

**Quality of Life and Management of Living Resources  
Key Action 6: The ageing population and disabilities**

**MERI - Mapping existing research and identifying  
knowledge gaps concerning the situation of older  
women in Europe**

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## 1. Project objectives and work plan

Approximately every fifth person in Europe is a woman aged 50 years or more. Despite this, previous research has shown that scientific studies and official statistics tend to neglect them as an independent target group.<sup>1</sup> There is clear evidence in the work of Non-Government Organisations (NGOs) that, compared with men, older women take on a greater burden of work in their families and neighbourhoods; are more likely to be isolated in the last years of their lives; may sometimes receive poorer or less appropriate treatment for illness; and lack interest in political representation. In older people's organisations, men have often taken over decision-making functions while women's organisations concentrate mainly on issues relevant to the lives of younger women.

The main objectives of the MERI project were

- to increase knowledge about the specific living conditions and problems of older women in order:
- to improve the empirical basis for:
  - work by national and European associations aimed at older women and/or intergenerational relations,
  - social and public policy,
  - current and future research work on the living conditions of older women,
- to raise the general public's awareness about the situation of older women.

The project's objectives complied with demands made by scientists, representatives of associations and national governments attending the European conference on "Equal Opportunities for Older Women".<sup>2</sup>

Against this background, the MERI project aimed at identifying the state of art regarding the specific situation of older women and corresponding research and publication gaps. The project research was oriented methodologically to the idea that new findings were not only to be addressed to the scientific community and a small circle of experts but also considered a wider audience and practical implications. The method of analysis used was the mapping exercise procedure whereby the spatial dissemination of the information is examined in order to identify "blind spots" in the research landscape.

Research areas under scrutiny included health, education and qualifications, paid and unpaid work, income, social inclusion, violence and interest representation, with special attention given to selected sub-themes.<sup>3</sup> Special emphasis was also placed on questions of ethnicity in all these areas. Where adequate, the results were compared with available information concerning older men.

The second working step included the collation and analysis of publicly accessible data from national statistics offices examining the degree of differentiation by age and gender, as well as yet unpublished data stocks which were assessed according to their possible inclusion in a future, more comprehensive statistical publication policy. Of particular interest were data

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1 See Stiehr, Karin; Huth, Susanne (Hg.): *Webwitches and other older women*, [www.sophia-net.org](http://www.sophia-net.org); Exchanging information and discussing experience on the Internet, Findings of a project in Austria, France and Germany, Verlag Peter Wiehl, Stuttgart, Marburg, Erfurt 2001.

2 1-2 February 2001 in Brussels, with the financial support of the European Commission and the German Ministry for the Family, Senior Citizens, Women and Youth.

3 The issues mentioned correspond to the findings formulated in the conference resolution by the women researchers and NGO representatives, see: Karin Stiehr, Susanne Huth (ed.), *Chancengleichheit für ältere Frauen in Politik und Gesellschaft (Equal Opportunities for Older Women in Politics and Society – Égalité des Chances pour les Femmes âgées, dans la Politique et dans la Société)*, Stuttgart, Marburg, Erfurt, Wiehl 2001, or [www.sophia-net.org/english/resolution\\_e.htm](http://www.sophia-net.org/english/resolution_e.htm).

connected with the areas and issues already mentioned, especially the labour market, education, health, income, social benefits and political participation, e.g. via elections.

Based on these results, within a European seminar measures for future research and other socio-political activities were to be discussed with representatives of the European Commission, national governments as well as relevant European and national umbrella associations.

The project findings were made accessible to the general public on websites concerned with exchanging information on issues related to older women: [www.sophia-net.org](http://www.sophia-net.org) and [www.own-europe.org](http://www.own-europe.org).

## *2. Methodological proceedings*

### 2.1 Definition of the target group of research

The determination of who should be considered an “older woman” – initially put at age 50+ – actuated a broad discussion among the research team.

Counter-arguments centred on the following issues:

- While even the age-group 65+ characteristically consists of two generations of older women – the younger, healthy and active group, and the older generation, including the more frequently dependent needing care – the inclusion of women aged 50-65 years increases the difficulties of a comparative perspective.
- The broader approach using the age 50+ does not take into consideration the self-perception of women. Women of 50 years generally do not feel like older women (and the same is true for very much older women).
- Official statistics are oriented towards labour market issues where the age of 60 or 65 is used as an indicator for old age.

Pro-arguments were based on the following arguments:

- Traditional research on older persons focuses on the age-group 65-75 years. For many countries not only was there a lack of research for younger old people, but also for the very old.
- Official and empirical retirement ages differ considerably in all European countries. A definition of “old” or older age starting at 50 allows for the inclusion of labour market issues and problems facing older women in particular.
- A long-term inclusive research perspective can contribute to an elaboration of preventive measures concerning any special risks associated with ageing, as well as necessary improvements in services and policies.
- As a secondary analysis project, MERI only registers concepts of older age already used in research work and official statistics, but could potentially reveal any need for a broader perspective.

The discussion resulted in the conclusion that “older” women are defined in the MERI project as women aged 50 and over.<sup>4</sup>

A second part of the discussion focused on the question as to whether the heterogeneity of the age-group 50+ could be conceptualised by subdividing older women into different age groups. Different categories were discussed:

Age concepts:

- Chronological age (number of years)
- Social age (based on external perceptions)

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4 This decision was made although in Sweden two NGOs didn't accept the term “older women” for the 50+ group at all.

- Psychological age (based on self-perception)
- Biological age (physiological status)

Age categories (set up by researchers, e.g. in the Belgian analyses):

- Middle age (50-64)
- Older age (65-74)
- Third age (75-84)
- Fourth age (85+)

Generations of older women within a family (used in research on care):

- Grandmothers
- Mothers
- Daughters

Socio-historical generations:

- Born before World War II (“pre-war generation”)
- Born during World War II (“quiet generation”)
- Born after World War II (“protest generation”)

Working status:

- Gainfully employed
- Unemployed
- Retired

All categories are constructions dependent upon specific research interests, and thus plausible. Again in MERI these concepts and observations could only be noted without creating new ones.

## 2.2 Involvement of partners at NGO level

In order to include the specific information requirements of practitioners at NGO level in the development of the working concept, a short questionnaire was elaborated and disseminated at national level. Its objective was to obtain a preliminary overview on levels of awareness enjoyed by older women in the work of NGOs, and also to enrich and broaden the conceptual debates of the MERI partners. The analysis of responses focused on additional information that could stimulate the design of the research and ensure the best possible practical use of the project outcomes.

Representatives of NGOs were asked:

- For information on who to contact in the respective NGOs for personal interviews,
- to note the age-groups of older women for whom they work,
- to indicate issues on which their work was targeted,
- to describe the main aims, activities, challenges and opportunities in their work for older women, and
- to indicate areas in which information or additional information about the situation of older women would be desirable in order either to facilitate their work or promote future work initiatives in their organizations.

Depending on the national context, questionnaires were sent to organizations dealing with women’s or older person’s concerns. Only a few organisations were found which were explicitly oriented to older women’s issues.

In general NGOs were reluctant to take part in the research. For the majority involving their expertise in a research project was a new approach since they are accustomed to being treated as a consumer rather than an active partner in research work. For women’s organisa-

tions in particular it was noted that they tend to focus mainly on the needs of younger women. However, as a positive side effect, several NGOs “discovered” older women as a target group and showed interest in becoming involved in the project. In some countries NGOs made plans to stay in touch through meetings or personal dialogue and pass on project results. Some important conceptual recommendations were made by these NGOs, and their contributions became part of the conceptual framework.

In addition to the involvement of NGOs at national, regional and local level, close relations existed and were strengthened between MERI partners and the following international organisations in the course of the MERI project:

- The European Forum on Population Ageing Research,
- Older Women’s Network (OWN Europe),
- AGE Platform,
- EURAG,
- FERPA and
- The UN Sub-Committee on Older Women.

These organisations indicated great interest in the progress of the project and expressed their intention to contribute in the dissemination of results.

### 2.3 Themes and sub-themes to be covered in the analysis on the living conditions of older women in Europe

The following themes and sub-themes were considered to be relevant for the analytic framework on the living conditions of older women in Europe:

1. Health
  - 1.1 General health aspects
  - 1.2 Physical disorders and disabilities
  - 1.3 Mental disorders and disabilities
  - 1.4 Medical treatment (cure) and health care
  - 1.5 Care at home
  - 1.6 Care in institutions
  - 1.7 Healthy lifestyles, self-care, prevention
2. Education
  - 2.1 General education
  - 2.2 Professional and vocational training
  - 2.3 Life-long learning
3. Work
  - 3.1 Labour market participation
  - 3.2 Working areas, working conditions and attitudes towards older workers
  - 3.3 Exit from the labour market
  - 3.4 Unpaid work in the family
  - 3.5 Unpaid work in social networks
4. Material situation
  - 4.1 Sources and levels of income
  - 4.2 Social protection systems effecting older women
  - 4.3 Consumption of goods and services
  - 4.4 Housing conditions and equipment
  - 4.5 Financial support given to family members
5. Social integration, participation and other social issues
  - 5.1 Household structure and marital status
  - 5.2 Partnership relations

- 5.3 Intergenerational relations (macro level)
- 5.4 Sexuality
- 5.5 Kinship networks
- 5.6 Friendship, neighbourhood and community networks (local level)
- 5.7 Mobility and accessibility
- 5.8 Leisure and cultural activities
- 5.9 Volunteering
- 5.10 Ageism and other kinds of discrimination
- 5.11 Socio-psychological aspects
- 6. Crime and abuse
  - 6.1 Crime and abuse in public environments
  - 6.2 Crime and abuse in families
  - 6.3 Crime and abuse in health care and homes for the elderly
- 7. Interest representation
  - 7.1 Political participation
  - 7.2 Representation in interest groups and lobby groups
  - 7.3 Participation in formal and informal decision-making processes

Available information on the different issues was gathered in a database. In addition, bibliographical details were included:

1. No. of study by country
2. Name of the author(s)
3. Title
4. Type of literature: monograph, article or grey literature
5. If anthology: name of the editor(s), title of anthology
6. If journal/magazine: name of journal/magazine
7. If anthology or journal: volume, no. and pages
8. Publishing company: name and location
9. Year of publication (1993-2002)
10. Edition
11. Year of 1<sup>st</sup> edition
12. ISSN / ISBN
13. Source of supply for grey literature
14. Language

Technical provisions were made to gather substantive questions and methodological approaches with indications of the relevance of results for older women generally, for specific groups of older women, and for older women compared to other population groups.

The elaboration of a database structure was not part of the proposed concept, but evolved as a useful working tool. Initially intended to be used only as an internal device for collating results, a rich data collection with detailed findings is now available for external interested persons upon request in 11 of the participating countries. In Sweden, the database was not used. It was legally required but not feasible to contact all scientists who had published data in order to get permission to store it.

## 2.4 Criteria for studies under analysis

The aim in analysing existing studies was to achieve a systematic overview of existing knowledge concerning the living conditions of older women in the participating countries, and to identify knowledge gaps.

Studies carried out in the past decade (1993-2002) were collated at national level, using the list of themes and sub-themes considered to be relevant. If more than one study were found on a specific aspect, the more recent results were noted as a rule. If no research on older

women existed, surveys on older persons in general were examined as to their relevance to the living conditions of older women. Empirical studies were analysed in detail, while purely theoretical papers – not forming the centre of investigation – were noted but not included in the databases. Local surveys were only taken into account if no research at a more general level existed. Empirical findings on the defined themes and sub-themes were differentiated with respect to their focus on:

- Older women in general,
- older women compared with older men,
- older women compared with younger women,
- specific groups of older women (e.g. single, poor, very old, ethnic minorities, religion, rural – urban, other groups).

The national reviews on studies aimed to provide:

- A general description of available knowledge concerning the themes and sub-themes on the living conditions of older women,
- empirical findings on the living conditions of older women, where possible in comparison with other population groups or with respect to specific groups of older women,
- an assessment of research needs based on gaps identified in knowledge.

## 2.5 Criteria for official statistics under analysis

The main objective of the research on statistics was to analyse the public availability of data on the situation of older women from official statistics. As many official statistics are published within an economic perspective, a gerontological focus is lacking in many countries. As result, official statistics often do not differentiate between categories beyond official retirement age. Though comprehensive data on the living conditions of older women are available in most of the countries, their accessibility can be difficult and expensive.

The collation of official data was again oriented again towards the above-mentioned list of themes and sub-themes, and results were classified within the following categories:

- No data at all was available in regularly accessible sources.
- Available data took into account age but was not gendered.
- Available data took into account gender, but age groups were not sufficiently differentiated.
- Available data was gendered and differentiated sufficiently in age groups (in 10 year groupings, or better still in 5 year groups).

Since the availability of data differs considerably in the participating countries, each researcher had to choose an individual procedure for data collection following some jointly agreed criteria:

- As regards the period under study, only recent statistics were of interest. There were no resources to work on time series.
- If recent data on a sub-theme was found, other sources were not investigated for the same sub-theme.
- Eurostat sources were only used by the European coordinator for basic demographic data. National data are usually more current than European statistics, and national statistical offices are the addressees for the findings on the availability and potential improvements of data concerning the living conditions of older women.

The national reviews of official statistics aimed at including recommendations such as:

- improving gender differentiation in official publications,
- improving age-group differentiation in official publications,
- special gendered editions on the situation of older people,

- special editions on the situation of women, taking in account older age-groups,
- regular up-dates of existing editions.

Knowledge based on the analysis of studies was complemented by the findings from official statistical sources and thus, the final national articles on the living conditions of older women in the respective countries integrated findings from both areas.

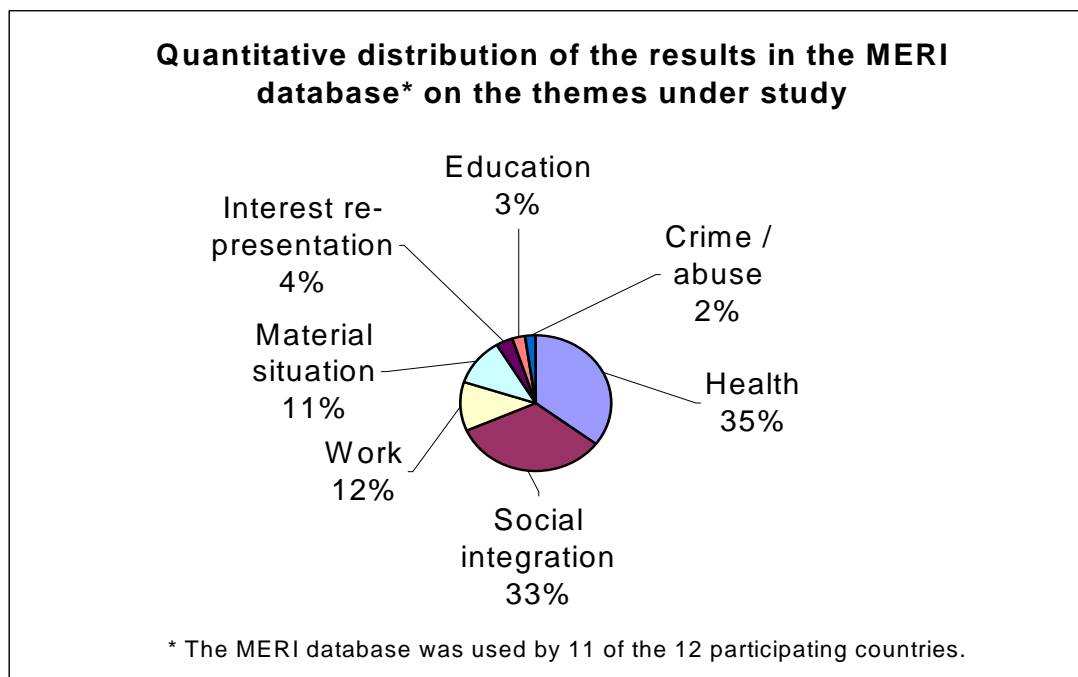
### 3. The Empirical basis for the research on the living conditions of older women in Europe

#### 3.1 Overview on the availability of national studies

The database for the collation of findings in national studies facilitated a quantitative overview on the distribution of knowledge per theme, sub-theme and country. Respective results are available for all participating countries except Sweden.

Although no national researcher can guarantee that all potential sources were identified, while different ways of investigation may lead to deviations in the comparison of country specific results, the European distribution of available findings mirrored the situation in many countries. At the European level:

- approximately one third of all findings were related to the areas “health” or “social integration”,
- approximately every tenth finding was related to the area of “work” or “material situation”,
- overall of minor importance were the areas “interest representation” (4% of all findings), “education” (3%) and “crime and abuse” (2%).



These results are composed of national contributions as follows:

**Quantitative distribution of the results  
in the MERI database on themes and  
subthemes under study**

	Total	Austria	Belgium	Finland	France	Germany	Greece	Italy	Portugal	Spain	The Netherlands	United Kingdom
<b>1. Health</b>	<b>496</b>	39	34	35	73	24	11	68	53	7	57	95
1.1 General health aspects	100	10	4	8	20	11	5	13	4	1	6	18
1.2 Physical disorders and disabilities	80	6	7	5	10	3	1	7	7	0	11	23
1.3 Mental disorder and disabilities	47	2	8	2	7	2	0	3	7	1	9	6
1.4 Medical treatment (cure) and health care	66	4	7	12	6	2	0	14	5	1	3	12
1.5 Care at home	53	6	0	1	6	2	3	8	11	1	5	10
1.6 Care in institutions	36	1	2	2	7	2	0	2	13	1	4	2
1.7 Healthy lifestyles, self-care, prevention	85	8	0	5	15	0	2	17	4	2	16	16
1.8 Others	29	2	6	0	2	2	0	4	2	0	3	8
<b>2. Education</b>	<b>41</b>	8	2	4	3	5	1	6	4	1	4	3
2.1 General education	20	1	2	0	2	2	1	2	4	1	3	2
2.2 Professional / vocational training	7	1	0	1	1	1	0	2	0	0	0	1
2.3 Life-long learning	13	6	0	3	0	2	0	2	0	0	0	0
2.4 Others	1	0	0	0	0	0	0	0	0	0	1	0
<b>3. Work</b>	<b>163</b>	7	22	5	19	28	6	13	14	3	22	24
3.1 Labour market participation	56	2	9	1	9	7	0	3	7	0	10	8
3.2 Working areas, conditions and attitudes towards older workers	19	1	6	2	1	1	0	1	0	0	2	5
3.3 Exit from the labour market	30	3	3	2	5	5	1	1	3	0	2	5
3.4 Unpaid work in the family	46	1	3	0	3	12	5	7	3	3	4	5
3.5 Unpaid work in social networks	8	0	1	0	1	1	0	1	1	0	3	0
3.6 Others	4	0	0	0	0	2	0	0	0	0	1	1

**Quantitative distribution of the results  
in the MERI database on themes and  
subthemes under study**

	Total	Austria	Belgium	Finland	France	Germany	Greece	Italy	Portugal	Spain	The Netherlands	United Kingdom
<b>4. Material situation</b>	<b>160</b>	15	10	6	23	31	8	16	18	2	17	14
4.1 Sources and levels of income	56	3	6	0	9	11	3	6	7	1	3	7
4.2 Social protection systems	52	10	1	3	10	9	3	2	3	0	5	6
4.3 Consumption of goods and services	10	0	0	2	1	3	0	0	0	0	4	0
4.4 Housing conditions and equipment	20	2	3	1	2	8	0	0	2	0	2	0
4.5 Financial support given to family members	4	0	0	0	0	0	1	0	3	0	0	0
4.6 Others	18	0	0	0	1	0	1	8	3	1	3	1
<b>5. Social integration, participation and other social issues</b>	<b>464</b>	29	30	27	77	60	8	81	53	11	55	33
5.1 Household structure and material status	49	5	2	1	17	3	3	6	10	0	0	2
5.2 Partnership relations	27	0	2	1	7	3	0	1	4	0	6	3
5.3 Intergenerational relations (macro level)	30	0	4	3	7	2	0	3	6	0	2	3
5.4 Sexuality	26	3	0	2	6	4	0	10	0	1	0	0
5.5 Kinship networks	39	5	0	0	9	9	0	5	11	0	0	0
5.6 Friendship, neighbourhood and community networks (local level)	47	1	0	0	4	11	1	8	9	0	11	2
5.7 Mobility and accessibility	15	3	1	2	1	2	0	1	4	0	0	1
5.8 Leisure and cultural activities	46	9	7	0	6	4	1	9	2	2	3	3
5.9 Volunteering	13	1	2	1	1	3	0	3	1	0	1	0
5.10 Ageism and other kinds of discrimination	56	0	6	4	1	7	2	10	2	0	14	10
5.11 Socio-psychological aspects	94	1	5	13	12	11	1	21	4	7	10	9
5.12 Others	19	1	1	0	3	1	0	4	0	1	8	0

**Quantitative distribution of the results  
in the MERI database on themes and  
subthemes under study**

	Total	Austria	Belgium	Finland	France	Germany	Greece	Italy	Portugal	Spain	The Netherlands	United Kingdom
<b>6. Crime and abuse</b>	<b>30</b>	0	2	5	9	4	0	1	6	0	0	3
6.1 Crime and abuse in public environments	7	0	2	1	2	1	0	0	1	0	0	0
6.2 Crime and abuse in families	12	0	0	4	3	0	0	1	3	0	0	1
6.3 Crime and abuse in health care and homes for the elderly	5	0	0	0	2	1	0	0	2	0		0
6.4 Others	6	0	0	0	2	2	0	0	0	0	0	2
<b>7. Interest representation</b>	<b>49</b>	3	6	1	3	8	1	14	0	1	6	6
7.1 Political participation	10	0	1	0	2	1	1	3	0	0	2	0
7.2 Representation in interest groups and lobby groups	16	2	3	1	0	4	0	3	0	0	3	0
7.3 Participation in formal and informal decision-making processes	15	1	2	0	0	1	0	8	0	0	1	2
7.4 Others	8	0	0	0	1	2	0	0	0	1	0	4
<b>total sum of results in the MERI database</b>	<b>1400</b>	101	106	83	204	160	35	199	148	25	161	178

As regards the coverage of specific issues in the existing national studies, their different focus can be described as follows:

### Health

A considerable number of studies were available on the issues of health, compared to other themes of the MERI research.

In different countries – e. g. France, Belgium, Finland, Spain, Sweden, Portugal, the UK and the Netherlands – epidemiological studies were found focussing on physical disorders of older women in general or specific groups of older women such as:

- Menopausal symptoms and the question of the benefits of hormone replacement therapies,
- the issue of risk and the prevention of breast cancer in older women,
- a higher body mass index after hysterectomy,
- the predominance of cerebrovascular diseases, heart diseases, symptoms and unspecified causes amongst older women,
- the predominance of older women in morbidity from diabetes, high blood pressure, back pains and osteoporosis,
- the incidence and effects of falls and fall injuries,
- the prevalence of psychological problems and dementia,
- life-style related health factors, e.g. nutrition and physical activities.

Although in some countries there seems to be increasing differentiation between men's and women's health in old age, the consequences of these differences are seldom taken into account. Ethnicity is rarely studied. Additionally existing studies are rather specific and technical, written for specialists and published in scientific journals. In the UK, reference is made to the fact that more qualitative approaches looking at the individual experiences of older women in terms of their health and well-being are very seldom used, despite political rhetoric that people should become active and equal partners in their own health management. This is also recognised in Belgium and Sweden, although the researchers point out that health aspects bound to lifestyle get more and more attention in popular magazines.

### Education

Education is a very rare subject for research on older women, surprising since references to the importance of education for work and the material situation of older women is stressed.

### Work

The importance given to the issue of work in the research on older women varies considerably between European countries as shown in the following examples:

In Germany, work is a thematic focus where studies consider the living conditions of older women. However, the main topic is not older women's employment situation, but factors causing discontinuances in their employment career. It is pointed out that the period of women's employment is restricted at both ends of the adult lifetime: by educational work in the beginning and by care work in later years. The majority of carers for relatives are older women, and at the same time, care work is often characterised by great strains and low social recognition. Qualified and continuous employment is regarded to be the best provision for old age both materially and psycho-socially.

In the UK, the studies identified overwhelmingly focused on the relationship between labour market participation, unpaid care in the family and conditions for access to pensions in later life. These studies have generally concluded that a relationship can be identified between

work history, unpaid work in the household and career progression, with many women having to either slot their careers around those of their husbands or in some cases make a choice between career and family.

During the 1990's, the employment of older workers became an important topic in the Netherlands, though the gender perspective is still missing and very little attention is paid to differences between older women and men over the life course. Research focusing on older women in paid work as well as on their sectors of employment is rare. The same conclusion was made for the UK and Belgium.

In Spain, the work of older women is a research issue, but only as regards care work within their families. Studies are found on grandmothers who raise or take care of grandchildren, and spouses or daughters who care for their husbands and/or parents.

### Material situation

There are a number of detailed empirical studies on women's material situation in old age. The most frequently scrutinised subject is the income of older women, as well as the effect of national social security systems on their material situation. For all countries, gender biases still can be found in this respect.

In Germany, as in other countries, another frequently examined topic is that of older women and poverty. Compared with older women's income, their consumer behaviour have rarely been researched.

Almost no research was found on the financial support older women give to family members. Generally, only older women's housing expenses are examined within research on their overall housing situation.

### Social integration, participation and other social issues

Together with health, social integration is the theme for which most findings have been reported. It is in fact the most extensive and heterogeneous theme and not a thematic focus in itself. Although most issues are covered by the national findings, there is a focus of research work on the issues of:

- marital status in Austria and France,
- kinship and social networks in Austria, the Netherlands, Portugal, Germany and Italy,
- intergenerational and partnership relations in the Netherlands,
- leisure and cultural activities in Austria,
- socio-psychological aspects in Finland, France, Spain and the Netherlands,
- sexuality in France and Germany,
- volunteering in Germany.

In all countries, findings on social integration, participation and other social issues were drawn from a diverse range of studies. Some concentrated specifically on these aspects. In others, the focus lay elsewhere, but the findings of the study bore implications for the different indicators. Perhaps not surprisingly, therefore, the relevant studies used both quantitative and qualitative methods. Some studies reflected on the importance of the method used for understanding these aspects of women's lives. For example, reference was made in the UK to the benefits of life-history accounts in helping to reveal the contribution of experience, knowledge, passions and decisions in understanding social issues, and in distinguishing what is unique and new from what is shared and continuous. Furthermore the need is stressed to develop culturally sensitive frameworks with which to examine different experiences of growing older. Indeed, few studies recognised the different perceptions of ageing due to cultural differences of women from various ethnic backgrounds.

## Crime and abuse

In the UK, as in other countries, for this theme the majority of research was concerned with the concept, nature and prevalence of 'elder abuse' or 'adult abuse'. This generic term was generally accepted as encompassing different forms of abuse, namely physical, sexual, emotional, financial and abuse through neglect. In one case the experiences of older women in prison were explored, shifting the focus from one of older women as victims of crime to one where older women are the perpetrators, though women were not necessarily incarcerated for violent crimes.

For all the countries, crime and abuse were rare subjects of research on older women. In Austria and the Netherlands, for example, there are findings on the issue of violence against older people, but no studies were found which referred to violence against and abuse of older women nor were any comparisons made between older women and other groups.

## Interest representation

Interest representation is an infrequent topic in research on the situation of older women in Europe, although the significance of gender to issues of participation and empowerment in later life has been flagged in recent years, not least by feminists.

Although there seems to be empirical evidence that older women's specific interests are neither represented by women's organisations nor by seniors' organisations, no research findings would confirm this observation.

### 3.2 Overview on the availability of national official statistics

An investigation of published official statistics in line with MERI's themes and sub-themes resulted in the following findings:<sup>5</sup>

#### Health

The theme "Health" is again one of the best covered areas. This is especially true for the sub-themes "General health aspects", "Physical disorders and disabilities" as well as "Mental disorders and disabilities". According to a ranking procedure, the majority of the investigated statistics in these areas were considered to include meaningful information on women aged 50+ by the MERI researchers, although in some countries the choice of the age categories could have been improved. Information on "Medical treatment and health care", "Care in institutions" and "Healthy lifestyles" is also assessed to be useful in many cases. Severe deficits, however, are stated for published statistics in the realm of "Care at home".

From a European comparative perspective, outstanding results in the publication of official statistics are available for Finland, France, Portugal and Sweden. When deficits are mentioned, they mainly refer to the situation in Belgium, Germany, Italy, Spain and Greece.

#### Education

Aspects of the "General Education" of older women are statistically well covered, and most of the published data are found to contain meaningful information. Nevertheless, for "Professional and vocational training" as well as "Life-long learning" there is a severe lack of information in many countries.

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5 For a detailed overview on the availability of official statistics on the living conditions of older women in the participating countries see the appendix.

For all sub-themes in the realm of education, examples of good practice in the publication of official statistics are found in Finland and Sweden.

### Work

Paid work, namely “Labour market participation” and “Working areas and working conditions”, are all well reflected in published official statistics. However, age categories are often not sufficiently differentiated to describe the situation of women in their later years of gainful employment. As expected, official data on “Attitudes towards older workers” are not available in most countries.

Severe deficits in published data on the situation of older women are found for the categories “Exit from the labour market”, “Unpaid work in the family” and “Unpaid work in social networks”.

While the realm of formal work produces very good results in many countries, particularly in Finland and France, information on informal work in general and that performed by older women in particular is often lacking. Here publication practices in the Austria, Italy and the Netherlands should be mentioned as providing good examples, and exceptions to this comment.

### Material situation

“Sources and levels of income” as well as “social protection systems” effecting older women are all well covered issues in published official statistics. In most cases they reflect the situation of older women satisfactorily. Deficits in published information are found in the “Consumption of goods and services” and “Housing conditions and equipment” mostly because the respective statistics are household surveys which in general give poor information on individuals. A complete lack of data – or at least gendered data – was stated across all countries for “Financial support given to family members”.

Published data on income is presented in detail in France, the Netherlands, Portugal and Sweden. Consumption issues are well covered in Finland and Sweden. Data on housing conditions and equipment of older women are found in the official statistics of Finland, Italy and Sweden.

### Social integration, participation and other social issues

“Household structure and marital status” and “Leisure and cultural activities” of older women are well reflected in published official statistics. Very good results are found particularly in Finland, France, Portugal and Sweden; in Italy this is true for “Leisure and cultural activities”.

The publication of official data concerning “Partnership relations”, “Intergenerational relations”, “Sexuality”, “Kinship networks”, “Friendship, neighbourhood and community networks”, “Mobility and accessibility” and “Volunteering” varies strongly between countries. If gathered and published, they are in many cases not gendered or sufficiently broken down by age. Individual examples of good practice can be found, however. This is especially true for Sweden, concerning all sub-themes, and also for Austria and France (“Intergenerational relations”), Belgium (“Sexuality”, “Friendship, neighbourhood and community networks”, “Mobility and accessibility”), Italy (“Friendship, neighbourhood and community networks”), the Netherlands (“Volunteering”) and Portugal (“Kinship networks”).

For “Ageism and other kinds of discrimination” published official data on the situation of older women are found only in Finland; “Socio-psychological aspects” are issues not covered in official statistics in any country.

## Crime and abuse

Official published statistics on “Crime and abuse in public environments” and “Crime and abuse in families” are rare and even rarer when the situation of older women is concerned. They do not exist at all for “Crime and abuse in health care and homes for the elderly” in any country.

Again, Finland and Sweden have official statistics at least for the first two sub-themes and these contain significant information on the situation of older women. The same is true for Belgium in the realm of “Crime and abuse in public environments” and for Portugal as far as “Crime and abuse in families” is concerned. In Italy data on crime and abuse are available, but the age groups are up to 59.

## Interest representation

The “Political participation” of older women is the sub-theme within this area for which – at least in some countries – fairly good information is provided from statistical offices. Little is known or reported, with the exception of Sweden, when it comes to their “Representation in interest or lobby groups”. “Participation in formal and informal decision-making processes”, again with the exception of Sweden, is not at all considered an issue for official statistics across countries.

### 3.3 Data sources at European level

There are various data sources at European level containing information on older women. Nevertheless, they vary tremendously as regards their accessibility and handling:

- The most important source is represented by Eurostat publications generally available through free downloading.<sup>6</sup>
- The Eurostat database provides some basic data on older women,<sup>7</sup> although there are still severe gaps for specific countries. A cross-country presentation of data concerning e.g. the marital status of women 50+ is not possible. Nevertheless, obtaining available data on the number of women 50+ in the 12 MERI countries, their life expectancy, marital status and nationality, required spending 200 €.
- Finally social survey data may be found though this is sold and/or requires technical knowledge in the analysis of raw data. For non-specialists and non-scientists, this data is difficult to access and use.<sup>8</sup>

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6 Eurostat Yearbook 2003, [www.eu-datashop.de/veroeffe/EN/thema1/jahrbuch.htm](http://www.eu-datashop.de/veroeffe/EN/thema1/jahrbuch.htm); European Social Statistics – Demography (Edition 2002), [www.eu-datashop.de/veroeffe/EN/thema3/bevoelk.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/bevoelk.htm); European Social Statistics – Migration (Edition 2002) [www.eu-datashop.de/veroeffe/EN/thema3/wander.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/wander.htm); European Social Statistics – Income, Poverty and Social exclusion, [www.eu-datashop.de/veroeffe/EN/thema3/armut.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/armut.htm); European Social Statistics – Labour Force Survey Results 2002, [www.eu-datashop.de/veroeffe/EN/thema3/arbeitsk.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/arbeitsk.htm); The Life of Women and Men in Europe – A Statistical Portrait, [www.eu-datashop.de/veroeffe/EN/thema3/leben.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/leben.htm); The Social Situation in the European Union 2003, [www.eu-datashop.de/veroeffe/EN/thema3/soz\\_lage.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/soz_lage.htm); Health in Europe – Results from 1997-2000 Surveys, [www.eu-datashop.de/veroeffe/EN/thema3/health.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/health.htm); Health Statistics – Key Data on Health 2002, [www.eu-datashop.de/veroeffe/EN/thema3/eckz\\_00.htm](http://www.eu-datashop.de/veroeffe/EN/thema3/eckz_00.htm). (All links were valid in July 2004.)

7 Eurostat Database New Cronos (minimum charge: 15 Euros) [www.eu-datashop.de/datenba/EN/allgem/nc\\_leitf.htm](http://www.eu-datashop.de/datenba/EN/allgem/nc_leitf.htm).

8 European Values Study (CD-ROM with raw data: 50 Euros), three waves (1981, 1990, 1999/2000), main topics: basic attitudes, beliefs and human values, [www.gesis.org/en/data\\_service/topics/50-CD-ROM](http://www.gesis.org/en/data_service/topics/50-CD-ROM); Eurobarometer Survey Series (CD-ROMs with raw data: 75 Euros), started in 1974, at least two surveys a year, main topics: social and political attitudes in the European publics, [www.gesis.org/en/data\\_service/eurobarometer](http://www.gesis.org/en/data_service/eurobarometer); International Social Survey

#### 4. Demographic facts and trends<sup>9</sup>

In the 12 EU member states concerned with the MERI project, there are 127.8 million people aged 50+: 57.8 million men and 70 million women, the latter representing 55% of the total (2002/2003). This enormous group of women is highly heterogeneous, and not only demographically. The average of 55% has little real significance since it trivializes the effects of the different ages as well as male over-mortality. The latter phenomenon is weak until the age of about 60. There is a numerical male/female balance, with variations between countries, between 45 and 50 years though only for a short time: men's over-mortality begins significantly during their sixties accelerating quickly and thus an increasing percentage of the population over 70 years and over are female (see table 1).

Table 1: Percentage of women in different age groups

	50-54 years	70-74 years	90-94 years
Austria (2003)	50	56	77
Belgium (2003)	50	56	78
Finland (2003)	50	57	78
France (2003)	51	56	75
Germany (2003)	50	56	no data
Greece (2000)	50	55	no data
Italy (2001)	51	57	74
Netherlands (2003)	50	55	78
Portugal (2003)	51	56	no data
Spain (2002)	50	56	72
Sweden (2003)	50	54	73
UK (2001)	50	55	no data

Note: The compared data do not all refer to the same year.

Source: Eurostat Database New Cronos<sup>10</sup> (calculations made by ISIS).

The higher the age group, the higher the percentage of women: for example at age 90-94 between 72% in Spain (2002) and 78% in Belgium, France and the Netherlands (2003). This average does not vary from one member state to the other in the age group 50-54 years, but the age factor widens the gap because of women's life expectancy at advanced ages, while life expectancy is quite variable in different countries. All demographic surveys of centenarians have highlighted that females outnumber males.<sup>11</sup>

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Programme (CD-ROM with raw data: 25 Euros), annual survey, started in 1985, main topics: social inequality, work orientations, family, religion, [www.gesis.org/en/data\\_service/issp](http://www.gesis.org/en/data_service/issp); European Social Survey (free download of raw data), planned to take place every two years, started in 2002, main topics: attitudes, beliefs and behaviour patterns, [www.europeansocialsurvey.org](http://www.europeansocialsurvey.org); Labour Force Survey (a number of tables are included in the New Cronos database, prices of "ad-hoc database extractions" depend on table size), quarterly resp. annual survey, started in 1983, main topic: employment, [www.eu-datashop.de/service/EN/spezial/lfs.htm](http://www.eu-datashop.de/service/EN/spezial/lfs.htm); European Community Household Panel (a number of tables are included in the New Cronos database, Eurostat also offers the option of producing ad-hoc statistical tables), panel study, started in 1994, main topic: living conditions, [www.eu-datashop.de/service/EN/spezial/echp1.htm](http://www.eu-datashop.de/service/EN/spezial/echp1.htm).

9 By Hannelore Jani-Le Bris.

10 Only some of the main demographic characteristics are mentioned. More detailed figures from the EUROSTAT Database New Cronos are available at ISIS, Frankfurt am Main.

11 Passarino G, Calignano C, Vallone A, Franceschi C, Jeune B, Robine JM, Yashin AI, Cavalli Sforza LL, De Benedictis G.: Male/female ratio in centenarians: a possible role played by population genetic structure. *Exp Gerontol.* 2002 Oct-Nov; 37(10-11), p. 1283-9.

There has been a spectacular and unprecedented development in life expectancy over the last century especially for women, (1999-2002, according to country, see table 2)

- LE at age 50 years – 31.9 years (UK) and 34.7 years (France),
- LE at age 70 years – 15.0 years (UK) and 17.1 years (France),
- LE at age 80 years – 7.5 years (Greece) and 9.7 years (France).

*Table 2: Life expectancy by gender at different ages (in years)*

	50 years		60 years		70 years		80 years	
	female	male	female	male	female	male	female	male
Austria (2002)	33,1	28,4	24,1	20,2	15,6	12,8	8,5	7,1
Belgium (2002)	32,8	27,9	23,9	19,6	15,6	12,4	8,4	6,8
Finland (2002)	33,0	27,7	24,0	19,5	15,4	12,3	8,2	6,8
France (2001)	34,7	28,7	25,7	20,6	17,1	13,5	9,7	7,7
Germany (2001)	32,8	28,0	23,9	19,8	15,5	12,6	8,6	7,2
Greece (1999)	32,3	28,5	23,1	20,1	14,5	12,8	7,5	7,1
Italy (2000)	33,9	29,0	24,8	20,4	16,2	12,9	9,0	7,3
Netherlands (2002)	32,4	28,1	23,5	19,5	15,3	12,0	8,4	6,5
Portugal (2002)	32,4	27,6	23,3	19,4	14,9	12,2	7,9	6,6
Spain (2000)	34,1	28,6	24,9	20,3	16,2	13,0	8,8	7,3
Sweden (2002)	33,4	29,6	24,3	20,9	16,0	13,2	8,8	7,2
UK (2000)	31,9	28,0	23,0	19,5	15,0	12,2	8,6	6,9

Note: The compared data do not all refer to the same year.

Source: Eurostat Database New Cronos (calculations made by ISIS)

One of the consequences is the predominance of women and particularly of widows in the older population. These demographic facts have an important influence on family structures and family relationships: there are more and more families with four or even five generations alive, increasing numbers of young children who may have living great-grandparents, while the death of parents is experienced at a later adult age.

Table 2 shows that female excess life expectancy varies from one country to the other, with extreme values affecting Greece and France: at 70 years Greek women have the probability of living 1.7 years longer than their male peers, while French women can expect more than double this, living an average 3.6 years longer than French men at that age. Thus the Greek old population does not have as many widows as the French one.

Table 2 shows furthermore that this female excess is decreasing. In France, for example, as known from recent figures, men's life expectancy is growing faster at high ages than women's so that married couples tend to live longer together (in spite of divorce), and widows tend to be less numerical predominant in the old population.

From a more social point of view, disability-free life expectancy<sup>12</sup> – or healthy life expectancy – is of major importance. Comparative European data on this issue<sup>13</sup> was not found because

12 This is a synthetic indicator based on calculations combining life expectancy and health, (health being defined as "absence of any limitation in daily life activities"). Disability-free expectancy of life (or expectancy of life without disability) indicates the average number of years left without invalidity.

13 The Treaty of Maastricht gave the EC a specific mandate to act in the domain of public health; in 1995, the EC proposed a five-year action programme, adopted in 1997: health expectancies are at the top of the list of indicators provided in an annex to decision of the European Parliament and Council (Jean-Marie Robine, Isabelle Romieu, Carol Jagger, Viviana Egidi, 1998: Health expectancies)

of the lack of comparability at international level. Robine et al.<sup>14</sup> quote an example from the Netherlands: in 1994, women had the highest life expectancy at birth in Europe but one of the lowest for disability-free life expectancy. The authors also underline the difference in life expectancy at 65 years, in Ireland and France (1994), of some three years for women and two years for men while the disability-free life expectancy is nearly the same for both of them. Men and women are not equal before death: men die earlier, and they are not equal either before the onset of disability and frailty: women have less probability of autonomy.

Life expectancy, male over-mortality and a growing percentage of women lead to the well-known gender difference in marital status. Broadly speaking in old age groups men tend to be married while women are widowed.

If the widowed represent about 27% within the female and 7% within the male population 50+, the distribution is quite different when broken down by age: Between 50 and 54 years the widowed represent 1% amongst the men, and 3% (UK) to 6% (Italy) amongst the women – a minority in each case. At the age 85+ the landscape totally changes: between 74% (Sweden) and 86% (Belgium) of the women, but only between 40% (Sweden) and 55% (UK) of the men have lost their spouse.

Though data are missing for several countries, table 3 shows that the female rate is very high within the widowed population 50+ in Europe; it shows, too, that the rate only varies slightly from one country to the other with respect to marital status.

*Table 3: Percentage of women 50+ in different marital statuses (in %)*

	widowed	married	single	divorced
Austria	no data	no data	no data	no data
Belgium (2002)	81	47	49	53
Finland (2002)	84	47	51	57
France (2002)	84	47	51	58
Germany (2002)	83	47	54	57
Greece	no data	no data	no data	no data
Italy (2001)	85	46	56	59
Netherlands (2002)	82	47	50	56
Portugal	no data	no data	no data	no data
Spain	no data	no data	no data	no data
Sweden (2002)	80	47	42	55
UK (2001)	80	47	47	54

Note: The compared data do not all refer to the same year.  
 Source: Eurostat Database New Cronos (calculations made by ISIS)

**In conclusion**

The new and predominant demographic trends for the female population aged 50 years and more are to be seen in the context of wider demographic changes. The overall trend in this immense and extremely heterogeneous population is still toward growth, inter alia because of the arrival of the baby-boom generation born in the sixties. This growth will reinforce heterogeneity in various fields.

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tancies in the European Union. The European Community Household Panel: data and analysis. REVE Paper no 320. [www.prw.le.ac.uk/revs/RP320-VA.pdf](http://www.prw.le.ac.uk/revs/RP320-VA.pdf).)  
 14 Jean-Marie Robine et al., *ibidem*, p. 7.

Men's life expectancy at higher ages tends to be showing faster growth than women's. This trend can be observed in several European countries, and is manifested in a slight reduction of the high female rate in the old population, and particularly of the high rate of widows; this development will not accelerate in the immediate future, for the predominance of women and widows exists mainly in the population over 75 years. More married couples in the old population will affect numerous areas. However, this tendency probably will be counteracted by the increase in divorced people resulting, in part, from the simplification of the divorce legislation in most European countries from the mid-seventies. It is significant that in all European countries included in this analysis, the number of divorced women aged between 55 and 59 years is twice as high than in the age group 65 to 69 years, and yet the probability of remarriage for women from age 50 onwards is low, whether widowed or divorced. Thus, in several respects a new group of unmarried persons is emerging and growing with mainly women being in this group even though male life expectancy is improving substantially.

Finally, an improved comparability of the data on life expectancy without disease – the scientific group REVES<sup>15</sup> is working on this issue – will lead to better socio-demographic knowledge at the European level.

### *5. The living conditions of older women in Europe – summary of the national findings*

This section on the living conditions of older women from a European comparative perspective summarizes the findings in the national reviews on studies and statistics as well as on the round-table discussions of the research team.<sup>16</sup>

In each chapter, an introductory part outlines the European context and highlights specific national results and tendencies. Following that, a systematic overview illustrates how far a specific fact or trend has been proved to exist (+) or not exist (–) in the participating countries. Blanks in the tables indicate that knowledge was not available or not conclusive. Footnotes on facts and trends contain comments by the MERI researchers with explanations for various statements.

#### 5.1 Health

Holistic approaches in health research – broadening the specialised research on illness and symptoms – are still in their initial stages in most of the European countries. The most encouraging results in this respect originate from the Finland and Sweden, while in other countries empirical evidence is missing that a social science or gender approach with a specific focus on older women's health as an issue in medical research has become or is becoming more acknowledged.

Life expectancy has developed in parallel with progress in medical knowledge, improvement in hygiene, nutrition, an improved standard of living as well as decisive shifts in the distribution of mortality causes. Though women enjoy a longer life they also suffer more than men from incapacitating illnesses and disability. Centenarians are, according to French findings, a mainly female population: one man to seven women. However, in all explored fields, male centenarians had a better health status than women. In Belgium centenarians pay more attention to the health of the members of their direct environment than to their own health.

However, as with other issues, health is strongly related to factors such as the level of education, social class, income, status of co-habitation, urbanisation and ethnicity – determinants that are often not taken into account in existing studies. For example in Finland social

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15 REVES: Réseau Espérance de Vie en Santé – International Network on Health Expectancy – has been created in 1989.

16 The individual sources of the national findings are not mentioned in this overview. They can be derived from the national analyses.

class was a stronger determinant than urban settlement and marital status as regards functional disability and health. These environmental factors appear – compared to genetic factors – even more important for women.

In almost all MERI countries it is more common for women than men to present generalised symptoms. Indications for particular symptoms and illnesses are given by some national research according to which amongst others pain, resulting from paid or unpaid work, arthritis and arthrosis, visual impairments as well as osteoporosis are more common in older women than older men, and older women are more affected by disorders caused by injuries and falls. The latter, according to Portuguese and Swedish results, is also connected to inappropriate housing conditions and a lack of information on prevention.

Given this background, there are reasons for older women's self-perception of health as being worse than that of older men's across all MERI countries.

The gender difference in life expectancy is smaller when years lived with disability is taken into account. Women's longer life means longer life with chronic and incapacitating diseases, at least currently.<sup>17</sup> Not only do older women suffer longer and in a state of high dependency, but older disabled women are more likely to live alone than older disabled men.

Available data suggest that older women also report more psychological symptoms than men. Finnish and Swedish research reveals that burn-out symptoms are significantly higher in the age group of younger old women (in many cases in charge of overlapping professional responsibilities and/or family care-giving) than in all other age groups of women and men. There are strong indications – although no research is available in Spain, Portugal and Greece – that older women across Europe are more likely to suffer from depression than older men. Finnish research concluded that male gender, being married, a high level of education and a good financial situation were protective against depression. In other countries, too, morbidity showed a clear correlation with frequent depressive symptoms as did loneliness and a lack of physical exercise.

All the mentioned risk factors have a high prevalence in older women. However, based on available data, they are much less likely to commit suicide than older men.

The higher prevalence of dementia in older women can be explained by their higher percentage in the very old population. However there are also findings showing that men hide dementia symptoms better than women. More research seems to be needed in this field.

In all MERI countries, older women make more use of medical consultations than older men. According to varying national results, this also applies to medical treatment in general. There is some indication that older women are prescribed more medicine in general and more psychotropic medicine in particular than older men when they visit the doctor. For most of the countries it could be shown that the medical treatment of menopause symptoms has increased during the last decades; in some of the countries, however, this development has peaked.

With the exception of the UK and Germany, older women spend fewer nights in hospital than older men. This fact is surprising given their higher number in the population and their higher degree of morbidity, and needs further investigation. In how far societal factors explain this finding cannot be decided on the basis of existing information. Worse access of older women to technical support equipment because of their worse financial situation was reported in France and Italy. For the UK, the Netherlands and Greece it was also shown that older women from ethnic groups and other especially vulnerable older women are at risk of worse medical treatment.

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17 The future health quality of the additional years of life for older persons is a matter of controversy. According to optimistic forecasts, prevention measures and medical progresses should see the phase of morbidity starting later and being briefer. Pessimists expect a general growth of multi-morbidity.

Due to the higher life expectancy of women and their lower average age at marriage, older men in need of care are more likely to be cared for by their spouses than vice versa. However, there are findings, too, against wide-spread stereotypes. In Sweden, older husbands spend more time caring for their wives than older wives care for their husbands. In the UK, women and men aged 50+ are equally likely to look after their spouse, but more women than men before the age of 70 care for their spouse with the pattern reversing after the age 70.

In addition, family members, disproportionately daughters and daughters-in-law, are an important source of support and care for older women all over Europe. However, many old women in need of care live alone and at some distance from their children. In Austria and the UK older women are more likely to have no informal support in case of illness than older men.

Given this background, domiciliary support services are used more frequently by older women than men in countries for which data is available, although, based on research results in Germany and Belgium, older women hesitate longer before asking for home support than men. The traditional gender role interpretation makes it more difficult for women to ask for help, and also women are expected to be more competent in organising care.

There is some indication that in southern European countries, such as Greece, older women are given more care at home than older men. However, both older men and women in southern European countries receive more care at home than in northern European countries. Reference is made to the inadequacy of state services in providing adequate care for the increasing number of older people. In contrast to that, about 90% of services for older people are provided by the public sector in Finland, the purpose of which is to support older people in their daily life, to improve preconditions for social integration and to ensure necessary care.

The population in residential care is disproportionately female, very old, single or widowed across all MERI countries, with the exception of Greece where neither studies nor statistics on this issue exist. There is indication that old women show a higher resistance than old men to giving up their independence and living in a residential home. According to French findings, only very old age and increasing dependency lead women to accept residential care, reported for approximately one third of women in their nineties.

Gender differences and differences between women of different age groups with regard to their health status, their perception of health and practices of healthy or unhealthy life-styles are elicited. From the majority of MERI countries we know that older women are very aware of the issue of health and pay more attention to it than older men. Healthier habits concerning alcohol and cigarettes are also reflected in their consumption patterns described in a later chapter. Older women tend to be, as far as data is available, also more aware of healthy nutrition than older men, and from a European comparative perspective obesity is not more common among older women than men.

Nevertheless, older men more often take part in physical activities and sport, though the number of older women doing physical exercises is increasing in many countries. From Finnish it is reported that widowed older women do more physical exercise than women of the same age living in a partnership. In general, self-rated meaningfulness of life and better subjective health are also significantly related to regular and intensive physical exercise. Physical activity at a younger age is also strongly connected to maintaining a high level of physical activity in old age regardless of chronic conditions that may develop. In Greece, women in the age of 65-80 who engage in physical exercise relied less on doctors and medication and tried to maintain their good health through sports and positive feelings about their body. They reported that exercise helps them to reduce stress levels and anxiety about the future as well as to keep fit and reduce health problems.

## European overview on facts and trends on health:

### General health aspects

Compared to specialised research on illness and symptoms there is a lack of holistic approaches.<sup>18</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
-	-	+			+/-			+	+		+

A gendered approach in general health is becoming more acknowledged.<sup>19</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+		-	-	+			+	-	

The social science approach to general health is (or is becoming more) acknowledged.<sup>20</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	-		+	+	+	+	+		

Older women's health as an issue in medical research has become acknowledged.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	-	-		-

### Physical disorders and disabilities

It is more common for older women than for older men to present symptoms in general.<sup>21</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+	+	+	+	+		+	

18 S: The several longitudinal studies include holistic approaches and should be summarised in one publication.

19 S, P, I: There are studies but not enough.

NL: Compared to 10 years ago it has diminished.

B: There are studies, but the information is too general.

E: There is a new-born trend with very few publications.

20 A: The social science approach is mainly a socio-economic approach.

S, I, E: The social science approach is mainly focused on problems.

21 NL: That applies to men and women in general, not only in old age. From 65 onwards the differences diminish.

Pain, related to paid and unpaid work, is more common among older women than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+										

Arthritis and arthrosis are more common among older women than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	+					+			

Visual impairments are more common among older women than older men.<sup>22</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+	-			+	+/-	+		+	

Osteoporosis is more common in older women than in older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+			+	+	+	+	+	

Older women are more often affected by disorders caused by injuries and falls.<sup>23</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+/-	+		+				+	+		+	

Older women's self-perception of health is worse than that of older men.<sup>24</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

22 S: Only very old women have worse vision than men of their age group.

A: Only very old women (70-79, 80+) have worse vision than men of their age group.

F: Only women  $\geq 70$  years.

23 P, S: This is connected to inappropriate housing conditions and a lack of information on prevention.

24 Source: Eurostat (2002), The life of women and men in Europe, p. 144.

The higher life expectancy of older women goes together with their higher rate of chronic and incapacitating diseases.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

Older women suffer longer from a condition of high dependency.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+		+		+		+	+	+	+

Older disabled women are more likely to live alone than older disabled men.<sup>25</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+			+	+	+	+		+	

#### Mental disorders and disabilities

Older women report more psychological symptoms than older men.<sup>26</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+				+			

Moderate or serious burnout symptoms are more common in “younger” old women than in other age groups of women and men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+										

Sleeping problems are more commonly reported by older women than older men.<sup>27</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+					+		+			

25 Older disabled women are also more likely to live alone than older women in general.

26 D: This only applies to women 65+.

27 F: Reported for women 50+ in unemployment.

Older women are more likely to suffer from depression than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+			

Older women are much less likely to commit suicide than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+					+	+	+	

Older women are more likely to suffer from dementia than older men.<sup>28</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
-	+	+/-	+		+/-	+/-		+	+	+	

#### Medical treatment (cure) and health care

Older women make more use of medical consultations than older men.<sup>29</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

Older women make more use of medical treatment in general.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+			+	+		+	

28 F, D: Older men are better at hiding dementia symptoms.

D: This applies to the age group 80+.

F: This applies to "mental deficiency" (Dixit HID study), but not to speech defects, men aged 50-79 years are more often affected than women, women more than men  $\geq 90$  years.

P: Related to increased life expectation.

B, E: The prevalence rate of dementia among women is low until the age of 75 but rises, peaking at age 85 and over.

FIN: According to age standardised statistics the cause of death by dementia of men has during the 20 years developed approximately in the same way as in case of women. The predominance of dementia in women as a cause of death is mainly dependent on the larger numbers of older women in the population.

29 Except for S, D, F see: Eurostat (2002), The life of women and men in Europe, p. 145.

D: There are clear differences in health care by class: Older female workers or wives of workers are poorly provided with health care.

Older women are prescribed more medicines than older men when they attend the doctor.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+				+	+			

Older women are prescribed more psychotropic medicines than older men when they visiting the doctor.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+			+					

The medical treatment of women with menopause symptoms has increased during the last decades.<sup>30</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+/-		+	+	+	+	+	+/-		+	

Older women spend fewer nights in hospitals than older men.<sup>31</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	-	-	+	+	+	+	+	+	+	+

Due to their worse financial situation, older women have less access to technical support equipment than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
						+		+			

Older women from ethnic groups and other especially vulnerable older women are at risk of a worse medical treatment.<sup>32</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+		+							+

30 S: The use of oestrogens for menopause symptoms increased up to 1999. Thereafter there has been a decline because of reported adverse reactions, which have led to altered recommendations for oestrogen use.

I: Local research shows that treatments alternative to medicines are preferred by women.

31 see Eurostat (2002): The life of women and men in Europe, p. 146.

32 All countries: There is a lack of studies.

## Care at home

More older men than older women are given care by their partners.<sup>33</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+/-	+/-	+				+	+	+	+	

Family members, disproportionately daughters and daughters-in-law, are an important source of support and care for older women.<sup>34</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

More older women than men in need of support and care live alone.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+	+		+	+	+	+	+	+	

Older women are more likely to have no (informal) support in case of illness than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+					+				

33 UK: Overall, women and men aged 50 and above are equally likely to report looking after their spouse, but more women than men before the age of 70 care for their spouse with the pattern reversing after age 70.

S: According to the Swedish National Board of Health and Welfare, amongst married couples men spend more hours caring for their wives than wives care for their husbands.

34 A, EL, E, S, P, D, I, B: They are mostly female family members.

NL, F: More research is needed on the role of female and male family members.

P: Case study. They are mostly wives and daughters.

F: There are doubts about how far mainly "female" tasks are taken into consideration for the data collection.

Domiciliary support services are used more frequently by older women than men.<sup>35</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+/-	+	+	+				+		+	

#### Care in institutions

Very old women show a higher resistance than men to giving up their independency and living in a residential home.<sup>36</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
					+			+		+	

The population in residential care is essentially female, very old, single or widowed.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	

#### Healthy lifestyles, self-care, prevention

Older women are more aware of healthy lifestyles than older men.<sup>37</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+		+	+	+	+	+	

35 UK: Domestic support appears more important to older women's emotional well-being (sense of identity and independence) than to older men's.

NL: Gender is not given as a main indicator for the use of home care services. Important indicators are a high level of need of care, very old age, living alone and low income.

FIN: Women make up three-fourths of clients for regular services for older people. This can be partly explained by the fact that women outnumber men in the oldest population. However, women also outnumber men in service use in relation to the population of the same age.

S: This depends on age and marital status.

36 S: Residential homes for old people are very scarce in Sweden and their residents are very ill. One cannot speak of "resistance" in this sense.

UK: Not proven, though studies did reflect older women's fear at the prospect of entering care.

I.: Resistance diminishes with age.

37 P, S: Older women have healthier habits concerning alcohol and cigarettes.

UK: Not measured but studies did note the continued importance of body image, body size and body weight to older women.

E: These healthier habits are mainly cultural in the oldest women.

Older women are more aware of healthy nutrition than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+/-					+	+	+		-	

Obesity is more common among older women than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	-		-					-	+	+	

Older men more often take part in physical activities and sport than older women.<sup>38</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+/-	+/-	+	+/-	+			+	+		+	

The number of older women who do physical exercise is increasing.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+			+/-		+			

## 5.2 Education

The level of education of men and women is decisive in determining their status in the labour market, their chances for professional careers, their income from gainful employment and their financial situation in old age. In addition, education influences to a strong degree various additional life spheres, among others participation in public life and representation of interests. The lower the education level the more restricted is the access to all mentioned resources.

General conclusions can be drawn that on one side older people in general have a significantly lower education level than younger age groups and older women on the other side are affected disproportionately more often by educational deficits than older men. For example in the Netherlands, almost four in ten older women have completed no more than primary education, and their deficit compared with younger age groups is larger than the deficit of older men. However the education level of older people will improve in the coming decades. In 20

38 This also applies at European level. See: Eurostat (2002): The life of women and men in Europe, p. 139-140. (No data on individual countries are given.)

NL: This applies only to the oldest women.

S: younger age groups yes, older no.

FIN: Older women too have increased physical exercise.

D: This is true for the age group 60+ but in the age group 50-60 women take part more often in physical activities than men. More significant than the age and gender differences are the differences between persons living in East and West Germany: participation in physical activities is much lower in East Germany than in West Germany.

years from now, more than two in ten older Dutch women will have a higher education background, and three in ten older men. The same tendency is shown by studies and surveys in most of the other countries.

There are indications that a considerable level of illiteracy is to be found amongst older women in some Mediterranean countries. Several studies stress the fact that approximately two thirds of older women in Portugal have not even finished elementary school. As a consequence, they are ill-favoured as regards even basic reading and writing skills. Respective disadvantages are reported from Spain and Greece. Given that a low education level or poor literacy has additional consequences for the availability and use of written information, it can also be concluded that social security provisions to which older people are entitled are often not claimed for that reason.

Older women from immigrant ethnic minorities, especially of non-European origin and non-industrialised countries, have – based on the very rare available findings – very low levels of education, too.

In most of the countries in which information was available, it is clear that older employees are offered or make less use of professional and vocational training. The traditional investment in younger age groups seems still to be prevalent in most of the countries concerned. However, in half of the countries under study, older female employees' participation rate in available training is higher than that of older male employees. These results are found for the more northern countries like Finland, Sweden and the UK, while the reverse is true for Spain, Portugal and Greece.

However, life long learning activities in Third Age Universities and similar institutions seem to be – where we know about it – of special interest to older women including countries like Spain and Portugal. Given this background, specific traditions in companies and other forms of discouragement may still be the explanation when a more reluctant involvement in professional training by older women is observed. In some countries, e.g. Austria, the number of female senior students is rising steadily.

Telecommunication skills – indicated by the ownership of mobile phones and computers as well as the use of the Internet – are clearly less found amongst older women than older men. Older people in general have weaker telecommunication skills than younger age groups. Given this background, the risk factor for a digital divide at an individual level appears to be low education and age.

## European overview on facts and trends on education

### General education

Older women have overall a lower education level than older men.<sup>39</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+/-	+	+	+	+	+	+	+	+	+	+

<sup>39</sup> S: Whether women have a lower or higher education level than older men depends on which age group you study and which level of education.

But better educated cohorts are entering retirement / age 50+.<sup>40</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+	+	+	+	+	+	+	+

Older women are ill-favoured concerning basic reading and writing skills.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	-								+	+	+

Lower education levels are especially true for older women from immigrant ethnic minorities.<sup>41</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+	+			+				

#### Professional and vocational training

There is less professional training for older women than for younger women.<sup>42</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+/-	+	+	+					+		

Older female employees' participation rate in professional and vocational training is higher than that of older male employees.<sup>43</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	-	+	-	+	-	+	-	-	-

40 E, P, EL: The education level of women is increasing.

41 NL: This is found for Turkish and Moroccan women.

UK: A survey showed that women of Pakistani and Bangladeshi origin, aged between 45 and 64, who have been resident in the UK less than 25 years and live in communities with more than 10% of residents from a similar background are the least likely of all ethnic minority groups to be fluent in English.

42 S: Younger women get more formal education, older women get more informal education.

D: This age difference is to be found in men also.

43 Except for D see: Eurostat (2002): The life of women and men in Europe, p. 87.

## Life-long learning<sup>44</sup>

Older women's participation rate in "Third Age Universities" and similar institutions is equal to or higher than older men's.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+		+			+	+	+	+	

Older women are less likely to own a mobile phone than older men.<sup>45</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	+/-				+	+			

Older women own a computer less frequently than older men.<sup>46</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+		+	+	+		+	+

Older women use the Internet less frequently than older men.<sup>47</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	(+)	+		+	+	+			+

## 5.3 Work

In most of the MERI countries, older women's lower employment rate compared to older men corresponds with a higher unemployment rate. There is some indication that the situation will change to a certain extent for women entering the Third Age, and in some countries the labour market participation rate has increased in the past years. In the course of demographic change and the foreseen ageing of the workforce, the mobilisation of the better-educated older women of the future entering the employment market is one approach in coping with the problems arising from the expected labour shortage.

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The issue of life-long learning is supported in theory but not adequately practised. This is a fact, but there is no research on it.

D: Additionally the participation rate is much lower for less qualified persons.

45 D: Data per sex and age only available for single person households. In the age group 45-65 women are more likely to own a mobile phone, in the age group 65+ men are more likely to own a mobile phone.

46 FIN: In the age group 45-54 years more women than men use computers. But the use of computer decreases with advancing age and is more common the higher the level of education.

D: Data per sex and age is only available for single person households.

47 There are research gaps concerning the ownership and usage of computers.

D: Data exist on internet access (not use) of single person households only.

Little is known about the labour market participation patterns of older migrant women, but differences are probable and reported at least for two countries. In Austria the labour market participation rate of older migrant women is higher than of older domestic women, while these rates differ only insignificantly in Germany.

Working areas and conditions for older women and attitudes towards older workers are in many respects not well covered by research and official statistics. However there are enough findings across all the MERI countries to suggest that older women:

- are often working in typical female professions (e. g. caring professions),
- are underrepresented in supervisory and intermediate positions compared to both older men and younger women,
- are more likely to work or have been working in low-paid jobs than older men,
- are more likely to work or have worked part-time than older men,
- have a higher probability of health risks or disability caused by worse working conditions,
- are often restricted in their career development by care obligations within their families.

According to Spanish findings on women in universities showed that only one out of ten professors is a woman amongst whom only one third were women of 50 years and over. French research on insomnia, age and work found that women on the one hand and older workers on the other are more likely to suffer from insomnia, often linked to anti-social working hours (early start, late evening or night-work). Dutch research on the career development of older workers indicates that women and ethnic minorities were at the highest risk of working in low paid jobs

Although the number of employed persons in the agricultural sector is declining, the proportion of older women in it has risen in Portugal and Greece. The founding of one's own enterprise can represent special strength but also be a strategy for the self-creation of a working place when alternatives are lacking. For Germany, Italy and Greece we know that older women are more likely to be self-employed than younger women.

Attitudes towards older workers are a research issue at least in some of the countries. In Finland, women in the age group 55+ have the most experience of age discrimination including poorer career and training possibilities, insufficient information and negative attitudes from other workers. In addition, ageing women also had to suffer sex discrimination. For Austria, there is indication of negative attitudes towards older female employees who often feel they are "expected" to take early retirement because of their supposed ability to easily switch roles and have few problems in becoming housewives or pensioners. Research in Sweden and the UK confirms that older women more often experience gender discrimination at their workplace than older men.

In all countries, the regular pension age for men and women has a deciding influence on their exit from the labour market. Other influencing factors are national schemes for early retirement or the accessibility of invalidity benefits. However, as far as information is available, women are leaving the labour market earlier than men, although the difference may be small in some countries.

Women are particularly affected by a time gap between the end of professional life and the start of retirement with retirement more often than men's being preceded by periods of unemployment, early retirement or professional inactivity. In France, one out of ten women experience a period of professional inactivity. This almost exclusive female phenomenon constitutes "unemployment out of hopelessness". Health problems and care obligations are other reasons for the more frequent early retirement of older women. The often-unfavourable working conditions of older women may also explain why older women in some countries feel less negative about their exit from the labour market.

For most of the countries, research leaves no doubt that older women spend more time than older men doing unpaid work in the family. This includes the supervision of children as well as care giving for other dependent persons. In Spain the carer's profile is described as being

female, a daughter over 40 years of age (with an increasing percentage of women between 50 and 60 due to the increasing longevity of parents) and low participation in the labour market.

In contrast, Finnish findings on the willingness to perform domestic work recently showed that women aged 45-54 had reduced their domestic work most, while participation in domestic work increased most among men in the oldest age group. This corresponds to expectations in some countries that the number of older women able or willing to care for children and older people will decline in the future.

An interesting finding from Italy is that care-giving in the family can be the source of intense stress and physical as well as psychological problems, while volunteers and paid carers primarily consider it a source of satisfaction and well-being.

It can be supposed that older women are also more involved in unpaid work in social networks. However, no research or official statistics confirm this assumption.

## European overview on facts and trends on work

### Labour market participation

The employment rate of older women is lower than of older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+/-	+	+	+	+	+	+	+	+	+	+	+

The unemployment rate is higher among older women than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+/-	+/-		+/-	+	+	+/-	+	+	+	+	+

The labour market participation rate of older women has increased in the past years.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+/-	+	+/-	+				-	+	+	-

The labour market participation rate of older migrant women is higher than that of older domestic women.<sup>48</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			-				+				

48 D: The age specific labour market participation of migrant and non-migrant women differs insignificantly.

A: Findings for women with non-Austrian citizenship (versus women with Austrian citizenship).

## Working areas, working conditions and attitudes towards older workers

Older women's working areas are concentrated in typical female professions (e.g. caring services).<sup>49</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+/-		+	+	+			+	+		

Older women are underrepresented in supervisory and intermediate positions, even more than in other age groups.<sup>50</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	+	+	+	+	+	+	+	+	+

Older women are more likely to work or have been working in low-paid jobs than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+	+	+	+	+	+		

Older women are more likely to be part-time employed or to have been part-time employed than older men.<sup>51</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+			+		

Caused by worse working conditions, older women are at higher risk of health problems or disability.<sup>52</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+	+				+		+	

49 S: There are few studies. The statistics give figures for the age groups 16-64 for a most varied sample of 114 professions/occupations, in each case also the educational background for both men and women is given.

E: Women aged 65 and over work in the services. There is a need of more detailed research.

50 Except for S and G see: Eurostat (2002): The life of women and men in Europe, p. 78.

51 Research is lacking on women's motives and awareness of the consequences of part-time work.

52 I: This is applicable to older women, especially at menopause and post menopause age, who take care of others in addition to their paid employment.

Older women's career development is often restricted by care obligations within their families.<sup>53</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+	+	+	+		+	+		+	

Although the number of employed persons in the agricultural sector is declining, the proportion of older women in it has risen.<sup>54</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
								-		+	+

Older women are more likely to be self-employed than younger women.<sup>55</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+/-		+					+			+

Older women more often experience gender discrimination in the workplace.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+					+				

53 P: It's not older women but women in general after 45.

S: support for the "+" is found indirectly in the background papers for the current pension system, though these data come from the period before 1993.

54 S: On the internet Farm labour force 1999 (JO 30 SM 001) gives information for 1999. The next statistical report will indicate trends. The Agricultural Statistical Year Book gives figures but does not present sex together with age indicators. A general observation is that there are fewer younger than older persons of both sexes employed in the agricultural sector.

55 S: Definitions of younger/older are unclear. Women aged 16-34 are less likely to be self-employed or have a Ltd company of their own. When it comes to self-employment the age group 35-44 is very close to the age group 55+, but less frequently own a Ltd Co. Those aged 45-54 has the highest percentage of self-owned Ltd Co's and self-employment. Very few carry on after 65.

### Exit from the labour market

Women leave the labour market earlier than men.<sup>56</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+	+	+		+	+		+	

Older women are more affected by long-term unemployment at the end of their working life than older men.<sup>57</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+/-	+	+	+/-					

Health problems are often the reason for the early retirement of older women.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+	+						+	

Undertaking care work is a frequent reason for the early retirement of older women.<sup>58</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+							+	

Older women feel less negative about their exit from the labour market than older men.<sup>59</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		-				+	+			

56 There are many different reasons, national schemes, pension systems and there are differences due to profession and career. The context has to be analysed in-depth.

S: The difference between the sexes is fairly small.

57 D: In the age group 50-60 yes, in the age group 60-65 no. Women have often already left the labour market.

58 P: It is not older women but women in general after 45.

59 D: German research on women's exit from the labour market will show that this is not the case.

## Unpaid work in the family

Older women spend more time than older men doing unpaid work in the family.<sup>60</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

Women aged 50-64 spend more time than men of this age group looking after children.<sup>61</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

Women aged 50-64 spend more time than men of this age group looking after other dependent persons.<sup>62</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
-	+	+	+	+	+	+		+	+		

The number of older women able or willing to care for children and older people will decline in future.<sup>63</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
				+				+			

## Unpaid work in social networks

There are no empirical findings available, and there is a strong need of gender studies.

### 5.4 Material situation

The material situation of older people in Europe is strongly related to gender, age, marital status, levels of previous salary, previous profession, duration of professional career and national pension schemes.

Sections of the social protection systems in Europe (including welfare schemes and invalidity pensions) have negative effects on the material situation of older women – a statement for which there is evidence with a few national exceptions. The existence or non-existence of a

<sup>60</sup> More research is needed on male work in families.

FIN: Participation in domestic work increased most among men in the oldest age group and women between 45-54 reduced most the amounts of domestic work.

<sup>61</sup> Except for S and UK see Eurostat (2002): The life of women and men in Europe, p. 58.

<sup>62</sup> See Eurostat (2002): The life of women and men in Europe, p. 58.

<sup>63</sup> I: This is what emerges from empirical data and local research: there are no statistics.

universal basic pension system is found to play a crucial role in income, especially for older women. In Finland three types of systems were compared using examples from Finland, Germany and the UK. The Finnish basic pension system guarantees independent pension income even for those women who have been out of the labour market due to, for example, child-care responsibilities. However disability pension applications submitted by women are rejected approximately 1.4 times more often than applications submitted by men. The German type of system, very similar to the Austrian one, is based on labour market participation. Women who did not have paid gainful employment in the past have to rely on their husband's income, on derived pension rights or income support. The gender-bias of this system is overt and a frequent topic of criticism. Similarly, the UK system, based on contribution records, cannot automatically provide independent income for older women. Widows in particular can be considered a disadvantaged group in the present framework of social protection systems in Europe.

A general finding for all MERI countries is that older women have a much lower income than older men. Although generally the income of older people was observed to have increased in the last years in many countries (with cohorts of better-off women being expected to enter the age group 50+ in the next decade), at present the proportion of older women at risk of continuous poverty is still larger than that of older men. This risk increases, based on the very limited information available, for older women from ethnic minorities. They form an especially vulnerable group at risk of poverty and dependency on means tested benefits.

Many detailed reports on the risk of poverty for older women come from the southern countries. In France, for example, it was shown that poverty in old age concerns mainly widows aged 75+. Thus they are the main recipients of the "minimum vieillesse" and the main group living under the poverty line. In Austria, 75% of those receiving an "Ausgleichszulage" – to top up low pensions to the subsistence level – are women. In Italy, almost 16% of women aged 65+ live in poverty (less than 400 € per month). Older women form the majority of all people living under the poverty level. In Spain poverty is unequal, affecting older women more because of their role in domestic labour and family care, their low share in gainful employment and their participation in often unskilled and badly paid work. In 1994, one third of retired Greek people lived in poverty with a higher proportion of these being women. Extreme difficulties are faced by those whose only income is an insufficient pension and who have to rent housing and do not have support from children and other family members.

Nevertheless there are indications that the consumption patterns of younger and older people are becoming more similar. In 1994, Finnish women aged 45+ spent more money on clothes, shoes, and spare time hobbies than earlier. Older women look at fashion design from the perspective of aesthetics and functionality. Good clothing means a better quality of life also for older women. For France, it was reported that "those old women, sad and dignified widows always dressed in black" have largely disappeared from the social landscape, though a few remain in the countryside.

Data on the patterns of consumption of women 64+ living in one-person households show, with a few national exceptions that compared to men of their age they spend

- less money on alcoholic beverages and tobacco,
- more money on medical products and appliances,
- less money on audio-visual and data processing equipment,
- more money on other recreational equipment and items,
- less money on recreational and cultural services,
- less money in hotels, cafés and restaurants.

Older women, with the exception of Germany and the Mediterranean countries, spend more money on newspapers, books and stationery.

More older women than older men live in low standard and inadequately equipped housing. Where the majority of older women are house owners, as in the UK, Spain and Greece, this

helps their financial situation. In other countries and where relevant data are available, as in Germany, the Netherlands and Austria, rental costs significantly burden the income of older female tenants living alone.

Although Finnish older women are seldom poor, compared to other population groups, their dwellings are inadequately equipped compared with other Nordic countries. In Austria, too, older women on average live in worse housing conditions than men. e.g. 27% of older women residing in Vienna do not have their own bathroom as opposed to 18% of older men. In Germany the housing situation of older women is worse than older men's as a consequence of their lower income in old age. In Italy 70% of older women in poverty own a house. However, at regional level there are indications that older women who are alone, never married or separated, live in low quality houses.

More research from a gender perspective is needed on the financial support given between family members and older women. In Portugal a significant section of people over 65 still help their children to subsist and function by providing economic support as well as practical aid. However financial support for parents is the only one where sons surpass daughters in help. Daughters' help is more instrumental and emotional than economic.

European overview on facts and trends on the material situation

Social protection systems

Sections of social protection systems (incl. welfare schemes or invalidity pensions) have negative effects on the material situation of older women.<sup>64</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	-	+	+	+	+	+	+	+	+	+	+

Widows are an especially vulnerable group within the current framework of social protection systems.<sup>65</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+/-		+			+	+	+	+

64 Old age pension systems are an important future research area for all countries.  
 FIN: More female applicants for disability-pension are rejected than men.  
 UK: See point made above relating to pension schemes and their impact on women. The full effect of the introduction of rules in state pensions designed to compensate those who provide unpaid family care at the expense of their earnings have yet to feed through fully into women's state pensions but will benefit younger cohorts.

65 EL: Divorcees have also been at risk but are now entitled to a share of their husband's pension under certain conditions.  
 D: The economic effects of widowhood are assessed differently in German research.  
 S: The present generation of widows have fewer years of gainful work and therefore lower pensions than the coming ones.

### Sources and levels of income

Older women have a much lower income than older men.<sup>66</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

The proportion of older women at risk of continuous poverty is larger than that of older men.<sup>67</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	-	+	+	+	+	+	+	+

Older women from ethnic minorities are at a risk of poverty and dependency on means tested benefits.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+	+	+							

A cohort of financially better-off women is entering the age group 50+.<sup>68</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+/-	+	+	+	+					

### Consumption of goods and services

Consumption patterns of older and younger women have become more alike during the past decades.<sup>69</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+						+					

66 See Eurostat (2002): The life of women and men in Europe, p. 130-131.

67 See Eurostat (2002): The life of women and men in Europe, p. 134.

68 UK: Overall, there is a (modest) trend towards increased full-time employment among younger cohorts of women, but it is likely to be offset by the UK policy of placing increased emphasis on private pensions while reducing the basic state pension relative to average earnings (Arber and Ginn, 2004).

69 UK: General trends show increasing expenditure on consumer goods amongst older households in general.

Women 64+ living in one person households spend less money on alcoholic beverages than the respective group of men.<sup>70</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	-	(+)	+	+	+	+	+	+	+

Women 64+ living in one person households spend less money on tobacco than the respective group of men.<sup>71</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	-	(+)	+	+	+	+	+	+	+

Women 64+ living in one person households spend more money on medical products and appliance than the respective group of men.<sup>72</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	+	(+)	+	+	+	+	+	+	+

Women 64+ living in one person households spend less money on audio-visual and data processing equipment than the respective group of men.<sup>73</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
-		+	+	(-)	+	+	+	+	+	+	+

Women 64+ living in one person households spend more money on other recreational equipment and items than the respective group of men.<sup>74</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	-	(-)	+	+	+	+	+	+	-

70 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.

NL: published with a warning about reliability.

D: The data for Germany include expenditures for tobacco.

71 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.

NL: published with a warning about reliability.

D: The data for Germany include expenditures for alcoholic beverages.

72 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.

NL: published with a warning about reliability.

73 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.

NL: published with a warning about reliability.

74 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.

NL: published with a warning about reliability.

Women 64+ living in one person households spend less money on recreational and cultural services than the respective group of men.<sup>75</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	+	(+)	+	-	+	+	+	+	+

Women 64+ living in one person households spend less money in hotels, cafés and restaurants than the respective group of men.<sup>76</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	+	(+)	+	+	+	+	+	+	+

Women 64+ living in one person households spend more money on newspapers, books and stationery than the respective group of men.<sup>77</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	-	(+)	+	+	+	-	-	-	-

#### Housing conditions and equipment

More older women than older man live in low standard and inadequately equipped housing.<sup>78</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
-			+	+		+	+	+		+	

The majority of older women are house owners.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+	-	-					+		+

75 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.  
NL: published with a warning about reliability.

76 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.  
NL: published with a warning about reliability.

77 Except for S see Eurostat (2002): The life of women and men in Europe, p. 139.  
NL: published with a warning about reliability.

78 FIN: This was the situation about twenty years ago but now compared with men a lower percentage of women live in poorly or very poorly equipped dwellings.

Rental costs significantly burden the income of older female tenants living alone.<sup>79</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+	+			+				

#### Financial support given to family members

More research from a gender perspective is needed.

### 5.5 Social integration, participation and other social issues

The above-mentioned specific factors in the living conditions of older women – from their higher life expectancy, to their lower level of education, to their worse income situation, especially in very old age – have a major influence on their chances of social integration, participation and other social issues.

More older women than older men live alone, and a rising tendency for one-person-households composed of older women can be found in all countries. This has partially demographic reasons – at present women are surviving men in all countries under studies by several years – but these reasons are not independent of cultural and societal backgrounds. The majority of women 65+ lives alone in the six more northern countries of the MERI project, while the contrary is still true for the six more southern countries. There is some evidence for Germany and Austria that patterns of living arrangements and household structures differ notably for older women from ethnic minorities.

Due to demographic factors, widowhood is more common among older women than older men, they have fewer living relatives, and men are privileged in being able to find a new life companion in old age. At the same time, due to the present rising life expectancy especially of men, there is both an increase in the numbers of married older couples and, as a result of growing individualism that does not exclude the older generation, there is an increase in divorce amongst older couples.

As older women have more difficulties in finding a new or regular sexual partner, the question arises as to how they experience this. Little knowledge is found on this topic; the sexuality of older women is still largely neglected by research. But efforts were made in several countries to deconstruct the assumption that women's sexual ability and desire vanishes after the menopause. French research reported men's ideas about sex appeal of post-menopausal women which largely contradicts women's fears that with menopause they become less attractive to men: the majority find women as appealing as before. Nevertheless, in countries where research is found on that topic, as in Finland, men also convey negative stereotypes on post-menopausal women, evoking loss of femininity, acceleration of ageing, bad mood, and no sexual interest. For Italy it was found that sexual activity and falling in love was considered one of the three most important elements in the lives of older women.

Findings on cohabitation between adult children and their old parents vary across Europe. In the Nordic countries there was never a high degree of cohabitation. In other countries one conclusion is that despite a stronger or weaker tendency towards more distant living arrangements, in very old age there is an increase in cohabitation of parents with their adult

79 A: Female pensioners spend a higher percentage of their monthly expenditures on basic consumption, such as food, rent and electricity.

UK: A significant, but much broader finding was that the weekly spending of income by single pensioners, the majority of whom are women, on housing, fuel and power is far more than for couple pensioners.

children. For some southern countries this pattern still holds true and data shows that living with a son, daughter, grandson or granddaughter is more common among old women than living with the spouse.

Due to a lower average age at marriage and higher life expectancy, women do not only have a higher probability of becoming a grandparent than men but, based on findings in Finland and several other countries, also play an important part in intergenerational relations. Although the contacts of older men and women do not seem to differ markedly in their intensity, mutual support networks are obviously stronger amongst older women as well as in inter-generational relationships.

Providing older relatives with formal or informal support is mainly the work of daughters. This confirms on one hand the strong verticality of family networks and, on the other, that given and received help (instrumental and emotional) is strongly lateral.

Conclusions can be drawn that retirement modifies social networks profoundly. The loss of professional relationships is, according to findings in France, often compensated for by a stronger development of family relations. Those who do not have descendants suffer mainly from social isolation at an advanced age; at younger ages, relations with friends, other relatives and contacts from sports, volunteering etc. compensate for this lack. Widows are often more socially integrated than older couples, even if they suffer more from loneliness and depression.

Neighbourhood networks, using findings in several countries, are especially important in situations of social vulnerability as they can constitute a system of self-protection and provide resources for social and individual emancipation. This corresponds with findings from the UK that amongst older women migrants, community groups and centres play an important role in sharing language and culture, offering company and in providing a place for communal gatherings and celebrations. There are indications that extra-familial mutual support networks are stronger among older women than older men.

The mobility of older women correlates with their health status as well as level of income. In both respects, very old women in particular face problems. From Finland we know that many older men mainly use and drive their own cars while older women are mainly passengers in other's vehicles or walk. Female mobility is thus more dependent on other persons, and older women have to develop actions to maintain or improve their independence. In several countries there is a trend towards motorisation among older women, and thus causes a severe disadvantage for those who don't drive a car and are dependent on public transport. Daily shopping in the neighbourhood declines as neighbourhood shops become increasingly less frequented and other shops more remote in urban areas.

Leisure and cultural activity patterns differ between older women and men. Existing findings indicate that older women spend more time reading books while older men prefer newspapers. While older women listen to the radio more often, older men prefer the TV. This could be, but is not necessarily, a question of financial resources. In most of the countries studied, older men are more likely to be members of a club or society than older women, while the latter are comparatively more engaged in church and religious activities. Leisure and cultural activity patterns are not only influenced by gender, but also by social status, education level and local contexts.

There are varying results as regards the degree to which older women and men are engaged in voluntary work, but for both the percentage decreases with increasing age.

For most of the MERI countries there is empirical data that ageism is still evident in different forms although efforts are made to deconstruct ageism. Traditional stereotypes still rule the perception of older women, e.g. in advertising in many countries. Finnish research describes how it has become an obligation for older women to take care of their youthful appearance and how women themselves are taking part in the youth culture and buying different kinds of commodities. On the other hand, TV advertisers are careful not to associate advertised

products with old age. The witch and the granny are the most common cultural representations of older women today.

Interestingly, in the UK it was found that older migrant women feel more respected than non-migrant women, with many pointing out that there was respect for elders in their cultures. It was mainly non-migrant women who brought up the issue of invisibility and of being ignored or dismissed because of their perceived age.

Flemish research yields contradictory insights on the relationship between the changing body and the self-image of older women and it is by no means an unanimously negative self-image. It appears also that men and women's subjective awareness of age does not fundamentally differ. In many countries, there are indications that especially with new generations of women entering the Third Age the self-perception of old age is becoming more positive among women. According to findings in the UK, for older women the main positive aspects about ageing and old age were family and children; time, freedom and activity; and being oneself. Their major fears included ill health; dependency; and loneliness, identity, dignity and appearance.

Increasing age is associated with loss, starting with children leaving home and the loss of professional relations. French research describes the importance of children's departure from their parents' home: while it satisfies parents it also saddens them. For many parents – especially for mothers – this is a major event. Combined with other changes happening in the same period, it generates the feeling of entering a new period of the life course. For several countries it was pointed out that recently retired women miss contacts related to their professional life.

Giving care to dependent family members as well as the loss of the partner often causes tremendous psychological burden. Finnish study results focused on tensions and gaps between felt duty and capacities, and between will and competence to give care. In statements by older women when the patient still was alive, stories featured the writers' experiences of insufficiency of personal resources for caring. In statements when the patient was dead, the care experience was proportional to available resources and the process of care was appraised in positive terms. Through these revisions of care experiences the wives presented themselves as successful caregivers and competent women.

On the other hand, older women have developed successful coping strategies with respect to fear and psychological burden as shown in some countries. Social participation and active retirement (e.g. by volunteering, studying or being an active member of an association) are ways of coping with the situation, and mutual support among older women can be also considered another important strategy.

European overview on social integration, participation and other social issues

Household structure and marital status

More older women than older men live alone.<sup>80</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

80 see Eurostat (2002): The life of men and women in Europe, p. 127.

The majority of women 65+ live alone.<sup>81</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	-	-	-	-	-	-

Patterns of living arrangements and household structure differ notably for older women from ethnic minorities.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+				+				

### Partnership relations

Widowhood is more common among older women than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+	+	+	+	+	+

Older widowed and divorced men have a higher probability of remarrying than older widowed and divorced women.<sup>82</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+	+	+	+	+		+		+	+

Older men have a higher probability of cohabiting than older women.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+			+					

There is an increase in the numbers of married older couples.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+	+			+			+	+	

81 see Eurostat (2002): The life of men and women in Europe, p. 127.

82 D: The probability of remarriage of older persons in general has decreased.

P: Marriage amongst single people is higher in older women but 2nd marriage (widow or divorced) is higher for men.

There is an increase in divorce amongst older couples.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+	+	+					+	

### Sexuality

The sexuality of older women is still largely neglected in research.<sup>83</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	(+)	+	+	+	+	+	+	+	+

Efforts are made to deconstruct the assumption that women's sexual ability and desire vanishes after the menopause.<sup>84</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+	+			+	+	+			

Older women have more difficulties in finding new and/or regular sexual partners and knowledge is limited on how this is experienced.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+			+	+					

### Intergenerational relations (macro level)

There is a decrease in the cohabitation of adult children and their old parents.<sup>85</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	-	+	+	-	+	+		-	+	+	

83 D: There was high awareness on this subject in the feminist movement during the 80s. Existing research mainly is about guidebooks or field reports.

UK: Yes, but research is largely qualitative.

84 A: There is an indication that age is not the most important factor with regard to sexuality.

85 E, F, D, UK: At very old age cohabitation increases.

S, NL: There never was a high degree of cohabitation.

More older women are grandparents than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+					+		+			

Grandmothers play an important part in intergenerational relations.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+		+		+	+	+	

Contacts between older men and women and young people have declined.<sup>86</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+								+			

#### Kinship networks

Older women have fewer living relatives than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
				+			+				

Kinship networks as regards regular contacts are stronger amongst older women than older men.<sup>87</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+	+	+			+	-	+	-	

86 I: Contacts with children are frequent but much more by telephone than personally, while contacts with young people outside the family have declined.

87 P: Case study – The number of people that belongs the kinship network is higher amongst men than women.

D: Case studies: In reverse older women depend more on kinship networks than older men. They face barriers when continuing and taking up extra-familial networks. Kinship networks are especially strong amongst migrant older women.

UK: This is true for contacts which are weekly or more.

Kinship networks for mutual support are stronger amongst older women than older men.<sup>88</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+	+				+	+	+	

Friendship, neighbourhood and community networks (local level)

Social networks are a means of self-protection for socially vulnerable older women.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+	+	+			+	+	+	

Social networks are a means of social and individual emancipation for older women.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+	+	+			+			+

Social networks as regards mutual support are stronger amongst older women than older men.<sup>89</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+	+				+			

Mobility and accessibility

Older women's physical capacity for mobility is worse than that of older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+			+	+		+		+	

88 P: Case study – The number of people that belongs the kinship network is higher amongst men than women.

D: Case studies: See also the comment on the previous statement.

UK: This is true for contacts which are weekly or more.

89 D: Case studies: Care giving can reduce the social networks of older women dramatically. There is a correlation between continuous gainful employment of older women and strong social networks. Contrary to the conventional assumption in rural areas social networks of older women are often weaker than in urban areas. Older women with disability often have no extra-familial networks.

Older women more often depend on public transport than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+		+	+	+	+				

Older women are more often dependent on personal support when leaving the house than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+		+	+						

There is a trend towards motorisation among older women.<sup>90</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+	+	+		+					

Easy access of older women (and men) to daily life infrastructure (e.g. shops) is declining as a result of external changes, such as new locations outside town.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+		+		+					

#### Leisure and cultural activities

Older women spend more time reading books than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+					+	+			

Older women listen to the radio more often than older men.<sup>91</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+/-					+/-	+	+		

<sup>90</sup> D: In East Germany the rate of motorization among older women is significantly lower than in West-Germany.

<sup>91</sup> A: Not based on time use, but on "number of radio listeners in this group". Depends on the contents of the transmissions (e.g. more men listen to sports).

UK: Fewer older women than older men reported listening to the radio but from age 65 onwards, older women listened to the radio for longer amounts of time.

Older women read newspapers less often than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+					+	+			

Older women attend religious practices more often than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+	+					+	+		+	

Older women watch less television than older men.<sup>92</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		-					+	+	+		

Older men are more likely to be members of clubs or a societies than older women.<sup>93</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
-	+	+/-	+	+	+	+	+	+	+	+	+

92 UK: Percentages for all older people aged 50+ indicate that equal proportions of men and women watch television (99%) for more or less the same amount of time per week (37 hours and 36 hours respectively).

E: The differences between women and men are minimal.

93 Except for UK see Eurostat (2002): The life of women and men in Europe, p. 141.

FIN: In the age group 65+ the figures for men and women are equal.

UK: Women are more likely than men not to be in any clubs or societies but, on the other hand, are more likely than men to be in four or more clubs or societies.

## Volunteering

Older men engage in voluntary work more often than older women.<sup>94</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		-	+	+/-				+			

The range of voluntary work activities offered is broader for older men than older women.<sup>95</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+					+			

The percentage of older women engaged in voluntary work decreases with increasing age.<sup>96</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+		+	+	+	+	+		+			

### Ageism and other kinds of discrimination

Ageism is still apparent in different forms.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+		+			

Traditional stereotypes still rule the perception of older women, e.g. in advertising.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+	+			+			+

<sup>94</sup> All countries: More gender research is needed on working areas, functions and motivation of older volunteers. More gender research is also needed on the volunteering potential among older people.

D: More women than men are engaged in voluntary work in the church sector.

NL: In the age group 50-64 women volunteer slightly more, in the age group 65+ men volunteer more frequently.

UK: With the exception of the environment, perhaps because it involves heavy labour, in key areas there are typically more older women than older men.

S: Women and men are both active, but not always in the same type, in some women are more active, in some men.

<sup>95</sup> D: The range accords to the gender related division of labour.

<sup>96</sup> D: The same goes for the voluntary work of older men.

Efforts are made to analyse and deconstruct ageism.<sup>97</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	(+)	+	+	+			+			

### Socio-psychological aspects

Older migrant women feel more respected than non-migrant older women.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
		+									

New models of “growing old youthfully” are becoming an individual “must”.<sup>98</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+			+					

Older women are dissatisfied with their physical appearance.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+/-		+			-			+			

Children who have recently left home are experienced as a loss especially by older women (empty-nest-syndrome).<sup>99</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+/-			+					

Recently retired women miss contacts related to their professional life.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+/-		+			+		+			+

97 I: The little research existing has been conducted at local level.

UK: Data on discrimination is collected in relation to views on employment and educational practices.

98 More research is needed on how older women are affected by this idea.

99 More research is needed in how far this is a stereotype.

D: There are contradictory results to be found on this trend but studies agree that for older women the move out of children marks a new period in life more than for older men.

Older women giving care to dependent family members often experience psychological burdens.<sup>100</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+	+	+	+		+	+		

The loss of the partner causes tremendous psychological burdens.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+		+	+	+						

Social participation / active retirement (e.g. volunteering, studying, membership in associations) is a successful coping strategy for older women as regards fears and psychological burdens.<sup>101</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+/-		+			+	+		+

Mutual support among older women is a successful coping strategy as regards fears and psychological burdens.<sup>102</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+										

The self-perception of old age is becoming more positive among women.<sup>103</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
				+	+	+		+/-	+	+	

## 5.6 Crime and abuse

Research on crime and abuse with regards to older women is lacking in most of the countries and for most relevant aspects. Particular findings from individual countries, however, provide a basis for the assumption that may hold true in other countries.

For Sweden it is known that experiences of being exposed to violence are widespread among women. Almost one out of ten women aged 45-64 had been exposed to violence dur-

100 D: One case study stresses that care giving also can have positive psychological aspects.

101 D: This can be the case or not. I.e. for voluntary work also negative aspects for older women are reported.

102 More research is needed on the quality of life in relation to retirement.

103 P: Case-Study.

ing the previous year and 44% reported being exposed to violence once or several times since they were 15. Findings in the UK show that over a half of the older women interviewed disclosed abuse in earlier stages of their lives (and detailed descriptions of their subsequent and ongoing support needs).

In Finland, women experience more frightening stalking with increasing age. In the age group 65-74 years, the prevalence of such experience was highest. Furthermore, an above-average proportion (13%) of those at least 55 years old had at least once in their life been threatened by losing their jobs as a means of coercing them into sexual relations.

In most of the MERI countries, some results could be found for violence and all forms of abuse (including neglect) against older women often occurring in families or those close to them. Family cohabitation can bring some aid, but it often goes together with aggression and indifference towards older and vulnerable family members.

In a region in northern Sweden 16% of women and 13% of men had been exposed to violence or injustice of some kind after the age of 65. Neglect was most common, harassment and threats came next. Violence covered the whole range of physical, psychological, sexual and financial abuse. The perpetrators were partners, children and sometime persons outside the family. Finnish researchers conclude that older women are often invisible victims. Men using violence against women often had a drinking problem or problems with mental health. When older women practice violence against older men, they often use neglect of care as a method. Older men use physical power.

According to results from the UK women are more likely to be abused by men, whereas men are more likely to be the perpetrator of abuse. Sons are more likely to abuse than husbands, within a familial structure, and gendered power relations remain important in older age.

For Germany, we know that older women are more often victims of direct and indirect forms of violence and abuse in homes for the elderly than older men.

Finnish findings show that younger women tend to seek help via informal channels, while 45-54 year old women are more likely than others to resort to official channels. For both Finland and Italy, it was concluded that very old women do not seek any help.

European overview on facts and trends in crime and abuse

General aspects

Older women are less exposed to violence in general than women in their middle years.<sup>104</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+/-	+		-			+		+	

104 More research is necessary to verify this, and more research is needed on violence and abuse against older women in general.

B: Women are more often confronted with violence than men after the age of 60.

D: This applies on criminality and on crime or abuse in social networks.

Older women are often invisible victims of violence and abuse.<sup>105</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+		+		+			+			

Women form a majority of victims of violence in old age.<sup>106</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+/-	+	+/-		+	+		+		+	

While younger women tend to seek help via informal channels when becoming a victim of violence, older women are more often resorting to official channels.<sup>107</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	(+)										

Crime and abuse in public environments

Older women experience frightening stalking more often than younger women.<sup>108</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+											

105 D: Violence in families and in family care, where older women are disproportionately affected, is especially “invisible”.

106 P, I: The focus of research is on violence in families.

FIN: Data is based on registrations in a call-centre for victims of violence and on results on an elder-abuse intervention project.

B: There is an increase in financial violence. There has been a change in different kinds of violence.

D: This applies to abuse in care but not on other forms of crime and abuse.

S: In the overall statistics men dominate but in surveys taking into account also violence within the household women show a higher incidence.

F: There are doubts if men are as willing to report as women when victim of violence.

107 FIN, I: Very old women do not seek any help.

108 More research is needed on sexual harassment and other traumatic experiences at the workplace and other public environments and its consequences in later life.

### Crime and abuse in families

Violence and all forms of abuse (including neglect) against older women often occur in families or close to them.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+	+	+	+	+	+	+		+	+	+	

When older women practice violence against others, they often use neglect of care as a method; older men use physical power.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
+											

### Crime and abuse in health care and homes for the elderly

Older women are more often victims of direct and indirect forms of violence and abuse in homes for the elderly than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
			+								

### 5.7 Interest representation

The capability for interest representation and lobbying for the particular interest of one's own societal group needs knowledge of the relevant political structures and, in some cases, experience. One of the central project hypotheses was that older women are disadvantaged in this respect, based on the observation that women's associations tend to focus on issues relevant to the lives of younger women while in seniors' organisations mainly men obtain the decision making functions.

Research on this topic is missing to a great extent. Generally speaking, the findings in different countries show that both membership and the level of activity in organisations depend on factors such as level of education and professional status. Taking France to give an example, it can be stated that women who belong to associations are at the same time more interested in political life, in reading newspapers and/or in participating in elections.

As regards participation in elections, it cannot be said in general that older women make less use of their right to vote than older men. Although this is the case in Italy, contrary findings exist for Finland. In Sweden, only women 75+ and in Germany, women 60+ participate less in elections. Again, significant differences can be noted concerning income and nationality when, as in Sweden, this topic is analysed in detail.

The empirical basis for conclusions in this area is extraordinarily weak, but there is particular indication at national level that older women, compared with older men,

- are less interested in politics,
- vote more traditionally (but not necessarily more conservatively),

- are less frequently political candidates and
- tend to vote for male candidates.

When it comes to the membership in interest or lobby groups, results remain vague. But if they are members, older women – with the exception of Finland and Sweden – seem to be more active than older men. As found for Austria, there is clear evidence that women are less represented in decision-making processes at NGO level, especially in the big seniors' organisations. But no specific research evidence confirms this conclusion.

## European overview on facts and trends on interest representation

### Political participation

Older women are less interested in politics than men.<sup>109</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
	+/-	+	+		+		+	+			+

Older women make less use of their right to vote than older men.<sup>110</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
-	+/-	+/-	+/-					+			

Older women tend to vote more traditionally than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
							+				

Older women are less frequently political candidates than older men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
								+			+

109 A: The indicator here is the number of men/women watching TV programmes on politics, discussions etc.

S: Both older women and men show by their voting in the elections a high interest in politics. For some age groups figures are higher for women, for others for men but the differences are small.

110 D: In the age group 50-60 in some elections no, in the age group 60+ yes.

UK: Different surveys show different findings.

S: In the age group 75+ yes, in the age group 65- no. There are also significant differences concerning income and nationality.

## Representation in interest groups and lobby groups

Older women are less likely to be members of interest or lobby groups than men.

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
<b>(-)</b>	<b>+/-</b>	<b>-</b>	<b>+</b>	<b>+/-</b>	<b>+/-</b>			<b>+</b>			

Older female members of interest groups are more active (e.g. attending association meetings) than older male members.<sup>111</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
<b>+</b>	<b>+</b>			<b>+/-</b>	<b>+</b>			<b>-</b>			

## Participation in formal and informal decision-making processes

Older women tend to vote for male candidates in elections.<sup>112</sup>

FIN	S	UK	D	NL	B	F	A	I	E	P	EL
<b>+</b>											

## 6. Conclusions

### 6.1 Research needs to cover knowledge gaps on the living conditions of older women in Europe

The results of the mapping exercise formed a solid basis for a ranking of research needs to cover knowledge gaps on the living conditions of older women. Per country five points could be allocated for the most important research themes or sub-themes, either to one issue or spread over different issues. The combination of all assessments by country provided another overview at European level. The following results were achieved:

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111 More research is needed.

112 More research is needed.

**Ranking of the need of research according to the themes and subthemes under study**

		all MERI countries	Austria	Belgium	Finland	France	Germany	Greece	Italy	Portugal	Spain	Sweden	The Netherlands	United Kingdom
<b>1. Health</b>	<b>1</b>					1								
1.1 General health aspects	3									2		1		
1.2 Physical disorders and disabilities	0													
1.3 Mental disorder and disabilities	1								1					
1.4 Medical treatment (cure) and health care	2									1	1			
1.5 Care at home	4		1	1			1					1		
1.6 Care in institutions	7			1	1	1	1	1	1					1
1.7 Healthy lifestyles, self-care, prevention	6		1		1				1	1	1			1
<b>2. Education</b>	<b>7</b>					2				2		1	2	
2.1 General education	1							1						
2.2 Professional and vocational training	3		1					1	1					
2.3 Life-long learning	11	2	2	1	1	1	1	1	1		1			
<b>3. Work</b>	<b>0</b>													
3.1 Labour market participation	3									2				1
3.2 Working areas, conditions and attitudes towards older workers	5					1	1	1	1			1		
3.3 Exit from the labour market	12	2	1	1	2		1	1	1		1	1	1	
3.4 Unpaid work in the family	3			1			1		1					
3.5 Unpaid work in social networks	3			1			1				1			

**Ranking of the need of research  
according to the themes and subthemes  
under study**

		all MERI countries	Austria	Belgium	Finland	France	Germany	Greece	Italy	Portugal	Spain	Sweden	The Netherlands	United Kingdom
<b>4. Material situation</b>	<b>0</b>													
4.1 Sources and levels of income	2						1					1		
4.2 Social protection systems effecting older women	4			1			2	1						
4.3 Consumption of goods and services	6		1	1				1	1	1				1
4.4 Housing conditions and equipment	3							1		1		1		
4.5 Financial support given to family members	4		1			1				1				1
<b>5. Social integration, participation and other social issues</b>	<b>0</b>													
5.1 Household structure and marital status	0													
5.2 Partnership relations	1				1									
5.3 Intergenerational relations (macro level)	7	2				1	1	1			1	1		
5.4 Sexuality	8		2		1			1	1	1	1			1
5.5 Kinship networks	1			1										
5.6 Friendship, neighbourhood and community networks (local level)	6		1	1			1			1	1			1
5.7 Mobility and accessibility	4				1	1		1				1		
5.8 Leisure and cultural activities	4			1							1	1	1	
5.9 Volunteering	7			1	2				1		1	1	1	
5.10 Ageism and other kinds of discrimination	10	3		1	1			1	1	1	1			1
5.11 Socio-psychological aspects	5	2			1				1		1			

**Ranking of the need of research according to the themes and subthemes under study**

	all MERI countries	Austria	Belgium	Finland	France	Germany	Greece	Italy	Portugal	Spain	Sweden	The Netherlands	United Kingdom
<b>6. Crime and abuse</b>	<b>11</b>	2		1	2	2	2		1		1		
6.1 Crime / abuse in public environments	0												
6.2 Crime / abuse in families	3		1					1			1		
6.3 Crime / abuse in health care and homes for the elderly	4		2					1			1		
<b>7. Interest representation</b>	<b>8</b>			1	1	2	1		1				2
7.1 Political participation	3		1			1						1	
7.2 Representation in interest groups and lobby groups	1											1	
7.3 Participation in formal and informal decision-making processes	6	2				1				1	1	1	

Results indicated that the most urgent research was needed on the following areas:

- Older women as victims of crime and abuse in all aspects,
- interest representation of older women, with special emphasis on their participation in formal and informal decision-making processes,
- education of older women, especially vocational training and life-long learning,
- the sub-themes of care in institutions and healthy life-styles, self-care as well as prevention in the context of the health area,
- the exit of older women from the labour market in the context of the work area,
- the consumption of goods and services in the context of their material situation and its effects to living conditions,
- the sub-themes of intergenerational relations, sexuality, friendship, neighbourhood and community networks, volunteering, ageism and other kinds of discrimination in the context of the social integration, participation and other social issues concerning the lives of older women.

Furthermore there is a lack of knowledge on the living conditions of older migrant women in most respects and for most countries and deserve much more awareness by researchers.

## 6.2 The need to improve the publication of official statistics concerning the living conditions of older women in Europe

Based on the findings from the analysis of published official statistics on the living conditions of older women, the MERI research partners consider the following improvements worthy of being considered in all European countries:

- The situation of women at age 50+ should be adequately covered, if possible in special editions on women and/or on older persons as well as mainstreamed in all current statistics.
- Special editions on the living conditions of older persons (such as the “Old Age Barometer” in Finland, “Anziani in Italia” or “Im Blickpunkt: Ältere Menschen” in Germany) should be published on a regular basis and data should be gendered.
- Given the increase in life expectancy of men and women, age categories should be made in steps of 5 years and increased to cover minimally those in the age group 80-85 years. However the costs and benefits of this practice have to be calculated. If the values in the highest listed age group are low, a further differentiation of this age group is not absolutely necessary.
- Given that the future retirement age is likely to be more flexible, statistics concerning the labour market should include older age groups beyond the traditional and current retirement ages.
- In an ageing society it is important to monitor the health behaviour of older persons more regularly than is currently the case.
- Given the trend towards continued international migration, ethnicity should be included in official statistics in addition to age and gender to ensure that the far-reaching current invisibility of migrant men and women in official statistics is reduced. A discussion must take place to decide about an acceptable statistical indicator to determine migrant women and men.
- Unpaid work, particularly care work, should be considered for inclusion in official statistics since it constitutes an economic contribution to society.
- Official statistical publications should not be concerned primarily with economic and labour market issues but should also consider geronto-sociological and geronto-psychological concepts.
- In an ageing society more research is needed on new relevant issues, especially:
  - inter/intra-generational help and support networks, e.g. financial support given to family members,

- life-long learning,
- attitudes towards older workers,
- attitudes of older persons,
- time use of older persons, i.e. participation in social activities,
- ageism and other kinds of discrimination,
- crime, violence and abuse against older persons with a special focus on formal and informal care settings,
- interest representation of older persons.

Survey results on these issues should then in a second step be included in official statistics.

- Official statistics should be made fully and freely accessible on the Internet, thus facilitating their use and development by all those interested.
- Official statistics are usually gathered for a purpose, including amongst others, political decision-making; this raises the question about their cost-effectiveness and potential revisions in their concepts.

### 6.3 Ad-hoc statements of NGO and government representatives at the European MERI seminar concerning needs for research and socio-political action<sup>113</sup>

*Karin Stiehr, ISIS, MERI-Coordinator*

It is part of the MERI project to support and facilitate the work of NGOs and policy-makers. After we have presented and discussed our results on the living conditions of older women, please let us know what we can do for you in terms of our past and future work.

*Nancy Lewis, United Nations Sub-committee on Older Women*

I cannot tell you strongly enough how important the work is that you have been doing. We need this kind of information and I would say we need even more specific information. I am going to give you a specific recommendation that would help you and us. We need hard facts. It is easy to make the generalisation that whatever is terrible in the world is worse for older people, and this is true. I have a network of people all over the world and I told them that we were going to meetings of the CEDAW-experts. We raise the matter of “older women” at every CEDAW-session, to keep reminding them. But when I was asked for specific information on older women in Europe, I did not have anything to present since it would have taken me too much time to have pulled it together.

*Mercedes Mas, Asociacion Multidisciplinar de Gerontologia, Spain*

I would say that we need mainly the national MERI articles and the different papers you presented during the first day of the seminar. Older women often work in the care sector as daughters, mothers and sisters. There are a lot of older women who have to support other people. We have to support people who act as carers and get involved in the care sector. And we really need more information about that particular field. We want to know what our target group is, and we need to know what to do for carers.

*Alvy Derks, OWN Europe*

From my point of view, longitudinal studies are very important, and we would like to know more about the differences between southern and northern Europe. They turn up every time, but where do they come from? And what are their consequences?

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<sup>113</sup> The following statements are excerpts from the final discussion of the MERI seminar which followed the presentation of research results. The MERI seminar took place on 10 and 11 September 2004 in Brussels.

*Gertraud Daye, EURAG*

At the level of our organisation, at the level of the different organisations and associations which we represent, it is important to have a good knowledge of the field in which we work. There are for example other NGOs that do not really represent the interests of older people. More data could be of great help for them. We need to see how to use the different data and this might help us to find a good answer to the differences related to age and aging. We should consider the fact that we are lacking data even more in east European countries.

*Cécile Cochy, Service des droits des femmes et de l'égalité, France*

As a representative of the service in charge of the rights of women and equality in France, I can say that we are interested in any data or any comparison between the different countries. When we compare data from different countries, we become aware of the fact that there are serious difficulties, serious problems. Yesterday we mentioned the survey which was published related to violence. We have to have accurate figures about violence against older women. So we would be ready to add some further data to the survey and we would be willing to get information about older women and about violence against them.

*Björg Ofstad, Scientific Officer European Commission*

I work in the European Commission's unit for research in social science and humanities. So I am more on the receiving side than on putting any requirements to you. But I have listened to your presentations with great interest. We have financed some 250 projects in the two last framework programmes, which are now ending. So I am wondering if your list of blind spots is the state of the art, which allows us to say that we do not have research in this. That would be very interesting for us to have. Because I think that I recognise a lot of the aspects that you touched that might be covered to some extent at least in some of the projects ongoing or about to end: on social exclusion, inclusion, cohesion, on education or whatever. Some of the studies are gender-blind and also age-blind. But we increasingly try to open up the studies and insist that it is not only a question of participation of men and women, even if the participation of women normally helps. So it is also a question of the content of the research. So if it is so that we really have a good state of the art showing that these aspects are missing, I would be very grateful to receive that. Thank you.

*Teresa Sancho-Castieta, Ministerio de Trabajo y Asuntos Sociales, Instituto de Migraciones y Servicios Sociales (IMERSO), Spain*

Most of the elements I wanted to mention have already been mentioned. As far as we are concerned we want to focus on all women and on all the consequences this might have. I think that it is a field of critical importance. Especially we need to get more information about carers. Women acting as carers is a field on which we do not have enough data, and we also need to determine what the negative and positive consequences of women involved in care are. There is another topic related to the care issue; we need for example to focus on emotional issues. The emotional dimension is something of critical importance. Sometimes women show some reactions because of their situation, and there are risks which might be related to the role played by women in the field of care. There is also another point which is important: we need to be better informed about empowerment programmes, about good practice. We need to get further information about the positive evolution of older women. I believe that we are not well informed about the different existing possibilities, about the possibilities which would allow women to live better. I think it is really important to further investigate this field because there are special programmes for older women. Thank you.

*Hanna Nyfors, Senior Officer, Ministry of Social Affairs and Health, Finland*

I work in the Ministry of Social Care and Health in Finland and I am a senior officer in the Health Department. That is why older women's issues are very important and close to my heart. These discussions yesterday concerning the health aspect was very, very interesting

and important for me and the future challenges bringing in the ministerial level in Finland. As you know we have a lot of data in Finland, thanks to my colleagues from STAKES. It is very interesting and there are many new aspects for me, too. Health is never isolated from the society, I think. At the ministerial level we are responsible for financial resources and policy programmes. As you know the population of older people in Finland is increasing faster than in any other country in Europe. Our present system cannot carry on. We have an institutional service and care system in Finland and therefore all these indicators and data-based knowledge concerning and correlating to health is most important for us. We have national policy plans for older people, and our responsibility at governmental level is to take care of all older people, not only women but also men. But we found here points of view and data from women which are important for me. These have been very nice days for me. Thank you.

*Annikki Korhonen, Association of Care Giving Relatives and Friends, Finland*

I come from Finland, too. I am an old civil servant and have been retired now for four years from STAKES. I know from my working life that researchers are not able to give figures because the old sentence "money talks" is applicable in this area as well. I would very much like to see that we could use all the good things done by women as a resource. How much will this work by older women as care givers, as consumers, as tax-payers etc. be in Euro? By now we have not evaluated that. I think it is quite easy to put these in Euros. Because it is said that the society will stop without older women, because we travel, we participate in congresses, in films, we visit concerts, art exhibitions. Without us it would be empty. We fill all the places and that why I think we are very valuable. How much would it cost if we did not exist and if we did not participate? Thank you.

*Hildrun Sundseth, European Institute of Women's Health*

I represent the European Institute of Women's Health. So naturally I would go immediately for the point that the health aspects, a healthy lifestyle, self-care as well as prevention are most important. Thank you very much for this data you showed us yesterday, because it will be so helpful in our work to refer to your document when we argue our case. So this is extremely useful. Looking at this data, the longer life span of women is not always healthy as we heard. So our work at the institute would very much concentrate on extending the years that women live longer are actually healthy to prevent disability and dependency. Because this is what women fear most: to become dependent in old age. So what can be done to promote healthy lifestyles and prevention? Also health can never be considered in isolation, it fits in the whole socio-economic environment. Therefore education, work life and many other factors influence the health status of older women. So I think that we need studies and research on how this could be pulled together. Then we will have a fantastic tool to show decision makers that this is the really costly part of care, which we heard already from Finland. Our care system and our social system cannot cope with it anymore. So this is to reduce that. Thank you.

*Anita Harting-Zagwijn, OWN, The Netherlands*

I have been thinking all the time about the remark you made about research lacking on education and wealth. English is not my native language, and Dutch is never spoken in any big assembly. As Dutch older women we have to think twice before we say anything at all. So that is one of the reasons that prevent us from contacting other older women that we find in our network in Europe. That means that our view is often quite limited, because we cannot make the contacts we would like to have. What I want to say is that the quality of life for older women is one of the very important subjects that run through all the purposes of the different researches. In our OWN network we are very much concerned with health of older women. If we want to work with our local or national governments, they ask us "what are your needs?" So what we need as NGOs is evidence of what is known and what is proven about older women's diseases, complaints etc., which are perhaps typical of older women. I give one example: We used to say osteoporosis is a typical old women's disease, and of course authori-

ties will say that the opposite has been proven. It is not just a disease of old women but also of younger women, men and even children. So they can very easily destroy our arguments.

Then there is another question about very old women, the group of vulnerable and dependent women that may be seen as starting from age 80. There is the demand in all western countries towards older women that they remain independent in their own homes as long as possible. On the other hand I find no measures that are taken to capacitate these very old women. They have no particular skills to continue. They receive no information about what is necessary to really manage themselves. So this is another point for research: How far are these vulnerable groups capable of living on their own? Where is the transition? At what moment are the risks becoming too big? When will it be too late to change to an institution? That leads me to another question: The quality of life again for the women who have to go into institutions, how is it measured? Is it measured at all? It is a group that has been little discussed here and which is seldom discussed in general, I think. These are my questions for you. With all my compliments and gratitude for the enormous amount of information you have gathered and which many of us will probably be able to use.

*Nancy Lewis, United Nations Sub-committee on Older Women*

I just would like to react a little bit. I realise I am a bit of an outsider here and maybe that is actually not so bad. I would like to support what this lady just said. When we talk to officials at the United Nations they have a hard time and they are only pretending to be interested in whether someone feels good somewhere. They want facts and figures, too. I want to emphasise that. The other thing is that there are three areas from my perspective to put some emphasis on: I was really surprised yesterday at the lack of information on abuse of older women. In my country it is a huge topic. Huge amounts of work have been done and governments have been involved. The one area that I think was not mentioned in the otherwise very good talk was financial abuse. It is probably the most prevalent one. And I know from my travels to developing countries that often when one person, the older woman, has a pension, members of her family steal that pension. So I would like you to alert you to that issue. On this area there is now an international association on elder abuse that you just might want to get connected with. It is an academic group, so they are doing research.

The other thing that I am personally very interested in is this difference between southern and northern Europe, but also between the north and the south within your countries. Certainly I have no answers to that and I do not think you do either. It is a very, very interesting area of research.

The third area that I think would be very important and I did not hear discussed is the living situation of older people who are in homes. The word "independent" keeps getting pushed around and that may be a goal for some. But there is the question of institutional care. I was very shocked when I heard that the percentage of older people in institutional care in the United States is the same as in China. Thank you very much. Otherwise it has been very fascinating and helpful.

*Elizabeth Sclater, London Borough of Lewisham, Policy and Partnership Unit, United Kingdom*

I think many of my colleagues here from the older women's network have spoken very eloquently. I do not think I can add to what they are saying. So I am going to speak from the perspective of my paid work as a local policy maker from the UK. I think in the UK we have some exciting legislation coming up which is the development of a single equalities commission. That will be the semi-governmental semi-autonomous body that will promote equalities in all areas. One of the questions that I have of things that have been eluded to here during your research was the alliances that we can make between the different equality strands, which will endure longer, so that you do not get competition by saying "Well black older women need this". Our approach in Europe recognises the great diversity of older women and the diversity of society. Therefore we need to do some more transgender issues that

have not been touched. And that is an issue that certainly in our community we are looking at but are not sure how to approach. And I think it is not necessarily a global big subject, but those women and men who are transgender face incredible discrimination. I think by doing those alliances, since whether it is gender, or whether age, may in a sense not matter. Because if you are dealing with it jointly, the fact is that it is about discrimination and lack of equal opportunities. I think what has been so good here is about establishing the baseline, knowing what your baseline data is; because only when you know the baseline, you know if you are making a difference or not. So there is an issue about knowing where you are starting from, so that you can know if you are closing gaps. I think there is an issue where you were concerned about older men as well. A gender approach is about the comparison. One must not forget older men, and I think we will find that some groups of older men have more in common with other groups of older women than with the totality of older women or with women in general. As civil servants we need to make the small amounts of money that we do have to be the most effective. So there may well be alliances to be made not just around that but with men as well. We were discussing over the table about maybe our work needs to focus on men taking responsibility and taking action, which will actually make women's lives better. Thank you.

*Lucy Aarnink, Ministerie van VWS Directie Verpleging, Verzorging & Ouderen, The Netherlands*

First of all I want to thank you for your invitation because I feel very rich being part of this network that is here. What I can add to all the things that have been said here is the spectacles we wear. I have to confess I am interested in a two page summary as well, and it is not because I do not want to read the long reports but because we have to set priorities. Within the ministry where I work, it is rare that anybody has any interest in a gender perspective whatsoever. It is not only within our ministry but also within the Ministry of Social Affairs that there is minimal attention for the gender issues. So then you have two choices: You can say we will try to get that focus in, but I do not think it is very efficient. What I try to do is to see what spectacles of gender there are behind the spectacles of aging I wear. In this way the research that was done is very crucial and fits into it. But a very efficient way is needed.

There are very specific issues and very specific priorities and I must say, making this observation that when I hear them, they are very, very important. But when I have to rate this on the scale I have to say it is interesting but I cannot feed it into the Ministry. I am very direct maybe but I think that this is the situation. What has been said about public relations is very important as well: The worlds of researchers and policy makers may sometimes be very distant. But I think that it is a challenge for both of us to see how we can proceed because it takes energy. Meetings like these are very efficient I would say. But then, going back to the office, you need to know what you carry with you and what you can bring across. Then you need these facts and figures because facts and figures talk. And you have facts and figures, and we have something to feed it into. So that's what I am basically looking for in this meeting and I hope to take with me.

*Yvonne Giedenbacher, European Centre for Social Welfare Policy and Research, Austria*

The representative of the Austrian Ministry for Social Affairs and Generation Issues, Sissy Hechl, is quite interested in older people and has always been supportive, but unfortunately she could not attend the meeting today. She has asked me to tell you that she would have wanted to participate here and before the seminar she gave me a paper that I want to sum up. She is not directly talking about the results of the seminar of course, but she read the Austrian article and she took a personal position. She says that the MERI work really persuaded her of the fact that much more needs to be done about women aged 50+. But following the decision of the Ministry of Social Affairs, activities for older people and the corresponding financial means are no longer foreseen. The Ministry for Health has to take care of those issues. So in the coming years we will not have even the existing money available any more, which is not very positive news.

But however, we remain somehow optimistic. We think that the Ministry of Health will deal with those issues, but Sissy Hechl from the Ministry of Social Affairs has also raised another important issue. She says that gender mainstreaming in fact has not been tackled a lot, and we should raise that point actively, look at women as a heterogeneous group and also look at the sub-groups amongst older women. And finally she concludes by thanking ISIS and particularly Karin Stiehr for the very good cooperation and she hopes that this cooperation will go on in the future. Thank you.

*Aleksandra Plackowska, Vis Vitalis, Poland*

Someone from the government should have been invited but of course we had some difficulties in finding someone in Poland who would do this. At the level of the cabinet of the Prime Minister, at the beginning we did not know the name of the person, but now we do. The representative of the Prime Minister is also responsible for Social Affairs and Health and she wanted to send her greetings to the group. And of course I am getting in touch with her. Maybe we might really try to make sure that the Polish government also starts dealing with those matters through a number of steps. I do not think that this really happened in the past. So I hope that we will now be able to move ahead. I would like to thank you allowing me to attend the meeting, because for me it was very, very enriching. And I hope that I will be able to draw the interest of other people, mainly sociologists within the university to it.

*Donatella Poselli, Comune di Roma – Commissione Elette, Italy*

I would like to congratulate the organisers of the seminar. The research of Eurostat highlighted some very interesting data regarding the emancipation of women in politics and political life. Women seem to be less interested in politics, and I hope that this project will allow us to draw Europe's attention to the conditions of women in society and in politics. But in Europe and in Italy I hope that something is changing. We need all of the women and some common sense, and I think that hereby all women might be winning in politics. I thank you for your attention.

*Graziana Delpierre, Coordinamento donne UIL Pensionati, Italy*

Here we have really talked about different realities, and as a representative of the municipality of Rome in fact I could provide you with a lot of suggestions. The municipality of Rome has now developed many activities for the benefit of women. I notice that we have a high percentage of women working in the municipal administration of Rome. We have had certain projects developed for older people caused by last year's tragedy due to the heat wave we had. We organised special events where older people could spend some days in parks, they could also enjoy some leisure time, cultural activities were redeployed and some community services were enhanced. Unfortunately we do not have many resources and therefore we have taken small steps at a time.

I hope that EU-policy will dedicate many more resources to older people who should be seen as a resource and not only as a burden for society. First of all I would like to thank you for allowing me to take part in this event. I can tell you that the union of retired people in Italy will read the report as a whole, because it is important for us. We always want to translate in positive actions and concrete steps all the data we collect either through important research work like yours or directly through the contacts we have with older people.

I must tell you that I have a problem. I know that problems start at the age of 50 but I am quite convinced that a 50 year old woman is not an old woman. We have different age groups even in that age group itself, and I think a research work should certainly be differentiated here because I will be 70 years old in one month time. When my grandma was 70 years old, even though she was very lively I considered her as an old woman, but I cannot feel as if I am an old person. And I think that this is a reality. And we need to look at this very closely. And I think that our research work and other research should certainly look at those issues also of active women and that they may want to do for the first time in their lives,

things that they haven't had the opportunity to do before. In the field of education it is true because a large majority of older women have had a low level of school-attendance, at least in Italy, and I think it is somewhat the same everywhere that also they maybe willing to travel, sometimes for the whole winter. They will reduce their expenditures on food to be able to organise a nice journey. If you come to some regions in Italy, on Saturday evenings you will find older women dancing, having fun and feeling free to be what they want to be, to be themselves. And then you also have men of course who criticise that, who do not always accept this.

In any case I think that we should try to look at all the resources which are being dedicated to studies on older people and also insist on gender based statistics. This is not easy of course but we should also try to get concrete answers to questions that come from this research work and from all the activities which have been put in place. I think that the time has come now to really try to work together, to become united in order to get answers. I am deeply convinced that this is really the only thing that will allow us to win. We need to be united. Working together, fighting together, you pull your capabilities, you organise joint projects and find a common point. Of course we can go on with our own activities, that's the way it is. We all have the possibility to form target groups. We should really unite on some things. When you talk about countries that have just joined the EU: In those countries social realities are completely different and we need to learn about these realities. Another problem that is quite visible in Italy is the problem of the fourth generation of migrant women. Hereby I mean those women who came to take care of our children. Now they are coming to take care of our grandparents. They do not go back to their countries of origin and they have very limited retirement schemes whenever they were paid officially, or they do not have anything. We have to take care of those women because they have had a very hard life and therefore are faced with health problems. We know that migrant people do not always have the same problems as we have. So I think that point should also be part of our joint work.

*Italia* *Losa, Coordinamento donne SPI CGIL, Italy*

Your research is very interesting but I think that speaking of health care and prevention is to speak of services that really affect these issues. I think we need more knowledge on services for older people and especially for older women in the different countries in Europe. It is very important to think of the European dimension and new aspects of social integration at this moment, because many women from Eastern Europe come here.

*Barbro Westerholm, Sveriges Pensionärsförbund, Sweden*

I think we are moving now to the area as to how to use what we learned, besides how to proceed with research. Of course we have the goal that older people should have a free choice to live their lives. I know that economic circumstances can make restrictions but to lead a social life anywhere I think the NGOs are very important in organizing what is economically feasible. I can see in Sweden, in Stockholm, older people in the clubs of my organisation walk around, go out to the suburbs or, if they can afford it, go on trips abroad or to concerts. They do a variety of things, and it is important that they and also other people see that you can have fun. Life can be fun despite the fact that you are retired. I think we are really role models for the next generation, so that they are not afraid of becoming old. And then we can build on the experience we have within our organisations. But we can also build on some of the data being produced in this research. And of course we have in this MERI-project realised that there are problems, that there are hidden groups in society which do not have that free choice or they are even hit by crime, violence, abuse, which is a hidden problem in my country. You do not talk about it. In my organisation we produced a booklet that had the title "He wasn't always that kind to me". That is a common expression, not very but you can hear it at the burial of a man, and you go to the widow and say "it is a pity that your husband now is dead" and she says "well, I miss him a bit, but he wasn't always that kind". So this is something I think Nancy Lewis brought up also. Here we have a responsibility to find out how we can help those who are victims but also prevent more from happening.

What will I do when I go home with these data: Well, we will try to write short articles about interest-representation, about all these themes and to publish in my journal. And I know that it is read by other media. So they pick out what we write about that. Maybe it causes a debate in wider circles. I will use the data as a lobbyist to comment on the proposals from government to parliament. I will lobby the different parties with it and also go to some governmental agencies. With bits and pieces to try to influence them to change decisions or whatever it is. But then someone said the summaries should be short. You are right, because you have data supporting this proposal. And if they ask for the basis, the basic knowledge, you can provide it. But they read only half the page. But anyway, my government is not represented because there was a misunderstanding about the invitation. But when they found out the minister said "We will organise a seminar." So Birgitta Lindencrona and I are going to organise a seminar for those working with gender issues at the ministry. And that might reach more people than if one of them would have come here. I think we all have a responsibility to use these data in the way we find it best, but do not put it into the bookshelf. Use it!

*Liz Mestheneos, Sextant Research Group, NSPH, Greece*

We do not have a Greek representative here and I did not really feel sorry about them not coming because I thought, coming here to listen about what Greece has never done is pointless. We are spending on the Olympics for the moment. But I feel very bad as a researcher that I do not really know what to do with the results. I will certainly send it to the ministries responsible for equality and the family. But as you said, they do not read it, so I will have to summarise it. And what will I summarise? Nothing. I mean I am summarising a blank because the quality of the research is lousy and almost non-existent. Statistics are very few and mainly on the demand of the EU and my question is, it is easy when you start from a base of a NGO, of a country with good statistics and an interest in the subject for policy in planning. But when you go back to a country which doesn't do that, I would like some advice what to do. I'll do the minimum. But in effect the report will sit in a drawer, somebody's drawer. That is what is going to happen.

*Laura Christ, NIZW / Kenniscentrum Ouderen, The Netherlands*

Maybe one way of doing it would be: We all have these national action programmes, for instance the national action programme to combat social exclusion and poverty. And your government as well as mine has to come up with something. They have to come up with answers, so you could perhaps use all that you have got or not got to try to get something into national programmes. I know there will one be coming up on the issue of elder care. That would also be a good issue: a good programme to put MERI results in.

*Nancy Lewis, United Nations Sub-committee on Older Women*

All the governments have received a questionnaire from the division on the advancement of women at the United Nations. To report what advancements they have made for women since Beijing. So that is ten years. Your government received that, too. You might also want to find out whether Greece is a ratifier of CEDAW. I would guess they are, but I do not know. If they are, they have to report on a regular basis to the United Nations, so they have to produce some kind of statistics. And you might offer to help them to do that.

*Elizabeth Sclater, London Borough of Lewisham, Policy and Partnership Unit, United Kingdom*

I just wanted to add to Laura's idea on the social exclusion programmes that the European Anti-Poverty Network is working as an NGO in monitoring governments' work. I think they actually had a meeting on it last year, so there may well be a context through the European Anti-Poverty Network maybe worth picking up because the people there will be lobbying their governments. So you may have an ally.

*Anja Leppo, STAKES, Finland*

I also want to say something about how we are going to use the results and the MERI-work in Finland. I am very happy that we have this good team from Finland here because this is the start also of spreading this information and raising the discussion. We also have to organise a seminar and I think that this is a rather efficient way to attract different partners in society, because we can attract the media and through media one accomplishes quite a lot. And this may be something that you can also think of in Greece. If the civil servants and the other authorities and NGOs are not aware of the MERI-approach and are not so gender conscious, through media they might get interested. One important point for the media is to invite prominent women 50+ to speak. This is always something that the media is interested in and they can write good articles about that. So one has to be a little bit devious. But I hope that in Finland we have now taken a step through this project that will maybe unite those who are interested in this issue.

*Maria de Lurdes, CESIS – Centro de Estudos para a Intervenção Social, Portugal*

I quite agree with Liz as regards the difficulties we may have in putting aging on a political agenda. I have been working in public administration for many years. We were responsible for policies for aged people and I know how difficult it is to really integrate this in the political agenda and programmes. But for the time being what we are trying to do is really to raise people's awareness, to look at this much more thoroughly in the projects. In Portugal we prompt them maybe to also organise a seminar by the end of this year. During this seminar we would like to invite of course everyone, but maybe we won't have money enough to invite all of you. And this might allow us to organise an internal debate. Here I hope I will get people representing NGOs, governments and also the professional experts dealing with aging and gender issues.

*Graziana Delpierre, Coordinamento donne UIL Pensionati, Italy*

An assembly of women in trade unions of retired people in Europe will take place in Brussels on the 24<sup>th</sup> and 25<sup>th</sup> of September. These are 44 organisations and in some countries we have seen new members. So if you allow me to in any case, I am going to disseminate some of the material you have given me here during those two days. And I would also want to ask for the addresses of those amongst you who take care of similar actions in order to organise a joint action, because as people say "If Mohammed doesn't go to the mountain, the mountain has to come to Mohammed." Another thing I would like to point out is that in any case we should also look at the European Parliament. This is one of the bodies we might turn to in order to try to push our claims forward. In the northern part of Italy we elected an Italian MP called Pia Locatelli. Within the committee, she has decided to take care of women aged 50+. I think that Pia also could be a contact person. I know her and I know that she is working very hard. She is highly dedicated to social matters and people's interests.

*Rosemarie Kurtz, GEFAS Steiermark – Gesellschaft zur Förderung der Alterswissenschaften und des Seniorenstudiums an der Universität Graz, Austria*

Well in fact the most important thing is the dissemination. We need to try to use all possible chances and mechanisms. I am thinking of the different websites existing. And I think we should try to establish links amongst those websites. We could also turn to regional politicians. I would like to thank you for inviting me, I have been very happy to find here younger women in our circle. In fact it is true that we started a long time ago and we have seen that those younger women keep working on this. In 1991 we started with that theme of older women. So I have to say that sometimes it takes 10 years to be trained well. It took me also ten years to train at university. I think that we also needed more or less ten years to establish important contacts. And as an issue, that of older women is a more difficult theme, so 15 years. And maybe we should add another five years now to really keep on establishing con-

tacts around projects dealing with older women. Women between 50 and 60 have greater strength and they should use that strength for our platform.

*Hildrun Sundseth, European Institute of Women's Health*

It is absolutely important that we all do our best on the dissemination of your results. Most of us NGOs have websites. Please if we could put this report on our website; this two-page summary would already be wonderful and then we can say that the complete document is available. That would be a great resource. And then to the colleague who suggested to approach the European Parliament. There is such an opportunity precisely for what you said. The potential of having this report presented in the European Parliament by sending them the information first of all and mobilizing the Women's Rights Committee there and also the Group on Aging, which is being reconstituted. I would really say that we work together on that and bring it to the Parliament and this again will help at national level, because then you will maybe have the members of the parliament (MEPs) from Greece there who will say "And there was nothing in there about our country". In Europe it is – I am putting it crudely perhaps – it is "name and shame". Nobody likes to be shown in the European context to have not done anything. So I would suggest that we get the parliament mobilised. There are a lot of new MEPs at the moment who are looking for platforms, for a role. The European Parliament has, apart from the Scandinavian countries, the highest number of women politicians. Otherwise I really would like to thank you so much. It has been a wonderful meeting, lots of interesting discussions. And thank you so much for giving us some facts and figures.

*Karin Stiehr, ISIS, MERI-Coordinator*

Thank you, Hildrun, for this offer. We are researchers and no experts in lobbying, in public relations. We try, but you are much better and if we can get your support it is so valuable for us. Thanks for this offer and also for the links. We will stay in touch. We will communicate whenever there is something which is available.

*Elizabeth Sclater, London Borough of Lewisham, Policy and Partnership Unit, United Kingdom*

Obviously Anne-Sophie and Hildrun would be able to help around the sub-committees and the Council of Ministers. That would be most appropriate. In the UK we have a similar inter-government department group on aging. Do not assume that there is one focal point in your government. When you are sending the reports, send it to the government departments that also might have an interest. You might even want to send it to the treasury, they might not think about it, but in the UK we have a women's budget group that meets regularly with the treasury. And I will be sending this report. With Lorna I am sure we will have a discussion, about how we can disseminate in the UK and who are the key-persons, but we have women's budget and they have a section on older women. That again is looking at how decisions about annual budgets are effected. Just send it out as far as you can.

*Nancy Lewis, United Nations Sub-committee on Older Women*

I referred before to the questionnaire that each of your governments got from the UN. Try to get your information on whoever in your government is working on this. It would also alert them. Either they have no information on older women, they haven't done anything on older women or they have and they are going to be proud to report it. So any of you who wanted to take a look at this, here is an address where it is eventually going to be sent. So this might help you know who is going to work on it. Thanks.

Another quick comment: I have a statement here that was made by the Dutch government in 2002 on gender and age. I bring this to your attention because governments make statements. I do not want to say sometimes they lie, but sometimes they elaborate on things which may or may not exist. But once they have made this statement what very often happens, especially in developing countries, is that local people can get a hold of these state-

ments and then use them with their governments saying "This is what you said." I do not know if that could be helpful to you and I certainly have no information how to get informed on everything your government is saying. But if you have a monetary net, sometimes this can be helpful also.

*Karin Stiehr, ISIS, MERI-Coordinator*

I would like to summarise what are the general plans for disseminating which concern all the MERI colleagues. We have heard some plans about seminars which is a very good idea. We hope that as many of us as possible will be able to go that way, but at least we will send the reports to our governments including the two pages summaries. This also fits with the proposals to include the media. We have already some requests from magazines to publish a short article about our results. Of course the two pages can be a basis for such a publication not the whole report. It is good for disseminating our central findings. I would also say that facing the fact that nobody could be attracted to attend from the official statistical offices, we should pass on our reports on the statistical situation to our individual offices. We have invested a lot of work and I think we have very good ideas to improve it. We would like to contribute to the perspective that older people will become a very important part of society which can not simply be treated as 60+, regardless if they are 100 or 65.

Furthermore lots of materials will be published on the Internet websites which I presented yesterday, but I will also try to attract a publishing company for a book. The national articles will also be published in the national language on the Internet. Of course every country, every government is invited to perhaps support the dissemination of these national articles in the national language.

I would also like to announce that I will collect all the presentations given here at the MERI-meeting yesterday and then I will round-mail them to all the participants. They can give you a direct basis because they contain some numbers and figures and facts. You can use certain slides from the power-point-presentation if you want to present a certain highlight from our research. Graziana also asked me if I could attend a specific meeting of FEIRPA which I unfortunately cannot, because I am engaged in another meeting at the same time. But I and all the colleagues would welcome invitations like that because we understand it also as our task also to contribute by participating in events and seminars. So please refer to all of us and it will be our pleasure to help.