
A strategy for active ageing

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This article argues that a strategy of active ageing, by linking the key policy domains of employment, pensions, retirement, health and citizenship, provides a sound basis for industrialized countries to respond to the challenges presented by population ageing. The article outlines the genesis of the concept of active ageing and the principles that should be embodied in a modernized, comprehensive approach fit for the twenty-first century. It then considers the potential for active ageing to address problems in the five key policy domains. Finally the article sets out a strategy on active ageing and illustrates how it might be operationalized at different stages of the life cycle. In conclusion the potentially beneficial nature of a comprehensive strategy on active ageing is emphasized: it represents the unusual combination of a morally correct policy that also makes sound economic sense.

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So far the policy responses of the industrialized countries to the challenges created by population ageing have been piecemeal and strongly compartmentalized in traditional policy domains. The main purpose of this article is to argue for an alternative approach which recognizes the interconnected nature of the key policy issues — employment, pensions, retirement, health and citizenship — and which attempts to join them up within the common theme of active ageing.

In industrialized countries, demographic and related social changes create challenges for policies on ageing in four specific dimensions. First, although this problem has been overstated, they are a source of pressure on pension systems and, perhaps even more importantly, they have supercharged the political context of the pensions debate. Second, the ageing of the workforce, in combination with global changes in the nature of work,

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implies new approaches, such as age management, lifelong education and continuous training, and a rethinking of old policies which encouraged early exit (Walker, 1997). Third, the growing need for social care and healthcare — resulting from the combination of increased longevity and changes in the structure of the family — calls for policies to increase the supply of social care and support, to promote healthy ageing and to prevent ill-health and disability: in short, a reorientation of healthcare systems from a curative to a preventive model and of social care systems from supporting dependency to promoting rehabilitation and independent living. Fourth, the growing diversity of the older population and the risks of exclusion in advanced old age challenge policymakers to forge a common citizenship, regardless of age, gender, race, education, health status, income and other resources. Policies will be required to include older people, even the most frail, and to prevent exclusion in later life.

In the coming sections I will argue that the answer to these policy challenges is a strategy of active ageing. In fact it connects each of these key policy dimensions of population ageing — pensions, employment, health and social care and citizenship. Therefore, demographic change is not only an imperative but also an opportunity. Now is the time to break with ageism — an unjust and excluding legacy of the past — not only because it is right to do so in moral terms but also because it makes good economic sense.

What is active ageing?

The concept of active ageing is a relative newcomer in Europe, achieving widespread currency only in the past five years (largely owing to the efforts of the WHO). Its pedigree in the United States is much longer and can be traced back to the early 1960s when it was argued that the key to “successful ageing” (Pfeiffer, 1974; Rowe and Kahn, 1987) was the maintenance in old age of the activity patterns and values typical of middle age (Havighurst, 1954, 1963; Havighurst and Albrecht, 1953). In other words, successful ageing was to be achieved by denying the onset of old age and by replacing those relationships, activities and roles of middle age that are lost with new ones in order to maintain activities and life satisfaction. This theory of ageing was seen partly as a response to the then influential theory of “disengagement”, which viewed old age as an inevitable period of withdrawal from roles and relationships (Cumming and Henry, 1961).

Activity theorists recognized that this was a depressing picture of old age (and empirically wrong). But, and this is important for the present debate, their approach was regarded as too idealistic. It placed an unrealistic expectation on ageing individuals themselves to maintain the levels of ac-

tivity associated with middle age through to advanced old age. It was pointed out that, in trying to do so, many older people faced biological limitations and, perhaps more importantly, that the economic, political and social structures of society sometimes inhibit and prevent people from remaining active — the obvious example being retirement (Walker, 1980). Activity theory was also criticized for making generalizations about the ageing process and homogenizing older people. Nonetheless, the empirical link between activity and well-being in old age, established by this school, remains true today.

From productive to active ageing

In the 1980s the concept resurfaced in the United States in the guise of “productive ageing”. Its emergence reflected various sociopolitical developments. Researchers had begun to shift the focus of ageing research from older people to the process of human development over the life course. Underlying this attention to the life course was the realization that chronological age is not a good predictor of performance. A significant group of older US citizens were making it clear that they wanted something else besides leisure and family obligations after traditional retirement and “productive ageing” became a rallying cry for elder advocates and others looking for a more positive approach to ageing (Bass, Caro and Chen, 1993). These changes chimed very closely with policymakers’ growing concerns about the pension and healthcare costs of an ageing population, and they too were keen to extend productivity. Thus active ageing was raised at the G-8 Summit in Denver in June 1997, and delegates discussed ways of removing disincentives to labour force participation and lowering barriers to part-time employment.

Most of the variants of productive ageing are focused narrowly on the production of goods and services and, therefore, tend to be instrumental and economic. For example, “productivity” means “activities that produce goods and services that otherwise would have to be paid for” (Morgan, 1986) or, more broadly, “productive ageing is any activity by an older individual that produces goods or services, or develops the capacity to produce them, whether they are paid for or not” (Bass, Caro and Chen, 1993).

A modern concept of active ageing

A new concept of active ageing began to emerge in the 1990s under the influence of the WHO. Not surprisingly, this emphasized the vital connection between activity and health (Butler, Oberlink and Schecter, 1990) and the

importance of healthy ageing (WHO, 1994; see also WHO, 2001a). Given the link with health and the European context in which it was developed, this approach to active ageing has focused on a broader range of activities than those normally associated with production and the labour market, and has emphasized the participation and inclusion of older people as full citizens (see, for example, Walker, 1993, 1994). The thinking behind this new approach is expressed perfectly in the WHO dictum, "Years have been added to life; now we must add life to years". This suggests a general lifestyle strategy for the preservation of physical and mental health as people age, rather than just trying to make them work longer. Thus, the essence of the emerging modern concept of active ageing combines the core element of productive ageing with a strong emphasis on quality of life and mental and physical well-being (European Commission, 1999; Cabinet Office, 2000). The WHO (2001a), for example, sees active ageing in terms of the health, independence and productivity of older people.

Principles of active ageing

At the present time, active ageing does not amount to a coherent strategy and is sometimes just a slogan used to cover anything that seems to fit under it. But it *is* possible to outline seven key principles that should be embodied in the concept if it is to play an effective role in bringing together all of the policy domains necessary to respond successfully to the challenges of population ageing.

- First of all, "activity" should consist of all meaningful pursuits which contribute to the well-being of the individual concerned, his or her family, the local community or society at large and should not be concerned only with paid employment or production. This is not to downgrade the importance of employment, which remains the leading method of inclusion, but to recognize that activity means more than paid work.
- Second, active ageing must encompass *all* older people, even those who are, to some extent, frail and dependent. This is because of the danger that a focus only on the "young-old" will exclude the "old-old" and the fact that the link between activity and health (including mental stimulation) holds good into advanced old age (WHO, 2001b).
- Third, it should be primarily a preventive concept. This means involving all age groups in the process of ageing actively across the whole of the life course. It does not mean writing off the older generations — there will be a need for remedial action for years to come — but the main focus should be on preventing ill-health, disability, dependency, loss of skills and so on.
- Fourth, the maintenance of intergenerational solidarity is an important

feature of a modern approach to active ageing. This means fairness between generations as well as the opportunity to develop activities that span the generations. Active ageing is intergenerational: it is about *all* of our futures and not just about older people. We are all stakeholders in this endeavour.

- Fifth, the concept will embody both rights and obligations. Thus, the rights to social protection, lifelong education and training and so on may be accompanied by obligations to take advantage of education and training opportunities and to remain active in other ways. Active ageing should not be a flimsy disguise for reducing rights, but it should emphasize the obligations that rights entail. Of course there is a risk here that an active ageing strategy will be coercive, and it is always difficult for policymakers to find the right balance between rights and obligations: I will come back to this issue in the final section.

- Sixth, strategy on active ageing should be participative and empowering. In other words, there must be a combination of top-down policy action to enable and motivate activity with, also, opportunities for citizens to take action from the bottom up, for example in developing their own forms of activity.

- Seventh, active ageing has to respect national and cultural diversity. For example, there are differences in the forms of participation undertaken between the north and the south of Europe, and therefore value judgements about what sort of activity is “best” are likely to be problematic (European Commission, 2000).

These principles suggest that a modern effective strategy on active ageing will be based on a *partnership* between the citizen and society. In this partnership the role of the State is to enable, facilitate and motivate citizens and, where necessary, to provide high-quality social protection for as long as possible. This will require interrelated individual and societal strategies to which I will also return in the final section.

The potential for active ageing

To illustrate the potential for active ageing in Europe, I will examine briefly the key issues of pensions, employment, health and social care, and citizenship.

Pensions

How can the concept of active ageing contribute to the sustainability of the industrialized world's pension and related social protection schemes? It

must be recognized, first, that except in the transition States of central and eastern Europe, most of the pension reforms introduced in the past five to ten years are short-term adjustments, reactions to perceived funding crises, rather than fundamental changes to pension systems. This is a sweeping generalization and, in Europe, the Italian and Swedish reforms were certainly major ones, but it was only the British pension upheaval in the 1980s that altered fundamentally the national basis of pension provision and so raised a question about the continuing membership of the United Kingdom's pension system in the broad western European model. Second, the focus of reform has been primarily on the supply side: restricting access to pensions and reducing the scale of pension payments. Even when pension ages have been raised, this is essentially a supply-side policy because, usually, little is done to facilitate activity on the demand side. Third, therefore, insufficient attention has been paid to the relationship between pensions and employment. Sometimes the issue of demographic ageing is reduced to a problem of pension scheme design, which misses the main points: employment and the role of pension systems in excluding older people from it.

Most of the world's fully developed pension systems were created in an era when lifelong (full-time, male) employment was common and age barrier retirement provided a clearly defined end to working life. The retirement condition ensured that older people were either employed or retired. Today the picture is very different: not only has life expectancy increased but also only a minority of workers enter public pension systems directly from full-time employment. For example, in the United Kingdom and Germany, only roughly one-third of men enter the public pensions arena from full-time employment. In no country in the EU are more than half of men aged 60 to 64 still in employment, and in every country apart from Sweden, fewer than 30 per cent of women in this age group are still working. Moreover, there is a significant proportion of older people who, rather than retire at a fixed age, want to work on in a full- or part-time capacity and to retire flexibly. Some companies and governments too are trying to encourage more flexible approaches to retirement (Delsen and Reday-Mulvey, 1996). Unfortunately, pension systems have tended to foster economic dependency rather than productivity and to prevent people from working longer or penalize them for it rather than encouraging them to do so.

Thus, an active ageing approach to pensions has enormous potential both to improve the levels of pensions for those on low incomes and to reduce the overall cost of public pension systems without having to undergo a wholesale reconstruction of established schemes. What is required is the abolition of age barrier retirement and its replacement with a more flexible

approach (a flexible decade of retirement is one possible model: Walker and Schuller, 1993), an issue to which I will return in the next section. Public pension systems must facilitate this flexibility by creating partial retirement options and enabling additional contributions to purchase enhanced pensions. Tax systems will also require adjustment to ensure that they facilitate employment. In short, as the European Commission (1997) has argued, social protection systems, including pension systems, must be made more employment-friendly.

Employment

This brings me to the demand side of the pensions equation. It is time to move the debate beyond pension scheme design (which preoccupies many experts and vested interests) and focus on expanding the funding base and ensuring that pension systems are not a barrier to this. It is remarkable how rarely the labour market features in discussion about the future of pensions and the implications of population ageing. It is the first three pillars of retirement (public, private, occupational) which are usually given all of the attention. Yet the age barrier between economic activity and inactivity has been changing rapidly in all developed countries. Moreover, as was noted earlier, the trend towards early exit was actively encouraged in many countries by public policy. This has contributed substantially to the pressure on social protection systems — from both demand and supply sides. Also, it has reinforced the devaluation of older workers left in the labour market. Many countries, including all European Union (EU) member States, have already removed public subsidies for early exit but none have tackled the widespread age discrimination in their labour markets which results in premature exclusion from employment (and from the payment of taxes and pension contributions) and recourse to social protection. The potential role of the fourth pillar of retirement income in reducing the pressure on pension systems has only recently come onto the policy agenda.

So far the national policy responses have concentrated mainly on two fronts: closing down early exit options, and trying to stem the flow out of the labour market by encouraging part-time employment instead of full retirement. In the EU such measures have been taken in Austria, Belgium, Denmark, Finland, France, Germany, Italy and the Netherlands. A third policy option — combating age barriers in the labour market and encouraging employers to recruit or retain older workers — has only just entered the scene. Labour markets are characterized by age discrimination: irrespective of the shift in policy emphasis, employers forced to reduce employment concentrate redundancies on older workers (often in agreement with

trade unions) and, in turn, long-term unemployment affects older workers more than younger ones. But there are signs of change towards more positive attitudes on the part of employers. Thus, a recently completed research project collected more than 160 examples of good practice in combating age barriers, particularly with regard to job recruitment, retention and retraining (Walker, 1997; Walker and Taylor, 1998). The Age Barriers Project involved seven EU member States: Belgium, France, Germany, Greece, Italy, the Netherlands and the United Kingdom, with additional examples from Finland and Sweden. This was the first European research to focus on examples of good practice in the employment of older workers and it has attracted a great deal of attention. I believe that it provides the basis for a new policy to revive employment among older people.

Briefly, this policy to facilitate greater economic activity among mature workers would require action by all of those involved in labour markets: employers, ageing workers, trade unions, employer and union confederations, and governments. It must be focused on the workplace and involve a partnership between employers and ageing workers, with support from governments, to ensure that age does not become a barrier to employment (Walker, 1999a).

The starting point must be concerted action to combat age discrimination in employment. To raise pension ages while leaving ageism unchecked is simply to consign older workers to exclusion, low incomes and, eventually, inadequate pensions. Age discrimination is the antithesis of active ageing. This form of social exclusion is not only unjust but economically wasteful. The Age Barriers Project showed that it is possible to reverse discriminatory practices and revealed a continuum of good practice stretching from very limited and narrowly focused measures to comprehensive ones. We concluded that, rather than the present reactive approach adopted by most employers and policymakers, an integrated age management strategy would be most effective. This would encompass both *preventive* measures (such as lifelong education and continuous training) and *remedial* ones (such as training for older workers lacking specific skills, for example in new technology: Walker, 1999a). Education and exhortation are not likely to be sufficient to overcome age discrimination and, therefore, legislation has a role to play even though experience in the United States suggests that it is not a decisive one.

The logical extension of a policy against age discrimination would be the abolition of mandatory retirement ages (because age barrier retirement is age-discriminatory, and uniform pension ages make no sense in an era of diversity) and to have, instead, minimum pension ages. Then incentives could be introduced to encourage people to work beyond the minimum.

The United States has abolished mandatory retirement ages, Sweden currently allows the postponement of pensions to the age of 70, and the new Italian pension system allows postponement until 68.

Employment policies must also facilitate equal opportunities between men and women (in the EU, more than 50 per cent of working-age women over 50 do not have paid employment and women are overrepresented in vulnerable and low-paid jobs). There is also evidence to suggest that women experience age discrimination at younger ages than men (Itzin and Phillipson, 1993).

Policymakers are well aware of the need to curtail early retirement before the retirement of the baby boom generation, in order to avoid skill shortages and excess pressures on social protection. But, so far, their reactions are short-term and passive. As it happens, the baby boom generation is probably the best equipped to undergo the change to more active ageing (it is the best-educated and healthiest generation so far). It is well positioned to become the pivotal active ageing generation. As the European Commission (1999) has pointed out, there is a golden opportunity to utilize the skills and resources of this generation. To do so means shifting attention from age dependency ratios and focusing on the key issue: the economic activity rate and, specifically, underemployment among older people.

The need for active employment policies. Reversing the trend towards early exit will require major changes in behaviour and expectations in the labour market — a cultural change, in fact. To achieve this policy requires a more active approach, for example in combating age barriers, changing employer behaviour or providing incentives to extend working life and enable flexible employment and retirement. Some idea of the scope (and need) for public policy action can be seen in the table (based on an analysis by the OECD). The baseline (a) assumes that age-specific participation rates remain at their current levels; while the later retirement scenario (b) assumes that the recent trend among men towards earlier retirement is reversed and that the 1995 pattern of exit gradually moves back to the 1970 pattern between 2000 and 2030.

Similarly, in the case of the EU, if we compare its employment rates with those of the United States we find that they are very similar for those aged 25-54, but among women and younger and older workers the EU's employment rates lag behind (Larsson, 1999). In fact, if the EU raised its employment to US levels there would be no funding problems with regard to pensions. The European Commission's (1999) analysis shows that, regardless of current unemployment levels, the demographic impact on the labour

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Older workers (45+) as a percentage of the labour force

	1970	1995	2030(a)	2030(b)
Austria	31.5	26.6	36.9	45.3
Belgium	31.4	25.5	31.8	43.3
Denmark	36.4	34.0	37.3	46.3
Finland	31.5	34.2	36.9	44.2
France	32.9	30.7	39.1	47.7
Germany	33.1	31.5	40.3	50.4
Greece	35.3	33.0	45.0	54.3
Ireland	39.0	28.4	42.2	49.9
Italy	30.5	29.5	43.0	50.6
Luxembourg	28.6	26.1	33.6	38.8
Netherlands	29.7	26.6	33.5	45.1
Portugal	33.0	31.7	44.0	55.4
Spain	32.6	27.2	44.6	54.1
Sweden	39.3	38.6	40.7	45.7
United Kingdom	37.9	33.8	38.7	46.1
European Union 15	33.5	30.5	39.1	47.8
OECD	32.9	30.6	40.5	48.2
United States	27.7	25.0	28.9	27.9
Japan	21.9	33.1	34.5	31.1

Source: OECD, 1998.

force becomes an issue for all member States in the next 25 years. In other words, Europe must create more opportunities for older workers to remain active, because they will be needed. Just as public policies were required to encourage early exit, so now they are necessary to achieve the change in culture necessary to encourage and enable people to work longer.

Health and social care

The potential for active ageing can also be illustrated with reference to health and social care. As noted earlier, the assumption that increasing numbers of older people, especially very old people, mean a parallel rise in social protection costs is erroneous. Nonetheless, there is an association between advanced old age and disability and, in turn, with healthcare costs.

Therefore, a policy of active ageing that embraces the whole age range offers opportunities not only to add life to years, in the WHO's words, but also to contain health and social care costs.

There is a critical interrelationship between health and activity: on the one hand poor health can determine activity (for example, it is a major factor in early retirement) while, on the other hand, activity can be an important contributor to health (Butler, Oberlink and Schecter, 1990). It is important, therefore, that any active ageing strategy be sensitive to this relationship and aim to recognize and *prevent* ill-health and disability rather than assuming that everyone can be equally active.

For example, if measures are taken to extend working life by raising pension ages without action on the impact of employment on health, then the result will also be exclusion and an increase in the take-up of disability pensions. If these options are also closed to older workers, the impact will be severe and unjust. Although there is a trend towards a reduction of the incidence of disability at older ages, and although we might expect the shift away from manual employment to diminish the significance of age-related health problems (OECD, 1998), nonetheless the onset of such problems affects the timing of retirement for significant numbers of older workers. Poor health is related to age and, in turn, is a cause of large productivity differences among older workers. Paradoxically, employment is both a major cause of ill-health and an important source of health gain, in terms of activity, self-esteem and social contact (Wilkinson, 1996). Unless the ill-health-producing aspects of employment are negated, the active ageing option will not be open to all on an equal basis. Put more positively: if the health of workers is maintained, then they will be more willing and able to extend their working lives.

Again a preventive strategy is likely to be the only really effective one, and there are plenty of examples of good practice in this respect, particularly among the Nordic countries. For example, the Finnish Institute of Occupational Health has experience with two relevant programmes. Finn Age aimed to promote the health, employability and well-being of those over 45; while the Small Workplace programme was intended to encourage small firms to adopt good practices in the interests of the welfare of all employees. It goes without saying that a healthy workforce is likely to be a productive one and, as the workforce ages, employers will not be able to rejuvenate their organizations as readily and wastefully as they did in the past.

Activity rather than dependency. Of course, a strategy to break the link between employment and ill-health will mean improvements in the health

status of successive cohorts of retired people. But, as I pointed out earlier, one of the risks associated with a policy of active ageing is that it will focus only on employment and, thereby, add to the exclusion of those outside paid employment or who are already dependent. Indeed, it is important to reexamine existing health and social care practices to ensure that they do not foster physical dependency among older people. For example, a common tendency in social care is to operate as an emergency service and *substitute* for family care when it breaks down. This sometimes results in institutionalization, which has a long-documented causal link to increased dependency. An alternative, active approach to social care would emphasize the importance of prevention and the critical role of health and social care professionals in rehabilitation and the maintenance of activity. Elements of age discrimination in health and social care must be eliminated as elsewhere (Age Concern, 1999).

Therefore, active ageing policies should focus on preventing morbidity wherever it occurs and, in doing so, extend the quality of life of all of those who reach retirement (<http://www.shef.ac.uk/uni/projects/gop>). This means a broad public health approach aimed at preventing ill-health and disability. What is required is a concerted effort to encourage healthy lifestyles and healthy ageing. This would certainly enable people to remain active for longer. For those outside the labour market, active ageing should mean active citizenship, to which I will turn next. There is a close relationship between health and the quality of people's lives in old age. Of all the factors determining an older person's life situation, health is the most strongly related to subjective well-being (Larson, 1978). Thus, measures to extend healthy and disability-free life expectancy will facilitate active citizenship and add to the quality of people's lives.

Active citizenship

A concept of active ageing which extends beyond the labour market has the potential not only to reduce social protection costs and add to the quality of people's lives but also to contribute to meeting some of the demand for social support that an ageing population entails.

There is a common, ageist tendency to assume that inactivity in old age is the norm. This is far from the case and the available evidence shows that older people are relatively active. However, this declines with age and, among those aged 80 and over, there is a small minority who are severely isolated and excluded. This requires a strategy to include those who experience or who are at risk of isolation and loneliness, which are key triggers of depression in old age. In turn, depression is a major cause of morbidity and

poor life quality and affects more older people than dementia (Heikkinen, 1995; Keogh, 1996).

There have been extensive actions in the EU member States in recent years to encourage the active participation of older citizens in the policy processes at local, regional and national levels. Advisory groups and councils of older people have been established in most countries (Walker and Naegele, 1999). Sometimes, as in Denmark and Sweden, these organizations have a statutory responsibility and are able to exert real influence on the policymaking process. Sometimes they are more tokenistic and unrepresentative of the older population. Nonetheless, these organizations have been important catalysts for political participation on the part of older people and they could be strengthened as part of a broad strategy on active ageing.

Older people play key roles, as volunteers, in many voluntary associations and groups. For example, the 1992 Eurobarometer public opinion survey showed that 13 per cent of those over 60 were members of voluntary organizations providing free assistance or help to others — 30 per cent in the Netherlands, 29 per cent in Denmark and 6 per cent in Greece (Walker, 1993). This factor is often ignored in negative assessments of the impact of population ageing, as is its potential to contribute to the *supply* of social support. As the WHO Brasilia Declaration on Ageing (1996) stated, healthy older persons are a resource for their families, their communities and the economy.

There is a considerable amount of latent volunteer potential among economically inactive older people and their inclusion in such activity would contribute both to their own well-being and to meeting social needs. For example, the Retired and Senior Volunteer Programme (RSVP) in the United Kingdom has 6,000 volunteers engaged in a wide range of activities from gardening for frail older people to assisting GPs and listening to children read in schools. In order to tap this potential, measures are required which support voluntary activity in later life, to valorize volunteering in general and to inspire older people to take part. At the moment such inspiration is dulled by the youth orientation of popular culture and the stereotypes of older people as non-productive and old-fashioned — in short, by a culture of ageism (McEwan, 1993; Bytheway, 1995).

A strategy on active ageing

Despite the high political profile of population ageing and the growing interest in more active policies, the main policy response so far is a rather passive one emphasizing short-term cost savings, such as the closure of subsi-

dized early exit gates (Walker, 1999b). Although there is good evidence that public policy can have a significant impact on behaviour, for example in the labour market, it is only a minority of countries that are proactive on this issue. Moreover, those that are taking action tend to focus primarily on economic activity. The time is right for a new, concerted strategy on active ageing focusing on the whole of the life course.

This strategy should reflect the principles set out earlier in this paper and be comprehensive, flexible, preventive, participative and flexible. It must represent a balance of rights and obligations. This means a multidimensional strategy, operating at both individual and societal levels but in an integrated way. Individuals have a duty to take advantage of lifelong learning and continuous training opportunities and to promote their own health and well-being throughout the life course. As far as society is concerned, the policy challenge is to recognize the thread that links together all of the relevant policy areas: employment, health, social protection, social inclusion, transport, education and so on. An active ageing strategy demands that all of them are "joined up" and become mutually supportive. The danger that this sort of strategy will become coercive (Moody, 1993) can be avoided if policy takes an enabling and facilitating role and is responsive to age, gender, race, culture and other differences. An active ageing strategy should be "ageless" in the sense that it should cover the whole of the life course. Of course it should not deny the realities of ageing, but active ageing is concerned with how *everyone* ages and not only with older people.

The vision of a society for all ages

The *vision* behind this active ageing strategy is a society for all ages, in which all are valued and where everyone has an opportunity to participate and contribute regardless of their age or other personal characteristics. To realize this vision it is necessary to:

- change the endemic culture of ageism that permeates the labour market and other key structures of society;
- remove age barriers in all walks of life, so that people are judged on their competence;
- develop active age management in employment, aimed at preventing age becoming a barrier;
- keep older workers in touch with employment and enable them to maintain their skills so that workability is not reduced;
- encourage flexibility in retirement, so that the rigid division between employment and retirement disappears;
- facilitate active communities and access to community participation, for

example in the form of volunteering, so that older people are encouraged and enabled to participate and their skills and knowledge are used to benefit the wider community;

- promote public health in all aspects of life and among all ages, especially activity as a source of physical and mental health;
- increase the social support available to frail and vulnerable older people so that they are able to lead quality lives and their families are not overburdened;
- ensure that social protection continues to promote social quality and is not reduced to merely safety-net or minimum provision.

It is essential not to underestimate the scale of the changes implied by this list. In a context of institutionalized ageism, in which a youth-good/old age-bad culture dominates employment, the media, popular culture and elsewhere (the family excepted), the contributions of older people are not valued to the same extent as those of younger people (Bytheway, 1995). It is difficult, therefore, not only to create opportunities to contribute but also to persuade older people that it is worthwhile to do so. Thus there is a huge task to change our ageist culture so that it reflects the new, more age-balanced demographic reality. Older people themselves are not disinterested bystanders in this process. They could be a powerful political force (Walker and Naegele, 1999). They are already major contributors to families and communities. It is possible, too, that the postmodern consumer culture will break up the traditional images of middle and old age (Blaikie, 1999). Increased lifestyle choices and improved health offer some, at least, a flexible and less ageist, if not ageless, identity.

A life course perspective on active ageing

Now that we have outlined the principles and the cultural shift necessary to create a strategy on active ageing, what would active ageing look like in practice? Over the whole life course, individual and collective responsibilities should be mutually reinforcing (European Commission, 1999).

In the first age, younger people would prepare for longer, more active and better-quality lives. This means raising awareness among young people and their parents about the benefits of healthy lifestyles and lifelong learning, and the importance of age self-management. Children and young people need to learn about the ageing process and the impact of lifestyle on the quality of their later lives. They need to learn too about how damaging age discrimination can be to older people and society. It is important to expose young people to positive images of older people and to emphasize the key role of intergenerational solidarity in Europe.

In the second age, people will manage their own ageing, with support from employers and government, and retire later and more gradually. This means combating age barriers in employment, supporting lifelong learning and continuous training, promoting the retention, reinforcement and reintegration of older workers, enhancing opportunities for gradual retirement and ensuring that social protection encourages and supports activity. (Lifelong learning and continuous training are particularly important because they adjust workers' skills and competitiveness, enhance attachment to the labour market and extend workability.) Anti-age-discrimination legislation will be necessary to create a climate in which competence becomes the main criterion for employment and where people are not prevented from getting work by artificial age barriers. Health promotion activities are essential to encourage a positive pro-health culture.

In the third age, after retirement or during partial retirement, people should have opportunities to contribute in a variety of ways. They should have the freedom to choose between various types of activity (paid employment, voluntary work, community participation, family activities and leisure) or a mixture of them, depending on what they can afford. Attention to the nutritional aspects of healthy lifestyles is important. Programmes which motivate and enable older people to get involved in their local communities, such as RSVP in the United Kingdom, can greatly enhance their quality of life as well as those of the service recipients. Some older people may want, as now, to get involved in policy processes. The main point is that these processes (local, regional, national, global) should not exclude older people and should enable them to participate. Policies aimed at this third age should also be in tune with a future transition to the fourth age, for example in housing and transport.

In the fourth age, the goals should be maximum participation and autonomy even when frail. Thus, a key role for policy — in health, social care, pensions and housing — is to promote self-reliance and self-determination among those in advanced old age. This means going beyond community care and the provision of passive support services towards the empowerment of older people and their family carers. This sort of approach demands a cultural revolution within the health and social services (Barnes and Walker, 1996), an important aspect of which will be breaking down the barriers between health and social care and delivering a completely seamless service. Technology will play an important part in giving security to the most vulnerable, keeping working carers in touch with their older relatives and ensuring cost efficiency in services (European Commission, 1998). Security in the fourth age will have to be guaranteed primarily by the State, and care for the most dependent will have to be a public responsibil-

ity (which is the majority view of the general public) though this does not mean that *provision* will necessarily be public. The social economy, which includes the voluntary associations, should be encouraged to develop partnerships with public providers.

Conclusion

The beauty of this strategy is that it is good for everyone: from citizens of all ages as ageing individuals, in terms of maximizing their potential and quality of life, through to society as a whole, by getting the best from human capital, extending community participation and solidarity, avoiding intergenerational conflicts and creating a fairer, more inclusive society. Also, unusually, it is a strategy that makes sound economic sense, by responding to the economic challenges of ageing and extending employment, and, at the same time, it improves quality of life. Enhancing quality of life through an active ageing strategy, therefore, can further economic sustainability. There is a good economic case for doing the right thing in moral terms. Furthermore, it shifts the focus of policy away from older people, as a separate group who have aged, to all of us, who are ageing constantly. We share a collective interest in this process and in extending the quality of our own lives. Therefore, this strategy speaks directly to the ideal of a society for all ages — we are all part of the same project. Also, it emphasizes the coincidence of interests between citizens, government and all other major institutions, which is very rare indeed. Of course, policymakers must beware of being too coercive and of seeing active ageing in crude, instrumental terms as just a way of postponing pension payments and getting cheap labour from volunteers. If these risks can be avoided, the social and economic benefits will be enormous.

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