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# The WDA – HSG Discussion Paper Series

*on Demographic Issues*

## International Action on Ageing: Where Do We Stand?

*by Alexandre Sidorenko*

*No. 2007/4*



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This discussion paper series is kindly supported by the Ecoscientia Foundation

# **International action on ageing: where do we stand? <sup>1</sup>**

Alexandre Sidorenko<sup>2</sup>

## **Introduction**

We are meeting in a very special year for international ageing. Indeed, 2007 is a double-anniversary year as it marks the twenty-fifth anniversary of the first World Assembly on Ageing, which was convened in 1982 in Vienna, Austria and the fifth anniversary of the Second World Assembly on Ageing, which took place in Madrid, Spain. Both world assemblies were held to address the issues of ageing and formulate policy responses.

Anniversaries call for celebrations. And we do have an undeniable reason for celebration: throughout the last twenty five years humanity has continued its unprecedented progression towards longevity. Indeed, the second half of the twentieth century saw a revolution in longevity, as the average life expectancy at birth increased by twenty years to reach 66 years. And it is expected to extend a further ten years by 2050. Nevertheless, the gains in longevity have not been distributed evenly across the world, and life expectancy at birth has experienced alarming declines in some developing countries and the Eurasian countries with economies in transition because of the devastating effects of warfare, economic and psycho-social hardship, and the HIV/AIDS epidemic. Yet, because of the continuing decline in birth rates, population ageing is set to continue its global advance during the current century. Are we prepared to embrace the achievements in longevity and respond to the challenges of the demographic transition to an ageing society?

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<sup>1</sup> This paper was presented at the third World Ageing & Generations Congress in St.Gallen, Switzerland, hosted by the World Demographic Association

<sup>2</sup> Head, UN Focal Point on Ageing, New York

The **central message** of my presentation is that while the process of population ageing can deservedly be designated revolutionary, policy responses to it have – at best – been evolutionary.

Having said this, I wish to clearly distance myself from the numerous alarmist statements which describe societal ageing as a disaster, a crisis or, in most extreme pronouncements, a socio-economic apocalypse. Contrary to these views, I wish to associate myself with the growing number of researchers, practitioners and policy makers who embrace a comprehensive, an all-inclusive notion of ageing as the ubiquitous process that poses challenges and, at the same time, offers opportunities. What I am trying to emphasize is that we are moving too slowly and doing too little to address those challenges and opportunities. In other words, our policy responses are not keeping pace with the demographic transformation towards an ageing society.

The main reason for this, I would argue, is that the world of international ageing is fragmented as its main dimensions – research, policy and local programmes – are evolving in isolation. This is particularly visible in developing countries. To achieve a synergy in the world of ageing, a new arrangement for international cooperation is needed.

Our responses to the challenges of ageing are indeed slow. As an example, it took the international community forty-one years to realize the necessity of outlining the basic principles of treating older persons from a human rights perspective. The first attempt to formulate such principles was made in 1948 by Argentina, which submitted to the United Nations a draft *declaration on the rights of the elderly*. That draft was never developed into an international consensus document. And it was not until 1991 that the United Nations moved to adopt the United Nations Principles for Older Persons – a non-legally binding set of eighteen statements outlining the basic rights of older persons in such areas as independence, participation, care, self-fulfillment and dignity.

Here are the words of the UN Secretary-General from his statement at the conclusion of the world assembly on ageing:

[The World Assembly] *was one of the few occasions on which an issue of global impact and importance had been considered by the international community at a relatively early stage, before it was too late.*<sup>3</sup>

Let me give a more specific reference to this quotation. The name of the Secretary-General is Javier Pérez de Cuéllar, the year is 1982, the venue is Vienna, Austria, and the occasion is the closing plenary meeting of the first world assembly on ageing – twenty five years ago.

Of course, the sense of urgency of action on ageing is different in countries at different stages of their development and demographic transition. Nevertheless, even in developing countries the demographic window of opportunity, while exceeding any imaginable political cycle, will not be open forever.

Twenty years after the first World Assembly on Ageing, at the Second World Assembly in Madrid, the international community recognized population ageing as “a universal force that has the power to shape the future as much as globalization”<sup>4</sup>. Yet, the issues of population and individual ageing have been treated with low priority on many national policy agendas, and in some places have been neglected altogether.

The purpose of my presentation today is not to preach to the converted, but instead draw attention to the persisting weakness of our responses to the challenges of ageing and invite you to consider possible improvements.

In my presentation, I shall review policy responses since the first world assembly on ageing and try to analyze their adequacy. I will continue by describing the status of international cooperation on ageing, and conclude by proposing how its deficiencies could be addressed.

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<sup>3</sup> *Report of the World Assembly on Aging. Vienna, 26 July to 6 August 1982. A/CONF.113/31. United Nations, New York 1982. Paragraph 184*

<sup>4</sup> *Madrid International Plan of Action on Ageing, 2002. Paragraph 15*

## **Progress since the first World Assembly on Ageing**

Twenty five years ago the Vienna International Plan of Action on Ageing was adopted with the “primary aims to strengthen the capacities of countries to deal effectively with the ageing of their populations and with the special concerns and needs of their elderly, and to promote an appropriate international response to the issues of ageing...”<sup>5</sup>

During the twenty years of the implementation of the Vienna Plan of Action, progress was assessed four times, every four years. All four review and appraisal exercises arrived at principally the same conclusion: progress in implementing the Vienna Plan of Action was insufficient. Here are the main conclusions of these quadrennial exercises:

The first review and appraisal, which was undertaken in 1985, found evidence of growing awareness of ageing issues and commitment to national ageing programmes among governments of both developed and developing countries.<sup>6</sup> At the same time, the review and appraisal report concluded that there was limited progress in improving the living conditions of [older persons] in developing countries and expanding the network of services available to them in all major areas of concern to “ageing individuals”. These areas were identified in the Vienna Plan as the principal spheres of policy action and included health, housing, the family, income security, employment, social welfare, and education.<sup>7</sup> The major constraints to progress in implementing the Vienna Plan of Action were attributed to the global recession of the nineteen-eighties, which caused economic reversals with big social costs, particularly in developing countries.

Four years later, the central conclusion of the second review and appraisal was basically the same: at the global level, there seemed to have been little progress in implementing the Vienna Plan of Action. The review and appraisal report noted obvious progress in a few parts of the world, yet stated that even considered collectively, that

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<sup>5</sup> Vienna International Plan of Action on Ageing, 1982. Paragraph 2

<sup>6</sup> First review and appraisal of the implementation of the International Plan of Action on Ageing. Report of the Secretary-General (E/1985/6), paragraph 27

<sup>7</sup> Ibid, paragraph 10.

progress was not sufficient to change the global assessment: while the world's population continued to age with increasing rapidity and awareness of the phenomenon continued to grow, policies and programmes in response had grown little. Far from anticipating the process of ageing, they have not even kept pace with it, concluded the second review and appraisal.<sup>8</sup> Another important conclusion in 1989 was that the balance between developmental and humanitarian policy efforts was skewed in favour of humanitarian measures – measures to address the immediate needs of older persons, while the developmental ones often went by default.<sup>9</sup>

Four years later still, in 1993, the third review and appraisal again noted increasing awareness of ageing among government authorities, the international community and non-governmental organizations. And again, on a cheerless note, the review and appraisal concluded that translating that growing awareness of the consequences of ageing into action-oriented policies and programmes had remained difficult<sup>10</sup>.

Let us notice that the third review and appraisal was conducted during the tenth anniversary year of the World Assembly on Ageing. By that time, several new global initiatives on ageing were in place: the International Institute on Ageing in Malta had been functional for five years; the Banyan Fund Association: a World Fund for Ageing had recently been established; the International Day of Older Persons was designated; the United Nations Principles for Older Persons were adopted; and global and national targets on ageing for the year 2001 were developed. Finally, a two-day international conference on ageing was held by the UN General Assembly to celebrate the tenth anniversary of the World Assembly on Ageing. At its international conference, the General Assembly decided to observe the year 1999 as the International Year of Older Persons. All these big international initiatives were in contrast with the following observation of the review and appraisal:

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<sup>8</sup> Second review and appraisal of the implementation of the International Plan of Action on Ageing. Report of the Secretary-General (E/1989/11), paragraph 3

<sup>9</sup> Ibid, paragraph 5

<sup>10</sup> Third review and appraisal of the implementation of the International Plan of Action on Ageing. Report of the Secretary-General (E/CN.5/1993/7), paragraph 5

*Health and social services, educational opportunities, support for families providing care, support for elderly women, and income security or even minimum benefit packages for the poorest of the elderly are often woefully lacking, especially in developing countries*<sup>11</sup>.

And further:

*... many countries, particularly developing countries, have the good will and desire to accommodate an expanding ageing population but are over tasked to provide a minimum response, let alone a response that adequately meets the goals and aspirations of the World Assembly on Ageing*<sup>12</sup>.

The last review and appraisal of the Vienna Plan of Action was conducted in 1997. And here is again, fifteen years after the Vienna Assembly, the same inauspicious language of conclusion: “the population over 60 has grown dramatically, yet the response has been minimal at best”<sup>13</sup>. And, in another place, summarizing the major findings of the review and appraisal exercise, the report states: the “progress in implementing the [Vienna] Plan of Action remains modest”<sup>14</sup>.

### **Insufficient responses to ageing: reasons behind**

Why had progress in the national efforts to achieve the tasks formulated in the Vienna Plan of Action been continuously assessed negatively: as “limited” in 1985, as “not sufficient” in 1989, as “a daunting task” in 1993, and as “modest” in 1997? Could it be that the Plan formulated at the World Assembly on Ageing in Vienna was somehow fundamentally insufficient or inappropriate? Apparently not, as during the four review and appraisal exercises no attempts were made to update the Vienna Plan of Action although

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<sup>11</sup> Ibid, paragraph 19

<sup>12</sup> Ibid, paragraph 19

<sup>13</sup> Fourth review and appraisal of the implementation of the International Plan of Action on Ageing. Report of the Secretary-General (E/CN.5/1997/4), paragraph 5

<sup>14</sup> *ibid*, paragraph 7



such a measure was envisioned in the Vienna Plan<sup>15</sup> and the UN Commission for Social Development, which conducted the review and appraisal exercises, had the necessary mandate to do so. Moreover, government delegations at the Second World Assembly in Madrid “unanimously reaffirmed the principles and recommendations for action of the [Vienna] International Plan of Action on Ageing”<sup>16</sup>. And the Madrid Plan of Action refers to its Vienna predecessor as the one that “guided the course of thinking and action on ageing over the past 20 years” – between the two world assemblies.

The fourth review and appraisal exercise of 1997 was the last one before the Second World Assembly on Ageing, which adopted the new Madrid International Plan of Action. Shortly before the Second World Assembly, in 2000, the secretariat of the UN programme on ageing approached the UN member states to elicit their views on the progress in and obstacles to the implementation of the Vienna Plan of Action. 72 per cent of sixty-one countries that responded to the UN questionnaire found that the format of the Vienna Plan of Action was helpful and only 18 per cent of the countries that responded wanted to change the Plan’s format. These results did not mean that all the approving governments were unconditionally happy with the content and the format of the Vienna Plan of Action. A few countries (developed) even sought a redesign of the Plan. Nevertheless, a positive view of the Vienna Plan of Action dominated.

Taken together, the results of twenty years of monitoring of the Vienna Plan of Action could be interpreted in the following way: the insufficiency of the implementation process was not caused by the weaknesses of the Plan but rather could be attributed to the difficulties in translating this international policy blueprint into national policy action. What evidence do we have for this?

Let’s turn again to the survey of member states conducted in 2000. Governments were also asked to name the reasons for difficulties in implementing the Vienna Plan of Action. Thirty-five countries, 57 per cent of the responding

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<sup>15</sup> Vienna International Plan of Action on Ageing, paragraph 118.

<sup>16</sup> Political declaration [of the Second World Assembly on Ageing], Article 3.

governments, reported lack of funding as the major reason for their difficulties in implementing the recommendations of the Vienna Plan of Action. Economic difficulties in developing countries and countries with economies in transition constrained the allocation of funds as called for in the Plan of Action.

The second major reason identified by the participating governments was the low priority of age-related concerns, particularly in countries where the proportion of the ageing population was relatively small.

It is interesting to compare this observation with the information available from the Population Policy Data Bank maintained by the UN Population Division. This Data Bank collects various types of information, including government views of population issues and corresponding policy responses. As of 2003, 56 per cent of reporting countries viewed population ageing as a major concern, and 43 per cent as a minor concern. It is also interesting to note that while concerns with population ageing are much more pronounced among developed countries, almost one-half of developing countries expressed major concern over population ageing in 2003.<sup>17</sup> {Illustration based on Table 3 of the publication here}.

And the third reason could be linked to weak national infrastructure on ageing, particularly in developing countries, whose governments indicated the shortage of government staff as another common problem. In addition, some countries did not have a well-defined body to manage ageing issues. In certain cases, the assigned body was unwilling to assume responsibility for addressing the needs of older persons, complained some countries. A lack of coordination between agencies at different levels in the government hierarchy, which may have overlapping responsibilities, could result in conflicting interests and priorities. In addition to the lack of expertise in policy-making, some decision makers had insufficient knowledge about the Plan. Furthermore, it was perceived that the Plan lacked concrete and refined recommendations and carried no convincing appeal to other stakeholders such as NGOs, the private sector and the media.

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<sup>17</sup> World Population Policies 2003. United Nations, New York, 2004

An even sharper view was expressed by an NGO, HelpAge International, in 2002 in its report “State of the World’s Older People”. The report concluded that “the implications of ageing are all but invisible in international policy. Around two-thirds of the world’s older people live in developing countries but, unlike the states in the Organization for Economic Cooperation and Development (OECD), the developing countries are becoming old before they become rich”.

The recent five years of international action on ageing, since the Second World Assembly on Ageing, is currently the subject of the review and appraisal of the implementation of the Madrid Plan of Action, and in a few months we shall have the results of the review and appraisal exercise. Meanwhile, the preliminary information which is available to the secretariat of the UN programme on ageing suggests that in spite of various new initiatives around the world, the prevailing policy landscape remains unchanged: while awareness continues to grow, policy responses are lagging behind the needs of an ageing society.

In summary, there have been three major persisting deficiencies that might have been behind the insufficient progress in international action on ageing, namely: lack of funds; low priority on national developmental and political agendas of issues related to ageing and older persons; and weakness of the national infrastructure. Basically, we are talking here about national capacity on ageing, which, in addition to financial resources, a sound policy (and political) process, and institutional infrastructure, includes also human resources, and policy related research.

Thus in order to facilitate progress in policy responses to ageing, national and international efforts have to focus on building and/or strengthening national capacity on ageing. This is easier to proclaim than to achieve, again, particularly in developing countries.

A number of elements constitute national capacity on ageing. They include: the ability of a country to set clear goals and develop a national plan of action on ageing that

corresponds with the national commitments and internationally agreed objectives, such as those formulated in the Madrid Plan of Action; the political will of a country to implement ageing programmes, for example, through the creation of institutions dedicated to ageing issues; the extent to which a national government actively engages in and promotes partnerships with other stakeholders, including the private sector, non-governmental organizations, families and associations of older persons; the degree to which a country invests in human resources, both of professional personnel and volunteers to implement and oversee policies and programmes on ageing as well as the education and training of older persons themselves to help keep them vital and engaged; the efforts that a country makes to find and secure resources – both nationally and internationally – to carry out ageing programmes; and the commitment that a country makes to improving the quality of its research, data and analysis on ageing issues.

Building national capacity on ageing is an immediate responsibility of national governments. At the same time, I would argue that without well coordinated international cooperation on ageing implementation of international policy frameworks on ageing, including the Madrid Plan of Action, will remain uneven and insufficient.

### **International cooperation on ageing: today and tomorrow**

There have been numerous calls to strengthen international cooperation on ageing. The Madrid Plan of Action emphasized the need for enhanced and focused international cooperation for its implementation, and practically every resolution on ageing adopted by the UN General Assembly since 2002 reiterated the Plan's request.

What sort of international cooperation is needed?

Let's go back to the 2000 pre-Madrid Assembly survey: of the reporting countries, 58 out of 61 recognized international cooperation as a necessary dimension in achieving the goals of the Plan of Action; 39 preferred multilateral

partnerships; 4 opted for bilateral relations and 12 countries chose both. Among possible multilateral partners, 41 reporting countries preferred intergovernmental organizations, such as the United Nations family of organizations and regional organizations; 39 countries would like relations with international NGOs; and 26 countries preferred private foundations.

Member States were asked to identify priorities for future international cooperation. According to 49 country responses, the two priority areas were formulation, monitoring and evaluation of policies and programmes and research to support policy and programme development. The next priority was the training of health and social professionals followed by efforts to establish income-generating projects. Other suggested topics for international cooperation included: scientific research; education; information dissemination and the sharing of best practices; funding to improve existing programmes; and research and data collection.

What international cooperation on ageing is currently in place? Let me give you just a few recent examples.

The UN office that I represent – the Division for Social Policy and Development of the Department of Economic and Social Affairs – works on a technical assistance initiative to support countries in implementing the Madrid Plan of Action of Action. Funding from the Development Account has been made available to expand our work under a “Capacity building project to integrate older persons in development goals and frameworks through the implementation of the Madrid International Plan of Action on Ageing”. The overall approach of the project is to promote the integration of an ageing perspective into national development frameworks. My colleagues have been working in Cameroon, Grenada, Kyrgyzstan and Senegal. The experience gained will be widely shared with the interested countries.

Several UN Regional Commissions have provided technical support for national implementation of the Madrid Plan of Action of Action, focusing on developing national

implementation strategies and building the national capacity to conduct the bottom-up review and appraisal of the Madrid Plan of Action. However, financial and human resources to undertake this work are limited and demand far outstrips available resources. In the absence of resources, the Economic and Social Commission for Western Asia (ESCWA) and the Economic Commission for Africa (ECA) are unable to offer support for capacity building in their Member States.

Given the persistent deficit or even complete absence of resources for technical cooperation on ageing in the UN Regional Commissions, last year our office sent to major donor governments a funding proposal to offer training at the regional and sub-regional levels to assist national focal points on ageing in organizing national review and appraisal exercises. To date, no donor funding has been forthcoming.

Among the United Nations system organizations, the UN Population Fund has been among the most active UN entities in providing technical assistance on ageing. UNFPA supported development of national plans and programmes on ageing in Benin, the Lao Peoples Democratic Republic, Uganda and Vietnam. UNFPA also supports projects aimed at strengthening government capacity to formulate and implement evidence-based strategic plans and policies on ageing in Benin, China, Malaysia and Thailand. Training is another major priority in UNFPA's support for developing national capacity on ageing (INIA, Guatemala, Uganda).

The ILO, through its series of Country Reviews of Employment Policy (CREP) initiative, analyzes the country situation, including issues related to ageing, and provides recommendations to individual Member States on how to strengthen their national employment and labour market policies.

Technical assistance that FAO provides to Member States promotes policy interventions and legislation that support older persons as contributors to agricultural development, as well as their integration and participation in rural development and food

security strategies, and strengthens national capacity to respond to the needs of older persons in HIV/AIDS-affected rural areas.

WHO has designed three capacity building initiatives to strengthen the primary health care sector as well as community capacity to deal with ageing issues. The first initiative involves Australia, Brazil, Canada, Costa Rica, Jamaica, Singapore and Spain, and aims to produce a toolkit to make primary health care services more accessible for and responsive to older people. The second initiative, involving sixteen countries from various world regions, is aimed at producing an “age-friendly cities guideline” to provide a framework for policies, services and structures related to the physical and social environment that will support and enable older persons to age actively and participate fully in society. The third initiative is developing a knowledge-base to assist policy makers in formulating integrated health and social policies based on the primary health care system and encompassing community and family care. Countries participating in the project are from Africa, Asia, the Caribbean, Latin America and the Middle East, and are paired in a south to south exchange of experience and learning.

In addition to, and often in connection with, the work of the UN organizations, HelpAge International has been working with governments to mainstream ageing issues into development strategies (Tanzania, Uganda) and to develop national plans of action on ageing (Albania, Kyrgyzstan, Mozambique and Serbia).

Another NGO, the International Association of Gerontology and Geriatrics (IAGG), together with the UN programme on ageing, has conducted a series of global and regional workshops, which helped to identify research priorities to support the implementation of the Madrid Plan of Action of Action in different world regions.

A series of World Ageing and Generations Congresses organized by the World Demographic Association at the University of St.Gallen, Switzerland, as a multi-stakeholder initiative, has succeeded in bringing together researchers, practitioners, policy makers and business leaders to debate the most challenging issues of population ageing.

And one more example: the establishment in 2005 of AFRAN – a research network of key African and international scholars, policy-makers and civil society representatives in the field of ageing.

There are also various initiatives started and/or supported by the private sector. For instance, a private sector initiative, the International Research Centre for Healthy Ageing and Longevity (IRCHAL) was established in 2004 in Sydney, Australia. IRCHAL's mission is to promote healthy ageing and longevity through interdisciplinary collaboration amongst the world's leading experts and to disseminate evidence-based knowledge throughout the nations of the developed and developing world.

These are just a few snapshots of international cooperation on ageing. No doubt, some more activities exist, including projects and programmes established on a bilateral basis as well as those supported by various funds and foundations. Thus, one may conclude that since the Second World Assembly on Ageing there has been progress in terms of the level and quality of international cooperation targeting ageing issues.

Meanwhile, the major outcomes of the Second World Assembly on Ageing, including the Madrid Plan of Action, have not featured prominently on the international agenda. This is particularly apparent in the area of technical assistance on ageing. Within the UN system, for instance, a major proportion of current assistance on ageing seems to have focused on funding specific, if not, discrete activities on ageing rather than an overall and integrated strategy for mainstreaming ageing as called for in the Madrid Plan of Action of Action.<sup>18</sup>

The low profile of ageing issues is exacerbated by the lack of awareness of many Member States of even the existence of the Madrid Plan of Action. As a result, governments simply fail to raise ageing as an issue requiring international assistance.

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<sup>18</sup> Most of the material on international technical cooperation derives from the SG report to GA-61



It also does not help that ageing and older persons are practically absent from the international developmental debate and action. Indeed, the most prominent document of the United Nations on development, the Millennium Declaration, does not make reference to ageing or older persons among its eight development goals (United Nations Millennium Declaration, 2000). No wonder, most policy makers continue to think of ageing primarily in humanitarian terms, with concern centred on pensions and care-giving, while ignoring its developmental implications and potential.

It also appears that the world of international ageing is grossly fragmented in all its major dimensions: policy, research and practice. Indeed, there are numerous research and studies of various aspects of ageing – from the role of different bio-molecules to the causes of elder abuse. Many of them are pursued in isolation and often duplicated. There are also well elaborated, and internationally agreed, policy frameworks and blueprints, such as the Madrid Plan of Action and the WHO Active Ageing Strategy. Too often, these international policy documents are unknown to general public and even policy makers and government officials. There might also be untapped resources – human and financial, however, donor governments are reluctant to channel them through the traditional corridors of international bureaucracy, including the United Nations. Thus the central question of international cooperation on ageing is how to direct the various resources to where they are most needed? How to make sure that the researchers can see their ideas in practice, while the policy makers and practitioners can benefit from the strong research evidence to support programmes and policies? And, finally, how to ensure that the international policy frameworks are being translated into practical programmes and projects with fruitful results?

The solution seems to be obvious: international ageing needs effective and efficient coordination. That is what the United Nations is supposed to do. However, the resources of the UN global Focal Point on Ageing, which I am proud to represent, are [painfully] insufficient for fulfilling this task. Indeed, three professional staff members in the UN programme on ageing is somewhat less than one would envisage for global coordination.

The secretariat of the UN Programme on Ageing is not the only UN entity dealing with issues related to ageing and older persons. WHO has an established and administratively distinct programme on ageing – the WHO Health and Ageing Programme. All five Regional Commissions have within their secretariats designated focal points on ageing. The Population Division, Statistics Division, Division for the Advancement of Women of the UN Department of Economic and Social Affairs conduct ongoing or periodic activities on ageing. FAO, ILO, UNFPA, the World Bank address ageing issues within their expertise and mandates. However, coordination of activities on ageing within the UN system is not systematic, but rather conducted on an *ad hoc* basis and basically confined to the exchange of information.

So what are the solutions?

One can dream of an international body specifically dealing with various implications of population and individual ageing – a World Ageing Organization or a UNICEF for ageing. Indeed as the number of older persons is expected to triple by the middle of the current century, so that every fifth human individual will be at the age of sixty or above, the establishment of a United Nations Fund to address the needs of older persons and of ageing societies seems to be a reasonable proposition. It should be admitted that the idea of “UNICEF for ageing” has been around for a few decades<sup>19</sup> – emerging in times of major global events or observances on ageing, such as the International Year of Older Persons in 1999, or, most recently, the Second World Assembly on Ageing, and then slowly fading out along with the decline in political interest and publicity. Establishing of a large independent UN agency, or fund, on ageing will most obviously remain a dream – for political, financial, and even psychological reasons. As an under-secretary for humanitarian and social affairs in the late eighties once said, one cannot compare the attractiveness of issues related to children and those related to older persons; the latter issues are simply not sexy enough.

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<sup>19</sup> Humanity Comes of Age. By Susanne S. Paul and James A. Paul. WCC Publications, Geneva, 1994

Another idea could be an independent body outside the United Nations. Such a body could be established by an open coalition of governments and civil society, bringing together interested countries, the private sector, academia and NGOs. A somewhat similar model is mentioned in the Madrid Plan of Action for monitoring purposes, although at the national level. Meanwhile, the limitations can include political and logistical difficulties in ensuring intergovernmental coordination and preventing it from becoming an exclusive club of older, and wealthier, nations.

Yet another idea could be the formation of an inter-agency body similar to UNAIDS, the joint United Nations Programme on HIV/AIDS. UNAIDS brings together the efforts and resources of ten UN system organizations to the global AIDS response. Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO, the World Bank and the UNAIDS secretariat. Based on this model, the UN inter-agency body on ageing – *UNAGE*, would spear-head joint work on ageing, with contributions from the entire UN system. It could come to work on the ground in the countries where technical expertise and financial resources are required. It could also become an attractive entity for researchers who would like to contribute to evidence based policy on ageing. Of course one has to be realistic: *UNAGE* would not be able to mobilize resources at the level available to UNAIDS: that is, 2.6 billion dollars during the biennium 2006-2007. However, *UNAGE* will not manage a global disaster, as UNAIDS does, but, as it is formulated in the Madrid Plan of Action, would help us all to adjust to an ageing world.

Whatever the model to be chosen in the future – and better in the near future – the world has to move from increased awareness and declared commitments to concrete and coordinated action on ageing. As the UN Secretary-General said twenty-five years ago: before it is too late.



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Summary of a Special Session with: Bengt Jonsson (chair), Michaela Diamant, Herta Marie Rack and Tony O'Sullivan,  
*"Innovative approaches to managing the diabetes epidemic"*,  
No. 2007/ 3

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