

Analysis report on EU and Member State policies, strategies and programmes on population and workforce ageing

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Table of Contents

Abbreviations.....	6
Executive summary	7
1 Introduction.....	13
1.1 The project 'Safer and Healthier Work at Any Age'	13
1.2 Objective and methodology	13
1.3 Definition of an 'older worker'	15
1.4 Limitations of the study.....	16
2 Setting the scene: the challenges of demographic change	17
2.1 Demographic change in Europe	17
2.2 The main policy response: pension reforms	21
2.3 Reasons for early exit from work	26
3 Concepts and factors influencing national policy development.....	35
3.1 Concepts and models for sustainable working lives	35
3.2 Supranational influences and wider economic developments	37
3.3 National factors influencing policy development.....	45
4 Policy development in European countries in order to deal with the challenges of an ageing workforce.....	54
4.1 Country clusters: introduction and methodology.....	54
4.2 Country clusters.....	55
4.3 Conclusions on drivers and obstacles, impacts and transferability.....	78
5 Future trends and uncertainties	85
5.1 Future trends	85
5.2 Uncertainties and knowledge gaps.....	88
6 Conclusions and findings relevant to policy development	93
Bibliography.....	102
7 Annex 1: Overview of concepts related to work, health and age	119
8 Annex 2: Indicators by country	124
9 Annex 3: Analysis indicators.....	145
10 Annex 4: Key policy measures to address the challenges of an ageing workforce	147

List of figures and tables

Figure 2-1, Population pyramid EU-27 by age and sex, 2010 and 2060 (EPRS, 2013).....	17
Figure 2-2, HLY and life expectancy at the age of 65 years, men and women, EU, 2005-2013 (Eurostat, 2015c)	18
Figure 2-3, Changes in population age structure, 1990-2040	19
Figure 2-4, Changes in OADR, 1990-2040	19

Figure 2-5, Proportion of broad age-groups in the total working age population, 1990, 2013 and 2040, EU-28	20
Figure 2-6, Changes in the age-group shares from total working-age population between 1990 and 2040, EU-28	20
Figure 2-7, Effective and official retirement ages in European countries in 2012	23
Figure 2-8, Change in employment rate over the 2000-2014 period, EU-28, by age group	24
Figure 2-9, Employment rates (%) among the 55- to 64-year-old age group in 2014 in the EU-28 and EFTA countries	25
Figure 2-10, Proportion of people (all age groups) who reported that their work negatively affects their health in 2010, by occupational status	27
Figure 2-11, People aged 50-69 years who receive a pension and who continue working to provide sufficient personal/household income, 2012	29
Figure 2-12, People aged 50-69 years who receive a pension and who continue working because of non-financial reasons, 2012	30
Figure 2-13, Correlation between perceived health status and effective retirement age in the EU and EFTA countries, 2010-13	
Figure 2-14, Proportion of inactive people, aged 50-69 years and who receive a pension, who quit working because of their own health or disability, 2012	32
Figure 2-15, Perceived job sustainability versus effective retirement age in the EU and EFTA countries, 2010	34
Figure 3-1, Changes in youth unemployment rates, 2005-2014, EU-28	45
Figure 3-2, Trade union density in OECD countries in 2012	49
Figure 3-3, Rates of collective-bargaining coverage in 2012 (%)	50
Figure 4-1, Four country clusters based on policy development in the context of an ageing workforce	54
Figure 4-2, Group 1 countries	55
Figure 4-3, Group 2 countries	59
Figure 4-4, Group 3 countries	65
Figure 4-5, Group 4 countries	72
Figure 4-6, Elements of an integrated policy framework to address the challenges of an ageing workforce	74
Figure 5-1, Median age of European countries in 2013 and projections for 2040	86
Figure 5-2, Changes in the employment rates of the population aged 55-64 years between 2013 and 2060	87
Figure 5-3, Differences in median age (in years) and OADR (in percentage points) including and excluding migration — projections for 2040, by country	89
Figure 8-1, Age pyramids of European countries in 2010 and in 2050 (ICPDB, 2014a to 2014ae)	124
Figure 8-2, Population median age in 1970, 1990 and 2013 (Eurostat, 2014e)	135
Figure 8-3, Employment rate of people aged 55-64 years, 2014	136
Figure 8-4, Workers who think they will be able to do the same job when they are 60 years old, all age groups, by occupational status and by skill level, EU-28, 2010	138
Figure 8-5, Employed people who reported having a long-standing illness or health problem, by age group, EU-28, 2013	139
Figure 8-6, Employed people aged 55-64 years who reported having a long-standing illness or health problem, 2013	139
Figure 8-7, Employed people who reported having some or severe long-standing limitations on usual activities due to a health problem, by age group, EU-28, 2013	140
Figure 8-8, Employed people aged 55-64 years who reported having some or severe long-standing limitations on usual activities due to a health problem, 2013 (*data for Finland are from 2012)	140

Figure 8-9, People who report having a work-related health problem, difference between the age group 55-64 years old and the age group 35-54 years old, in percentage points, 2013 (no data available for Iceland, Malta and the Netherlands)	141
Figure 8-10, People aged 55-64 years who report having a work-related health problem, 2013 (no data available for Iceland, Malta and the Netherlands)	141
Figure 8-11, Proportion of inactive people, aged 50-69 years and who receive a pension, who quit work because they were eligible for a pension, 2012 (no data available for Iceland)	142
Figure 8-12, Main reasons for inactive people, aged 50-69 years who receive a pension, to quit work, 2012	142
Figure 8-13, Healthy life years at the age of 65, women, 2013 (data for Finland are from 2012)	143
Figure 8-14, Healthy life years at the age of 65, men, 2013 (data for Finland are from 2012)	143
Figure 8-15, Healthy life years as a percentage of life expectancy at the age of 65, women, 2013 (data for Finland are from 2012)	143
Figure 8-16, Healthy life years as percentage of life expectancy at the age of 65, men, 2013 (data for Finland are from 2012)	144
Table 3-1, Key concepts for sustainable working lives	35
Table 3-2, Key international developments in the field of work, age and health	38
Table 7-1, Concepts used in the policy discourse to address the challenges of an ageing workforce	120
Table 10-1, Overview of key policy measures to address the challenges of an ageing workforce	148

Abbreviations

ALMP	active labour market policies
CJEU	Court of Justice of the European Union
EaSI	EU Programme for Employment and Social Innovation
EC	European Commission
ECB	European Central Bank
EFTA	European Free Trade Association
ENWHP	European Network for Workplace Health Promotion
EP	European Parliament
ETUI	European Trade Union Institute
EU	European Union
EU-28	28 Member States of the European Union
EU-SILCEU	Statistics on Income and Living Conditions
ESIF	European Structural and Investment Funds
ESF	European Social Fund
EU-OSHA	European Agency for Safety and Health at Work
EUROFOUND	European Foundation for the Improvement of Living and Working Conditions
EWCS	European Working Conditions Survey
FIOH	Finnish Institute of Occupational Health
GDP	gross domestic product
HLY	healthy life years
HR	human resources
ICT	information and communication technology
ILO	International Labour Organization
INQA	The New Quality of Work Initiative
ISSA	International Social Security Association
MSDs	musculoskeletal disorders
MYBL JPI	Joint Programming Initiative 'More Years, Better Lives'
OADR	old-age dependency ratio
OECD	Organisation for Economic Co-operation and Development
OSH	occupational safety and health
pp	percentage points
RTW	return to work
SHARE	Survey on Health, Ageing and Retirement in Europe
SME	small and medium-sized enterprises
TAEN	The Age and Employment Network
UK	United Kingdom
UN	United Nations
WAI	Work Ability Index
WHO	World Health Organization
WHP	workplace health promotion

Executive summary

This report is an analysis of policy development in relation to population ageing, more specifically the ageing of the workforce in the European Union (EU) and the four European Free Trade Association (EFTA) countries, in the relevant policy areas, including occupational safety and health, public health, employment, education, and anti-discrimination. It also analyses the various factors that play a role in the development and implementation of policies. Finally, it sets out a number of important considerations for future policy direction.¹

The European population has been ageing in recent decades, and this trend is predicted to continue and intensify: by 2040, the proportion of people aged 65 years or over is expected to account for nearly 27 % of the total EU-28 population. At the same time, the working-age population is also shrinking.

These developments have implications for society and socio-economic systems, such as pension systems and healthcare systems, leading to an increase in age-related public expenditure and putting significant pressure on the sustainability of those systems.

Governments throughout Europe have responded to these challenges by reforming pension systems and promoting the labour market participation of older workers. As a result, the employment rate of those aged 55-64 in the EU has been increasing over the past 15 years. However, people in Europe are still retiring before they reach official retirement age. The factors that explain why people leave the labour market before official retirement age are numerous and complex. They can be work-related, e.g. linked to working conditions, attitudes and behaviours in the workplace, or a lack of structures and procedures for vocational rehabilitation and return to work. They can also be individual, e.g. related to a person's health, financial situation, family situation or values. Therefore, policy-makers are faced with a major challenge when designing policies to promote extended working lives, namely how to take into account the many different interrelated factors.

This report was prepared on the basis of country studies carried out by national experts between September 2013 and June 2014, and the results of expert workshops held in 10 Member States (Austria, Belgium, Denmark, Finland, France, Germany, Greece, the Netherlands, Poland and the UK) between March and June 2014.

Concepts and factors influencing policy development

The comparative analysis of countries highlighted a number of factors that influence the development of policies addressing workforce ageing and the extension of working life.

Concepts

A number of concepts and models have emerged over the past 50 years through research into the issue of population ageing and efforts to find solutions to the challenges it poses on the micro level (the individual or worker), the meso level (the organisation or workplace) and the macro level (society). These include concepts such as active ageing, sustainable employability, sustainable work, health-promoting workplaces, well-being at work, work ability, age management. Many of those concepts and terms appear in European policy discourses and initiatives concerning demographic change and some of them form the conceptual basis for policy response to population ageing at European and national level.

Demographic development

The population is ageing all over Europe, but the magnitude, the speed and the timing varies across countries. In 2015, across the EU Member States the median age ranged between 36.4 years, in Ireland, and 45.9 years, in Germany, while the median age recorded in Iceland in 2015 (35.8 years) was lower

¹ This report forms part of the deliverables of a three-year pilot project, initiated by the European Parliament and managed by the European Agency for Safety and Health at Work (EU-OSHA), on the occupational safety and health (OSH) challenges of an ageing workforce, including the rehabilitation of sick and injured workers in Europe. The project aimed to assess the prerequisites for strategies and systems within EU Member States to take account of an ageing workforce and ensure better protection for all throughout the working life.

than in any of the EU Member States. In some countries — such as Sweden and other Nordic countries — population ageing may already be slowing down; in others, the process will speed up over the coming decades. It is projected that, after 2040, Latvia and then Romania will have the highest median ages, and most countries in Southern and Central-Eastern Europe are likely to have higher than average median ages.

For a handful of European countries, particularly the Nordic countries and Germany, population ageing has been a concern since the 1970s, when they started to reflect on how to effectively address the related challenges. For many other countries, the question of population ageing has emerged only recently as a potential issue for their socio-economic systems. In 2013, a majority of these countries still had a median age and an old-age dependency ratio (OADR) below the European average.

International influences

The challenges related to population ageing were recognised by key international organisations at an early stage, and there is a considerable body of research and policy documents by the World Health Organization (WHO), the Organisation for Economic Co-operation and Development (OECD) and the International Labour Organization on the issue. International policies and recommendations have influenced policy development in European countries directly and indirectly, shaping EU policies in relation to population and workforce ageing. Recommendations from the OECD on pension reforms and employment policies for older workers are referred to in national strategies, and the WHO's concept of 'active ageing' forms the basis for numerous EU policies and national strategies related to demographic change.

EU policies

A number of EU legislative measures and policies have had an important influence on the development of national policies related to the ageing workforce. The EU occupational safety and health (OSH) and antidiscrimination legislations have played a major role in the implementation of minimum requirements on OSH and age discrimination in employment in the Member States. In the areas of employment and public health, EU policies and initiatives have also influenced national policy development.

The EU 2020 Strategy sets out increasing the employment rate of the population aged 20-64 from the current 69% to at least 75%, including through the greater involvement of older workers, through focusing on employment, life-long learning and skills development, quality of jobs and working conditions. The EU OSH Strategic Framework 2014-2020 also defines addressing the ageing of the European workforce as one of the strategic objectives.

Finally, EU funding and awareness-raising activities have supported the implementation of innovative practices in relation to age management and active ageing at national and local levels.

Economic crisis

The impact of the economic crisis and the subsequent rise in youth unemployment has shifted policy priorities in many European countries towards promoting the employment of younger people, leaving aside considerations related to the ageing workforce. Efforts to improve employability, in particular in relation to vocational education and training, have mostly focused on younger age groups.

National factors

Individual countries' policy development and implementation, in particular with regard to OSH, owe much to their legal and institutional frameworks, themselves shaped by national traditions and historical developments in relation to OSH and social welfare. Mature legal and institutional frameworks for OSH can better respond to new challenges, including those related to demographic change. Such mature frameworks are characterised by:

- Long-standing national laws regulating employers' obligations with respect to OSH and anti-discrimination, pre-dating the adoption of relevant European legislation.
- Well-developed institutional and policy frameworks for OSH:

- a strong labour inspectorate, with a broad scope of activities, taking an advisory role as well as a traditional enforcement role;
 - a well-established system of occupational health care;
 - participation by occupational insurance institutions in OSH risk prevention and research activities;
 - a strong tradition of OSH research.
- Enduring traditions of social dialogue at all levels and well-established structures for workers' representation.
 - Well-established multidisciplinary platforms for stakeholder cooperation in policy development and implementation. During the fieldwork, stakeholders in a number of countries raised their concerns that a growing number of initiatives combined with a lack of an overarching guiding framework can lead to unnecessary duplication of effort or inequalities (e.g. between different regions in countries with a high degree of regionalisation, such as Belgium or Germany).

Policy responses to population and workforce ageing

European countries have developed a variety of policies, programmes and initiatives in the fields of employment, social affairs, public health, social justice and vocational education to address the challenges posed by an ageing workforce and the need to extend working life. The analysis of the countries' policy development allowed the grouping of countries into four clusters based on a number of criteria, such as the scope and overall orientation of the policies developed, the level of integration and coordination across policy areas and stakeholders, and policy implementation.

- The first group of countries consists of Croatia, Cyprus, Greece, Iceland, Lithuania and Romania.

This group is diverse in terms of population ageing and economic situation. The common feature is that population and workforce ageing and the related challenges for workplaces have not been the main priority for policy development for various reasons. The countries were hit hard by the economic crisis, and some of them still suffer from the consequences, such as high unemployment and poverty, explaining a different focus for policy development. Some, such as Iceland and Cyprus, have a young population; in addition, in Iceland the effective retirement age is higher than the official retirement age and the employment rate of older people is very high. However, pension reforms have been carried out in all these countries, and in countries with an older population the focus is on increasing the labour market participation of older people by raising the retirement age and restricting access to early retirement, as well as on economic incentives to employ older people.

- The second group of countries consists of Bulgaria, the Czech Republic, Estonia, Hungary, Ireland, Italy, Latvia, Luxembourg, Malta, Poland, Portugal, Slovakia, Slovenia, Spain and Switzerland.

This group is large and very diverse as regards demographic development and economic situation, including countries such as Ireland, which has one of the youngest populations in Europe, and Italy, which has one of the oldest. Some of the countries in the group had a relatively young population until recently but will be facing rapid ageing in the upcoming decades, with the OADR more or less doubling by 2060.

These countries have in common that policies related to workforce ageing have mainly focused on increasing older workers' labour market participation through pension reforms and employment measures, but they also include elements addressing working conditions and OSH, training and lifelong learning, or the employability of older workers. Rehabilitation systems mostly focus on people with disabilities or, in certain cases, people who have experienced an

occupational accident or illness, and their scope is in general limited to medical rehabilitation. Some cross-policy work takes place, although it remains limited.

- The third group of countries consists of Austria, Belgium, France, Norway and the UK.

Countries in this group have a relatively old population, and population and workforce ageing and the related challenges are a policy priority. There have been initiatives in several policy areas, covering employment, public health, education and OSH. The role of working conditions and OSH in prolonging working life has been recognised, and these countries have developed comprehensive measures to promote the employability of older workers and address working conditions and safety and health at work in a holistic way, including promoting vocational rehabilitation and return to work. Concepts such as 'age management' and 'work ability' are frequently referred to in policy documents; they are well known and implemented in practice. In general, social dialogue plays an important role in policy development and implementation.

- The fourth group of countries consists of Denmark, Finland, Germany, the Netherlands and Sweden.

Population ageing started relatively early in these countries and tackling the related challenges has been a policy priority for longer. The countries have developed an integrated policy framework to address the consequences of the ageing and shrinking of the workforce, covering all relevant policy areas and establishing formal coordination structures, with concerted implementation. The aim is to promote sustainable working life and employability, taking a life-course perspective. The policies are based on concepts such as sustainable work, sustainable employability, well-being at work or new quality of work, all of which entail a holistic approach. The policy framework is implemented through 7 specific programmes and actions coordinated across policy areas, and involving a wide range of stakeholders. Social dialogue and collective agreements play an important role in policy development and implementation.

As in many other policy areas in the EU, there is no 'one size fits all' model for a policy response in relation to the ageing of the workforce. European countries have demographics that are changing in different ways, and they are at different points in the policy development process. Therefore, their actual needs differ. The transfer from one country to another of broad policy initiatives related to the ageing of the workforce and the extension of working life is likely to be difficult, given the complexity and specificity of these policies. However, many of the policies identified have in common a number of core characteristics that lend themselves to adaptation to each country's unique needs.

Policy-relevant findings

At national level

Despite the different contexts in terms of demographic development, economic situation and national systems across European countries, there are a number of policy elements and measures introduced in particular countries that could be applicable to national policy development elsewhere.

Policy frameworks

National policy frameworks have an important impact on the policies and practices enterprises develop in relation to an ageing workforce and they can support effective age management at company level, comprising:

- training and skills development;
- career development;
- flexible working time and work–life balance;
- OSH and working conditions;
- knowledge transfer;
- health promotion.

National governments have a key role in creating an environment supportive to age management and active and healthy ageing. Population and workforce ageing is a cross-policy issue and the challenges can be addressed in an efficient way by integrating the concept of active ageing into all relevant policy areas. This includes:

- flexible retirement policies allowing gradual retirement and the combining of work and pension, and including financial incentives to carry on working;
- promoting equal treatment in employment, removing age barriers and eliminating age discrimination;
- removing disincentives for employers to hire older workers;
- improving structures for adult education, vocational training and skills development, and promoting lifelong learning;
- creating systems for vocational rehabilitation and reintegration into labour market;
- promoting work–life balance and consolidation of work and family by developing child care and elderly care, as well as by supporting carers;
- strengthening occupational health care and introducing periodic health examinations for workers over 45 to detect problems at an early stage and allow for the development of early interventions;
- improving data collection on health, disability and absenteeism according to age, gender and occupation to support policy development and in order to develop solutions;
- focusing efforts to reduce health inequalities on the most problematic sectors and occupations and the most disadvantaged groups in the labour market;
- training occupational healthcare personnel, labour inspectors and OSH experts in issues relating to ageing and work;
- strengthening health education and health promotion as part of efforts to shift the focus from cure to preventive actions;
- promoting the concept of solidarity between generations and making efforts to change attitudes towards older people.

Supporting actions

The implementation of the policies described above can be promoted at national level through technical and financial support and through awareness-raising activities.

All relevant stakeholders should be involved in the development and implementation of integrated policy frameworks. Critical partners include social partners, labour inspectors, and other intermediaries, such as local governments, occupational insurance organisations, OSH external advisory services, non-governmental organisations, etc. The creation of formal structures for stakeholder coordination (e.g. stakeholder networks) facilitates collaboration and the efficient implementation of policies.

The needs of micro and small enterprises

Particular attention should be paid to the situation of micro and small enterprises. In line with the objective of the EU Strategic Framework on Health and Safety at Work 2014-2020, support should be provided specifically to micro and small enterprises. This support might include specific funding schemes, guidance, e-tools and awareness-raising activities.

At EU level

The review of policies developed at national level to address demographic change shows that the EU legal and policy framework is a driver for action in Member States.

OSH legislation

The current OSH legal framework is based on the principle of adapting the working environment to the needs and abilities of each individual worker, which provides a basis for taking into account diversity in risk assessment and OSH management in general.

The EU Strategic Framework

Tackling demographic change is identified in the Strategic Framework on Health and Safety at Work 2014-2020 as one of the challenges for OSH. The Framework refers to the importance of sustainable working life and, as a prerequisite for it, the need to promote safety and health at work and create a culture of prevention. It also emphasises the importance of lifelong employability. The review of the Framework, which is to take place in 2016, will offer an opportunity to propose more specific EU-level actions to address OSH in the context of an ageing workforce.

Mainstreaming age considerations into different policy areas

The ageing of the population and workforce affects many different policy areas. Cross-policy coordination at EU level is critical for the implementation of successful policies.

- Employment and economic policy recommendations on the reform of social security and pension systems should better acknowledge the potential consequences of pension reforms and raised retirement ages for workers and their health.
- Public health policies related to the ageing population should better acknowledge the impact of work on health and work as a social determinant of the health.
- The large number of court cases on the application of Article 6(1) of the Employment Equality Directive suggests that there is a need for more guidance on what can be considered equal treatment.

Supporting actions

- Guidance and tools should be developed and disseminated to support the development and implementation of national policies on sustainable working lives and return-to-work systems.
- The establishment of a specific platform to foster exchange of knowledge and good practice should be considered.
- EU-wide statistical data collection on health at work and sickness absence caused by occupational and non-occupational health problems should be improved.
- EU funding mechanisms such as the European Social Fund, the European Structural and Investment Funds and the EU Programme for Employment and Social Innovation, as well as lifelong learning programmes funded by the EU, should further promote age management and active ageing funded by the EU, should further promote age management and active ageing.

1 Introduction

1.1 The project ‘Safer and Healthier Work at Any Age’

This report is one of the deliverables of a three-year pilot project, initiated and financed by the European Parliament on the occupational safety and health (OSH) challenges of an ageing workforce in Europe. The three-year pilot project, Safer and Healthier Work at Any Age, began in June 2013. The project was managed by the European Agency for Safety and Health at Work (EU-OSHA), and implemented by a consortium led by Milieu Ltd. The consortium partners included COWI A/S, the Institute of Occupational Medicine (IOM), IDEWE, Forschungs- und Beratungsstelle Arbeitswelt (FORBA), GfK and the Nofer Institute of Occupational Medicine (NIOM).

The aim of the project was to provide a comprehensive overview of issues related to ageing and work (ageing process, productivity, gender, etc.) as well as analyse policies and initiatives addressing the ageing of the workforce and their implementation in the Member States and EFTA countries in order to support policy development in the area of OSH, including rehabilitation and return-to-work policies.

More specifically, the project:

- reviewed state of the art knowledge in relation to work, ageing, gender and OSH and rehabilitation and return to work
- analysed OSH (and related) policies, strategies, and programmes aimed at addressing the challenges of an ageing workforce in the EU Member States and EFTA countries
- investigated rehabilitation and return-to-work systems and programmes
- investigated workplace practices
- identified existing tools and guidance to assist workplaces in managing OSH in the context of an ageing workforce

The present report is an analysis of OSH and related policies, strategies, and programmes aimed at addressing the challenges of an ageing workforce in the EU and EFTA countries:

1.2 Objective and methodology

▪ Objective

The main objective of this report was to analyse policy development in relation to population ageing, more specifically the ageing of the workforce, in the relevant policy areas in the 28 EU Member States and in three EFTA countries (Norway, Iceland and Switzerland). Although the main focus of the analysis was on policies related to occupational safety and health (OSH), the analysis also covered other policy areas relevant to the topic, in particular employment, public health, social affairs, education and anti-discrimination. The comparative analysis of EU and national policy development aimed to identify the various factors that play a role in the development and implementation of policies. Finally, it sets out a number of important considerations for future policy direction.

▪ Methodology

The report analyses the combined findings from a number of deliverables produced as part of the project, including those outlined below:

- Country reports for the 28 EU Member States and four EFTA countries which describe the national institutional and legal frameworks for OSH, as well as relevant policy initiatives in the context of prolonging working lives, in particular in the field of OSH, but also in the areas of employment, public health and social affairs. The reports also provide the latest available data and figures on the current situation in the countries with regard to demographic change, the labour market and working conditions of older workers. The reader can consult these reports for

more details on the countries' policies and initiatives, including those used as examples in this report².

- An in-depth review of relevant legislation, policy frameworks and initiatives taken by EU institutions, social partners and non-institutional organisations at European level. The review also covers the latest statistics relevant to the topic of work, age, and health in Europe.
- The results from qualitative research — collecting the views of relevant stakeholders (from governments, social partners, universities, non-governmental organisations (NGOs) and businesses) on the topic of ageing, work and OSH — were considered. These were collected through workshops conducted in 10 Member States between March and June 2014 (Austria, Belgium, Denmark, Finland, France, Germany, Greece, the Netherlands, Poland and the United Kingdom), and follow-up interviews with key stakeholders. The objectives of the workshops were to:
 - confirm the findings and interpret the results of the desk research;
 - stimulate discussions between intermediaries and experts in the fields of OSH, employment, public health, education, social security, etc., in order to collect additional information and examples of good practices;
 - exchange views and ideas on what works well and what needs improvement, as well as the drivers, needs and obstacles to promoting safer and healthier work in the context of an ageing workforce.

The results from the qualitative research are integrated here, where they confirm and complement the findings of the desk research, or highlight the different views held by stakeholders on certain issues.

The analysis is based on a process of triangulation, through which specific findings are compared and judged in relation to other sources of information, in order to establish to what extent they can be considered more general and evident. Here, the triangulation comes from the integration of information gathered from the EU and national desk research, and the qualitative research. This process took place in four different steps:

- identifying trends across the collected information and hypotheses based on these observations;
- checking these hypotheses for consistency among different sources of information in order to identify contradictions;
- if necessary, looking for additional data in order to analyse and explain eventual contradictions and/or differences in the findings from the various sources of information;
- confirming hypotheses and formulating answers.

Not all information could be triangulated because of the nature and limitations of each source of information. In particular, some information is available only through the workshops, and this is specified throughout.

The country clusters in [Chapter 4](#) are based on the information included in national reports, as well as additional sources of information at European and international level. Considering the high level of policy activity in the fields of OSH, employment and public health in relation to demographic change and the sustainability of social security systems, new initiatives may have emerged at national level since June 2014. Major new national developments on OSH in the context of an ageing workforce were taken into account at the time of drafting the present analysis report, but it is possible that smaller, ad hoc initiatives have not been considered.

² See EU-OSHA 2016e

A number of examples of policies, strategies, programmes and initiatives are provided in the report to support the analysis. These examples represent the broadest possible range of countries, topics, initiators and stakeholders involved, and target groups.

▪ **Structure of the report**

Chapter 2 of the report presents an overview of the factors that can explain early exit from the labour market in the context of age-related demographic changes in Europe and the response of European countries in terms of pension reforms and increased retirement ages.

Chapter 3 describes some of the concepts that provide a framework for the development of policies related to the extension of working life and identifies the supranational and national factors that affect the development of national policies in Europe. Chapter 4 analyses policy development and the different approaches taken in European countries to address the challenges of an ageing workforce.

Chapter 5 explores projected trends in demographic- and employment-related developments in Europe over the next 50 years and, finally, Chapter 6 provides a number of policy pointers for addressing the opportunities and challenges of a healthy extended working life.

1.3 Definition of an ‘older worker’

Although the report takes a life-course approach to the issue of workforce ageing and related challenges for policy development, it regularly refers to terms such as ‘older workers’ or the ‘older workforce’.

There is no single accepted definition of ‘older workers’/‘older workforce’. At European and international levels, a number of organisations use the boundaries of 55-64 years old to define the category of older workers. In the EU context, this age group was referred to by the Stockholm European Council in 2001 when setting the target of increasing the average EU employment rate for older men and women to 50 % by 2010.

Other organisations using the same age-group definition of older workers include:

- the European Commission — the employment-rate targets for older workers of the Europe 2020 Strategy focus on people aged 55-64 years (EC, 2012c);
- Eurostat — the employment rate of older workers is calculated by dividing the number of persons in employment aged 55-64 years by the total population of the same age group; the indicator is based on the EU Labour Force Survey (Eurostat, 2015a);
- the Organisation for Economic Co-operation and Development (OECD) — OECD statistics define ‘older workers’ as the working population aged between 55 and 64 years;
- the International Labour Organization (ILO) — the ILO’s key indicators of the labour market define ‘older workers’ as those who are 55-64 years old or 65 years and over;
- the American Bureau of Labor Statistics — the Bureau defines ‘older workers’ as workers aged 55 and older.

There is no legal definition of an older worker in most European countries. Only Hungary and Slovenia have adopted a definition in their legislation. In Hungary, an older worker is considered a worker who has exceeded pension age³. The Slovenian Employment Relationships Act defines an older worker as a worker older than 55 years. In other Member States, the eligible age for government or employment agency support, categorisation of workers by statistical institutes, or common practice in research and publications are often taken as informal definitions of an older worker. Across European countries, these informal definitions use different age limits, from 45 years and over in Belgium and Hungary, to 50 years

³ In Hungary, the retirement age for those who were born in 1951 or earlier is 62 years. For those who were born in 1952 or later, the retirement age is 65 years.

and over in Bulgaria, the Czech Republic, France, Italy, Latvia, Slovakia, Switzerland and the United Kingdom, and 55 years and over in Finland, Greece and Portugal.

Throughout the report, the term 'older workers' applies to workers of both genders of 55 years of age and over, in line with the definitions set out above. However, data collection was not restricted to policies applying to only workers aged 55 and above, as the general scope of this project relates to policies that address the challenges of an ageing workforce.

Finally, throughout the report, the term 'demographic change' has been used to refer to changes in the age structure of the population⁴.

1.4 Limitations of the study

This report analyses policy approaches and frameworks concerning the ageing of the workforce and the extension of working life. Although a wide range of sources were consulted during this study, the methods, time and data used limit the extent to which the findings can be considered definitive.

Firstly, the key resources for this report were national country inventories on strategies, policies, programmes and other initiatives dealing with the challenges of an ageing workforce, compiled by national experts in safety and health at work. In addition, although the national reports present data and describe factual information, a level of subjectivity is inevitable. Although EU-OSHA's national focal points had the opportunity to review the reports, they should nevertheless be considered to provide an expert perspective rather than an evidence-based analysis. The description of the programmes and initiatives constitutes an overview of key activities implemented at the time the reports were drafted (between September 2013 and June 2014).

Secondly, there are several limitations to the quantitative data used in the report. Apart from a few exceptions, data were used only if they were available across the EU-28 and EFTA countries, and if they had been collected and processed in a harmonised way. Most of the quantitative data therefore are from surveys carried out by Eurostat and statistics from Eurostat (such as the EU Labour Force Survey, the Statistics on Social Protection Expenditures, health statistics and others); the European Working Conditions Survey (EWCS) carried out by the European Foundation for the Improvement of Living and Working Conditions (Eurofound, 2010); the OECD (statistics on retirement ages); and the Survey on Health, Ageing and Retirement in Europe (SHARE), which was not carried out in all EU countries (SHARE, 2007). Although the sources followed high standards to allow for cross-country comparisons, they nevertheless have limitations of scope and data for certain countries and years.

⁴ Demographic change refers to shifts in the size, composition and structure of human populations, principally as a result of evolving trends in birth rates, death rates, life expectancy and migration. Broad changes, such as the rate of population ageing, influence all aspects of human activity and organisation, including economic, political, social and cultural changes.

2 Setting the scene: the challenges of demographic change

2.1 Demographic change in Europe

2.1.1 An ageing population

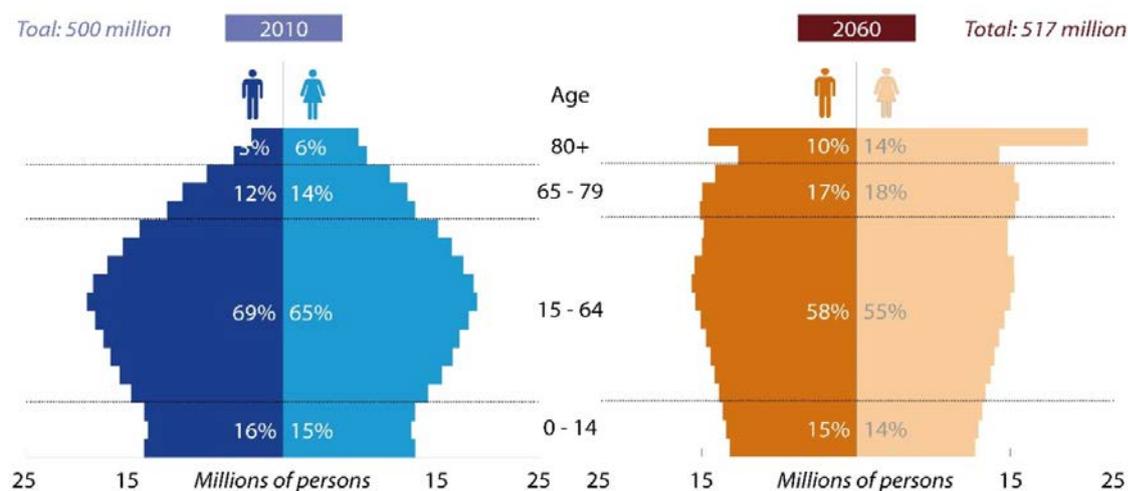
The European population has been ageing in recent decades, and this trend is predicted to continue and intensify: because of the dynamics in fertility, life expectancy and migration, the age structure of the EU population will change significantly in the coming decades. By 2040, the proportion of people aged 65 years or over is expected to account for nearly 27 % of the total EU-28 population (compared with 18 % in 2013) (Eurostat, 2014g).

The total fertility rates are projected to rise for the EU as a whole, although are expected to remain below the natural replacement rate. At the same time, the projections suggest that there will be large and sustained increases in life expectancy at birth (EC, 2015c).

In addition to mortality and fertility rates, immigration to the EU from third countries also influences population ageing in the EU. Immigrants into EU-28 Member States are, on average, younger than the population already resident in their destination country. On 1 January 2014, the median age of the EU-28 population was 42 years, whereas the median age of immigrants into the EU-28 in 2013 was 28 years (EC, 2015b). In addition, migration is also occurring within the EU, influencing individual countries' demographic trends. Population projection scenarios show that the median age in a number of EU Member States, including Austria, Belgium, Italy and Luxembourg, would be higher if there was no migration (neither immigration nor emigration) (Eurostat, 2014h). For other countries, such as Bulgaria and Ireland, the opposite is true.

The population pyramids presented in Figure 2-1 below show the structure of the population by sex and by five-year age groups in 2014 and as predicted for 2060. Visible in the development of the age structure of the EU population is the increasing proportion of older people, coupled with a declining proportion of working-age people in the total population. Since the proportion of older people is projected to increase between 2010 and 2060, the top of the 2060 age pyramid is broader than the top of the 2014 pyramid. Primarily because of gains in longevity, this is known as 'ageing at the top' of the population pyramid⁵.

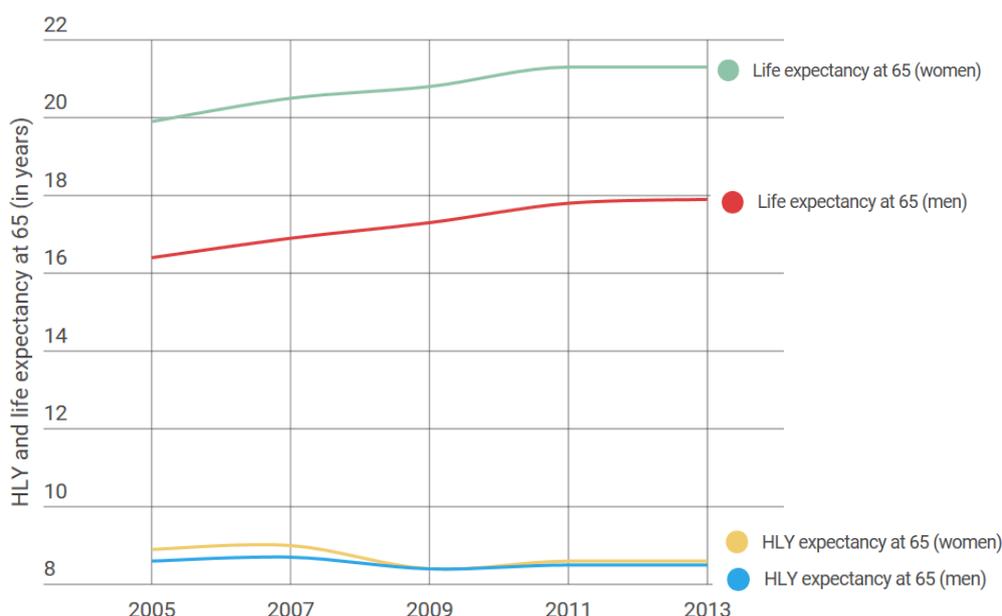
Figure 2-1, Population pyramid EU-27 by age and sex, 2010 and 2060 (EPRS, 2013)



⁵ The age pyramids of all European countries in 2010 and projections for 2050 are presented in [Annex 2](#).

Although there has been a considerable increase in life expectancy in recent decades, these extra years of life are not necessarily spent in good health. Since 2005, 'healthy life years' (HLY) expectancy has, on average, remained stable for men in the EU and has slightly decreased for women⁶ (Eurostat, 2015b). In 2013, people aged 65 years could expect to spend less than half of their remaining lives in good health — 47 % for men and only 40 % for women.

Figure 2-2, HLY and life expectancy at the age of 65 years, men and women, EU, 2005-2013 (Eurostat, 2015c)



Considerable differences can be observed among countries concerning HLY expectancy at the age of 65 years. In Slovakia, people of 65 years of age can expect to spend around 20 % of their remaining life years in good health (lowest in the EU), while in Sweden, this figure approaches 75 % (for further country differences, see [Annex 2](#)).

2.1.2 A shrinking labour force

Although the population over 65 years of age has been steadily growing, the working-age population (i.e. 15-64 year olds) peaked in 2010, with 333 million Europeans of working age, and has since started to shrink. This declining trend is expected to continue over the coming 50 years (Fotakis & Peschner, 2015). The most optimistic scenario envisages a reduced gap in the labour participation of men and women and higher educational levels of the labour force but, even taking these positive trends into account, a decrease in the European labour force in the coming decades is very likely (Fotakis & Peschner, 2015).

Overall, based on a normal migration scenario, the working-age population (15-64 years) will have decreased by 9 percentage points (pp) between 1990 and 2040, (Figure 2-3) (Eurostat, 2015e and 2014g). Consequently, the old-age dependency ratio (OADR) will increase (Figure 2-4).

⁶ HLY expectancy (or 'disability-free expectancy') indicates the number of remaining years that a person is expected to live without any severe or moderate health problems. It is part of the core set of indicators included in the Europe 2020 Strategy.

Figure 2-3, Changes in population age structure, 1990-2040

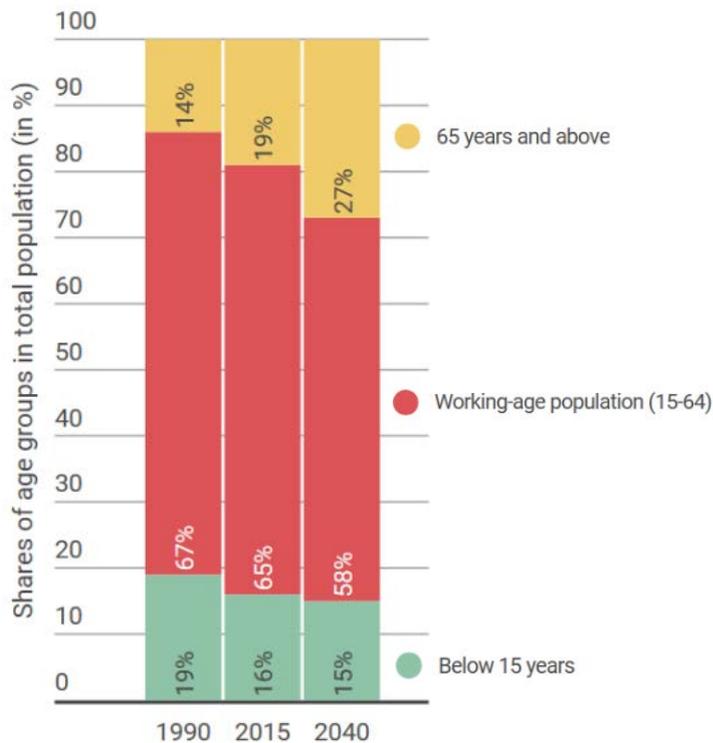
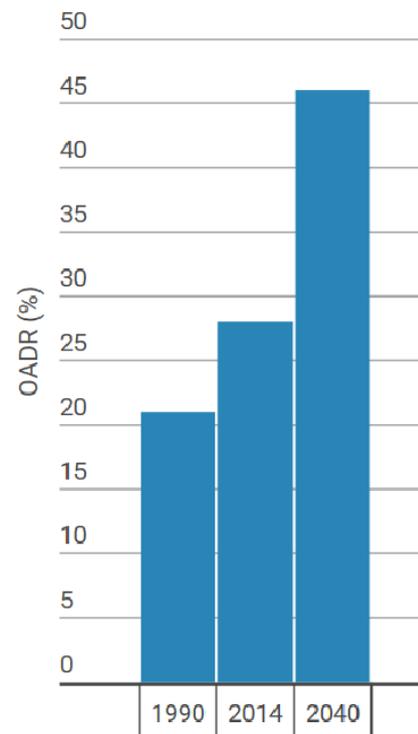


Figure 2-4, Changes in OADR, 1990-2040



Source: Eurostat, 2015e; Eurostat, 2014g; Eurostat, 2014e; Eurostat, 2014d; Milieu own calculations.
* Figures from 1990 are for EU-27, figures from 2014 onwards are for EU-28.

2.1.3 An ageing workforce

In addition to shrinking, the working-age population (15-64) is ageing. Its age composition has changed in recent decades, with the proportion of 55-64 year olds increasing dramatically between 2000 and 2015 (from 16 % to 20 %). Thus the ageing of the workforce is a consequence of both the ageing of the overall population and an increase in the employment rates of 55-64 year olds (see section 2.2).

The projections suggest that the European workforce will continue ageing (Figure 2-5 and Figure 2-6). By 2040, the proportion of 15-54 year olds will have decreased, but the proportion of the 'older' working-age population (i.e. 55-64 year olds) will rise to 22 %.

Figure 2-5, Proportion of broad age-groups in the total working age population, 1990, 2013 and 2040, EU-28

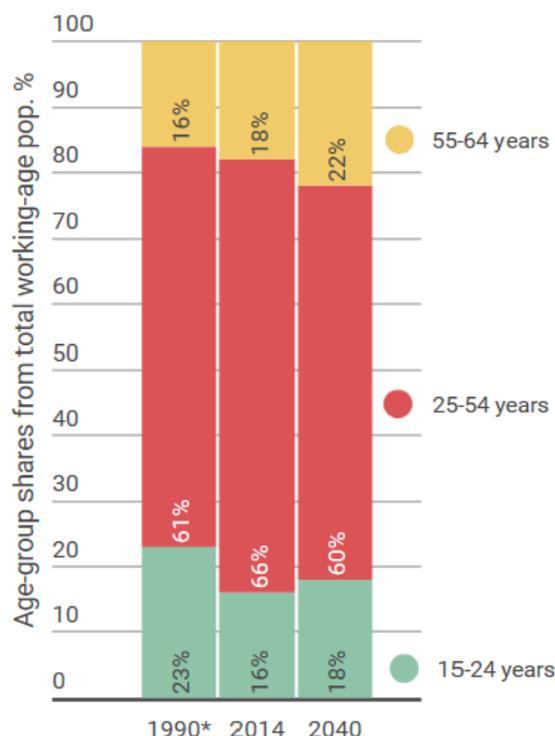
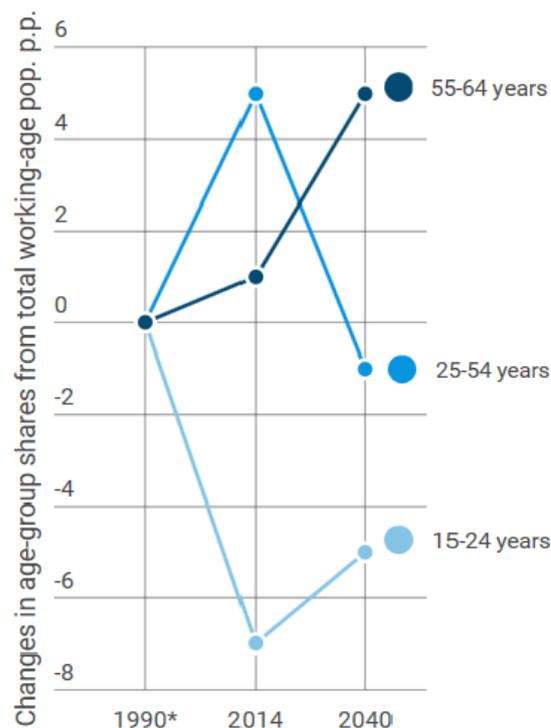


Figure 2-6, Changes in the age-group shares from total working-age population between 1990 and 2040, EU-28



Source: Eurostat, 2015f. * For EU-27.

2.1.4 Economic challenges of population ageing

The long-term budgetary projections in *The 2015 Ageing Report* show that population ageing poses a challenge for public finances in the EU (EC, 2015c). The impact of ageing on public spending is projected to be high in most Member States, with effects likely to become apparent during the next decade. The projected increase in strictly public age-related expenditure (pensions, health care, long-term care and education) is almost 1.8 pp of gross domestic product (GDP) between 2013 and 2060, mostly driven by spending on health care and long-term care. There are however large differences across EU Member States, reflecting primarily the diversity in public pension arrangements, their degree of maturity and the effects of the pension reforms enacted so far.

According to the projections:

- A fall in total age-related expenditure relative to GDP is projected in eight Member States (Croatia, Cyprus, Denmark, France, Greece, Italy, Latvia and Spain). In all of these countries, a decline in the pension-to-GDP ratio is projected in the long term (exceeding 3 pp of GDP in Croatia, Denmark and Latvia).
- For another set of countries (Bulgaria, Estonia, Hungary, Ireland, Lithuania, Poland, Portugal, Romania, Sweden and the United Kingdom), the age-related expenditure ratio is expected to rise moderately (by up to 2.5 pp of GDP).
- The age-related expenditure ratio increase is projected to be the largest in the third group of Member States (Austria, Belgium, the Czech Republic, Finland, Germany, Luxembourg, Malta, the Netherlands, Slovakia and Slovenia), rising by between 2.5 pp and 6.8 pp of GDP and with pension expenditure increasing in all of these countries (EC, 2015c).

2.2 The main policy response: pension reforms

2.2.1 EU policy drivers

The scale of the challenge that Europe faces in terms of demographic change was first emphasised by the Stockholm European Council (2001), which introduced concrete objectives to increase the labour participation of older workers. The Council established the 'Stockholm target' of increasing the rate of employment among 55-64 year olds to 50 % by 2010. One year later, the Barcelona European Council set a target to progressively increase, by about five years, the average age at which people stop working by 2010 (known as 'the Barcelona target'). These targets complement each other, as both require increased labour-market participation by older workers.

The 2006 Commission report, *The Demographic Future of Europe — from challenge to opportunity*, outlined a direction for Europe to meet its demographic challenges over the coming years (EC, 2006). It called for a demographic renewal by promoting more jobs, longer working lives and a better work-life balance. This was followed by a 2007 Council resolution that called upon Member States to promote active age management, improve well-being at work and update the work skills of ageing personnel (EC, 2007c).

The 2008 financial crisis and ensuing economic crisis severely affected employment rates in many countries, changing policy priorities. The Commission's *2009 Ageing Report* presented a first take on Europe's ability to tackle the challenge of ageing, given these economic developments, and it emphasised the need for sustainable, age-related spending (EC, 2009a). The document was accompanied by an economic and budgetary projection up to 2060 for the 27 EU Member States, including expenditure projections for pensions, health care, long-term care, education and unemployment transfers, further highlighting the need to implement structural reforms to address the challenges of an ageing population.

The Europe 2020 Strategy 'for smart, sustainable and inclusive growth', adopted by the EU in 2010, identifies population ageing as one of the major challenges facing the EU and states that Europe needs to make full use of its labour potential to face the associated challenges and rising global competition (EC, 2014a). The achievement of the employment target it proposes, that is, for 75 % of the population aged 20-64 to be employed by the year 2020, will require a substantial increase in the employment rate of workers aged 55-64 years. As of January 2016, the employment rate of the population aged 20-64 years stood at 69.2 %, demonstrating the challenge ahead if the 2020 target is to be achieved (Eurostat, 2016a).

In the current context of economic hardship, the objective of increasing the participation of older workers in the labour market has been reinforced by the EU 2020 Strategy and by subsequent policy developments aimed at increasing the labour-force participation of all workers, but in particular more vulnerable categories, through more flexible employment frameworks.

2.2.2 Pension reforms at national level

In response to the predicted socio-economic challenges brought about by population ageing and the EU push for pension reforms, European governments have been reforming their social-protection systems in order to ensure the sustainability of public finances.

Pension reforms have been taking place in Europe for more than 15 years. In some countries, such as Hungary and Sweden, the first wave of reforms occurred at the end of the 1990s. Since then, new rules have been continually adopted throughout Europe and reforms are still expected in the years to come. Overall, the most common policy response has been to adopt measures restricting the entitlement to pension benefits, primarily through an increase of the general statutory age limit and of the required contribution years — both for full and reduced pensions (see [Annex 2](#) for an overview of statutory retirement ages in European countries). In view of future trends, some countries, such as Cyprus, Norway, Portugal, Spain and Sweden, have also explicitly provided for automatic adjustments of the

pension age in line with increasing average life expectancy (EC, 2014a). An interesting example is the UK, which has phased out a default retirement age and introduced a flexible system according to which people can work until whatever age they want to. Businesses can set their own compulsory retirement age but are required to clearly justify it to avoid discrimination, necessitating an understanding of the risks and mitigation measures in specific job requirements.

Other measures that have been introduced are linked to limitations on early retirement. Some countries have set stricter criteria or additional conditions, such as:

- increasing the eligible age limit or the number of years of contributions, as in Austria, Belgium, Bulgaria, Croatia, the Czech Republic, Denmark, Finland, France, Germany, Hungary, Italy, Lithuania, Poland and Romania;
- limiting the potential beneficiaries to workers exposed to strenuous working conditions, or with a medical condition, as in Austria, Bulgaria, France, Germany, Portugal, Spain and Sweden.

Other countries have reduced the level of early pension benefits to make them less financially attractive. A number of countries have also introduced financial incentives, both negative and positive:

- negative incentives: reducing the value of early pensions, making early retirement less financially attractive (Latvia, the Netherlands and Switzerland);
- positive incentives: increasing the value of pensions for people working beyond retirement age (Estonia, Denmark, the UK and Portugal), bonus in pension rights for retired people who work in parallel (Cyprus, Norway and Romania);
- mixed systems of bonuses and penalties (Finland, France and Luxembourg).

There is no possibility for receiving an old-age state pension at an early age in Ireland or the UK.

In some countries, such as Austria, Finland, the Netherlands and Norway, reforms of early-retirement provisions have been complemented by reforms of other benefit schemes, in particular unemployment and disability. These changes were prompted by the large number of transfers that took place between the different schemes when one was reformed and the others were not, suggesting that disability pensions had often been used as alternative pathways to early retirement. The impact of such reforms on the employment rate of older workers is mixed, with more positive results in countries that have implemented effective rehabilitation and return-to-work support mechanisms to counter the effects of eliminating disability pensions (e.g. Finland) (Sonnet *et al.*, 2014).

2.2.3 Impact of reforms on employment rates and effective retirement age

Efforts to increase retirement age and keep older workers in the workforce have had mixed results. Although the employment of older workers has increased, the gap between official and effective retirement age remains quite significant.

Effective retirement age

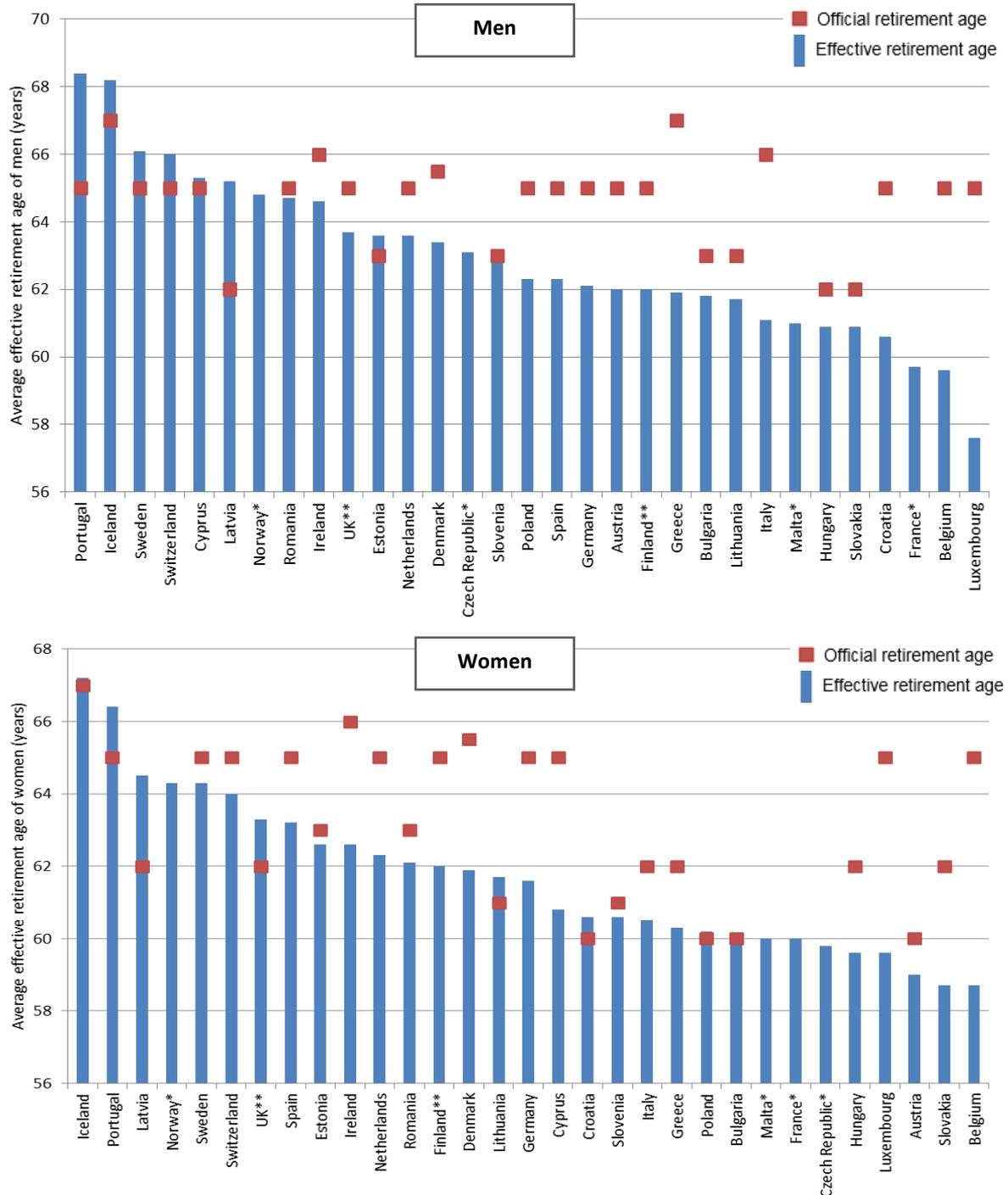
Pension reforms and economic incentives have led to an increase in the effective retirement age⁷. In 2011, on average, men in Europe retired at the age of 62.3 years and women at the age of 60.9 years (OECD, 2015). This is still far below the effective retirement ages of 68 years for men and 66 years for women in 1970 and the 'Barcelona target' of increasing effective retirement age by five years by 2010.

In most European countries, the effective retirement age is lower than the official or statutory retirement age, for both men and women (

⁷ The effective age of retirement is the average effective age at which older workers withdraw from the labour force.

Figure 2-7) (OECD, 2015a). Within the context of pension reforms, this ongoing gap between official and effective retirement ages represents a major challenge for policy-makers.

Figure 2-7, Effective and official retirement ages in European countries in 2012



Source: OECD, 2015a, and national sources for official retirement ages.

*The official retirement age has not been included for Czech Republic, France, Malta and Norway, as different rules apply to different age cohorts

**For the purpose of the graph, the official retirement age of the UK and FI is considered to be the age at which people can draw their full old-age pension benefits.

Countries that show particularly high early retirement rates include Luxembourg and Belgium, with more than five years of difference between official and effective retirement ages for both genders. Greece, Italy and Croatia also show high levels of early retirement (especially for men). In these countries, the rather drastic (and non-incremental) increase in the official retirement age for men, as part of the austerity measures for fiscal consolidation, can partly explain this gap.

Research shows that levels of income and pension benefits have an effect on the decision to retire early (Aranki & Macchiarelli, 2013). Differences in retirement behaviours are apparent not only between countries but also within countries, between different sectors and occupations, and between people of different qualification levels. In Finland, studies have shown that workers in manufacturing and construction tend to retire early (Seitsamo *et al.*, 2015). Furthermore, Swedish researchers have shown that men in elementary occupations are likely to retire 4.82 years before men in highly skilled occupations (such as professionals)⁸. For women, the difference is even more striking, as this difference increases to 5.55 years (Albin *et al.*, 2015).

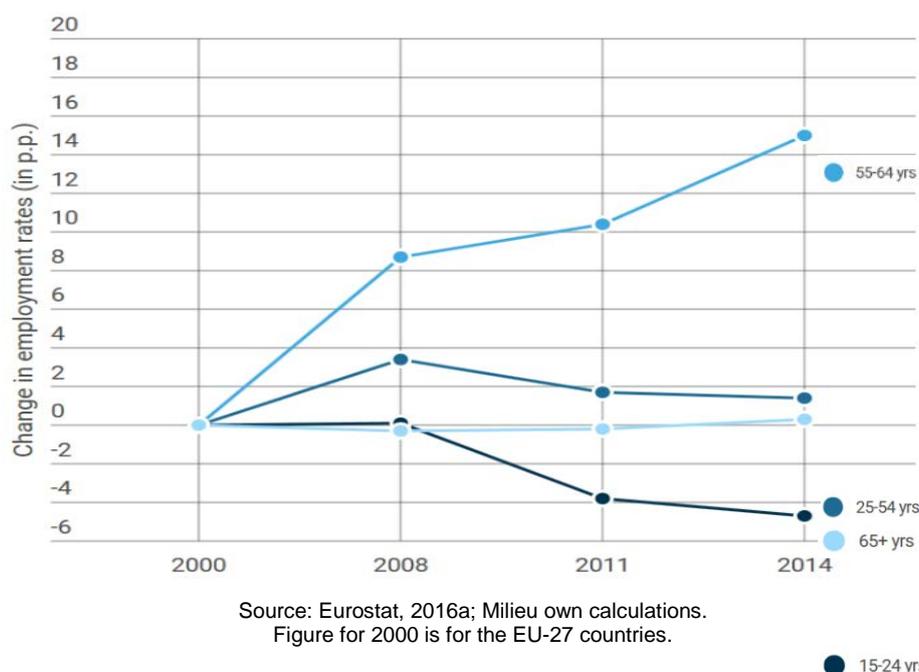
A cross-national study by the Swiss National Bank found that social-security variables (age of eligibility, age of early retirement allowances and replacement benefits) and a country's occupational composition together may explain up to 75 % of the variation among OECD countries with regard to effective retirement ages (Sauré & Zoabi, 2011).

Employment rates

The employment rate among people aged 55-64 years in the EU increased by 15 pp between 2000 and 2014, at a faster pace than other age groups. In 2014, it reached 51.8 % on average in the EU-28.

However, country differences are apparent. Employment rates of people aged 55-64 years were particularly low in 2014 in Croatia, Greece, Hungary, Malta and Slovenia — between 34 and 42 %. Employment rates among the 55- to 64-year-old population were highest (above 70 %) in Iceland, Norway, Sweden and Switzerland (for further country differences, see [Annex 2](#)).

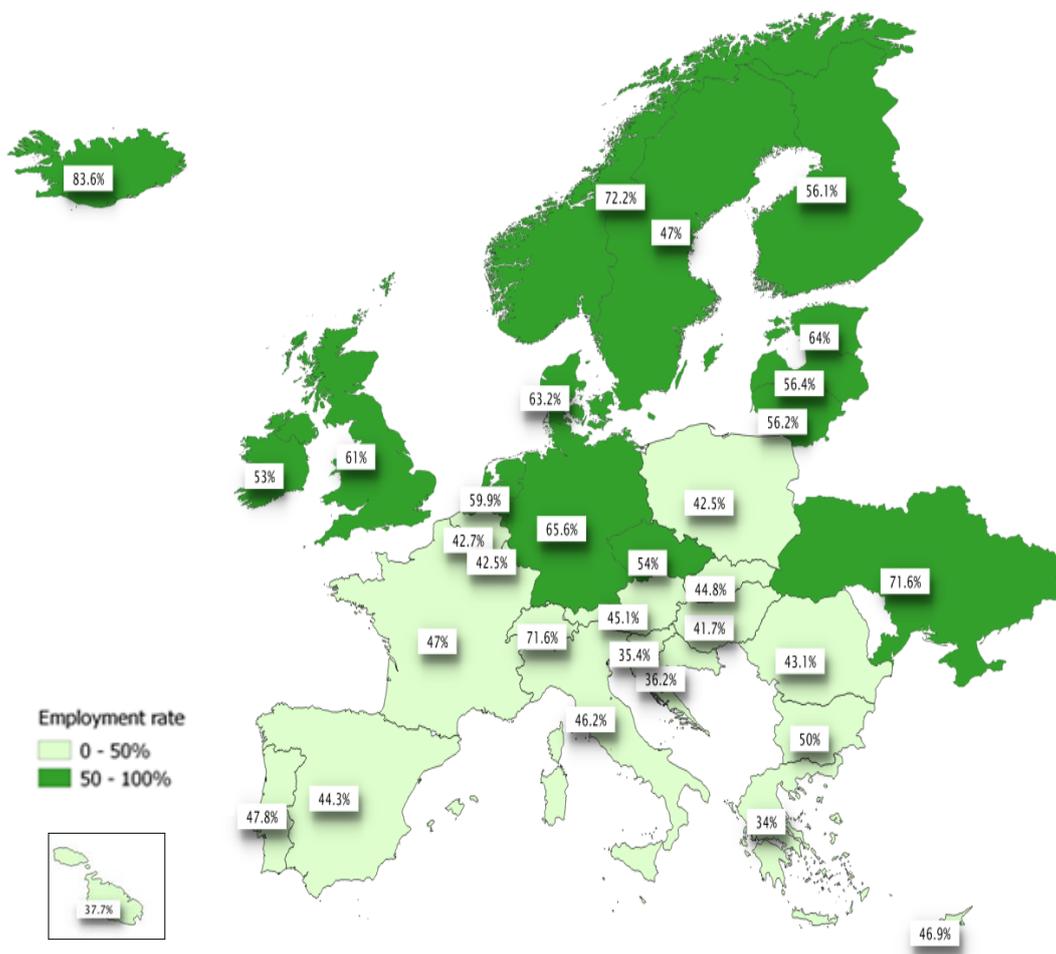
Figure 2-8, Change in employment rate over the 2000-2014 period, EU-28, by age group



⁸ Defined by the ILO as 'simple and routine tasks which mainly require the use of hand-held tools and often some physical effort'.

The general increase in the employment rate among older people over the past 10 years hides a number of gender and social inequalities. Firstly, a notable difference still existed in 2014 between the employment rate of older women (45.2 %) and that of older men (58.9 %). Barriers to older women's employment range from different statutory retirement ages (still in place in nine countries) to a lack of institutional support for child and elderly care, and poor gender management in companies⁹. In 2011, the gender gap in the duration of working lives was still significant, with women remaining in the labour market for, on average, 5.5 years less than men (31.9 years compared with 37.4 years, respectively) in the EU-27 (EC, 2015a). In addition, although the older age groups fared better than any other age groups during the economic crisis, employment rates have fallen for certain sub-groups, such as men without higher education (Eurofound, 2014b).

Figure 2-9, Employment rates (%) among the 55- to 64-year-old age group in 2014 in the EU-28 and EFTA countries



Source: Eurostat, Employment rate (55 to 64 years), 2015 (Eurostat, 2016a).

⁹ A more detailed analysis of age, gender and OSH issues is provided in the 'State-of-the-art review on gender, older women and occupational safety and health' produced as part of this project.

2.3 Reasons for early exit from work

Pension reforms and policies focused on increasing economic incentives to work have not been fully effective at increasing the effective retirement age, with an ongoing gap between the official and actual retirement ages in Europe. This can be explained by a number of factors related to the workplace (e.g. working conditions, work organisation) or the individual (e.g. health, motivation, financial situation). The challenge for policy-makers is to take into account the multiplicity of and interlinkages between these different factors.

2.3.1 The workplace level

There are a number of workplace factors which can explain why people leave the labour market prematurely, such as working conditions, how work is organised, how sickness absence is managed, and attitudes and behaviours within the workplace.

Working conditions

Adapting working conditions to individual abilities is a key element to any policy that aims to keep workers healthy throughout an extended working life. In 2012, 57 % of respondents to the Eurobarometer on Active Ageing considered that workplaces that are ill adapted to the needs of older workers is an important barrier to motivating people to work longer (EC, 2012f).

The Survey on Health, Ageing and Retirement in Europe (SHARE) examines the different ways in which people aged 50 years and older live¹⁰ (SHARE, 2007). A cross-national econometric study exploring the links between working conditions, health and retirement, based on data from SHARE, was carried out in 2007. The results indicated that the accumulation of physical and psychosocial constraints at work has a negative influence on health and is also associated with early retirement due to ill health. This result should be seen in light of differences related to exposure duration, type of occupation and education levels¹¹.

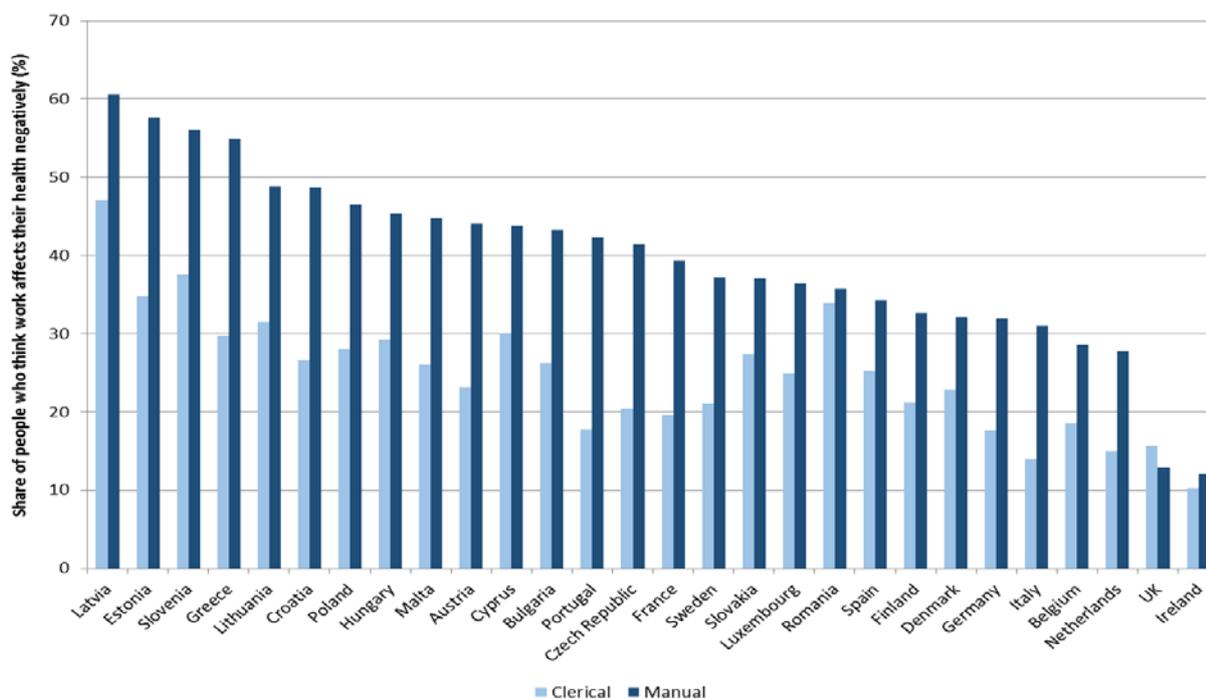
Further empirical evidence shows that there are significant links between psychosocial constraints at work (lack of control over one's job or work task, lack of recognition, unjust salary, no perspective on personal progress, lack of support at work and job insecurity) and workers' subjective health status (subjective health status in general and risk of depression) (Debrand & Lengagne, 2007). Studies conducted in Austria and Germany show that psychological illnesses have become an increasingly important factor in early retirement. For example, according to a study reported by the Austrian Labour Chamber in 2011, 32 % of all new invalidity and disability pensions were due to mental health problems (Arbeiterkammer, 2011). The German Federal Chamber of Psychotherapists, on the basis of data from the German Pension Insurance, concluded that 42 % of early retirements in 2012 were caused by psychological illnesses (BPtK, 2013).

The risk of disability retirement also appears to be significantly higher for people that carry out heavy physical work (Pohrt & Hasselhorn, 2015). The 2010 EWCS asked workers if their work affected their health negatively. The proportion of workers who said 'yes' was higher among those in manual occupations than those in clerical occupations (Eurofound, 2010). This trend was observed across all European countries, apart from the UK (Figure 2-10). The highest proportions of older workers who think that work affects their health negatively can be found among workers in manual building trades (over 50 %), operators and assembly workers and vehicle and mobile-plant drivers (over 40 %), other manual-industry and craft-trades workers (around 35 %), and health-associated professionals (just over 30 %) (Vendramin & Valenduc, 2012).

¹⁰ SHARE is a large, cross-national survey that was conducted in 20 European countries (plus Israel). For further information, see: <http://www.share-project.org/home0/overview.html>

¹¹ Many of the studies analysing the linkage between working conditions, health and early retirement are based on the Survey of Health, Ageing and Retirement in Europe (SHARE), a multidisciplinary and cross-national database on health, socio-economic status and social and family networks of more than 85,000 individuals from 20 European countries aged 50 and above.

Figure 2-10, Proportion of people (all age groups) who reported that their work negatively affects their health in 2010, by occupational status



Source: Eurofound, 2010

Work organisation

Work organisation and working time also influence decisions on whether or not to leave the labour market. Working shifts and non-standard hours, including overtime, have been associated with a greater impact on older workers than on younger workers, particularly with regard to sleep disturbance and accumulated fatigue. It has also been suggested that frequent changes in work also have negative consequences on the health of older workers.

Evidence shows that workers are more likely to stay in the labour market if they have access to flexible working arrangements, such as working from home or part-time work. As explained by the Work Foundation, 'flexible working policies are found to bring several benefits for workers; including a positive perception of work, home life and personal finances, enhanced self-reported goodwill and an increased commitment in the workplace' (Taskila *et al.*, 2015).

This is confirmed by surveys. In 2006, when asked what working conditions would make them stay at work longer, 18 % of employed persons (of all ages) answered 'more flexible working time arrangements', 12 % answered that a 'healthier and safer workplace' was important and 10.2 % indicated that 'skills training' would make them stay at work longer (Eurostat, 2014b). Respondents (72 %) to the 2012 Eurobarometer on Active Ageing perceived the lack of opportunities available to retire gradually by reducing working hours to be the most important reason preventing those aged 55 years or over from working, followed by the exclusion from training in the workplace (71 %) and negative perceptions by employers. A total of 57 % of respondents considered that workplaces that are ill adapted to the needs of older workers is an important barrier to motivating people to work longer (EC, 2012f).

Sickness absence and return to work

The proportion of employed people who reported having a long-standing illness or health problem increased from 19.6 % in 2007 to 21 % in 2013 in the EU-27 (Eurostat, 2015d). In addition, in 2013,

14.8 % of employed people in the EU reported some or severe long-standing limitations to their usual activities because of a health problem (compared with 12.8 % in 2007)¹² (Eurostat, 2015k). Thus, a substantial minority of the employed population in Europe is either on sickness absence or has to deal with an acute or chronic health problem while remaining at work.

The risk of developing chronic or long-standing health problems during employment, leading to long-term sickness absence or early exit from the labour market, increases with an ageing workforce. According to EU Statistics on Income and Living Conditions data (EU-SILC), in 2013, 14.6 % of younger workers (16-44 year olds) in the EU-28 reported suffering from a long-standing illness or health problem compared with 33.4 % of the employed population aged 55-64 years, and 42.2 % of employees aged 65 years and over (for further age breakdowns and country differences, see [Annex 2](#)) (Eurostat, 2015d).

Inappropriate or non-existent return-to-work policies in companies can increase the incidence of long-term sickness absence, work disability and even early retirement. In addition, the lack of procedures to manage chronic ill health at work can also lead to 'presenteeism', which occurs when 'workers go to work when ill and are unable to perform effectively due to their ill health' (Gervais, 2013). Studies have estimated that presenteeism can be more costly to organisations than short-term sickness absence and that it actually increases the likelihood of going on long-term sickness absence. Studies considering the factors associated with presenteeism have shown that older employees are more likely to attend work while sick (Hansen & Andersen, 2003).

However, there is growing evidence that work can help people to recover from sickness or deal with physical or mental impairment. Being able to continue working helps to build confidence and self-esteem (Taskila *et al.*, 2013; MacMillan Cancer Support, 2013). There is a broad consensus across disciplines that returning to work after, long-term sickness absence or even during recovery, generally has a positive effect on health and well-being (Waddell & Burton, 2006). National studies have shown that when appropriate adjustments are made to their working conditions, many workers with chronic diseases do not encounter any restrictions in their ability to work and are able to return to work after a period of sickness absence (Hansen & Andersen, 2003). In 2012, 28 % of economically inactive people aged 50-69 years who received a pension (including old-age and disability pensions) reported that they would have preferred to remain in employment for longer (Eurostat, 2014a).

Attitudes towards older workers

One of the main barriers to employment faced by people in the labour market over the age of 50 years is age discrimination in recruitment practices. Research carried out at national level shows that, in general, employers are less likely to hire older people than younger people, and older workers are less likely to be re-employed than younger workers when they lose their jobs (Hasselhorn & Apt, 2015). Although there are a number of limitations associated with these broad findings (e.g. differences between countries, sectors, company profiles), it shows that employers' attitudes and behaviours have a strong influence on older workers' ability and motivation to remain active (Mulders & Wadensjö, 2015).

During the fieldwork carried out in the course of the project, the topic of age discrimination was discussed at length. In the UK, experts from TAEN (The Age and Employment Network) identified that there is still a strong bias in companies' recruitment policies in the UK. Although companies retain older workers who have been part of a company for a long time, they do not recruit older workers. Age discrimination is regarded by European workers as the most common discrimination in recruitment practices in the EU, with 56 % of respondents to the 2015 Eurobarometer on Discrimination believing that job applicants aged 55 and over are disadvantaged (compared with 54 % in 2012) (EC, 2015b).

In addition, managers and colleagues attitudes and behaviours towards older workers can have an influence on a worker's decision to leave work. Various prejudices and misconceptions exist regarding age and a person's ability to work, such as the general perception that workers aged 55 and over are more experienced and reliable than younger workers, but less open to new ideas (EC, 2012f). Similar results have been found in a number of national surveys. In the Netherlands, for instance, surveys

¹² National data have been obtained by adding up persons reporting 'some' and 'severe' limitations. Last updated 8 May 2015.

carried out in 2010 among employers and workers have shown that both groups consider workers over the age of 50 to have a comparative advantage when it comes to ‘soft skills’ (e.g. reliability and social skills) but a disadvantage in comparison with younger workers with regard to ‘hard skills’ (e.g. physical and mental capacities and training abilities) (OECD, 2014).

These preconceived ideas create negative stereotypes in the workplace and can lead to direct and indirect discrimination against older people. Age discrimination at the workplace can be an important barrier to a worker’s career progression; for example, employers commonly neglect annual appraisals to discuss training objectives and career aspirations with workers over the age of 60 years (Lewis Silkin LLP, 2013). In addition, with an increased risk of developing a disability, older people can be faced with further discrimination related to such disabilities, e.g. workplaces that are not suitably adapted. The role of managers, supervisors and foremen in a worker’s decision to leave or stay at work is critical, as they are often the ones that make decisions on workplace adjustments, working time issues, training, etc.

2.3.2 The individual level

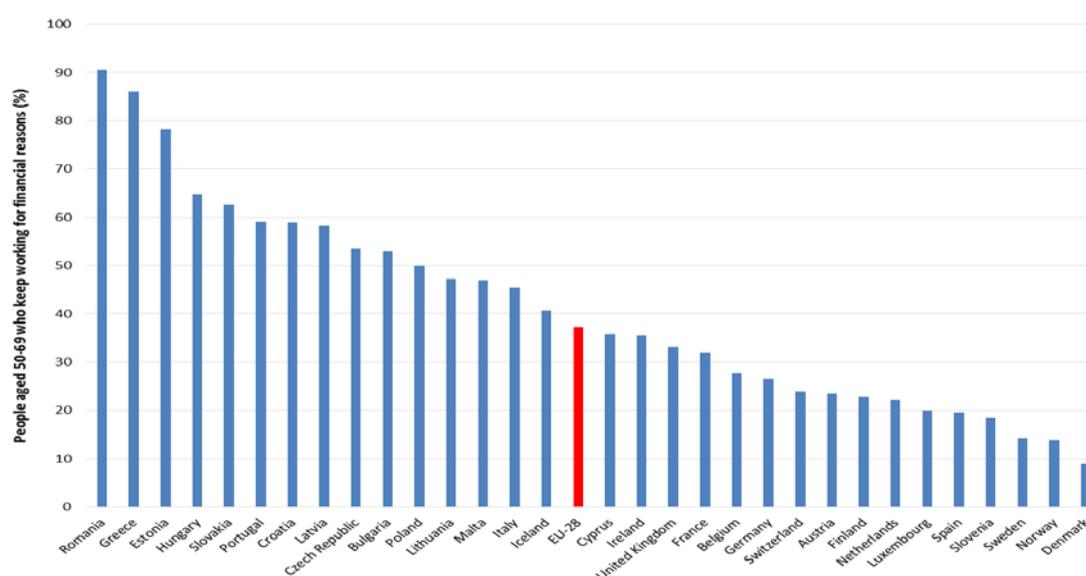
From an individual perspective, a number of factors influence a person’s decision to stay or leave the labour market, from financial motivations to health and skills. The challenge for policy-makers is to take into account the multiplicity and interlinkages between these different factors.

Financial motivations

In Europe, eligibility for a pension remains the main factor that influences the decision of an individual to stop working. In 2012, 37 % of pensioners aged 50 to 69 years reported this as their reason for quitting working, while smaller proportions reported other factors (such as health, financial arrangements, losing a job) as the main reason (for country differences, see [Annex 2](#)) (Eurostat, 2014c). The levels of income and pension benefits received were found to have an effect on the decision to retire early (Aranki & Macchiarelli, 2013).

The main factors that influence the decision to keep working after reaching the official retirement age are also mostly of an economic nature. Across Europe in 2012, 37.3 % of people who received a pension but continued working did so in order to provide sufficient personal or household income (Figure 2-11).

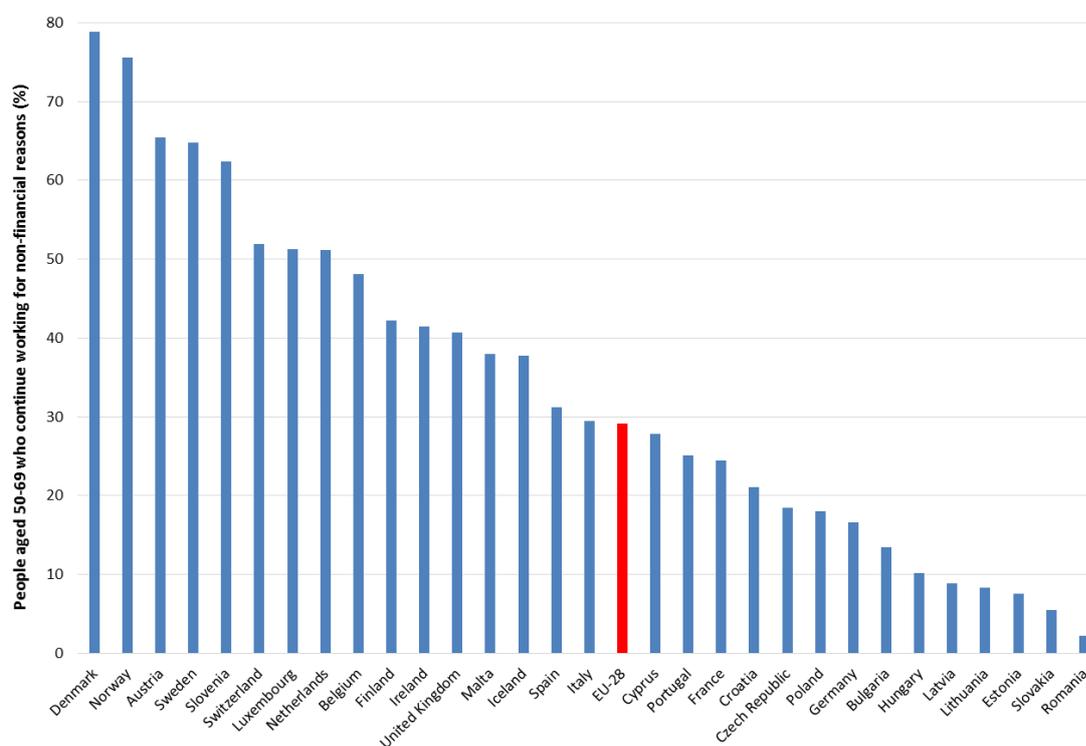
Figure 2-11, People aged 50-69 years who receive a pension and who continue working to provide sufficient personal/household income, 2012



Source: Eurostat, 2014b

On the other hand, in a number of countries, people stay at work beyond retirement age mainly for non-financial reasons, such as work satisfaction, flexible working arrangements, good opportunities to update skills, a healthy and safe workplace and appreciation at work (Figure 2-12).

Figure 2-12, People aged 50-69 years who receive a pension and who continue working because of non-financial reasons, 2012



Source: Eurostat, 2014b. No data are available for Greece.

The graphs shown in Figure 2-11 and Figure 2-12 illustrate the major inequalities among European countries with regard to the influence of financial factors on retirement behaviour. In countries with lower GDP per capita and/or lower earnings/replacement rates (i.e. level of old-age pension benefits in comparison to pre-retirement earnings), workers are more likely to remain in work until retirement age or later, in order to receive their full pension benefits. Such retention of older workers does not, however, demonstrate a national commitment to sustainable work.

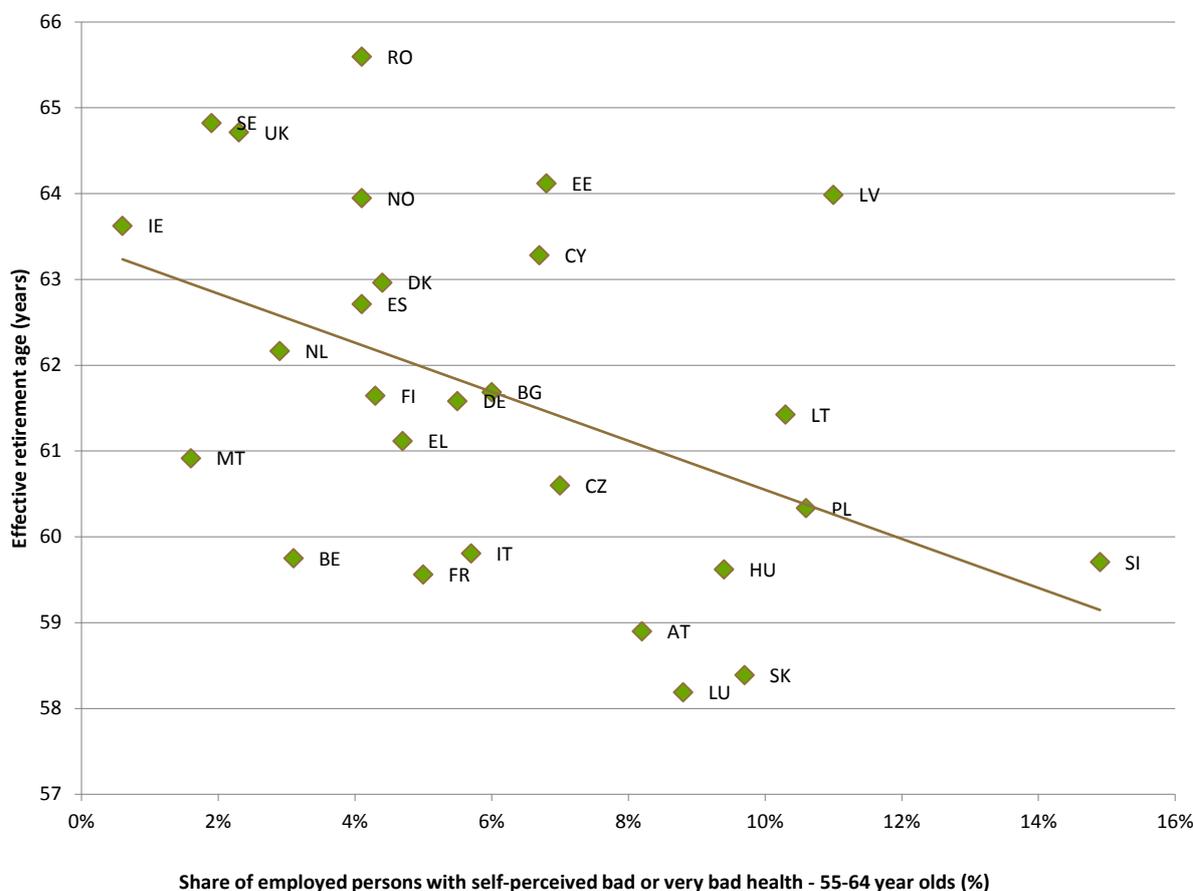
Health

A study by the European Central Bank (ECB) found that persons who have a bad health status are 2.4-times more likely to retire early than those in (self-perceived) good health (Aranki & Macchiarelli, 2013). In addition, it was also found that if people wish to retire early because of a health problem, financial incentives are not sufficient to entice them to remain in the labour market.

A negative correlation can be observed between the self-perceived health status of employed persons aged 55-64 years in European countries and their effective age of retirement (Figure 2-13): a poorer health status tends to correspond to a lower retirement age¹³.

¹³ Data for Portugal have been excluded as they are outliers: the effective retirement age is relatively high, yet self-perceived health status is low.

Figure 2-13, Correlation between perceived health status and effective retirement age in the EU and EFTA countries, 2010



Sources: Eurostat, 2015g; OECD, 2010.

Note: the effective retirement age used is an average of men and women's effective retirement age.

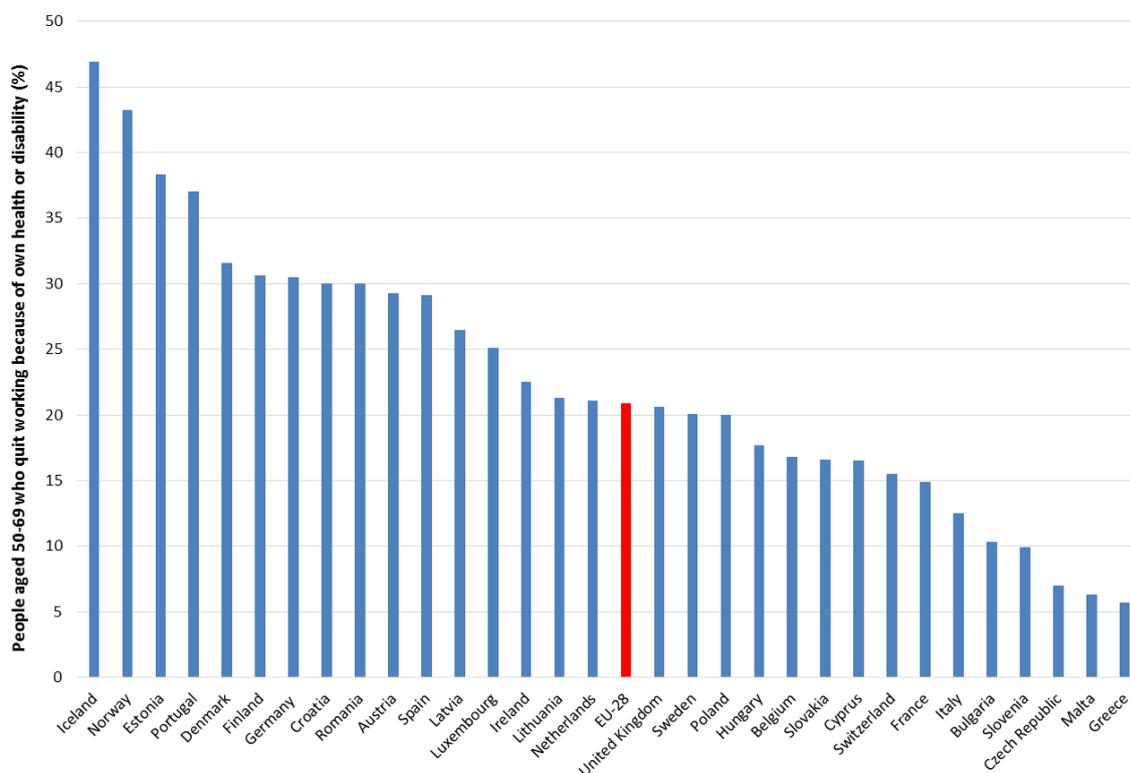
*No data for Croatia, Switzerland or Iceland

In the context of population ageing, the influence of health on retirement decisions is likely to grow. Indeed, despite the highly individual nature of ageing, statistics show that the likelihood of suffering from long-standing health problems or disability increases with age. Ageing can affect a number of physical functions (muscle power, lung function, eyesight, hearing, etc.) that are likely to limit a person's abilities to work — especially when it comes to performing highly physical tasks. At work, older people are more prone than younger people to developing work-related musculoskeletal disorders (MSDs), and are at higher risk of developing chronic health problems (Okunribido *et al.*, 2011; Varekamp & van Dijk, 2010).

On average, the proportion of older workers (aged 55 years or older) that report work-related health problems is higher than the proportion of younger workers (35-54 year olds) that report such problems. The largest differences between older workers and younger workers can be found in Austria, Croatia Poland and Slovakia, where the proportion of older workers reporting a work-related health problem is around 7–8 pp higher than the proportion of younger workers. Interestingly, in a few countries, such as Luxembourg and Sweden, there is a higher proportion of people aged 35-54 years who report having a work-related health problem than those aged 55-64 years, although the largest difference (in Sweden) is only 3.5 pp (for further country differences, see [Annex 2](#)) (Eurostat, 2015j).

Figure 2-14 shows the main reasons why people aged 50-69 years left employment in 2012. On average, 'own health or disability' was the second-most common answer throughout the EU, with 21 % of the respondents citing this as the main reason for their retirement.

Figure 2-14, Proportion of inactive people, aged 50-69 years and who receive a pension, who quit working because of their own health or disability, 2012



Source: Eurostat, 2014c.

Skills and competencies

Older workers are more likely to suffer from a skill-mismatch or obsolescence, with workers over 50 having access to fewer training and development opportunities than younger workers. According to Eurofound, the number of individuals who do not receive employer-paid training increases at the age of 40 years, reaching 72 % after the age of 60 for men, and, for women, when they enter their 50s (Eurofound, 2012a). During the fieldwork, some stakeholders noted that, in France, as a rule, access to training is limited after the age of 45 years old. While the lack of access to training can be a source of problems for all workers, it is particularly difficult for older workers if they are viewed as having outdated skills. Age stereotypes are the main barriers to vocational training among older workers — in particular, a belief that older workers are reluctant to take part in training, have difficulties learning new skills, or that investing in vocational training for older workers brings poor returns (Gosling, 2011) Another common barrier is that training is not always adapted to the learning needs of older workers, who may lack familiarity with formal classroom education and testing (Morschhauser & Sochert, 2006)

Respondents to the 2012 Eurobarometer on Active Ageing perceived exclusion from training in the workplace as the second-most important factor that prevents people aged 55 years or older from working (71 %) (EC, 2012f) In addition, 62 % of respondents considered the lack of skills for the modern workplace to be an important barrier.

In a number of European countries (e.g. Estonia, Hungary, Italy, Latvia, Luxembourg, Poland and Portugal), active labour market policies aimed at increasing the labour participation of older workers contain provisions to implement specific training programmes for older workers. Spain offers preferential access to training to older workers, while in Belgium and France, the recruitment and training of older workers have been incorporated into a law requiring the implementation of company agreements for the employment of older workers.

Other individual factors

Other factors influencing people's decision to stop or continue working include domestic and household contexts and caring responsibilities. As people live longer, individuals may be caring for older parents, as well as children and grandchildren. According to the association Eurocarers, there are over 100 million unpaid carers in Europe (Committee of the Regions, 2011). In particular, women have been found to spend approximately 26 hours a week caring for others, whereas men spend on average 8.8 hours a week caring for others (Eurofound, 2013). This double workload results in exposure to multiple risks, such as work–life balance issues, high levels of stress and lack of time to recover between work and domestic roles, either physically or psychologically. Therefore, control over one's working time can be an important added value for older workers with caring responsibilities. Research has shown that dissatisfaction with regard to working time is a driver of people's decision to either retire or enter self-employment, where they believe they will have more control over their working hours (Bell & Rutherford, 2013).

Another factor at individual level includes the social position, as identified in the work of the 'More Years, Better Lives' Joint Programming Initiative (MYBL JPI, 2014): 'lower social positions seem generally associated with an involuntary earlier labour market exit' (Hasselhorn, 2015). Finally, social norms, such as the 'early exit' culture that exists in countries such as Belgium and Luxembourg, can influence motivation to keep working. Other social influences come from the close social and family environment and from values. The MYBL JPI explains that 'older workers appear to be more motivated by intrinsically rewarding job features than by extrinsic ones like financial rewards' (Hasselhorn, 2015).

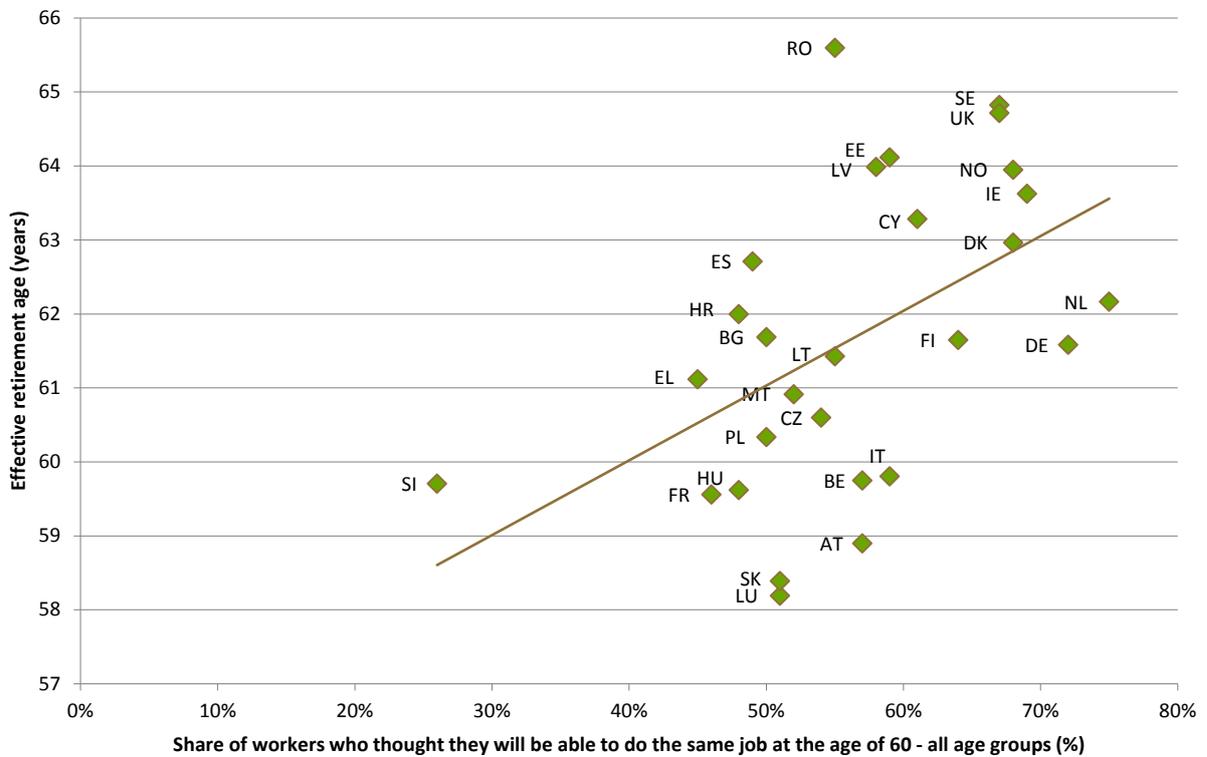
Perceived job sustainability and effective retirement age

The Eurofound fifth EWCS questionnaire asked workers whether or not they thought they would still be able to do the same job at the age of 60 years. This indicator was hereinafter called 'job sustainability'. According to the EWCS results, job sustainability varies widely by skill level and the type of work people do. It is considerably lower for low- and mid-skilled workers, who are more likely to be employed in physical work (Eurofound, 2012c). In all Member States, a higher proportion of highly skilled clerical workers than low-skilled clerical workers report that they would be able to do their job at age 60 years. This difference is more pronounced in eastern and southern European Member States (for country differences, see [Annex 2](#)).

Figure 2-15, shows perceived job sustainability (measured as the self-estimated ability of a worker to remain employed until the age of 60 years) and effective retirement age¹⁴.

¹⁴ Data for Portugal have been excluded as it they are outliers: the effective retirement age is relatively high, yet job sustainability is low.

Figure 2-15, Perceived job sustainability versus effective retirement age in the EU and EFTA countries, 2010



Sources: Eurofound, 2010, Question 75: ‘Do you think you will be able to do the same job you are doing now when you are 60 years old?’; answer category ‘Yes, I think so’; OECD, 2010.

Note: the effective retirement age used is an average of men and women’s effective retirement age. No data for Switzerland and Iceland are available.

All European countries have implemented pension reforms to address demographic change and meet the EU 2020 target to increase the labour participation of older workers. Although these reforms have resulted in higher employment rates among older people, the gap between official and effective retirement age remains significant, because of the complexity of the individual and workplace factors that influence workers’ exit from the labour market.

3 Concepts and factors influencing national policy development

The following section describes the main concepts and models that provide a framework for the development of policies related to the extension of working life and the ageing of the workforce. It also identifies some of the supranational and national factors which have had an impact on the development and implementation of the national policy frameworks related to work, age and health in Europe.

3.1 Concepts and models for sustainable working lives

Over the past 50 years, a number of concepts and models have emerged through research into the issue of population ageing and efforts to find solutions to the challenges it poses to the society. Table 3-1 summarises a selection of such concepts or models (a fuller description of each concept is provided in [Annex 1](#)).

Table 3-1, Key concepts for sustainable working lives

Concept name	Definition ¹⁵
Healthy ageing	Healthy and active ageing allows people to realise their potential for physical, social and mental well-being throughout the life-course and to participate in society, while providing them with adequate protection, security and care when they require assistance (WHO, 2002)
Active ageing	Active ageing is the process of optimising opportunities for health, participation and security, in order to enhance quality of life as people age (WHO, 2002)
Lifelong learning	Lifelong learning is all learning activities undertaken throughout life, with the aim of improving knowledge, skills and competencies within a personal, civic, social and/or employment-related perspective. Lifelong learning encompasses the whole spectrum of formal, non-formal and informal learning (European Commission, Making a European Area of Lifelong Learning a Reality, 2001)
Rehabilitation	Measures to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life (UN Convention on the Rights of Persons with Disabilities, 2006)
Workplace health promotion/health-promoting workplaces	Workplace health promotion (WHP) is a combined effort from employers, employees and society to improve the health and well-being of people at work. This can be achieved through improving work organisation and the working environment, promoting active participation and encouraging personal development (ENWHP, 2007)
Well-being at work	Workplace well-being relates to all aspects of working life, from the quality and safety of the physical environment, to how workers feel about their work, their working environment, the climate at work and work organisation. The aim of measures for workplace well-being is to complement OSH measures to make sure workers are safe, healthy, satisfied and engaged at work (ILO)

¹⁵ The definitions selected in the table below are not universally accepted definitions of these concepts, as for most of them, this does not exist. Definitions presented in the table are, in most cases, extracted from the main, or most recent, policy document on the topic/concept prepared by a relevant international organisation. In a few cases, such as for 'work ability', 'wellbeing at work' and 'employability', other sources have been used.

Concept name	Definition ¹⁵
Return to work	Return to work is a concept that encompasses all procedures and initiatives that aim to facilitate the workplace reintegration of people who have experienced a reduction in work capacity or capability, whether because of invalidity, illness or ageing (International Social Security Association)
Age management	Age management refers to the various dimensions by which human resources are managed within organisations with an explicit focus on ageing and, also, more generally, to the overall management of the workforce ageing via public policy or collective bargaining (Walker, 1997)
Diversity management	Diversity management is the active and conscious development of a future-oriented, value-driven strategic, communicative and managerial process of accepting and using certain differences and similarities as a potential in an organisation, a process which creates added value to the company (International Society for Diversity Management, 2007)
Employability	There is no commonly accepted definition of 'employability'. In simple terms, employability can be defined as 'the quality of being employable' or the 'combination of factors permitting access to work, to maintain it and to progress in one's career' (EC, 2011)
Work ability	Work ability can be described as the balance between the resources of the individual and work-related factors. Personal resources include the following elements: health and functional capacities, competencies and skills, values, attitudes and motivation. Work-related factors include work content, work environment, work organisation and leadership. Work ability is also influenced by the environment outside of work (Finnish Institute of Occupational Health)
Sustainable work	Sustainable work over the life-course means working conditions and career paths that help workers to retain their physical and mental health — as well as motivation and productivity — throughout an extended working life. These conditions enable a fit between work and the characteristics or circumstances of the individual throughout their changing life, and must be developed through policies and practices at and outside work (Eurofound, 2015)

Initially launched by major international organisations such as the OECD and WHO, active ageing is a concept also referred to as a comprehensive strategy to maximise participation and well-being as people age. WHO provided a definition of active ageing in 2002, broadening the concept based on their definition of health. In European policies on ageing, the concept of active ageing appeared in the late 1990s and was quickly adopted in the policy discourse although with varying interpretations, adopting the broader understanding of the concept represented by WHO definition of active ageing that includes health, security and participation or primarily emphasising employment and participation in later life.

3.1.1 An integrated approach

In the context of this analysis, an **integrated approach** is one which cuts across different societal and policy areas¹⁶. For example, the concept of 'healthy ageing', which has a very clear public health remit, is defined through nine key determinants, which include issues of discrimination in employment, and education and lifelong learning (EuroHealthNet, 2016). The integrated approach also considers the

¹⁶ Policy integration concerns the management of cross-cutting issues in policy-making that transcend the boundaries of established policy fields. A variety of related, and sometimes synonymous, terms are used such as policy coherence, policy consistency, joined-up government or policy coordination. The term 'integrated' is used throughout the report.

micro (individual/worker), meso (organisation/workplace) and macro (society) levels. For instance, the concept of 'employability' originally focused on the ability of people with social, physical or mental health problems to work. However, it has evolved over time to encompass both the resources of individual people (including health and well-being) and the characteristics of the labour market (including equal treatment in employment, accessibility, etc.) that allow people to work (McQuaid & Lindsay, 2005).

In the OSH area specifically, there has been a shift from focusing solely on health protection to also looking at health promotion, with the recognition that individual, work-related and societal factors contribute to the safety, health and well-being of the workforce. Early health promotion activities in the workplace had a relatively narrow focus and addressed particular risks, lifestyles or behaviours (such as diet or smoking). A more interdisciplinary approach was developed in the 1990s. Workplace health promotion (WHP) programmes now extend to broader organisational and environmental issues instead of focusing exclusively on individual risk factors (Chu *et al.*, 2000). This shift comes from a new understanding of health as 'the ability to adapt and self-manage in the face of social, physical and emotional challenges', according to which health is not an end in itself but a means to fully participate in society, and reflects not only individual abilities, but also the broader social environment in which these abilities can develop (Huber *et al.*, 2011).

3.1.2 A life-course perspective to health

The **life-course perspective** to health 'views health as the product of risk behaviours, protective factors, and environmental agents that we encounter throughout our entire lives and that have cumulative, additive, and even multiplicative impacts on specific outcomes. It thus provides a construct for interpreting how peoples' experiences in their early years influence their later health and functioning' (Yu, 2006). A life-course perspective to healthy ageing considers older people's socio-economic, mental and physical status to be a consequence of their cumulative experiences and their past (health-related) behaviour. This approach recognises that older people are not a homogeneous group and that individual diversity tends to increase with age (WHO, 2002).

Applying the life-course approach to policies for an ageing workforce does not preclude taking group-specific measures, but recognises that each age group faces particular challenges in their life, including at work, making them vulnerable to the development of specific mental or physical health problems. A life-course perspective for OSH policies acknowledges that work-related health problems and chronic diseases develop over a long period and as a consequence of long-term exposures to occupational hazards, either physical or psychosocial. Therefore, risk prevention throughout working life and early interventions can have the long-term preventive goal of ensuring that workers stay healthy throughout their working lives and enter their post-retirement lives in good health.

3.2 Supranational influences and wider economic developments

3.2.1 International frameworks and developments

Starting as early as 1980 with the ILO's recommendation on older workers, key international organisations have worked to raise awareness of the ageing of populations and its effects on the workplace.

Table 3-2 provides an overview of the main policies from international organisations, showing their acknowledgement of the need to address population ageing through an integrated and holistic approach.

Table 3-2, Key international developments in the field of work, age and health

Organisation	Year	Policy document/initiative	Key findings
United Nations (UN)	1983	International Plan of Action on Ageing (UN, 1993)	Recommendations address issues related to employment security, opportunities for training and new jobs for older workers, as well as the need to ensure satisfactory working conditions
	1991-1992	United Nations Principles for Older Persons (UN, 1991) and the Proclamation on Ageing (UN, 1992)	Reiterates the right of older persons to have the opportunity to work and to determine the time and pace of their withdrawal from the labour force
	1999	The International Year of Older Persons	The first global effort to integrate the issue of ageing in all sectors
	2002	Political Declaration and International Plan of Action on Ageing (UN, 2002)	Formally acknowledges that the challenges and opportunities of population ageing should be mainstreamed in social and economic policies and not only in separate policies, e.g. on active ageing or older peoples' health
International Labour Organization (ILO)	1980	Older Workers Recommendation (ILO, 1980)	Calls upon countries to improve the working environment at all stages of the working life, and to design practices that enable older workers to continue to work under satisfactory conditions
	1999	Ageing and Labour Markets for Older Workers (ILO, 1999)	Highlights the discriminatory nature of labour markets in many countries and calls for improved policies to fight 'ageism', promote the employment of older people and find ways to retain older workers beyond increasing retirement ages
	2008	'Age discrimination and older workers: Theory and legislation in comparative context' (ILO, 2008)	Concludes that many countries consider the ageing of the workforce mostly through the spectrum of pension reforms and active labour-market policies and that there has been 'little, if any, consideration of the quality of jobs and working conditions in policy discussions and the debate surrounding extending working life'
Organisation for Economic Co-operation and Development (OECD)	2006	'Live longer, work longer' multi-country review (OECD, 2006)	Investigates active labour market policies (ALMPs) for retaining older people at work and the working conditions of older workers, and concludes that more global strategies to address working conditions in a life course perspective are needed
	2011	'Working better with age' multi-country review (OECD, 2011)	Investigates national policies to foster employability, job mobility and labour demand in relation to the older workforce (ongoing)
	2010	<i>Sickness, disability and work: Breaking the barriers — A synthesis of findings across OECD countries</i> (OECD, 2010)	Highlights the importance of strategies that consider health and work in an integrated manner and urges countries to reform disability policies and put in place effective rehabilitation and return-to-work strategies, in order to ensure that people remain active even if affected by a health problem
	2012	'Sick on the job? Myths and realities about mental health and work' (OECD, 2012b)	Looks into the challenges and barriers to the integration of people with mental ill health at work, highlighting the need to intervene early in life and the importance of adopting a life-course approach to prevention

Organisation	Year	Policy document/initiative	Key findings
World Health Organisation (WHO)	1999	<i>Ageing: exploding the myths</i> (WHO, 1999)	Published in the context of the International Year of Older Persons, it introduces the concept of 'active ageing' into international policy discourse
	2002	<i>Active Ageing — a policy framework</i> (WHO, 2002)	Recommendations for the design of multi-sectoral strategies to promote active ageing
	2011	Healthy Workplaces Campaign	Associates non-OSH aspects, such as the promotion of healthy lifestyles, with the development of healthy and sustainable workplaces
International Social Security Association (ISSA)	Since 2010	'Pensions and demographic change' (and supporting documents) (ISSA, 2010)	Draws attention to the fact that the focus of many reforms on the reduction of benefits as a quick fix to restore the financial equilibrium of pension schemes ignores the need to guarantee sustainable income protection for everyone Stresses the importance of adequate employment policy frameworks to ensure that older people are able to work longer as retirement ages rise

The challenges related to population ageing were recognised by key international organisations at an early stage, and there is a considerable body of research and policy documents by the World Health Organization (WHO), the Organisation for Economic Co-operation and Development (OECD) and the International Labour Organization on the issue. International policies and recommendations have influenced policy development in European countries directly and indirectly, shaping EU policies in relation to population and workforce ageing. Recommendations from the OECD on pension reforms and employment policies for older workers are referred to in national strategies, and the WHO's concept of 'active ageing' forms the basis for numerous EU policies and national strategies related to demographic change.

3.2.2 The European legal framework and policy context

A number of EU legislation and policies have had an important influence on the development of national policies related to the ageing workforce. The EU OSH and anti-discrimination legal frameworks played a major role in the implementation of minimum requirements for safety and health at work and equal treatment in employment. In the employment and public health areas, EU policies and initiatives have also influenced how to address the challenges related to the demographic change and its impacts on socio-economic systems. Finally, EU funding and awareness-raising activities have supported the implementation, at national and local levels, of innovative practices related to age management and active ageing.

▪ Legal frameworks

An important landmark in the creation of an EU legal basis for longer healthy working lives was the development, at the beginning of the 2000s, of a comprehensive legal framework against discrimination in employment. Council Directive 2000/78/EC (EU, 2000) on equal treatment in employment and occupation prohibits discrimination on the grounds of, inter alia, age and disability. However, with a view to ensuring full equality in practice, the principle of equal treatment shall not prevent employers from adopting specific measures to prevent or compensate for disadvantages linked to age or disability. This includes measures to protect safety and health at work or aimed at promoting the integration of older people or people with disabilities into the working environment (Article 6(1)). The Court of Justice of the European Union (CJEU) has ruled on a number of major cases related to the interpretation of this article, defining when and how such derogations can apply (EC, 2014h). According to the European Network of

Legal Experts' 2011 *Age and employment* report on non-discrimination, workers in many European countries who have reached retirement age but wish to continue working are subject to more precarious employment rights, such as withdrawal from unfair dismissal protection (EC, 2011).

The Employment Equality Directive's Article 5 also establishes the requirement for employers to provide 'reasonable accommodation' to persons with disabilities. In light of this principle, employers are obliged to take necessary measures to enable persons with disabilities to have access to and to participate in employment. This provision is relevant for workers returning to work with reduced working capacity, as well as older workers who develop health problems.

Under the Council directive on measures to improve the safety and health of workers at work¹⁷, (EU, 1989; Council Directive 89/391/EEC, i.e. the Framework Directive) Articles 6(2)(d) and 6(3)(b), employers have a legal duty to ensure the safety and health of workers in every aspect related to the work. This includes assessing the risks to the safety and health of workers and adapting work to the individual. Employers also have a legal duty to 'take into consideration the worker's capabilities as regards health and safety'. In addition, Article 15 states that 'particularly sensitive risk groups must be protected against the dangers which specifically affect them'. Although the Framework Directive does not define these groups, the European Commission's 1996 *Guidance on risk assessment at work* specifies that 'sensitive risk groups' include, inter alia, older workers and workers with disabilities (EC, 1996).

The only directive to cover a category of workers defined in relation to their age, is the Young People at Work Directive (EU, 1994; Directive 94/33/EC). There is no equivalent legislation that specifically targets older workers.

▪ Policies

Employment and public health policies

The importance of the EU 2020 Strategy as a key driver for national pension reforms and policies aimed at extending working life was mentioned in [Chapter 2](#). This overarching framework has been accompanied by a number of initiatives that address the links between job quality, health and the extension of working life.

As part of the Europe 2020 Strategy, seven flagship initiatives have been developed, including 'An agenda for new skills and jobs — A European contribution towards full employment', which aims to modernise labour markets. Two out of four key priorities identified in the agenda are (1) a more skilled workforce and (2) better job quality and working conditions (EC, 2010b). Accordingly, the agenda highlights the importance of upgrading the skills of ageing workers who are particularly vulnerable to economic restructuring, and policies to support labour-market transitions by older people, particularly from unemployment back to work. Although the Europe 2020 Strategy acknowledges that working conditions worsened during the economic crisis, it stresses the importance of better job quality and working conditions for the increased participation of, inter alia, older workers in the labour force.

In addition, as part of the measures for implementing the Europe 2020 Strategy, the EU adopted Council Decision 2010/707/EU on guidelines for the employment policies of Member States ('European Employment Guidelines'), which seeks to create more and better jobs throughout the EU (EU, 2010). These guidelines call on Member States to address the quality of jobs and employment conditions, increase labour-market participation, introduce effective lifelong learning and promote OSH. They emphasise the importance of inclusive growth promoted through reforms to ensure access and opportunities for all during the entire life-course and by the removal of barriers to labour-market participation, including for older workers. An increase in employment rates, particularly among older workers, is seen as an objective to be reached through work–life balance policies, affordable care and work organisation innovation. Although the focus remains on active labour-market policies designed to

¹⁷ With the exception of domestic workers and the armed forces, the police and specific activities in the civil protection services.

remove barriers to labour participation, attention has been paid to the challenges of adapting the working conditions to suit an ageing workforce¹⁸.

Through its various public health programmes, culminating with Health for Growth (2014-2020), the EU has increasingly recognised the links between health, age and work (EU, 2014; Regulation (EU) No 282/2014). Supporting healthy ageing means promoting health throughout the life-course and aiming to prevent health problems and disabilities from an early age. In addition, poor health is an important factor in the contexts of early retirement, reduced productivity and worker absenteeism. Thus, 'keeping people healthy and active for longer has a positive impact on productivity and competitiveness' and can lead to 'potential important savings in healthcare budgets'. The programme acknowledges that well-directed investments to promote health and prevent diseases can prolong healthy living and enable older people to continue working as they age. National public health policies in many European countries (as described in [Chapter 4](#)) are also looking at the links between health, work and age, and the contribution of health protection and promotion throughout the working life to a healthy older workforce and healthy retired population.

The EU strategies on OSH and the ageing labour force

Starting in 1978, the European Commission implemented a series of action programmes on safety and health at work. Whereas the initial programmes focused on measures designed to protect workers against risks of accidents and occupational diseases and mainly had a legislative character, the Community Strategy on Health and Safety at Work (2002-2006) marked a shift to a more holistic approach (EC, 2002a). It recognised for the first time the ageing of the workforce and highlighted the need to tackle the problem of demographic change. It also introduced the concept of well-being at work, and noted that this requires the physical, moral and social dimensions of work to be addressed rather than looking solely at how to avoid accidents and occupational illnesses.

The 2007-2012 OSH strategy identified further challenges and risks related to ageing workers (EC, 2007b). These included the increasing rates of MSDs and the overexposure of vulnerable groups, such as older workers, to occupational risks. The strategy clearly stated that adequate policies on safety and health at work can help to meet the challenges of demographic change 'by tailoring the workplace more effectively to individual needs and by applying reliable ergonomics principles more effectively to the way in which workplaces are designed and work is organised'.

The 2013 evaluation of the European 2007-2012 strategy provided some key conclusions and recommendations on where the new EU safety and health strategy should focus (EC, 2013a). It considered the ageing and decline of the European workforce as one of five main challenges in the area of safety and health at work, underlining the need for measures to retain older workers in employment. This was in line with a European Parliament resolution on the importance of ensuring the protection of older workers' health and providing working conditions adapted to their situations and needs (EP, 2011b). The Parliament specifically called for lifelong learning and measures that anticipate a decline in physical strength, as well as a framework agreement between social partners. It also called for measures to encourage part-time work for older workers in order to favour 'a progressive transition to retirement and enhance the well-being and capacities of older workers'.

One of the strategic objectives of the EU Occupational Safety and Health (OSH) Strategic Framework 2014-2020 is to address the ageing of the European workforce (EC, 2014e). This document recognises demographic change as one of the main challenges at EU level which requires additional policy action. It refers to the wider dimensions of work, introduces elements such as sustainable working life, and emphasises the need for healthy and safe working conditions throughout the working life to ensure active and healthy ageing. Priorities include the adaptation of workplaces and work organisation and the development of life-time employability to address workers' changing capabilities, through innovative information and communication technology (ICT) products and services. The Strategic Framework then describes seven key objectives, one being to 'address the ageing of the workforce, emerging new risks, prevention of work-related and occupational diseases'. In addition, it emphasises the need for the

¹⁸ As illustrated by the Joint Employment Reports, published annually by the European Commission, which underpin the key messages of the EU employment and growth policy.

reintegration and adoption of rehabilitation measures to allow the early return to work after an accident or disease, in order to avoid the permanent exclusions of workers from the labour market.

Each successive EU strategy on safety and health at work has marked a further shift from a 'traditional' OSH approach to one that is a more holistic and addresses the wider effects of improving OSH in the context of an ageing workforce. The influence of EU OSH strategies on how Member States have addressed the challenges of demographic change in their national OSH strategies has varied from a simple reference to specific actions addressing the OSH of older workers (see examples in [Chapter 4](#)).

▪ **Supporting activities**

The European Year for Active Ageing and Solidarity between Generations

The year 2012 was designated the European Year for Active Ageing and Solidarity between Generations. By highlighting the potential of older people and promoting their active participation in society and the economy, the year-long action conveyed a more positive image of population ageing (EC, 2014i). The objective was to help Member States and stakeholders promote active ageing, mobilise the potential of the rapidly growing population in their late 50s and over, and create better opportunities in the labour market for ageing workers.

A wide range of countries participated in this European Year. The following examples illustrate the type of activities implemented in Member States in relation to the ageing of the workforce:

- In Portugal, the government adopted an action programme to tackle the effect of demographic change and promote social inclusion; the programme included strategic objectives such as 'priority support to unemployed people over 55' and 'active ageing as a priority for health projects'.
- Norway organised a conference, held in September 2012 that analysed the participation of senior citizens in the labour market in the Nordic countries. The event brought together a wide range of stakeholders to exchange experiences and practices. Themes tackled during the conference included the development of policies for 'seniors' and acceptable alternatives for later retirement.
- Italy adopted a 2012 national programme on promoting active, vital and dignified ageing in a solidarity-based society, aimed at promoting active ageing through lifelong learning programmes, the transmission of knowledge from older to younger generations, educational programmes on healthy lifestyles and a focus on family support.

In addition, a number of EU-wide events, such as the Generation@school initiative, aimed to engage pupils and older people in an intergenerational dialogue, while the European Seniorforce Day sought to engage older people in volunteer activities.

The European Year for Active Ageing and Solidarity between Generations was evaluated as having raised awareness on active ageing, stimulated public debate and fostered mutual learning (EC, 2014b). The themes most covered by the Member States included 'bridging generations', 'support for social engagement' and 'health promotion and preventative health care', while 'healthy working conditions' and 'reconciling work and care' were the least-covered themes. This illustrates that initiatives related to active ageing have tended to focus more on post-retirement lives than on ageing well at work.

European funding to support programmes on ageing at the workplace

Various EU funding programmes are in place to help meet the goals of the Europe 2020 Strategy for smart, sustainable and inclusive growth in the European Union by 2020. The EU Structural and Investment Funds (ESIF), which constitute more than one third of the total EU budget, are the financial instruments for implementing the EU Cohesion Policy to reduce the significant economic, social and territorial disparities that exist among Europe's regions¹⁹. One of the eleven thematic objectives and key

¹⁹ ISIF covers the European Regional Development Fund (ERDF), European Social Fund (ESF), Cohesion Fund (CF), European Agricultural Fund for Rural Development (EAFRD) and the European Maritime & Fisheries Fund (EMFF).

actions identified for the 2014-2020 funding period is 'employment and supporting labour mobility', a priority directly linked to the EU employment targets (see section above). In particular, the European Social Fund (ESF), which is part of the ESIF, focuses on questions related to employment, vocational training and working conditions, and supports initiatives that contribute to improving OSH in the context of an ageing workforce.

Some Member State projects and programmes supported financially by these EU funding programmes and that relate to OSH in the context of an ageing workforce are outlined below:

- Estonia used ESF financing for various individual projects on training and career counselling for older workers.
- Latvia used ESIF funds to implement the horizontal objective of 'Equal Opportunities Regardless of Age'. It benchmarked the labour-market participation of older people throughout all implementation stages of the EU funding programming, with the objective of increasing participation. The Latvian government also supports the wages in enterprises of previously unemployed older people for a period of up to 12 months, with ESF co-financing.
- A project funded by the ESF on 'Age management strategies in the Czech Republic' developed a guide providing an overview of the situation of older workers in the Czech Republic, discussing the risk factors that should be taken into account with respect to age and work ability or working conditions.
- Slovenia's Operational Programme for Human Resource Development (2007-2013), financed in part by the ESF, the European Regional Development Fund and the Cohesion Fund, stated that access to work and training should be ensured for people (including older workers) at a disadvantage in the labour market.

A 2014 European Parliament resolution on the effectiveness of ESF spending on older workers noted that, between 2007 and 2013, older workers (55-64 years) accounted for less than 5 % of participants in lifelong learning activities of the ESF and that none of the Member States' Operational Programmes in the same period included a priority axis or themes on older workers. It recommended the inclusion in the Member States' Operational Programmes, of indicators related to the participation of older workers, disaggregated by gender, in ESF-funded projects, particularly those related to workplace adaptation and the acquisition of skills, and how these projects have improved workers' employability (EP, 2014).

Since the economic crisis, the EU's approach to the challenges of population ageing and the extension of working life has been inconsistent. The EU 2020 Strategy recommends the promotion of the employment of older workers, and EU public health and OSH policies emphasise the importance of safe and healthy working conditions throughout the working life. On the other hand, with record high rates of youth unemployment across the EU, particularly in countries most affected by the economic crisis, the focus has shifted strongly towards promoting the employment of younger age groups. The apparently contradictory demands of these two positions would be resolved by an integrated policy framework addressing the question of the extension of working life from all relevant angles.

3.2.3 Impact of the economic crisis on the OSH policy agenda of European countries

Since the mid-2000s, the economic crisis has greatly affected economies and societies in Europe. The mainstream response from most European countries was to introduce drastic cuts in public spending with an overarching target of fiscal consolidation. Countries particularly hit by the crisis are Cyprus, Greece, Ireland and Portugal, which entered into Economic Adjustment Programmes to receive financial assistance (EP, 2015a). As a result of the crisis, Greece and Spain have seen their unemployment rates hit 26 % and 24 %, respectively, with particularly high unemployment rates among younger workers (Eurostat, 2015i).

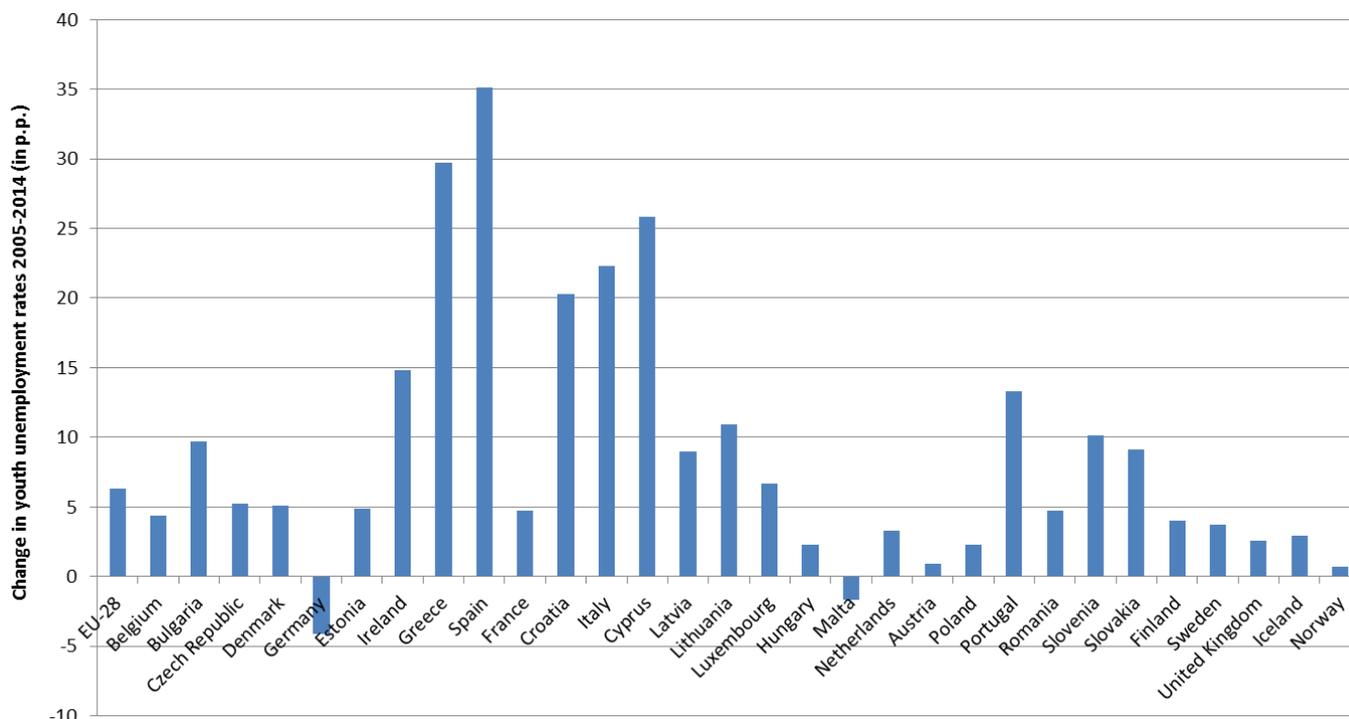
Overall, priority was given to adopting measures that would rapidly improve public finances and help to achieve specific macroeconomic targets. Under these circumstances, policy areas relevant to OSH and the ageing workforce, such as employment, social security and healthcare, were subject to numerous

changes. In most countries, quantitative and measurable dimensions of work have been prioritised. For example, employment policies increasingly focused on reducing unemployment — especially for the most affected population groups, such as young workers — as well as labour costs. This was pursued primarily through salary subsidies, tax and social security contribution reductions for employers, and the reinforcement of more flexible forms of work, e.g. fixed-term, temporary and part-time work. In some instances, it is being argued that austerity measures have put pressure on countries' obligations to ensure protection of social standards and fundamental rights. The importance of quality working conditions and the promotion of social rights have moved to the background as a result.

A number of consequences of the economic crisis and the subsequent reforms have had a direct impact on OSH in the context of an ageing workforce and on people's health:

- The crisis has increased the focus on productivity, which in turn has resulted in work intensification and contributed to less attention being paid to safety and health prevention and fewer resources for OSH management at the workplace (EU-OSHA, 2014).
- In many countries, since the economic crisis, labour inspectorates have experienced cuts in their operational and staff budgets (e.g. in Germany, Italy, Latvia, Romania, the UK). At the same time, in all countries, inspectors' workloads have increased because of increases in industrial restructuring and collective redundancies, and a general intensification of work and worsening of working conditions (EPSU, 2012). Other activities relevant to OSH prevention, such as OSH research, have also experienced budgetary cuts over the past seven years.
- At national level, employment policies in many countries have focused primarily on youth unemployment. This is explained by the fact that, for the whole of the EU, the unemployment rate of 15-24 year olds has risen from 15.9 % in 2007 to a maximum of 23.7 % in 2013, with countries such as Croatia, Cyprus, Greece, Italy and Spain experiencing an increase in their youth unemployment rates of more than 20 pp (Figure 3-1). Older age groups were also hit by the economic crisis, but only a few countries (Cyprus, Greece, and Portugal) experienced declining employment rates among people aged 55-64 years between the years 2003 and 2013. These parallel developments explain why, in certain countries and for a number of stakeholders (including trade unions), increasing the employment rate of younger people is prioritised over any other employment-related considerations, including promoting safe and healthy working conditions for an ageing workforce.

Figure 3-1, Changes in youth unemployment rates, 2005-2014, EU-28



Source: Eurostat, 2015i.

3.3 National factors influencing policy development

The disparity of historical backgrounds and political systems in Europe has resulted in a great diversity of legal traditions, institutional structures, and platforms for stakeholder cooperation and interaction. These characteristics can influence the types of government policy to extend the working life. In particular, the models of social welfare, the legal framework for safety and health at work and the level of stakeholder participation in policy-making are factors that shape the development of policies to address the challenges of an ageing workforce.

The following sections set out the different national traditions towards social welfare and OSH, as well as the legal frameworks that form the basis for OSH in the context of an ageing workforce. An overview is also provided of some of the cooperation mechanisms that allow for stakeholder engagement and social dialogue on issues relevant to the ageing of the workforce.

3.3.1 Social welfare and OSH traditions

The organisation of the overall welfare system has an influence on the development of policies that address the challenges of an ageing workforce, particularly with regard to pensions and labour market policy.

Countries in Europe follow different models of social welfare, derived from two basic models known as Bismarckian or Beveridgian. The Beveridgian model is characterised by the universality of its social welfare protection, the uniformity of benefits, based on needs rather than income, and the unity of the state-centred management of welfare, based on taxation. The Bismarckian model is characterised by a system of welfare benefits financed by workers' and employers' contributions and is based on income rather than risks. There are a number of variations of these two models (Hämäläinen, 2008).

In particular, the following features of the different European models can influence policy-making in relation to age, work and health, as they affect the future sustainability of pension systems and the role of various stakeholders, including social partners:

- *Proportion of pensions in social expenditures*: the continental and Mediterranean countries are characterised by a high proportion of expenditure on old-age pensions, reflecting the low labour-force participation of older workers and early retirement ages in these countries (Aiginger & Leoni, 2009). In contrast, the Anglo-Saxon model is characterised by a low proportion of social expenditure on pensions, with subsidies directed mostly towards the working-age population.
- *'Generosity' of the system*: the degree of 'generosity' of the social welfare systems and the tradition of social inclusion impact the level of expenditures incurred through the various social welfare schemes, e.g. sickness, disability, old age and unemployment. At the beginning of the 21st century, the high cost incurred by expenditures on sickness and disability prompted a number of countries, e.g. the Nordic countries, Germany and the Netherlands, to reform these schemes (OECD, 2010). Stakeholders in these countries confirmed the importance of this driver on the reform process, coupled with adequate support mechanisms to protect the most vulnerable categories of people from negative impacts of these reforms.
- *Role of occupational and health insurance*: many Bismarckian states have in place a public and occupational health insurance system that involves a number of seemingly private, self-regulating institutions (sickness funds, occupational insurance organisations, hospitals, physicians) that can play an important role in the development of occupational health policies and in prevention at the workplace (Saltman *et al.*, 2004).
- *Influence of social dialogue*: the level of influence of social partners in the development of socio-economic policies differs considerably across the different models, from a highly influential social dialogue in the Nordic countries, to a much more limited role of social partners in Anglo-Saxon and central and eastern European countries.

The different levels of maturity of the national OSH systems are another important factor in the development and implementation of policies related to the ageing workforce. The 'national system for OSH' refers to the infrastructure which provides the main framework for implementing the national policy and national programmes on OSH. This includes legislation, enforcement, occupational health services, research, etc. (see ILO, 2006)

Derived from a long tradition of social welfare, a number of European countries have developed solid frameworks to address OSH. Scandinavian countries have been strengthening regulation and establishing the broader concept of the work environment since the 1970s (Frick, 2004). On the other hand, countries with occupational insurance systems (e.g. Austria, Belgium, Finland, Germany) and countries traditionally focused on occupational medicine (e.g. eastern European countries) have put in place stringent regulatory systems focused on the protection of occupational health and, for some of them more recently, the promotion of health at work. Other countries, such as Ireland and the UK, have put more emphasis on individual responsibility with rights and duties for both employers and workers in the prevention of OSH risks.

Mature legal and institutional frameworks for OSH seem to be more resilient to new forms of physical and psychosocial work-related risks, including those related to demographic change (EP, 2008). Such mature frameworks are characterised by:

- long-standing laws regulating employers' obligations regarding OSH and anti-discrimination, predating the adoption of relevant European legislation;
- well-developed institutional frameworks for OSH, including:
 - a strong labour inspectorate, with a broad scope of activities, taking an advisory role as well as a traditional enforcement role;
 - a well-established system of occupational health care;
 - participation by occupational insurance institutions in OSH risk prevention and research activities;
 - a strong tradition of OSH research;

- enduring traditions of social dialogue in relation to working conditions and OSH at all levels and well-established structures for workers' representation;
- well-established multidisciplinary platforms of cooperation to develop and implement policies, strategies, programmes and activities related to demographic changes, OSH and return-to-work.

The following sections give an overview of the situation in European countries in relation to these three aspects.

3.3.2 National legal frameworks in the context of an ageing workforce

OSH legislation

The European Framework Directive on Safety and Health at Work (Directive 89/391 EEC) adopted in 1989 was a substantial milestone in improving safety and health at work. It guarantees minimum safety and health requirements throughout Europe while Member States are allowed to maintain or establish more stringent measures. A prominent feature of the Framework Directive is the adoption of the process-oriented participatory approach in combatting occupational hazards and ensuring compliance.

In some countries, such as the Nordic countries, Ireland and United Kingdom, a process-orientated and participatory approach to OSH management largely predates the Framework Directive by around 20 years. These countries were less challenged by the implementation of the Framework Directive than countries with more prescriptive legislative approaches. Furthermore, the secondary analysis of ESENER I suggests, that worker participation and management commitment was more likely to be found in countries with longer tradition of participatory and process-oriented OSH regulatory system than in countries where these approaches are the result of more recent transposition of the Framework Directive. This has also influenced policy development and implementation in relation to an ageing workforce, (EU-OSHA 2013a).

Within national OSH legislation, specific provisions or additional requirements that target older workers are not very common. Older workers are covered, by default, by the provisions that apply to all workers and, in some cases, to workers belonging to particularly sensitive risk groups. This is in line with the requirements set out at EU level. Exceptionally, several countries have set specific legal requirements concerning medical examinations within the context of health surveillance for workers above a certain age. Other OSH provisions that — directly or indirectly — cover older workers can be found on an ad hoc basis in national legislation. For example, Slovakia has introduced age factors for the manual handling of loads, and in Slovenia, the employer has a legal obligation to pay particular attention to any special risks for, among others, older workers (and workers with reduced working ability). In some countries, such as Hungary, the Netherlands, Portugal and Slovenia, specific legal provisions use age criteria to exclude workers above a certain age from carrying out certain types of more hazardous or arduous work or tasks. In Norway, the Working Environment Act obliges employers to consider age in the planning of work and gives employees over the age of 60 years the right to an extra week of paid holiday and employees over 62 years of age the right to reduced working time²⁰.

In a few cases, the national legislation goes further than the EU requirement to adapt work to the individual, by requiring that the individual's work ability is maintained and even enhanced by the working environment. In Austria, the 2011 Work and Health Law aims to maintain and improve the work ability of workers and avoid (permanent) illness through primary and secondary prevention, while in **Finland**, Act 738/2002 on Occupational Health and Safety is aimed at retaining the work ability of all employees.

Legislation on social security

Social security legislation is particularly relevant, as, among others, it defines rules for old age pensions and generally frames the transition between work and retirement. Social security legislation is also relevant to longer and healthier working life because it sets up the rules for unemployment, sickness

²⁰ As amended and in force by Act No 80 of 14 December 2012.

and disability benefits.

In a number of countries, social security legislation defines the procedure for the rehabilitation and return-to-work of people on medium- or long-term sickness absence²¹. In the context of an ageing workforce, the potential for transfer across different welfare schemes (sickness, disability, unemployment, early retirement, old age) is high for older people or people with reduced working capacity, which is why many countries are reforming these different schemes at the same time. Without active measures to promote the participation of older workers and workers with reduced capacity in the labour market or ensure the reintegration of people with health problems at work, reforms of social security legislation can drive more people towards 'social assistance' types of support.

A number of countries have put legislation in place to regulate the rights and duties of employers, workers and institutional actors in relation to sickness absence, disability, rehabilitation and return-to-work. In the Netherlands, according to the 2002 Gatekeeper Improvement Act, the employer is in charge of sickness absence management, compensation and rehabilitation. The Danish Act on Benefits in the Event of Illness or Childbirth describes the coordinating role of local authorities (municipalities) in the rehabilitation/return-to-work process.

Anti-discrimination legislation in relation to age

All EU Member States have transposed the EU Framework Directive on equal treatment in employment and occupation (EU, 2000; Directive 2000/78/EC). Therefore, most national anti-discrimination legal frameworks prohibit discrimination on the grounds of age and disability. As with the transposition of the EU OSH Framework Directive, the provisions of Directive 2000/78/EC introduce a high level of protection into national legal orders.

In many countries, the national rules allow for 'positive discrimination' measures that are intended to prevent, or compensate for, the disadvantages suffered by a group of persons, or to promote the special needs of those persons. These measures can also have a direct or indirect OSH dimension; for example, in Denmark, the act on the prohibition of discrimination in the labour market encourages more flexible working conditions designed to retain older workers and workers with reduced working capacity. Other positive measures taken for older workers include incentives for employers to hire older workers and to enable older workers to stay at work.

However, Member States have also introduced a number of exceptions. The CJEU has clarified the interpretation of this provision in a number of cases. For instance, measures in national OSH legislation intended to protect older workers against particular risks (e.g. by restricting their access to certain hazardous occupations) can be considered to violate the anti-discrimination directive, depending on the strength of the justification put forward for the age limits. In addition, in most Member States, employers are allowed to dismiss workers when they reach a nationally set retirement age, and it seems that workers who stay at work after retirement age are no longer protected from unfair dismissals (EC, 2011).

To reflect the logic of the directive, all national anti-discrimination laws (except in Switzerland) also require employers to provide 'reasonable accommodation' to workers with a disability. Depending on the specific definition of 'disability' in the country concerned, this can cover older workers or workers returning from sickness absence with reduced work capacity. In many countries, the concept of providing 'reasonable accommodation' is complemented in their OSH legislation by the obligation to adapt the work to the abilities of the worker (see previous section), paving the way for more sustainable working conditions for everyone, and not only people with a formally recognised degree of disability.

More recently, researchers have been looking at the discriminatory nature of the statutory retirement age. Age limits in legislation, including in OSH legislation, are predicated upon the assumption that age groups are homogenous, which is not the case²². Statutory retirement age may be seen as a constraint on people with high work ability who want to keep working, although this depends strongly on national culture and traditions. As mentioned in [Chapter 2](#), the UK abolished the default retirement age and

²¹ See the report 'Rehabilitation and return to work: Analysis report on EU and Member States policies, strategies and programmes' produced in the context of the project Safer and Healthier Work at Any Age (EU-OSHA 2016a).

²² See the report The ageing workforce: implications for occupational safety and health - A research review, produced in the context of the project Safer and Healthier Work at Any Age (EU OSHA, 2016d)

allows companies to set their own compulsory retirement age, but they must clearly justify it to avoid discrimination. On 3 February 2016, the French Court of Cassation (the court of final appeal for civil and criminal matters) confirmed that the decision of a large French company to force one of its employees to retire at the age of 60, despite the employee's desire to stay, had been detrimental to the employee and confirmed the decision of the Toulouse Court of Appeal, which condemned the company to pay financial damages.

3.3.3 Involvement and cooperation of stakeholders

The desk research and fieldwork have confirmed the importance of the level of involvement and cooperation of stakeholders, other than institutional stakeholders, as a driving force in the implementation of policies and programmes on the extension of working life. The following section focuses on three main aspects:

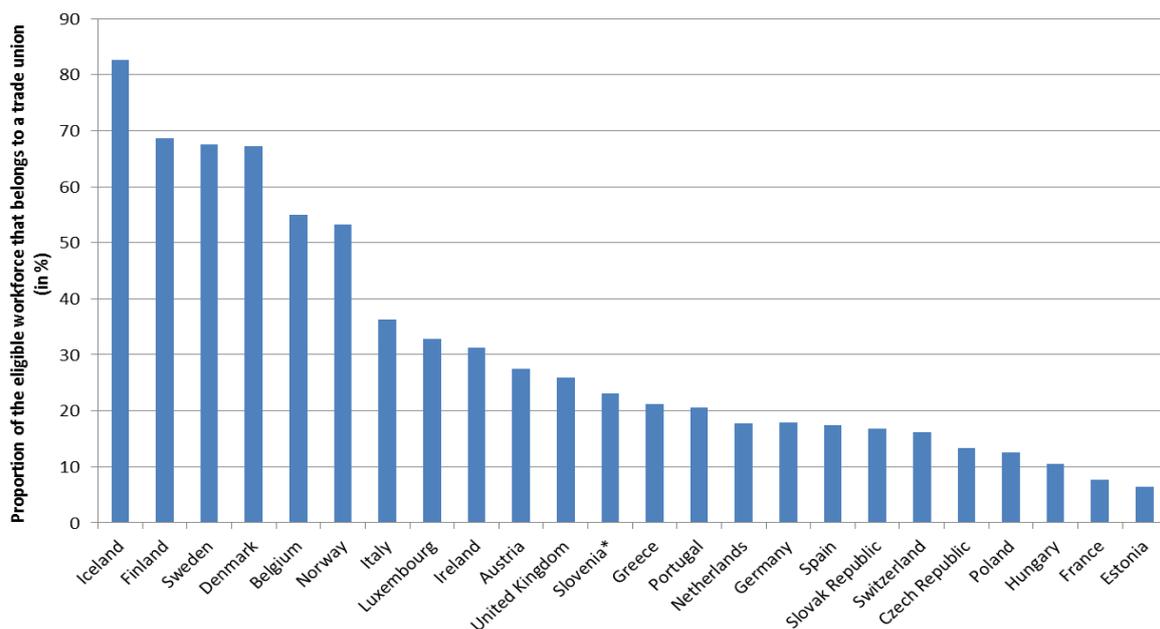
- the strength of social dialogue;
- the involvement of private or semi-private stakeholders;
- the existence of a tradition of collaboration among stakeholders.

▪ Social dialogue

Social dialogue, which is a mode of governance in the area of social policies, comprises consultations, negotiations, collective agreements and joint actions undertaken by social partner organisations. It enables federations of employers and workers to participate in social policy decision-making (Jain, 2013). The strength of social dialogue in European countries influences policy development and implementation processes, and should be considered a key determinant of the level of development of national policies that deal with the ageing of the workforce.

One of the indicators of the level of influence of social dialogue is trade union density, i.e. the total number of workers that belong to a trade union (as a proportion of the eligible workforce) (ILO, 2008). The graph in Figure 3-2 shows that trade union density is particularly high in the Nordic countries. Depending on the legal and institutional framework of a country however, union density does not always accurately reflect the actual influence of trade unions or social dialogue in general.

Figure 3-2, Trade union density in OECD countries in 2012



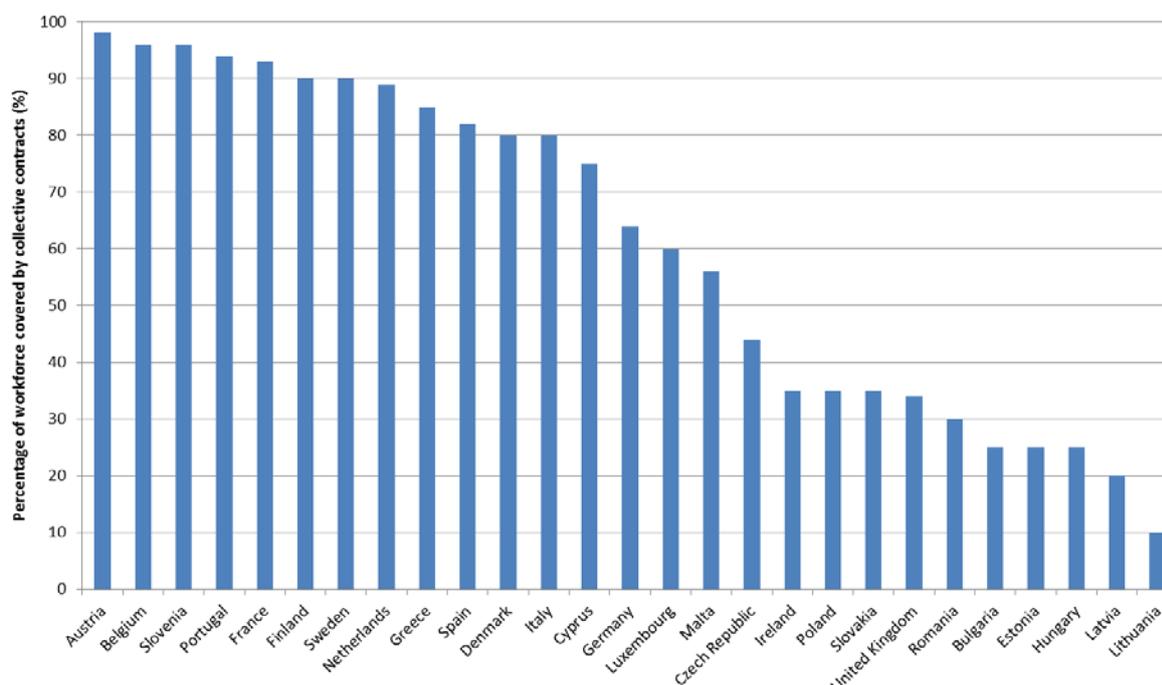
Source: OECD, 2015b.

* Trade union density in Slovenia is based on data from 2011.

Trade union density is not the only indicator that can be used to assess the level of social dialogue in countries. Collective-bargaining coverage, i.e. the percentage of the workforce covered by collective agreements, is an indicator of the degree to which wages and working conditions are regulated by collective agreements. It is a useful tool for measuring the regulatory influence of collective agreements in a country and therefore contributes to determining the extent of social dialogue. The rate of collective-bargaining coverage also depends on certain aspects of countries' institutional and legal frameworks, such as the degree of centralisation of bargaining structures and whether coverage extends to companies and workers that are not party to the agreement (ILO, 2008).

For instance, while trade union density is very low in France (around 8 %), social dialogue is considered strong because of very high levels of collective-bargaining coverage (93 % according to the European Trade Union Institute (ETUI)). Other countries that have relatively low trade union density rates but high levels of collective-bargaining coverage (according to ETUI) are Austria, the Netherlands, Portugal and Spain (see Figure 3-3).

Figure 3-3, Rates of collective-bargaining coverage in 2012 (%)



Source: ETUI, 2014.

Social dialogue in European countries has had an important influence on the development of innovated policies in relation to the ageing of the workforce. Stakeholders confirmed that social dialogue has helped to circumvent businesses' misconceptions about the potential 'burden' of an older workforce (e.g. in terms of loss of productivity and support needs) and to overcome trade unions' reluctance for working life extension, particularly at times of high youth unemployment.

In a number of countries, collective agreements have been adopted to support safer and healthier work at any age. In Belgium, France and Luxembourg, social partners have concluded similar national collective agreements over the past six years for the implementation of company action plans for the employment of older workers. These collective agreements support the countries' objectives to increase the employment rate of workers aged 55-64 as per the EU 2020 targets. In all three countries, the

agreements state that companies must put in place a number of measures to promote the employability of older workers, some of which relate to workers' health, working conditions, working time, skills and career development.

In France, a new national collective agreement was adopted in June 2014, refocusing companies' activities on a more holistic approach for enhanced quality of life at work, rather than targeting specific categories of workers. In Norway, the tripartite Inclusive Workplace Agreement encourages social partners to put forward age management policies in companies as a safety net against early retirement. In Germany, the Industrial Mining, Chemistry and Energy Union and the Chemical Employers' Association concluded a collective agreement in 2008 on Working Life and Demography, which, among other things, requires companies to develop age-appropriate work design, promote lifelong learning, and facilitate the transition between work and retirement (IG BCE, 2016).

However, because of recent economic developments and the intensification of work, the activities of social partners — in particular trade unions — have focused mostly on supporting employment and labour market participation (particularly for young workers), promoting better wages and combatting the degradation of working conditions. When social partners have taken an interest in the issue of demographic change and the ageing of the workforce, they have mostly supported the labour-market participation of older workers. Only a limited number of social partners in Europe (worker and employer representatives equally) have put in place activities that support safer and healthier working conditions to retain people at work.

▪ Involvement of other organisations

Other organisations can play an important role in the development and implementation of policies for safer and healthier work at any age. Non-institutional actors can have an important role in collecting, producing and disseminating knowledge on ageing and the consequences for work environments; training; and raising awareness among companies of the issue of age management. However, the level of influence that these organisations have depends on the support they receive from governments and the uptake of their work in national policies.

- *Occupational insurance organisations:* In many European countries, employers are required to take out insurance to protect their workers against the risk of occupational accidents. Occupational insurance systems in Europe, covering both accidents and diseases, vary in scope, organisational structure and payment rules depending on whether they are based on the Bismarckian (contribution-based) or Beveridgian (tax-financed) systems. In most European countries, occupational insurance is managed by public organisations, while in a few countries (Belgium, Denmark, Finland, the Netherlands, Spain and the UK) it is run by private insurance companies²³. Occupational insurance organisations, whether public or private, play an important role in promoting safety and health at work, as recognised by the stakeholders during the fieldwork for this review. First of all, occupational insurance organisations can provide financial incentives to companies to implement safer OSH management systems by linking premiums to the numbers/rates of occupational accidents. In addition, they often carry out research and prevention activities aimed at raising awareness about OSH risks; provide consulting services and training; conduct workplace interventions; and organise awards to reward innovative activities (Pecillo, 2013). In some countries, insurance organisations are responsible for providing disability pensions or benefits in cases of permanent work incapacity following an occupational accident or disease. The financial incentive for better prevention and rehabilitation is even greater for these organisations, which have organised activities aimed at promoting longer healthy working life.
- *Pension organisations:* In many Member States, old-age, early retirement and disability pensions are managed by separate public or private entities. In addition to managing the allocation of pensions, these organisations sometimes carry out activities to reduce early retirement or disability. In Finland, the largest earnings-related pension insurer and private

²³ In Belgium, Denmark, and Spain, occupational disease insurance is managed by a public entity.

investor, the Varma Mutual Pension Insurance company, produced a guidance document in 2006 on how to create and implement an age management programme for workplaces and, in 2011, a Good Work Ability Model to identify work ability-related issues early and implement solutions to address concerns before the development of serious health problems. In Austria, the development of the Fit for the Future programme involved close collaboration with the Pension Insurance Organisation.

- *OSH research organisations:* A wide range of countries have set up specific national research centres or organisations that focus on OSH, some of which have researched prevention activities related to OSH in the context of an ageing workforce. In Finland, the Finnish Institute of Occupational Health has developed a number of tools and programmes to support the government policy on lengthening working careers, such as the training programme 'Age power to work'; the 'Age key' questionnaire to support companies with the implementation of age-management policies; and the 'Career pioneer' tool, specifically designed for HR and OSH professionals to support career development in companies. In France, the research centre on work experience, age and working populations (CREAPT) conducts specific studies for enterprises and public institutions, jointly analysing the demographic evolutions of populations at the workplace and the transformations that take place in companies, including those affecting careers.
- *Employment agencies:* Older people are a particularly vulnerable population when it comes to unemployment, as older unemployed people are more likely to fall into long-term unemployment than younger people (EC, 2012e). In most European countries, the main instrument to increase the employment rate of older workers is to help unemployed older workers find work (see [Chapter 4](#)). In this regard, employment agencies, public or private, have an important role to play and, in many countries, they are setting up initiatives or incentives to encourage the labour market participation of older workers. In Austria, the Public Employment Service (AMS) provides financial support to employers who hire workers aged 45 years and above, and offers financial incentives to older workers to remain in part-time employment rather than leave work completely. In Belgium, the Brussels Employment Office, Actiris, provides support to companies who wish to establish a 'diversity plan' to promote the employment of more vulnerable categories of workers, including older workers and workers with disabilities.
- *NGOs and think-tanks:* These are the most numerous and diverse organisations active in the field of ageing in relation to OSH, public health, education, etc. Many NGOs have developed tools and guidance for employers and workers; for example, in the Czech Republic, the Association of Adult Education Institutions has developed a methodological guide on age management. NGOs can also provide direct support to companies through training, workplace assessment or consultancy services. TAEN in the UK offers an age-management consultancy service to employers that covers workforce assessments; surveys; age strategy and policy development; disability and older workers; and health and well-being. NGOs and think-tanks also have a lobbying agenda, with organisations such as the Institution of Occupational Safety and Health (UK) and the Ageing Well Network (Ireland) working to reframe the agenda on ageing and to support better planning and action for older workers.
- *Universities:* These often participate in data collection and dissemination on aspects of ageing. Every two years, Trinity College Dublin leads the Irish Longitudinal Study on Ageing, TILDA, collecting information on all aspects of health, economic and social circumstances (from over 8,500 people aged 50 years or over and living in Ireland). In the Netherlands, between 2010 and 2013, TNO, the Erasmus Medical Centre and the VU University Medical Centre carried out a 'Study on Transitions in Employment, Ability and Motivation'. **Other research organisations** also aim to improve knowledge, identify best practices and develop tools to combine research with practical implementation. In the Netherlands, the Innovative at Work Knowledge Centre develops forums for knowledge exchange and subsidises projects in the workplace which focus on innovation, employability, motivation and increasing the diversity of workers.
- *Business organisations and private companies:* Business organisations can provide information and tools to companies. For example, in Greece, the Hellenic Network for Corporate Social

Responsibility published a good practice guide on the employment of older workers. Private companies can provide services to facilitate employment of older workers. The HR company Opteam in Finland has set up the Opteam Nestor service to provide flexible work to retired people, either in their most recent company or in other companies. Opteam Nestor also proposes to set up an employment bank so that companies can make use of retired staff on a needs basis. In Poland, the company HRP Group, in collaboration with the University of Lodz, developed a communication/awareness-raising programme to enhance knowledge, among employers and HR managers, of age management.

- **Cooperation across policy areas and among different stakeholders**

The level of cooperation among stakeholders in OSH- and demography-related matters differs widely across Europe.

In a few countries, the development of OSH policies is managed almost entirely by relevant OSH authorities, with limited involvement or cooperation from other authorities or stakeholders. Similarly, the development of policies related to demographic change, for instance from a social security or public health perspective, does not involve OSH actors. Tripartite cooperation usually takes place within the ordinary general structures (e.g. the Economic Social Council) or in specialised labour/OSH structures. However, most of these are of a consultative character. Stakeholders in Poland highlighted the lack of coordination between occupational hygiene and work safety, at both national and company levels, as detrimental to the success of any initiative targeting older workers.

In a relatively large number of European countries, the development of relevant policies to address demographic change is grounded on cooperation across policy areas. Employment policies for an ageing workforce frequently integrate health-related considerations. This cooperation across different policy areas is strongest in the handful of countries that have developed integrated frameworks to address the challenges and opportunities of an ageing workforce. The Finnish National Working Life Development Strategy to 2020, the Dutch Sustainable Employability campaign, the German Demography Strategy and the UK Health, Work and Wellbeing initiative were all developed on the basis of cooperation across different policy areas and among different actors. They address the economic, social and health aspects of an ageing workforce and a longer working life (for more details, see [Chapter 4](#)).

At the institutional level, multidisciplinary advisory committees are starting to appear, or the creation of such structures is being discussed. For example, in Luxembourg, new legislation with a focus on the employment of older workers is currently under discussion. As part of this new bill, the creation of a 'Committee for the analysis and promotion of working conditions' has been proposed, which would be a multidisciplinary service to advise companies and employees on reducing work-related health problems. In addition, institutional cooperation also takes place across different levels of governance (e.g. national, regional and local). For instance, in Belgium, the Flanders region is very active in supporting the implementation of federal policies or initiatives related to diversity management at the workplace.

Cooperation can be ad hoc, i.e. for the purpose of one specific initiative, or it may be enshrined in a long-term perspective. In a number of countries, the long-standing tradition of policy-making and policy implementation requires intensive cooperation among public and private stakeholders. For cooperation to be effective, it is important that one institution or policy area leads the process, in order to provide overall direction and guidance. In Finland for instance, the National Working Life Development Strategy to 2020 is led by the Ministry of Employment and the Economy, supported by the Ministry of Health and Social Affairs and the Ministry of Education.

Workshop participants have frequently commented on the need for greater cooperation across policy areas and among different types of stakeholders. If this cooperation is lacking, initiatives risk being less visible. Stakeholders in France emphasised the need to capitalise on existing initiatives and reinforce the coherence of the overall framework, thereby also raising its profile.

4 Policy development in European countries in order to deal with the challenges of an ageing workforce

4.1 Country clusters: introduction and methodology

European countries have developed a variety of policies, programmes and initiatives in the fields of employment, social affairs, public health, social justice and vocational education to address the challenges posed by an ageing workforce and the need to extend working life. The analysis of the countries' policy development, the relevant national policies, strategies, programmes and initiatives implemented in the area of employment, public health, social security, education, anti-discrimination, and in particular working conditions and OSH, allowed the grouping of countries into four clusters based on a number of criteria.

The analysis focuses on policy development in relation to active ageing in European countries, the main characteristics and elements of the policies put in place, and the main factors influencing policy development and implementation, as discussed in [Chapter 3](#).

The grouping is based on selected qualitative indicators. The indicators relate to the scope and overall orientation of the policies implemented, the level of coordination across policy areas and among stakeholders, and the effectiveness of the implementation.

The countries covered in the grouping include the 28 EU Member States and three EEA countries (Iceland, Norway and Switzerland). Although Lichtenstein was originally included, the information collected was too limited to allow its inclusion in any of the groups.

Country-specific information is presented in national reports, which have been published in the framework of the project Safer and Healthier Work at Any Age²⁴.

The four groups are presented in Figure 4-1.

Figure 4-1, Four country clusters based on policy development in the context of an ageing workforce



²⁴ Country-specific information is presented in national reports, which have been published in the framework of the project Safer and Healthier Work at Any Age (see EU-OSHA 2016e)

4.2 Country clusters

- **Group 1:**

Group 1 consists of Croatia, Cyprus, Greece, Iceland, Lithuania and Romania (Figure 4-2)).

Figure 4-2, Group 1 countries



Context

This group is diverse in terms of population ageing and economic situation. These countries were hit hard by the economic crisis, and some of them still suffer from the consequences, such as high unemployment and poverty, explaining the different focus for policy development. A shared characteristic of the majority of countries in this group is the steep increase in youth unemployment rate that occurred between 2005 and 2014. In particular, in Cyprus, Croatia and Greece, youth unemployment increased by more than 20 pp (20.3 pp in Croatia, 25.8 pp in Cyprus and 29.7 pp in Greece) (see Figure 3-1 in [Chapter 3](#)), and in Lithuania it increased by 10.9 pp (compared with the EU average increase in youth unemployment over this period of 6.3 pp).

Some of the Group 1 countries, such as Iceland and Cyprus, have a relatively young population. However, while the median age of the Icelandic population is projected to still be much lower (39.5 years) in 2040 than the EU average (46.4 years), the median age of the population in Cyprus (45.8 years) is projected to almost reach the EU average by 2040.

By 2040, all of the other countries are expected to have a median age above the EU average.

Finally, in four of these six countries, there is little difference between official and effective retirement ages (see

Figure 2-7 in [Chapter 2](#)). In Iceland and Romania, people even work beyond official retirement age, suggesting the need to limit early exit from the labour market may not be as strong in these countries. In Greece and Croatia, the large difference (more than four years) between effective and official

retirement ages can be partly explained by the drastic (and immediate) increase in the official retirement age for men as part of the austerity measures for fiscal consolidation. Iceland is a particular case in this group: the effective retirement age is higher than the official retirement age, and the employment rate of older people is very high.

Policy development

The common feature among these countries with regard to policy development is that population and workforce ageing and the related challenges for workplaces have not been the main priorities either because of their relatively young populations or because of high unemployment, in particular youth unemployment. Therefore, decreasing youth unemployment and unemployment in general have become major political and economic priorities in most of these countries.

However, pension reforms have been carried out in all of these countries, and in countries with an older population, the focus is on increasing the labour market participation of older people by raising the retirement age and restricting access to early retirement, as well as economic incentives to employ older people.

Employment and socio-economic policies

Employment and socio-economic policies related to the older working population aim to increase the labour participation of people aged 50 years and over. The first instruments used to achieve this were reforms of pension systems, including increasing the statutory retirement age but also removing early exit mechanisms (see [Chapter 2](#) for a more detailed analysis of pension reforms in Europe). Pension reforms have usually gone hand in hand with the implementation of active labour market policy (ALMP) measures, targeting either employers or workers or both. The most common measures in place in these countries are economic incentives for employers to hire vulnerable categories of workers, including people with disabilities and older people, e.g. through wage subsidies or social security and tax reductions schemes. Other forms of support for unemployed older workers include subsidised job programmes or job-search programmes.

Measures to encourage the labour participation of older workers

- In Croatia, since January 2013, an employment subsidy has been awarded to employers who hire workers over the age of 50 years who have been unemployed for 12 months. This amounts to 50 % of the annual gross salary for that worker. Subsidies are also awarded during the first year to employers that hire part-time older workers and to workers over 50 years who decide to start their own businesses.
- In Cyprus, financial assistance is provided to employers to recruit unemployed people, people with disabilities and, more generally, 'disadvantaged' individuals (which includes people over 50 years). Similar subsidy schemes exist in Romania for employers who hire unemployed workers over 45 years, or workers who have at most three years left before reaching the retirement age.
- Greece has a two-year programme to subsidise companies that hire women over 45 years of age, paying up to 80 % of monthly insurance contributions.
- In 2006, Lithuania created the Bank of Seniors, an online database that connects older or retired job seekers and potential employers.

Most of these measures focus on the reintegration of unemployed people into the labour market rather than the retention of workers. Limited attention is paid to the workplace and individual factors that also

play a role in the retention of workers in the labour market.

A few exceptions can be found in Romania. First of all, the possibility for people to combine pension revenues and work revenues constitutes a financial incentive for individuals to continue working beyond retirement age. As discussed previously, financial aspects are an important part of individual motivational factors to keep working, particularly in lower-than-average income countries (see [Chapter 2](#)). In addition, the National Strategy for Employment for 2013-2020 foresees the implementation of measures to ensure that older people have access to flexible forms of work organisation and knowledge transfer initiatives (e.g. mentoring programmes).

In Iceland, active labour-market policies focus mostly on young workers and the long-term unemployed, regardless of age, because the employment rate of older workers is quite high and the population is relatively young compared with other European countries. However, the Icelandic Government has been monitoring the situation, and launched the '50+ project' in 2005 to examine the status of older workers and demographic trends in Iceland.

Active ageing policies

In a number of cases, relevant measures for the retention of people in the labour market are not found in employment policies but are part of broader active ageing policies, the development of which was highly influenced by the 2012 European Year of Active Ageing. These adopt a broader and more integrated perspective to the question of population ageing, addressing aspects of health, social equality, lifelong learning, and participation in society. In a few cases, these policies address some of the factors that play a role in older people's participation at work. Most of the time however, active ageing strategies and programmes established in these countries tend to focus on post-retirement lives.

Work-related measures in 'active ageing' policies

- The 'Ten-year action plan for older people 2005-2015' of Cyprus foresees the development of lifelong learning programmes for older workers.
- The Greek '**Roadmap of active ageing**' in Greece 2012-2020' supports the promotion of age management practices towards business owners and HR managers.

OSH and health policies

OSH policies and strategies in the countries of this group pay only limited attention to the implications of an ageing workforce for workplaces, workplace adaptations, and vocational rehabilitation and return to work and disability at work.

The OSH legislation in these countries reflect the requirements of the EU OSH Framework Directive and therefore covers older workers by default, as part of the overall working population. In certain cases — inspired by Article 15 of the EU Directive, which refers to 'particularly sensitive risk groups' — older workers are mentioned in national OSH policies and strategies as a specific vulnerable group of workers. For example, in Croatia, the National Programme on Health Protection and Safety at Work for the period 2009-2013 aims to reduce the number of early retirements and refers older workers as a special category. While OSH strategies may refer to the demographic change and the ageing of the workforce as a future policy challenge, they do so at a general level, and this is not translated in concrete objectives, programmes and specific initiatives.

Finally, limited mainstreaming takes place between OSH and other policy areas. In particular, public health policies related to the ageing of the population rarely refer to the influence of working conditions on the health status of the older population.

Reference to health promotion in OSH policies and strategies

- In Cyprus, the Action Plan for the establishment and operation of a Workers Health Surveillance System requires the introduction of the principle of health promotion at work.
- In Romania, the National Strategy for Occupational Health and Safety 2008-2013 refers to WHP in a general manner.
- In Greece, the National Strategy for Safety and Health at Work 2010-2013 includes the enhancement of WHP in SMEs as a broad objective.

Anti-discrimination policies

Beyond the existence of a national legal framework related to discrimination in employment, including on the grounds of age and disability (see section 3.3.2), the only initiatives related to age discrimination identified in these countries are carried out by non-institutional actors.

Policy implementation

There are some sporadic one-off initiatives and projects that address the ageing of the workforce by governments, which, in general, target a specific issue, sector or industry, and, in some cases, are triggered by EYAA 2012. In Cyprus, for instance, the Department of Public Works of the Ministry of Communication and Works has implemented specific actions to promote the well-being of their older staff, e.g. through the re-assignment of work in the event of incapacity to perform previous work, allowing hazardous tasks to be avoided, providing more frequent breaks and promotion to supervisory positions. In Greece, the Economic and Social Committee recently implemented a number of projects, financed by the ESF, related to the management of active ageing in companies.

Social partners, professional organisations and research institutes have also increasingly shown interest in the topic and there have been isolated projects or campaigns addressing various issues, such as increasing workers' skills and competencies, age discrimination and disability prevention. In Romania, for instance, the Bucharest Chamber of Commerce and Industry has started a vocational-training programme for older workers — on improving the conditions for older workers. In Romania and Cyprus, social partners have led communication campaigns aimed at changing companies' attitudes towards ageing, while in Lithuania, the Trade Union Confederation implemented a project to reduce the exclusion of older people by promoting their participation.

In Lithuania, the Occupational Health Centre is carrying out the project 'Professional Patient History and Physical Health Problems in Interface with the Work', which focuses on preventing disability and ultimately maintaining work ability throughout the working life. Stakeholder interest for these issues is usually limited and cooperation among institutional and non-institutional stakeholders is poor.

Finally, support to employers is mostly limited to financial incentives to hire older workers, and there is little or no financial incentive or technical support (e.g. guidance) to implement adequate workplace measures that address the needs of an ageing workforce.

- **Group 2**

Group 2 consists of Bulgaria, the Czech Republic, Estonia, Hungary, Ireland, Italy, Latvia, Luxembourg, Malta, Poland, Portugal, Slovakia, Slovenia, Spain and Switzerland (Figure 4-3).

Figure 4-3, Group 2 countries



Context

This group is large and very diverse as regards demographic development and economic situation, and includes countries such as Ireland, which has one of the youngest populations in Europe, and Italy, which has one of the oldest. Some of the countries, such as the Czech Republic, Estonia, Hungary, Poland and Slovakia, had a relatively young population until recently but will be facing rapid ageing in the coming decades, with the OADR projected to more or less double by 2060.

Bulgaria, Italy, Latvia, Portugal, Slovenia and Spain are already 'older' than the EU average and their populations will continue to age fast, with Portugal and Spain predicted to have the highest median age in the EU in 2040. On the other hand, Ireland, Italy, Luxembourg, Malta and Switzerland are already 'over the peak' of population ageing, meaning that their populations will continue to age but at a slower rate.

Many of these countries have also been badly hit by the economic crisis and have experienced high unemployment, particularly among young people. In 2013, the unemployment rate of people younger than 25 years was more than 20 % in two thirds of the countries in this group, i.e. Bulgaria, Hungary, Ireland, Italy, Luxembourg, Poland, Portugal, Slovenia, Slovakia and Spain. As a consequence, youth unemployment has been high on the political agenda and has taken priority over other employment policies.

Finally, the gap between effective and official retirement ages varies among these countries (see

Figure 2-7 in [Chapter 2](#)). In the majority of countries, the difference is limited (one to two years) or non-existent. In Estonia, Latvia, Portugal and Switzerland, men often even work beyond official retirement age. In others, such as Luxembourg and Italy, early retirement is more common. In Luxembourg in 2012, men retired, on average, 7.4 years earlier than the official retirement age.

Policy development

With regard to policy development, all of these countries' policies related to workforce ageing have mainly focused on increasing older workers' labour market participation through pension reforms and active labour market policy measures, but their policies also include elements to address working conditions and OSH, training and lifelong learning, or the employability of older workers. Rehabilitation systems mostly focus on people with disabilities or, in certain cases, people who have experienced an occupational accident or illness, and their scope is, in general, limited to medical rehabilitation. Some cross-policy work takes place, although it remains limited.

Employment policies

Although employment policies mainly focus on decreasing unemployment rates and increasing labour participation for people over the age of 50, ensuring the employability of older people to extend working life is emerging as an objective. In general, this entails initiatives that focus on changing attitudes towards older people, and promoting skills development and lifelong learning.

Employment policies that address broader issues

- In Poland, the programme '50+ Solidarity across generations' aims to increase the economic activity of people over 50 years of age through a variety of measures and incentives, including improving qualifications and skills and changing employers' attitudes and perceptions of older workers. The programme also includes measures related to the transfer of knowledge between younger and older workers.
- Spain's General Strategy for the Employment of Older Workers (Strategy 55+) includes a dimension on improving working conditions for older workers.
- The government of Luxembourg, following the example set by France (see section 4.4), is currently discussing a new bill to compel companies that employ more than 150 workers to negotiate an action plan for age management, addressing the issues of working time, work-life balance and the working conditions of older workers.
- Bulgaria incorporated the maintenance of 'work ability' into its National Action Plan for Employment 2013, and has included strategic priorities that relate to improving OSH for ageing workers in its updated Employment Strategy 2013-2020.

Active ageing policies

The active ageing concept has appeared in policies on ageing in these countries, although most of the emphasis has been on the employment and productive lives element of this concept and less emphasis has been given to the health and well-being aspects. The 2012 European Year of Active Ageing gave a new push to the spread of the concept and triggered numerous initiatives, and although the focus of these initiatives has frequently been on the post-retirement population, independent living and participation in society, some of the countries have also addressed work-related issues, health promotion and life-long learning, as well as awareness-raising campaigns to change perceptions and attitudes in relation to ageing at work.

Work-related measures in 'active ageing' policies

- In Ireland, the New Agenda on Ageing includes a section on older workers and describes an 'age-friendly' workplace.
- Also in Ireland, the National Positive Ageing Strategy promotes activities against age discrimination and age-related stereotypes.
- In Slovakia, the National Programme for Active Ageing 2014-2020 has as an objective to increase the safety of working environments and protect the health of employees above the age of 50 through the conduction of thorough labour inspections every two years. It also sets an objective to prevent discrimination of older workers and organise the training of labour inspectors to identify age discrimination at the workplace.
- In the Czech Republic, the National Programme for Support to Active Ageing for the years 2013-2017 is based on a holistic approach to ageing and mentions the need to further develop the idea of 'age-management strategies' in Czech companies.
- In Italy, the 2012 National Programme to promote an active, vital and dignified ageing in a solidarity-based society sets out a range of activities targeted at the older working population, in particular focusing on lifelong learning and knowledge transfer.

OSH and health policies

Most national OSH policies and strategies in this group explicitly refer to — and acknowledge — the challenge of an ageing working population and the importance of taking specific action for older workers. The older age group is often considered as a 'vulnerable' category of workers.

Age-related aspects in OSH policies and strategies

- In Bulgaria, the National Strategy for Health and Safety at Work 2008-2012 considers the challenge of population ageing and recognises that specific measures for improving safety and health at work, both for young people and people aged 55-64 years, are very important for extending working life.
- In Portugal, the National Strategy for Health and Safety at Work for the period 2008-2012 and the National Plan of Occupational Health 2013-2017 perceive older workers as the most vulnerable group of workers. The National Plan considers risk factors and health problems (in particular mental health and MSDs) that are related to ageing in the work context as priority area for research.
- In Malta, the National Strategy for Health and Safety at Work 2008-2012 identified old age as a factor of vulnerability and an emerging risk.
- In Italy, specific provisions for older workers are not included in the national strategy, but are included in the legal framework for OSH (legislative decree 81/2008). Age-related criteria are applied to the frequency of medical examinations or to the performance of certain arduous tasks. In addition, the work capacity of older workers should be regularly checked.

Broader concepts reflecting a more holistic approach to OSH — such as 'well-being at work', 'work ability' and 'WHP' — are increasingly present in the policy discourse, although these concepts are not usually translated into specific measures or activities. They therefore mainly demonstrate a qualitative change to the policy-making mind-set. An example of an exception is the uptake in some countries of the work ability concept accompanied by the use of the Work Ability Index.

Use of broader concepts in OSH policy-making

- In Estonia, the Occupational Health and Safety Strategy 2010-2013 adopted a comprehensive approach to well-being at work and introduced the goal of sustaining and promoting workers' health and their ability to work.
- An early intervention and prevention culture that enables a longer working life was promoted through Latvia's National Health and Safety Strategy (2008-2013), in which ensuring the ability to work is a general and overarching objective.
- Hungary organised a nationwide Work Ability Index survey for ageing workers in various sectors as part of its Social Renewal Operational Programme for the 2007-2013 period. The intention was to use the results to provide input for future policy-making.

Reforms of sickness and disability benefit schemes have taken place in some of these countries. In some cases, such as in Hungary or Estonia, this has led to a different approach to the assessment of working capacity, focusing more on remaining abilities. In Italy, Luxembourg and Switzerland, the framework for rehabilitation and return-to-work is well advanced, although coordination across the different steps of the return-to-work process is still limited. In all other countries in the group, support mechanisms for rehabilitation and return-to-work are limited to people with a recognised disability or with an occupational disease or injury, and medical rehabilitation²⁵.

Finally, public health policies in these countries increasingly recognise the impact of work on health and the role of workplaces in promoting healthy lifestyles, and encourage workplace health promotion.

Reference to the impact of work and working conditions on health in public health policies

- In 2012, Estonia incorporated targets for health prevention at work into the National Health Development Plan 2009-2020.
- In Hungary, one of the aims of the 2003 National Programme of the Decade of Health was the development of WHP activities.
- The Latvian Public Health Strategy for 2011-2017 perceives OSH as a health determinant and includes references to the National Health and Safety Strategy.

Anti-discrimination policies

Anti-discrimination measures are mostly based on the EU legal framework on equal treatment in employment. In some countries, policies or initiatives to reduce discrimination towards people with disabilities include measures for the adaptation of workplaces and the provision of special equipment. Although they target a specific population group, such initiatives contribute to the development of more inclusive and adaptive workplaces.

Effectiveness of policies

There is limited information on the impacts of the various policies as most are quite recent. In addition, many have not led to the adoption of concrete measures.

One initiative that was evaluated is the Polish programme '50+ Solidarity across generations' mentioned

²⁵ For more information, see the report 'Rehabilitation and return to work: Analysis report on EU and Member States policies, strategies and programmes' produced as part of the project 'Safer and Healthier Work at Any Age' (see 2016a)

above. The programme, run by the Polish Ministry of Labour and Social Affairs since 2008, aims to increase the economic activity of people over the age of 50 through a variety of measures, including the improvement of qualifications and skills of older workers. According to the government, the programme has produced good results, such as increasing the average effective age of retirement (from 57 to 59 years between 2008 and 2011) and the employment rate for people aged 55 to 64 years (from 31.6 % in 2008 and 34 % in 2011) (Central Europe Ageing Platform, 2011).

Policy implementation

Governmental actors have launched a number of specific initiatives complementing the policies described above, in some cases financially supported by the ESF. The scope of the activities include:

- raising the awareness of workers, employers and intermediaries with regard to age at work, with a view to changing perceptions and attitudes;
- providing tools to workplace actors (management, HR, OSH professionals) to take concrete measures, e.g. to implement 'age management' practices;
- providing financial resources to workplaces, in particular small and micro companies.

Activities of governmental stakeholders

National level:

- In Malta, the Occupational Health and Safety Authority will launch an awareness-raising campaign and provide information and tools to companies, including SMEs, to deal with the challenges related to an ageing workforce.
- In Poland in 2008, the Ministry of Labour and Social Affairs launched the 50+ Solidarity Across Generations employment programme, one of the objectives of which was to increase employers' interest and motivation to hire older workers.
- In Portugal, the Institute of Employment and Professional Training runs a career-management programme designed to retain older workers through efficient management of their careers.
- In the Czech Republic, the Ministry of Labour and Social Affairs, in coordination with the 'Business for Society' platform, established an award scheme to recognise and reward companies that implement good age management and OSH practices.
- In Bulgaria, the Social Innovation in Enterprises programme, co-financed by the ESF, supports the implementation of flexible forms of employment (working time, job rotation) and measures to increase the work ability of people over 55 years of age.
- Italy, concerned by its high youth unemployment rates, has focused on generation management and the transmission of knowledge. The Generation Handover mechanism, also co-financed by the ESF, enables employers to hire a young person while keeping an older worker through the use of flexible contracts and the guarantee of unchanged pension rights.

Regional level:

- In Spain, the Basque Innovation Agency published a 'Guide for age management in organisations of Euskadi' in 2013, including examples of good practice from all over the world.
- In Switzerland, in 2011, the Canton of Aargau launched a two-year campaign called Potenzial 50+ to raise awareness among employers and the general public of the challenges and opportunities of an older workforce.

Most of the governmental initiatives described above originate from the ‘employment’ policy area and limited coordination takes place with other relevant policy areas, such as public health, education and justice. In addition, in many countries of the group, mostly from Central and Eastern Europe, OSH is a competence shared between the Ministry of Employment, which is responsible for questions of employment protection, working conditions, labour law, and safety issues, and the Ministry of Health, which is responsible for occupational health. This makes it difficult to have a multi-dimensional approach to work-related issues.

Social partner — general and sectoral — initiatives in general appear to be relatively limited in this field. In the eastern European countries, social dialogue has been relatively immature and weak at all levels, and its role in OSH and issues related to working conditions has not been significant.

Other stakeholders, such as NGOs, universities and research centres, or chambers of commerce, have also taken an interest in the topic of demographic change and are working to influence the political agenda on this issue. Some organisations are supported in this work by EU-wide networks, which provide them with a platform for knowledge sharing and exchanges of experience, and, in some cases, funding opportunities, e.g. the European Network for Workplace Health Promotion (ENWHP) and its affiliated national members. Outside these networks, most organisations in these countries who are active in the field of age and employment work in relative isolation, which can reduce the effectiveness of their actions. In many of the countries of this group, companies have been critical actors in introducing new approaches in HR management that take into account workforce ageing. In some cases, businesses have developed their own policies and practices to accommodate their own situations. In particular, if supported by external sources of funding, such as the ESF, many companies have started to adopt age management practices²⁶.

Activities of non-governmental stakeholders

Social partners:

- In Slovenia, social partners have played a role in awareness-raising activities concerning the ageing workforce. For instance, in 2007, the Association of Employers of Slovenia participated in the international Ageing Workforce project to raise awareness of the challenges of an ageing workforce among employers and the general public.
- In Spain, FEMEVAL developed the Age Management in the Metal–Mechanical Industry initiative, which provides advice and guidance, information, training, needs assessments and services to develop action plans in the area of age management. Based on the outcomes, a good practice guide was published, identifying a number of key issues in age management.
- An age-management guide, ‘Age Management for 50+ Workers’, targeting employers has been developed by Czech trade unions and the Association of Adult Education Institutions, with the financial support of the ESF.

Other stakeholders:

- The Estonian Network for Workplace Health Promotion carried out several activities concerning the adaptation of workplaces.
- The Hungarian Forum for Workplace Health Promotion grants ‘Health-friendly Workplace’ labels and ‘Health-friendly NGO’ awards.
- In Poland, the University of Lodz set up a project to enhance knowledge on age management among employers and HR managers.
- In Italy, the non-profit L’Incontro initiative recruits maintenance workers, recently retired or on flexible working arrangements, from the region’s local industries to work as instructors in job

²⁶ For more examples of workplace practices related to the ageing workforce, see the report *Safer and healthier work at any age: an analysis of workplace good practice and needs for support*, produced as part of this project (EU OSHA, 2016f)

centres.

- In Ireland, age-related initiatives have been launched by NGOs, such as the Ageing Well Network and the charity Age Action, and the Irish Chamber of Commerce has published a handbook on employing older workers.

- **Group 3**

The third group of countries consists of Austria, Belgium, France, Norway and the UK (Figure 4-4).

Figure 4-4, Group 3 countries



Context

Countries in this group have relatively old populations. They went through phases of rapid population ageing in the 1990s and 2000s, but are today past the peak rate of ageing. Austria is the only country in this group whose median age was still above the EU average in 2013, while Belgium and France are below, but still quite close to it. The economic crisis has not affected these countries in terms of unemployment as badly as the countries of Groups 1 and 2. For all the countries of this group, youth unemployment increased by less than 5 pp between 2005 and 2014. In France and Belgium, however, youth unemployment was still more than 20 % in 2014, somewhat above the EU average.

The gap between official and effective retirement ages gives rise for concern, particularly for France, Austria and Belgium, where early retirement is quite common and the employment rate of 55 to 64 year olds is relatively low. Increasing the labour participation of older people has been an important objective of socio-economic policies over the past decade. France and Belgium have sought solutions that link youth employment with the employment of older workers to reduce the apparent contradictions between these competing needs.

Policy development

Population and workforce ageing and the related challenges are a policy priority in these countries. There have been initiatives in several policy areas covering employment, public health, education and OSH. The roles of working conditions and OSH in prolonging working life have been recognised, and these countries have developed comprehensive measures to promote the employability of older workers and address working conditions and safety and health at work in a holistic way, including through the promotion of vocational rehabilitation and return to work. Concepts such as 'age management' and 'work ability' are frequently referred to in policy documents.

Employment policies

These countries have adopted a number of employment policies or initiatives to extend working life. In addition to improving the integration of older people into the labour market — through the measures discussed previously, e.g. economic subsidies and awareness-raising campaigns to fight age discrimination — these countries have also been looking at factors that improve the retention of older workers in the labour market, including individual factors (financial motivations, health, skills and career development) and workplace factors (working conditions and work organisation).

Employment policies or initiatives that address broader issues

- In France, the 2009 National Action Plan for the Employment of Older Workers requires companies of a certain size to conclude agreements on the employment of older workers. The agreements must cover at least three of the six dimensions, including improvement of working conditions and risk prevention, skill development and career development.
- In Belgium, the 2012 Action Plan for the Employment of Older Workers (initiated by social partners), similar to the French Action Plan described above, also promotes age management in companies by addressing a variety of factors from recruitment to the adaptation of working conditions and career management.
- In Austria, the Austrian Public Employment Service has implemented a number of measures to promote the sustainable employment of older workers, including through the use of subsidised training programmes for people over the age of 45 and the promotion of part-time employment.
- In Norway, the Centre for Senior Policies was created in 2002 to mobilise and unite efforts for the implementation of measures and initiatives for an ageing workforce. Its main activities include raising awareness among employers and employees of older workers' resources, advocating what is needed to motivate workers to stay longer at work and promoting age diversity in the workplace.

OSH policies and strategies often identify older workers as a group that requires special attention or as a vulnerable group.

Age-related considerations in OSH strategies

- The former Belgian National Strategy for Wellbeing at Work 2008-2012 mentioned older workers as a new risk group that requires particular attention.
- In France, the National Plan for Health at Work for the 2010-2014 period included an objective related to the safety and health of older workers, acknowledging the need to implement actions concerning work organisation and working time, the adaptation of workplaces and

Age-related considerations in OSH strategies

professional re-orientation.

- Norway's 'White Paper on Joint Responsibility for a Good and Decent Working Life' considers older workers in specific cases, e.g. when addressing the issue of working time and the need to develop more flexible working schemes that allow older workers to work until retirement age.

Recently, OSH policies and strategies have evolved, moving from a focus on older workers as a category of 'vulnerable' workers to broader considerations of what constitutes sustainable work and the interactions between health and work in a life-course perspective. In Belgium, the evaluation of the National Strategy for Wellbeing at Work 2008-2012 indicated that any future strategy should include, as a first strategic objective, the promotion of sustainable employability. This is described as making it possible for each individual to integrate, stay at or go back to work in good health throughout their working life. The next strategy has not yet been adopted. In the UK, the latest strategy, 'The Health and Safety of Great Britain', which calls on everyone to 'be part of the solution', includes, as a key issue, the management of the interfaces between work and the other factors that may affect a person's health.

The French National Plan for Health at Work 2016-2020 emphasises the need to consider the links between health and work in an integrated manner in the context of population ageing, and promotes the concept of 'quality of life at work', in line with the national tripartite agreement of 2014 (see below). One of its operational objectives focuses on the risks of exclusion from the labour market (*désinsertion professionnelle*) because of health reasons and recommends the implementation of improved return-to-work mechanisms. Finally, it promotes the coordination of all relevant actors in the fields of employment, OSH and public health, in order to achieve the objectives of the plan.

In addition, in Austria, Norway and the UK, an increasing emphasis is put on the management of sickness absence and on early intervention to support more effective return-to-work. In the UK, the cross-government 'Health, Work and Wellbeing' initiative, launched in 2005, aims to improve the general health and well-being of the working age population, in order to help more people with health conditions and reduced work ability to remain in work or enter employment, and to reduce the number of days lost to sickness absence. In Austria, the national programme 'fit2work', in place since 2012, aims to prevent job loss for health reasons, by avoiding sickness absence (e.g. by providing tools to workers to manage a chronic illness at work) and by supporting early return to work when sickness absence does occur.

Finally, in most of these countries, major efforts have also been made to change public perceptions of the relationships between age and work. These efforts have mostly targeted employers, but in Austria, Belgium and France, a culture of early retirement exists and governments have been working to change attitudes towards the extension of working life.

Changing attitudes and behaviours

- One of the primary objectives of the activities carried out by the Centre for Senior Policies in Norway is awareness raising and dispelling persistent myths about older workers. It disseminates the results from research, which shows, for instance, that older workers are not more likely to be absent from work because of health issues; they have a strong potential for learning and acquiring new skills; and they can use their experience to provide guidance and leadership.
- In Belgium, in 2012, the Federal Public Service Employment, Labour and Social Dialogue launched an awareness-raising campaign called 'Still young, already old at work' which included television coverage, advertisements in newspapers and an information website. It aimed to counter misconceptions of employers and workers on the employment of workers

Changing attitudes and behaviours

aged 50 years or more by highlighting the benefits of an older, more experienced workforce. It also provided guidance on modifications that can help to retain older workers and maintain their work ability.

- In 2015, the UK Department for Work and Pensions published the review 'A new vision for older workers: retain, retrain and recruit' produced by Dr Ros Altman CBE, appointed 'Business Champion for Older Workers' in July 2014 by the UK government. Dr Altman's role is to work with employers in order to understand the significant benefits of retaining and recruiting older workers. The review focuses on various employment-related issues that constitute barriers to people working longer, such as discrimination and stereotypes in recruitment and training.

Cross-policy frameworks

The use of broader models or concepts, such as 'work ability', 'employability' and 'age management', reflects a more integrated approach, bringing together all the elements necessary to ensure healthy longer working lives.

Towards integrated frameworks

- In 2001, the Norwegian government and social partners agreed to cooperate over the implementation of Cooperation Agreements on a More Inclusive Working Life (also called IA agreements) in companies. These IA agreements promote measures in the workplace to reduce sickness absence, increase the integration of people with disabilities and increase the effective retirement age. Many companies have included age-related measures in their HR policies as a result of an IA agreement, such as flexible hours or financial bonuses for workers who continue working beyond retirement age. The IA agreement scheme has been regularly re-negotiated and the current agreement (2014-2018) includes an objective to extend the average age of exit of workers from the workforce by six months, compared with 2009.
- In Austria, between 2008 and 2012, the national Fit for the Future initiative, led by the government in coordination with social insurance organisations, aimed to maintain employability and preserve the work ability of all workers. The objective of the programme was to avoid early retirement and to provide technical support to companies to maintain and enhance their workers' abilities. Particular attention was paid to the older workforce, but all workers were targeted by the initiative. Based on the concept of 'work ability', an index (the ABI Plus™ index) was developed for the Fit for the Future programme to measure the status of work-load management according to the resources of the employees within a company. Based on the success of this Fit for the Future initiative, the successor, fit2work, was set up and has been running from 2012. Fit2work, inscribed in the 'Work and Health' law, focuses both on prevention against decreases in work ability and rehabilitation and return-to-work following a health problems.
- The UK 2014 'Fuller Working Lives — a Framework for Action' highlights the negative effects of early exit from the labour market on individuals, businesses, society and the economy. It proposes to address the factors leading to early exit, including health conditions and disability, workplace factors, skills, redundancy, caring responsibilities and financial security. This framework summarises the measures that are already in place to improve the employability and work ability of older workers, such as the mid-life career reviews and vocational training, and the measures it will further support, such as flexible working

Towards integrated frameworks

arrangements and guidance for employers on age management.

- In June 2014, France adopted a new tripartite agreement, 'Quality of Life at Work', which supersedes those on the employment of older workers. The agreement defines 'quality of life at work' through elements such as the general working environment, the company culture, working conditions, gender equality, autonomy, empowerment and the perceived value of the work. The agreement promotes a systematic and holistic approach to ensuring quality of life at work, rather than focusing on specific risks or specific groups of workers. In addition, the Law on the Generation Contract, adopted in March 2013, replaced the company agreements for the employment of older workers with company agreements that implement the Generation Contract. The Generation Contract aims to link the recruitment of young workers (below 30 years of age) with the employment of older workers over 57 years of age (55 years for newly hired and disabled workers). These measures are aimed at addressing the issue of its relatively high youth unemployment rates in France through an approach focused on the transfer of knowledge and intergenerational solidarity.

Supporting measures

The abovementioned policies are usually accompanied by supporting measures — often inscribed in the law — relating to the following aspects:

- *Skills development*: A number of instruments exist to improve the management of skills and competencies of older workers, one of which is ensuring that older workers have access to training and lifelong learning opportunities, e.g. through the creation of the 'personal training account' in France, which allows workers to save up training 'rights' that can be used during periods of both employment and unemployment.
- *Career development*: Instruments put in place to improve the management of careers for older workers include systematic discussions of career goals, e.g. the 'interview to prepare for the second part of the career' in France, 'mid-life career reviews' in the UK and the 'senior interview' in Norway. These discussions cover career expectations, evolutions, training opportunities, etc., when a worker reaches a certain age.
- *Working time and work–life balance*: These countries have widely adopted measures that introduce opportunities for older workers to reduce their working hours — e.g. time credits for workers over 55 years of age in Belgium, part-time work for older workers (*Altersteilzeit*) in Austria, progressive retirement in France and flexible working schemes in Norway. In the UK, since 2014, flexible work is no longer limited to parents and carers but can be requested by all workers. These measures are also believed to help the transition into retirement. In Norway, workers over 60 years of age are entitled to extra leave days and their employers are compensated by the state.
- *Working conditions*: Most policy frameworks related to the employment of older workers include a focus on the adaptation or adjustment of working conditions to accommodate older workers. Specific measures put in place are transfers from arduous work to 'lighter' duties, in some cases with financial compensation in the event of loss of income (e.g. in Belgium).
- *Knowledge transfer*: Because of concerns over youth unemployment, France has created a mechanism to link the recruitment of young workers to the employment of older workers (the Generation Contract). As part of this, measures have been promoted to increase intergenerational transfer of knowledge and experience (e.g. mentoring tasks).

WHP has become an integral part of OSH policies in recent years. For instance, the Belgian National Strategy for Well-being at Work 2008-2012 included a work area on well-being at work through WHP. In the framework of the UK Health, Work and Wellbeing Strategy, a number of case studies have been carried out showing practical examples of organisations that have introduced successful health and well-being initiatives, mostly through health promotion campaigns.

Effectiveness of policy initiatives for the extension of working life

The evaluations of some of these policies and measures provide indications of success factors and areas for improvement. In France, recent assessments of company agreements on the employment of older workers indicate that the law has had a positive effect in encouraging enterprises to look into the issue of older workers' working conditions. However, studies have also shown that companies are less likely to take up measures specifically addressing working conditions than measures on skills and training (Dares, 2011; Poilpot-Rocaboy, 2013; Volkoff *et al.*, 2012). In February 2016, the French Court of Auditors published a first assessment of the impact of the Law on the Generation Contract. The assessment highlights that the instrument aims to address three issues at the same time — unemployment of young and older workers and knowledge transfer in companies. It has resulted in a complex mechanism that is difficult for companies to negotiate and implement. As a result, most agreements have not put in place effective measures to ensure the intergenerational transfer of knowledge, i.e. the core principle of the law, rather focusing on a purely statistical matching in the employment of younger and older workers (Cour des Comptes, 2016).

In Belgium, research on the awareness of, and attitude to, the collective agreement on the employment of older workers showed increased awareness among employers and HR managers of issues related to the ageing of the workforce. The company survey showed that measures for 'age-related reduction of working time' are those most commonly included in company agreements. Respondents from large companies were more likely than those in SMEs to assess that the company agreement will be successfully implemented (Van Hal, 2014). However, stakeholders from Belgium and France identified the complexity of the legal frameworks as a barrier to their effective implementation at the workplace level.

In Norway, evaluations of the combined impacts of the IA Agreements, the activities of the Centre for Senior Policies, and other relevant policies for an ageing workforce, are positive in terms of increasing employment rates and average effective retirement age, although it is not possible to attribute these successes to a single policy or initiative (EC, 2012d). However, one obstacle identified is the potential for transfer between different support schemes, e.g. early retirement and disability. In the UK, a number of studies have looked at the influence of the advanced anti-age discrimination legislation in place in the country (see section 3.3.2). Results, based on surveys of employers' behaviours and thus mostly qualitative, show an increasing trend in age-based equal opportunity policies in companies (Lain & Vickerstaff, 2015). An interesting result from reviews of evidence on the uptake of flexible work options by people with caring responsibilities is that, unsurprisingly, women are more likely to request such options, but also that their request is more likely to be accepted, revealing a gender bias in employers' perceptions of caring responsibilities (Lain & Vickerstaff, 2015).

Finally, the evaluation of the Austrian Fit for the Future initiative (Kloimüller & Czeskleba, 2013) concluded that:

- There is a significant relationship between work ability and values, health, cooperation with co-workers, capacity to take an active role and work burdens (dependent on the sector).
- Appreciative leadership has twice as much influence on work ability as intensive fitness exercises.
- Where measures were implemented to raise work ability across all age groups, their effect was greatest among apprentices. Without such interventions, young members of the workforce lost three to four points of their work ability within two years²⁷.

Policy implementation

Concepts such as 'age management' and 'work ability' are not only frequently referred to in policy documents; they are well known and implemented in practice. Stakeholders from various sectors (public, private, NGOs, academic, etc.) and levels of governance (national, regional, local) are increasingly

²⁷ For more information about Fit for the Future and its achievements, see the case study 'Fit for the future — Austria' prepared in the context of the project 'Safer and Healthier Work at Any Age' (see EU OSHA, 2016c).

working together to achieve effective practical implementation of policies and supporting measures. In general, social dialogue plays an important role in policy development and implementation.

At an institutional level, Ministries leading the development of these policies (often Ministries of Employment) are supported by labour inspectorates and national agencies (or similar types of national research and dissemination organisations). These organisations provide financial and technical support to ensure the effective implementation of the measures.

Activities of governmental stakeholders

- In France, the National Agency for the Improvement of Working Conditions created a number of tools to help companies integrate age management into their HR policies and work organisation. Funding is also available to companies willing to improve working conditions.
- The Centre for Senior Policy in Norway has developed a website offering guidance to employers to map age composition and to develop an age management policy for their companies.
- In the UK, the Department for Work and Pensions Age Positive initiative aims to increase awareness among employers of safety and health issues related to age and to provide them with guidance and support regarding the type of measures and actions that can be put in place to retain older workers.
- Also in the UK, based on the recommendations of the Health, Work and Wellbeing initiative, a new service called 'Fit for Work' was put in place in early 2015 to provide free advice to employers and employees on occupational health and on return to work after an illness or an injury.
- In Austria, from 2007 onwards, the labour inspectorate has set up a programme to ensure that its activities, including on-site inspections, take diversity issues into account, including those relating to age. Labour inspectors look at how diversity is taken into account at the workplace in OSH management, e.g. during risk assessments or when prevention measures are put in place, and in the application of labour legislation, e.g. in the management of working time. More generally, labour inspectors are attentive to the influence of stereotypes in the daily activities of a company and provide support on overcoming these.
- In Austria, the Austrian Social Insurance for Occupational Risks (AUVA) has a major role in the implementation of sustainable practices at company level. In particular, the AUVA has been instrumental in the creation and implementation of the Fit for the Future and fit2work programmes (described above).
- In Belgium, the Professional Experience Fund finances company projects that involve adapting the working conditions of workers over the age of 45. Since 2015, the fund has been managed at regional, rather than federal, level.

Social dialogue has been an important driver for promoting age management and health promotion in companies in the five countries. The French Quality of Life at Work tripartite agreement of 2014, the 2010-2013 Inclusive Workplace Agreement in Norway and the Belgian Agreement on the employment of older workers of 2012, are the result of intense negotiation between the governments and the social partners. Social partners are entrusted to negotiate sectoral or company agreements in order to implement the broad objectives set out in the framework agreements at national level. Social partners in Austria also have an important role, as they carry out activities such as the proFITNESS programme, which supports SMEs with health promotion issues. In the UK, sectoral social partners have been very active in the development of tools on age management. The public sector trade union Unison published a guidance document in April 2013 entitled *The ageing workforce — Health and safety implications*, which gives suggestions regarding adjustments that can be made to keep workers, in particular older

workers, safe and healthy.

NGOs have also developed specific initiatives addressing the issue of older workers and overall healthy working conditions. In the UK in particular, a vast number of stakeholders, such as institutes, networks, charities and think-tanks, undertake initiatives related to the ageing workforce, age management and health promotion. Research and the transfer of information and knowledge support the policy shift in the UK towards a more integrated approach.

Cooperation is frequent between governmental and non-governmental actors. In Belgium, the Flemish Government, trade unions, and employers' organisations agreed on the joint programme. Together for the Defence of the 50+, supported by an awareness-raising campaign, to retain people over the age of 50 at work. In Austria, the Federal Ministry of Labour, Social Affairs and Consumer Protection, in cooperation with the Federal Ministry of Economy, Family and Youth, the Public Employment Service, social partner organisations and experts on age management, created the NESTOR GOLD certification programme, which aims to define good practices in age management.

- **Group 4:**

The fourth group of countries consists of Denmark, Finland, Germany, the Netherlands and Sweden (Figure 4-5).

Figure 4-5, Group 4 countries



Context

Population ageing started relatively early in these countries. In 1990, Denmark, Germany, and Sweden had the highest median age in all of Europe (over 37 years compared with an average age of 34.6 years), closely followed by Finland (36.3 years). In parallel, in the early 2000s, Denmark, the Netherlands, Finland, and Sweden faced high rates of sickness absence and large numbers of recipients

of disability benefit (which was partly due to their social security systems). This led to the reform of their disability and sickness benefits systems. These countries have been relatively less affected than other European countries by the financial and economic crises in terms of unemployment. In all the countries in this group, unemployment rates were below the EU average in 2014 and youth unemployment increased by less than 5 pp between 2005 and 2014. Youth unemployment even decreased in Germany over that time span. However, it is still a serious concern in Finland and Sweden, where youth unemployment rates in 2014 approached the EU average.

Finally, employment rates in the age group 55-64 are relatively high in these countries, among the highest in the EU.

Policy development

Tackling the challenges related to workforce ageing has been a policy priority for longer. As in other European countries, pension reforms were also implemented in these countries to stimulate participation in the labour market of older workers and discourage early exit. However, this was complemented by the development of ageing policies that acknowledged the link between good-quality working conditions and productivity and competitiveness and the necessity of addressing working conditions in order to extend working life in a sustainable way.

One of the forerunners in addressing the ageing of the workforce in a comprehensive manner is Finland. The Finnish National Programme on Ageing Workers (the FINPAW) was launched in 1997. The foundation of FINPAW was a response to the challenge of how to keep people in active working lives for longer, and how to develop the legal, institutional, attitudinal and incentive frameworks to support this. The measures comprised an extensive awareness-raising and training programme for various target groups, research on ageing and work, and projects on enhancing people's work ability and workplace health promotion. FINPAW also included studies and preparations for change on a number of legislative topics in relation to pensions, employment and adult education. The programme was largely based on the holistic model of work ability, promoted by the Finnish Institute of Occupational Health (FIOH) in the 1990s (see section 3.1). The success of FINPAW, which resulted in an increase in the effective retirement age, and the wide dissemination of the Work Ability Index gave Finland an important level of legitimacy on these issues (Arnkil *et al.*, 2003). Finland's focus on the ageing workforce during its 1999 Presidency of the EU gained significant support in the EU.

Sweden has been addressing the need to increase the duration of the population's working life for more than a decade. From 2002 onwards, the Swedish government has funded a number of projects supporting leadership in age management and the introduction of changes in work organisation to encourage workers to stay in employment for longer.

Since 2004, the Netherlands has been providing subsidies to organisations and enterprises to create better conditions for the employment of older workers, as part of the government's broader Stimulate the Working Life of Older Employees programme. At the same time, the country brought forward numerous initiatives to encourage enterprises and sectors to support the planning and implementation of age-aware policies, including policies on OSH.

In 2006, Denmark adopted its Welfare Reform programme, with the aim of preparing Danish society for future challenges. This included promoting later retirement to sustain the labour supply in future, through labour market intervention measures, and the abolition of prolonged unemployment benefits. In parallel, the Danish Ministry of Employment, as well as other government bodies, introduced out a wide range of measures designed to introduce the concept of 'senior policies', e.g. awareness-raising campaigns at company level, consultancy schemes and websites offering information and advice on organisational senior policies.

In 2002, Germany launched the New Quality of Work Initiative (INQA), which promoted better quality of work as a tool for businesses to sustain their competitiveness and capacity for innovation (INQA, 2016). The initiative served as a platform for the development of measures to foster the well-being of workers and to reflect on the challenges arising from the ageing of the workforce, in particular in terms of shortages of skilled labour.

In the late 1990s and early 2000s, the need to reduce absenteeism and early exit from the labour market due to disability was a driving force for the development of systems for vocational rehabilitation and return to work in these countries. The systems are based on the principles of early and tailored interventions and procedures to reintegrate people into work after long-term absences to avoid their exclusion from the labour market. These comprehensive vocational rehabilitation and return-to-work systems are an integral part of frameworks for sustainable working lives²⁸.

Development of integrated frameworks

These countries have developed integrated policy frameworks to address the consequences of the ageing and shrinking of their workforces, covering all relevant policy areas (Figure 4-6).

Figure 4-6, Elements of an integrated policy framework to address the challenges of an ageing workforce



Although these policy frameworks do not necessarily use the same terminology from one country to another, are not built around the same theoretical models, might refer to different concepts (sustainable employability, well-being at work or new quality of work), and might have different focuses, they all apply a life-course perspective and follow a holistic approach to the extension of working life, introducing the idea of sustainability in relation to work.

²⁸ More information on national systems for return to work can be found in the report 'Rehabilitation and return to work: Analysis report on EU and Member States policies, strategies and programmes', produced in the context of the project Safer and Healthier Work at Any Age (see EU OSHA, 2016a)

Integrated policy frameworks for sustainable working lives

- Finland has been at the forefront of this movement, with the adoption in 2010 of an overarching strategy, A Socially Sustainable Finland for 2020. It is structured around three main objectives: 'a strong foundation for welfare', 'access to welfare to all' and 'a healthy and safe living environment'. Although they are all relevant to the question of demographic change, the first objective is particularly relevant to the extension of working life in a sustainable way, as it requires the inclusion of health and well-being in all decision-making; lengthening working careers through increasing workplace well-being; creating a better balance between the different aspects of life; and making social security funding more sustainable.
- In 2012, the Netherlands launched a campaign promoting the integrated and multidisciplinary concept of 'sustainable employability'. It is a concept widely used across sectors, which can be characterised as the capability of employees to work in a healthy and productive way until retirement age and beyond. It is thus a dynamic concept, based on the life-course approach that emphasises the need both to address short-term health concerns and to ensure that workers remain healthy and motivated in the long term. The health and well-being of workers are encapsulated within a broader concept that also focuses on other important aspects, such as skills, work–life balance, working relationships, knowledge transfer, etc.
- Germany, concerned for many years about the impact of the demographic shift on its labour force and on society more generally, has put in place a comprehensive national demography strategy called 'Every Age Counts'. This includes socio-economic measures to address the impact of the ageing of the general population. One of the priorities of the strategy relates to the potential shortage of skilled labour, and the resultant need to retain older, experienced workers and to facilitate knowledge transfer across generations. To achieve this, the strategy focuses on maintaining and promoting health at the workplace, developing qualifications and training throughout the whole life course, and more generally creating the conditions to support longer working lives.

In Denmark and Sweden, the focus is rather on the inclusiveness of the labour markets and avoiding premature exclusion from them because of health problems or other reasons. Although there is no single integrated policy framework, this lack is compensated for by a relatively high level of coherence in terms of objectives across the different policies in place, the innovative character of certain policies and initiatives, and the application of a life-course approach. In addition, both countries focus on groups that are most at risk of exclusion or early exit from the labour market. This has led them to concentrate efforts on people working in hazardous conditions or in dangerous sectors; on vulnerable categories of workers, such as those with disabilities or reduced work ability; and, in the case of Sweden, on gender differences in retirement behaviour. Within this general objective of preventing the exclusion of people from the labour market on the grounds of ill health, both countries have promoted age management initiatives and have developed return-to-work mechanisms. These countries also have in place well-developed systems for vocational rehabilitation and return to work.

The systems in all five countries, based on the principles of early and tailored interventions and adequate procedures to reintegrate people into work after long-term absence, contribute to avoiding exclusion from the labour market. Comprehensive return-to-work systems are an integral part of frameworks for sustainable working lives²⁹.

Finally, the life-course perspective is at the core of the policies developed in each of the five countries. In the course of the fieldwork carried out for this project, stakeholders from several countries, in particular

²⁹ More information on national systems for return-to-work in the report 'Rehabilitation and return to work: Analysis report on EU and Member States policies, strategies and programmes', produced in the context of the project Safer and Healthier Work at Any Age (see EU OSHA, 2016a)

the Netherlands and Denmark, highlighted that OSH policies in their country have moved on to the next stage: prevention of OSH risks for all ages to ensure sustainability of working life.

In Denmark, for instance, the concept of 'work-life expectancy' has been gaining ground among stakeholders over the past few years. It is used to express the idea that how long a worker can stay at work will depend on the type of job that he or she does (and has been doing) and how exposed he or she has been to strenuous working conditions. Preventing an early exit from the labour market should therefore be seen in the light of people's individual work trajectories rather than just as a function of age. Danish stakeholders have expressed their concern over the lack of attention paid to mid-life workers. The use of the 'work-life expectancy' concept allows an alternative approach that depends on work history, instead of the rather arbitrary indicator of chronological age.

Effectiveness of policies

There is limited information on the impacts of these integrated policy frameworks because of a lack of any proper evaluation of these frameworks, most of which are relatively recent.

In the Netherlands, a progress report from July 2015 on the implementation of the Sustainable Employability campaign indicated that awareness is growing among employers and workers of how to increase employability, in particular in terms of skills development. However, studies have shown that the employability of vulnerable groups of workers, e.g. low-skilled, self-employed, part-time workers, is not increasing as much as it is for other groups of workers (Ministerie van Sociale Zaken en Werkgelegenheid, 2015). In addition, during the fieldwork, stakeholders in the Netherlands identified a 7 % decrease in 2014 in the number of collective agreements referring to 'sustainable employability' (from 70 % to 63 %), most likely due to the impacts of the economic crisis and an increased focus on short-term organisational issues.

No mid-term evaluations of impacts have been identified for the Finnish Social Sustainability Strategy and the German Demography Strategy. To find information on the effectiveness of integrated policy frameworks based on indicators such as retirement age and employment rates, it is necessary to look at older policies, such as FINPAW, described earlier. One of the clear positive results revealed by the evaluation of FINPAW was the increase in the employment rate of older workers and an increase in effective retirement age in Finland. Other outcomes included greater awareness of and a positive change in attitude towards older workers, and greater opportunities for lifelong learning and vocational education for older people (Arnkil *et al.*, 2003).

Finally, some of the Swedish and Danish initiatives on preventing exclusion from the labour market have been evaluated. The effects on sickness absence levels of the Danish national Return to Work programme, which ran between April 2010 and April 2012, were assessed as positive at an individual level (on the workers themselves), although results varied considerably among municipalities (NFA, 2012). In Sweden, the evaluation of the implementation of the 2003 Act on the Financial Coordination of Rehabilitation Measures showed that, for each person who returns to work after a return-to-work intervention, society recoups the funds invested in that person. Another positive result of the coordination of rehabilitation measures is that fewer participants are in need of public benefits (e.g. sickness benefits, unemployment benefits, etc.) (Susam, 2016).

Policy implementation

The policy framework is implemented through specific programmes and measures coordinated across policy areas and involving a wide range of stakeholders. Social dialogue and collective agreements play an important role in policy development and implementation.

The wide range of activities and initiatives in place is another common characteristic of this group. The general policies described above are implemented through concrete activities, driven and supported by stakeholders from multiple policy areas (employment, health, OSH, social security, anti-discrimination, etc.), sectors (public and private) and levels of governance (national, regional and local). The types of activities carried out to implement the policy goals include:

- *National funding programmes*, such as the Liideri programme in Finland, which allocates funds to businesses to implement innovative methods of working and new models of management.
- *Development of networks for exchange of practices and information*, such as, in Germany, the WAI-Network, which aims to promote the use of the Work Ability Index, or the Demographic Network (ddn), which aims to prepare companies and institutions for the ageing of their workforces.
- *Awareness-raising campaigns*, such as the Dutch government's campaign on 'sustainable employability', which aimed to raise awareness among employers and workers of the importance of health and well-being at work.
- *Research activities*, such as the various research projects by the Swedish Working Environment Authority exploring the relationship between the work environment and the decision to leave the labour force.
- Publication of guidance, websites, e-learning tools, etc., such as the Socialtengagement.dk (Social Commitment) toolbox in Denmark, which helps companies to be socially engaged, i.e. to work on the recruitment, well-being and retention of vulnerable workers, including older workers.

Most initiatives are the result of cross-policy work. Cooperation is frequent between the Ministries of Employment or Labour and the Ministries of Health, e.g. on the promotion of health at work or on issues related to social security and social welfare. In addition, governments are supported by a variety of non-governmental organisations in the implementation of initiatives. In the Nordic countries (Denmark, Sweden, Norway), municipalities play a particularly important role in the provision of healthcare, employment, rehabilitation, disability and other social welfare services. It is therefore not uncommon for municipalities to put policies in place to promote the employment of older workers, or prevention policies to improve the health status of their populations.

Interaction across policy areas, types of stakeholders and levels of governance is part of long-standing national traditions of policy-making and policy implementation. Cooperation across relevant ministries, e.g. for economy, employment, public health, education and social affairs, is widespread in these countries and is usually defined within the overarching policy frameworks mentioned above. It is complemented by long-standing traditions of social dialogue, engaging the relevant economic actors in the discussions.

In Finland, the National Working Life Development Strategy to 2020 reflects the different aspects of coordination mentioned in section 4.2.3:

- It is led by the Ministry of Employment and the Economy with the support of the Ministry of Health and Social Affairs and the Ministry of Education.
- It was prepared through a broad tripartite collaboration bringing together social partners and government.
- It is supported in its implementation by a number of major national administrations, such as the Finnish Institute for Occupational Health and the National Institute for Health and Welfare.
- Its implementation plan includes a number of initiatives requiring the creation of multidisciplinary networks of stakeholders, such as the Forum for Well-being at Work or the Leadership Development Network.
- Regional and local authorities, as well as social partners, have introduced a number of activities and initiatives to support the practical implementation of the strategy, such as the Workplace Well-being Network, which aims to reach all regions of Finland; or the implementation of the Well-being at Work Card by the research institute of the social partners (TTK) to train workers in workplace well-being.

In Germany, the New Quality of Work Initiative (INQA) has similar characteristics:

- It was launched jointly by the federal government, the federal states, social insurance institutions, social partners and other relevant stakeholders.
- The initiative fostered numerous different activities, such as establishing networks, developing tools, conducting research and raising awareness of fostering employability and enhancing workers' well-being.

- Social partners carry out their own initiatives related to the federal initiative, e.g. the German Trade Union Confederation conducts annual surveys based on the 'Good Work Index', and the Federal Association of German Employers' Associations and the German Trade Union Confederation have released a joint declaration, along with the Federal Ministry of Labour and Social Affairs, on mental health in the workplace.
- Other non-institutional organisations, such as insurance companies, have developed relevant activities to promote a better quality of life at work, such as the insurance organisations' Initiative for Health and Work, described earlier.

In the Netherlands, the level of government involvement in issues related to working conditions has dwindled in recent years. As a result, bipartite collaboration in this area has increased and many social partners undertake relevant initiatives. For instance, the Trade Union Federation developed a policy plan for 2009-2013 including age-sensitive HR policies, while the Employers' Forum, along with other stakeholders, set up a National Employability Plan, including a sustainable employability index. Knowledge transfer among stakeholders, and cooperation across sectors, are prominent in the Netherlands, resulting in a wide range of studies, reports and research projects expanding on concepts such as work ability and sustainable employability.

Finally, in Denmark, the governmental campaign in 2006-2007, A Few Extra Years Make a Difference, resulted in the wide uptake of the objective of the campaign (to sensitise economic actors to the benefits of senior policies) by a variety of organisations — from governmental agencies to social partners and local authorities.

4.3 Conclusions on drivers and obstacles, impacts and transferability

The analysis of the national policy frameworks identified a great diversity of contexts, policies and stakeholders involved. Several factors that influence national policy development and agenda setting account for this diversity, such as demographic characteristics, the socio-economic context, political traditions, the legal and institutional frameworks, and social dialogue. Although the boundaries between the four country clusters are not clear cut, and in many cases the fit of individual countries into one of those clusters is by no means perfect, all the same there are some characteristics that are common to each country cluster. These allow comparison of the country clusters. They are further described below.

Policy development

An examination of national policies shows an evolution in how European countries address the challenges of workforce ageing, from focusing only on increasing the participation of older workers in the labour market to considering the issue of extending working life in an integrated manner.

The majority of countries in Europe are addressing these challenges through measures aimed at increasing the participation and retention of older workers in the labour market. In a few countries, the issue of extending working life has been tackled only through pension reforms (i.e. increasing official retirement ages and restricting access to early retirement) and active labour market measures to increase the participation of older people (e.g. financial incentives for workers and employers). In the rest of the countries, additional measures have been adopted to increase the employability of older workers, in particular through lifelong learning strategies and other tools for skills development.

Some of these countries are also starting to reflect on the other factors that impact on workers' ability and willingness to stay at work, in particular health and working conditions. However, very few have taken action in relation to adapting the working environment (working conditions, working time) to extend working life. The policies and initiatives identified fall broadly into the three categories defined by the OECD in its 2006 report *Live longer, work longer*: reward work; change employer practices; and improve the employability of workers (Sonnet *et al.*, 2014). The first two are covered mostly through financial incentives and, in a few cases, awareness-raising campaigns to change mindsets and reduce practices that discriminate against older workers. The third is addressed mostly through the implementation of

measures for skills development and health promotion. Finally, there is very limited cross-policy work on how to address the opportunities and challenges of an ageing workforce.

A limited number of European countries have started tackling the challenges of an ageing workforce in an integrated manner. This group of countries is addressing extending the working life through an approach that is both multi-sectoral and holistic. Therefore, action needs to be taken not only in relation to socio-economic and employment policies, but also in the fields of public health, education and social justice. To be truly holistic, action should cover all levels from the broader societal level and the labour market to the individual worker. Policies and initiatives have been adopted to address most, if not all, of these factors. In addition, the target group of these policies is shifting. Even if many mitigating measures are taken to accommodate the larger groups of older workers in the labour market (e.g. in relation to flexible work schedules or transitions between work and retirement), there is a growing recognition that the demographic challenge cannot be addressed by focusing solely on this older population. Building a workforce that is able and willing to stay in the labour market up to (or even beyond) retirement age requires looking at the issue from a life-course perspective. Specifically, an increasing number of policies and programmes in these countries promote diversity or career management programmes in the workplace. Adopting a life-course perspective also allows these countries to focus on factors that play a key role in early exit or exclusion from work, such as arduous working conditions (e.g. in Denmark and France) or chronic ill health and long-term sickness absence (e.g. in Denmark, Sweden and the UK).

In a number of countries national policy frameworks are being shaped using elements from the theoretical models described in [Chapter 3](#). For instance, Finnish and Austrian's policies and programmes are strongly influenced by the model of 'Work Ability', while the Netherlands' Sustainable Employability framework incorporates many, if not all, of the core elements from the model. Many of the national policies and programmes identified in these countries build upon the notion of 'sustainability'. This applies primarily to the question of the sustainability of social welfare systems. However, it is also increasingly used to refer to 'sustainable work', i.e. creating the conditions in the labour market and the workplace and at the individual level to enable workers to stay active for as long as they are able and willing.

Policy implementation

In many countries, information on the state of implementation of the policies investigated is limited.

As mentioned above, the majority of European countries have only limited cooperation across policy areas in dealing with the issue of the ageing of the workforce. This general state of affairs affects coordination between those measures related to the working environment — some of which may target older workers — and wider measures put in place to address the ageing of the population, such as pension reforms or active-ageing measures. Integrated measures may be implemented on an ad hoc basis but there is a lack of systematic cooperation across policy areas. In addition, the number and diversity of those involved in policy implementation are limited. In particular, there is a lack of involvement of social partners. In many countries that have a limited policy framework in place to address the ageing of the workforce, businesses have been important in the implementation of measures and activities to enhance work ability.

In a minority of countries, the integrated approach translates into a variety of cross-policy and multidisciplinary initiatives and activities. At the same time, although based on coordination across policy areas, the implementation of these activities often requires a single institution to provide direction and guidance. Non-institutional actors are also increasingly involved in policy implementation in these countries. In countries with long-standing traditions of social dialogue, social partners are systematically involved in the development and implementation of the policy frameworks. Their role is critical in ensuring uptake at company level. Other actors, such as research organisations, universities, NGOs and charities, OSH providers and occupational health care specialists, etc., also play an important role, as reflected in the diversity of activities taking place outside the institutional arena.

▪ Drivers and barriers

As described in previous chapters, there are a number of contextual factors that influence policy development in relation to population and workforce ageing, in particular demographic developments, international organisations and EU recommendations and policies, national systems and frameworks, and the economic crisis:

- *Demographic development:* For a majority of countries in groups 1 and 2, the question of population ageing has emerged only fairly recently as a potential issue for their socio-economic systems. In 2013, the majority of countries in these groups still had a median age and an old-age dependency ratio below the European average. In contrast, in countries in groups 3 and 4 (particularly 4), population ageing has been a concern since the 1980s and 1990s. Governments have been reflecting on how to capitalise on an older population and older workforce for the past 20 to 30 years, and the recent adoption of innovative policies and initiatives is the outcome of the political and societal evolutions that have taken place in that time.
- *Gap between effective and official retirement ages:* During the last two decades, pension reforms have been carried out all over Europe. However, raising the official pension age does not mean that people actually work up to these older ages. Although the gap between official and effective retirement ages is gradually shrinking, many workers still leave the labour market well before reaching the official pension age. The recognition that non-financial factors, such as health, work–life balance, lack of appreciation, caring responsibilities, etc., play an important role in whether people leave or stay in the labour market (see section 3.2) has increased the attention paid to the quality of working life and well-being at work. Early retirement behaviours are also relatively common in Greece, Italy, Luxembourg and Spain.
- *Social dialogue:* All European countries have formal mechanisms of cooperation, whereby tripartite discussions take place. However, there are large differences in terms of the influence of the outcomes of these discussions and the weight given to social dialogue in the shaping of national policy. In those countries with long-standing traditions of social dialogue, social partner agreements adopted to support the extension of the working life reflect this cooperation and are an important driver of policy development and implementation in this area.

In addition, two major obstacles have been identified in relation to policy development:

- *Impact of the economic crisis — the rise in youth unemployment:* Youth unemployment has risen dramatically in a short timespan. Decreasing youth unemployment has therefore become a major political and economic priority. As a result, labour market policies have supported the extension of the working life through a number of 'integration'-oriented measures, but measures to improve people's employability, in particular in relation to vocational education and training, have mostly focused on younger age groups. A large proportion of respondents to the 2015 Eurobarometer on Discrimination think that older (55+) workers and people with disabilities are excluded from measures and policies put in place by Member States to combat the economic crisis and promote recovery (52 % and 46 %, respectively). Respondents from Spain (75 %), Greece (69 %), Cyprus, Italy and Lithuania (62 %) were most likely to think that people over 55 are excluded from recovery measures.

The fieldwork carried out over the course of the project confirmed the strength of this negative driver on Greek policies. Trade union representatives considered the legal provision in the Greek social security legislation, which allows the potential for 'voluntary termination of service', to be a short-sighted policy. This is used quite frequently in sectors undergoing restructuring (e.g. banking, telecommunications). They emphasised the lack of policies promoting the added value for younger workers of having a more mature workforce. Polish stakeholders explained that, as long as companies are not confronted by labour shortages and that a 'supply' of young workers is ensured, the question of the participation of older people in the labour market will not be seen as a priority. In some countries, new measures have been developed to accommodate the need to increase employment rates of both older and younger workers. Belgium, France and Italy have put in place programmes in which older workers can work part-time while mentoring a newly hired young employee. The recent evaluation of the Generation Contract, as

it is known in France, by the French Court of Auditors has shown the limits of such measures, which have been used in France mostly as a statistical pairing tool rather than an instrument to foster intergenerational solidarity (see section 4.4).

- *Attitudes and behaviours:* While legal, political and institutional frameworks are important drivers, cultural perceptions at societal level and attitudes and behaviours in the workplace are a major influencing factor in retaining older workers in work retention. In the workplace, elements include the attitude of employers, managers and colleagues, the company culture with regard to well-being at work and social dialogue, and the financial and human resources allocated to address these questions³⁰. During the fieldwork, the question of age discrimination in hiring practices and in worker retention was discussed at length. Stakeholders in the Netherlands and the UK stated that age discrimination in hiring practices is still strong, despite recent efforts by their governments to address the issue. In Austria, stakeholders argued that the basic assumption that older workers 'cost' more than younger ones does not apply to low-skilled occupations in which salaries barely increase throughout the working life. At societal level, cultural perceptions also had a strong influence on the discussions held during the fieldwork, in particular when discussing older workers. In a number of countries, such as Belgium, France and Greece, people perceive retirement as a right that they have earned by working a certain number of years. Encouraging people to stay in work at least until retirement age, and possibly even later, means going against deep-rooted instincts and beliefs.

- **Impacts of policy measures related to work, health and age**

In general, studies looking at the effectiveness of policies related to the ageing of the workforce³¹ have focused on two different indicators: the employment rate of older workers and the effective retirement age (see section 2.2.3). However, there is a lack of evaluation of the effectiveness of these policies in relation to workers' well-being.

Evidence of the success of specific measures related to increasing the employability of older workers (e.g. promoting the use of flexible working time for older workers or increasing training opportunities for older workers) is found in national or local surveys of workplace practices. This evidence often relates to the capacity of these measures to increase people's motivation to stay at work, but rarely addresses the question of people's mental and physical well-being³².

One issue is the lack of indicators to measure how 'sustainable' work is in terms of its impact on physical and mental health and overall well-being. The Finnish strategy 'A Socially Sustainable Finland by 2020' has defined approximately 50 indicators to measure 'social sustainability' (which includes the sustainable extension of working life). Some indicators, such as 'share of population having experienced threats or physical violence within past year', can give indications related to the working environment and working conditions but only a few indicators relate directly to physical and mental well-being at work (Ailla *et al.*, 2011). The Dutch government has acknowledged that there is not yet one agreed methodology or standard to measure 'sustainable employability'. Currently, the indicators used are sickness absence rates, work ability (the Work Ability Index), loss of productivity at work, work participation and employee turnover. Other indicators are based on self-reporting, with a focus on health (lifestyle, physical and mental health), work-related factors (physical and psychosocial factors) or the overall organisation (management and culture in the organisation) (Arbokennisnet, 2011).

The indicators that are more commonly used to assess the health status of the working population relate to sickness absence and work disability. A major review, published in 2011, of the health of the UK's

³⁰ The present report does not analyse initiatives at the workplace level. However, workplace practices for OSH in the context of an ageing workforce have been investigated in the European Parliament pilot project Safer and Healthier Work at Any Age, of which this report is part. See the report 'Safer and healthier work at any age: Analysis report of workplace good practices and support needs of enterprises' (EU-OSHA 2016f).

³¹ See the country reports prepared as part of the Joint Programming Initiative 'More Years, Better Lives' (MYBL JPI 2014).

³² Many such examples are found in the national reports prepared in 2015 by the Joint Programme Initiative 'More Years Better Lives' or in the national reports prepared in 2014-2015 by the OECD for its initiative 'Ageing and Employment Policies' (MYBL JPI 2014).

working age population, as part of the UK government's initiative 'Health, Work and Well-being', was based primarily on an analysis of the causes and consequences of sickness absence. It led to the recent creation of the Fit for Work services (Black, 2008). In the Netherlands, an evaluation of one of the main elements of the 2002 Gatekeeper Act (i.e. the obligation on employers to put in place a reintegration plan for workers returning from long-term sickness absence) showed significant positive impacts on long-term sickness absence rates (de Jong *et al.*, 2006). Evaluations of the Danish National Return-to-Work programme and the Swedish Rehabilitation Chain initiative both concluded that the programmes had positive impacts on sickness absence levels and the health status of workers and reduced public expenditure (see section 5.5).

Other health-related indicators, used for instance by Eurofound, rely on self-assessment of health status. There is therefore a lack of objective indicators to measure the impact of policies aiming to extend working life on the mental and physical health and well-being of the working population.

Negative impacts of pension reforms

A number of shortcomings have been identified in relation to the effectiveness of pension and social security reforms, primarily related to opportunities to transfer between different social benefit schemes. Research has shown that restricting access to early retirement benefits, an increasingly common measure in EU countries, could lead to people transferring to unemployment or sickness and disability benefit schemes, thus reducing the effectiveness of such measures in terms of increasing employment rates. A number of European countries have reformed these benefit schemes, or parts of these, to prevent such transfers (OECD, 2010).

The review of systems for rehabilitation and return to work in Europe has shown that, in a few European countries, social security reforms have been accompanied by the implementation of a support system to enhance the employability of people with reduced capacity for work, e.g. through vocational rehabilitation, and to prevent people on long-term sickness absence from permanently leaving the labour market by encouraging their return to work³³.

Conversely, a number of countries present a combination of measures that have a major influence on workers with health problems:

- They have reformed their early retirement benefit schemes by tightening the allocation criteria or, in some cases, removing the potential altogether.
- They have reformed their disability benefit schemes, again by tightening the allocation criteria and/or reducing the amounts allocated.
- They make limited investments in vocational rehabilitation and have not, to date, put in place a system to support the return to work of workers on sickness absence.
- They have not put in place support mechanisms to maintain the work ability and employability of an ageing workforce.

In these countries, people with (chronic) health problems stay at work, become registered unemployed or become inactive without financial support. Only a minority receive disability benefits or, for those close to retirement age, take early retirement. Without proper support mechanisms addressing the different factors that contribute to sustainable working lives, these people are at risk of exclusion from the labour market if they cannot find a job that is adapted to their capacity for work. Alternatively, they keep working in jobs that are not adapted to their capacity and risk further impairment of their health.

▪ **Transferability**

The comparative analysis of policies in European countries has identified a number of innovative elements (policies, concepts, practices) to better manage an ageing workforce and retain older workers in the labour market in a sustainable way. As in many other policy areas in the EU, there is no 'one size

³³ For more information, see the report 'Rehabilitation and return to work: Analysis report on EU and Member States policies, strategies and programmes' produced as part of the project 'Safer and Healthier Work at Any Age' (see EU-OSHA 2016a)

fits all' model for a policy response in relation to the ageing of the workforce. Governments might seek to transfer policy measures or good practice from one country to another but often lack a framework for selecting and appraising the feasibility and transferability of such measures. Similarly, identifying 'best' or 'good' practices is desirable to develop better measures; however, this is often unsuccessful, as the political, social and cultural context is not sufficiently considered when transferring to another country or setting.

The common objective in the EU is to increase employment rates and the well-being of the population, and it works towards a strategy for healthy and active ageing, including increasing employment for older workers. As highlighted in the previous sections, countries in the EU are at different levels in relation to changes in demography and in the policy development process. Therefore, countries' actual needs differ, and this should be taken into account when examining the transferability of practice and policies.

Transferability of a policy is highly dependent on political and economic conditions, as well as institutional characteristics. As explained by Williams *et al.* (2014) in their review of the cross-national transferability of policies, 'patterns of policy borrowing tend to follow (prior) ideological alignments'.

This can be observed when examining policy development in Belgium, France and, to a certain extent, Luxembourg in relation to older workers. In all three countries, there are a number of similarities in terms of institutional and legal settings and laws have been adopted to increase the employment rate of older workers through a number of measures for both workplaces and workers. France adopted the legislation on the employment of older workers first, in 2009, followed by Belgium in 2012 and Luxembourg in 2014. Even though the laws were very similar, their implementation was dependent on the social partners' level of commitment to the goal. Evaluation in France showed relatively disappointing results and a lack of focus from companies on working conditions, instead favouring instruments related to skills and training. In contrast, in Belgium, evaluation showed a positive uptake of the instrument by companies, bringing increased awareness of older workers in a country with a long-standing culture of early retirement.

Other examples of successful transfer of policies suggest that such transfers depend on characteristics shared between countries, such as social welfare model, culture and traditions. For example, 'senior policies' developed in Denmark and Norway have built on each other's successes. Norway launched the idea with the creation of the Centre for Senior Policies in 2001, and Denmark followed with a number of initiatives from the Danish Agency for Labour Market and Recruitment on 'senior packages' and 'senior measures'.

The complexity of the policy or programmes can be an important obstacle to transferability. In the present case, the subject matter is highly complex, and the policies assessed as being more innovative, such as the Demography Strategy of Germany or the Sustainable Employability campaign of the Netherlands, are multi-goal oriented, i.e. they aim not only to extend working life and increase the employment rate but also to increase older people's health and well-being, in a context of greater productivity and competitiveness. However, a number of similar types of measures have been adopted in different countries to extend working life (see section 4.2). The representative of the Age and Employment Network (TAEN) praised the 'mid-life career review', adopted in Belgium, France and the UK as an example of good practice that is easily transferable to other national contexts.

Another potential criterion for the successful transfer of a policy is its perceived side effects. One of the most frequent arguments heard during fieldwork in countries with limited policies on an ageing workforce was the idea that keeping older people at work hindered the employment opportunities for younger workers. While many studies have aimed to show that this assumption is false, these perceptions are held not only in companies but also at higher levels of policy-making (among national social partners, for instance). So one commonality and pre-condition for the development of adequate 'older age' employment policy is the recognition by all actors of the benefits of such a policy for all workers and for the labour market in general.

The question of transferability was discussed by stakeholders during some of the workshops organised in the course of this project. In particular, some of the innovative initiatives identified in the course of the project have been developed or implemented by occupational insurance organisations. The question was raised whether or not similar initiatives are possible in countries with a different system in place.

Stakeholders in the UK debated the potential adoption of the system of partial sickness allowance, which exists in insurance-based systems, e.g. in Finland or Germany. In Poland, stakeholders acknowledged that the approach, adopted in Finland, Germany and other countries, of involving insurance providers in the implementation of initiatives related to the ageing of the workforce seemed to be successful and should be further investigated in the Polish context.

In conclusion, the transfer from one country to another of broad policy initiatives related to the ageing of the workforce and the sustainable extension of working life is likely to be difficult, given the complexity and specificity of these policies. However, many of the policies identified share a number of core characteristics, upon which other countries could build their own approaches. In addition, a number of specific measures that have proven successful in certain countries (such as the mid-life career review done in France and the UK) could be transferred and adjusted to the national context.

5 Future trends and uncertainties

According to projections of demographic and employment trends, the issue of the ageing of the workforce will become even more pressing for the countries already lagging behind. With older workers in these countries more likely to report negative effects of their work on their health, yet more likely to remain at work for financial reasons, learning from the experience of those countries that have successfully addressed these issues is crucial.

Global factors, such as uncertainty around migration patterns, technological impacts, economic difficulties and health inequalities, among others, have considerable influence on the working population and work organisation, and they must be considered when developing policies related to demographic change.

5.1 Future trends

According to population projections, population ageing will continue in all European countries. By 2040, the median age is expected to have increased by between six months and 11 years in different countries, and the gap between those Member States with the highest and lowest median ages will have increased (Figure 5-1)³⁴.

Looking at the evolution of the median age between 2013 and 2040, two main conclusions can be drawn:

- Many European countries seem to be already 'over the peak' in terms of the ageing of their population, which is now starting to slow down. Belgium, Denmark, France, Iceland, Ireland, Luxembourg, the Netherlands, Norway, Sweden, and the UK, had a median age below the EU average in 2013, and their median age is expected to increase at a rate slower than the EU average until 2040. In addition, Austria, Croatia, Finland, Germany, Italy, and Switzerland had a median age above the EU average in 2013, but their median age is also expected to increase at a slower rate than the EU average until 2040.
- Conversely, in a little more than half of European countries, the ageing of their population is still expected to accelerate. Cyprus, the Czech Republic, Estonia, Hungary, Malta, Poland, Romania, Slovakia, and Spain had a median age below average in 2013, but their national average is expected to increase faster than that of the EU until 2040. Bulgaria, Latvia, Lithuania, Greece, Portugal, and Slovenia already had national median ages above the EU average in 2013, and these are expected to increase at a faster rate than the EU average until 2040.

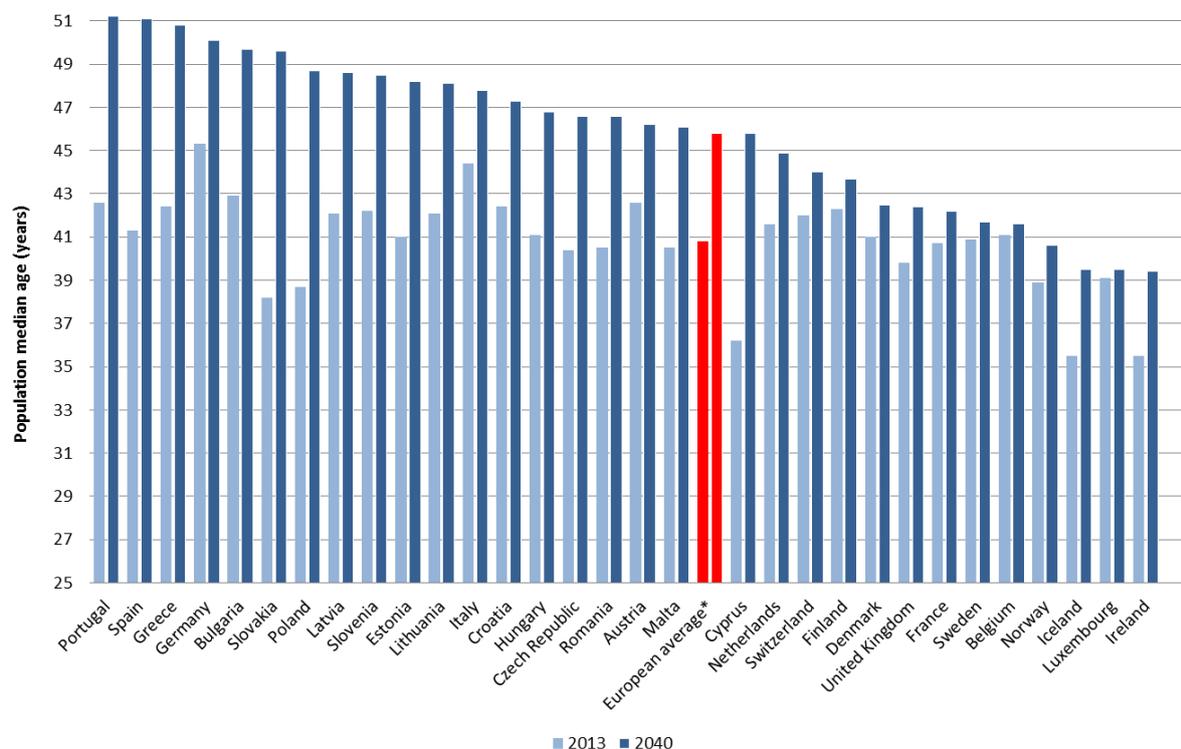
In addition, in 2040, six countries, Germany, Greece, Italy, Lithuania, Portugal, and Spain, will reach and exceed an OADR of 50 %, i.e. in these countries in 2040 there will be a maximum of two people of working age (15-64) for every person aged 65 and above. Only one country, Luxembourg, will still have an OADR under 30 % (i.e. three persons of working age for every person aged 65 and above). The countries in which the OADR will increase by more than 20 pp between 2013 and 2040 include Germany, Greece, Lithuania, the Netherlands, Portugal, Slovakia, Slovenia and Spain, (for further country differences, see [Annex 2](#)).

Based on the projections of countries' median population ages and OADRs, as presented above, four countries that currently have median ages and OADRs below the EU-28 average, namely Cyprus, Poland, Slovakia and Spain, can expect both their median population age and the proportion of people aged 65 and above compared with the working population to increase faster than the EU average until 2040. This means that the populations in these countries will not only age faster than average but also that the proportion of their older population is expected to rise significantly.

In addition, in Greece, Latvia and Portugal, both the median age and the OADR, already above the EU average in 2013, will rise faster than the EU average until 2040.

³⁴ In 2013, two thirds of Member States had a median age of between 39 and 43 years (a span of four years), while in 2040 two thirds of Member States will have a median age of between 43 and 50 years (a span of seven years).

Figure 5-1, Median age of European countries in 2013 and projections for 2040



Sources: Eurostat, 2014d; Eurostat, 2014e.
Countries ordered according to 2040 projections.
*Non-weighted average of median ages of all European countries.

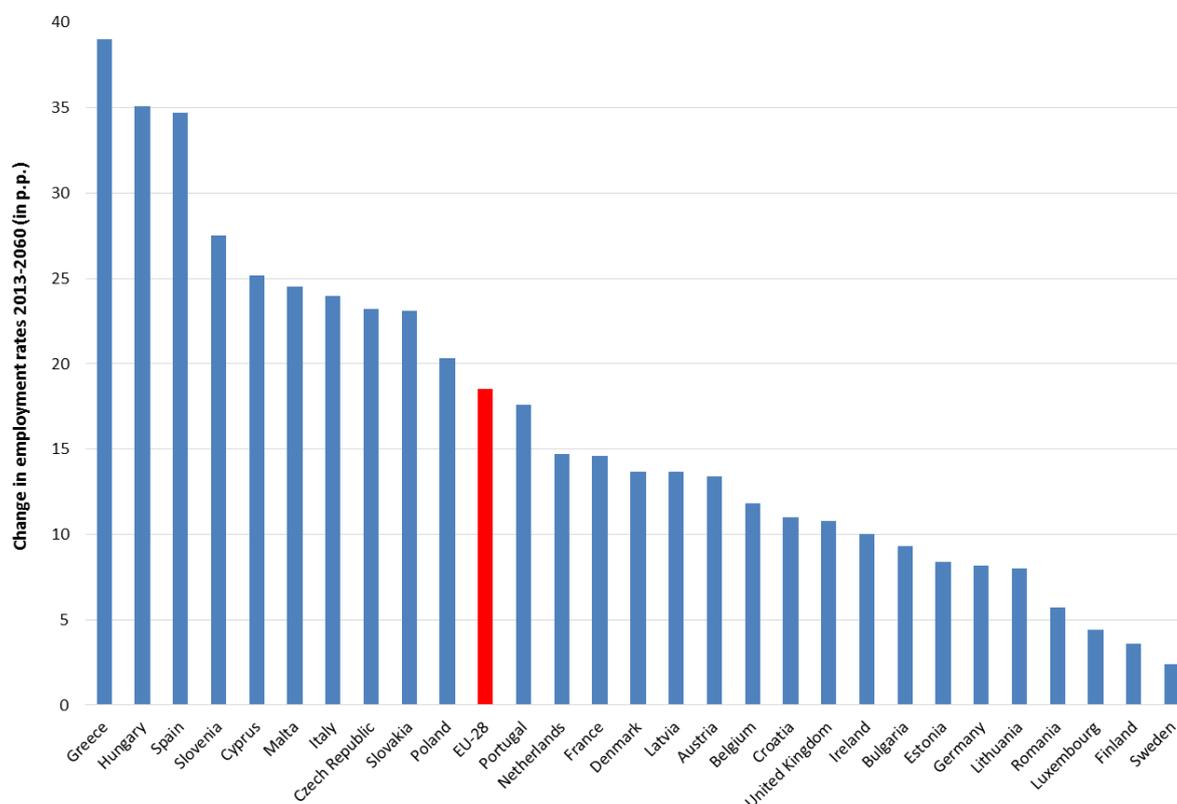
Changes in employment rates of older people

According to projections by the European Commission, employment among older people will increase in all EU-28 Member States until 2060, reaching 67 % by 2060³⁵. The proportion of older workers (55-64) in total employment (aged 20 to 64) is projected to rise by around one third, from 15.4 % in 2013 to 19.5 % in 2060 (EC, 2014a) As shown in Figure 8-3, the greatest increase in the employment rate of older workers is expected in Greece, Hungary and Spain (increase of over 30 pp) and in Cyprus, the Czech Republic, Italy, Malta, Slovakia and Slovenia (over 20 pp).

Looking at the projected rise by 2040 in the median age of the population of these countries (see Figure 5-2), these are countries in which the population age is expected to increase rapidly. This can thus partly explain the increase in the employment rate among their older workers.

³⁵ Projections regarding employment rates among 55- to 64-year-olds are not available for the EFTA countries (Norway, Switzerland, and Iceland).

Figure 5-2, Changes in the employment rates of the population aged 55-64 years between 2013 and 2060



Sources: EC, 2014a; Eurostat, 2015a.

The gap between countries in employment rates of their older workers is expected to decrease. Although, in 2013, there was a difference of around 48 pp between the country with the lowest employment rate (Slovenia) and the highest (Sweden), in 2060 this difference is projected to reduce to 33 pp between the countries with the lowest (Luxembourg) and the highest (Spain) employment rates.

These projections of employment rates should nevertheless be interpreted carefully, as they are based on several assumptions, including population ageing, anticipated pension reforms and anticipated unemployment rates. Furthermore, the economic crisis has rendered comparable employment rate projections more difficult, as capping unemployment rates tends to generate stronger declines in rates in those EU countries that have undergone the more severe increases in overall unemployment rates during the crisis (e.g. Greece and Spain) (EC, 2014a).

Ageing of the workforce

There are major differences across Member States in the evolution of the age structure of the population of working age: the largest increases in the proportion of the 'older' working age population between 1990 and 2040 will take place in a number of southern (Cyprus, Greece, Portugal and Spain) and eastern EU Member States (Bulgaria, the Czech Republic, Poland, Slovakia) and Ireland. In other countries the increase is predicted to be less pronounced. In several countries, namely Belgium, France, Denmark, Finland, the Netherlands, and Sweden the proportion of 55- to 64-year-olds in the total working age population is even predicted to decrease. Overall, however, the proportions will remain at relatively high levels: in 18 countries the proportion of older workers will be above 20 %; and in 10 and the EFTA countries it will be between 15 % and 20 %.

Urgency to act

Looking at surveys of self-reported health, older workers in countries with more limited policies to address the challenges of population ageing (i.e. countries in groups 1 and 2) are more likely to report negative effects of their work on their health. At the same time, people in these countries tend to stay employed after reaching the official retirement age for financial reasons.

Many of these countries, however, are going to experience, in the coming 20 to 40 years an increase in:

- Their median age: Bulgaria, Cyprus, the Czech Republic, Estonia, Greece, Hungary, Latvia, Lithuania, Malta, Poland, Portugal, Romania, Slovakia, Slovenia and Spain can all expect their median age to increase more than the EU average until 2040.
- Their OADR: in Germany, Greece, Lithuania, the Netherlands, Portugal, Slovakia, Slovenia and Spain the OADR will increase by more than 20 pp between 2013 and 2040. Only Germany and the Netherlands have, to date, put in place comprehensive policy frameworks to address the challenges of an ageing workforce.
- The employment rate among older workers: Cyprus, the Czech Republic, Greece, Hungary, Italy, Malta, Slovakia, Slovenia and Spain, will experience the greatest increase in the employment rate of older workers in the coming 25 years.

For these countries, there is an urgent need to act. Some of them can still be proactive, in the sense that the ageing of their population is still in its early stages. For others, the process is already well advanced, and any policies implemented will probably be more reactive. In any case, they can all benefit from the experience of countries that, faced with these issues for several decades already, have developed comprehensive strategies to maintain people's work ability throughout their working lives and take full advantage of having an older, more experienced workforce.

5.2 Uncertainties and knowledge gaps

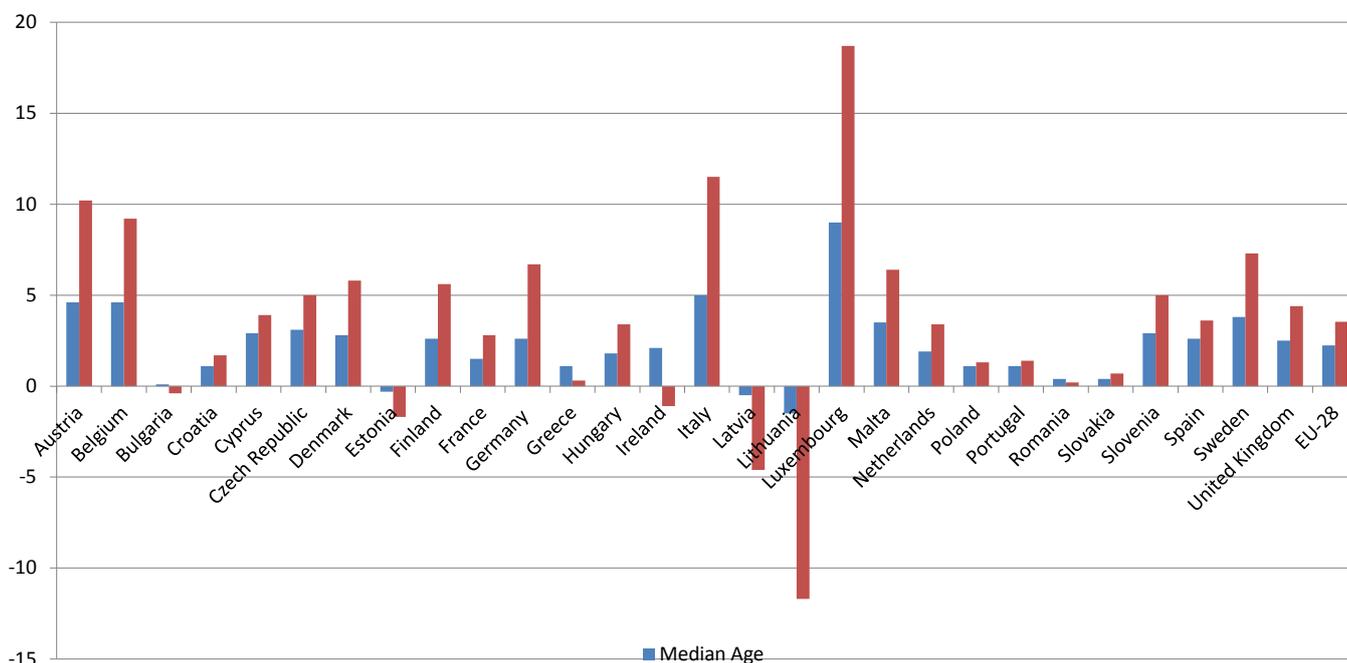
A number of challenges and uncertainties in the areas of migration, socio-economic developments and public health, as well as a number of research and data gaps, have a strong influence on policy-making for safer and healthier work at any age. The trends and projections discussed here should therefore be seen in the light of these uncertainties and challenges.

Demographic challenges and uncertainties: the role of migration

The demographic situation in European countries, which is one of the main reasons for countries to take action in the areas discussed in this study, is highly influenced by migratory trends.

When the projections of EU Member States' median age including and excluding migration are compared, large differences can be observed. In Austria, Belgium, the Czech Republic, Italy, Malta and Sweden, the median age in 2040 would be three to five years more if there were no migration (neither immigration nor emigration) and in Luxembourg it would be nine years more (Figure 5-3). A similar trend can be observed in these countries when looking at the projected proportion of older people (aged 65 and above) compared with the working population (15-64 years of age) in 2040 (the OADR); in all the countries mentioned, this would be at least 5 pp higher without migration. These differences are probably because these countries have relatively large flows of immigrants of working age (Eurostat, 2014h). At the same time, the Baltic countries would have a younger population if there were no immigration or emigration. These projected trends can be linked to the fact that these countries experience high emigration among their younger populations.

Figure 5-3, Differences in median age (in years) and OADR (in percentage points) including and excluding migration — projections for 2040, by country



Sources: Eurostat, 2014d and 2014h.

The figures read 'In Austria, the median age in 2040 would be around five years higher and the OADR would be 10 pp higher if there was no migration than if there was migration as predicted.'

Both international migration and intra-EU free movement of persons are cumulative phenomena, resulting from a combination of push and pull factors. Official EU or national migration policy is only one of these factors, and evidence points to the fact that it is far from the most important (Benton & Petrovic, 2013). The potential for increased earning is usually identified as one of the main drivers of migration (Dayton-Johnson *et al.*, 2009), which means that differences in income per capita will continue to influence the number of people willing to relocate to the EU. Potential migrants are also likely to consider perceived and real differentials in terms of security from violence, political stability, and political and civic freedoms, as well as social security and the quality and costs of education, health care and public services (Czaika & de Haas, 2012). Worldwide political instability, failure to preserve the rule of law and security worldwide, and especially in the European neighbourhood, would certainly act as a push factor towards increased migration. Climate change also represents an emerging international threat, which may not only directly displace people but also generates conflicts over resources, economic damage to coastal zones and political instability, all of which would contribute to increased migration (EC, 2008).

Most of these factors cannot be accurately anticipated and could combine to create unexpected scenarios with regard to international migration into the EU and therefore the EU's demographic profile.

Socio-economic uncertainties

Continuous socio-economic changes and periodic events (such as economic crises) can result in a number of influences that generate uncertainties for working environments, including occupational safety and health, such as the types of risks faced by workers.

Recent decades have seen significant loss of historical heavy industries such as coal mining and heavy engineering (e.g. ship-building) in many EU countries. Such changes can reduce the extent of work-related ill health overall. In some countries at least, other sectors (such as agriculture) have seen significant mechanisation and consequent loss of (or change in) employment, which again has changed the nature of the safety and health risks faced by those remaining. Other changes, such as increases in

the services sector, again create conflicting pressures. While removing heavy physical labour reduces the risk of accelerated degenerative changes associated with such work (e.g. osteoarthritis of the hip and knee), the more sedentary nature of much service sector work can increase the risks of cardiovascular disease and obesity-related health problems. New risks linked to the sedentary nature of service jobs may become more prevalent in the future.

Technological developments have continually changed the way we work. For instance, teleworking gives people with families more flexibility and can contribute to increasing women's participation in the labour market. On the other hand, it can create blurred boundaries between work and family life and be a source of stress and ultimately poorer mental health. Future technological developments therefore create an additional layer of uncertainty for working environments.

Economic downturns have major impacts on socio-economic systems and consequently on working environments. Periods of economic uncertainty create additional pressures on workers, not just on those whose jobs are threatened as a result. Those remaining in employment can experience an intensification of their work, resulting, in many enterprises, in poorer working conditions. Among many employers (SMEs in particular) short-term economic pressures can lead to a reluctance to invest in longer term workplace improvements in *safety* and health and generate time pressures and other psychosocial risks.

As shown in this report, the current economic crisis has had a dual impact on the policies developed to address the challenges of an ageing workforce. On the one hand, it further increased the pressure on governments to reform pension systems and put in place measures to extend working life and foster older people's participation in the labour market. On the other hand, many countries have prioritised measures to increase youth employment, considering policies related to OSH and working conditions to be low priority in a period of financial difficulty. In countries badly hit by the economic crisis, talking about the working conditions of an ageing workforce can seem an unaffordable luxury.

The impacts of the crisis are not yet fading. While countries are still recovering and are further restructuring their systems to improve public finance and meet macroeconomic targets, it will be challenging to maintain a balance between the need to adopt budgetary measures and the impacts that those may have on social security and on people's health and well-being. In addition, putting in place holistic, overarching and multidisciplinary programmes for OSH in the context of an ageing workforce requires not only financial but also technical resources.

Health challenges and uncertainties: rising health inequalities

The ageing of the EU population, together with factors such as the rising rates of chronic diseases, increase pressure on health systems and health budgets of Member States. Health system reforms are required in order to be able to provide adequate care, to meet changing needs and expectations and to remain financially sustainable. Such reforms include curbing age-related health expenditure, improving access to good-quality care and enhancing the efficiency or quality of public spending on health care (EPHA, 2013).

However, while demand, uptake and costs of health care are increasing, countries are operating in a context of budgetary constraints, which has led to cuts in areas where quick savings can be made: hospital services, pharmaceuticals and staff salaries (EPC, 2015). The medium- and long-term risks of these cuts in the supply of health care are unknown, but they are predicted to have serious negative consequences for people's health and well-being. Since the start of the economic crisis, the number of people reporting unmet health needs because of cost, distance to travel or waiting lists has increased in several Member States (Eurostat, 2015h). Universal access to health care is of paramount importance in addressing health inequalities (EC, 2014g).

In addition, the financial crisis and budgetary constraints have major impacts on people's income and unemployment, which are important social determinants of health. Lack of control, higher levels of stress, lack of security and reduced capability to influence one's life strongly influence health outcomes and health-related behaviours (EC, 2013b). Active labour market programmes that keep and reintegrate workers into jobs can mitigate some of the adverse health effects of economic downturns (Stuckler *et al.*, 2009).

Finally, the focus of the health agendas of countries has shifted during recent years, and it is currently rather curative: in 2012, around 97 % of national health budgets was spent on treatment and care and only 3 % was invested in preventative measures and public health programmes (OECD, 2012a; EU, 2013). It is argued that disease prevention and health promotion in and outside the health sector are key to limiting healthcare expenditure in the long term and would support active and healthy ageing of populations, enabling people to stay independent and active in the labour market for as long as possible.

Research and data gaps

One of the difficulties faced in respect of the issue of the ageing workforce (as with OSH in general) is the absence of sound evidence on which to base any initiatives or decisions. Although data are available on basic demographic parameters such as age, evidence on other issues is lacking, including a good understanding of how capability changes with age (especially cognitive change), a clear reflection of the needs of workers throughout their life-course, and sound evidence concerning the effectiveness of potential interventions on workers of any age. At present, policies, procedures and interventions are likely to be based on assumptions and beliefs rather than any sound evidence base. This can lead to potentially erroneous assumptions — e.g. when assessing ‘vulnerability’, interventions for younger workers sometimes confuse youth with inexperience.

The following list briefly summarises some of the research gaps and needs:

- a lack of longitudinal research resulting in cross-sectional methodologies to be able to follow up people using a life-course approach and identify what factors influence staying at work;
- a lack of high-quality intervention studies in relation to ageing and work to understand what works in practice;
- a lack of research on rehabilitation and return to work and evaluation of the impacts of return-to-work strategies;
- lack of knowledge on appropriate health promotion strategies for older age groups to understand whether or not older workers have different requirements and, if so, whether different strategies need to be adopted for them;
- a lack of occupationally relevant objective measurements to identify variations in physical and mental work capabilities with age, especially for highly demanding work (e.g. different fire services across the EU may have different standards).
- a lack of understanding of the influence that external factors, such as caring, have on work capabilities and capacities, especially for older women who, in many societies, bear the main responsibility for such factors;
- a need for an improved understanding of how to make work sustainable for all ages, including defining sustainable work, what societal, workplace and individual parameters make work sustainable and how this can be implemented at policy and workplace level;
- a lack of systematic evaluation of national policies addressing the challenges of an ageing workforce in particular in relation to their impacts on factors that contribute to sustainable working lives (i.e. not solely employment rates of older workers and effective retirement age but also indicators related to people’s health status, career development, work–life balance, etc.).

At present, there is not enough data and information at the EU level on health at work, not only concerning work-related diseases and accidents but also regarding ‘common’ health problems. Firstly, there is still a need for better harmonisation across countries of the definitions of ‘long-standing health problems’ and ‘work-related health problems’, and there is also a need for better surveying and reporting mechanisms. For example, the difference between the proportions of persons reporting long-standing health problems in Finland (almost 50 %) and Bulgaria (less than 20 %) in 2013 cannot be explained only by the actual health condition of the population in these two countries. Results seem to be influenced by people’s behaviour and perceptions of illness and by whether or not they tend to report health problems.

The validity of subjective opinions that work negatively affects health should be reconsidered. In quite a few countries, there is a big difference between the proportion of older workers who actually report that they experience a work-related health problem and the proportion of older workers who think that work has a negative effect on their health. This may be due to sampling errors or the composition of the samples; however, this discrepancy indicates that, in some countries, there may be an under-reporting or a lack of awareness of work-related health problems or, on the other hand, an (unjustified) tendency to think that work negatively affects one's health.

Finally, there are no EU-wide data on sickness absence due to non-occupational health problems. Considering the financial and social burden of sickness absence on societies, companies and individuals, it is critical to gather harmonised data at EU level on sickness absence for occupational and non-occupational reasons. Such data should be broken down by gender, age, occupation, education level, duration, etc.

Surveys such as ESENER or the EWCS have proven very useful in collecting data on the working conditions of the older workforce, but different stakeholders have debated how representative these are. A breakdown by age in these two surveys to allow harmonising with, for example, Eurostat breakdowns, would allow comparison and cross-analysis of EU data on the working conditions of the older workforce.

6 Conclusions and findings relevant to policy development

Both the general population and the working population in Europe are ageing. To address the socio-economic consequences of an ageing population, European governments have reformed their pension systems and increased official retirement ages. As retirement age increases, working lives are prolonged.

However, pension reforms and policies focused on increasing economic incentives to work have not been fully effective in raising the effective retirement age, with an ongoing gap between the official and actual retirement ages in Europe. This can be explained by a number of factors related to the workplace (e.g. working conditions, work organisation) or the individual (e.g. health, motivation, financial situation).

These factors are often interlinked. People's motivation to continue working, and their ability to do so, can be significantly influenced by their working conditions, as well as their health and social context. Conversely, people who make the decision to continue working may be influenced by financial motivations, while the conditions in which they work are endangering their health and thus future ability to keep working. Work environments that fail to foster workers' employability and work ability throughout their working lives bring increased risk of prolonged sickness absence, disability or early retirement for health reasons. In situations in which people stay at work and develop chronic health conditions, this has a broader impact on the health status of the older population. Policy-makers are thus confronted with the challenge of addressing multiple factors, taking into account a range of inter-linkages between these various factors.

The analysis of the countries' policies, programmes and initiatives allowed the categorisation of countries into four groups based on a number of selected criteria, such as the scope and overall orientation of the policies implemented, the level of coordination across policy areas and across stakeholders, and the number and quality of the initiatives undertaken in implementing the policy framework.

Demographic developments, the influence of the international and EU policy frameworks, national frameworks and traditions and the economic crisis are drivers common to all European countries to develop policies for extending working life. The differences in how and when some of these drivers have impacted each country help explain the different levels of development of national policies.

While policy developments at EU and national level are promising, ageing and the gradual reduction of the European workforce will remain a challenge for the EU in the near future. There is a particularly urgent need to act in a number of countries that currently have limited policy frameworks to address this issue. Continued efforts are therefore required, particularly in the light of the economic crisis, the impact of which is still a significant factor.

▪ Policy pointers at national level

In view of the broad differences in approaches and traditions across European countries, national policies are not directly transferable without adaptation, but they can act as inspiring models. There are a number of founding elements and specific measures that should guide national policy developments in order to effectively ensure a healthy working life and respond to the challenges posed by demographic change.

In many countries, measures relating to age and career management, work organisation, skills development and health promotion are the backbone of policy frameworks related to demographic change and its impacts on the workforce. Such measures have been adopted in countries with very different national contexts and traditions, showing that transferability is possible, given some adjustments. These measures can be established through legislation or policy or encouraged through support mechanisms depending on the national context.

- *Skills development:* There are a number of instruments to improve the management of skills and competencies of older workers and to ensure that older workers have access to training and lifelong learning opportunities. In line with the recommendations of the European Parliament report *New forms of physical and psychosocial health risks* (EP, 2008), the specific training

needs of older workers should be taken into account when designing training curricula. There is an important body of literature on the most appropriate training methods for different groups of workers, with adapted training for older workers, including self-paced training with time for reflection and rehearsal; active learning rather than passive learning; or using personal experience, with opportunities for active peer-supported learning and mentoring³⁶.

- *Career development*: Instruments have been put in place to improve the management of careers throughout the working life. In a number of countries, these specifically target workers of a certain age and aim to discuss career expectations and goals, professional mobility and training opportunities. Examples include the 'interview to prepare the second part of the career' in France, the 'mid-life career reviews' in the UK and the 'senior interview' in Norway and Denmark.
- *Working time and work–life balance*: Measures introducing the potential for reduced or flexible working hours are considered to be one of the most effective ways to retain older people at work and contribute to a smoother transition into retirement. These measures have generally proven popular among older workers and, more importantly, the lack of such measures has been highlighted as one of the main reasons for people stopping working before the official retirement age (EC, 2012f; 2012 Eurobarometer on Active Ageing). These measures can be:
 - free for the worker, e.g. additional days holiday;
 - characterised by the absence of a financial disadvantage, e.g. not losing entitlement towards pension benefits by working fewer hours;
 - accompanied by a financial incentive, e.g. the potential to combine work revenues and pension benefits.
- *OSH and working conditions*: Older workers can be subject to specific OSH risks in the workplace³⁷. Some measures can be taken at the workplace level to address these risks, e.g. by sparing older workers from arduous tasks or non-standard working hours. However, such measures can increase the pressure on the younger age groups. In a life-course approach, workplace interventions consider all age groups, and where it is necessary to target specific measures at older workers, care is taken to mitigate the negative effects on workers in other age groups. Any legal or policy measure that would specifically target the working conditions of older workers should be carefully assessed, as it could be discriminatory or ineffective if not adapted to the individual or the type of work. As recalled by stakeholders during the fieldwork, educational and skill levels, as well as sectors and occupations, play a major role in a person's continued ability to work, and therefore should be carefully considered when designing measures related to OSH and working conditions for an ageing workforce.
- *Knowledge transfer*: In the context of labour shortages, measures to transfer knowledge and know-how across generations are a way of not losing skills and expertise from older generations at workplace and societal level. Examples of such measures can be mechanisms to link the recruitment of young workers with the employment of older workers (e.g. the Generation Contract in France). Such measures would need to be carefully designed to ensure that they effectively support intergenerational transfer of knowledge and are not simply a way to reduce older workers' participation in the labour market in order to increase that of younger workers.
- *Health promotion*: Beyond measures to guarantee the protection of workers' safety and health, in line with EU legal requirements, measures to promote health and healthy behaviours at work are a critical instrument of policies for the extension of working life. In line with the recommendation of the European Parliament report *New forms of physical and psychosocial health risks* (EP, 2008), any measures related to health promotion should be undertaken with a life-course perspective, i.e. taking into account the differences in the needs of different age groups.

³⁶ For more information, see 'The ageing workforce: implications for occupational safety and health - A research review' arising from the project 'Safer and Healthier Work at Any Age' (EU-OSHA 2016d)

³⁷ Ibid.

Legal frameworks

As confirmed by the analysis and the fieldwork, the obligations set out in the EU legal framework on OSH are generally considered to be sufficient to protect the older workforce. Going beyond the requirements of the EU OSH Framework Directive, the integration of broader concepts, such as work ability or sustainable work, into the OSH legal framework extends it to aspects not traditionally considered as 'OSH', e.g. related to work organisation or skills and career development.

In some countries, the introduction into the legislation, generally to promote age management, of specific incentives or mechanisms targeting older workers have proven successful. Examples include:

- measures on working time, e.g. the potential for workers over a certain age to reduce working hours without losing entitlement to their pension benefits;
- mechanisms to combine work revenues and pension benefits;
- the introduction of a requirement to conduct 'mid-life career reviews';
- reference to work ability or age management;
- a requirement to provide occupational health services;
- requirements for regular health checks.

During the fieldwork, representatives from workers' organisations in Belgium, Finland and France stressed that such a legal approach did help to raise the issue of the working conditions of the older workforce in companies. However, in other countries, social dialogue, voluntary measures and other supporting mechanisms may be sufficient and better adapted to the national context.

All stakeholders agreed that the main issue in relation to the legal framework was its implementation in the workplace, in particular in small and micro companies, rather than the legislation itself.

Policy frameworks

National OSH strategies

National OSH strategies should reflect the priorities of the EU Occupational Safety and Health (OSH) Strategic Framework 2014-2020, notably the objective to address the ageing of the workforce. In particular, in line with the approach taken in the EU Strategic Framework, Member States should:

- consider the wider dimensions of well-being at work in their OSH strategies, e.g. by introducing elements related to work–life balance, lifelong learning, age and disability discrimination;
- promote workers' health throughout their working lives in line with the life-course perspective.

In addition, in line with the Parliament's Resolution of 25 November 2015 on the EU Strategic Framework (EP, 2015b):

- consider the setting of 'context-appropriate targets that are measurable and comparable into their OSH strategies', along with 'regular and transparent reporting mechanisms on progress achieved', keeping in mind that, in relation to age, work and health, there is still a need for further development of appropriate indicators.

Mainstreaming health considerations in employment and socio-economic policies

Relevant policy initiatives often originate from the employment and social affairs area. A priority would thus be to assess current social security and pension system reforms and employment policies encouraging people to work until they are older to ensure that considerations related to health and well-being are also taken into account. Ultimately, such policies should openly acknowledge the impacts — both positive and negative — of raised retirement ages on workers' social, mental and physical well-being and on the well-being of the retired population.

Most European countries are providing economic incentives to employers to encourage them to hire or retain older workers (e.g. tax benefits or reductions in social contributions) and financial incentives to workers to stay in work longer (e.g. the potential to combine work revenues and pension benefits). Such

measures can be extremely effective in keeping people, in particular those with lower incomes, in the labour market. However, they do not take into account the conditions in which people work and the possible effect of an extended working life on people's health. Economic incentives to increase the working life should therefore be carefully designed to integrate health and well-being considerations.

In addition, there is a need to ensure that considerations related to extending the working life are taken into account in other policy areas. In particular, public health policies related to the ageing population should:

- consider the role of work in the health and well-being of the retired population;
- consider the impact of work and working conditions on health inequalities, including at older ages;
- consider the impact of health promotion at work on maintaining people's ability to work until a later age, building upon the concept of WHP.

Towards integrated policies

The ageing of the population and the workforce, and the related socio-economic consequences, impact on many different policy areas:

- Integrated policy frameworks are necessary to address the related social, economic, health, employment and OSH impacts and to prevent any mismatch between different but related policies.
- While policy development and implementation may be driven and led by one specific policy area, considerable coordination is necessary to ensure a successful impact.
- However, it is important to consider, for each country, the current stage of development of policies related to the ageing of the workforce and to adopt a staged approach towards integrated policy frameworks.

Supporting actions

Implementation is a key aspect of effective regulatory and policy frameworks. A country can develop a number of measures and initiatives to support and guide implementation:

- *General and technical support:*
 - In most countries, the work of labour inspectors is increasingly oriented away from the policing of standards, and towards the provision of advice and guidance. Labour inspectors are well placed to advise employers on the risks faced by vulnerable categories of workers and to promote a culture of open communication with workers about their age and health status. This could be reflected in the annual or multi-annual orientation programmes of labour inspectorates, along with the development of specific training programmes with modules on age and diversity management.
 - Providing practical guidance and training on age-related issues strengthens the drive to change workplace culture and is most effectively targeted at this level. Examples of concrete guidance include how to carry out an age structure analysis, assess workers' ability, e.g. with the Work Ability Index, conduct a diversity-aware risk assessment, put in place an age management policy, conduct career discussions with older workers, etc. Inspired by EU-OSHA's Online interactive Risk Assessment (OiRA) tool, these tools could also be specifically tailored to the needs of SMEs.
 - The involvement of social partners is an effective way to ensure that guidance is tailored to the needs of specific sectors, occupations and sizes of enterprises.
- *Financial support:* Funding can support effective implementation and encourage the uptake of good practices in the field of work, health and ageing at the workplace level.
- *Awareness raising:*

- The necessary level of awareness raising required differs from one country to another. In certain countries, a shift in cultural perceptions may be needed, which will require a long-term campaign involving communication and awareness raising. In other countries, the issue has been on the table for a number of years already. This does not mean that awareness-raising activities are no longer necessary, but they should be more targeted and relate to specific initiatives.
- The primary target groups for awareness-raising activities are employers and workers. Only if these two groups commit to the idea of sustainable working lives can any initiative in this regard be successful. Intermediaries are another important group in need of targeted awareness-raising measures.
- Building a business case for sustainable working lives, i.e. demonstrating the short- and long-term benefits of investing in a healthy workforce and the costs of lack of action, is an important and necessary starting point.
- A key element of an effective communication strategy is to build common understanding and language around one concept. The concept of 'sustainable employability' in the Netherlands is now used as a reference by all relevant stakeholders, from national policy-makers and intermediary organisations, to employers and employees.
- *Involvement of key players:*
 - *Social partners:*
 - The experience of certain countries has shown the importance of involving the social partners when formulating policies in relation to work, age and health. Such involvement creates a feeling of ownership and co-creation towards the measures adopted, increasing the chances of them succeeding at the workplace level.
 - In certain countries, social partner agreements at national, sectoral and company levels are a powerful instrument for ensuring the effective take-up at workplace level of nationally defined goals, e.g. supporting the introduction of age management policies or promoting flexible forms of employment for older workers. In certain countries, these commitments have been reinforced through their adoption as laws.
 - *Other intermediaries:*
 - Intermediaries have an important role to play in assisting businesses, especially small and micro enterprises, in the development and implementation of measures to support longer safe and healthy working lives.
 - The specific intermediaries that should be involved depend on the institutional setting in a given country, e.g. occupational insurance organisations or OSH advisory services do not exist in all countries.
 - Intermediaries include work insurance and pension insurance organisations, OSH advisory services, universities, business organisations, NGOs, think-tanks and charities. Institutional actors, such as regional and local governments, national research institutes on OSH, and employment or health agencies, can also play an important role.
 - *Structures for stakeholder coordination:*
 - The creation of formal structures for stakeholder coordination (e.g. stakeholder networks) can help to build ownership, boost innovation and exchange knowledge and experience. These structures are often supported by a combination of communication tools (e.g. websites, events), technical tools (e.g. guidance documents, web-based resources) and funding mechanisms.

- *The needs of small and micro enterprises*

Particular attention should be paid to the situation of small and micro enterprises. Developing a coherent policy at the workplace level to develop sustainable working conditions requires a mix of occupational safety and health, human resources and management expertise, as well as financial resources. Small and micro enterprises often lack the technical skills and expertise in this field, and they are likely to struggle to develop and implement these policies without adequate external support.

In line with the objective of the EU Strategic Framework to improve the implementation of OSH legislation in small and micro enterprises, support should be provided specifically to these enterprises. This could include specific guidance, e-tools and awareness raising.

- **Policy pointers at EU level**

The review of policies developed at the national level to address demographic change shows that the EU legal and policy framework plays a role as a driver for action in Member States. In addition, supporting initiatives such as the European Year of Active Ageing or funding from the ESF have been shown to have an influence on national policy agendas.

There may be opportunities for the EU to further promote and support national policies in this field. The European Commission's ongoing regulatory fitness and performance review programme (REFIT) of the OSH legislation and the up-coming review of the EU Strategic Framework both provide an opportunity to consider potential changes or improvements in the EU policy context.

OSH legislation

The current OSH legal framework is based on the principle of adapting the working environment to the needs and abilities of each individual worker, which is in line with the life-course approach. However, the requirements to adapt the work to the individual and take into consideration the worker's capabilities as regards safety and health, as well as to protect sensitive risk groups, is of a general nature, as the EU OSH Framework Directive does not specify groups and associated risks. There are two main possibilities for reinforcing the existing OSH legal framework:

- *A new directive on older workers:*
 - While certain categories of workers, namely young workers, pregnant/breastfeeding workers and temporary workers, are subject to specific OSH requirements through dedicated directives, this is not the case for older workers.
 - The justification for legislation specifically targeting a given category of vulnerable workers usually centres on perceptions of its increased susceptibility or vulnerability, although similar arguments could be made for other vulnerable groups such as migrant workers.
 - One of the challenges is that while, as a group, older workers might be more at risk, this increased susceptibility is by no means universal and any restrictions due to age might be considered discriminatory towards healthy, fit older workers. It is therefore questionable whether or not there is a real need (or justification) for specific legislation at EU level on the occupational safety and health of older workers.
 - This is further confirmed by stakeholders' opinions (expressed in several of the workshops held under this project), whereby several participants agreed that the current OSH legal frameworks in place were sufficient to cover the risks to older workers, considering the broad remit for risk assessment and prevention. It was also mentioned several times that specific legislation for older workers might generate stigmatisation and create inequalities towards other groups of workers in equal need of protection.
- *Review of the EU OSH Framework Directive and individual directives:*
 - A revision of the Framework Directive could be envisaged to integrate the obligation for

employers to take age into consideration when evaluating risks, adapting work and putting prevention measures in place. However, guidance from the European Commission has already specified that older workers — as one of the particularly sensitive risk groups — must be protected against the hazards that specifically affect them. As mentioned above, specifically targeting older workers in the legislation may lead to discrimination.

- Any change in the legislation in relation to the ageing workforce could be part of a broader review related to:
 - the needs of vulnerable workers;
 - Existing directives related to prevention of musculoskeletal disorders, as mentioned in *Conclusions on a new agenda for health and safety at work to foster better working conditions*, adopted by the Council of the European Union on 5 October 2015 (European Council, 2015).

The EU Strategic Framework

- The review of the EU Strategic Framework, will offer an opportunity to propose more concrete EU-level measures to address OSH in the context of an ageing workforce.
- The European Parliament regrets that the EU Strategic Framework does not include specific targets (EP, 2015b). In order to develop such targets, a first important step is to develop appropriate indicators in relation to age, work and health, especially in view of the lack of current data on these issues.

Mainstreaming age considerations into different policy areas

The ageing of the population and workforce affects many different policy areas. Cross-policy coordination at EU level is critical for the implementation of successful policies.

- *Employment and socio-economic policies:*
 - Policies dealing with the reform of the social security and pension systems, such as the European Employment Strategy, should more firmly acknowledge the consequences of pension reforms and raised retirement ages on working conditions.
 - Policies should promote the adoption of measures to guarantee the sustainability of work, including:
 - adapting work to each worker's abilities;
 - improving systems for rehabilitation and return-to-work;
 - career management and measures to facilitate transition into retirement (e.g. part-time work, combination of work and pension, etc.).
- *Education policies:*
 - promoting lifelong learning;
 - facilitating access to vocational training, continuous education and professional development for adults;
 - improving the ICT skills of older people.
- *Public health policies:*
 - Policies related to the health of the ageing population should continue to explore the links between health and work. Initiatives such as WHP integrate external factors, such as lifestyles or the environment, into the workplace and allow workers and employers to think about health in a more holistic way.
 - EU action and work in the field of health inequalities should continue to take into account

the impact of working conditions on the health of older people, depending on the type of occupation and sector and duration of exposure to arduous working conditions.

- One possible area for cross-policy action at EU level, building on the current work of Eurofound, the European Network for Workplace Health Promotion and the Fit for Work Europe Coalition, is the employment of people with chronic diseases, which is increasingly relevant in the context of an ageing population.
- *Anti-discrimination policies:*
 - With regard to anti-discrimination, the large number of court cases on the application of Article 6(1) of the Employment Equality Directive (on differences in treatment based on age) shows that there is a need for more guidance on what can be considered appropriate and necessary differences in treatment.
 - Anti-discrimination policies should consider the current vulnerability in terms of employment rights of workers who have reached retirement age but wish to continue working, in particular in a context in which workers are encouraged to work beyond retirement age.

Supporting actions

- *Tools — incentive for governments to develop and disseminate guidance*
 - Guidance could be developed at the EU level on the key elements of a successful integrated policy framework for sustainable working lives.
 - Tools could be prepared on useful OSH and HR instruments, such as work ability assessments and age management policies.
 - Such tools should be practical, have a clear target group, e.g. specific sector, occupation or size, and be easy to disseminate. EU-OSHA's online tool, OiRA, is a good example.
 - Close coordination with the European social partners is necessary to ensure that any guidance or tool produced is adapted to the realities of the working environment and to different sectors and sizes of enterprises.
- *Better information and awareness-raising:*
 - The 2012 European Year of Active Ageing was successful in raising awareness among the general population of the needs of the older population. Its impact on extending working life was limited, however, as few activities focused on the pre-retirement population.
 - EU-OSHA's Healthy Workplaces Campaign 2016-2017, 'Healthy Workplaces for All Ages', is a unique opportunity to raise awareness and share tools and good practice among Member States to effectively implement safe and healthy working conditions throughout the whole working life.
 - Sharing of best practice and the exchange of knowledge should be encouraged through the establishment of a specific platform to bring together relevant stakeholders to discuss current and future workplace challenges in the context of an ageing workforce. It would also foster cooperation among various stakeholders.
- *Data collection and statistics and research*
 - There is currently a lack of harmonised data and information at the European level on health at work, not only concerning work-related diseases and accidents but also regarding 'common' health problems. There is a need for:
 - better harmonisation across countries of definitions for 'long-standing health problems' and 'work-related health problems';
 - better surveying and reporting mechanisms, as results are influenced by

people's perceptions of illness and whether they report health problems or not.

- There are no EU-wide data on sickness absence due to non-occupational health problems. Considering the financial and social burden of sickness absence on societies, companies and individuals, it is critical to gather harmonised data at EU level on sickness absence for occupational and non-occupational reasons. Such data should be broken down by gender, age, occupation, education level, duration, etc.
- Surveys such as ESENER or the EWCS have proven very useful in collecting data on the working conditions of the older workforce. However, their representativeness has been debated by different stakeholders. The introduction of a breakdown by age in these two surveys would allow comparison and cross-analysis of EU data on the working conditions of an ageing workforce.
- It is essential to study gender differences among older workers and to consider direct links between poor health status and the level of education, income and overall socio-economic status of older workers.

Funding the promotion of sustainable working lives

- The ESIF and, more particularly, the ESF already contribute to the promotion of age management and active ageing. ESF programming should continue to consider the adaptation of the work environment according to a person's age and abilities, also within the wider context of the Europe 2020 Strategy, particularly the European Innovation Partnership on Active and Healthy Ageing.
- Lifelong learning programmes, such as the Grundvig and Leonardo da Vinci programmes, contribute to increasing the employability of workers, especially older workers, across Europe. These should continue to promote lifelong learning and vocational training opportunities for older workers and to promote adapted training techniques to the needs of an ageing workforce.
- Finally, the EU Programme for Employment and Social Innovation (EaSI), in effect from 2014 to 2020, supports the implementation of the objectives of the EU in the field of employment, social affairs, working conditions and non-discrimination. The demographic dimension of the EaSI could be strengthened to refer specifically to older workers and the consequences of demographic change.

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7 Annex 1: Overview of concepts related to work, health and age

The definitions given in Table 7-1 are not universally accepted definitions of these concepts because, for most, there is no such integrated, internationally agreed, stable understanding. The definitions are extracted from the main, or most recent, policy document on the topic or concept prepared by an authoritative international organisation. While debates in the scientific and academic communities are ongoing, partly as a result of new research, partly to keep adapting these various concepts to the ever-changing political and socio-economic situation, definitions from international organisations are more likely to reflect the most commonly accepted understanding in the global and EU decision-making community.

For a few definitions, such as ‘work ability’, ‘well-being at work’ and ‘employability’, other sources have been used. The definition for the concept of ‘work ability’ comes from the Finnish research and policy communities in the 1980s. However, since the 1990s, it has been widely used by international researchers and policy-makers and therefore can be considered as accepted at EU level. The concept of ‘well-being at work’, on the other hand, has a number of different definitions, none more prominent than the others (EU OSHA, 2013b). Two definitions have been proposed in Table 7-1: one comes from an academic source and was referred to by EU-OSHA as a useful definition at EU level; and the Chartered Institute of Personnel and Development (CIPD) developed the other one. Finally, the concept of ‘employability’ has undergone a number of evolutions and is still defined in different ways today. This is briefly summarised in the table.

A number of additional explanatory elements complete the definitions presented in Table 7-1.

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Table 7-1, Concepts used in the policy discourse to address the challenges of an ageing workforce

Concept	Policy areas	Definition
Healthy ageing	<p>Main: Public health</p> <p>Other: Social justice and equal treatment Social policy Employment Education</p>	<p><i>Healthy and active ageing allows people to realise their potential for physical, social, and mental well-being throughout the life-course and to participate in society, while providing them with adequate protection, security and care when they require assistance (WHO, 2002)</i></p> <p><i>Healthy ageing is the process of optimising opportunities for physical, social and mental health to enable older people to take an active part in society without discrimination and to enjoy an independent and good quality of life (Swedish Institute of Public Health, 2006)</i></p> <p>According to EuroHealthNet, 'healthy ageing' covers the following areas (EuroHealthNet, 2016):</p> <ul style="list-style-type: none"> • Long-term care • Diet and nutrition • Environment and accessibility • Employment and volunteering • Social inclusion and participation • Physical activity • Access to services • New technologies • Education and lifelong learning
Active ageing	<p>Main: Public health Social policy</p> <p>Other: Social justice and equal treatment Employment Education</p>	<p><i>Active ageing is the process of optimising opportunities for health, participation and security in order to enhance quality of life as people age (WHO, 2002)</i></p> <p>Although the definitions are similar, the concept of 'active ageing' according to WHO is meant to convey a more inclusive message than 'healthy ageing'. It allows older people to contribute to society while enjoying the care and protection that enables them to live safely and optimally</p> <p>According to the EU Council (EU, 2012), promoting active ageing requires:</p> <ul style="list-style-type: none"> • Strengthening social cohesion, inclusion and participation across a person's lifetime • Promoting participation in the labour market (training, lifelong learning, reconciliation of private and working life) • Recognition of the values of all age groups and their contribution to society (promotion of a positive image) • Promoting research and innovation to improve the lives of older people (accessible environments, ICT) • Health promotion, disease prevention and early diagnosis throughout the lifecycle, as well as rehabilitation (leading to healthy ageing) • Adjusting social security systems in such a way that they are able to provide sustainable and adequate pensions
Lifelong learning	<p>Main: Education</p> <p>Other: Employment. Social justice and equal treatment</p>	<p><i>Academically, the term 'lifelong learning' has no universally accepted definition or any standard use in the literature. The European Commission defines it as 'all learning activity undertaken throughout life, with the aim of improving knowledge, skills and competencies within a personal, civic, social and/or employment-related perspective. Lifelong Learning encompasses the whole spectrum of formal, non-formal and informal learning' (European Commission, 2001)</i></p> <ul style="list-style-type: none"> ▪ The objectives of lifelong learning are broad and not restricted to employment-related skills: they include personal fulfilment, active citizenship, social inclusion and employability/adaptability ▪ Lifelong learning includes formal as well as non-formal learning activities or 'lifewide learning', i.e. learning that is not provided by an education or training institution and does not lead to certification, but is, however, structured in terms of learning objectives, time and support

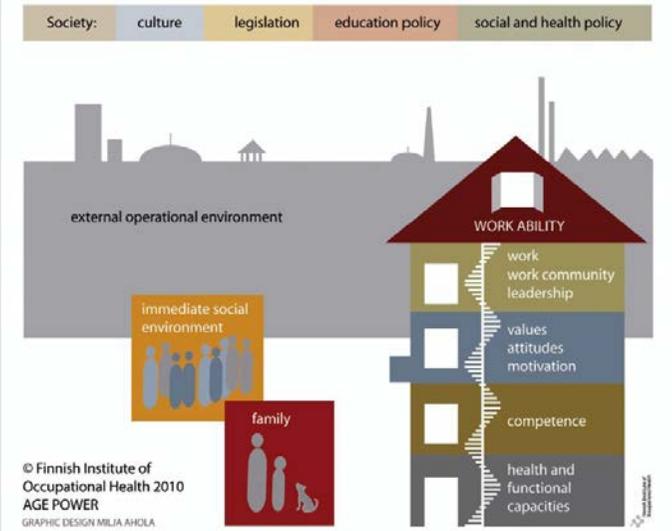
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policies, strategies and programmes on population and workforce ageing

Concept	Policy areas	Definition
Rehabilitation	<p>Main: Social justice and equality</p> <p>Other: Public health Social policy Employment</p>	<p><i>Measures to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life (UNGA, 2006)</i></p> <p>Rehabilitation, understood in the sense of rehabilitating someone with a disability or with health problems into an active life, can be split into three different types:</p> <ul style="list-style-type: none"> • Medical rehabilitation: restoring the functional or mental ability and quality of life of those with physical or mental impairments or disabilities • Vocational rehabilitation: enabling persons with physical or mental impairments or disabilities to overcome barriers to accessing, maintaining or returning to employment or other useful occupation • Social rehabilitation: facilitating the participation of people with physical or mental impairments or disabilities in social life
Workplace health promotion/Health-promoting workplaces	<p>Main: Public health</p> <p>Other: Employment Social policy</p>	<p><i>Workplace health promotion (WHP) is the combined efforts of employers, employees and society to improve the health and well-being of people at work (ENWHP, 2012)</i></p> <p>This can be achieved through a combination of (EU-OSHA, 2010):</p> <ul style="list-style-type: none"> • Improving the work organisation and working environment • Promoting the participation of workers in healthy activities • Enabling healthy choices • Encouraging personal development <p>Examples of WHP measures include:</p> <ul style="list-style-type: none"> • Organisational measures (e.g. flexible working hours and workplaces, employee participation, etc.) • Environmental measures (e.g. smoking bans, supportive psychosocial work environment, etc.) • Individual measures (e.g. fitness courses, encouraging healthy eating, anti-stress training)
Well-being at work	<p>Main: Employment</p> <p>Other: Public health Education</p>	<p><i>Well-being is a summative concept that characterises the quality of working lives, including occupational safety and health (OSH) aspects, and it may be a major determinant of productivity at the individual, enterprise and societal levels (Schulte & Vainio, 2010)</i></p> <p><i>Creating an environment to promote a state of contentment, which allows an employee to flourish and achieve their full potential for the benefit of themselves and their organisation (CIPD, 2007)</i></p> <ul style="list-style-type: none"> • Employee well-being covers: healthy body and lifestyle, self-confidence, self-respect, resilience, sense of purpose, an active and curious mind and a network of supportive relationships • Organisational well-being covers: values-based working environment, open communication, opportunities to achieve personal aspirations, work–life balance, flexibility, potential to negotiate workload and work pace, etc. (CIPD, 2007)
Return to work	<p>Main: Social policy Employment</p> <p>Other: Social justice and equality Public health</p>	<p><i>Return-to-work programmes facilitate the workplace reintegration of persons who experience a reduction in work capacity or capability, whether due to invalidity, illness or ageing (ISSA, 2013)</i></p> <p>Return to work is a concept encompassing all procedures and initiatives aiming to facilitate the workplace reintegration of persons who experience a reduction in work capacity or capability, whether due to invalidity, illness or ageing. It is the interplay between:</p> <ul style="list-style-type: none"> • The societal context, culture and politics (macro-system) • The workplace, healthcare, legislative and insurance systems (meso-system) • The worker (micro-system)

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Concept	Policy areas	Definition
Age management	Main: Employment Other: Social policy Social justice and equality	<p><i>The various dimensions by which human resources are managed within organisations with an explicit focus on ageing and, also, more generally, to the overall management of the workforce ageing via public policy or collective bargaining (Walker, 1997)</i></p> <p>It is a concept used to cover company attitudes towards older workers. The focus can be on the individual, the enterprise or labour-market policies and frameworks. It encompasses the following eight dimensions (Eurofound, 2006):</p> <ul style="list-style-type: none"> • Job recruitment • Learning, training and lifelong learning • Career development • Flexible working time practices • Health protection and promotion and workplace design • Redeployment • Employment exit and the transition to retirement • Comprehensive approaches covering the working life-course
Diversity management	Main: Employment Other: Social policy Social justice and equality	<p><i>Diversity management is the active and conscious development of a future-oriented, value-driven strategic, communicative and managerial process of accepting and using certain differences and similarities as a potential in an organisation, a process which creates added value to the company (ISDM, 2007)</i></p> <p><i>Management philosophy of recognising and valuing heterogeneity in organisations with a view to improving organisational performance (Ozbilgin et al., 2011).</i></p> <p>Diversity management consists in integrating the idea of diversity in the management culture and daily management decisions and processes. It considers every employee as a creative resource for the organisation and uses differences as a potential in an organisation to create added value to the company. Companies implementing diversity management see improvements on a number of fronts:</p> <ul style="list-style-type: none"> • Effecting culture change • Improving workforce diversity and the cultural mix • Enhancing market opportunities • External recognition and image
Employability	Main: Employment Other: Social policy Social justice and equality	<p>There is no commonly accepted definition of employability. In simple terms, employability can be defined as ‘the quality of being employable’ or the ‘combination of factors permitting access to work, to maintain it and to progress in one’s career’ (MKW Wirtschaftsforschungs GmbH, 2011) In the national and EU policy-making sphere, employability is often used in the narrow sense of ‘initiative employability’, focusing on the individual aspects of employability (in particular competencies and skills) and therefore focuses on individual-centred solutions. The policy response to this is the development of education and lifelong learning policies (see definition of employability in EC, 2014c).</p> <p>In the research sphere however, employability is understood to be a broader, more dynamic and more holistic concept. This ‘interactive employability’ considers three main dimensions (based on Gazier, 2006, and McQuaid & Lindsay, 2005):</p> <ul style="list-style-type: none"> • Individual factors, including skills and qualifications, demographic characteristics (such as age), health and well-being, adaptability and mobility • Personal circumstances, including household circumstances (e.g. care responsibilities) and access to resources • External factors, including labour market and macroeconomic factors, vacancy and recruitment factors and employment policy support (such as accessibility of job search counselling or financial incentives)

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policies, strategies and programmes on population and workforce ageing

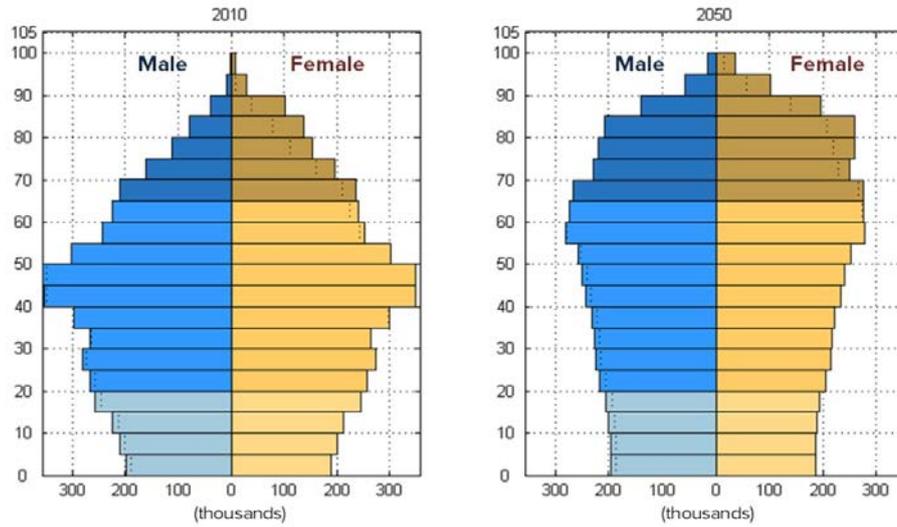
Concept	Policy areas	Definition
<p>Work ability</p>	<p>Main: Employment</p> <p>Other: Public health Social policy Social justice and equality</p>	<p><i>The holistic image of work ability consists of both the resources of the individual and factors related to work and working and the environment outside of work (FIOH, 2014)</i></p> <p>The dimensions of work ability can be depicted in the form of a work ability house, its floors and the surrounding environment:</p> <ul style="list-style-type: none"> • The first floor relates to the worker's health, which is the foundation for good work ability but is by no means sufficient • The second floor relates to the question of competencies and skills, and is a key issue when discussing, for instance, the career developments of older workers • The third floor focuses on the social and moral values of the worker, with an opening (the balcony) to the close external environment of the worker (family and social environment) • The fourth floor covers the work content (physical, psychological and social demands), the work environment and work organisation  <p>The work ability concept is evidence based. Work ability is measurable, notably through the use of the Work Ability Index (WAI). The WAI, developed by the FIOH in the 1980s, is a questionnaire-based tool used to measure someone's work ability through a series of questions, which take into consideration the demands of the work and the individual's health status and resources. The translation of the WAI into 28 languages in 2009 and its dissemination throughout Europe means that it is today an instrument commonly used by occupational health professionals in many European countries. The work ability concept, supported by the WAI, is increasingly popular in Europe and is referred to in many policy documents related to the ageing workforce (see Chapter 4)</p>
<p>Sustainable work</p>	<p>Main: Employment</p> <p>Other: Public health Social policy Social justice and equality</p>	<p><i>Sustainable work over the life-course means that working and living conditions are such that they support people in engaging and remaining in work throughout an extended working life. These conditions enable a fit between work and the characteristics or circumstances of the individual throughout their changing life, and must be developed through policies and practices at work and outside work (Eurofound, 2015)</i></p> <p>Sustainable work over the life-course is addressed through two main dimensions:</p> <ul style="list-style-type: none"> • Work, specifically the characteristics of the job and the work environment. This includes earnings, prospects, intrinsic job quality and working time quality • The individual, specifically their characteristics and circumstances. This includes time availability and care obligations, health and well-being, employability and skills, unemployment and inactivity, and motivation (Eurofound, 2015) <p>In a broader perspective, sustainable work can also relate to economic, social and environmental sustainability. According to the FIOH, 'a specific work arrangement cannot be called sustainable unless the requirements of sustainability are met in all the four key dimensions — natural, economic, human and social — simultaneously' (Kasvio <i>et al.</i>, 2010)</p>

8 Annex 2: Indicators by country

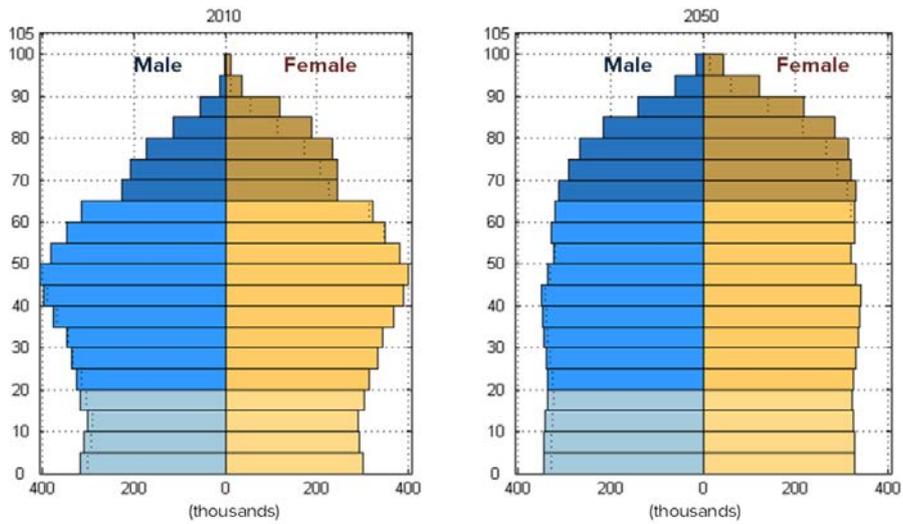
- Demographic indicators

Figure 8-1, Age pyramids of European countries in 2010 and in 2050 (ICPDB, 2014a to 2014ae)

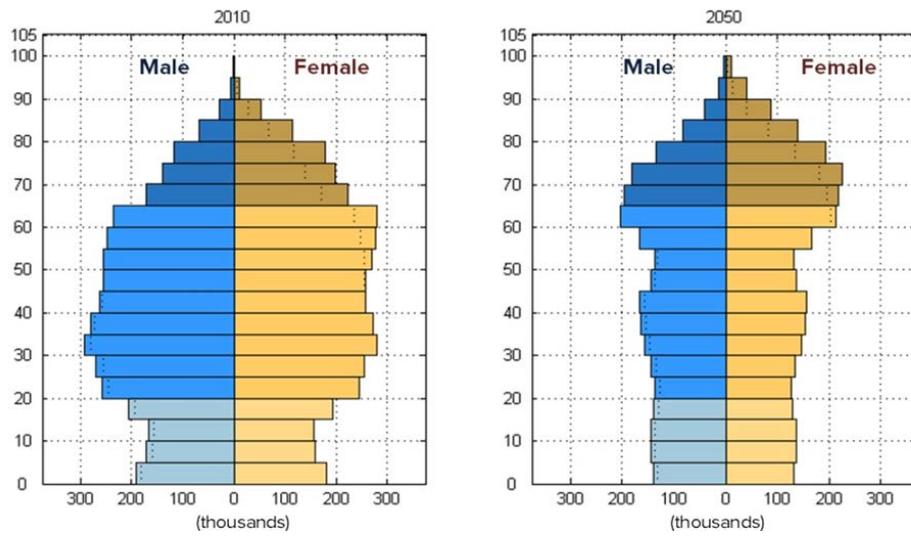
Austria



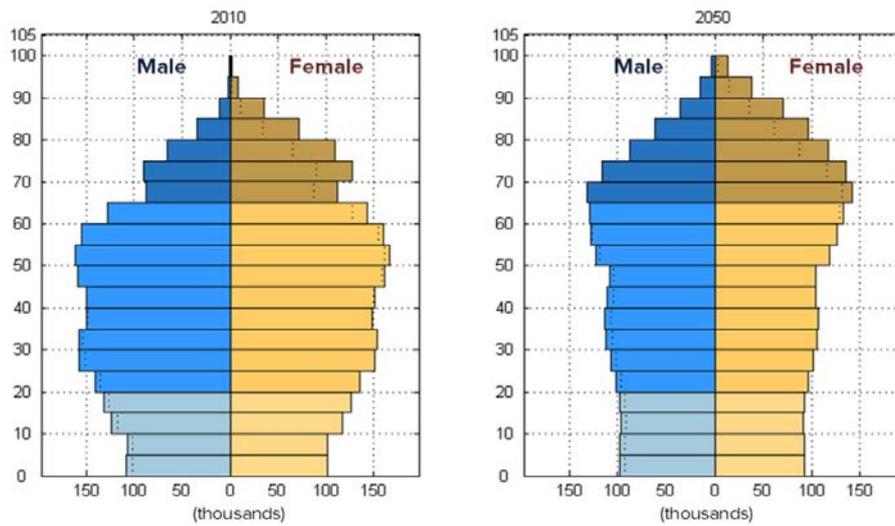
Belgium



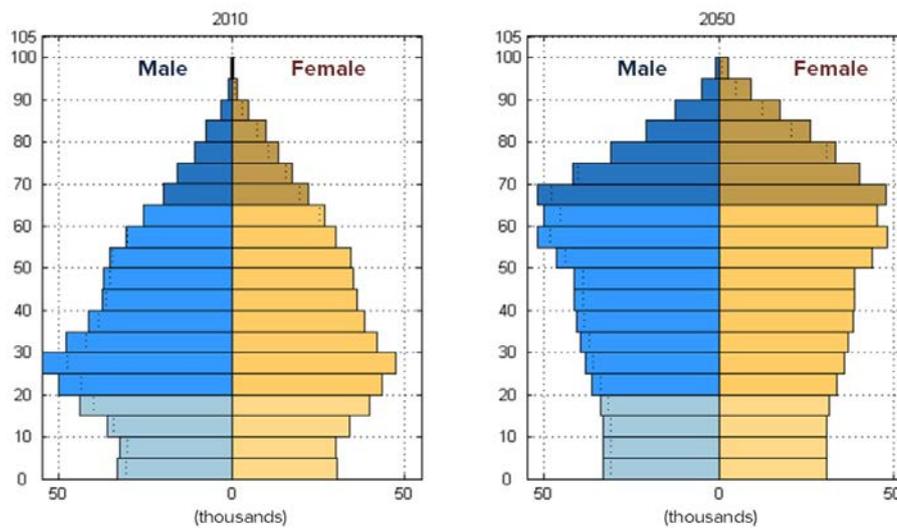
Bulgaria



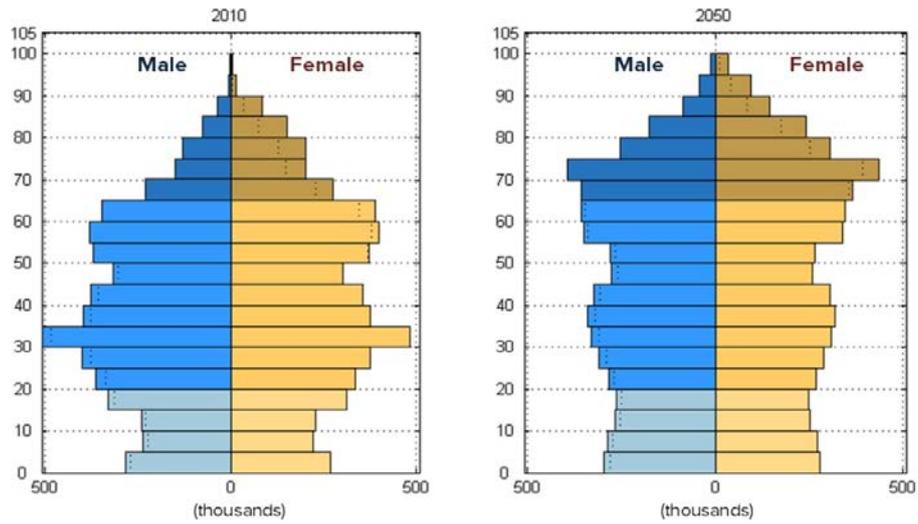
Croatia



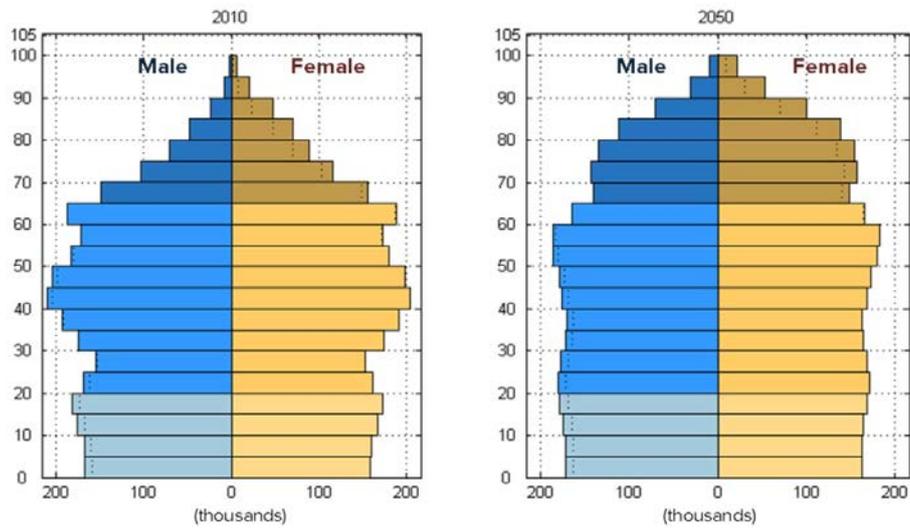
Cyprus



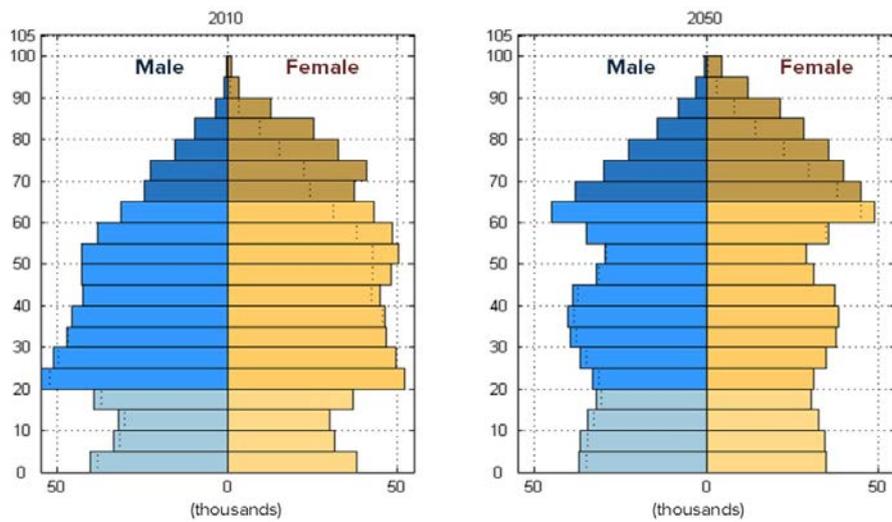
Czech Republic



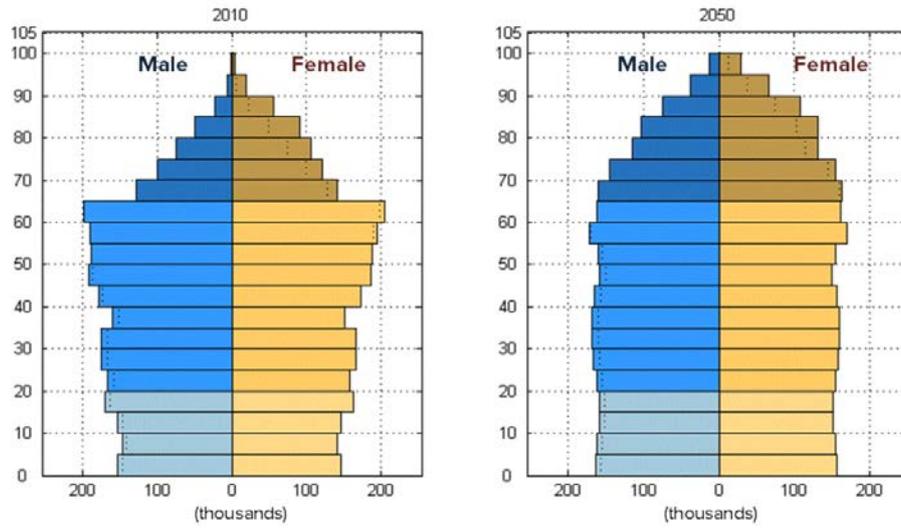
Denmark



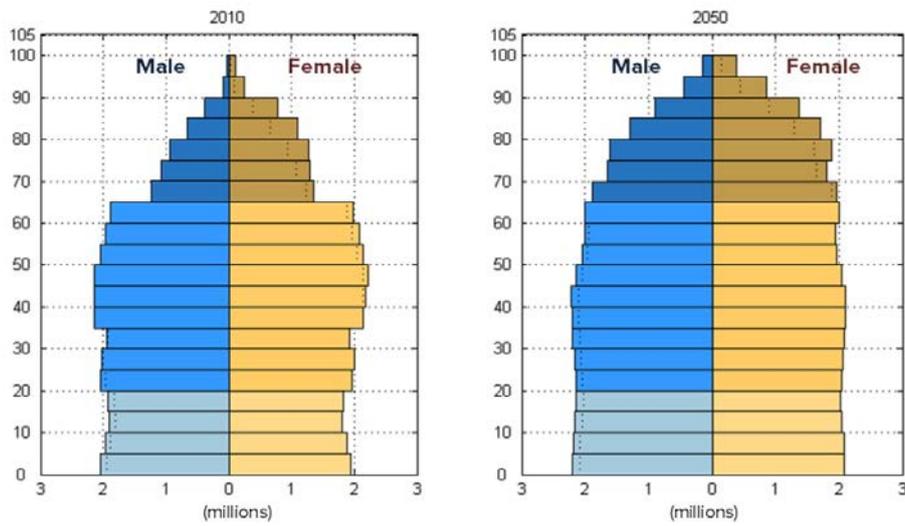
Estonia



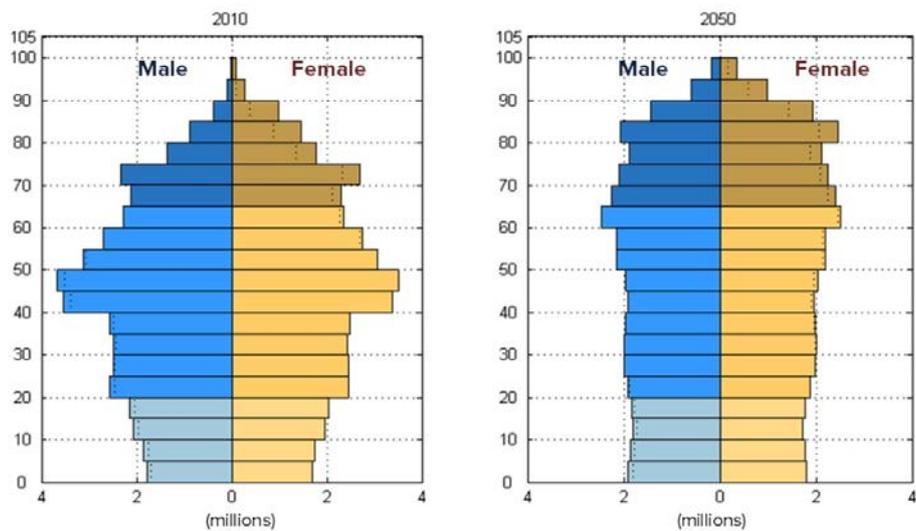
Finland



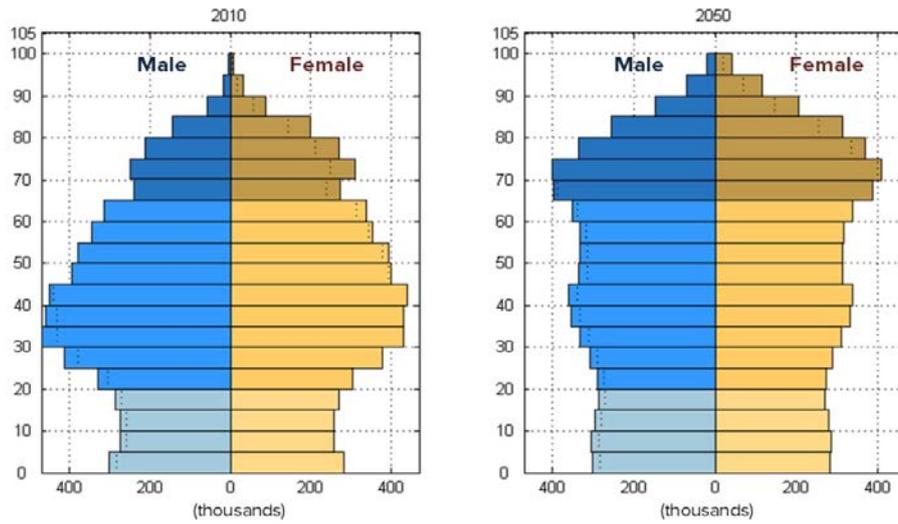
France



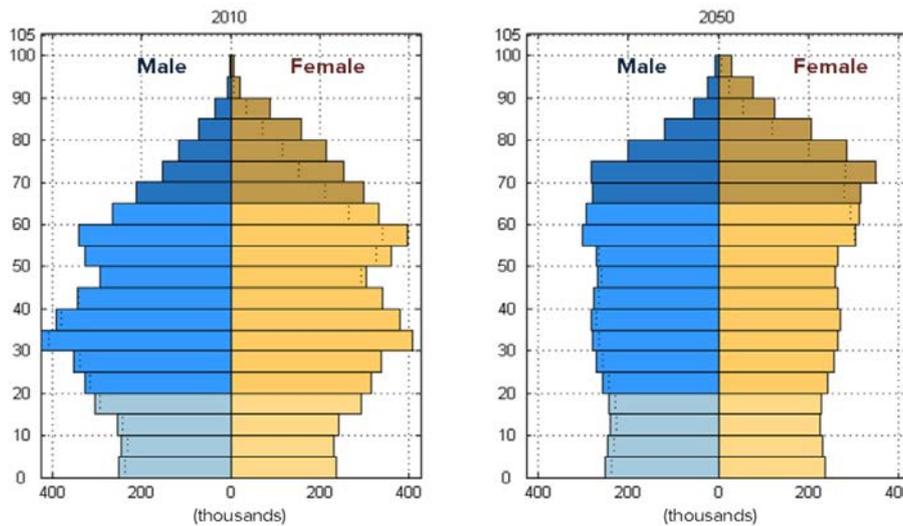
Germany



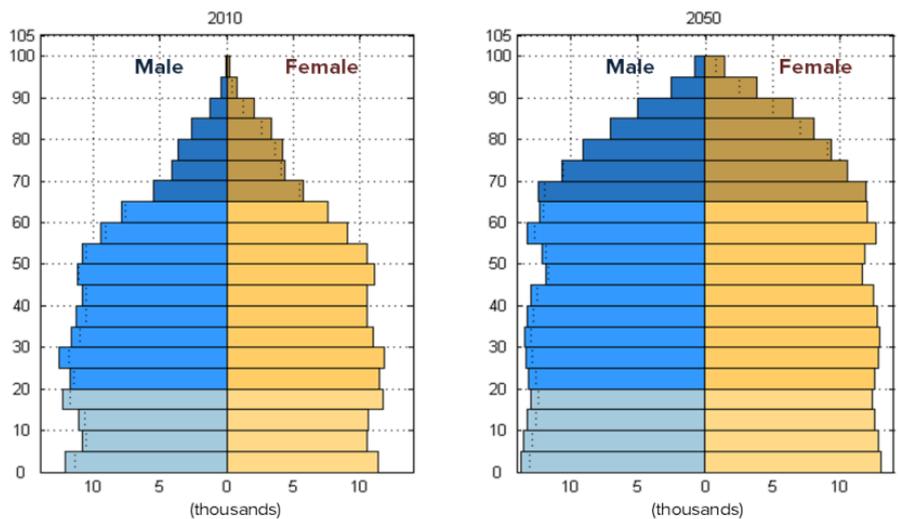
Greece



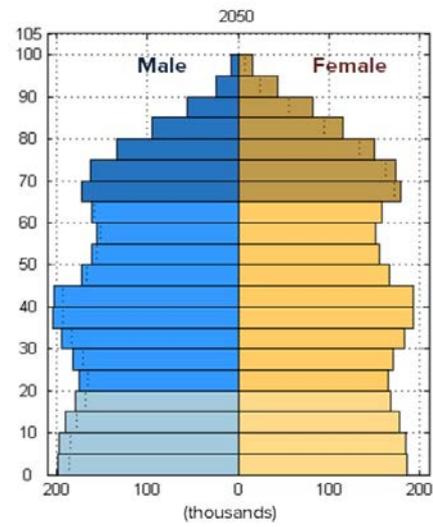
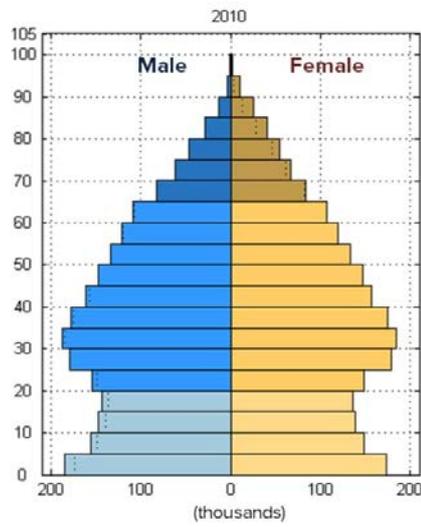
Hungary



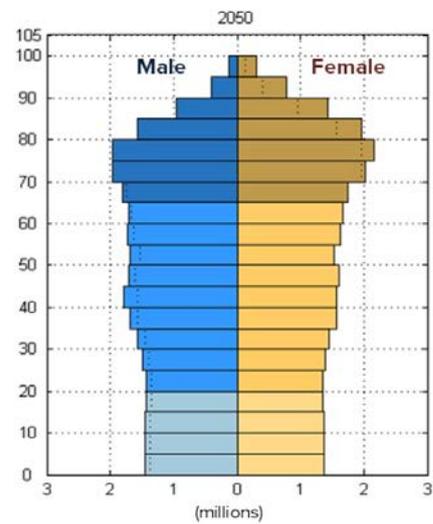
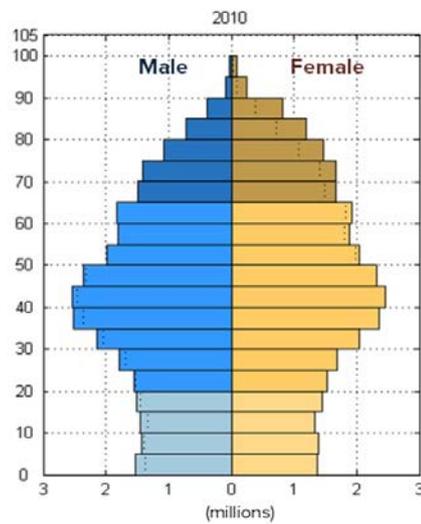
Iceland



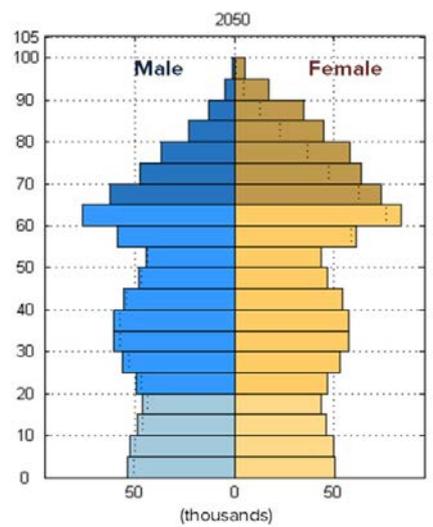
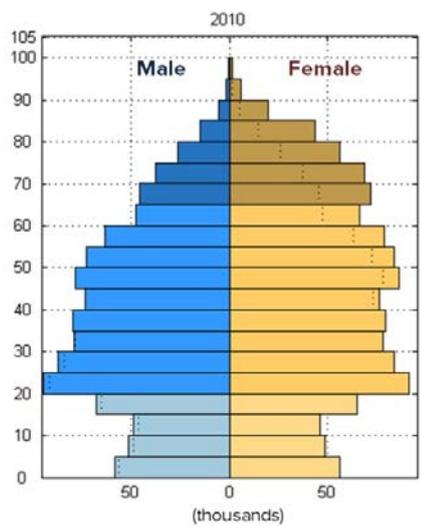
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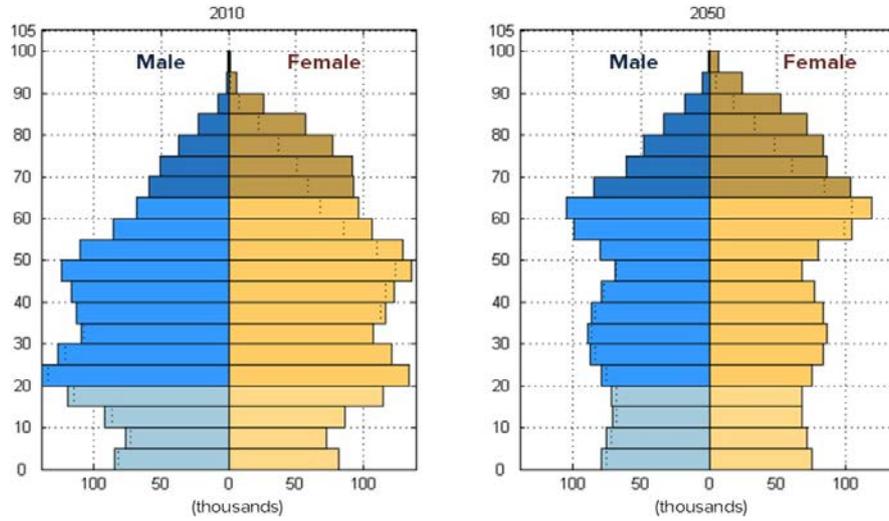
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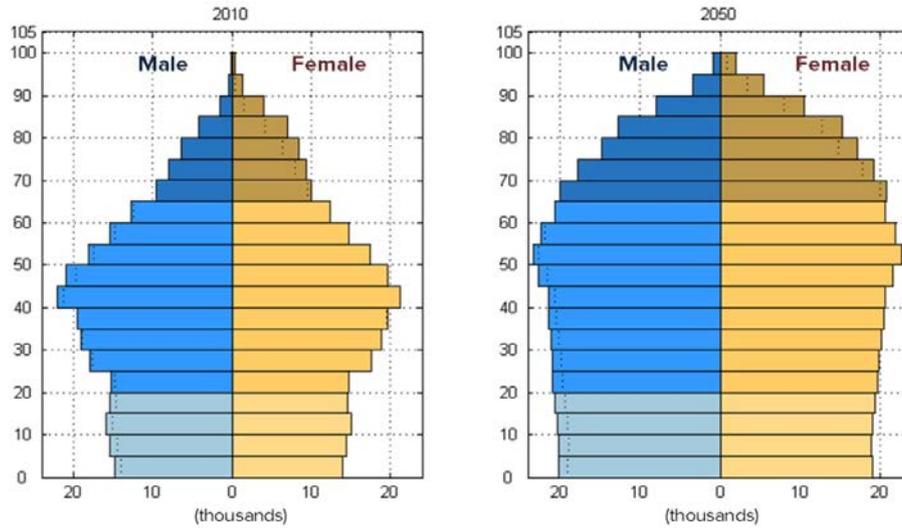
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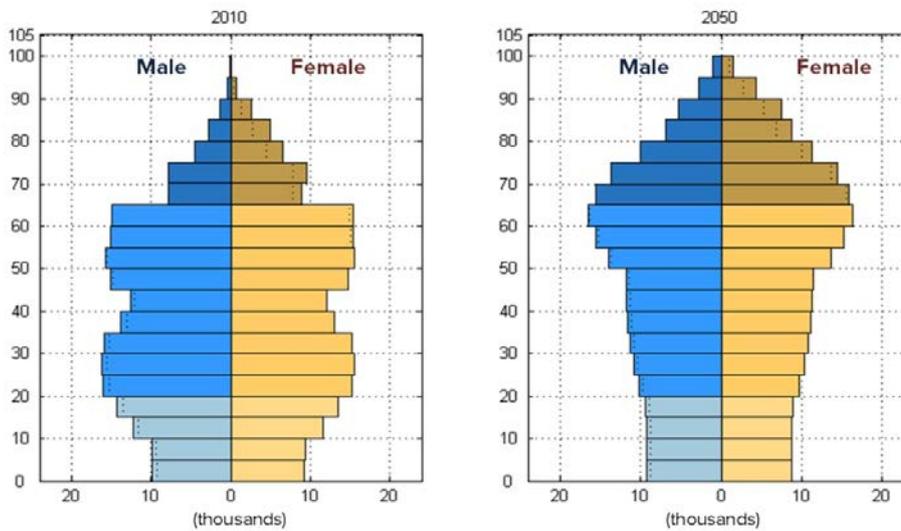
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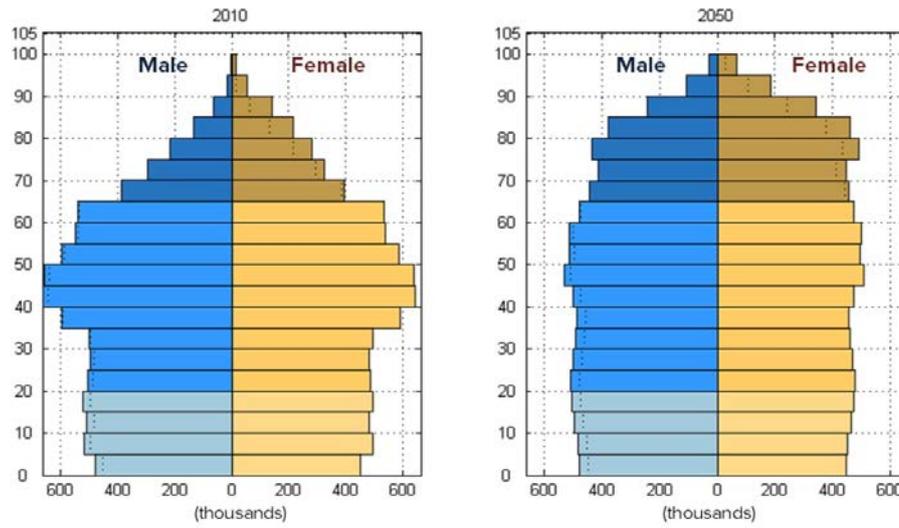
Luxembourg



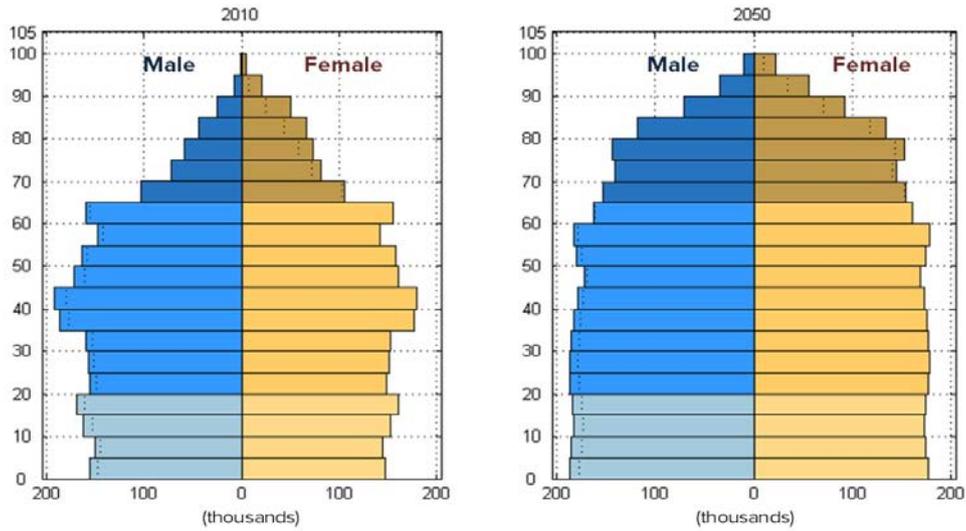
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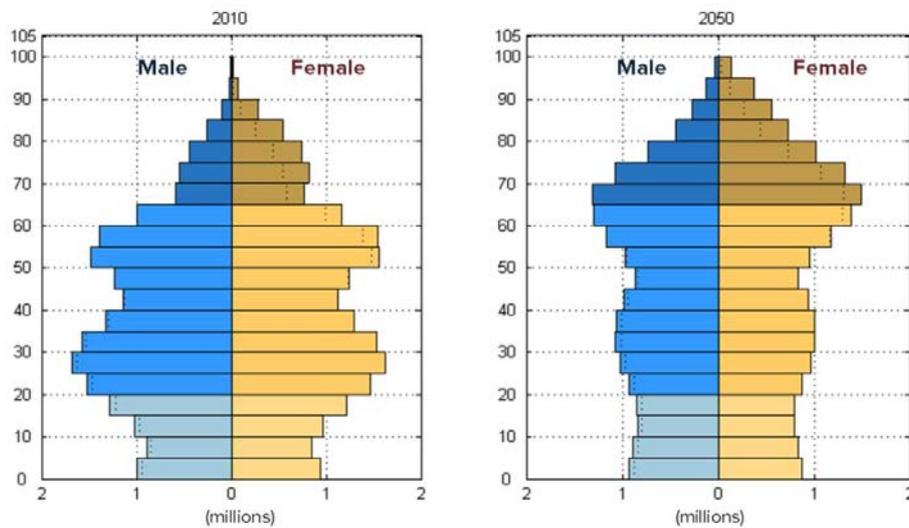
Netherlands



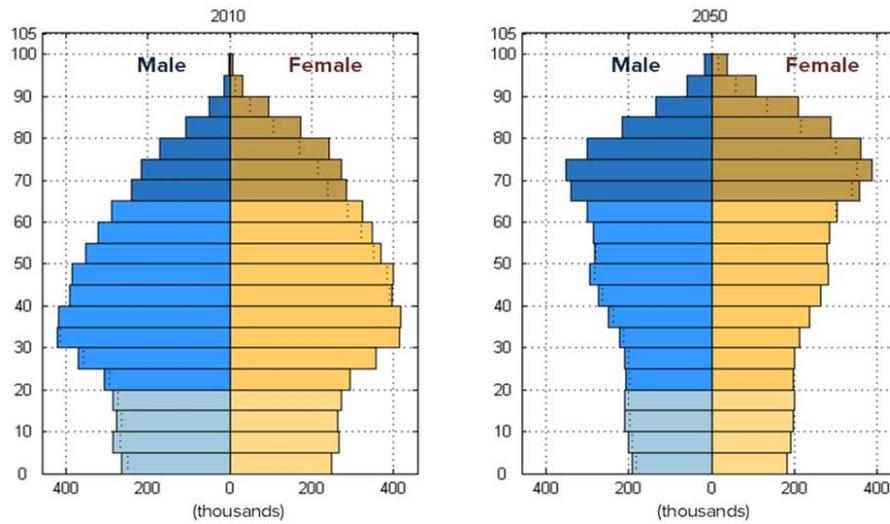
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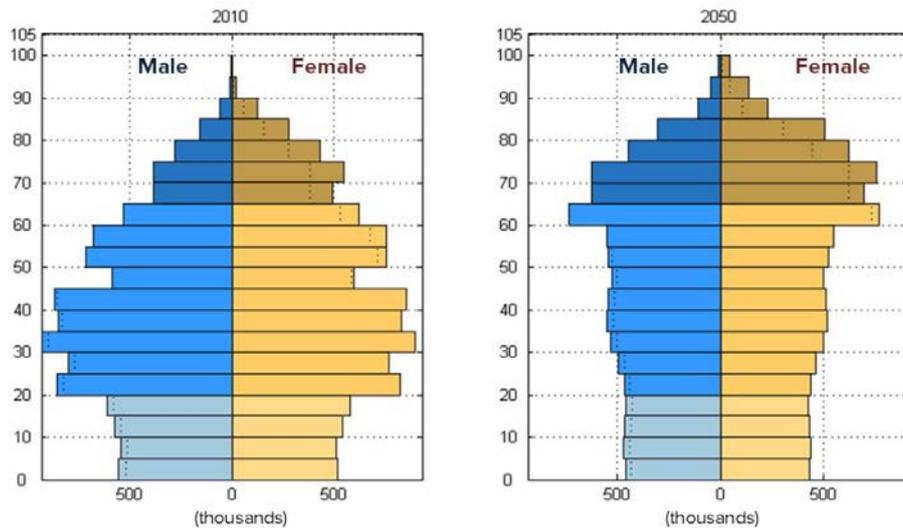
Poland



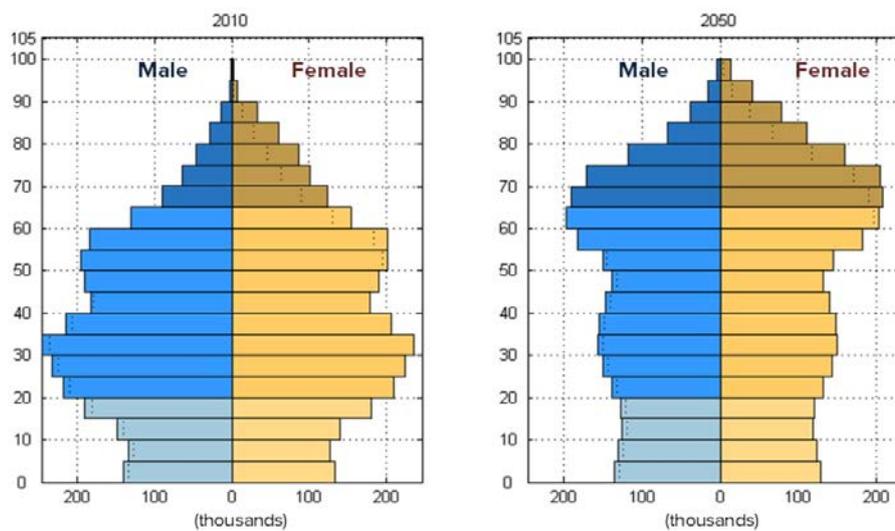
Portugal



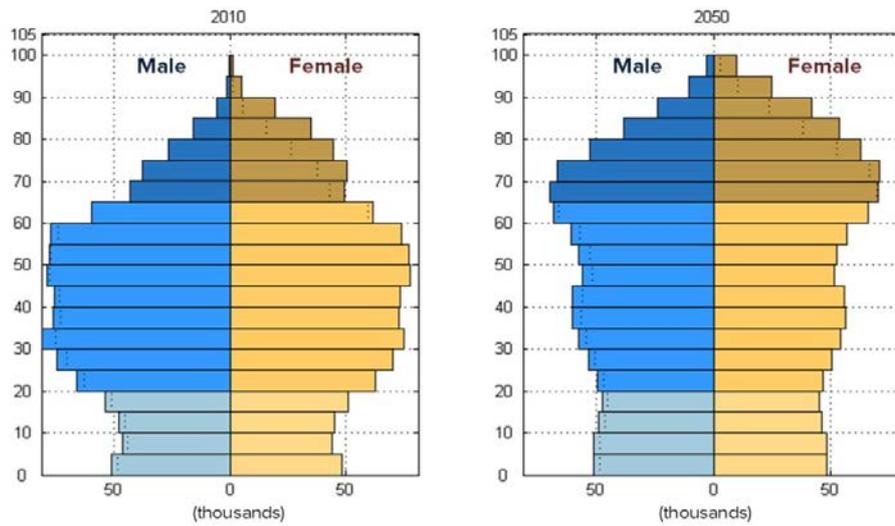
Romania



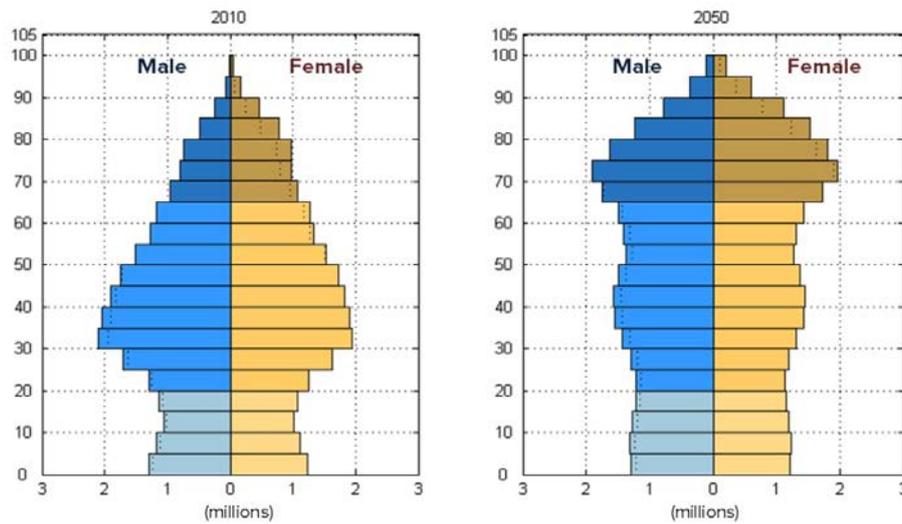
Slovakia



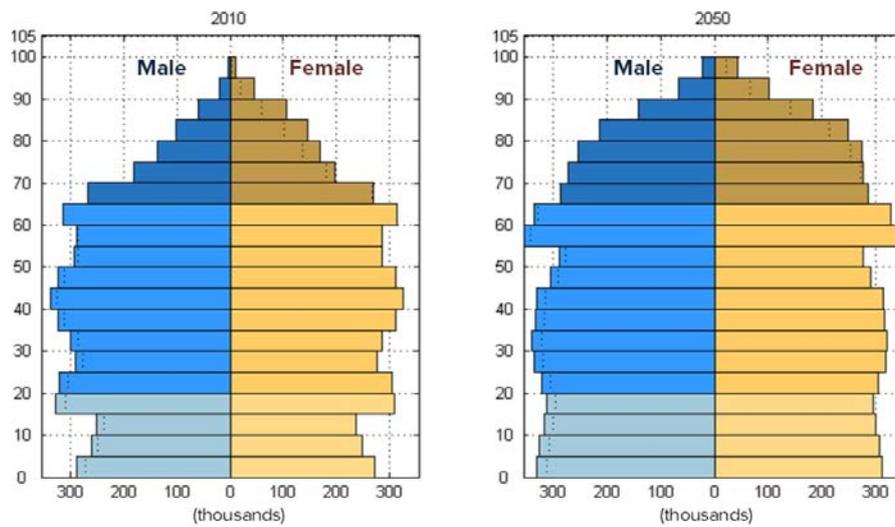
Slovenia



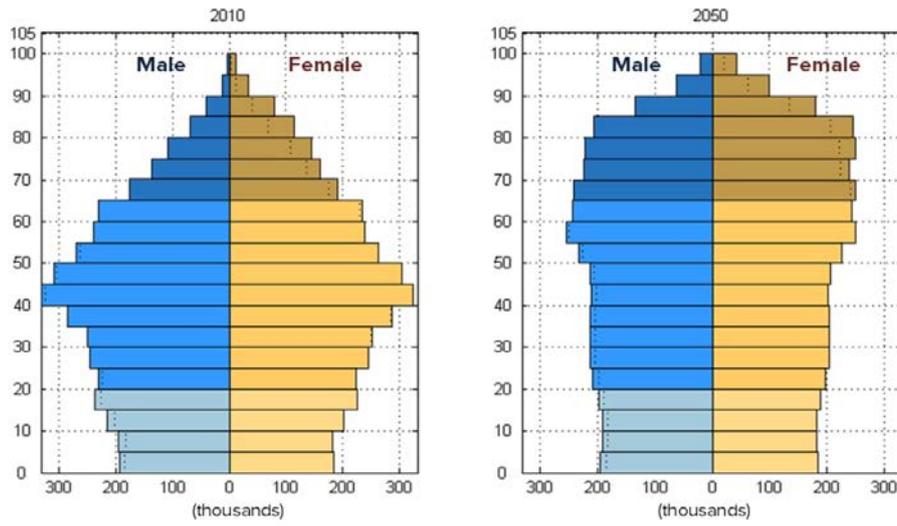
Spain



Sweden



Switzerland



United Kingdom

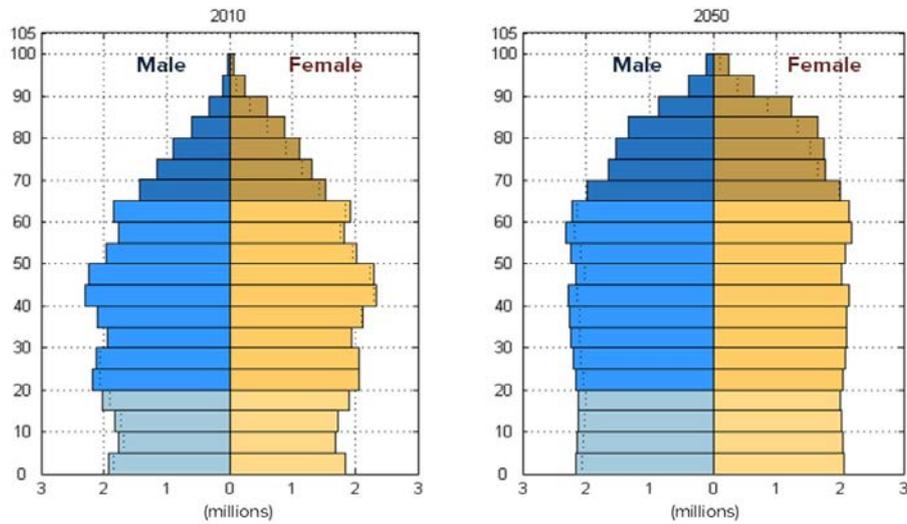
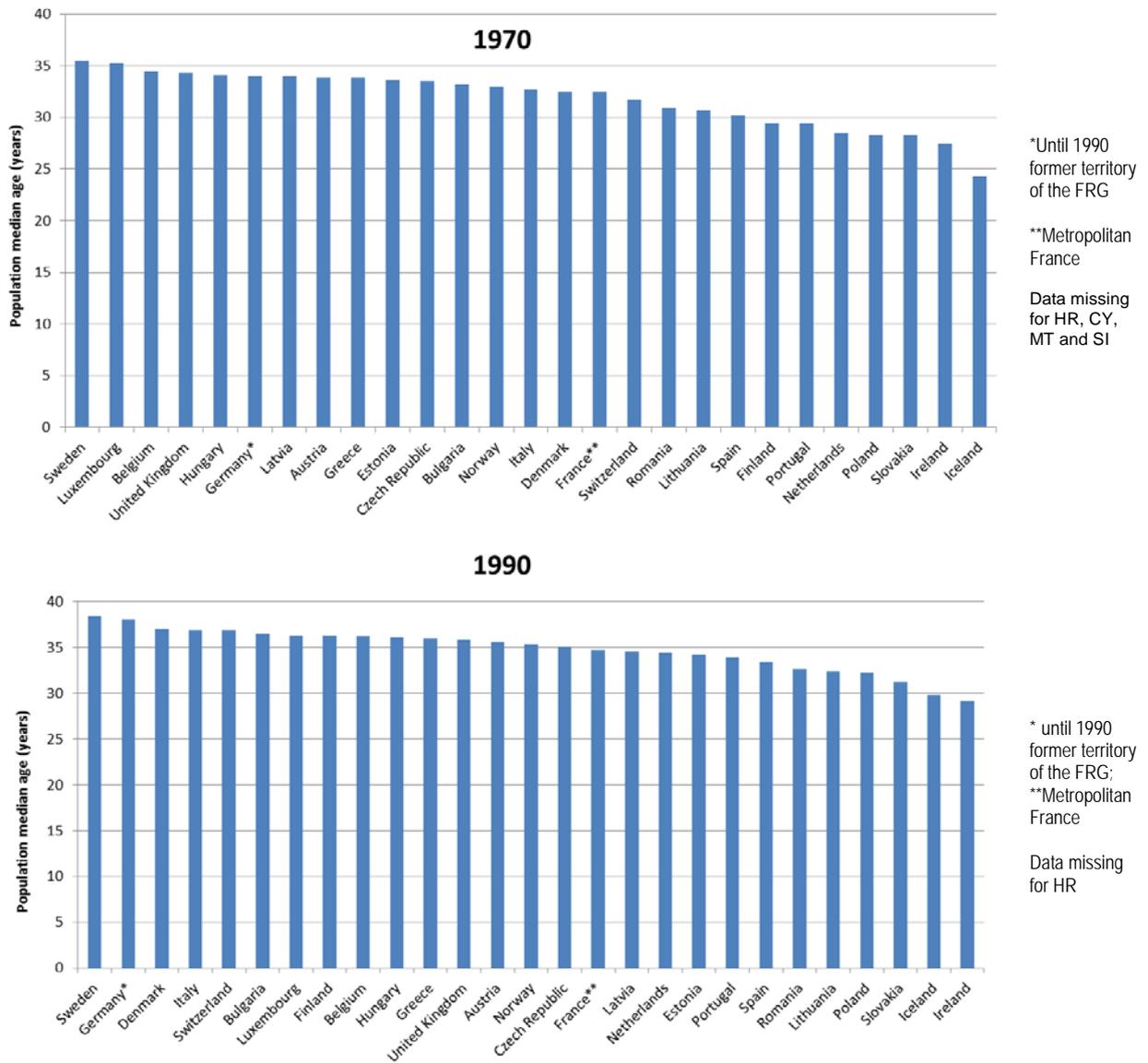
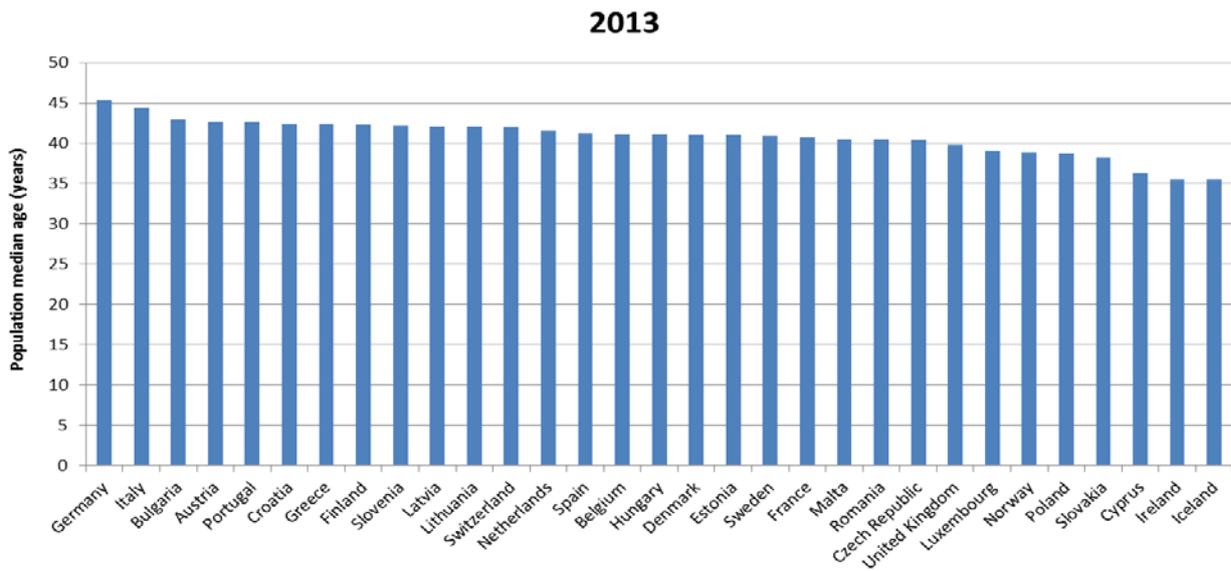


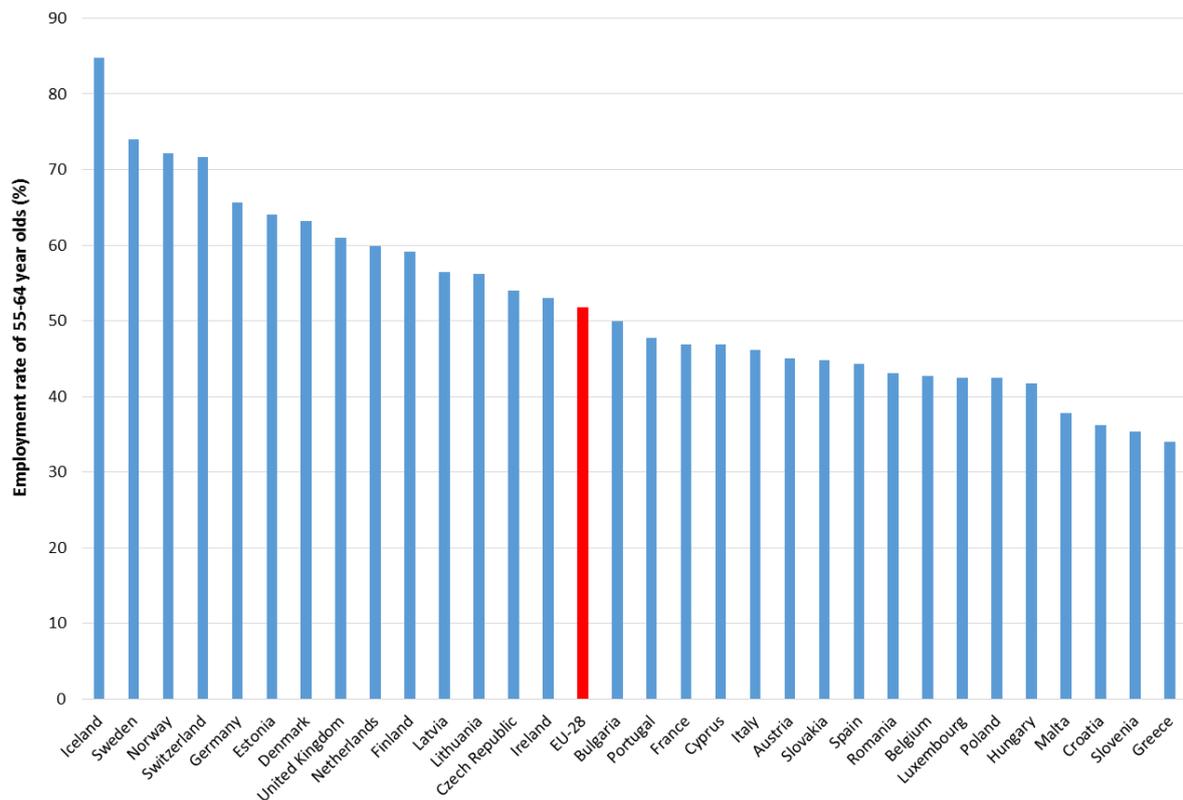
Figure 8-2, Population median age in 1970, 1990 and 2013 (Eurostat, 2014e)





▪ **Employment indicators (Eurostat, 2015a)**

Figure 8-3, Employment rate of people aged 55-64 years, 2014



Source: Eurostat (2015a).

▪ **Official retirement age in European countries (source: Milieu country inventories)**

Country	Official retirement age
Iceland	67
Greece	67 (M)/62 (F)
Ireland ³⁸	66 (increasing to 68 by 2028)
Italy	66 (M)/62 (F) (increasing to 66 for women by 2018 and to 67 for both genders (by 2021)
Denmark	65.5 (increasing to 67 by 2022)
Poland ³⁹	65 (M)/60 (F) (increasing to 67 by 2020 (M)/2040 (F))
Croatia	65 (M)/60 (F) (increasing to 67)
Spain	65 (increasing to 67 by 2027)
Germany	65 (gradually increasing to 67)
Netherlands	65 (increasing to 67 by 2021)
Sweden	65 (66 in 2019) ⁴⁰
United Kingdom	65 (M)/62 (F) ⁴¹ (increasing to 66 by 2020)
Belgium	65
Cyprus	65
Luxembourg	65
Portugal	65
Switzerland	65
Romania	65 (M)/63 (F)
Austria	65 (M)/60 (F) (increasing to 65 for women by 2033)
Finland ⁴²	63–68
Bulgaria	63 (M)/60 (F) (increasing to 65 for men and 63 for women by 2021)
Estonia	63 (increasing to 65 by 2026)
Lithuania	63 (M)/61 (F) (increasing to 65 for both genders by 2026)
Slovenia	63 (M)/61 (F) (increasing to 65 for both genders by 2018)
Norway ⁴³	62–75
Czech Republic	62–67 ⁴⁴
France	62-67 ⁴⁵
Malta	62–65 ⁴⁶
Latvia	62 (increasing to 65 by 2025)
Hungary	62 (increasing to 65 by 2022)
Slovakia	62

³⁸ There is no official retirement age in Ireland; retirement age is usually fixed in employment contracts. This table gives the age at which workers are able to draw their state pension.

³⁹ Pension reform in 2012 raised retirement age to 67. The transition will take place gradually — every four calendar months the pension age will go up by one month. The pension age of 67 will be effective for men in 2020 and women in 2040.

⁴⁰ Although 65 (66 in 2019) is the age limit for the guaranteed pension, Sweden has put in place an age interval (62-67) during which people can retire under different conditions.

⁴¹ There is no official retirement age in the UK. This table gives the age at which workers are able to draw their state pension. For women, it is increasing gradually to 65 by 2018. Retirement age will increase to 66 for men and women by 2020, to 67 by 2036 and 68 by 2046, although the government has made proposals for this timetable to be accelerated.

⁴² Workers have the right to retire between 63 and 68 years of age.

⁴³ The 2011 pension reform suppressed the official retirement age and introduced a new method for calculating pension benefits with adjustment for life expectancy. Uptake of pension benefits is now possible at any age between 62 and 75.

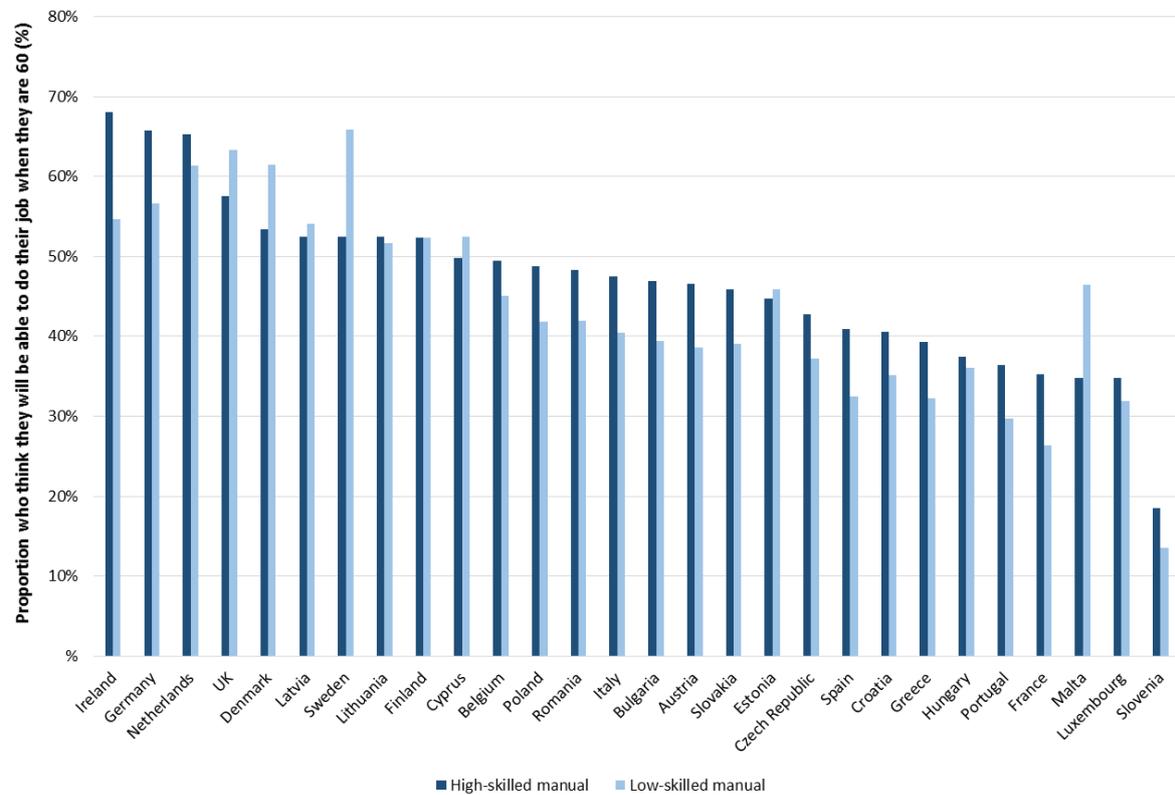
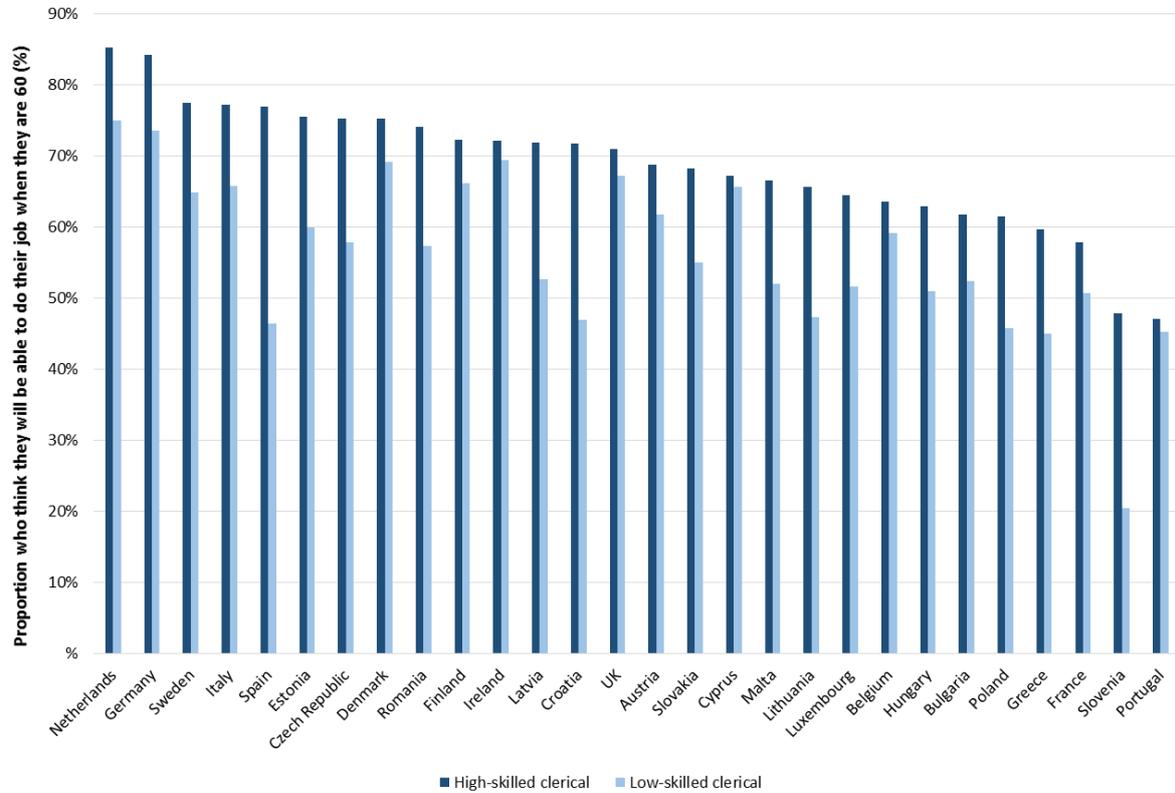
⁴⁴ Depending on the year of birth of the worker.

⁴⁵ Workers can start retiring at the age of 62 but get full pension benefits only if they have accumulated 41.5 years of contributions. The compulsory retirement age is 67, at which point workers can retire with full pension benefits, regardless of their number of years of contributions.

⁴⁶ Depending on the year of birth of the worker.

▪ **Job sustainability (source: Eurofound, 2012c)**

Figure 8-4, Workers who think they will be able to do the same job when they are 60 years old, all age groups, by occupational status and by skill level, EU-28, 2010



▪ **Long-standing health problems and limitations on usual activities (source: Eurostat, 2015d and 2015k)**

Figure 8-5, Employed people who reported having a long-standing illness or health problem, by age group, EU-28, 2013

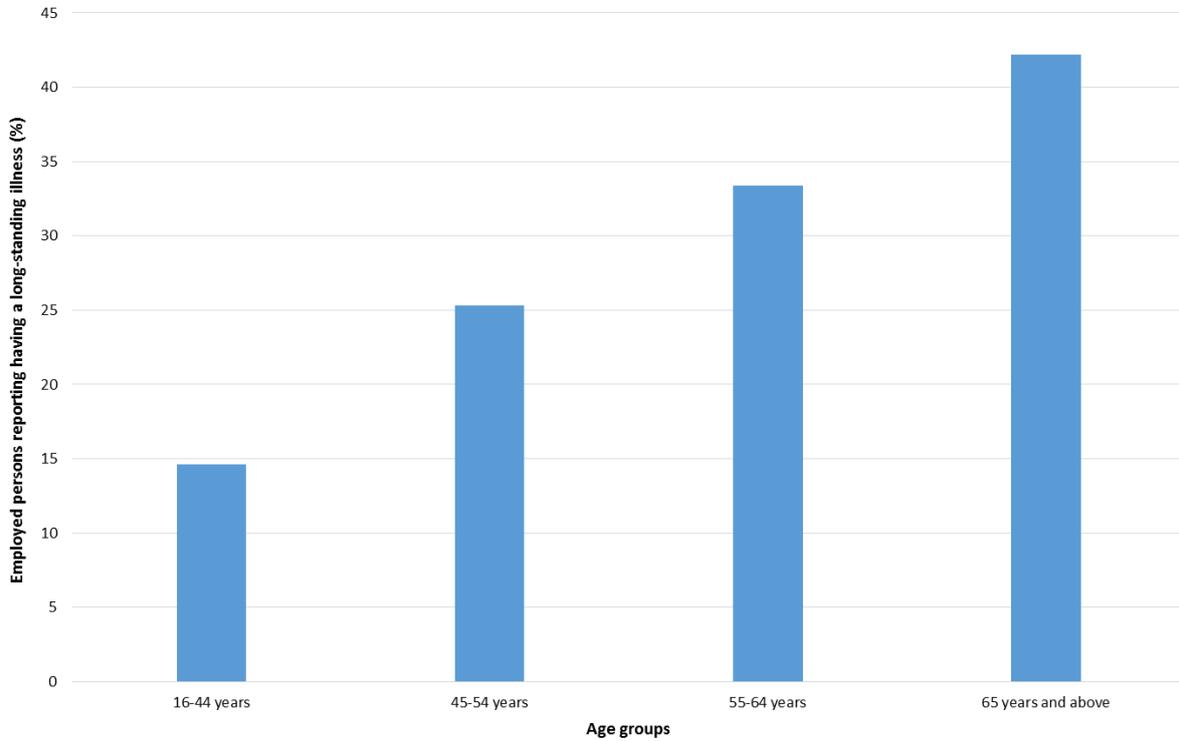


Figure 8-6, Employed people aged 55-64 years who reported having a long-standing illness or health problem, 2013

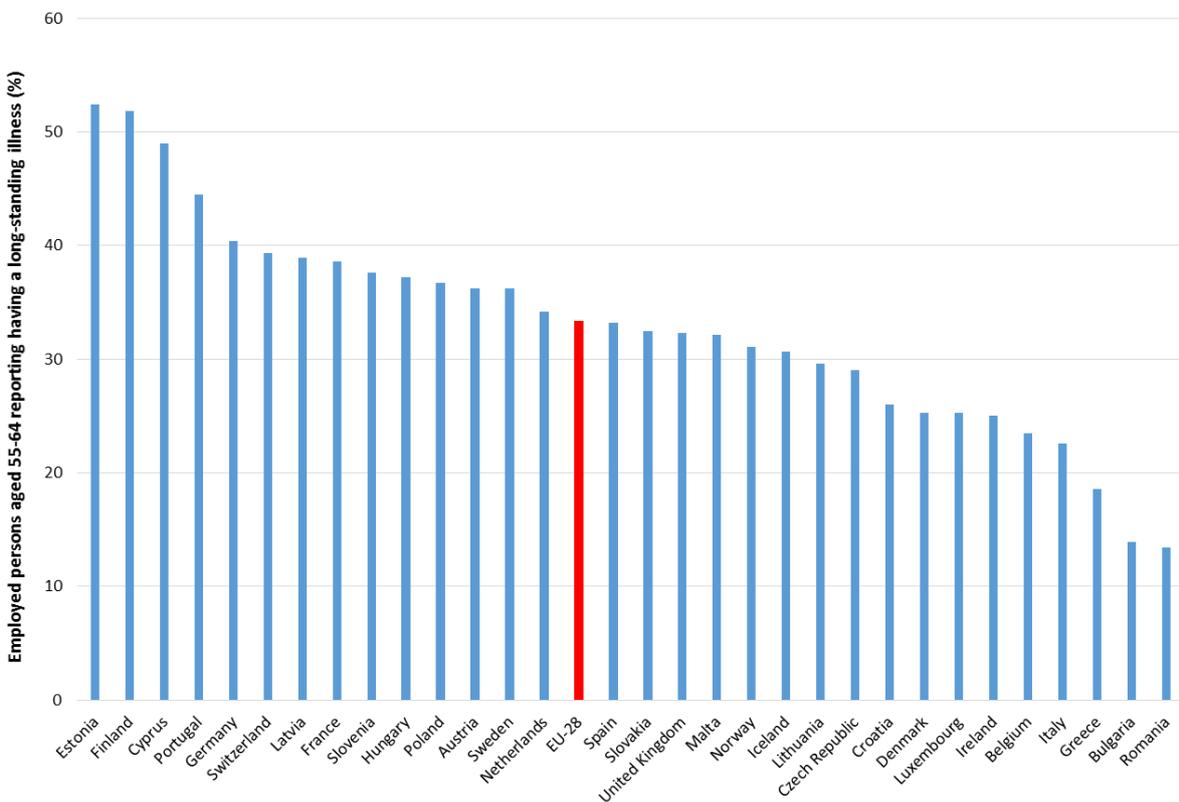


Figure 8-7, Employed people who reported having some or severe long-standing limitations on usual activities due to a health problem, by age group, EU-28, 2013

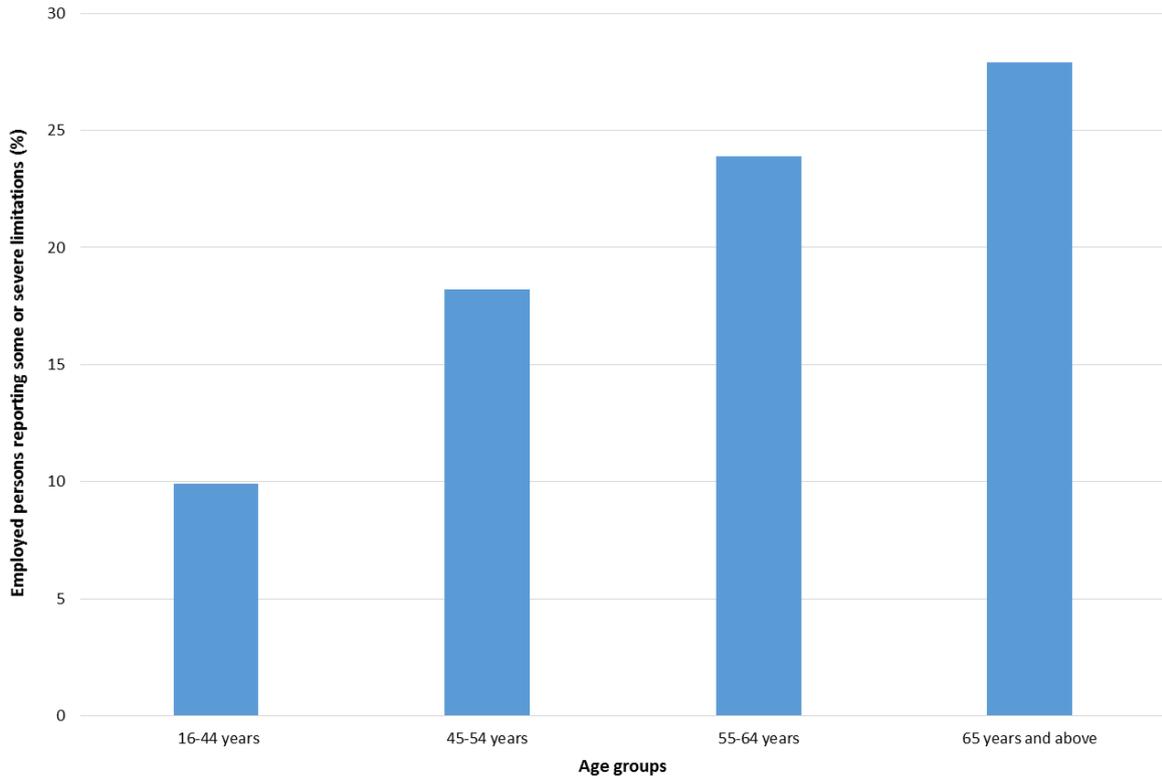
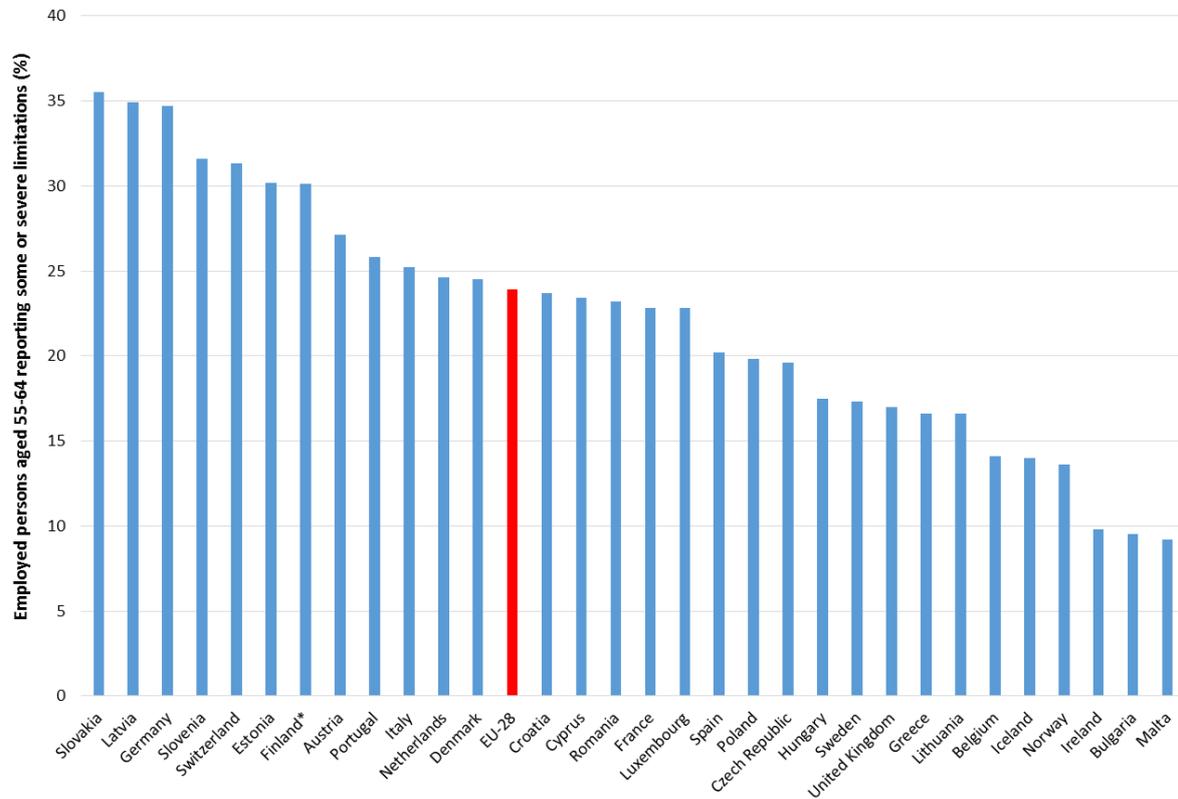


Figure 8-8, Employed people aged 55-64 years who reported having some or severe long-standing limitations on usual activities due to a health problem, 2013 (*data for Finland are from 2012)



▪ **Work-related health problems (Eurostat, 2015j)**

Figure 8-9, People who report having a work-related health problem, difference between the age group 55-64 years old and the age group 35-54 years old, in percentage points, 2013 (no data available for Iceland, Malta and the Netherlands)

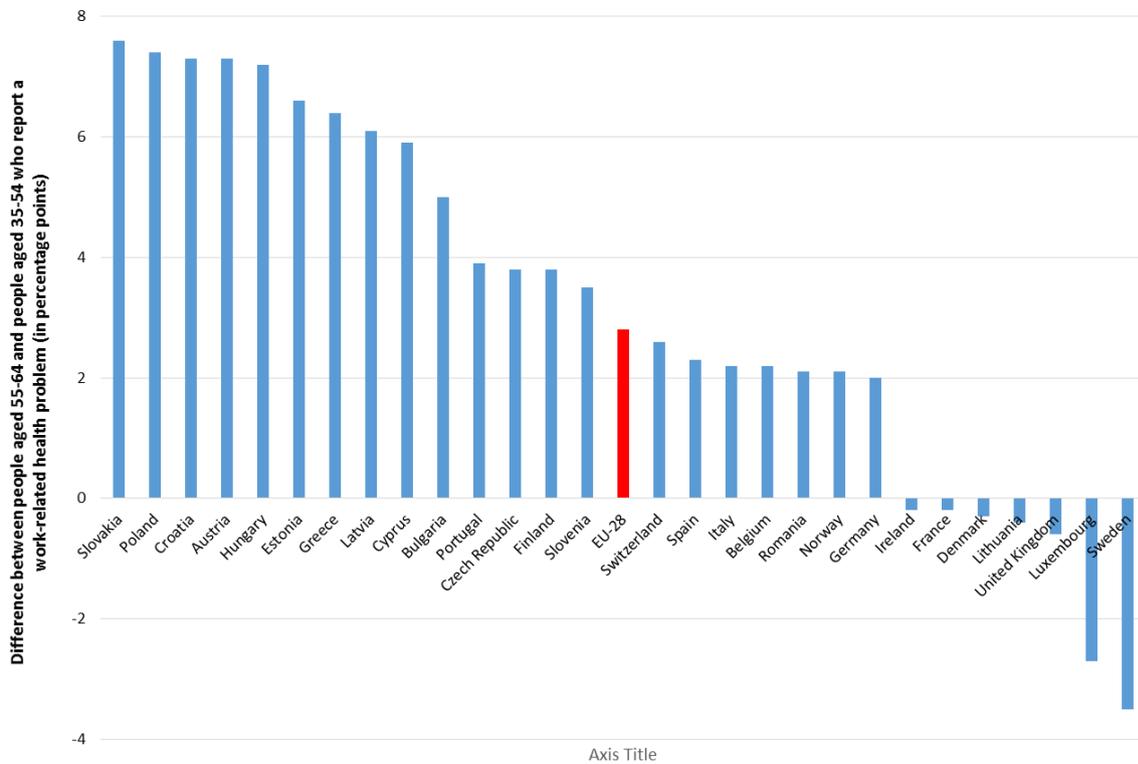
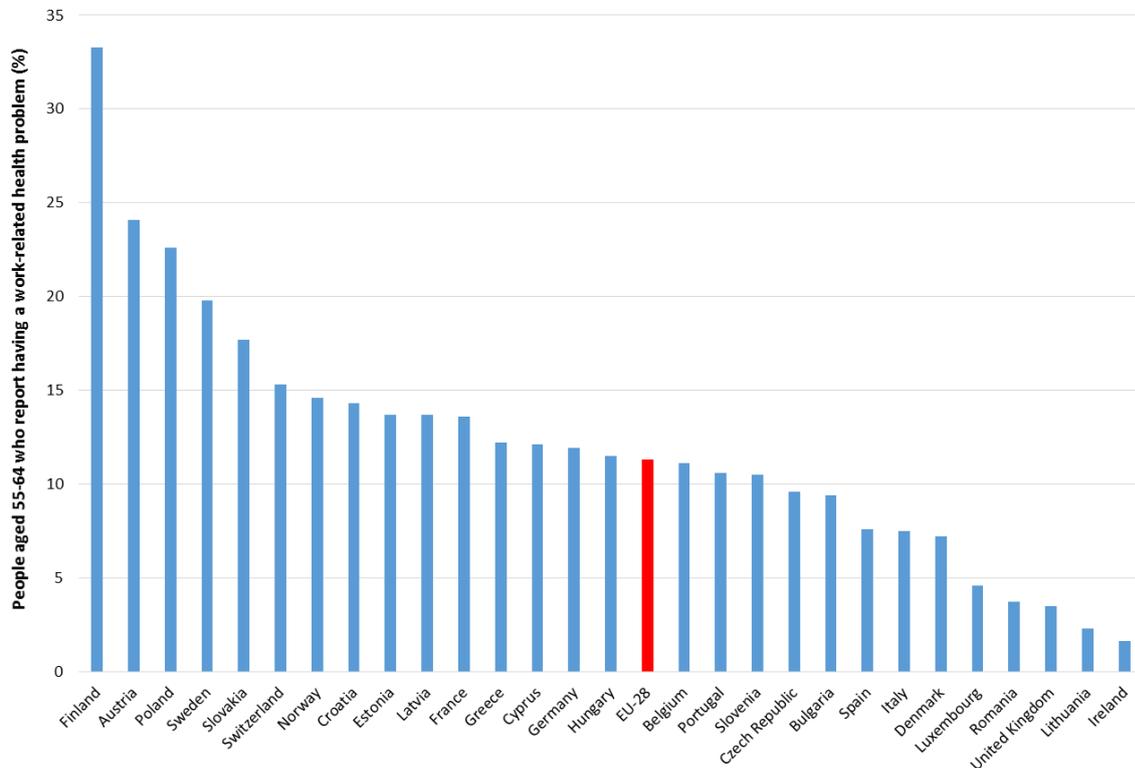


Figure 8-10, People aged 55-64 years who report having a work-related health problem, 2013 (no data available for Iceland, Malta and the Netherlands)



▪ **Reasons to stop working (Eurostat, 2014c)**

Figure 8-11, Proportion of inactive people, aged 50-69 years and who receive a pension, who quit work because they were eligible for a pension, 2012 (no data available for Iceland)

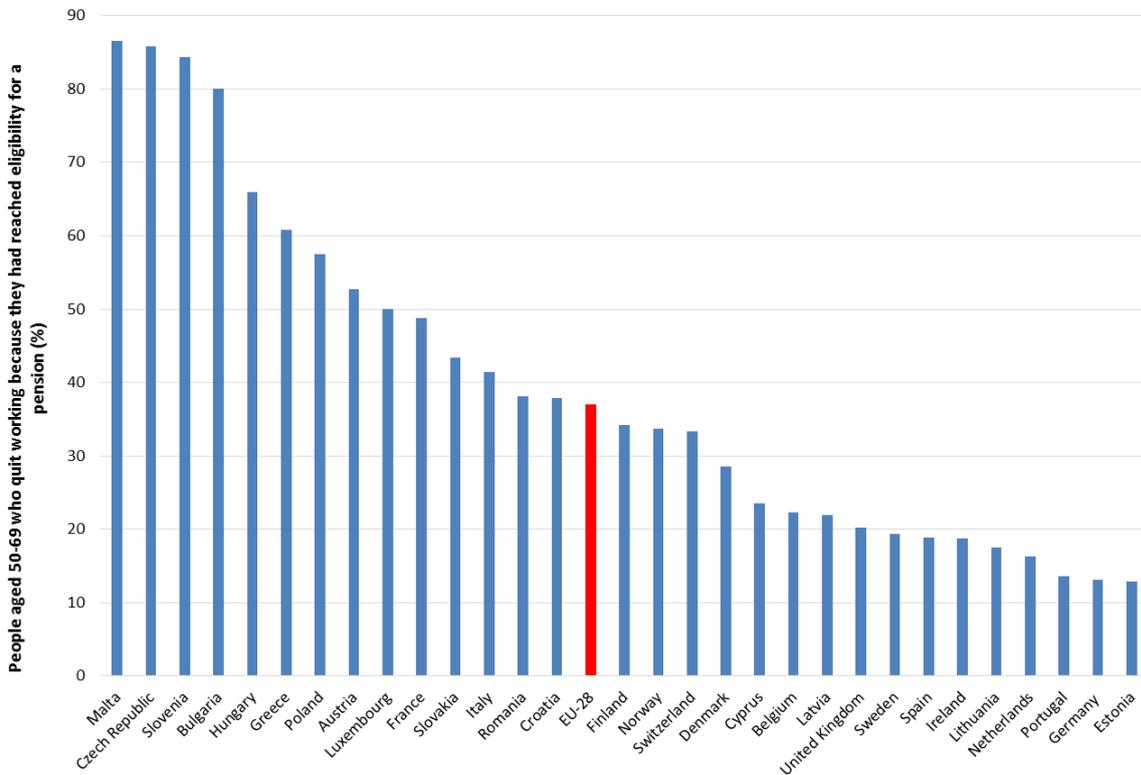
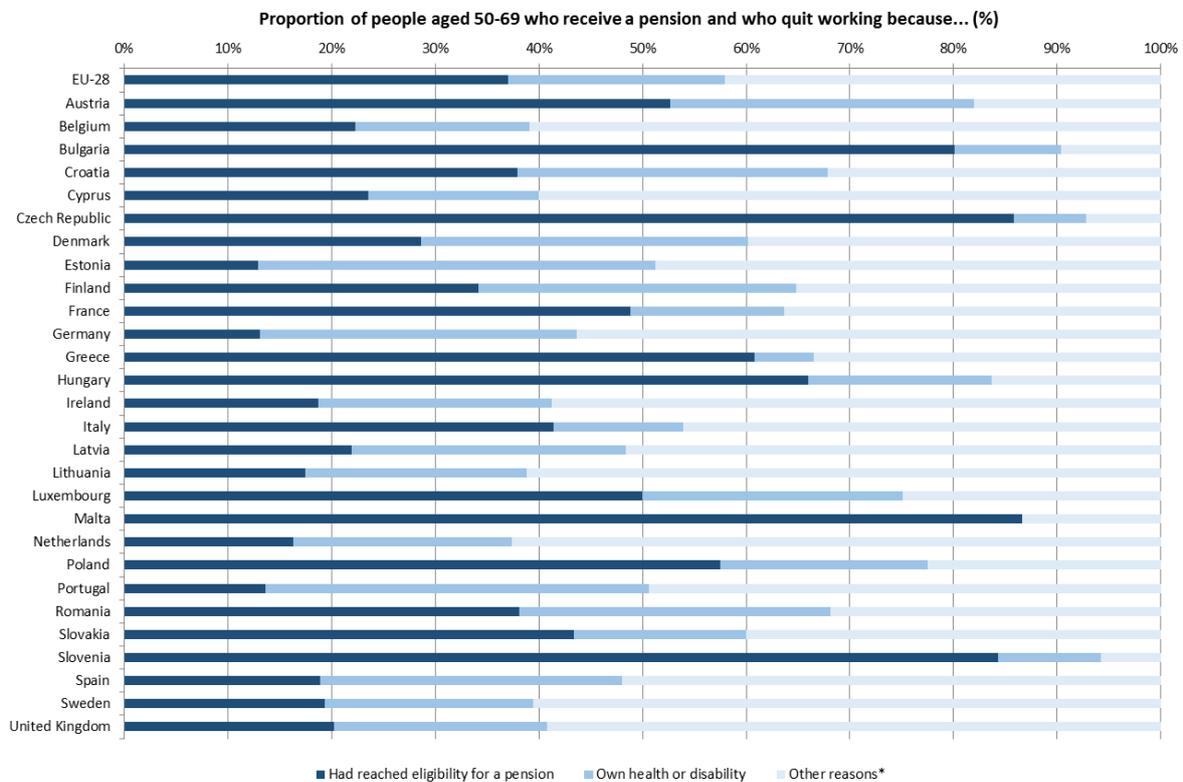


Figure 8-12, Main reasons for inactive people, aged 50-69 years who receive a pension, to quit work, 2012



*Other reasons include: favourable financial arrangements to leave; lost job and/or could not find a job; had reached the maximum retirement age; other job-related reasons; family or care-related reasons; other reasons.

▪ **Healthy life years (Eurostat, 2015b)**

Figure 8-13, Healthy life years at the age of 65, women, 2013 (data for Finland are from 2012)

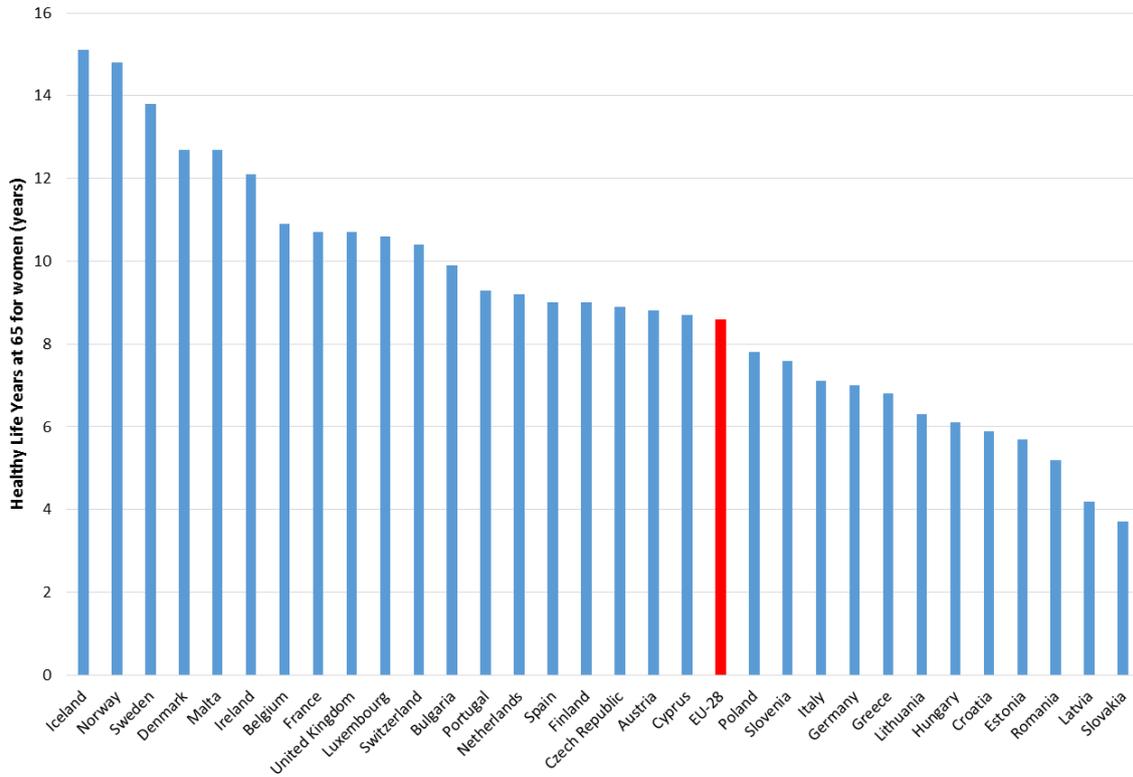


Figure 8-14, Healthy life years at the age of 65, men, 2013 (data for Finland are from 2012)

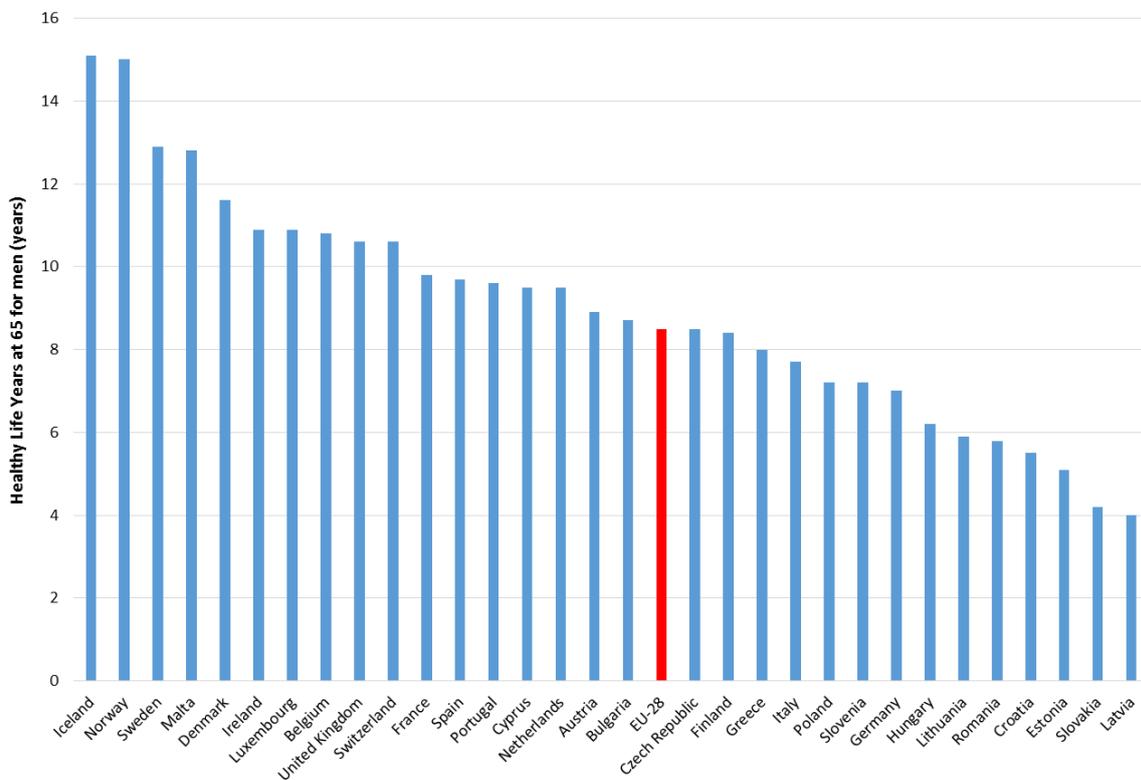


Figure 8-15, Healthy life years as a percentage of life expectancy at the age of 65, women, 2013 (data for Finland are from 2012)

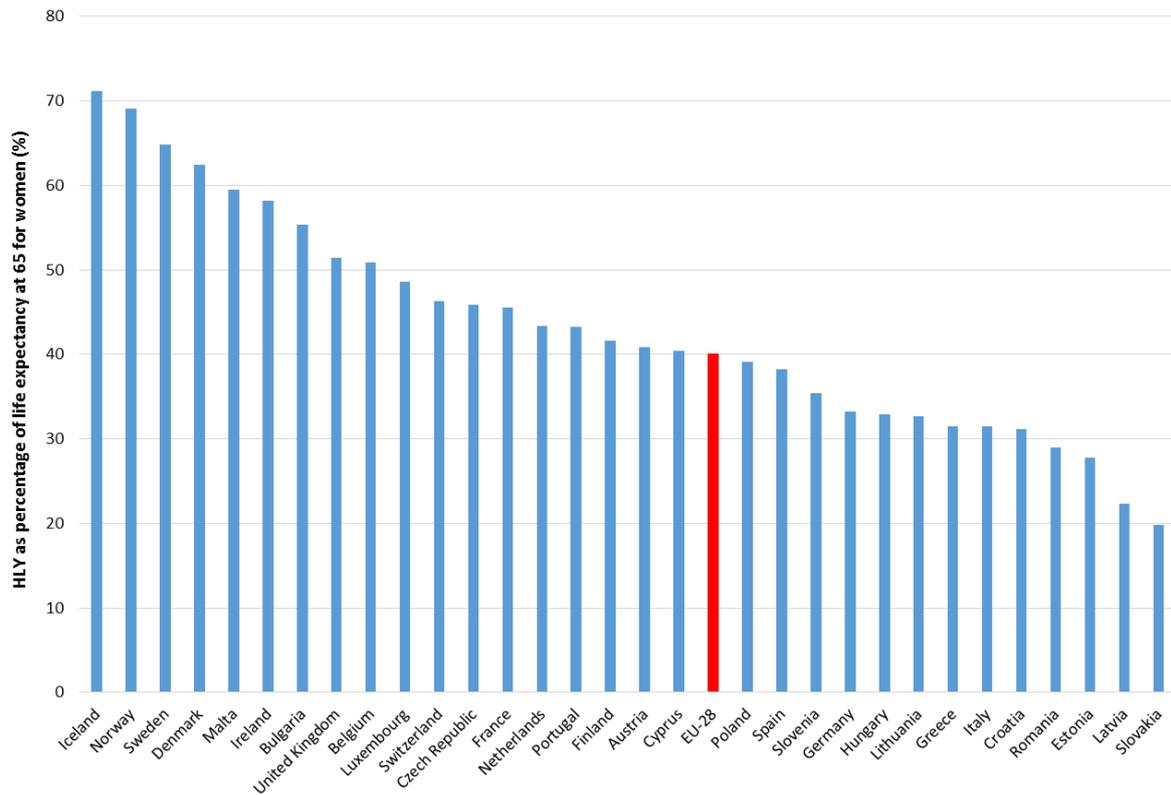
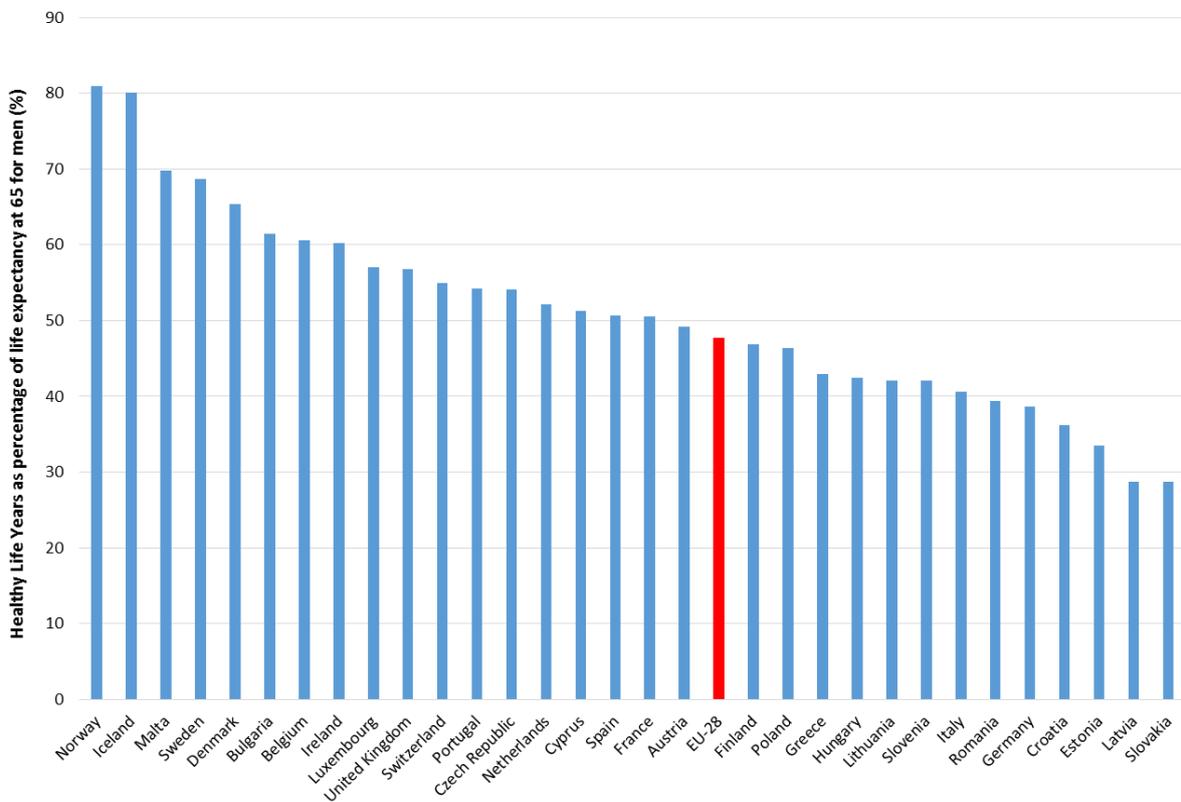


Figure 8-16, Healthy life years as percentage of life expectancy at the age of 65, men, 2013 (data for Finland are from 2012)



9 Annex 3: Analysis indicators

The following criteria or qualitative indicators were used to categorise the 31 countries studied. Within one group, not every country necessarily ticks all the boxes, as shown below.

Qualitative indicator	Approach 1	Approach 2	Approach 3	Approach 4
Target groups:				
<ul style="list-style-type: none"> All workers by default, no recognition of demographic challenge in OSH legislation or policy 	x			
<ul style="list-style-type: none"> Some focus on older workers in certain OSH legislation and policy 		x		
<ul style="list-style-type: none"> Older workers considered 'vulnerable group of workers' in many policy areas and/or in OSH legislation 			x	x
<ul style="list-style-type: none"> All workers targeted but looking at the question of age at all stages of the working life 				x
Policy orientation:				
<ul style="list-style-type: none"> Increasing participation of older workers in the labour market 	x	x	x	x
<ul style="list-style-type: none"> Enhancing older workers' employability, e.g. by raising their skills, retention of skilled workers 	x	x	x	x
<ul style="list-style-type: none"> Improving older workers' working conditions 		x	x	x
<ul style="list-style-type: none"> Work ability, i.e. not looking only at workers' safety and health but also competencies, work organisation and social context 		x	x	x
<ul style="list-style-type: none"> Life-course approach, i.e. considering workers' experiences throughout their working lives and not only their current situation 			x	x
<ul style="list-style-type: none"> Prevention of exclusion from labour market 			x	x
<ul style="list-style-type: none"> Holistic approach considering topics broader than OSH (e.g. public health, anti-discrimination, employment, social security, etc.) 			x	x
<ul style="list-style-type: none"> Introduction of notion of sustainability of work and of social security systems 				x
Coordination across policy areas:				
<ul style="list-style-type: none"> No cross-policy work 	x			
<ul style="list-style-type: none"> Ad hoc joint OSH–employment–public health initiatives 		x		
<ul style="list-style-type: none"> Mainstreaming of age and OSH-related considerations into other policy areas 			x	x
<ul style="list-style-type: none"> Integrated policies for a common goal 				x
<ul style="list-style-type: none"> Formal coordination structures across policy areas 				x
<ul style="list-style-type: none"> One institution leading the initiatives on safer and healthier work at any age 			x	x
Stakeholders				
<ul style="list-style-type: none"> Limited stakeholder involvement 	x	x		

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Qualitative indicator	Approach 1	Approach 2	Approach 3	Approach 4
• Greater diversity of stakeholders involved		x	x	x
• Involvement of intermediary organisations, e.g. insurance companies or OSH advisory services			x	x
• Active involvement of social partners (e.g. through collective agreements)			x	x
• Limited stakeholder coordination		x		
• Good stakeholder cooperation			x	x
• Formal structure/platform for stakeholder cooperation				x
Other indicators				
• Financial incentives for employers to hire/retain older workers	x	x	x	x
• Financial incentives for older workers to stay at work (e.g. combining work and pension)		x	x	x
• Technical support to employers (guidance, help desk, training)			x	x
• Effective communication and raising awareness of the initiatives			x	x
• Evaluation of policies/initiatives			x	x

10 Annex 4: Key policy measures to address the challenges of an ageing workforce

Table 10-1 provides an overview of the various policies, programmes, strategies and initiatives identified in the 28 EU Member States and four EFTA countries in the framework of the project Safer and Healthier Work at Any Age.

The policies and initiatives, collected up to June 2014, relate to the employment of older workers and the extension of working life, with a focus on OSH and rehabilitation and return to work, and have mostly been implemented since 2000. Therefore Table 10-1 covers neither the whole range of policies and initiatives undertaken by European countries in relation to the ageing of the population and workforce nor the legal frameworks in place the countries that govern a number of the aspects discussed in this report, such as age discrimination.

The initiatives identified have been classified according the main policy area that they address, although many of them cut across several policy areas. For instance, initiatives that aim to increase the employability of older workers, listed in the column headed 'Employment', often include a component related to lifelong learning and vocational education.

The column headed 'Cross-policy frameworks' is not limited to the integrated policy frameworks identified in groups 3 and 4 of the grouping. It also includes initiatives (policies or supporting activities) that address the question of age and work through various angles (e.g. certain 'active ageing' policies or policies on age management), even if their main focus may be employment or health.

Table 10-1, Overview of key policy measures to address the challenges of an ageing workforce

Country	Social policies/pension reforms	Employment	OSH/Health	Vocational education	Age discrimination	Rehabilitation/ RTW	Cross-policy frameworks and supporting initiatives
Austria	<p>Retirement age was raised</p> <p>Early retirement schemes for reduced work capacity were phased out between 2000 and 2003</p>	<p>Labour market package for older employees (Government): promote reintegration of older workers in the labour market</p> <p>Financial assistance to employers for hiring workers aged 45 and for Kurzarbeit — potential to reduce working hours instead of dismissing employees (Public Employment Service)</p> <p>Seal of quality NESTOR GOLD (created by the Ministry of Labour) rewarding generation-sensitive labour organisation in Austrian companies and organisations</p> <p>Winning age. Getting future! (Chamber of Labour of Upper Austria): regional platform of exchange on age management</p>	<p>Austrian Occupational Safety and Health Strategy 2007 — 2012 (Government): includes demographic change as priority area.</p> <p>AUVAfit programme (AUVA): interdisciplinary programme providing psychological and ergonomic consulting</p> <p>A number of initiatives related to workplace health promotion:</p> <p>Workplace Health Promotion programme (the National Fund for a Healthy Austria) targeted at older workers</p> <p>proFITNESS: healthy employees — healthy enterprise: awareness-raising initiative on WHP for SMEs</p>	<i>Covered in employment policies</i>	<i>Covered in employment policies</i>	<i>Covered in cross-policy framework</i>	<p>Fit for the Future (AUVA): workshops, counselling, intervention at workplaces to promote sustainable employability</p> <p>Fit2Work (Government): counselling and case management programme to support early return to work accessible to individuals and companies, and subsidised by the Austrian Government</p> <p>Development of ABI Plus™ index (AUVA) based on the workability index</p> <p>WAI Network Austria: platform on work ability (ÖPWZ — Austrian Productivity and Profitability Centre)</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Country	Social policies/pension reforms	Employment	OSH/Health	Vocational education	Age discrimination	Rehabilitation/RTW	Cross-policy frameworks and supporting initiatives
Belgium	<p>Retirement age rising progressively, access to early retirement restricted</p> <p>Pension bonus for workers over 62/after 44-year career who stay in employment</p>	<p>Generation Pact (Government/social partners): includes 66 employment measures to favour youth employment and maintain older workers in work for longer</p> <p>'Time credit': potential for workers over 55 to work half-time or reduce their working hours by 1/5 until retirement, benefitting partly from their wage, partly from pension</p> <p>Same measure for workers over 50 transferring from arduous work to light duties</p> <p>'Ageing at work' (Prevent): training programme for HR managers on age management</p> <p>Toolbox on retaining older workers at work (Flemish Gov.)</p>	<p>National Strategy for Well-being at Work (National Labour Council): includes thematic projects related to older workers</p>	<p>'Validation of competence' certificates recognising professional knowledge and know-how (Centre for the Validation of Skills, Wallonia).</p>	<p>Awareness-raising campaign, 'Still young, already old at work', aimed at changing perceptions of older workers in companies (Federal Public Service Employment, Labour and Social Dialogue)</p> <p>Project 'Evolution of the physical and physiological capacities related to age — An answer to stereotypes concerning older workers': research into stereotypes and sensitisation of employers (Federal Public Service Employment, Labour and Social Dialogue)</p> <p>Initiatives to help companies develop diversity plans by Brussels Employment Office and Flemish government.</p>	<p>Subsidised part-time return to work and professional retraining programme (Sickness and Invalidity Insurance)</p> <p>Programme to promote early return to work and to prevent chronic low back pain (Federal Government).</p> <p>Disability Management@Work (Prevent): programme to support companies to develop disability management policies</p> <p>Return-to-work programme (IDEWE): adaptation of the Sherbrooke model to the Belgian context; and implementation in companies</p>	<p>Professional Experience Fund (Federal Government): funding for companies for assessing work ability and the working environment, and adapting the workplace</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Country	Social policies/pension reforms	Employment	OSH/Health	Vocational education	Age discrimination	Rehabilitation/RTW	Cross-policy frameworks and supporting initiatives
Bulgaria	<p>Gradual increase in retirement age</p> <p>Access to early retirement restricted</p> <p>Potential to combine work and pension income</p>	<p>National action plan for employment (Government): older employees are considered a priority target group/objective to increase participation in labour market</p> <p>Employment Promotion Act (Government): financial assistance for employers hiring unemployed workers aged 50 to 64</p> <p>Social innovation in enterprises: project supports age management, introduction of flexible employment and OSH in companies</p>	<p>National Strategy for Health and Safety at Work 2008-2012: considers population ageing as a challenge and acknowledges that specific OSH measures for both young people and people aged 55-64 years are very important for extending working life</p> <p>National Fund 'Working Conditions': for projects aimed at improving working conditions in enterprises; diagnostics of occupational diseases; OSH training</p>	<p>Subsidised vocational training for unemployed age 50 and above (Government)</p>	<p><i>Covered in cross-policy framework</i></p>	<p>Project Innovative measures in the field of occupational rehabilitation, guidance, training and employment for people with disabilities (ESF funding): exchange of good practices on labour and social inclusion, and return to work of people with disabilities</p> <p>Financing from the Agency for people with disabilities to increase accessibility of workplaces, for safety and health measures and adaptation of the workplaces, and for special equipment</p>	<p>National Conception for Promotion of Active Ageing (2012-2030): identifies as priority areas age management policies, adaptation of the working environment to the needs of older employees, overcoming negative attitudes to hiring older individuals</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Country	Social policies/pension reforms	Employment	OSH/Health	Vocational education	Age discrimination	Rehabilitation/RTW	Cross-policy frameworks and supporting initiatives
Croatia	Pension reform: retirement age raised	<p>Package of measures ‘Experience is important’ (Government): financial assistance to employers hiring unemployed workers over 50</p> <p>‘Your initiative — Your workplace’ (Government): self-employment subsidy for persons over 50</p> <p>‘Shared workplace subsidy’: financial assistance for employers employing a part-time older worker for a period of 12 months.</p>	<p>National Programme on Health Protection and Safety at Work: sets the goal to improve the protection of special categories of workers (older workers, workers with disabilities)</p>			Rehabilitation programmes for people with disabilities (training, apprenticeships)	

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Country	Social policies/pension reforms	Employment	OSH/Health	Vocational education	Age discrimination	Rehabilitation/RTW	Cross-policy frameworks and supporting initiatives
Cyprus	Retirement age to be adjusted to accommodate changes in life expectancy	<p>Financial assistance for employers to recruit unemployed people; people over 50 are one of the target groups</p> <p>Good practice guide on the employment of older workers (Hellenic Network for Corporate Social Responsibility and Opinion Action Services)</p> <p>Programmes for the promotion of flexible forms of employment (Cyprus Productivity Centre)</p>	<p>Strategy for Safety and Health at Work 2013-2020: the strategy mainstreams OSH in other policy sectors, and emphasises MSDs</p>	<p>The 10-year action plan for older people 2005-2015 (Government) promotes access to education and lifelong learning</p> <p>In-company/on-the-job training programmes (Human Resource Development Authority) to help employers to retain their workers by participating in training</p>	Non-discriminatory services to job seekers (Department of Labour)	Financial incentives to hire people with disabilities and disadvantaged individuals (including older workers and people with disabilities)	

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Country	Social policies/pension reforms	Employment	OSH/Health	Vocational education	Age discrimination	Rehabilitation /RTW	Cross-policy frameworks and supporting initiatives
Czech Republic	<p>Gradual increase in retirement age</p> <p>Potential to combine work and pension income</p>	<p>National Programme for Support to Active Ageing for the years 2013-2017 (Government): defines labour market participation of older workers as a priority</p> <p>‘Jobs of social importance’ (Government): financial assistance to employers hiring unemployed older workers in long-term positions</p> <p>‘Award to senior-friendly company’ (Ministry of Labour) to promote good practices in companies</p>			<p>Project ‘Corporate social responsibility of companies with respect to the employment of people with disabilities’: developed manual and tools for employers on diversity management</p>		<p>Age management practices to work with 50+workers — methodological guide, developed by Association of Adult Education Institutions</p> <p>Age management guide for employers, developed by the Czech trade unions</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Country	Social policies/pension reforms	Employment	OSH/Health	Vocational education	Age discrimination	Rehabilitation/RTW	Cross-policy frameworks and supporting initiatives
Denmark	<p>Gradual increase in retirement age to 67</p> <p>Access to early retirement limited</p> <p>Potential to combine work and pension income</p>	<p>Tax credit for workers staying at work after 64.</p> <p>Free consultancy services for companies to motivate employees to stay longer at work.</p> <p>Booklet 'Planning your future. What do you want to happen in your life when you are not going to work 37 hours a week anymore?' aimed at facilitating the transition between employment and retirement.</p>	<p>Strategy for the Improvement of the Working Environment up to 2020, with a focus on health promotion</p> <p>Strategy for occupational health and safety (Danish Confederation of Trade Unions) with a focus on workplace health promotion</p>	<p><i>Covered in cross-policy framework</i></p>	<p>Campaign 'A few extra years make a difference': awareness-raising campaign to encourage senior policies in companies and promote later retirement</p>	<p>Return to work project (Government, municipalities, Danish Prevention Fund): case management programme at municipal level whereby sick leave cases are coordinated by a RTW coordinator and a team of specialists and an individual RTW plan is established</p> <p>'Absent guide.dk' (Labour Unions): guidance for workers on sick leave to help navigate the Danish system and get information on rights and obligations</p>	<p>Senior Package (Fund for Better Working Environment and Labour Retention): support to SMEs on age management and maintaining older workers in employment</p> <p>Information website seniorpraksis (Agency for Labour Market and Recruitment), presenting information and advice about senior policies, consulting services (Labour Market Board) to develop senior policies, and other projects/awareness-raising activities on senior policies by the agency for Labour Market and Recruitment</p> <p>Collective agreement period 2012-2014 (Chamber of Commerce): focus on seniors, integration and inclusion of people with disabilities, ethnic minorities and other vulnerable groups and on reducing absenteeism</p> <p>Booklet to encourage union representatives to participate actively in the development of a senior policy at their workplaces (Danish Confederation of Trade Unions)</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Estonia	<p>Retirement age to increase progressively from 2017</p> <p>Potential to combine work and pension income</p>	<p>'Individual action plans' for all job seekers (Unemployment Insurance Fund)</p> <p>Wage subsidies for employers hiring workers who have been registered as unemployed for a year (not age specific)</p> <p>Tax reductions for employers creating part-time jobs</p> <p>'Estonia 2020': promotes measures allowing a more flexible transition from work to retirement (e.g. part-time employment, retraining, change of tasks, reduced professional requirements, etc.)</p>	<p>National Health Development Plan 2009-2020: increase the average (healthy) life expectancy by 2020, by reducing health risks in the living, learning and working environment</p> <p>Estonian Network for Workplace Health Promotion: network of companies to exchange good practices on workplace and working conditions adaptations</p>	<p>Coaching for working life programme (Unemployment Insurance Fund): training programme designed to motivate and encourage people to either get a job for the first time or to reintegrate after (long-term) absence</p>	<p>Training subsidies targeting people endangered by unemployment due to a deteriorating health condition (Unemployment insurance)</p> <p>Subsidies for workplace adaptation — only targeted at people entitled to disability benefits (Unemployment insurance)</p>	<p>Active Ageing Development Plan 2013-2020: aims to increase the participation of older worker in the labour market, including through vocational training, and their satisfaction with their professional life</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Finland	<p>Pension bonus for workers retiring later than retirement age</p> <p>Early retirement schemes suppressed</p>	<p>Liideri — Business, Productivity and Joy at Work programme: government funding to promote employee participation and new methods of working</p> <p>Leadership Development Network: collective group of actors working together to support projects and programmes for promoting good management</p> <p>Round Table for Productivity: high level entity within the labour market confederations with the specific aim to improve productivity, quality of working life and cooperation and to disseminate this information on a national level</p>	<p>National Development Programme for Social Welfare and Health care: strategy reformulated every four years; implements the strategy of the Ministry of Social Affairs and Health and defines the key social and health policy targets</p> <p>The National Policy Programme for Older People's Physical Activity (Ministry for Education and Culture): enhance the opportunities available for older people to do exercise</p> <p>'Health brings welfare — 2020 — Welfare brings health' (National Institute for Health and Welfare): strategy to enhance the health, capabilities and well-being of the population</p> <p>'Wellbeing from Work' (FIOH) strategy 2011-2015 to create better working environment and more efficient occupational healthcare system</p> <p>Forum for Well-being at Work: collective group of stakeholders supporting projects and programmes for promoting cooperation and sharing of good practices between companies</p> <p>Duunitalkoot (FIOH): website containing guidance, best practice examples and self-assessment and measurement tools related to workplace well-being</p> <p>Wellbeing at Work Card (Centre for Occupational Safety): card gained after completing an eight-hour training course and passing an exam on workplace well-being</p>	<p>Action plan to promote the employment of persons who have partial incapacity/disability (Ministry for Social Affairs and Health): operational programme to reintroduce people with partial work ability into the labour force</p> <p>PUNK programme (Rehabilitation Foundation and other organisations): aimed at improving well-being and retention of work ability in small companies</p> <p>Regional and local rehabilitation programmes (in addition to rehabilitation services provided by KELA): sets up activation plan for people who cannot find employment due to incapacity or age-related reasons</p> <p>Rehabilitation Foundation regularly publishes reports related to improving the rehabilitation system in Finland</p>	<p>A socially sustainable Finland for 2020. The strategy has four targets: health and well-being should be included in all decision-making; working careers should be lengthened by increased workplace well-being; different aspects of life should be better balanced; and social security funding should be made more sustainable</p> <p>'National Working Life Development Strategy to 2020' (Ministry of Employment and the Economy): aims at creating well-functioning, profitable workplaces that generate new employment through deepening trust and cooperation, reinforcing innovation and productivity, ensuring a skilled workforce and ensuring the health and well-being of people and workplace communities</p> <p>'Age Power to Work' (FIOH): training programme for supporting better age management in workplaces</p> <p>Age-key (FIOH): initial assessment tool in the form of a questionnaire for developing age management in workplaces</p> <p>Towards Longer Careers — A Guide to Preparing an Age Programme for Workplaces (labour market confederations): guide providing a description of different elements that can be included in whole or in part in a workplace age programme</p> <p>Longer careers with the Job Life Cycle Model (Federation of Finnish Technology Industries): guide to help organisations to prepare an age plan that takes into account all age groups</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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France	<p>Retirement age raised to 62</p> <p>Access to early retirement restricted</p> <p>Possibility to combine work and pension income</p> <p>'Progressive retirement': potential for workers having reached retirement age to work part-time and earn both income and a portion of their pension</p>	<p>Company agreements on the employment of older workers (2009) and implementing the Generation Contract (2012): obligation for large companies to negotiate a company agreement including measures promoting the retention of older workers in employment, as well as the adaptation of working conditions, flexible working arrangements, lifelong learning, and transition to retirement</p> <p>'Working time account': potential to save holiday periods not taken before and use them as extra annual leave or remuneration</p> <p>'Individual interview to prepare the second part of the career': proposed to workers aged 45 and over to set up a career plan and evaluate training needs or adaptations of tasks/working environment/schedule</p> <p>'Counselling in professional development': skill assessment to help employees better plan and prepare their career path, anticipate changes and find assistance for retraining and professional reorientation</p>	<p>Third Health at Work Plan: sets as a priority to strengthen individual support for workers and increase early diagnosis of workers potentially at risk of exclusion from the labour market</p> <p>Fund for the Improvement of Working Conditions finances company projects addressing MSDs, psychosocial risks, the evaluation of occupational risks and the employment of older workers, with a focus on strenuous working conditions.</p>	<p>Case management system for victims of serious occupational accidents (Health Insurance Fund): personalised assistance programme</p> <p>Support mechanism for preventing professional exclusion (Health Insurance Fund): personalised assistance programme for people at risk of losing their job because of a health condition</p> <p>Part-time employment period for medical purpose: allows workers to temporarily work part-time to facilitate their return to work after a long interruption in employment</p> <p>Professional review aiming at staying in employment: complementary professional review performed in a diagnostic centre to assess reclassification opportunities in the same company or in a different company for workers who have suffered from a reduction in their work ability</p> <p>Vocational rehabilitation contract: progressive employment combined with vocational training for employees returning, to work to readapt to their former tasks after a long sick leave.</p> <p>Financial aids for workplace adaptation for disabled employees, financial aid to maintain older disabled workers in employment (only for disabled).</p>	<p>Collective Agreement on Quality of life at work (2014), providing the potential for companies to negotiate a company agreement on 'quality of life at work' which covers 10 topics, including: workers' participation; work relationships; work organisation; quality of work; physical working environment; well-being at work; work-life balance; and gender equality at work</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Germany	<p>Gradual increase in retirement age until 67</p> <p>Potential to combine work and pension income</p>	<p>Professional Offensive (Fachkräfte-Offensive) (Government) aims to support workplaces with the difficulties of keeping or recruiting skilled labour</p> <p>Perspective 50Plus (Federal Ministry of Labour and Social Affairs) funds innovative regional projects improve the opportunities of older and permanently unemployed persons</p>	<p>Joint German Occupational Safety and Health Strategy (Federal Government, the Federal States and the Public Accident Insurance Institutions): most of the activities have a focus on demographic change and an ageing workforce</p> <p>Work Programme of the Federal Institute for Occupational Safety and Health: promotes the transfer of research and knowledge on safety and health at work. Activities cover demographic change</p> <p>Initiative for Health and Work (Federal associations of health insurance funds): as part of the initiative, scenarios are developed for individual companies for the year 2020, taking into account, among other factors, the regional economic situation, training requirements and the age structure of the employees</p>	<p>Initiative inclusion: funding provided to support the integration of severely handicapped people into the labour market</p> <p>Jobs without barriers (Federal Ministry of Labour and Social Affairs): aims to increase training opportunities and improve employment opportunities for people with disabilities</p> <p>RehaBau — Rehabilitation in the building sector (Employer's Liability Insurance Association for the building sector): job-related training, e.g. lifting and carrying weights, and ergonomic organisation of the workplace</p>	<p>The Demography Strategy 'Every age counts' (Federal Government): cross-policy strategy to take advantage of demographic change, including promoting health at the workplace, and creating conditions for longer working lives</p> <p>Initiative New Quality of Work (Federal Government): umbrella initiative that promotes a better quality of work as a key factor for sustaining competitiveness and innovative capacity of businesses in Germany. Coordinates networks on specific topics, issues publications, guidelines, and maintains a database of good practices</p> <p>The Demographic Network: non-profit network of more than 350 companies and institutions with HR responsibility. Member companies commit to a non-discriminatory, age-neutral HR policy, a balanced age structure of their workforce, holistic health promotion and the transfer of knowledge between generations</p> <p>Good Work Index (DGB): data collection via a questionnaire measuring work motivation, commitment, job satisfaction, work ability, and the development of working conditions</p> <p>Age management measures included in collective agreements</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Greece	Retirement age was raised in 2013	<p>Operational Programme ‘Human Resources Development’ (Government) includes subsidies for employers hiring unemployed belonging to vulnerable groups (including people over 45) and subsidies for companies of the first and second degree regional authorities for the recruitment of 5 000 unemployed aged 55 to 64 years</p> <p>‘Innovative approaches for Social Dialogue Applications. The case of active ageing management’ and creation of Development Partnership Centre and the ‘EXPERIENCE’ Observatory (Greek Economic and Social Committee): project to propose and test innovative practical measures to maintain ageing workers in employment</p>		Projects on social integration and access/return to the labour market of people with disabilities financed by ESF and EQUAL (National Confederation of Disabled People)	‘Roadmap of active ageing in Greece 2012-2020’ (Greek Economic and Social Committee): tool for active ageing management practices targeting HR managers and businesses
Hungary	<p>Retirement age to gradually increase to 65 years up to 2022</p> <p>Access to early retirement and disability pensions reduced</p>	<p>Hungarian National Reform Programmes 2012 and 2013 (Government) labour market services, such as consulting, training and other benefits to support start-up business in targeting among others low-skilled individuals and people over 50</p> <p>Employer Benefit System — Job Protection Act 2013 (Government): tax exemptions for maintaining in employment or hiring vulnerable workers, including older workers</p> <p>Labour market programmes to promote the employment of disadvantaged persons (National Employment Service): training older unemployed persons, providing wage subsidies and job opportunities</p>	<p>New OSH strategy under discussion includes the objectives of better protecting vulnerable groups of workers, including older workers</p> <p>Hungarian Forum for Workplace Health Promotion: grants the ‘Health-friendly workplace’ label and ‘Health-friendly NGO’ award</p> <p>Awareness raising activities on WHP by the Association for Healthier Workplaces</p> <p>Healthy Workplace National Programme (American Chamber of Commerce in Hungary): awareness-raising, dissemination of good practices ‘Healthy Workplace AmCham Award’ for AmCham Members</p>	<p>Publication of guidelines on the assessment of fitness-to-job (including return to work) and the promotion of work ability in workers with common health problems (Social Renewal Operational Programme, co-financed by the ESF)</p> <p>Füzesabony rehabilitation centre: rehabilitation services for disadvantaged people (disabled people, Roma people and women over 45): vocational training, psychosocial and rehabilitation support</p>	

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Iceland		<p>50+ project (Government) launched in 2005 to examine the status of older workers and trends in Iceland</p> <p>Studies have been carried out on labour-related issues and ageing, focusing mainly on employment participation</p>		Several vocational rehabilitation centres propose rehabilitation services in addition to the Vocational Rehabilitation Fund	
Ireland	Pension age to increase to 67 in 2021 and to 68 in 2028	<p>Handbook on employing older workers (Irish Chambers of Commerce); Guide for employers on phased retirement (IBEC)</p> <p>Age Action (charity) issued a report providing broad view of current issues and challenges affecting older people including education, skills and employment</p>	Workplace Health and Well-Being Strategy 2008 (Health and Safety Authority): aims at promoting health and well-being, preventing ill health and supporting the rehabilitation of people out of work because of ill health or disability. The strategy was not implemented	<p>Part of the Workplace Health and Well-Being Strategy</p> <p>Workplace Safety Initiative (IBEC, ICTU and the Irish Insurance Federation): guidance document 'Supporting an Injured Worker to Return to Work'</p>	National Positive Ageing Strategy (Government): promotes the participation of people in formal and informal work and voluntary activities as they age, and the development of employment options (including options for gradual retirement)
Italy	<p>Retirement age raised in 2012, and will increase to 67 by 2021</p> <p>Access to early retirement has been reduced</p> <p>Potential to combine work and pension income</p>	<p>Generation Handover: subsidised recruitment of a younger worker combined with the maintenance of an older worker</p> <p>Tax incentive for companies employing workers over 50 unemployed for over a year (Government)</p> <p>Placement service (consultancy and training) for workers over 50 (employment agencies).</p> <p>Initiatives at local level for the reintegration of unemployed workers over 50.</p> <p>L'Incontro Cooperative: recruits older maintenance workers — recently retired or in early retirement — from the region's local industries to work as instructors in protected job centres</p>	National Strategy for the prevention of accidents at work and of occupational diseases : considers MSDs as a priority	<p>Training programmes (INAIL) for disabled people and injured workers regardless of the degree of disability</p> <p>SuperAbile: online guidance and advice service on disability issues: Call centre delivers free services; specialised website and monthly online magazine</p> <p>Several rehabilitation centres delivering specific services such as musculoskeletal rehabilitation services</p>	2012 National Programme promoting an active, vital and dignified ageing in a solidarity-based society : encourages life-long learning projects, the transmission of knowledge from older to younger generations, education programmes on active and healthy lifestyles

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Latvia	<p>Retirement age to gradually increase to 65 by 2025</p> <p>Early retirement discouraged by cutting pensions</p> <p>Potential to combine work and pension income</p>	<p>Direct wage subsidies for employers to recruit older workers (Government).</p> <p>Training for unemployed workers — older workers are a specific target group (Government/State Employment Agency)</p> <p>Careers consultations to job-seekers or workers at high risk of unemployment (State Employment Agency)</p> <p>In the 2007-2013 period, 'Equal opportunity regardless of age' has been included as a horizontal priority for the use of EU structural funds</p>	<p>Strategy for the development of the labour protection field 2008-2013: promotes the enhancement of a preventative culture, including workplace health promotion</p>	<p>Fit for work Latvia projects to collect data, design a model for early diagnosis and provide recommendations for a national MSD management plan</p>	<p>Latvia: Developing a Comprehensive Active Ageing Strategy for Longer and Better Working Lives (Ministry of Welfare) aims to identify the main obstacles, incentives and disincentives for the 50+ population to stay in the labour market and identify good practices and policy measures needed to support better health outcomes for the 50+ working population</p>
Liechtenstein		<p>Information website (Office of Economic Affairs) on changes throughout the working life and the need to adapt older workers' work habits to ensure that they stay in work up to retirement age</p>			
Lithuania	<p>Gradual increase in retirement age (up to 65 in 2026)</p>	<p>Programme on employment growth 2014-2020 (Government): aiming to create favourable conditions for maintaining older workers in employment and working beyond retirement age</p> <p>'Senior Bank' (Lithuanian Labour Exchange): database of job seekers to enable older workers and retired people to find appropriate employment</p> <p>Project under EQUAL initiative to promote the reintegration of older workers in the labour market (Lithuanian Trade Union Confederation). The project includes integrating protective provisions into collective agreements, organising training of pre-retirement age persons and creating new techniques for adult learning</p>			

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Luxembourg	<p>Pension bonus for workers retiring later than retirement age</p> <p>Reduced attractiveness of early retirement</p> <p>Potential to combine work and pension income</p>	<p>Bill introducing a package of measures on age management compelling companies to negotiate an action plan for age management (plan de gestion des âges) on these topics: (1) recruiting older workers; (2) anticipating career changes; (3) improving working conditions and preventing working conditions having serious health consequences; (4) preventative health measures; (5) developing skills and access to life-long education; (6) measures relating to the end of working life and transition between employment and retirement; (7) transmission of knowledge and mentoring programmes</p> <p>Generation contracts: subsidised hiring of a young worker combined with the retention of an older worker</p> <p>Working time account: enables an employee to save up paid annual leave in return for holiday periods or time off that have not been taken to shift to part-time work, phased-in retirement or for training purposes</p> <p>Financial assistance for employers hiring workers over 45</p>		<p>Centre for the Prevention of Back Problems 'Prevendos': prevention and rehabilitation training for people suffering from lower back pain</p>	
Malta	<p>Retirement age raised in 2007 to between 62 and 65</p> <p>Potential to combine work and pension income</p>	<p><i>Covered in cross-policy framework</i></p>	<p>National Strategy for Health and Safety at Work (2008-2012) identifies as emerging risks groups of vulnerable workers, including older workers</p>	<p>Framework for Action to Control Stress at Work (Occupational Health and Safety Authority): guidelines for companies covering rehabilitation</p> <p>Supported Employment Programme (Richmond Foundation) training and support for people with mental health problems to find suitable employment</p>	<p>National Strategy on Active Ageing, 2013: supports working conditions that ensure workers' lifelong employability, equal access to training, age-appropriate training systems, flexible and individual work designs, age-friendly shift rotations and occupational support from well-informed management</p> <p>Project Ensuring Sustainable Work for Healthier and Longer Working Lives (Occupational Health and Safety Authority): awareness-raising on the challenges of an ageing workforce, age-sensitive risk assessment, adapting working conditions, rehabilitation of ageing workers after absence from work due to illness or disability, etc.</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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The Netherlands	<p>Gradual increase in retirement age until 67</p> <p>Early retirement schemes suppressed</p>	<p>National Employability Plan (Foundation Kroon op het Werk/TNO): development of instruments to assess employability</p> <p>'EveryDayBetter' (Association of SMEs in the Netherlands): supports SMEs to increase the employability of their employees</p> <p>'Action Plan 55 plus works': reduce unemployment among older workers — monetary incentives in the form of placement bonuses and schooling vouchers for employers and job-seekers</p>	<p>National programme 'Prevention 2014-2016: Health is everything': collaboration between six ministries, municipalities, companies and social partners to stimulate sustainable employability by promoting active health management and knowledge sharing in organisations</p> <p>'Healthy Enterprise': joint initiative between the Ministry of Social Affairs and Employment and the Ministry of Health, Welfare and Sport to support SMEs to implement good working conditions and a healthy workplace</p> <p>'System of Healthy and Safe Working' (Social and Economic Council): defining a prevention policy as a broad set of measures addressing working conditions, sick leave prevention, and re-integration, but also human resources management instruments and age management</p>	<p>'Health management at work: prevention of sick leave and re-integration of employees with health problems' (Employers' Forum 'Kroon op het Werk'): collection of good practices from enterprises with respect to reducing sick leave and (re-) integrating workers with health problems back to employment</p> <p>'TraJect: Aan het werk?!' (Knowledge Centre Participation, Work and Health of the University of Applied Sciences in Rotterdam): case management programme supporting (mainly) young individuals with chronic illnesses to find work</p>	<p>Sustainable Employability project 2012: aims to keep employees working longer and in a better working environment (awareness campaign, toolbox, website)</p> <p>Subsidies to develop age-aware policy instruments in companies 2004-2010 (Ministry of Employment)</p>
Norway	<p>Pension reform: retirement made possible between 67 and 75</p>	<p><i>Covered in cross-policy framework</i></p>	<p>White Paper on Joint Responsibility for a Good and Decent Working Life — Working conditions, working environment and safety: OSH strategy considers the need to create flexible working time schemes that allow workers to work until retirement age</p>	<p>Access to part-time jobs for workers with reduced work ability/partial sickness absence certificates</p> <p>In addition to the programmes of the Norwegian Labour and Welfare Administration, regional centres or clinics provide rehabilitation services</p>	<p>Inclusive Workplace Agreement concluded by employers, employees and the government in 2001: sets quantitative objectives to increase effective labour force exit age, employment of people with reduced abilities, and to reduce sick leave</p> <p>'Win-win' information website (Centre for Senior Policy): guidance to senior workers, union representatives and employers on developing senior policies in companies</p> <p>Awareness-raising activities (conferences, webinars) organised during the year for activities relating to senior policies, extending careers and adapting the workplace (Centre for Senior Policy)</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Poland	<p>Retirement age raised in 2012 to 67</p> <p>Access to early retirement limited</p>	<p>'50+ Solidarity across generations': aims to increase the economic activity of people over 50 — improving skills, motivating employers to hire people over 50, transfer of knowledge, etc.</p>	<p>Programme for the Improvement of Work Safety and Work Conditions: promotes a preventative and safety culture, and the protection of people who work in hazardous conditions and prevent the exclusion of such individuals from the labour market</p> <p>'Strengthening Occupational Health Professionals' capacities to improve the health of the ageing workforces' (NIOM): training for OSH professionals, country- and sector- specific educational materials, e-learning platform</p>	<p>'Elaboration of comprehensive RTW programmes for workers with vocal disorders, conioses or allergic diseases' (NIOM): establishment of a Centre for Advice and Diagnostics for employees, employers and physicians and other dissemination activities</p> <p>'Framework guidelines for the design and adaptation of premises and work posts to the specific needs of disabled individuals' (National Fund for the Rehabilitation of the Disabled): guidelines, catalogue of good practices and other dissemination activities</p> <p>Social Cooperative 50+ from Gdynia: employs sick or older employees in activities tailored to their capabilities</p>	<p>Assumptions for the long-term senior policy in Poland (2014-2020): active ageing strategy defining the extension of professional careers as a challenge to be acted upon</p> <p>'With age — With advantages' (Polish Agency for Enterprise Development): awareness-raising programme on age management and employment of older people</p> <p>'Age management methodology as an innovative solution to facilitate professional activity of workers aged 50+' (HRP Group/University of Lodz): awareness-raising programme on age management for HR managers</p>
Portugal		<p>Programme of action (Government): measures such as giving priority to unemployed people over 55 in the employment centres</p> <p>ReMobilização Sénior (Authority for Working Conditions): career management and training programme, addressed to unemployed older workers</p> <p>Career management training programme (Institute of Employment and Professional Training)</p> <p>'Rede de Competências Cáritas': services to help unemployed or retired workers over 40 find a suitable job</p>	<p>National Strategy for Health and Safety at Work 2008-2012: considers older workers as part of vulnerable workers groups</p> <p>National Plan of Occupational Health 2013-2017: risk factors and health problems (in particular mental health and MSDs) that are related to ageing in the work context are considered a priority area for research</p>	<p>Programme for Employment and Support for the Qualification of Persons with Disabilities and Incapacities (Government): to support the access maintenance and reintegration in the labour market of people with disabilities</p> <p>The Portuguese Association of People with Chronic Obstructive Pulmonary Disease and Other Chronic Respiratory Diseases supports people with chronic respiratory diseases at personal, family and work level</p>	<p>National Strategy for Active Ageing (Government) defines as priorities the extension of working lives, lifelong learning, and the reduction of unemployment among older workers</p> <p>Guide for the promotion of Active Ageing and Solidarity between Generations in the business context (GRACE): good practices on age management</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Romania	Retirement age raised in 2013 to 65 for men and 63 for women.	<p>National Strategy for Employment for 2013-2020: aims to increase the participation in the labour market of older people with a range of measures: subsidies/reduction of contributions paid by employers for a determined period, ensuring older people have access to flexible forms of work organisation, etc.</p> <p>Financial incentives to employers to hire workers who have at most three years left before reaching retirement age (National Agency for Workforce Employment) or persons over 45.</p> <p>Un-retirement for teachers and university professors: possibility to come back to work after retirement.</p>	<p>National Strategy for Occupational Health and Safety 2008-2013: includes references to 'Workplace Health Promotion', in particular in SMEs.</p>	<p>Programme for Social Inclusion included projects related to vocational rehabilitation and return-to-work for people with disabilities.</p>	
Slovakia		<p>Human resources development strategy of the Košice self-governing Region 2006-2013: aims to improve the availability and attractiveness of job opportunities for workers over 50</p>	<p>Strategy on Health and Safety at work in the Slovak Republic until 2020, and Action Plan for its implementation from 2013 to 2015 with an outlook until 2020 (Government): calls for more research on the ageing workforce</p> <p>Financial priorities of the Ministry of Labour, Social Affairs and Family 2012-2015: priority on the coordination of research in OSH includes the integration of specific groups of the population into employment (including ageing population)</p>	<p>The Institute for Occupational Rehabilitation of People with Disabilities in Bratislava ensures occupational rehabilitation of people with disabilities</p>	<p>National Programme for Active Ageing 2014-2020 (Government): aims to support employment and employability of older people; protect the safety and health of employees over the age of 50 by conducting inspections every two years; prevent discrimination of older workers and organise training of labour inspectors to identify discrimination</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

Country	Social policies/pension reforms	Employment	OSH/Health	Rehabilitation/RTW	Cross-policy frameworks and supporting initiatives
Slovenia	Retirement age raised to 65 by 2020	<p>Subsidies for full-time employment of workers over 50 that are registered as unemployed for at least six months</p> <p>Personal Income Tax Act: employers can claim a tax deduction if they employ older workers (i.e. 55+) who have been registered as unemployed for at least six months</p>	<p>Resolution on the National Programme of Safety and Health at Work (Government): emphasises the prevention and health promotion in the workplace, maintaining work ability, reducing early retirement and excessive absenteeism due to illness</p> <p>Research on risk assessment and the ageing workforce (Labour Inspectorate) to collect data on whether employers in Slovenia 'anticipate' the issue of an ageing workforce in their risk assessments</p> <p>Workplace health promotion initiatives by public institutes not directly addressed to older workers</p>	<p>PHWork project 'Promoting Healthy Work for Employees with Chronic Illness' (Clinical Institute of Occupational Medicine, Traffic and Sports): awareness-raising of the importance and usefulness of job retention for workers with chronic diseases</p> <p>Employee Assistance Programme (Institute for Development and Innovation Ljubljana) to reduce stress, absenteeism and disturbances in the workplace and improve work-life balance, includes rehabilitation</p> <p>Complex Cognitive Rehabilitation programme (IRI Institute) with the aim of responding to the problems of long-term sick leave and the premature retirement of employees due to mental disorders in Slovenia</p>	<p>Overview of measures for the promotion of active ageing upgrading the 'Strategy of care for the elderly till 2010' (Government): special attention paid to older unemployed, with attention to their work ability, needs, health problems, rehabilitation needs and training needs. Another goal of this Strategy is to increase awareness of the safety and health of conditions of older workers</p> <p>AHA.SI — Active and healthy ageing in Slovenia (National Institute of Public Health): research and awareness raising project and creation of network of stakeholders from different sectors working on this issue</p> <p>International project 'Ageing workforce' (participation of the Association of Employers of Slovenia): to identify obstacles to the employment of older workers and measures needed to manage an ageing workforce, and to strengthen social dialogue</p>

Analysis report on EU and member States,
policies, strategies and programmes on population and workforce ageing

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Spain	<p>Retirement age raised to 67 in 2013</p> <p>Access to early retirement reduced</p>	<p>General Strategy for the Employment of Older Workers (Government): aims to improve the access to employment for older workers, improve working conditions, promote reintegration into the labour market after unemployment</p> <p>Ageing Workforce towards an Active Retirement/online platform SEN+: provides companies with opportunities to keep and manage the knowledge and experience of their workers, to bridge the gap between young and old workers and to develop strategies to ease and manage the transition to retirement</p>	<p>Spanish Strategy for Occupational Safety and Health 2015-2020 (Government): promoting a continuous improvement of the working conditions among all workers equally, especially focusing on the prevention of work-related ill health</p> <p>Campaign for the prevention of MSDs at the workplace (UGT)</p> <p>Older workers: strategies to facilitate their occupational capacity preservation and their aim to continue in active working: research on occupational capacity and well-being of workers over 50 and potential solutions</p>	<p>Research conducted on early intervention in the cases of MSD (Hospital San Carlos in Madrid)</p> <p>Programmes focused on the training and employability of people with disabilities (ONCE Foundation)</p>	<p>'Age Management in the Metal-Mechanical Industry' (FEMEVAL): development of guidance to small enterprises and workers about age management, diagnosis of age management needs in companies and development of action plans</p> <p>'Good practice in age management, Age management implementation in the company' (FEMEVAL): guidance document for companies</p>

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Sweden	Early retirement schemes cancelled	<p>'Employment programmes: Employment support, Job Development Guarantee and New Start Jobs: financial incentives for both workers and employers to encourage the hiring of workers who have reached the official retirement age. Tax credits and housing allowance for workers over 65; tax credit for hiring workers over 65</p>	<p>A renewed health and safety policy — National Action Plan for Health and Safety at Work 2010-2015 (Government): focuses on preventing exclusion from the labour market by improving the work environment</p> <p>Research led by Swedish Work Environment Authority on working conditions and health</p>	<p>Rehabilitation Chain: During the first 90 days, the employee's working capacity is evaluated against his/her former position and the necessary adaptations for this purpose. Between the 91st and 180th days, the worker can take six months' leave to try out a new job with another employer. From the 181st day, the worker's working capacity and thus sickness benefit is evaluated, not only against his/her previous job, but against all potential jobs on the labour market</p>	<p>'Measures for a longer working life. Final report of the inquiry into the retirement/pension age' (Commission of Inquiry): report proposing a package of measures to increase working life in good health, including opportunities for older people to preserve and develop their skills, to improve the working environment and adapt it to older workers, raise awareness and fight discrimination, strengthen financial incentives, etc.</p> <p>Projects supporting leadership in age management and supporting changes in work organisation to encourage workers to stay at work longer (2002), funded by Swedish government</p> <p>'Sustainable Work Organisation' (Swedish Work Environment Authority): series of conferences about gender diversity in the workplace and the promotion of sustainable working conditions for all until retirement</p>
Switzerland	Access to early retirement reduced	<p>'Qualified workers for Switzerland' (State Secretariat of Economics): aims to identify incentives for employment after retirement, raise awareness of organisation, create adapted working conditions, increase research on working conditions of older workers</p> <p>Financial incentives: 12-month job training grant paid to employers for recruiting unemployed persons over 50</p> <p>'Labour Market 45plus' (Swiss Employers Association): aims to provide incentives to employers to hire workers over 45 and to provide incentives for workers to stay in work for longer</p>	<p>Inspection campaigns (State Secretariat for Economic Affairs) focused on the prevention of MSDs and psychosocial risks</p> <p>'Programme santé 50+': pilot projects including several focusing on specific aspects of OSH and older workers (mental health, best practices, workplace health promotion, and transition to retirement)</p>	<p>'Guide for professional rehabilitation' addressed to employers (Invalidity Insurance)</p> <p>'Initiative Berufliche Reintegration' (Invalidity Insurance, SUVA) aims to reintegrate workers that have had an accident and are unable to return to their old workplace: the new employer trains the employee in the new employment field for a period up to 24 months with public subsidies</p> <p>Report 'Return-to-work' (Fitforwork-Swiss): case studies on possible measures to be taken for people with MSDs</p>	<p>Support to companies on age management: 'SME — Demography' supports SMEs in analysing demographic issues, checklist for HR managers to manage changes in the age structure (Health Promotion Switzerland)</p> <p>Altersstrategie (Swiss Employers Association): booklet providing guidelines on adaptations of the workplace to be made and good practices on age management</p>

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United Kingdom	Gradual increase in retirement age	<p><i>Covered in cross-policy frameworks</i></p> <p>Age and Employment Network (TAEN): publishes the Survey of jobseekers aged 50+ highlighting barriers to labour market integration</p>	<p>'Health, Work and Well-being' (DWP): cross-government initiative to improve the general health and well-being of the working-age population, support more people with health conditions to stay in work or enter employment, and reduce the number of days lost to sickness absence. Publication of case studies and good practices</p> <p>Health and Safety Executive research programme: publishes reports on age and work-related and/or health issues</p> <p>'Getting better: workplace health as a business issue' (Confederation of British Industry): report flags up the importance of demographic changes and sets out measures to support the health and well-being of an ageing workforce</p> <p>'The ageing workforce — health and safety implications' (UNISON): examines how age affects work and gives suggestions for the precautions that should be taken and the adjustments that can be made</p> <p>OSH advisory services for SMEs (NHS, NHS Scotland, NHS Wales, HSENI): advisory services on OSH and health matters</p>	<p>'Health, Work and Well-being' (DWP) (see 'OSH').</p> <p>'Healthy Working UK' (NHS): supports the role of GPs and other primary care health professionals by providing information and decision aids to support the management of health at work</p> <p>Defence Medical Rehabilitation Centre: identifies rehabilitation needs as soon as possible, and provides intensive therapy and vocational support to military staff</p> <p>Fit for Work Europe (Work Foundation): research project promoting early intervention practices to treat MSDs</p>	<p>'Fuller Working Lives — a Framework for Action' (DWP): report makes the case for extending working life by looking at health conditions and disability, back-to-work support, skills and workplace factors and financial security and incentives.</p> <p>'Age and the workplace — Putting the Equality Act 2010 and the removal of the default retirement age (DRA) 2011 into practice' (Advisory, Conciliation and Arbitration Service): guide identifying practical organisational changes that can be made to help older people to stay in work</p> <p>'Managing age' (TUC): gives guidance on good age management practices</p> <p>Age and Employment Network (TAEN): not-for-profit organisation producing tools and guidance related to age management, including Workforce Assessment Tool, to help employers creating a work environment for all ages; provides consultancy service on age management and OSH; publishes the Survey of jobseekers aged 50+ highlighting barriers to labour market integration</p> <p>Managing the health & productivity of an ageing workforce: solutions to employer questions (Age Action Alliance): online toolkit</p> <p>'An Ageing Workforce: the Employer's Perspective' (Institute for Employment Studies)</p>

DWP, Department for Work and Pensions; HSENI, Health and Safety Executive for Northern Ireland; NHS, (UK) National Health Service; RTW, return to work; TUC, Trades Union Congress

The European Agency for Safety and Health at Work (EU-OSHA) contributes to making Europe a safer, healthier and more productive place to work. The Agency researches, develops, and distributes reliable, balanced, and impartial safety and health information and organises pan-European awareness raising campaigns. Set up by the European Union in 1994 and based in Bilbao, Spain, the Agency brings together representatives from the European Commission, Member State governments, employers' and workers' organisations, as well as leading experts in each of the EU Member States and beyond.

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