

OSH policies, strategies,  
programmes and actions  
Stakeholder Conference  
22 September 2015, Brussels

Prof. (emer.) Juhani Ilmarinen  
Finnish Institute of Occupational Health,  
University of Eastern Finland,  
Juhani Ilmarinen Consulting Ltd  
Vantaa, Finland

Review of policies in Europe for  
safer and healthier work at any  
age  
Final Report

No. EUOSHA-PRU/2013/C/02  
July 2015

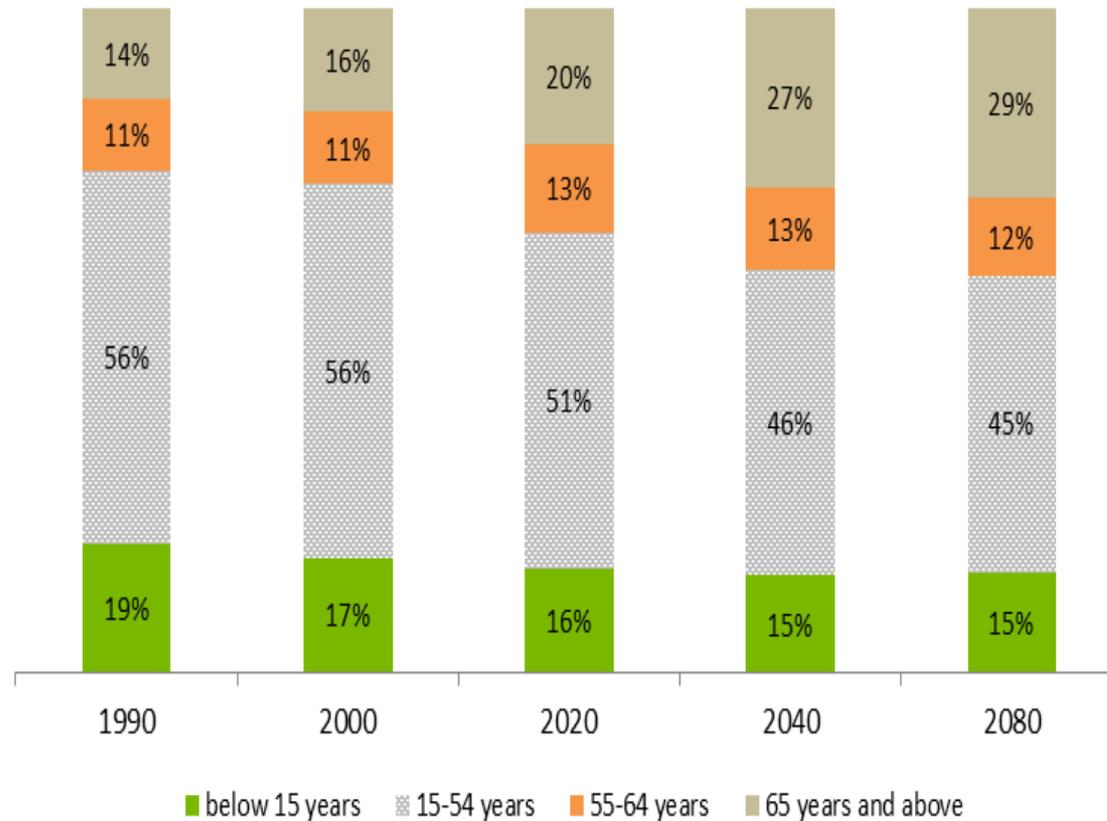
# Authors of the final report

- Claire Dupont, Alice Belin, Yoline Kuipers, Lise Oulès, Elena Fries-Tesch and Athina Kosma (Milieu Ltd.).
- Reviewed by Gretta Goldenman (Milieu), Richard Graveling, Joanne Crawford (IOM), Maciek Dobras and Piotr Sakowski (NIOM) and Karl Krajic (FORBA);
- Edited by Tadzio Koelb.
- This report was commissioned by the **European Agency for Safety and Health at Work (EU-OSHA)**. Its contents, including any opinions and/or conclusions expressed, are those of the author(s) alone and do not necessarily reflect the views of EU-OSHA.

# Setting the scene: the challenges of demographic change

## Demographic developments in Europe

Figure 1: Shares of broad age groups in total population (residents on 1 January), 1990–2080



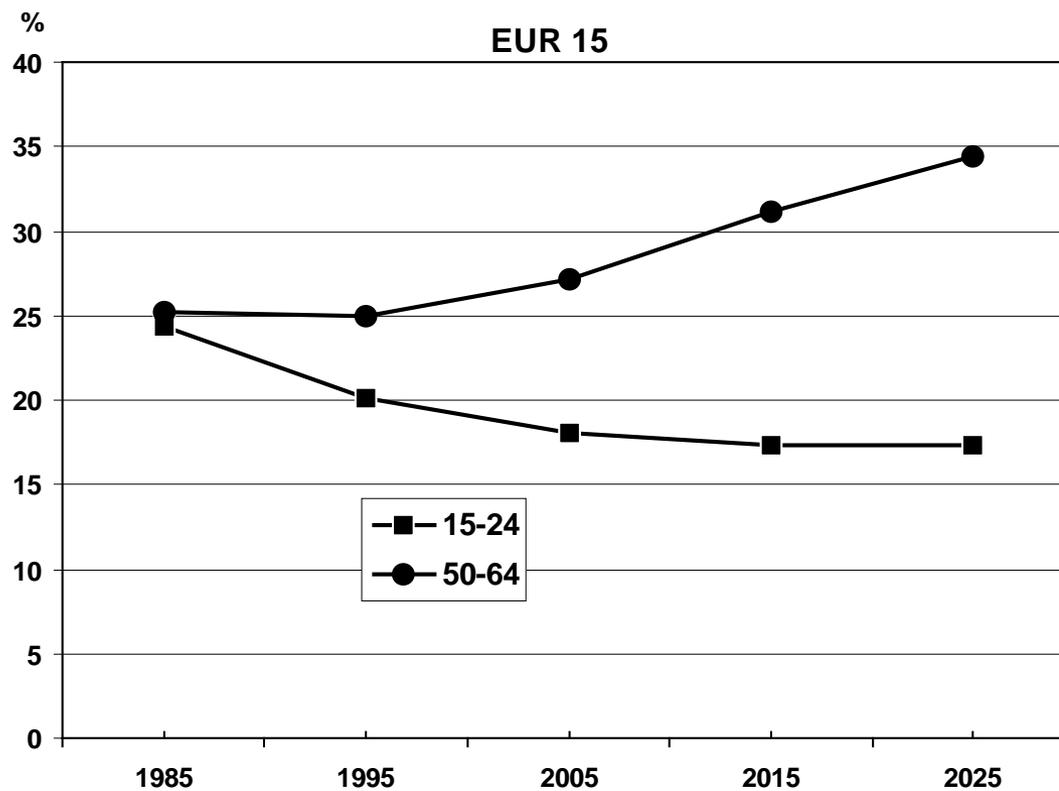
Source: Eurostat 2013 population statistics: Population in the EU on 1 January by broad age group and sex [demo\_pjanbroad] and Eurostat population projections [proj\_13npms], Milieu own calculations

\* figures from 1990 to 2000 are for EU-27, figures from 2020 onwards are for EU-28

# EU25 working-age population trends, 2005 to 2050

<b>Age groups</b>	<b>2005 to 2010</b>		<b>2010 to 2030</b>	
	<b>Per 1000 000</b>	<b>%</b>	<b>per 1000 000</b>	<b>%</b>
<b>15-24</b>	-2.4	-4.1%	- 6.7	-12.0%
<b>25-39</b>	-3.9	-3.9%	-14.9	-15.6%
<b>40-54</b>	4.1	4.2%	- 10.0	- 9.8%
<b>55-64</b>	5	9.5%	8.7	15.3%

Share of different age groups in 1985,1995, 2005, 2015, 2025  
15-24 and 50-64% of the 15-64 year age group in the European Union



Source: Eurostat, New Cronos 1998 (CD-ROM)

# The challenges of an ageing population

- *Economic challenges*
- *Health-related challenges*
- *Challenges for working environments*
- *Sickness-absence management and return-to-work*
- *Work organisation*
- *Skills and competences*
- *Discrimination*

# Increase of age-related public expenditure

- **Pension expenditures** are projected to increase over the period 2010–2060 to a level of 12.9% of GDP – however with large disparities across Member States;
- **Health-care expenditures** are projected to rise from 7.1% of GDP in 2010 to 8.3% of GDP in 2060 for the EU-27; and
- Increase in **long-term care expenditures** will have the strongest impact on public spending as they are projected to double from 1.8% of GDP in 2010 to 3.4% of GDP in 2060 in the EU – with the highest increases expected in Belgium, Denmark, the Netherlands, Finland, and Sweden.

# Conceptual frameworks for safer and healthier work at any age

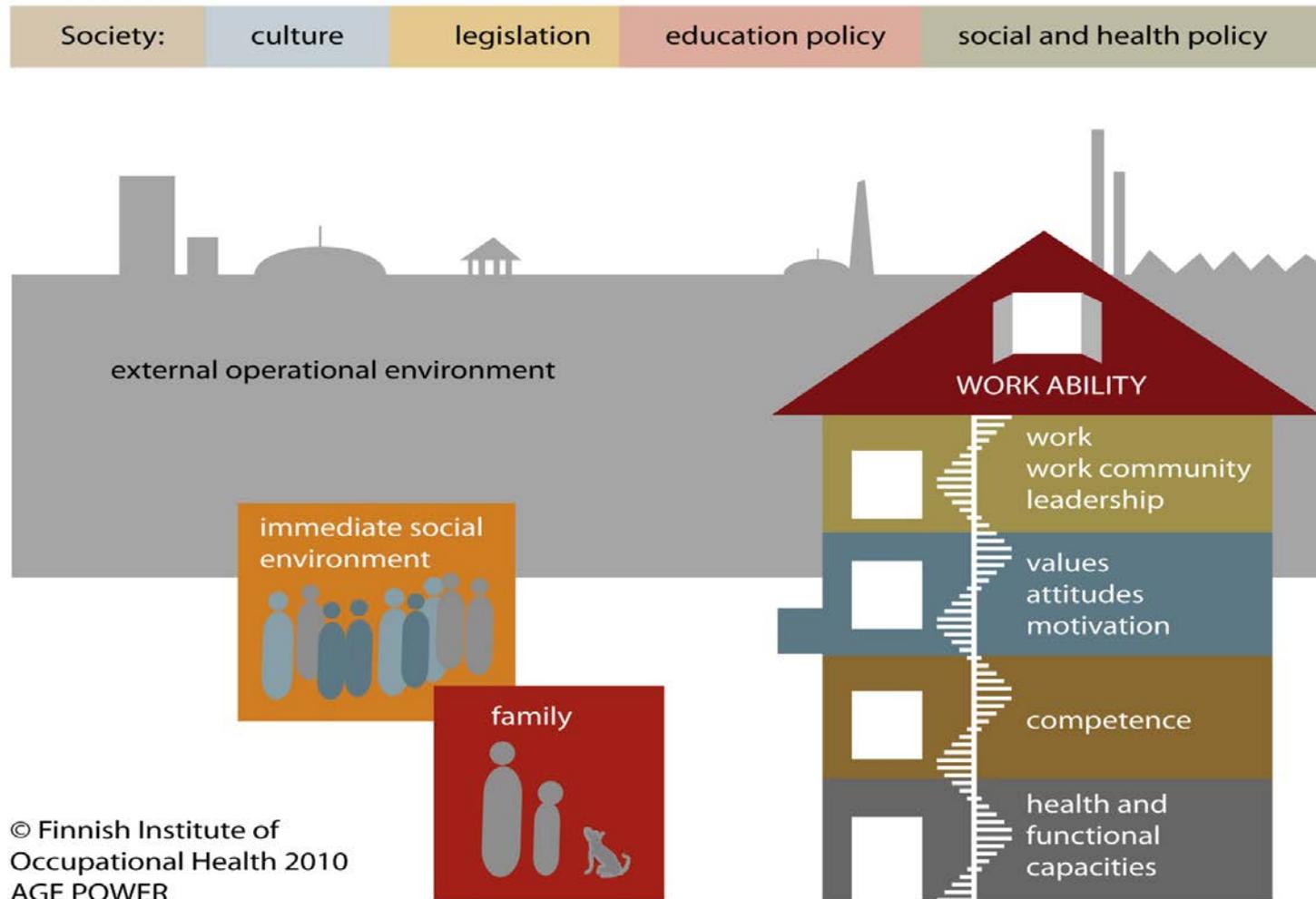
- **Healthy ageing**
- **Active ageing**
- **Rehabilitation**
- **Workplace health promotion**
- **Health-promoting workplaces**
- **Wellbeing at work**

- **Return to work**
- **Work ability**
- **Sustainable work**
- **Age management**
- **Diversity management**
- **Employability**

# The concepts can be grouped into three categories

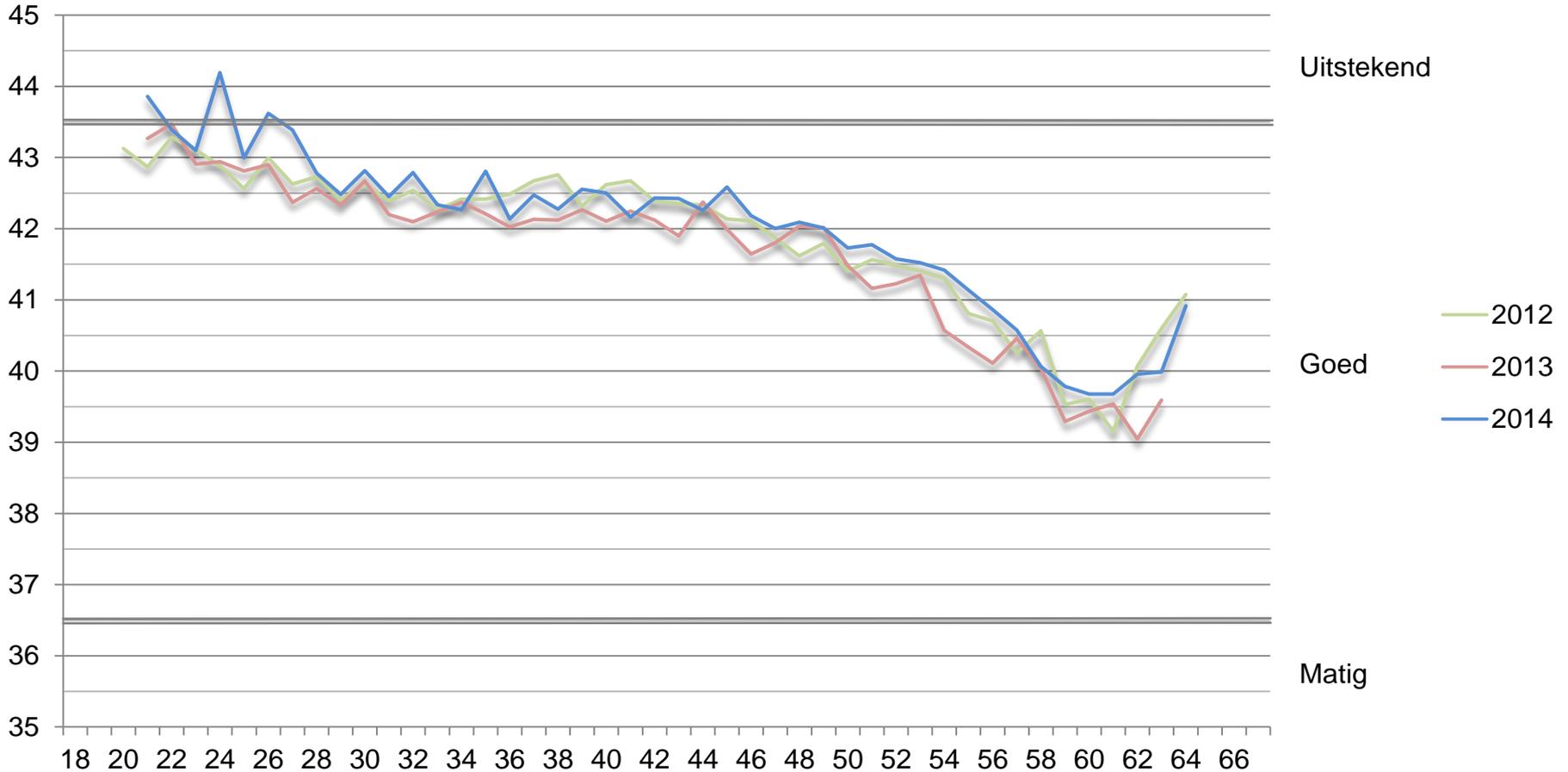
1. The concepts of 'sustainable work', 'work ability', 'workplace health promotion', 'wellbeing at work', 'return-to-work', 'diversity management' and 'age management' focus on the **individual at the workplace and on work organisation**, but they also all have a wider societal dimension, i.e. they also aim to improve the **individual's life outside of work**.
2. The concept of 'employability' targets the **individual in the labour market and the characteristics of the labour market** and also has a societal dimension.
3. The concepts of 'healthy and active ageing' and 'rehabilitation' focus primarily on the **individual in society** but also have a work-related dimension, in particular from the point of view of labour market participation.

# Work ability model



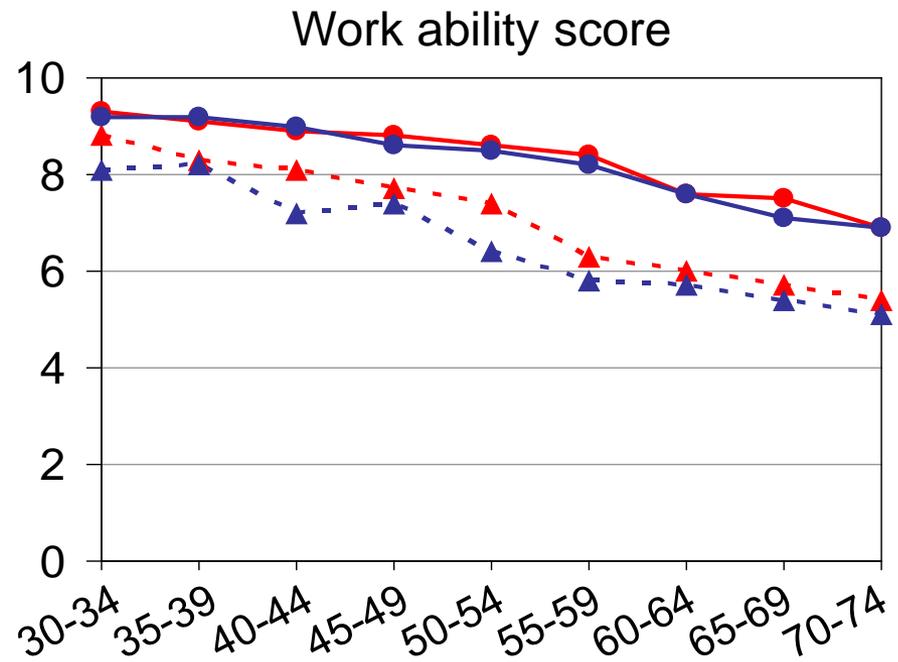
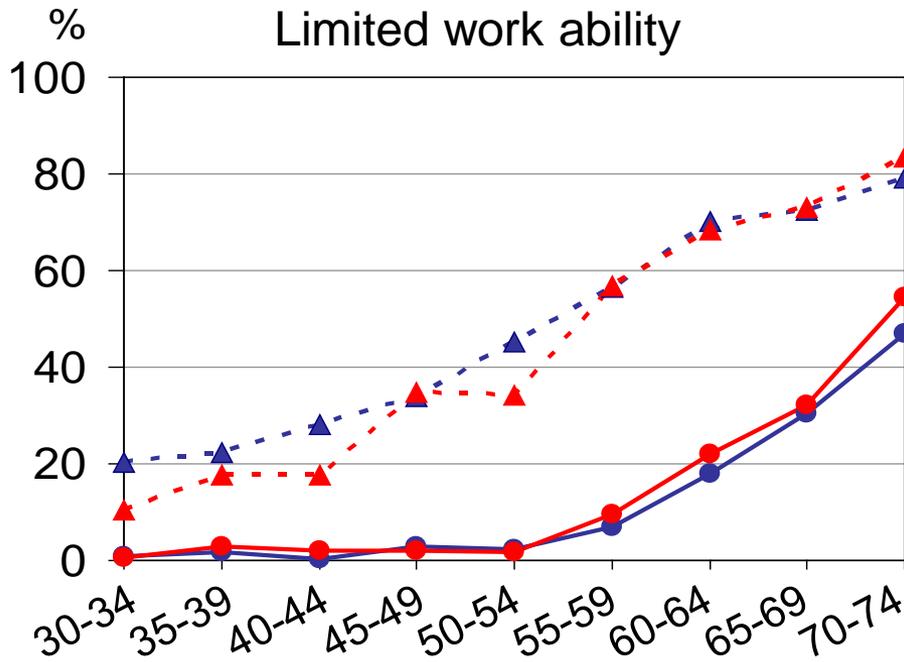
# Work Ability Index

Hupkens & Brand ( n= 105,673)



Gemiddelde WAI score (y-as) naar leeftijd (x-as), periode 2012, 2013 en 2014, n=105.673.

# Proportion (%) of those with limited work ability and the mean work ability score for those chronically ill and those with no chronic illness



Chronically ill

---▲--- Women

---▲--- Men

Not chronically ill

—●— Women

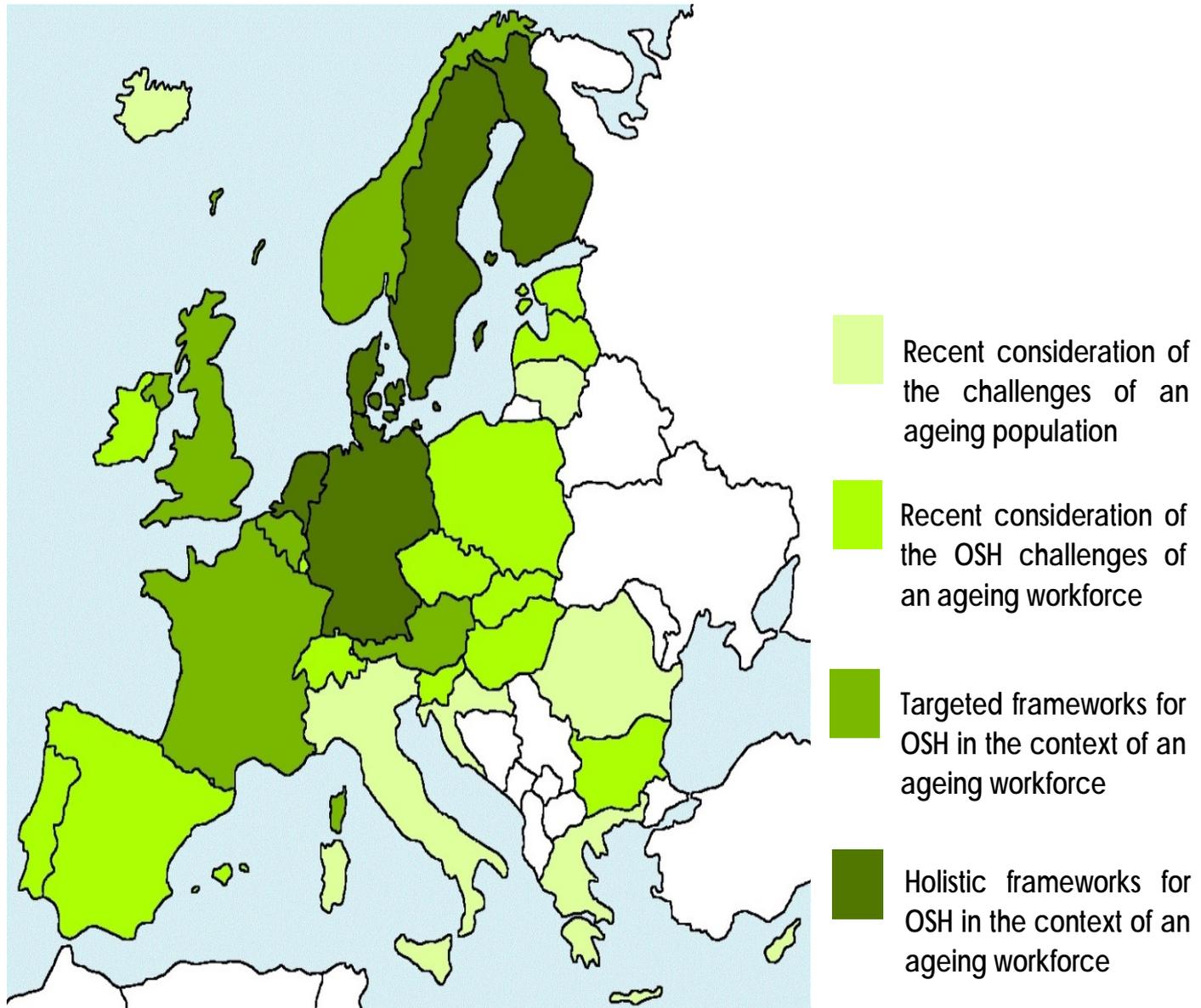
—●— Men

# Missing challenges

- **Employer perspective:**
  - Changes in operational environment  
(ageing and globalisation, new technology etc.)
  - Competitiveness, productivity
  - Image, attractiveness
- **Migration rates, refugees**

# National profiles for ageing workforce

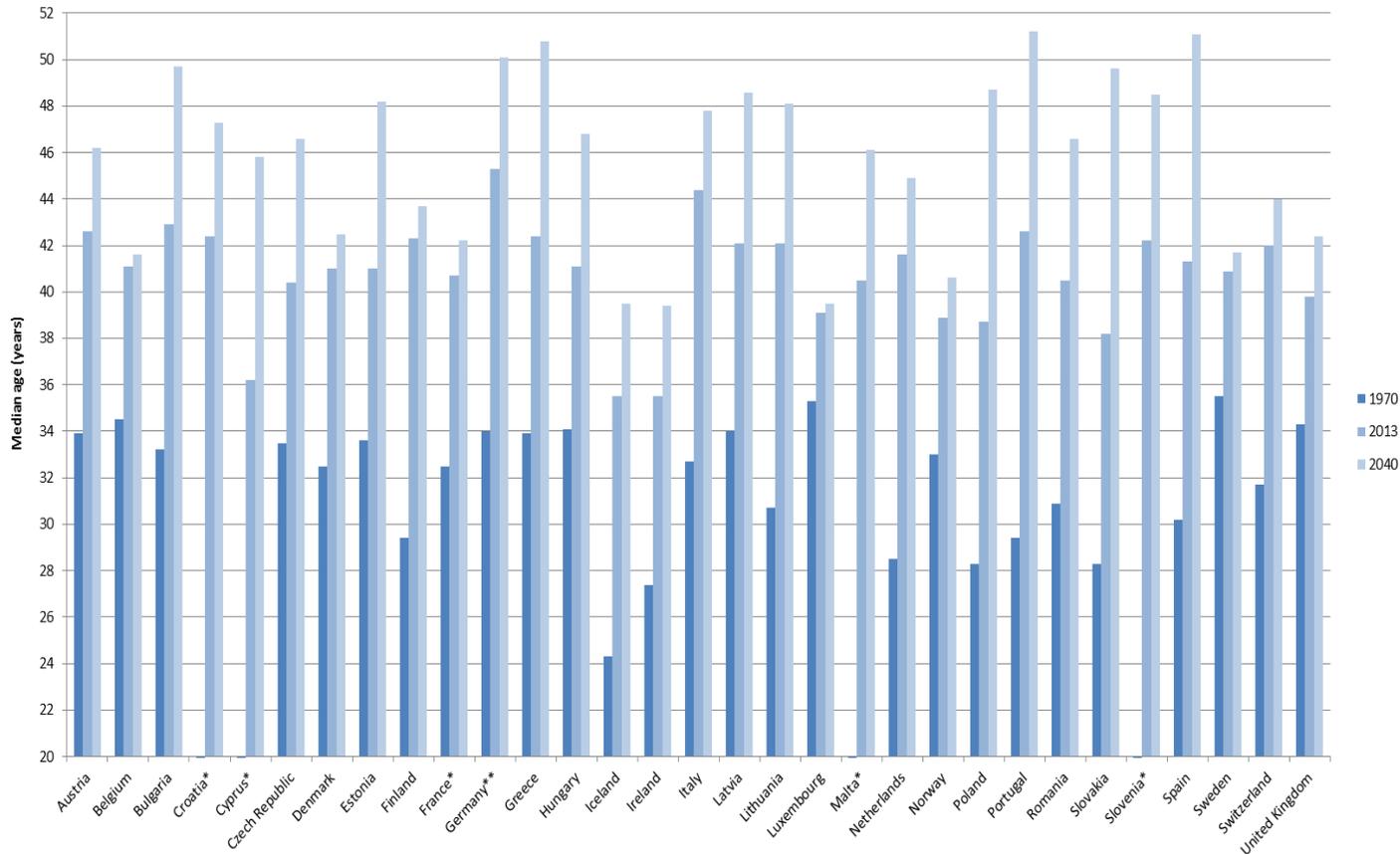
Figure 1: Four types of national profiles based on policy approaches to OSH in the context of an ageing workforce



# **Factors influencing national policy development for safer and healthier work at any age**

**Impacts of demographic trends  
and related developments**

# Median age of European countries in 1970 and 2013 and projections for 2040



Source: Eurostat population statistics, Population on 1 January: Structure indicators [demo\_pjanind], median age and Eurostat Population Projections, main scenario – projected demographic balances and indicators [proj\_13ndbims]

\* Data for Croatia, Cyprus, Iceland, Malta, and Slovenia missing for 1970

\*\* Germany (until 1990 former territory of the FRG)

\*\*\* Metropolitan France

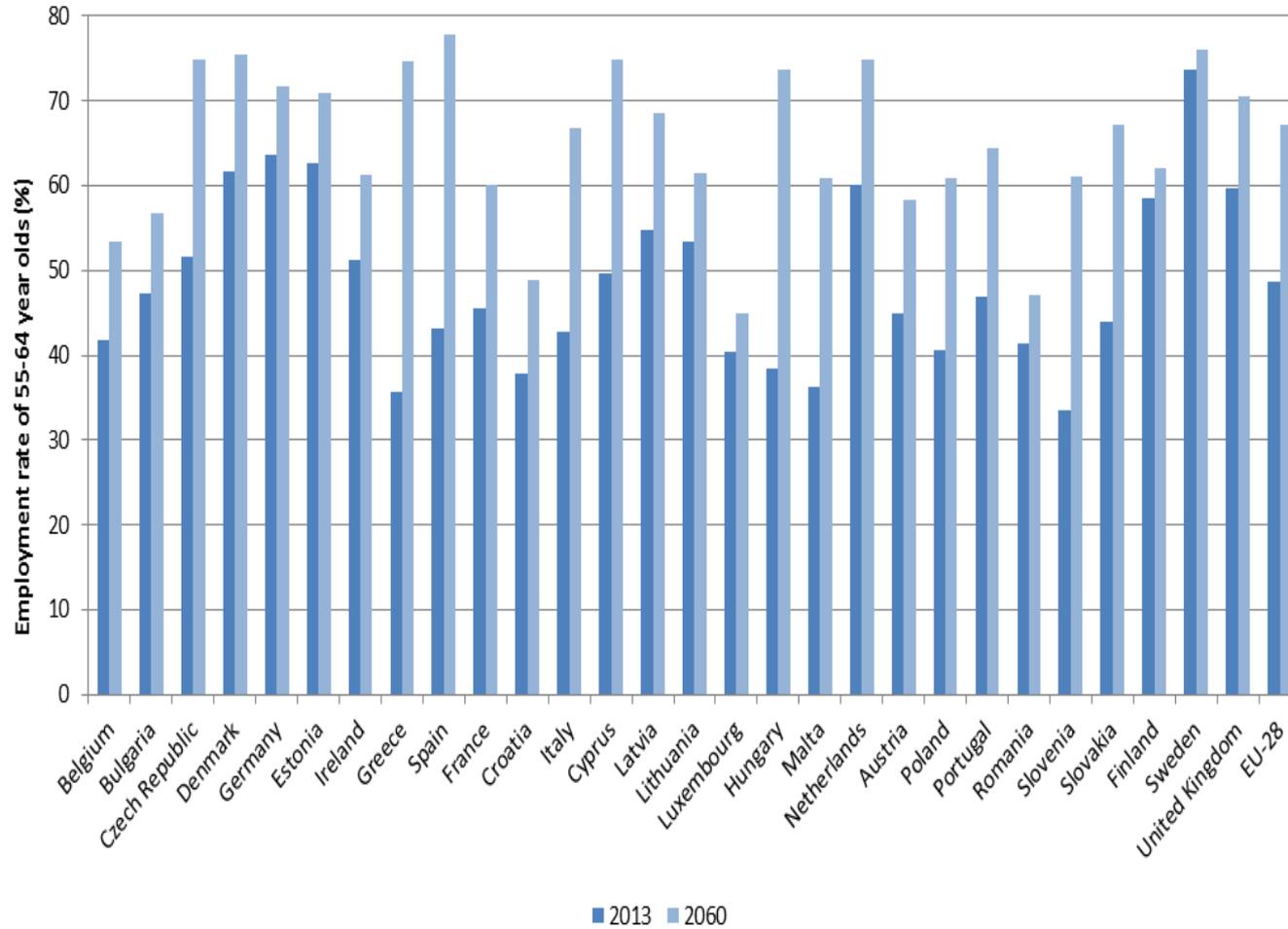
# Slowing and acceleration ageing processes by countries

1. Almost half of the European countries seem to be already 'over the peak' of the ageing process, which is starting to slow down. **Sweden, France, the UK, Luxembourg, Norway, Iceland, Denmark, the Netherlands, Belgium and Ireland** had a median age below EU average in 2013 and their median age is expected to increase less than on EU average until 2040. In addition, **Italy, Austria, Finland, and Switzerland** had a median age above EU average in 2013, but their median age is also expected to increase less than on EU average until 2040.

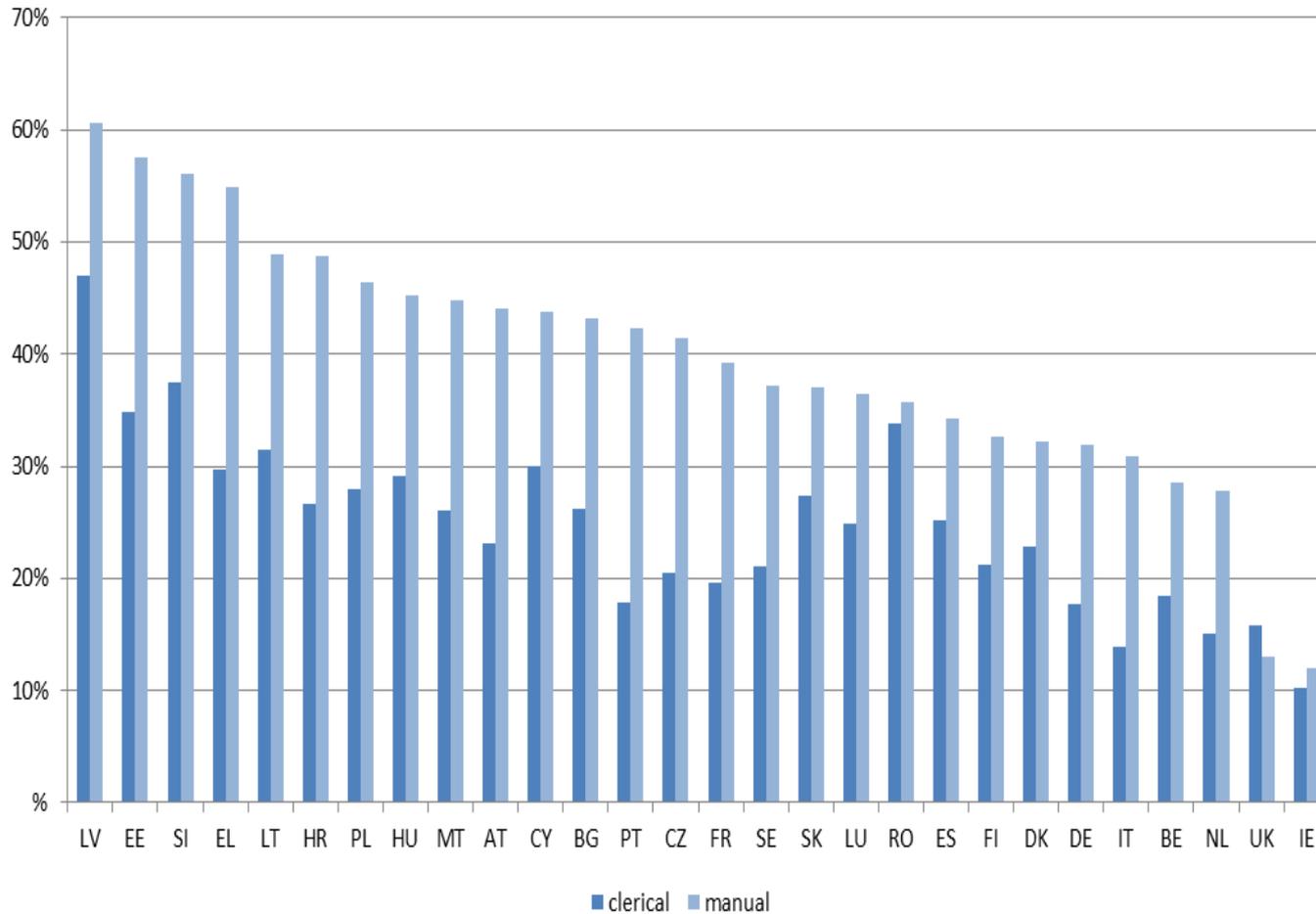
2. On the other hand, in a little more than half of the European countries, the ageing process is still expected to accelerate. **Malta, Romania, the Czech Republic, Poland, Slovakia, Estonia, Hungary, Spain and Cyprus** had a median age below average in 2013 but expected to increase more than on EU average until 2040, while **Bulgaria, Portugal, Greece, Slovenia, Latvia and Lithuania** already had a median age above the EU average in 2013, and it is also expected to increase more than on EU average until 2040.



# Employment rates of population aged 55-64 years, 2013 and 2060

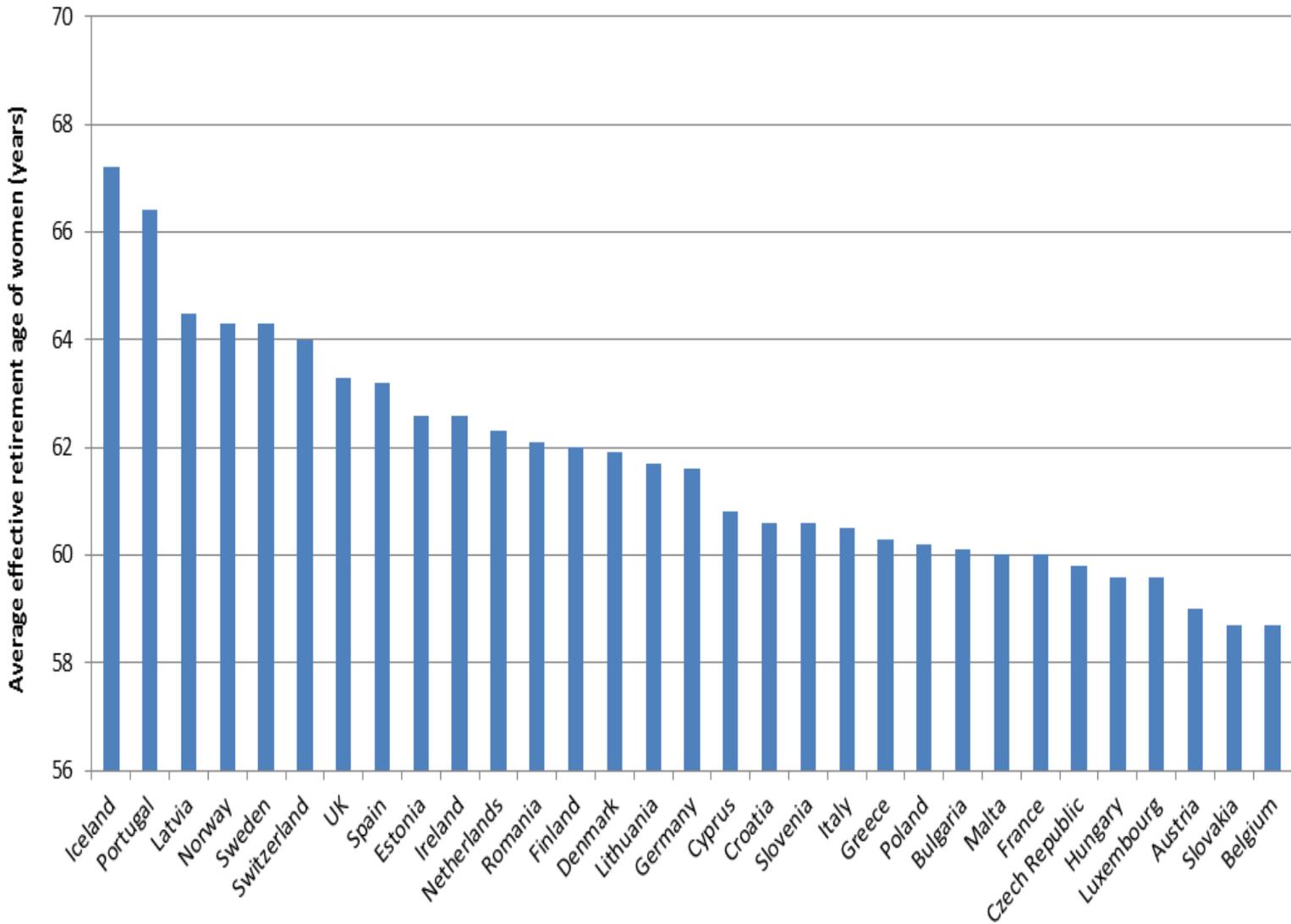


## Percentages of people 50+ who reported that their work negatively affects their health



Source: EWCS 2010, Q 67 "Does your work affect your health, or not?" (Other answer categories are: "no" and "yes, mainly positively")

# Effective retirement age of women in European countries in 2012



Source: OECD "Average effective age of retirement in 1970–2012 in OECD countries" (includes data for non-OECD countries as well)

# Healthy life years at 65, 2013

Gender	Age	Healthy life years	Remaining life expectancy
Male	65	8.5	17.9
Female	65	8.6	21.3

# Determinants influencing European countries' policies for OSH in the context of an ageing workforce

## Demographic and socio-economic trends

Population and workforce ageing, pension reforms, uncertainties

## Supranational influences

- International agreements, EU OSH and antidiscrimination legislation, EU strategies, policies, and funding programmes

## National determinants

- OSH traditions and social welfare model, legal and institutional frameworks, social dialogue, stakeholder cooperation

# Learning from proactive countries (1)

- Long-standing **national laws regulating employers' obligations regarding OSH and anti-discrimination**, which pre-date the adoption of relevant European legislation;
- **Holistic legal frameworks** that cover all workers equally, and which require **adapting the work environment to the needs and capacities of the individual worker**;
- **Mature institutional and policy frameworks for OSH**, including development of OSH policies and legislation **in coordination with other policy areas**

# Learning from proactive countries (2)

- **Enduring traditions of social dialogue**, with high trade-union density and/or high collective bargaining coverage; and
- **Well-established multidisciplinary platforms for stakeholder cooperation** to develop and implement policies, strategies, programmes, and activities related to demographic change and the OSH challenges of an ageing workforce.

# ***Impacts of policies on the health and safety of older workers***

According to surveys of self-reported workplace wellbeing and indicators of retirement-related behaviour of Europeans, older workers in countries with **comprehensive OSH and ageing workforce policy frameworks** in place are:

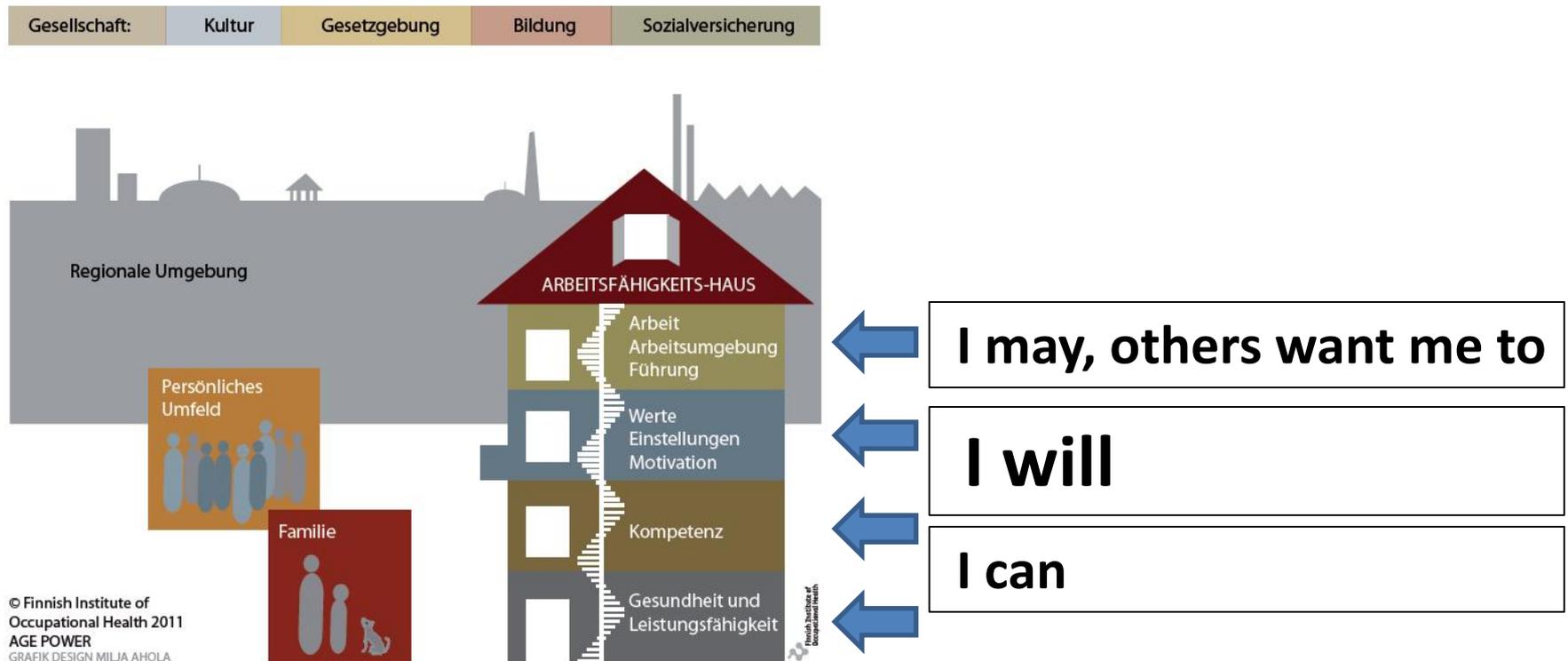
- Less likely to report negative effects of their work on their health;
- More likely to declare that they will be able to work after the age of 60; and
- More likely to continue working after they have reached official retirement age because of non-financial reasons, such as job satisfaction.

# Actions urgently needed for older workers

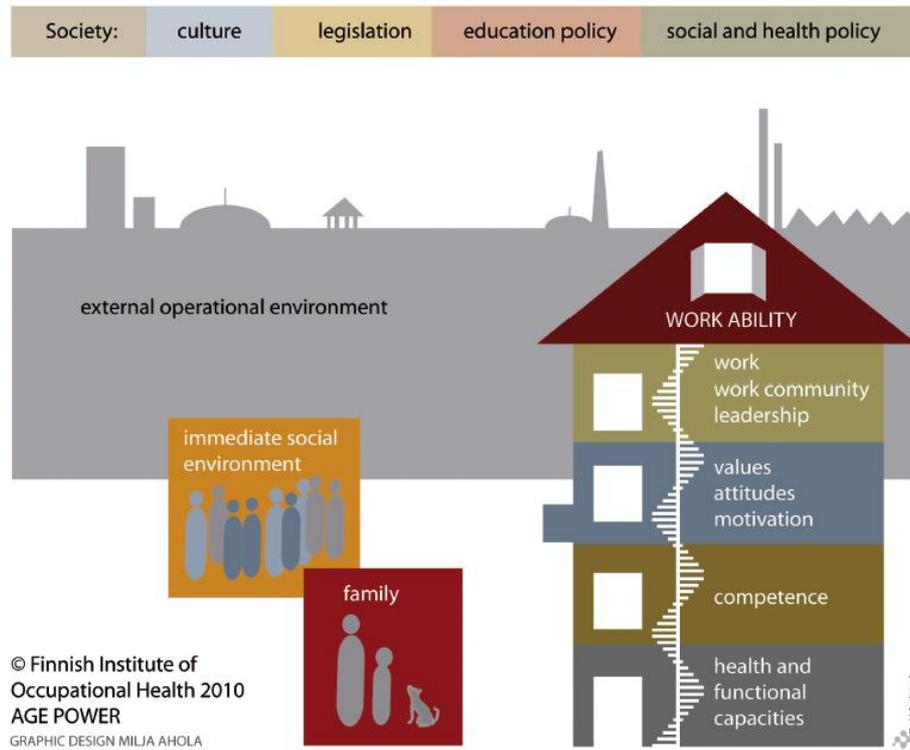
- **Working environment and management**
- Career and skills
- Health
- Work-life balance
- Transition between work and retirement
  
- **Actions should be prioritized**
- **Actions should be concrete**

# The actions should strengthen the key factors for longer and better worklife

## Arbeitsfähigkeit-Haus in seiner Umgebung



# Most urgent actions needed are those supporting the well-being of older workers



**Work well-being:**  
Respect  
Trust  
Fair treatment  
Support