



# Mainstreaming Ageing

Spring 2011

Supporting the UNECE Regional Implementation Strategy for the Madrid International Plan of Action on Ageing

Dear Reader,

*In choosing “Ageing on the margins” as the topic of this newsletter issue, we aim to raise awareness of the situation and experiences of those groups of senior citizens who, because they are not part of the majority, may have no or only limited access to resources and services needed to age in comfort and health. While the public initiatives presented here can serve as good examples for mainstream service providers, research that highlights the challenges and provides evidence and possible solutions for policy-planners is just as essential in breaking down the barriers.*

**Eszter Zólyomi**

Project Coordinator

## News in brief...

### **Israel – Age orientation of social policies in Israel**

An article by Pieter Vanhuyse (European Centre Vienna) with Haya Gamliel-Yehoshua (University of Haifa) was published in a special regional issue of the journal *Social Policy & Administration*, which is devoted to “Welfare States in the Middle East”. The article provides a first-ever empirical estimation of the evolving age orientation of social policies in Israel over time.

[More](#)

### **UK – First findings of “Understanding Society” published**

Results from the first wave of the UK’s longitudinal household survey “Understanding Society” are now available online. They offer a window into British society in the 21st century with information on working lives, relationships, health, finances and neighbourhoods.

[More](#)

### **World – Draft resolution on the 2nd review and appraisal of MIPAA**

In its resolution, the UN Commission for Social Development endorsed the timeline for carrying out the second review of the Madrid Plan of Action on Ageing and invited Member States to identify actions they had taken since the first review, with the aim of presenting the information to the regional commissions in 2012.

[More](#)

## The future ageing of the ethnic minority population of England and Wales

The study, written by the Centre for Policy on Ageing (CPA), provides a detailed estimate of the ethnic make-up of the older population of England and Wales over the next 40 years, and describes the likely changes in the age structure of black and minority ethnic (BME) groups using data on fertility, mortality and migration.

Although the present population of older BME people is relatively small, it will become much larger and also more ethnically diverse. It is estimated that by 2051 BME population in England and Wales will reach 25 million (36% of the total).

For instance, in 2001, while there were only 230,000 BME people aged over 65 in England and Wales, by 2051 the number is projected to be 3.8 million. In the same time span, there will be just over half a million black and minority ethnic people aged 70 and over by 2016, more than 800,000 by 2026 increasing to 2.8 million by 2051.

This changing population will have important implications for the development of public policies and services both at local and national level. This, in turn, highlights the great need for evidence such as this in supporting policy planning and practice as well as improving awareness on the ageing of ethnic minority communities. [More](#)



## Research on and services for marginalized groups of older people: examples from the UK

### The New Dynamics of Ageing research programme

The UK's New Dynamics of Ageing (NDA) is the largest and most complex multidisciplinary research programme on ageing in Europe. It is funded by 5 UK Research Councils spanning all disciplines with relevance to this topic: from biology to arts and humanities. Its specific remit is to study the changing dynamics of ageing in all of its forms. This includes the global dynamics of ageing and variations across ethnic and cultural groups of older people who are often excluded and marginalized. Details of the full programme can be found [here](#).

*Information was provided by Charlotte Jones (NDA Programme Secretary, University of Sheffield, UK).*

### Equal Opportunities Programme in Scotland

Language and cultural issues remain major barriers to older Black and Minority Ethnic (BME) people achieving equality of access to services of all kinds within Scotland. The Equal Opportunities Programme has devised innovative solutions to these problems, including cultural awareness training but also specialist outreach programmes designed specifically for older BME people. The programme is very much focused on ensuring that mainstream service providers across Scotland, from housing associations to healthcare providers and others, are first of all aware of the needs of older BME people, and secondly that they take their specific needs into account when planning and administering services.

For more information visit the [website](#).

*Information was provided by Rohini Sharma Joshi (Housing Equal Opportunities, Manager Equal Opportunities Programme, Scotland, UK).*

## And the award goes to...

First European Local Authorities Competition (ELAC) awards cities for their innovative initiatives in the mutual integration of migrant elders.

The award ceremony took place on 9 February 2011 at the Committee of the Regions in Brussels. The "Minority Ethnic Carers of Older People Project (MECOPP)" from the city of Edinburgh, Scotland, was announced the winner of the competition.

*Winners and ELAC partners*



Image license: Thierry Monasse

MECOPP assists Minority Ethnic carers to access the supports and services necessary to undertake or sustain a caring role. MECOPP is the only dedicated Minority Ethnic carers organisation in Scotland. It is contracted by the City of Edinburgh Council and NHS Lothian (Health Board). The second prize went to the city of Gelsenkirchen (Germany) for the initiative „Teilhabe Älterer in einer bunten Stadt“ (Participation of Seniors in a Diverse City) which focuses on the consideration of the needs of migrant elders in the city's strategy for seniors. The project "Jongleren: oud geleerd en jong gedaan" from Brussels (Belgium) won the third prize. In this project, several service centres, students of journalism, arts and social work and migrant elders worked together to create an exhibition with pictures and stories that focus on the life of senior citizens in the multicultural city of Brussels. The following cities received a special mention: Oberhausen (Germany), Leeds (England), Gothenburg (Sweden), Mechelen (Belgium) and Dortmund (Germany).

The competition, which is part of the European project “Active Ageing of Migrant Elders Across Europe” (AAMEE), was launched by the Ministry for Intergenerational Affairs, Family, Women and Integration of the state of North-Rhine Westphalia and the Council of European Municipalities and Regions (CEMR), in partnership with the Committee of the Regions and under the patronage of the President of the European Parliament, Jerzy Buzek.

As a follow-up to the competition, a workshop on “Active Ageing and Empowerment of Migrant Elders” will be held on 14 April 2011 in Brussels, Belgium.

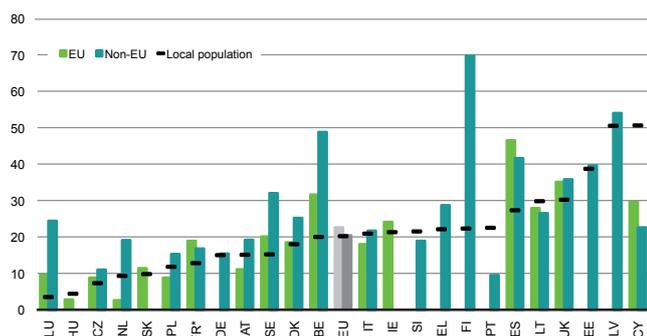
For more information visit the [website](#)

## Poverty and social exclusion among migrants in the EU

The Research Note, written by Orsolya Lelkes and Eszter Zólyomi, analyses the occurrence of risk-of-poverty and social exclusion among the migrant population and the trends in poverty rates between 2004 and 2007 based on the EU-SILC survey. It also looks at the situation of elderly migrants aged 65 and over.

Results show that elderly migrants have a relatively high risk of poverty in Spain, the UK, France, the Czech Republic, Belgium, Luxembourg, Sweden and Denmark. However, there are a few countries where the reverse is the case, including Cyprus, Lithuania, Portugal, Slovenia and Hungary.

*At-risk-of-poverty of the elderly (aged 65+) by migrant status (%), 2007 (income year)*



The analysis defines migrants in terms of their country of birth (grouped into EU or non-EU countries) and shows that there is considerable variation in the relative situation of the two migrant groups compared to each other.

The Research Note is part of a research project called European Observatory on the Social Situation financed by the European Commission (DG Employment, Social Affairs and Equal Opportunities). The full text can be found [here](#).

For further information contact [Orsolya Lelkes](#)

## Consortium Pink 50plus in the Netherlands

In 2005, four organizations involved in projects around senior LGBTs put their efforts together. They were ANBO, a trade union for seniors linked directly to the national trade union FNV, COC Netherlands, MOVISIE (the Netherlands Centre for Social Development) and Schorer, the national LGBT health care centre. At that time, Pink seniors were still quite invisible, although self-empowerment groups were emerging. The first joint activity was the organization of a phone-in week. The kick-off of this week was presented by a number of well-known LGBTs and politicians, including a later cabinet minister. People could phone in about their wishes, fears, and good solutions.

Three main issues emerged: the situation in (institutionalized) health care; the schooling of – future – workers in the health care system; and housing. On this basis, the organization started to develop a number of projects. In 2008, the Government made the Pink 50plus Consortium to one of their Gay-Straight Alliances, providing 100,000 euros every year for four years, to promote visibility of pink seniors. One of the most visible items is the presence of a boat at the yearly Canal pride in Amsterdam. By 2011, the Consortium has two types of activity. One involves empowerment of pink seniors while the other concerns provision of information and training with professionals in health care, education and housing.

A project, the *Pink Passkey*, entails a quality standard for general residential and in-house care. Organizations are trained and – after passing an audit by an official auditing institution – can receive the pink passkey, to put on their front doors. About 40 institutions are at the moment in this programme. To promote the Pink Passkey, in October 2010 there was a very successful tour in a pink limo to several cities both in the western part of the country and in more outlying regions. The pink autumn tour was received by the mayors and other politicians in the cities, and in several residential homes a pink programme of games and shows was provided for all residents. This successful tour will be repeated in 2011, as will be the phone-in week, which is planned to be organized together with *Cavaria* in Belgium.

This all sounds widely successful, and it is. Yet one of the things that prove to be very difficult is to get a real hold within regular mainstream large organizations in health care and housing, which still are not convinced that this is a group worth their attention.

For more information visit the [website](#) (only in Dutch)

*Information was provided by Mr. Floris O.P. de Boer (UNECE National Focal Point on Ageing from the Netherlands).*

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## Drug addicts are also ageing...

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“...more older people than ever are reporting experiences with drugs at some point in their lives and drug problems have no age limits...”, is a recent summary of new trends by the European Monitoring Centre for Drugs and Drug Addiction in Lisbon. Among drug users, also problem users get older – those who regularly consume e.g. opiates, cocaine and amphetamines and/or inject intravenously. The drug-political focus on harm reduction introduced in the 1980s when HIV and AIDS appeared, is one main reason for this development. Very little is known about elderly problem users, who presumably are even more

“hidden” than younger ones. A project subsidized by the EU therefore intended to shed light on the living situation and the problems and needs of this double marginalized group. It was carried out in Germany, Poland, Scotland and Austria between 2008 and 2010. The European Centre was one of the Austrian partners, the “Schweizer Haus Hadersdorf” – an in- and out-patient drug service in Vienna – was the second one. The four country studies soon turned out to be incomparable, therefore selected results of the Austrian case study will be presented here.

Estimates of the “hidden population” of problem users in 2007 amounted to about 22,000 persons, one third of them was older than 35 years and considered as “senior drug dependent”. As in the other study countries the percentage of seniors had clearly increased since the turn of the millennium (see the table below based on different data). A secondary analysis of the documentation of clients of drug services and qualitative interviews allowed to grasp their social background. The analysis showed that elderly drug users were better educated, but a relatively high percentage had dropped out of the labour market and lived on benefits. The pronounced marginal position of the seniors was further enhanced by their higher debts and their probably more numerous convictions.

The interviews with elderly drug users confirmed the bad health status already assessed by the secondary analysis – they suffered of drug-related diseases, especially hepatitis, but also of non drug-related diseases partly acquired before drug use – and additionally informed about their social isolation in detail: Relationships to family members were important but mostly fragmented. Relationships to friends were problematic because of their affiliation to the drug scene, which the interviewees wanted to get separated from, in order to develop less risky and more controlled drug consumption habits. Besides loneliness, stigma was a main problem for the respondents who thought that criminalization would contribute more to this than illicit drug use.

Secondary analysis and interviews with seniors depict a highly excluded, marginalized and stigmatized segment of society, that consequently dissociates itself from (voluntary) organizations

of care, cure and support, but also is dissociated by organizations themselves. Seniors rarely consult hospitals and organizations providing for social support. They are even underrepresented as clients of drug services. If they get admitted, then rarely for structured treatment and mostly for short-term contacts. Seniors are only over-represented in the substitution programme, where half of the clients is 35 years and more. For substitution, they mostly rely on one general practitioner whose advice and medication is sought not only for addiction problems (substitution) but also for other issues.

The reasons for the dissociation of elderly drug clients by organizations of care, cure and support vary with type of organization: Since drug problems are perceived as a youth phenomenon, drug services specialise on the needs of young people and neglect those of ageing users, whose needs are not met. Social services, e.g. housing agencies, face the increasing numbers of elderly drug users, but only occasionally respond to their problems. Many exclude elderly users from their services and place them in another organization. Finally, nursing homes reject elderly drug users more or less openly and do not respond to their needs at all.

The ignorant and partly hostile reactions towards elderly drug users – by administration as well as by

single organizations – contribute to the inadequacy of the supply of services to this marginalized group. Their discrimination transgresses the basic rules of the Austrian social system which promises the same goods and services to drug users as to other citizens. But thoughts on a supply in accordance with the rules of the social system raise broader questions – questions that have to be dealt with if the supply is to be adequately organized. One main question concerns the drug services and their segregation from other services: Do they respond to and satisfy the special needs of senior drug users whilst at the same time reinforcing their segregation? To put it more concretely: if the decision is made for nursing homes for elderly drug users, should they be special drug senior homes or should they also admit average citizens with different life stories, needs and presumably 20 years older? Another question deals with the drug consumption of the seniors, who already reduced risky drug use but cannot imagine to ever renounce completely on illicit substances. How can a health programme for elderly drug users, which supports them to reduce and control consumption risks, be reconciled with drug prohibition required by international laws?

For more information visit the [project](#)  
For further information contact  
[Irmgard Eisenbach-Stangl](#)

*Growth of elderly opiate users (35\*) in treatment, per country, 2000–2006/7, absolute figures and percentages*

	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08
Scotland *	996 (12%)	1,221 (14%)	1,377 (16%)	1,654 (19%)	1,922 (22%)	2,036 (24%)	1,933 (27%)	2,105 (28%)
Germany **	1.771 (20%)	1.610 (21%)	2.759 (24%)	6.776 (30%)	7.848 (32%)	11.342 (37%)	11.400 (38%)	<i>No data available</i>
Austria ***	1.939 (42,8)	2.142 (43,4)	2.362 (45,1)	2.650 (44,6)	2.993 (45,8)	3.344 (46,0)	3.663 (44,9)	4.386 (42,0)
Poland ****	1 065 (16.4)	1 068 (15.0)	1 357 (15.2)	1 474 (17.0)	1 871 (19.6)	1 929 (19.1)	2 335 (22.9)	No data available

\* Only 'new' clients entering treatment (Information Services Division, Scotland 2008).

\*\* Only out patient clients (Sonntag 2001 – 2007)

\*\*\* Seniors in maintenance during the respective year. In 2007 the reporting was changed/ strengthened

\*\*\*\* Opiate users (F7 + F19) in residential treatment (upper estimate)

## Upcoming events



### ▶ **PopFest 2011**

27 – 29 June 2011, Groningen, the Netherlands

PopFest is an annual population studies conference organized by postgraduate students for fellow postgraduates. In 2011, it will be hosted by the University of Groningen in the Netherlands. [More](#)

### ▶ **International 21st Puijo Symposium**

28 June – 1 July 2011, Kuopio, Finland

The theme of the conference is “Physical Exercise, Ageing and Disability – Current Evidence”. The programme promises many interesting and new scientific insights from the cell to the community. [More](#)

### ▶ **19th European Social Services Conference**

6 – 8 July 2011, Warsaw, Poland

The theme of the 19th annual conference is “Building an Active and Caring Society: Innovation, Participation, Community”. The conference is organized by the European Social Network (ESN) in partnership with the Polish Presidency of the European Union. [More](#)

### ▶ **7th World Ageing and Generations Congress**

29 August – 2 September 2011, St. Gallen, Switzerland

The congress is a worldwide platform to share knowledge and experience, discuss and find solutions for questions pertaining to ageing and generations. [More](#)

### ▶ **3rd International SHARE User Conference**

1 – 2 September 2011, Tallinn, Estonia

The conference will provide a forum for “old” and “new” users to share their experiences with SHARE and to discuss ongoing research projects with an interdisciplinary and international audience. [More](#)

The [European Centre for Social Welfare Policy and Research](#), an intergovernmental organisation affiliated to the United Nations, has been mandated to undertake various follow-up activities of the Madrid International Plan of Action on Ageing since 2002.

The [Mainstreaming Ageing: Indicators to Monitor Implementation \(MA:IMI\)](#) project is an institutionalised collaboration between the European Centre and the United Nations Economic Commission for Europe (UNECE). Eszter Zólyomi is the Project Coordinator. For further information please visit the [Monitoring RIS website](#)

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