

# **Report on the First Meeting of the UNECE Expert Group on conceptualizing and measuring Active Ageing**

## ***I. Organization and attendance***

The meeting was held in Brussels, Belgium, on 10-11 May 2012. It was organized by the United Nations Economic Commission for Europe (UNECE) with the assistance of the European Commission's Directorate General on Employment, Social protection and Inclusion (European Commission). Experts from the European Centre for Social Welfare Policy and Research (European Centre) provided background documents for discussion and prepared presentations on Active Ageing Index (AAI). All documents and presentations are available on the [Expert Group on Active Ageing wiki](#).

Besides representatives from the European Commission, UNECE and European Centre, eight out of fourteen experts representing academia, statistical community and policy makers in the UNECE Expert Group on AAI took part in the meeting. Members of the expert group who were not able to attend the meeting were asked to provide their comments electronically. Meeting was chaired by a representative of UNECE (Ms. Vitalija Gaucaite Wittich).

## ***II. Objective***

The objective of the first expert group meeting was to review a conceptual approach for developing Active Ageing Index (AAI) as proposed by European Centre and building on the expert discussion to review a suggested set of indicators and agree on the method of aggregation to the overall AA index. More specifically, the expert meeting aimed to:

1. Clarify an objective of the AAI, its scope and applicability;
2. Evaluate the advantages and shortcomings of using life-course approach in building AAI;
3. Based on the current academic literature on redefining age and active ageing, to evaluate a possibility to use of other than chronological age measures;
4. Evaluate suggested set of indicators;
5. Review the methodology used by the European Centre for aggregation of indicators into AAI;
6. Suggest methodological improvements and suitable data sets for the measurement of AA indicators.

## ***III. Brief summary and decisions<sup>1</sup>***

The expert meeting consisted of three half-day sessions and was preceded by a consultation among the project partners. The first session concentrated on the project's objective to measure potential for active ageing and on current approaches in defining age and using life-course perspective. Session 2 was dedicated to the review of a methodological approach for measuring AAI as suggested by European Centre and its pending improvements stemming from the discussion in the first session. In the final session, the discussion concentrated on the main agreed domains of AAI and indicators that should populate them.

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<sup>1</sup> The minutes of discussion are provided in an annex to this Report.

The main outcomes of the expert group discussion are as follows:

1. The Active Ageing index (AAI) should be based on outcome indicators without incorporating life-course perspective at this stage. Similarly, the social security sustainability issues should be treated as part of the contextual environment and not included in the measurement of AAI directly.
2. In general, AAI base indicators should be defined for the age group 55 and above. There is no reason to specify an upper age limit per se; although in some cases it would make sense to restrict it to an upper age limit on the basis of conceptual and empirical considerations (such as 74 in calculating employment rate indicators);
3. The gender subdivision of indicators is necessary, and thus the domain-specific indices as well as the overall index will have to be gender specific.
4. The aggregation method used by European Centre was accepted as methodologically sound as it allows a clear visualisation of how components contribute to the overall index. However, the discussion on the crucial issue of weighting was postponed till a later date.
5. The AAI will cover four main domains (*working titles, might be revised later*):
  - a. Contribution through paid activities/employment
  - b. Contribution through unpaid activities /non-marketed productive activities
  - c. Independent / autonomous living
  - d. Capacity for active ageing / enabling environment
6. The AAI can be divided into two broadly defined dimensions: a) actual experiences of active ageing (1st-3rd domain) and b) capacity / ability to actively age (4th domain).
7. The following indicators should be considered for populating the respective domains:
  - a. Contribution through paid activities/employment
    - i. Employment rate for the age group 55-59
    - ii. Employment rate for the age group 60-64
    - iii. Employment rate for the age group 65-69
    - iv. Employment rate for the age group 70-74  
(The need to correct employment rates for part-time employment should be checked, but without looking into voluntary/involuntary element). It may be worth clarifying that the indicators would be expressed not as absolute levels, but relative to some ideal level (viz. best performing countries or some absolute ideal); such benchmarks should be explained and justified in a footnote on each indicator.
    - v. Relative job satisfaction (the target group should be 55-64 and the comparator age group can be either 40-54 or prime age 25-54 or working age 20-64)
    - vi. It would also be worth investigating how the indicator 'exit age' correlates with the above four indicators on employment of older workers; if the indicator 'exit age' provides variation in addition to that provided by the employment indicators, it would be good to include this indicator.
  - b. Contribution through unpaid activities /non-marketed productive activities
    - i. Voluntary work
    - ii. Percentage of older population providing care to children (viz. grandparenting)
    - iii. Percentage of population providing care to older adults

- (an attempt would be made to be as comprehensive as possible in covering care provision from older people and to older people; whether in co-residence or not; whether to own family members or to others)
- iv. Political participation (to be accounted for separately from voluntary work, if possible)
- c. Independent / autonomous living
    - i. Physical exercise for older adults
    - ii. Adult learning (& participation in cultural activities, either merged with adult learning indicator or included as a separate indicator)
    - iii. Access to services / unmet needs of healthcare for older adults
    - iv. Share of older people living in their own household
    - v. Financial security (relative income, extreme poverty, material deprivation),
    - vi. Physical security indicators (possibly from victimisation surveys) – it will be investigated whether the last two sets of indicators belong to the fourth domain)
  - d. Capacity for active ageing / enabling environment
    - i. Remaining life expectancy at age 55 (nb. further considerations towards using the indicator ‘Age at which RLE is 25 years or less’ will also be investigated by European Centre).
    - ii. Healthy life expectancy at age 55
    - iii. Psychological stress (to capture mental health aspects)
    - iv. Use of ICT by older adults
    - v. Indicators of social connectedness (same as previously defined social isolation indicator (S1.2), but it needs to be reversed to make it a ‘positive’ indicator); further investigation will be done towards including the indicator ‘informal help to others’.
    - vi. Educational attainment (it should be seen as a proxy for human capital assets, which enables an older person to live actively, which may or may not include engaging in new learning activities in old age).

The above indicators need to be specified in detail and appropriate benchmarks defined so as to allow the calculation of improvement potentials. There is also some leeway for the European Centre team to propose and test new indicators besides the ones already discussed at the meeting.

The meeting ended with an agreement that European Centre will deliver the revised methodological paper and the first computed set of AAI for the European Union countries by Friday 20 July 2012. Since the first results of AAI are expected to be presented at the 8th World Demographic & Ageing Forum in St. Gallen (27-30 August) and during the UNECE Ministerial Conference on Active Ageing in Vienna (19-20 September) the experts were invited to provide their written comments on these documents and engage in an on-line discussion by using the Expert Group on Active Ageing wiki platform. It was agreed to have a second face-to-face expert group meeting on 11-12 October 2012 (Brussels or Vienna) to evaluate the first results.

## Annex 1

### Minutes of the Expert Group discussion on 10-11 May

#### **Session 1 (10 May, 14:00-17:30 ):**

The chair (Ms. Vitalija Gaucaite Wittich, UNECE) opened the meeting by welcoming experts and asking to introduce themselves. She explained the purpose of convening the expert group and outlined the agenda of the meeting.

The representative of European Commission (Mr Ralf Jacob) introduced briefly the project “Active Ageing Index”. The project aims to provide the policy makers with a tool that indicates in an easy and understandable manner the imminent domains for policy interventions in promoting active ageing in all its multifaceted ways. The index should indicate unrealised potentials and should be based on outcome indicators rather than on inputs. It has to be comparable across countries and allow monitoring the progress by setting targets/benchmarks and/or analysing its development over the years. The project partners seek to get usable transparent results for 27 EU countries and if possible a few other UNECE member States by the end of 2012 (to be presented at the conference concluding the European Year on Active Ageing and Solidarity between Generations). The work on AAI should potentially connect to the global process of monitoring implementation of the Madrid International Plan of Actions on Ageing (MIPAA) and in the future continue to make improvements in the scope and country coverage of the AAI.

The representative of the European Centre (Mr Bernd Marin) presented the review of academic literature on the life-course perspective for the active ageing showing linkages and benefits of early interventions and advocating for the use of a human resource investment approach in constructing the AAI. He also set a stage for discussing a possibility to address age-inflation and lifetime indexing by including several prospective age measures and health-based, mortality-risk-based, capacity/ability-based etc. age measures into the AAI. The suggestion was to focus on 25 years or less of RLE thus capturing the later period of active life of an individual independently from his/her chronological age and to see and compare across countries how this last quarter of a century of people’s lifetime was actually spent – in terms of work, care and other productive activities, health, independence/autonomy. A stress was made on gender and cross-country differences in actual labour market exit age as well subjective evaluation of life expectancy in retirement (retirement illusion).

The round table expert discussion centred on necessity to focus on a “simple and smart” measure that would appeal to the policy makers and allow them to take policy actions that bring in not only long-term but also shorter and medium-term results. *Ms. Dykstra* pointed out that for constructing AAI that is based on outcome indicators only space relativity should be taken into account and not linkages across different phases of life; the measurement will point to the current situation and not to the possible implications of current actions in 30-40 years to come. She also asked for clarification regarding the target age group of the AAI. *Mr. Howse* suggested differentiating between capacity to make contributions to the society/to actively age – thus moving towards a composite measure of human capital potential – and the actual contribution by being active in older age. *Mr. Vikat* stressed that chronological age as such should not be referred to as ‘wrong’ or ‘mis-measurement’ – all existing demographic and social data have it inbuilt. He then reiterated Mr. Marin’s point that it could be complemented by a prospective age measures. Best suited might be the age at which RLE is 25 years. For the purpose of the AAI chronological age groups have to be clearly defined – possibly 50 or 55 onwards - the point was supported by majority of experts (Mr. Marin strongly advocated the age 40 (or 65) onwards in order to prevent potentially misleading political signalling as if 50/55 could be considered possible retirement ages). The positive aspects of life course approach in reflecting intergenerational solidarity were brought up by *Ms. Sonnet*, although she agreed on the difficulty to incorporate this approach for the purpose of AAI. She and also *Mr Vleminckx*

raised a question of addressing social sustainability in the AAI. Majority of experts suggested using it as a contextual part.

The suggestion by *Mr. Von Nordheim* to build the AAI based on three pillars: paid work/activities, unpaid contributions and independent living in the older age gathered support from all participating experts. The enabling environment element that to some extent would reflect the capacity to contribute (as suggested by *Mr. Howse*) was brought in. It was also agreed that the subdivision of indicators by gender, age groups and education is important, though it is not always feasible to define indicators using all of these classificatory variables).

The group also briefly discussed some additional indicators that can be considered as basis for constructing AAI. The ISTAT experts (*Ms. Gargiulo and Ms. Quattrociocchi*) suggested including indicators that would reflect housewife's contributions, cultural participation, ICT. The importance of indicator on political participation as well as a necessity to use the broad understanding of independent/autonomous living was stressed by *Ms. Dykstra*. *Mr. Jacob* pointed to relative income indicators while experts of European Centre provided numerous examples of indicators on independent living. At the end of the session, the expert from European Centre (*Mr. Zaidi*) briefly summarised the discussion.

### **Session 2 (11 May, 9:30-12:30 ):**

At the opening of the morning session, the expert from European Centre (*Mr. Zaidi*) summarised main points of the discussion during the session 1. He then presented the first part of methodological paper on AAI developed by European Centre 'Choice of Active Ageing Indicators: A First Cut'. The presentation was not yet adjusted to reflect experts' suggestions during the Session 1 and used domain titles and some indicators that were deemed by experts not entirely suitable in constructing AAI (i.e. domains 'social participation' should reflect the fact it included indicators on unpaid non-market contributions; subdomains 'healthy behaviour', 'family care' needed revision as well, etc.).

The expert discussion then reverted to reaching an agreement on some constructive elements: *Mr. Lanzieri* from Eurostat pointed out to the necessity to define active ageing for the purpose of AAI and agree on the age threshold. Following a vivid exchange of opinions experts agreed on age 55 as the lower threshold. Inclusion of a domain on active ageing capacity / enabling environment for active ageing was discussed at length and in the end agreed on if considered as part of "assets" to be measured by outcome indicators such as Remaining life expectancy or Healthy life expectancy as "health capital", "social capital" or educational attainment and live-long learning as "human capital". *Ms. Dykstra, Mr. Lanzieri and Ms. Gargiulo* drew attention and clarified potential of the additional data sources for a number of indicators (Generations and Gender Survey, special modules of SILC and Labour Force Surveys, etc.).

The expert from European Centre (*Mr. Rodrigues*) presented the second part of the methodology paper 'Aggregated Active Ageing Index' that dealt with the index aggregation methodology, including reasoning behind the equal weighting, possibilities to deal with missing indicator values for individual countries, standardisation towards average EU values versus benchmarking. The aggregation methodology was adopted from a recent paper 'An Index of Child Well-Being in Europe' by J. Bradshaw & D. Richardson (2009). In the follow-up discussion *Mr. Lanzieri* questioned the necessity to normalise the values of indicators across 27 countries and was advocating against equal weighting. *Mr. Jacob* suggested to postpone discussion on weighting – on the basis of equal weighting being potentially as arbitrary as any other – and proposed to concentrate discussion on the components of the AAI. *Ms. Dykstra* supported the choice of index aggregation methodology with equal weighting and also stressed the importance of well-chosen and clearly-defined domains and indicators for general acceptance of the

index. For benchmarking, Mr. Ralf Jacob suggested not to use averages or medians dragging down the standard setting, but more ambitious expert and / or empirical standards of reference. Specifying this proposal, *Mr. Marin* suggested, for instance, to use the three best performing countries world-wide (include Japan, for instance, on remaining life expectancy) as moving targets in order to see where global Europe does best already and where there are what unused potentials for improvement. Experts from ISTAT reflecting on ranking outcomes due to missing values for some countries saw the opportunity to entice national statistical offices to produce better data and undertake internationally established surveys.

### **Session 3 (11 May, 13:30-17:15 ):**

The Session 3 started by continuing discussion on the methodology, benchmarking, subdivision by gender and possibly by age groups and provision for AAI to be replicated over agreed intervals (three to five years). Many experts pointed to the limitations that such requirements impose on a choice of data sources – infrequent special modules of the established questionnaires, unavailable age groups, etc.

The Chair asked experts to focus the discussion on a choice of indicators for the agreed four domains:

1. Contribution through paid activities/employment,
2. Contribution through unpaid activities/non-marketed productive activities,
3. Independent/autonomous living, and
4. Capacity for active ageing / enabling environment

**For the first domain** experts from European Centre indicated a number of earlier proposed indicators. *Ms. Sonnet* suggested to include additional indicators on retention and hiring of older employees (60+ and 55+, respectively) both available from LFS. She also drew the attention to the available indicator on long-term unemployed among older workers. *Mr. Marin* suggested specifications such as distinctions between dismissals and quits and other age classifications, if the retention rate and other labour market indicators should be used at all. *Mr. Vikat and Mr. Lanzieri* insisted on a need to harmonise age groups and keep the lower age threshold of 55 years. *Mr. Jacob* pointed out that there are already too many indicators in this domain and suggested to use a more pragmatic approach by taking in as outcome indicators only employments rates in four specific age groups: 55-59; 60-64; 65-69; 70-74. The need to correct employment rates for part-time employment was also raised however without looking into voluntary/involuntary element. The ‘relative job satisfaction’ was discussed at length and agreed for inclusion, although the comparator age group remained somewhat undefined. Although acknowledging their value, *Mr. Jacob* rejected the use at this stage of indicators related to work duration, the support ratio and other indicators relating to life course, sustainability, and other problem contexts instead of showing the potential for active ageing as such. *Mr. Jacob* suggested that the subsequent follow up study should explore the use of such more comprehensive and explanatory indicators.

In the discussion on the indicators **for the second domain** the use of suggested indicator on voluntary work in organisations was accepted. For capturing the care activities by older people two similar indicators available from SHARE and EU-SILC were suggested by *Ms. Dykstra* and supported by ISTAT experts. *Mr. Rodrigues* explained that the aggregation methodology used by European Centre would allow for the use of such complementary indicators without compromising the overall result. *Ms. Dykstra* and a few other experts debated on the need to take into account co-residential care. She stressed that empirical research points out that in the cases of co-residence with younger generations the care provided by older people to the younger is much more frequent phenomenon than the care for the older.

**For the third domain**, experts agreed that no healthy behaviour indicators should be included, except for physical exercise (as already included in the indicators and also suggested by *Mr. Vikat*). Similarly to physical exercise indicator, participation in cultural activities and adult learning should be considered. Among other agreed indicators were access to services / unmet needs of healthcare as well as living in

institutions and possibly the share of those living in their own households without sharing with younger generation. On the indicators for financial and physical security in this domain the experts of European Centre agreed with *Mr. Jacob's* suggestion to concentrate on relative income, extreme poverty (using 40% poverty threshold), material deprivation (with revisions towards emphasising the 'ability' or 'capacity' aspects), and use one indicator taken from victimisation or other surveys (such as the European Social Survey) as a proxy for physical security.

Experts agreed that under **the fourth domain** the indicators on available "assets" like remaining life expectancy and healthy life expectancy should be included. The self-assessed health indicator which is also behind the healthy life expectancy was discussed but no clear agreement on its inclusion was reached. The indicator on psychological distress was included although by pointing out that it is rather a poor proxy for mental health. The use of ICT, educational attainment and social connectedness indicators gathered support from majority of experts.

During the closing of the meeting, the Chair informed experts that European Centre will prepare the second draft of the methodological paper and will present the first AAI results by using a new list of indicators under the four agreed domains by 20 July 2012. The experts will be expected to provide their comments and further suggestions electronically using the Expert Group on Active Ageing wiki platform or by e-mail. The second face-to-face meeting is planned for 11-12 October 2012. The Chair thanked all experts for a very constructive and fruitful discussion during the meeting.