilities. Only the most recent of these, the Convention on the Rights of Persons with Disabilities, makes specific reference to older persons. One can argue, however, that the universal nature of the documents implicitly recognizes the rights of older members of a society. To date, the United Nations Principles for Older Persons, adopted by the General Assembly in 1991 (see resolution 46/91, annex), constitutes the only internationally agreed human rights instrument addressing the needs of all older people.

22. The human rights approach is also clearly established in the Madrid Plan of Action. The aim of that document is to ensure that persons everywhere are able to age with security and dignity and to continue to participate in their societies as citizens with full rights. The first central theme of the Madrid Plan is the full realization of all human rights and fundamental freedoms of all older persons. Although the recommendations in the Madrid Plan are quite specific with regard to both ensuring the rights of older persons and guarding against their abuse and neglect, the document itself is not legally binding. As a result, deliberations have continued on the prospects for developing an international legal framework document on the rights of older persons. For example, representatives at the second regional intergovernmental conference on ageing, held in Latin America and the Caribbean in December 2007, adopted the Brasilia Declaration, in which, among other commitments, they pledged to organize the necessary consultations with Governments in the region to promote the drafting of a convention on the rights of older persons within the framework of the United Nations.³

23. Protecting the rights of older persons is central to any policy related to ageing and the most important prerequisite of empowerment. For the process of empowerment to become sustainable in any society, however, it is necessary to ensure that older persons are recognized and appreciated as valued and welcomed members. An active, healthy and productive older population has much to contribute, ranging from caregiving responsibilities in the home, to starting entrepreneurial activities, to becoming volunteers in their communities. Older persons are also important repositories of a society's history and values and provide needed intergenerational continuity, particularly in times of rapid transition.

24. It is thus important for Member States to encourage the promotion of positive, yet realistic, images of societal ageing and older persons. To that end, steps should be taken to encourage the media to move beyond the portrayal of negative

³ Brasilia Declaration adopted at the Second Regional Intergovernmental Conference on Ageing in Latin America and the Caribbean: towards a society for all ages and rights-based social protection (LG/G.2359, para. 26).

stereotypes, in order to highlight the full diversity of humankind, including both highly functioning older persons and those in need of care. For its part, the Department of Public Information can play a key role in formulating and disseminating positive media messages about ageing. The important contributions that older persons make, including as active members of the workforce and as unpaid caregivers or volunteers in their communities, should also be highlighted. Altering the way the media portrays older persons in order to present them in a more positive light can similarly help to shape societal consensus and build intergenerational trust and cohesion.

25. A new image of ageing cannot be created at once and usually involves a medium to longer-term perspective. Its promotion has to start with providing older persons with a secure and dignified place in society through legal and legislative measures. In India, for example, a three-year poorest areas civil society programme has been empowering poor older people to demand and exercise their rights to claim the pension benefits to which they are entitled. Simultaneous actions have to focus on promoting policies that are geared at establishing intergenerational cohesion in society and promoting policy action based on a social consensus, in order to avoid situations where older and younger generations “compete” for benefits and resources. These approaches are clearly expressed in the Madrid Plan of Action through its central themes, or overarching dimensions, and are worth reiterating in the strategic framework.

26. Positive images of ageing are also promoted throughout the recommendations of the Madrid Plan of Action, with one of its 18 priority issues directly devoted to images of older persons. Recognition of the experience, wisdom, authority, productivity and dignity of older persons has been a cultural norm throughout history. These values and norms, however, have been often neglected, and older persons are at times portrayed as a drain on society and the economy. It is thus important that images of older persons as attractive, diverse and creative individuals making vital contributions should compete for the public’s attention. At the same time, the substantial economic contributions that older persons make in their capacity as active consumers, earners and care providers should be recognized and valued. Promoting images of ageing that are more balanced will also help to negate exclusionary practices, in particular those geared towards older women, at the local and national levels.

Awareness-raising

27. Although more than six years have passed since the adoption of the Madrid Plan of Action, awareness of its contents, in particular among older persons themselves, remains limited. Unless greater efforts are made to educate the public and raise awareness about the plan’s multifaceted dimensions, its effectiveness will be constrained. Awareness-raising activities may include strengthening networks of national focal points on ageing, working with the regional commissions and enlisting the help of the Department of Public Information to expand media coverage on ageing issues. As mentioned in paragraph 5 above, the strategic implementation framework was conceived as a promotional document, intended to refocus attention on the key elements of the Madrid Plan.

28. Appointing a strong national focal point on ageing, within Government structures, can be a vital part of the awareness-raising efforts. The focal point should

have enough standing in the community to be able to reach out to older persons or their representatives in order to share information with them and incorporate their views in the policy development process. A sufficient number of countries at all stages of socio-economic development and population ageing have national focal points in place in order to enable policymakers to learn from one another.⁴

29. The regional commissions can encourage experience transfer between countries, either within or outside the regions. A corollary of this is to promote greater consultation between the United Nations regional commissions themselves in respect of their accomplishments and challenges. A number of regional commissions have developed innovative plans from which others might benefit.

30. In the area of health care, much can be done to raise awareness among health practitioners, including providing greater training in the field of geriatrics and gerontology. Health professionals can also focus more attention on assuring quality preventive, primary, acute, long-term and palliative care for older persons. Promoting better health and health care for older persons will help to boost their independence and ability to actively participate in society, factors which can greatly improve their public image.

31. Raising awareness among policymakers, stakeholders and the general public can also present an opportunity for building intergenerational solidarity for policy changes benefiting older persons. Using a life course perspective, for example, people can analyse the influence of earlier life decisions and the nature of the economy on poverty in old age. This may result in policy decisions that not only benefit today's older persons but also seek to influence the behaviour of younger people. Such policy approaches are extremely important in building the political support, particularly from younger generations, necessary to enact important policy changes.

32. Cooperation between government, civil society, academia and the media in promoting the message is also essential. Information can and should be presented in a format that is easy to understand, with catch phrases and slogans to attract the public's attention to issues concerning older persons. Organizations of older persons can assist in the networking and information dissemination process. Of particular importance, in this regard, is the need to target awareness-raising to older persons themselves. Well-informed and educated older persons are better positioned to actively and meaningfully participate in policymaking over issues that affect them. Governments can facilitate the process by reaching out to older persons and the organizations which represent them, providing them with needed information and soliciting their comments and feedback. The better informed that older persons become, the more worthwhile their contributions to policymaking can be.

Strengthening national capacity on ageing

33. Successful implementation of the Madrid Plan of Action hinges to a large extent on the capacity of national Governments to effectively respond to issues related to ageing. As such, considerable attention should be paid to enhancing national capacity on ageing, including by building institutional infrastructure,

⁴ For more details, refer to the *Guide to the National Implementation of the Madrid International Plan of Action on Ageing*, available from <http://www.un.org/esa/socdev/ageing/documents/papers/guide.pdf>.

investing in human resources, mobilizing financial resources and placing greater emphasis on research, data collection and analysis. Besides these quintessential elements, which constitute a capacity to plan and implement programmes and policies, other policy tools, such as evidence-based policymaking and data collection, mainstreaming, participatory approaches to policymaking, and indicators to measure progress are important.

34. Countries that have not yet developed a national plan or strategy on ageing are encouraged to do so. In addition, an important element regarding strengthening institutional infrastructure is to appoint a strong focal point on ageing. As discussed in paragraph 28 above, the focal point should have the confidence of the entire Government, not solely that of the minister of social welfare, because that individual will have to work across government departments and sectors, as well as with civil society groups.

35. Adequately trained planners are needed to take ageing-related issues into account, incorporate them into plans and programmes and develop indicators for monitoring implementation. Additional human resources needed for effectively dealing with ageing issues include actuarial and budgetary specialists, who can ensure that pension and social security schemes are sufficiently funded; health-care personnel, who are properly trained to care for an ageing population; and community service providers, who can make sure that the needs of older persons are met within their communities. The human potential of older persons themselves also needs to be nurtured and developed since people can continue to make valuable contributions to their communities as they age. Encouragingly, a number of countries are making a concerted effort to improve their capacity for meeting the human resources needs of an ageing society.

36. The mobilization of financial resources is another prerequisite for developing capacity and effectively implementing policies and programmes. In many developing countries, additional financial resources are required to support pensions and health-care programmes for older persons. To meet these financing challenges, most countries will require international cooperation, such as official development assistance that is specifically geared towards meeting the needs of older persons. At the same time, these countries should also explore innovative domestic resource mobilization efforts to ensure that the health and welfare of older persons are met. In addition, fund allocations are needed in developing countries and countries with economies in transition to provide microcredit and other forms of financial support to small-scale intergenerational enterprises that can help older persons become or remain self-sufficient.

37. Organizing financial resources for programmes, such as social security, pension plans and health care, is strongest in high-income countries. The concern of a growing number of high-income countries is not how to mobilize more resources but how to control costs for pensions and health-care plans at a time when the active working population is shrinking in proportion to the number of retired persons. To maintain adequate levels of financial resources targeted towards the needs of older persons will be one of the main challenges for implementing the Madrid Plan of Action and of retaining crucial capacity in that regard.

38. There is a persistent call for more and better data and information to assist in planning, implementing and monitoring programmes and policies on ageing. That global poverty data are not disaggregated by age is a continuing shortcoming,

making it difficult to accurately determine the pervasiveness of poverty among older persons. Moreover, the absence of such data forestalls efforts to evaluate progress in meeting the Millennium Development Goals, particularly with regard to halving extreme poverty and hunger among older persons. The ongoing difficulties in data collection efforts, particularly in developing countries, remain an obstacle to gaining accurate and timely information about the status of older persons throughout the world. Nevertheless, countries in different regions are demonstrating a growing capacity to obtain accurate and timely information on the ageing process, as evidenced by the convening of scientific meetings and the publication of research studies. This is particularly important with regard to feeding accurate data and research results into the policymaking process, based on reliable and representative information gathering leading to evidence-based policy development.

D. Essential tools

Evidence-based policies

39. Evidence-based policy is public policy informed by rigorously established objective evidence. An important aspect of evidence-based policy is the use of scientific studies to identify programmes and practices capable of improving policy relevant outcomes. In addition, it encourages a focus on results. Evidence-based policymaking based on facts that are obtained through data collection, research and analysis leads to political credibility as well as improved transparency and accountability. It can also be viewed as a result of improving capacity.

40. Census data, civil registration and representative surveys form the backbone of information gathering regarding ageing and older persons. Both census and civil registration have the advantage of universality. Surveys can provide in-depth information about particular, more detailed issues relevant to policy planners. They are cost-effective but do not reach as many individuals as the other two tools. All three instruments should be used widely and provide the necessary data for evidence-based policy planning and policymaking.

41. Opinion polls are helpful to inform policymakers about how content people are with certain policies and programmes. It is particularly important to ascertain whether older people themselves have been reached by a specific policy intervention. Through the poll, older persons can relate their experiences and concerns. The evidence should be gathered with due regard to differences based on gender, urban/rural residence and racial/ethnic or religious affiliations. It is important to recognize that older men and women are not a homogeneous group and that age impacts people differently, depending on many factors, such as urban/rural residence or the availability of family caregivers. In addition, the conditions, needs and priorities of older persons are likely to change throughout the period of old age.

42. Nevertheless, it often appears that the advancement of research on ageing and the efforts to formulate and implement policy responses to ageing, such as the Madrid Plan of Action, remain parallel, almost independent processes. Too often, policymakers are unaware of recent achievements in the science of ageing, while researchers are sceptical about the possibilities of seeing their findings implemented through the public policy action. It is obvious that the science of ageing and policy action on ageing have to be synergistic. That task, however, often remains unfulfilled.

43. Trying to close the gap between research and policy action, the United Nations Programme on Ageing and the International Association of Gerontology and Geriatrics have developed a research agenda on ageing for the twenty-first century.⁵ The essential characteristic of the research agenda is that it aims to provide solid scientific background for policy action on ageing, including identification of priorities, design of policy interventions, monitoring and assessment. The major priorities and the critical research areas are linked to the priority directions of the Madrid Plan of Action. Simultaneously, the research agenda encourages researchers to pursue studies in policy-related areas of ageing where the findings may have practical and realistic applications. Thus, the research agenda could form a basis for evidence-based policy planning and policymaking.

44. The importance of evidence-based policymaking is obvious and its increase over time has been a response to the perception that Governments need to improve their policymaking in a world characterized by rapid change and scarce resources. Despite the absence of statistics of older persons, for example, on HIV/AIDS prevalence and in natural disasters, evidence-based decision-making has increasingly become the cornerstone of sound policy planning and policymaking and has been the basis of key-related outcomes and programmes on ageing, progressively more so in developing countries.

Mainstreaming

45. The design of policies and programmes on ageing cannot be undertaken in isolation of the wider policy environment. Integrating or mainstreaming the concerns of older persons into all policies at the national level is a starting point.

46. Mainstreaming, a process of bringing issues that have not received the consideration they deserve to the centre of attention, is also a tool for focus and inclusion and has been a proxy for advocacy of various issues, including issues concerning older persons. By definition, mainstreaming is a strategy and a process as well as a multidimensional effort. Successful mainstreaming should lead to: greater social integration of older persons; and the inclusion of ageing into all aspects of social, political, economic and cultural life.

47. The first review and appraisal of the Madrid Plan of Action identified mainstreaming as a particularly challenging task for Member States, yet few policy approaches come close to being as powerful for building and sustaining capacity. This is because mainstreaming combines the interests of a particular group, namely, older persons, with those of other age groups and, in so doing, helps build intergenerational solidarity, multisectoral cooperation and a life-course approach. The combination builds political sustainability and may produce economies of scale.

48. Mainstreaming requires the consideration of the needs and interests of older persons across all government sectors, such as health, finance and transportation. Older persons can be directly or indirectly affected by virtually all programmes, even those targeting other groups. As a result, it may make sense to start by reviewing existing legislation, policies and programmes to determine how they impact older persons; what changes are needed if they impact older persons negatively; and what changes are needed to permit them to impact older persons positively. This means no policy or significant budget item can be approved before

⁵ Available from http://www.un.org/esa/socdev/ageing/stakeholders_academia.html.

its consequences for all sectors of society, including older persons, are examined. Few countries have yet reached this level of policy integration.

49. The overall objective of mainstreaming should be the achievement of more equitable development within a society for the benefit of all social groups. To view, for instance, health, education, employment or housing through the prism of a particular social group (i.e., older persons) promotes greater attention to the specific concerns of that group, as well as more inclusive policymaking. The success of such inclusive policymaking can be measured with another important tool: the participatory approach of policy assessment.

Participatory approach to policy planning, design, implementation and monitoring

50. The first review and appraisal of the Madrid Plan of Action showed that periodic assessment of policy implementation played an essential role in policy planning. Member States are encouraged to continuously monitor the implementation of the Madrid Plan beyond the first review and appraisal by accumulating pertinent information regarding the living conditions of older persons, which can be used for evidence-based policymaking. Data should be collected on an ongoing basis and the results could be transmitted to the Commission for Social Development at its annual sessions. One method to achieve this is the participatory approach that involves older persons directly in the collection of data.

51. The core of the participatory approach⁶ is participatory policy research, which could be defined as “a general term for investigations using principles, approaches and methods that enable local people to conduct their own analysis and that involve personal and institutional change”.⁷ The central idea of the participatory approach is to allow the governmental deliberative process to benefit from a sound and carefully considered participatory assessment of whether or not the objectives of the Madrid Plan of Action and of national policies on ageing are being achieved at local and national levels. The advantage of participatory evaluation of global and national policy documents on ageing is the inclusion of views from groups that may have been previously excluded from the process of development, implementation and evaluation of policies that affect their lives.

52. The participatory approach is expected to offer the following advantages: (a) to broaden the sources of information available to policymakers by complementing numerical data with qualitative information; (b) to provide governments with policy relevant information when other information does not exist, such as when statistics or other data are not available and cannot be gathered on short notice; (c) to establish priorities for policies and programmes that reflect peoples’ interests; (d) to monitor the implementation of policies and programmes and reorient them if needed; and (e) to provide an opportunity for people, particularly those who are excluded or marginalized, to articulate their conditions, needs and aspirations. Another advantage of the participatory approach is that

⁶ See *Guidelines for Review and Appraisal of the Madrid International Plan of Action on Ageing*, available from <http://www.un.org/esa/socdev/ageing/documents/MIPAA/GuidelinesAgeingfinal13%20Dec2006.pdf>.

⁷ HelpAge International, *Participatory Research with Older People: a Sourcebook* (London: HelpAge International, 2002) p. 80.

asking the older persons for their views and opinions per se tends to enhance their self-confidence.

53. One of the key attributes of the participatory approach is its flexibility, which originates from the major thrust of the Madrid Plan of Action, which promotes the participation of older persons in societal development. The Madrid Plan calls for the participation of older persons in decision-making processes at all levels, including their involvement in the elaboration, implementation and evaluation of the policy and programmes that affect their lives and well-being. At the same time, it promotes the development of a society for all ages, thus envisaging the participation of men and women of different ages in its implementation and evaluation. To realize a fully functioning participatory approach, a key part of a successful implementation effort is to build partnerships with various civil society stakeholders. Associations of older people may make particularly effective partners, but so can other civil sector organizations with reliable grass-roots networks. Some countries have already established independent advisory bodies on ageing and the concerns of older persons, consisting of academicians and representatives of the private sector and non-governmental organizations, tasked with integrating the issue of ageing into all policies. Such bodies could evaluate policy proposals by Governments, assess the impact of newly proposed policies on older persons and suggest possible changes. Advisory bodies could be established at the local and national levels.

54. After the results of the participatory approach have been collected and analysed, overall assessment tools or indicators should be used to process the information more systematically. The design of adequate indicators becomes a means of verifying the success or shortcomings of policies geared towards older persons.

Indicators to measure progress in policy implementation

55. Indicators are necessary for the development of effective policies and budgets that address the needs of older persons. The development of indicators has to be based on valid and reliable age-disaggregated data collection. Commonly defined as quantitative substitutes that are used to represent an elementary characteristic of a phenomenon, indicators provide a means of measurement. While measurement focuses on precise knowledge, the indicator is intended to be a tool for action. In other words, an indicator stands as a tool for policies and should therefore be strictly operational.

56. The indicators listed in the annex to the present report are based on the outcome of an expert group meeting held in Malta in 2003, during which international experts endorsed a suggested list of indicators to assess progress made in the implementation of the Madrid International Plan of Action on Ageing. The indicators are organized according to the 35 objectives of the Madrid Plan. Due to space limitations, only selected objectives and related indicators are listed. For the complete chart of indicators and additional information, refer to annex I of the publication *Guidelines for Review and Appraisal of the Madrid International Plan of Action on Ageing*.⁸

⁸ Available from <http://www.un.org/esa/socdev/ageing/documents/MIPAA/GuidelinesAgeingfinal13%20Dec2006.pdf>.

57. The suggested indicators are both qualitative and quantitative in nature and are divided into instrumental and outcome indicators. Instrumental indicators aim at evaluating the availability, scope and coverage of programmes and policies, which Governments have adopted to address issues of population ageing and improve the well-being of older persons. Outcome indicators attempt to identify positive or negative changes in the quality of life of older persons through participatory data collection methods.

58. Member States are encouraged to use the indicators extensively and to select the ones most pertinent to their identified top priorities regarding policies that address demographic ageing.

E. International cooperation

59. Full implementation of the Madrid Plan of Action will not be realized in many developing countries and countries with economies in transition without well-coordinated and enhanced international cooperation.

60. Member States have a multitude of resources they can draw upon in the years ahead, including their own regional plans and the technical assistance programmes of their regional commissions, the United Nations Population Fund, the United Nations Development Programme, the International Labour Organization, the World Health Organization, the Food and Agriculture Organization of the United Nations, the Department of Economic and Social Affairs, and other United Nations entities. These agencies and organizations have already produced a variety of materials, including working papers, toolkits, and guides to assist policymakers in making progress in implementing the Madrid Plan of Action. Other intergovernmental bodies, such as the World Bank, provide substantive and technical support for countries undertaking reforms of their pension systems. The Organization for Economic Cooperation and Development and the European Union have published extensively on ageing issues that affect developed countries. Nevertheless, the activities of intergovernmental organizations, including the organizations and bodies of the United Nations system, remain fragmented and isolated. A possible solution could be a consolidation of United Nations work on ageing in the form of a joint secretariat entity modelled on the Joint United Nations Programme on HIV/AIDS.

61. Each region of the world has countries that are at a more advanced stage of population ageing than others and may wish to share their experience through technical assistance at the bilateral or even regional level. Even a neighbouring country — one that is not different from one's own — may already be at a more advanced stage of policy development with regard to ageing and have valuable experience to share. These kinds of experience-sharing relationships may develop formally or informally. In that connection, the role of the United Nations regional commissions, as facilitators of regional cooperation on ageing, should be emphasized and supported.

62. The International Institute on Ageing in Malta offers a rich curriculum for policymakers and programme planners in developing nations. The International Social Security Association provides technical assistance and offers large databases of policy-relevant information. Several international non-governmental organizations, such as HelpAge International, offer support and a wealth of experience in developing countries in terms of conducting basic research; making

older persons aware of their rights; developing model programmes; and extending outreach efforts to older persons in emergencies. HelpAge International offers many useful manuals, toolkits and professional guidelines to advance policymaking in developing nations. Another non-governmental organization, International Federation on Ageing, utilizes its own member organizations in more developed nations to partner with peers in developing countries around projects of common interest and brings together governmental policymakers at its biennial conferences to exchange experiences in various aspects of policy and ageing.

63. The International Association of Gerontology and Geriatrics and Help the Aged, which is based in the United Kingdom are currently working with African countries to identify knowledge, training and research gaps in promoting a geriatrics perspective in national health-care systems. AARP has been bringing together policymakers and opinion leaders, including in the public, non-governmental organization and private sectors of both developed and developing countries, around economic security and health-care issues.

64. Despite these past and current efforts, technical cooperation seems to be most needed in the area of capacity development, specifically in respect of assisting with developing national plans of action on ageing, conceptualizing and implementing mainstreaming strategies and training concerning participatory policy evaluation.

III. Recommendations

65. **Taking into account the strategic framework for future implementation of the Madrid Plan of Action set out in the present report, which is based on the results of the first review and appraisal of the Madrid Plan, as well as on inputs from Member States and civil society actors, the Commission for Social Development may wish to encourage Member States to:**

(a) **Consult the strategic framework for future implementation of the Madrid Plan when developing their national strategies and policies on ageing;**

(b) **Refer to the Guide to the National Implementation of the Madrid International Plan of Action on Ageing prepared by the United Nations Secretariat for practical means to promote a harmonious relationship between development and demographic ageing and the inclusion of older persons in policymaking;**

(c) **Determine their priorities for the coming years by building on those areas in which they had achieved success during the review and appraisal process, while paying special attention to areas where shortcomings had been identified, with a view to improving policy development;**

(d) **Make comprehensive use of policy implementation approaches, such as empowerment and participation, awareness-raising and capacity development, and essential policy implementation tools, such as evidence-based policymaking, mainstreaming, and participatory approaches and indicators, as set out in the present report.**

66. **The Commission for Social Development may wish to call upon Member States to adopt legislative measures to guarantee the basic rights of older persons, including ensuring basic economic security, guaranteeing adequate**

health care, and assuring the participation of older persons in important decisions that affect their lives.

67. Furthermore, the Commission for Social Development may wish to recommend that Member States undertake a range of awareness-raising activities, including strengthening networks of national focal points on ageing, working with the regional commissions to exchange best practices and enlisting the assistance of the Department of Public Information to expand media coverage on ageing issues. It is also recommended that Member States reach out to older persons and the organizations that represent them, providing them with needed information and soliciting their feedback to make the national implementation process inclusive.

68. The Commission for Social Development may also wish to invite Member States to review their national capacity for policy development concerning older persons and demographic ageing, with a view to implementing appropriate measures to enhance their national capacity in that area of policy development, as necessary. The Commission may wish to invite international and bilateral donors to support developing countries and countries with economies in transition in strengthening their national capacity in that regard.

69. The Commission for Social Development may also wish to encourage Member States to promote the development of regional and subregional networks of experts and practitioners from Government, non-governmental organizations, academia and the private sector in order to increase the potential for policy action on ageing.

70. The Commission for Social Development may wish to invite the United Nations system to strengthen its capacity to support international action on ageing, with a view to deepening understanding of issues related to ageing, including the effectiveness of related policy measures. In that regard, the Commission for Social Development may wish to appoint a special rapporteur to examine the rights of older persons and report on his/her findings to the Commission at its regular sessions.

Annex

Instrumental and outcome indicators regarding selected ageing-related programmes

Priority direction I: Older persons and development

Issue 1: Active participation in society and development

Objective 1: recognition of the social, cultural, economic and political contribution of older persons

Instrumental indicators

- Availability, scope and coverage of programmes promoting and facilitating participation of older persons in social, political, cultural and economic matters (e.g., social pensions schemes, employment promotion measures and retraining for older persons)

Outcome indicators

- Percentage of older persons among volunteers and/or percentage of volunteers among older persons
- Percentage of membership of older persons in a club, organization or religious institution
- Percentage of older persons reporting voted in last election

Issue 5: Intergenerational solidarity

Objective 1: Strengthening of solidarity through equity and reciprocity between generations

Instrumental indicators

- Availability, scope and coverage of initiatives for strengthening greater intergenerational solidarity

Outcome indicators

- Percentage of older persons with a positive view towards younger/older generation
- Percentage of older persons providing support (e.g., monetary, caregiving) to younger members of the family/community/neighbourhood
- Percentage of younger persons having a positive view of older persons
- Percentage of older persons caring for grandchildren

Issue 7: Income security, social protection/social security and poverty prevention

Objective 1: Promotion of programmes to enable all workers to acquire basic social protection/social security, including, where applicable, pensions, disability insurance and health benefits

Instrumental indicators

- Availability, scope and coverage of legislation ensuring basic social protection for all ages
- Availability, scope and coverage of programmes of social protection such as non-contributory pensions

Outcome indicators

- Percentage of older persons benefiting from basic social security/protection programmes
- Percentage of older persons using various public-health services
- Worker-to-retiree ratio
- Percentage of health service users who are satisfied with services received

Priority direction II: Advancing health and well-being into old age

Issue 1: Health promotion and well-being throughout life

Objective 2: Development of policies to prevent ill-health among older persons

Instrumental indicators

- Availability, scope and coverage of non-communicable disease prevention programmes (including mental health, vision, hearing and dental health), particularly at the primary health-care level
- Adoption of safety standards to prevent injuries at all ages
- Availability, scope and coverage of age-friendly primary health-care facilities
- Availability, scope and coverage of programmes promoting health-related quality of life and general quality of life

Outcome indicators

- Life expectancy
- Healthy life expectancy
- Changes of life quality
- Disability rate
- Chronic disease morbidity

Issue 4: Training of care providers and health professionals

Objective 1: Provision of improved information and training for health professionals and para-professionals on the needs of older persons

Instrumental indicators

- Number of primary health-care workers (doctors, nurses, physical therapists, district health workers, lab technicians, social workers etc.) trained in the core competencies of geriatrics
- Number of geriatricians in geriatric care
- Number of health-care and social-care professionals with training in the care of older clients, per capita
- Number of informal caregivers trained in basic knowledge regarding the special care of older persons

Outcome indicators

- Percentage of older persons having received health care by specialized geriatric services
- Percentage of older persons receiving informal care from trained people

Issue 6: Older persons and disabilities

Objective 1: Maintenance of maximum functional capacity throughout the life course and promotion of the full participation of older persons with disabilities

Instrumental indicators

- Availability, scope and coverage of programmes aimed at maintaining the highest level of functional capacity throughout the life course
- Availability, scope and coverage of policies and programmes creating an age-friendly environment
- Availability, scope and coverage of programmes dealing with disabilities at all ages

Outcome indicators

- Number of older persons covered by programmes aimed at preventing the decline of functional capacities
- Number of dwelling units adapted to the needs of older persons with disabilities

Priority direction III: Ensuring enabling and supportive environments

Issue 1: Housing and the living environment

Objective 1: Promotion of “ageing in place” in the community with due regard to individual preferences and affordable housing options for older persons

Instrumental indicators

- Availability, scope and coverage of programmes promoting age-integrated communities

- Availability, scope and coverage of legislation requiring elderly parents to be supported

Outcome indicators

- Percentage of older persons reporting on their housing and living conditions as age-adequate
- Percentage of households with older persons having a toilet, bathing facilities, sewage disposal, solid waste disposal, electric lighting, improved sanitation and safe water
- Percentage of older persons living with a son/daughter or a grandchild

Issue 2: Care and support for caregivers

Objective 1: Provision of a continuum of care and services for older persons from various sources and support for caregivers

Instrumental indicator

- Availability, scope and coverage of programmes facilitating family and community care for older persons

Outcome indicators

- Percentage of older persons receiving family, community and Government support services
- Percentage of family and community caregivers receiving Government support services
- Percentage of caregivers expressing satisfaction with support received in their role as caregivers

Issue 3: Neglect, abuse and violence

Objective 1: Elimination of all forms of neglect, abuse and violence of older persons

Instrumental indicators

- Availability, scope and coverage of legislation to combat elder neglect, abuse and violence
- Availability, scope and coverage of programmes combating neglect, abuse and violence against older persons, including programmes for awareness-raising among the general public and training of health and social services professionals regarding characteristics of neglect, abuse and violence against older persons
- Availability, scope and coverage of programmes facilitating report of neglect, abuse and violence against older persons
- Development of tools detecting neglect, abuse and violence against older persons

Outcome indicators

- Percentage of older victims reporting neglect and abuse
 - Incidences of reports by older persons of neglect, abuse and violence
 - Incidences of reports by others on neglect, abuse and violence against older persons
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