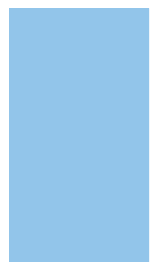




Bundesministerium  
für Familie, Senioren, Frauen  
und Jugend

**National Plan of Action**  
of the Federal Government to Implement  
**the Second United Nations Plan of  
Action on Ageing,**  
Madrid 2002,  
and the **UNECE-Regional  
Implementation Strategy,**  
Berlin 2002



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**Challenges and Opportunities of Ageing Societies**

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## **PREFACE**

Dear readers,

Demographic changes are transforming our country. Our population is declining in size and also ageing increasingly. Each generation since the 1970s has been around one third smaller than the generation that preceded it. At the same time, life expectancy is steadily rising. This situation is not unique to Germany, but applies to nearly all European states. Ageing societies can also be seen elsewhere in the world. For this reason, the Federal Government welcomes the United Nations International Plan of Action on Ageing. Along with the federal states and civil society, it is addressing the challenges of demographic change and understands them as an opportunity – to build modern structures, to redefine the concept of old age, to make sustained use of the wealth of experience of older persons for the benefit of society, and to provide the economy with new ideas designed to cater for the needs of older persons

Age and ageing are experienced differently by each individual: the forms of experiencing this process are varied and offer different options. They range from the numerous possibilities of engaging in community work of all kinds, life-long learning, passing on knowledge gained from experience and self-realisation in the form of a hobby. What matters is to be aware of this wealth and take advantage of it to serve the interests of older persons and of society as whole.

Policies catering for the needs of older persons range across the political spectrum and touch on society in all its aspects. They are an aspect of politics that set the course and play a decisive role in shaping society's growth, solidarity, prosperity and welfare systems. Solidarity between generations, whether as members of a family or in the wider social context, plays a decisive role in deciding the course a society adopts.

We understand politics for and with older persons as being part of integrated family policy. The family extends across the generations, and its members are all responsible for each other. By definition, this means solidarity between the generations, handing down abilities and skills called for in everyday life, as well as passing on the wealth of experience and knowledge from one generation to the next. Models of a society in which a number of generations lives together and accepts responsibility for each other must embrace these aspects of life – also in the extra-family context. It is for this reason that we call for people to network amongst themselves, voluntary commitment and involvement, as well as support and care of older persons that reflect their age and cultural needs. This is not to be understood as being necessary for reasons of humanity and on emotional grounds only, but because this understanding of the larger picture is the only way of using genuine opportunities and finding solutions to problems.

We espouse the Second Madrid International Plan of Action on Ageing 2002, and it is our express intention to support families, improve the quality of life of older persons and strengthen solidarity between generations and hence between all members of our society.

Yours sincerely,

Ursula von der Leyen  
Federal Minister of Family Affairs, Senior Citizens, Women and Youth

## **INTRODUCTION**

With this National Plan of Action (NAP), the Federal Republic of Germany is, by implementing the Second Madrid International Plan of Action on Ageing 2002, making its contribution to the endeavours of the United Nations to address the issues of demographic change and find positive answers to the challenges this presents.

The Regional Implementation Strategy (RIS) of the UNECE member states (United Nations Economic Commission for Europe) was adopted by the 2002 Ministerial Conference chaired by Germany and held in Berlin in 2002. The Federal Government welcomes its goals and objectives, namely to address the consequences and implications of demographic developments at an international level, to show what will be required to provide policies that cater for older persons and enable them to contribute to society, and to create the framework conditions necessary to ensure that ageing does not preclude a dignified role and involvement in society. The RIS also calls for the states taking part to compete with each other with a view to finding suitable strategies and framework conditions to accompany the ageing process. This forms the bases upon which the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth has taken stock of the senior citizens' policy of the Federal Republic of Germany that is presented in this NAP.

The "Statement of the Federal Government" on each of the 10 Commitments of the Regional Implementation Strategy fundamentally reflects policies for older persons in the Federal Republic of Germany that are already in place and looks ahead to further fields of activity and strategies.

As Germany has a federalist structure, support and care of the elderly are also the responsibility of the federal states and local authorities. This means that the "Statement of the Federal Government" also includes summaries of the "Statement of the Federal States" on each of the ten Commitments. It was only possible to cite individual examples of the wide range of policies and measures at the disposal of the individual federal states in this Plan of Action:

Civil society has been involved in development of the NAP to an extent not previously known. For example, an organisation promoted by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, was set up at the German National Association of Senior Citizens' Organisations (BAGSO) from July 2003 to December 2005 for the purpose of obtaining information from research institutes and organisations working in the field and holding conferences of experts on key topics. The findings served as the basis for a commission of experts to develop a fundamental "Statement on each commitment on the part of the civil society".

Individual aspects of the positions of the federal states and civil society contained in the NAP may deviate from those of the Federal Government.

All in all, this NAP reflects the activities, programmes and experiences of the Federal Republic of Germany concerning older persons and is furthermore a contribution to the endeavours of the United Nations to globally give demographic developments positive and productive directions.

## **COMMITMENT I**

### **TO MAINSTREAM AGEING IN ALL POLICY FIELDS WITH THE AIM OF BRINGING SOCIETIES AND ECONOMIES INTO HARMONY WITH DEMOGRAPHIC CHANGE TO ACHIEVE A SOCIETY FOR ALL AGES**

1. *In line with the goals, objectives and commitments of the Madrid International Plan of Action on Ageing 2002, the overarching aim of this Regional Implementation Strategy (RIS) for the UNECE region is to provide a framework of commitments to support member states in their endeavours to respond adequately to the challenges and opportunities of population ageing in order to achieve a society for all ages.*
2. *Our global commitment is to mainstream ageing concerns in all policy fields with the aim of securing gender-sensitive and evidence-based co-ordinated and integrated policies to bring societies and economies into harmony with demographic change. This applies equally to the health, economic, labour market, social protection and education sectors.*
3. *To be effective, policies in response to population ageing should have a holistic approach and be pursued in a co-ordinated way over a wide range of policy areas. Account must be taken of the multifaceted and intertwined challenges and opportunities arising from population ageing in order to devise a framework from which effective policy responses can flow. The approach also rests on the premise that the right policies in the various domains – if properly co-ordinated and consistently applied – would be able to successfully meet the challenges arising from these demographic changes and release the unused potential embedded in some population groups, in particular older persons.*
4. *This strategy will facilitate the development of appropriate policy tools to cope with present and future ageing challenges by collecting and disseminating the best knowledge and evidence-based practices available in the region about adequate policy responses to ageing. The strategy must reflect the variety of social, political, economic and demographic situations within the UNECE region.*
5. *All policies should take into account the changes that occur in the situation of a person throughout life. They should be designed to facilitate participation in the development of society and counteract social exclusion as a result of decreased functional ability due to factors related to ageing and disability.*
6. *Demographic changes are challenging the tenets of social security arrangements in the UNECE region. For example, a smaller working population will have to support in the future the financial needs of a growing older population. This will affect the intergenerational transfer of resources in society as a whole. At the same time, demographic change will increasingly cause transfers of wealth from older to younger generations within the family. Consequently, policies should be designed to promote intergenerational solidarity, *inter alia* through innovative action to meet the financial challenges and promote dialogue among generations.*
7. *The relationship between different groups of older persons also needs to be addressed. Neighbourhood and other community action play an important role in this*

*respect, and non-governmental organisations particularly of older persons are an important factor in fostering such activities together with public authorities where appropriate. Intragenerational solidarity also needs to take into consideration that the distribution of societal resources would always tend to favour those groups that are most able to successfully pursue/present their claims.*

8. *The promotion and protection of all human rights and fundamental freedoms is essential for the creation of an inclusive society for all ages in which older persons participate fully and without discrimination and on the basis of equality. Combating discrimination based on age and promoting the dignity of older persons is fundamental to ensuring the respect that older persons deserve. Promotion and protection of all human rights and fundamental freedoms is important in order to achieve a society for all ages. In this, the reciprocal relationship between and among generations must be nurtured, emphasized and encouraged through a comprehensive and effective dialogue.*

9. *Thus, the following set of interrelated commitments is intended to assist member states to focus on the main policy priorities in relation to population ageing. We want to ensure the full integration and participation of older persons in society and implement the strategy in the closest possible partnership with the civil society, particularly older persons, organisations and the private sector.*



## *Mainstreaming the Dimension of Ageing*

### **1. Statement of the Federal Government**

It is the conviction of the Federal Government that an ageing population is a **development affecting many countries**. For this reason, the Federal Government is playing an active and committed role in implementing the Second Madrid International Plan of Action on Ageing 2002 and the Regional Implementation Strategy of UNECE held in Berlin in 2002 and is actively engaged in the process of analysing the global situation in **conjunction with the other UNECE Member States and the General Assembly of the United Nations**. The Federal Government wishes to thank the United Nations for the increasing and profound interest it is showing in the issue and concerns of ageing societies.

The Federal Republic of Germany is contributing to implementing this strategy in the form of this **National Plan of Action. The Plan takes stock of Germany's policies on senior citizens' in terms of the 10 Commitments set out in the Regional Implementation Strategy of UNECE and involves the federal states and civil society**. The Commitments are understood to be a welcome orientation even if they also reflect national differences.

The Federal Republic of Germany welcomes the opportunities for exchanging information and ideas on measures and policies designed to meet the challenges and opportunities of **demographic development that are set out in the evaluation process to implement the International Plan of Action and the Regional Implementation Strategy**.

It intends to contribute to strengthening awareness of the opportunities that demographic change offers, not only in Germany but also **globally**, i.e. elsewhere in Europe and in the wider world:

As the WHO proclaimed, "Years have been added to life; now we must add life to years", **fundamental rethinking on present approaches to an ageing society is needed**.

The Federal Government engages in numerous activities and campaigns intended to further the exchanges on senior citizens' policies and demographic issues at both European and international levels.

With the 2005 **Green Paper** of the EU Commission on "Confronting demographic change: a new solidarity between the generations" and the Commission's communication dated October 2006 "The demographic future of Europe – from challenge to opportunity", the **EU Commission** took action welcomed by the Federal Government to outline the main points regarding a conscious and strategic approach to the demographic ageing process taking place in the member states of the EU.

During its term as President of the Council of the European Union in the first six months of 2007, the Federal Government drew particular attention to the **economic opportunities that the ageing process in society** could provide. As consumers of products and services, older persons can make an important contribution to economic growth and development. This presupposes that the economy is made aware of the needs of older persons and offers corresponding products and services. In response to a **campaign of the Federal Government**, the EU Council adopted a resolution "**Opportunities and challenges of demographic change in Europe: contribution of older persons to economic and social development**".

**Assistance for and care of the elderly** are primarily the **responsibility of the federal states** in the Federal Republic of Germany; the individual federal states face differing challenges in respect of demographic factors. Here the Federal Government exercises its powers to make proposals. It also has statutory responsibilities, e.g. in the areas of legislation on nursing care and care of the elderly and social security/ social protection, and it plays a decisive role in ensuring that in particular the needs of older persons are met.

The Federal Government concurs with the statement contained in Commitment 1 that **societies and economies need to be brought into harmony with demographic change**. It has **taken up the challenge posed by demographic change**, which it conceives **as an opportunity** to develop a **new understanding of old age and ageing**, an opportunity to **provide economies with new impetus** and a chance to make sustained use of the **potential older persons** can offer society.

As these challenges are met, older persons will play a key role as 'their own advocates'. **Any society that disregards their experience, knowledge and purchasing power does so at its peril.**

Older persons today have a reservoir of resources ranging from health, education and training, and financial strengths, combined with a wide range of interests and skills and experience; they are also highly mobile and conceive age and ageing as positive and a reservoir from which to draw strength.

**They want to contribute – on their terms and on the basis of their possibilities.**

The majority is not in any way interested in withdrawing from significant aspects of society and social life. What matters is to create an increasing number of **opportunities and tools**, to listen to what they say and accept the advice they give.

When looked at in economic terms, the fundamental problem of demographic change is that, despite a decreasing number of persons in gainful employment, sufficient goods and services will still be needed to ensure that **the population as a whole has an acceptable standard of living**. Here the Federal Republic of Germany concurs with the statements contained in Commitment I.

It is to this end that the necessary resources are to be generated. Reforming social security systems are solutions of a limited nature only. Rethinking in terms of economic, fiscal and, above all, employment policy are required.

Hence, a **coherent policy mix** will be required in order to integrate the different areas of social and economic policies. From this it follows that the development on the labour market in the decades ahead will be a central strategic variable in policies to provide security in old age.

Given this background, **policies on senior citizens' are ones that are central to the political process as a whole**. It is a matter of linking the needs of today's generation with the opportunities subsequent generations have in life in such a way that **all have the opportunity to participate in a common future**. **Generation fairness and intergenerational solidarity** are the tenets of **sustained development of societies**.

The Federal Republic of Germany concurs with Commitment I here.

## **2. Measures of the Federal Government**

**The senior citizens' policy of the Federal Government has the following objectives:**

- Sustained adjustment of social security systems to reflect an ageing population
- Increasing the numbers of older persons in employment
- Creating a positive image of age and ageing in the eyes of the public
- Strengthening the ability of older persons to live an independent life and play an active part in all social processes, including in the form of voluntary and honorary activities
- Supporting senior citizens' organisations
- Strengthening intergenerational solidarity and responsibility
- Retaining and increasing training and education opportunities for older persons
- Passing legislation on protection and assistance in old age
- Promoting high-quality assistance and nursing care in old age
- Analysing the effects of demographic change, inter alia in terms of better use of the potential that older persons can contribute
- Encouraging the perception of older persons as consumers
- Promoting age as an economic factor
- Taking the specific needs of older migrants into consideration
- Taking the specific needs of older persons with disabilities into consideration
- Supporting European and international co-operation
- Differentiating policies for older persons according to gender-specific needs and experiences
- Paying attention to the gender-mainstreaming approach in all projects.

Different **state framework conditions** create the prerequisites for all aspects of the third stage of life - activeness in old age, restricted lifestyle in old age due to health factors and living conditions in very old age – a stage to be lived with self-determination, satisfaction and dignity. This includes, for example, promoting and integrating **voluntary and honorary activities, social security in old age in the case of sickness or need for nursing care**, and **training in geriatric care** that is standard throughout the Federal Republic of Germany. This NAP presents and explains the policies and projects of the Federal Government with reference to the individual issues addressed by the 10 Commitments.

### **3. Statement of the Federal States**

The individual federal states are affected by demographic change and its consequences in different ways. For example the birth rate in the eastern Germany was even lower than that in the west of the Federal Republic of Germany in past fifteen years. In addition, the trend for young persons, in particular young women, to move away from eastern Germany is still strong. In some rural parts of eastern Germany there are now only 80 women for every 100 men in the 18-29 age group. This will – except in a few large population centres – lead to a decline in the population in eastern Germany.

However, not only the new federal states are affected by the structural changes in settlement. Other structurally weak regions such as the Ruhr area, the Saarland, the south and south-east of Lower Saxony and north Bavaria are also seeing their populations shrink.

Just as at the national level, the federal states also conceive senior citizens' policy as an inter-ministerial matter, to be put into practice in the form of close exchange and co-operation between the organisations representing the interests of older persons, welfare and social assistance associations, churches, educational institutions and other representatives of civil society.

For example the State Parliament of Saxony-Anhalt passed legislation for the Federal State Government to develop general policy by the end of 2007 on senior citizens' entitled 'The future of assistance for the elderly up to 2020' that is to be discussed and coordinated not only with all departments of the Federal State Government but also with the Landespflegeausschuss (federal state's nursing care committee), the Landessenorenvertretung (group for representation of senior citizens in state government), social welfare associations, private organisations and organisations covering costs. The information obtained and the conclusions drawn are to be operationalised and presented in the form of different plans of action and policy guidelines. The government of the city-state of Berlin, represented by its House of Representatives, published a report in 2005 that describes the objectives, key issues and framework conditions of senior citizens' policy in Berlin "Our policy objectives for our senior citizens – Berlin guiding principles 2005" ([www.Berlin.de](http://www.Berlin.de)).

These activities and initiatives on the part of the federal states make a significant contribution to shaping and promoting a modern and realistic concept of ageing that reflects life of older persons in all its aspects and forms and promotes intergenerational solidarity and solidarity between members of the older generation.

In some cases the federal state governments have set up special institutions and organisations designed to cater for the interests of older women and men in various aspects of policy-making. 'The elderly in Rhineland-Palatinate', an office that is part the federal state's Ministry of Social Services and coordinates senior citizens' policies is named as an example.

Senior citizens' policy in most federal states takes the form of a regional plan of action on ageing.

Local authorities are also aware of the challenges posed by demographic change, as the example of the 2005 survey of local councils entitled "Local authorities and regions facing demographic change" carried out by the Bertelsmann Foundation has demonstrated. When questioned, mayors stated they saw civic commitment and housing designed to meet the needs of the elderly as being among the most important areas where action was required. Given the developments described above, these issues play a greater role in the new federal states. Large towns and cities have already taken more steps to take demographic change into account when shaping their senior citizens' policy than have small local authorities.

A survey carried out by the Bertelsmann Foundation also shows that the local authorities need more room for manoeuvre for their own activities. Under the local authority statutes enacted by the federal state in question the local authorities are required to discharge all local authority tasks independently and on their own responsibility. However, this does not mean that the local authorities have to pay for provision of all such services themselves. The Federal Government and the federal states are required to provide adequate contributions to financing future-orientated senior citizens' policy at local authority level.

The local authorities can offer numerous best-practice examples of a successful way of dealing with demographic challenges. Examples include integrated or holistic urban development concepts in local municipalities with shrinking populations such as those in Hoyerswerda or Frankfurt an der Oder or programmes to enable the

elderly to live in their own homes and manage their own lives, to strengthen the self-organisation of older persons in towns (currently) stagnating such as Bielefeld and Arnsberg.

#### **4. Statement on the Part of Civil Society**

**Although public opinion often perceives an ageing society as a burden, demographic change actually means multifaceted and interrelated challenges *and* opportunities that call for senior citizens to make their own productive contribution.**

Before the potential of older persons can be recognised and used positively, a realistic definition of what constitutes age is called for. This needs to take the differing abilities, interests and needs of older persons into consideration. This is not only a political issue, the media also have a responsibility to report accurately on the wide variety of contributions made by older persons. The German National Association of Senior Citizens' Organisations (BAGSO) and its 89 member organisations make their contributions by means of the German Senior Citizens' Congresses, and through events and publications to help society become aware of the potential of the older generations.

Incorporation of assistance for the elderly in the Social Security Code XII (or originally in the Federal Social Welfare Act) is one of the factors that in the past has contributed to senior citizens' policy in the Federal Republic of Germany primarily having been understood as a social policy issue. Hence, the active role played by older persons and the contribution needs to be given greater expression and promotion by national legislation.

The political actors - particularly those at local authority level – must also recognise that policies catering for the needs of older persons have to be integrated ones. In other words, senior citizens' policy is as much as a part of urban planning policy as it is of economic and social policies.

There are examples of good practice in the UNECE region that should be concentrated and implemented in line with Commitment 4. It goes without saying that the economic, social and cultural features typical of the individual member states are to be taken into consideration when examining the question of transferability of these examples.

When looking at the question of combating discrimination and segregation on grounds of age. It needs to be stated categorically that treatment needed on medical grounds may not be denied to any individual on account of his or her age. Instead health services should be provided in response to specific needs and irrespective of other criteria such as age, ethnic background or gender. Action is also needed to counteract concealed rationing of medical and nursing care of older persons.

Our society also has other forms of isolation and discrimination on account of age. This is particularly to be found in the world of work. Another example is the policy employed by banks and insurance companies when loans or insurance are taken out. Even activities of a voluntary or honorary nature have both overt and covert age barriers. In order to achieve a society for all ages, age-based disadvantages and privileges need to be called into question and, where necessary, eliminated.

## **COMMITMENT II**

### **TO ENSURE FULL INTEGRATION AND PARTICIPATION OF OLDER PERSONS IN SOCIETY**

10. *Existing international instruments reaffirm the principle that no individual should be denied the opportunity to participate in society and to benefit from economic and social developments. Older persons are at a greater risk of being denied that opportunity and that is why it is essential to combat all forms of discrimination and ensure the full enjoyment of all human rights and fundamental freedoms. A combination of factors, including geographical mobility, urbanisation, economic development and age-based inequalities in access to social institutions and the labour force have resulted in age segregation and hamper the successful integration of older persons in society. Large numbers of older persons in the countries of southern and eastern Europe who live in rural and remote areas without support from their families continue to witness specific problems, especially in terms of access to infrastructure and services. Among the means to combat social isolation and marginalization, political, economic, civic and cultural participation play an important role. It also enhances the quality of life of older persons and contributes to the functioning of the communities and society as a whole.*

11. *Older persons play crucial roles in families and the community, although their contributions are often not sufficiently recognised, and the social capital that they possess very often remains under-utilised. The knowledge older people have gained from life-long experience is an important asset for social and economic development. Older persons make many valuable contributions that are not measured in economic terms, including care for family members, productive subsistence work, household maintenance and voluntary activities in the community. The role of older women in these unpaid activities is particularly important and should be better recognised.*

12. *A positive image of ageing and older persons, particularly of older women, in society is of crucial importance in ensuring the full integration and participation of older persons. Images of older persons as active participants must be enhanced. In many countries of the region successive cohorts reaching advanced age are better educated, more financially independent and in better health. In the countries with economies in transition the economic and social conditions of older persons remain extremely difficult. However, in recent years in a number of these countries the developments achieved are encouraging in terms of improvements in the overall situation. Notwithstanding that, special efforts need to be undertaken by all parties concerned to promote a positive image of ageing and older persons in these countries.*

13. *The following policy objectives should be met as part of this commitment:*

*Further enhance the social, economic, political and cultural participation of older persons*

14. *The actions to be undertaken as part of this objective should be based on the understanding that older persons' contribution to society extends beyond their economic activities, and should recognise, encourage and support their contribution to families, communities and society as a whole. This could be achieved through*

*media campaigns and school curricula that highlight the contribution of older persons to society. Families also play an important role in promoting a better understanding of the contributions made by older persons. Older persons should also be recognised as a significant consumer group with shared and specific needs, interests, and preferences. Governments, service providers and civil society should take into account the views of older persons on the design of products and delivery of services. Participation in social, economic, political, and cultural activities, is not only a valuable contribution to society, but also fosters a positive image of older persons and is important in combating social isolation; it thus needs to be facilitated and encouraged in all its forms by all social actors concerned. Political participation, in particular, plays an important role in empowering older persons and should be emphasised. Barriers to older persons, particularly women, reaching decision-making positions at all levels should be removed. Governments and other actors should make every effort to mainstream the needs and concerns of older persons in the decision-making processes at all levels and in all areas. Governments should encourage the establishment of organisations of and mechanisms for older persons at appropriate levels to represent older persons in decision-making through adequate measures.*

15. *Older persons are the best advocates of their own cause. As recommended by the Vienna International Plan of Action on Ageing, a number of countries have set up national commissions of Older Persons aimed at ensuring a dynamic and co-ordinated national response to the phenomenon of ageing by, amongst others, protecting the rights of older persons, promoting their well-being, and by evaluating policies, programmes and services for older persons. These national commissions have proved to be an excellent platform to promote the contribution of older persons to decision-making processes.*

16. *Concerted and intensified efforts are needed to improve the housing and living environment of older persons in rural areas, especially in many economies in transition. Improvement of living conditions and infrastructure in rural areas is particularly important to alleviate marginalization of older people. Policies should be developed and implemented in order to provide incentives and subsidies for housing, utility and sanitation services, and encourage age-friendly solutions to provide accessible and affordable transportation for older people, in particular in rural and remote areas.*

*Promote the integration of older persons by encouraging their active involvement in the community and by fostering intergenerational relations*

17. *Involvement of older persons in local communities contributes to their quality of life, as well as to the functioning of the community. Governments, in consultation with local authorities, non-governmental organizations (NGOs) and representatives of older persons should, therefore, encourage the maintenance, or development of age integrated communities through a broad-based, integrated approach, which targets in a holistic manner policy areas such as community development, housing, environment, transport, health, social care, education, work, and leisure. Within these communities, the actors concerned should be encouraged to make facilities available to persons of all ages, and create incentives for people of different generations with similar interests to meet, interact and share experiences. The establishment or further development of centres of volunteer activity should be promoted, so that*

*young and older persons are able to interact and help each other. Local authorities should be encouraged to ensure that transport and other infrastructure services are safe, reliable, accessible and user-friendly. Programmes should be aimed at rural and remote areas, where older persons might find themselves isolated, without access to their immediate families or to social and other types of infrastructure.*

*Promote a positive image of ageing*

18. *The actions to achieve this objective should include media campaigns, as well as targeted incentives aimed at employers, local communities and other social actors. The role of media in promoting a positive image of ageing, including older persons with disabilities and in highlighting their contribution to society is crucial. Governments in consultation with local authorities and NGOs should work with the mass media to ensure that this is done in an appropriate and efficient way. Special efforts should be made to make employers in all sectors more aware of the contributions that older persons can make and the advantages of a diverse workforce. Any disincentives for the continued participation of older workers in the labour force should be removed. Action should also be undertaken by governments in consultation with local authorities and NGOs at the community level to facilitate dialogue and a better understanding between the generations. In that respect, all actions aimed at promoting the integration of older persons can contribute to promoting a positive image of ageing. All social actors need to recognise that older persons are a heterogeneous group, whose members have to be considered as a very important resource irrespective of differences in background, their economic activities, or of their need of care and support. Accordingly, measures need to be taken to promote a differentiated and variegated view of the life of older people, both men and women, which better reflects reality.*

19. *The promotion of a positive, active and developmentally-oriented view of ageing may well result from action by older persons themselves. It is important to encourage older persons to make the general public more aware of the positive aspects of ageing by developing realistic portrayals of old age. The mass media, with the assistance of older persons, could play an important role in highlighting the wisdom, strengths, contributions and resourcefulness of older persons.*



## *Integration and Participation*

### 1. Statement of the Federal Government

The Federal Government welcomes the **comprehensive social participation** of older persons called for in Commitment II and for their **integration without prejudice into the social and political decisions and processes** that take place in their direct surroundings or at the national and international level.

In the Federal Republic of Germany, the **responsibility for assistance and employment for the elderly**, direct aid programmes and legal regulations to promote active ageing lie within the jurisdiction of the **state and local governments**. Social insurance carriers, professional associations and interest groups as well as businesses and service providers also make a contribution.

Within the scope of its jurisdiction, the Federal Government promotes the social participation of older persons via research projects, model programmes, conferences, training courses, and public relations work as well as by supporting nationally active senior citizens' organisations.

In addition, the Federal Government shares the view expressed in Commitment II that **older persons are a heterogeneous group**, the members of which represent a **substantial potential** for society in a socio-cultural and economic sense.

A multifaceted **image of older persons that reflects their diversity and wealth of lifestyles** should be increasingly projected in society. The life courses of people develop differently. The interdisciplinary expert commission appointed in July 2007 to prepare for the Sixth National Report on the Situation of Older Persons will also provide further impetus regarding the subject of the "social images of old age".

When correctly understood and encouraged, this diversity provides starting points for utilising the potentials of older persons. This involves, for example, **recognising the value of the experience and knowledge** of older persons and **fostering citizens' social commitment and involvement**. Realising the potentials of age seems to be a key element in solving the **future tasks** of our societies. This also means providing opportunities not only for co-organisation, but also for co-determination in old age.

With targeted publicity campaigns, the Federal Government is complying with the calls of Commitment II, to promote a **positive image of ageing and age**. The Federal Government has identified increased perception of the **potentials of age** and the need for solidarity action in a **society for all ages** as the goals and priorities of its **public relations work**.

It is therefore engaging businesses and economic institutions in a dialogue about how **older persons as consumers** of products and services can be served in a more user-friendly, practical and reliable manner as an important target group.

In the Federal Republic of Germany, older persons are highly active in society; they contribute to the common good by doing volunteer work and through voluntary involvement in the community. An estimated 39 percent of all 54- to 64-year-olds, 32 percent of all 65- to 74-year-olds, and 19 percent of all over-75-year-olds in Germany are active as volunteers. Moreover, they are the fastest-growing group in volunteer services. Older persons are represented in all areas of involvement; they frequently support the younger generation, thereby fostering **intergenerational solidarity** – as is called for in the Regional Implementation Strategy of the UNECE and the Second International Action Plan on Ageing of the United Nations. So that older persons can become more actively involved, gender-sensitive changes are still

needed in the areas of age segregation, life-long learning, and concepts concerning older persons and their potentials as well as in preventive health care.

Older persons also exhibit the highest values with regard to **political interest**. However, upon reaching retirement age, their active involvement in parties and parliaments decreases sharply. Special groups for older persons have therefore been established within the parties; senior citizens' groups within the political parties provide a forum for and endeavour to protect the interests of older persons within the parties and in society.

As self-initiated and self-organised coalitions of older persons, **senior citizens' organisations** act at many levels of society to represent the needs of older people and to provide **mutual support services and community services**. The spectrum of these services, for example, cultural events, learning and education, sports and exercise, nutrition and health promotion, memory training, housing and living environment design, trade union and professional organisations, visitation and support services, hospice work, home councils, church services and services for older migrants and disabled elderly persons. In line with Commitment II, the Federal Government welcomes and supports these activities.

A changing society requires new **forms of housing** for the elderly. Innovative construction designs for homes for the elderly and disabled have provided the initial spark in this direction. Through the model program "Self-determined Living in Old Age" conducted from 1998 to 2002, the Federal Government has already shown various ways in which it can be possible to live a long life in one's own home and familiar surroundings. Even older persons with disabilities may be capable (Section 17 of Social Security Code IX) of making their own decisions with regard to life planning issues, e.g., their living situation.

**Nursing care insurance benefits** (Social Security Code XI) are intended to help those in need of long-term care to lead an independent and self-determined life in spite of their need for assistance. Accordingly, persons receiving long-term care benefits have a wide range of different forms of assistance to choose from. The policy of giving priority to outpatient care over hospitalisation is firmly established in the statutes regulating long-term care insurance; this policy accommodates in particular the great desire of many persons in need of nursing care to receive individualised nursing care in their familiar home environment. The upcoming health care reform contains further instruments and regulations (concerning the establishment of nursing care support networks that are close to home, individual entitlement to care companions, "pooling" of benefits for multiple beneficiaries, etc.) that not only comply with the concept of self-determined life, but also serve to promote new forms of housing.

In the future, "**multi-generation houses**" that serve as meeting points between young and old will **address the needs of all generations and provide close family services** throughout all counties and boroughs of the Federal Republic of Germany. These households build **assistance structures in an extra-family context** and foster dependable relationships parallel to the traditional form of living together in a regular household or family. They are places in which the **principle of the extended family** can be experienced **in a modern form**. They are part of the incentives for people of different generations to meet, establish relationships, and share experiences that are called for in Commitment II.

The Federal Government is aware of the special **life circumstances of elderly immigrant men and women**. In particular, it has identified the need to break down the existing barriers between them and social organisations and institutions, especially those providing assistance to the elderly, and to prevent the double

discrimination of the women. The Federal Government encourages **culturally sensitive nursing care** and offers referring to **nursing care homes** that are tailored to the specific cultural characteristics of older persons of foreign origin.

The Federal Government shares the assessment in Commitment II that **rural regions** are especially affected by the **structural changes** associated with the process of demographic change. As the younger generation moves away, the proportion of older persons living in rural areas is rising. An increasing need to compensate for limitations in infrastructure and supply chains is becoming evident in the Federal Republic of Germany. Mobile assistance services and Internet use are becoming increasingly important.

For older persons, participation also means not being excluded from the **advantages of utilising modern new communication media**. The Federal Government therefore promotes the utilisation of these media by older persons.

**Policies for disabled persons** have already made important steps in this direction. The Book Nine of the German Social Security Code (SGB IX) was introduced in 2001, providing a modern, efficient system for integration of disabled persons; it encompasses equal opportunity, social integration, and the opening of job perspectives for disabled persons. The objective was not only making policies for disabled persons but, above all, to make policies with them. Associations, organisations and self-help groups for disabled persons were therefore actively included in the policy-making process right from the beginning. Furthermore, the Equality for Disabled Persons Act (BGG) has established for all persons a generally binding definition of barrier-free access in terms of design requirements. The Federal Government provides barrier-free access to its Internet services and communication with federal authorities, thus improving the chances of elderly persons to participate in political life.

The **General Equal Treatment Act (AGG)**, which came into force in August, ensures older persons wide-ranging **protection from unjust unequal treatment**. The AGG applies, for example, in labour law and mass transactions as well as to insurance policies governed by civil law.

## **2. Measures of the Federal Government**

### **Public Relations by the Federal Government**

An intensive campaign for a positive image of ageing is required.

The Federal Government uses various public relations instruments to raise the social awareness of subjects and issues relating to policies for older persons.

Information regarding the range of assistance programmes, promotional measures and current research results is disseminated

- through the Internet offerings of the various Federal Ministries;
- on the website of the Ministry of Family Affairs, Senior Citizens, Women and Youth ([www.bmfsfj.de](http://www.bmfsfj.de));
- in print publications such as brochures, reports, leaflets, scientific publication journals, congress proceedings, national competitions, etc.;
- through the Citizens Hotline of the Federal Minister for Family Affairs, Senior Citizens, Women and Youth (Tel. 01801-90 70 50), where callers receive information on central policy issues of concern to older persons, for example, institutionalisation and the laws regarding the rights of institutionalised persons.

## **Ageing Research**

Consideration of the results of research is a major work focus, and this is one of the pillars of policy-making for the elderly. This includes research on various subjects and in various areas, which is repeatedly described in the present report with regard to the diverse contents of the ten commitments.

## **German Centre of Gerontology (DZA)**

The Berlin-based German Centre of Gerontology (DZA) was established in 1973; according to its constitution, the DZA has the legal mandate to collect, expand and disseminate information about the life circumstances and needs of ageing and older persons. The German Centre of Gerontology is financed with funds from the Ministry of Family Affairs, Senior Citizens, Women and Youth.

In order to fulfil its mandate, the DZA must engage in a continuous exchange of information with other institutions active in this area, including assistance and employment agencies for the elderly, administrative bodies, and representatives from the fields of gerontology/geriatrics, etc.

Documentation is a central focus of its work: In 1995, the German Centre of Gerontology made its bibliographic database GeroLit available to the public via the German Institute for Medical Documentation and Information (DIMDI). Parallel to this, a statistics database was developed. By using the information services developed by the German Centre of Gerontology, professionals and the general public can obtain information on gerontology issues. The German Centre of Gerontology has the largest social gerontology library in Western Europe.

The combination of applied research and documentation – which only the DZA practices in this form in Germany – is the foundation of the German Centre of Gerontology's political advisory services.

The German Centre of Gerontology combines project-related practice and teaching in its research work. The Coordinating Office for Nursing Care ("*Leitstelle Altenpflege*"), is part of the German Centre of Gerontology; the Coordinating Office is the agency that puts the Charter of Rights for People in Need of Nursing Care and Assistance (see p. 98) into practice; the Charter was developed by the "Nursing Care Round Table" (see p. 98), a team of nursing care experts from all areas relating to nursing care and work with older persons in Germany. The Coordinating Office mediates exchanges between professionals regarding questions relating to nursing care and quality management in institutions and coordinates information events and campaigns relating to the Charter of Rights for People in Need of Nursing Care and Assistance. Their work takes the steps needed to put the Charter into actual practice. The offices of the commissions which prepare the respective National Reports on the Situation of Older Persons, which is made up of multidisciplinary teams of experts, are also located at the German Centre of Gerontology; work on the "National Reports on the Situation of Older Persons" also takes place there. Thus, the German Centre of Gerontology always leads the current dialogue with practice.

## **National Reports on the Situation of Older Persons**

The National Reports on the Situation of Older Persons, which are prepared each legislative period, provide information on the situation of older persons in Germany. These scientific reports also contain concrete proposals on how to better utilise the tremendous potentials of older persons in the economy, workforce and society. They are prepared by Expert Commissions made up of independent experts from various academic fields; each report is written by a different team of experts, the members of which are selected in accordance with the specific theme of the report.

### **The 5th Report on the Situation of Older Persons – "The Potentials of Old Age"**

The 5th Report on the Situation of Older Persons, published in 2005, focuses on the strengths, experience and knowledge of the older generation. It impressively documents that the older generation has a substantial wealth of work-related knowledge and experience, a higher level of education and qualification than the younger generation, and a good income. The 5th Report also shows that many senior citizens in Germany today are not only willing to support their families and direct private environment, but are also very much willing to engage in volunteer work for their communities. By holding a series of conferences on the focal points "Gainful Employment of Older Persons" and "The Economic Potential of Older Persons", and by hosting workshops on the subject of "goods and services", the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth has made known the results of the 5th report and has made them available to the "multipliers" in politics, the economy and in associations.

### **The 6th Report on the Situation of Older Persons – "Images and Representations of Old Age in Society"**

Successful management of changes associated with demographic shifts can only be achieved if the necessary solutions reflect a new image of old age. The 6th Report on the Situation of Older Persons, which is to be presented in 2010, will therefore focus on "Images and Representations of Old Age in Society"; it will carve out modern, realistic images of old age and will put forward proposals on how they can be firmly incorporated in society.

## **Databases, Liaison Offices and Information Services**

Databases and information services also provide networked forums for orientation. The Federal Government supports, for example, the:

- Internet portal of the German Foundation for the Care of Elderly People (*Kuratorium Deutsche Altershilfe* – KDA) ([www.kda.de](http://www.kda.de));
- Office and Internet portal of the German National Association of Senior Citizens' Organisations (*Bundesarbeitsgemeinschaft der Seniorenorganisationen* – BAGSO) ([www.bagso.de](http://www.bagso.de));
- Office of the Federal Network of Senior Citizens Offices (*Bundesarbeitsgemeinschaft der Seniorenbüros* – BaS) ([www.seniorenbueros.org](http://www.seniorenbueros.org));

- Internet portal of the German Centre of Gerontology – DZA ([www.dza.de](http://www.dza.de))
- Coordinating Office for Nursing Care at the German Centre of Gerontology – DZA ([www.dza.de](http://www.dza.de))
- Liaison office, service hotline and Internet portal of the federal model programme "Experience for Initiatives" – EFI ([www.efi-programm.de](http://www.efi-programm.de) or [www.seniortrainer.de](http://www.seniortrainer.de))
- Database of architectural models for assistance of the elderly and disabled (*Baumodelle der Altenhilfe und der Behindertenhilfe*) ([www.baumodelle-bmfsfj.de](http://www.baumodelle-bmfsfj.de))
- Internet portal of the "Multi-Generation Houses" action programme ([www.mehrgenerationenhaeuser.de](http://www.mehrgenerationenhaeuser.de))
- Online platform of "Marketplace for All Generations" ([www.wirtschaftskraft-alter.de](http://www.wirtschaftskraft-alter.de))
- IKoM (*Informations- und Kontaktstelle Migration*), a project providing old-age assistance for immigrants and a competence and service centre for interest groups, professionals and affected parties ([www.aktioncourage.org](http://www.aktioncourage.org))
- Office of the National Action Plan (NAP) to Implement the Second Madrid International Plan of Action on Ageing 2002 and the Regional Implementation Strategy of the UNECE 2002 ([www.nationaler-aktionsplan.de](http://www.nationaler-aktionsplan.de))
- Initiative database of the Federal Network of Senior Citizens Offices ([www.senioren-initiativen.de](http://www.senioren-initiativen.de));
- Office of the National Alzheimer Association of Germany ([www.deutsche-alzheimer.de](http://www.deutsche-alzheimer.de));

### **Support of the German National Association of Senior Citizens' Organisations (BAGSO)**

The German National Association of Senior Citizens' Organisations (BAGSO) was established in 1989 and is funded by the Federal Government; BAGSO is an umbrella organisation that currently includes 89 nationally active member associations and represents more than 12 million older persons.

It has held an advisory status with the Economic and Social Council (ECOSOC) of the United Nations since 1998.

BAGSO conceives itself as a lobby group for the older generation and as a competent forum with different strategies of working for and with older persons.

BAGSO's board of directors as well as its national office, European office in Brussels and specific committees ensure the content coordination of mutual concerns and represent them to political decision-makers, thus serving to advise and improve work relating to issues affecting older persons at all levels.

BAGSO has held the German Senior Citizens' Congress since 1987; the organisation also holds conferences and workshops for experts on key topics of age and ageing, puts out publications and a members' magazine, and works on projects such as the "Senior Living and Housing" seal of approval project or the national "Solidarity of Generations" competition.

In 1999, BAGSO hosted the headquarters office of the UN-declared "International Year of Older Persons", the theme of which was "A Society for All Ages".

In addition, the office responsible for coordination of the contribution of civil society to the National Action Plan to Implement the United Nation's Second International Action Plan of Action on Ageing 2002, established by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, was headquartered at BAGSO from 2003 to 2005 ([www.bagso.de](http://www.bagso.de)).

### **Federal Network of Senior Citizens Offices (BaS)**

The task of the Federal Network of Senior Citizens Offices' (BaS) is to mediate the sharing of experiences between senior citizens offices and to interlink regional approaches to the promotion of involvement of older persons. It does this by holding training courses, workshops and meetings and by releasing information in the form of publications. The BaS federal network additionally advises the senior citizens offices in matters regarding volunteer work and the promotion of civic engagement.

In the framework of international projects, the BaS federal network is increasingly working together with EU and European senior citizens' and volunteer organisations. In this context, the BaS federal network tested the EU model project on "International Volunteerism", which featured a pan-European exchange of older volunteers.

On behalf of the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, the BaS federal network provides an Initiative Database of more than 1150 initiatives for older persons through which the sharing of experiences and transfer of knowledge between initiatives is encouraged.

This pool of information and ideas

- articulates the multifaceted, voluntary involvement of older persons;
- provides the public the opportunity to find initiatives in a wide range of task fields and to contact the stakeholders directly;
- shows a wide range of ideas worthy of pursuit;
- illustrates diverse areas of civic engagement, from Internet cafés to projects for old and young to the integration of immigrants.

Database [www.senioren-initiativen.de](http://www.senioren-initiativen.de), web address: [www.seniorenbuero.org](http://www.seniorenbuero.org) or [bas@seniorenbueros.org](mailto:bas@seniorenbueros.org).

### **German Senior Citizens' Congress**

Although not an action of the Federal Government, the German Senior Citizens' Congress is supported and well-attended by young and old alike.

It is held every three years by BAGSO under the auspices of the president or chancellor of the Federal Republic of Germany; this multi-day public event for the older generation has been conducted at regular intervals since 1987. Events include lectures, symposia and workshops on a specific theme.

The 8th German Senior Citizens' Congress, the theme of which was "Age as an Opportunity", was held in May 2006 with support from the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth; the event was attended by more than 15,000 visitors.

"Senova", an exhibition by non-profit and commercial organisations that enables older persons to obtain information on the activities of senior citizens' organisations and a variety of goods and services for the elderly, is held parallel to the German Senior Citizens' Congresses.

### **Consumer Policy for Older Persons**

Target group-specific consumer policy for older persons affords the opportunity to eliminate information deficits and to take into account the particular vulnerability of many older consumers, to improve their status as informed consumers in goods and

services markets, to inform them of their rights vis-à-vis the providers of goods and services, and to enhance their ability to enforce their rights.

The Federal Ministry of Food, Agriculture and Forestry supported the project entitled “Target-Group Orientated Consumer Work for and with Senior Citizens”, which was held under the auspices of the consumer protection centres of the states of North Rhine-Westphalia (NRW), Brandenburg, and Rhineland-Palatinate in collaboration with the German National Association of Senior Citizens’ Organisations - BAGSO (see p. 21).

Problems that older persons face as consumers and issues of particular interest to them were examined in consumer conferences with active participation of older persons (Consumer protection office NRW 2005).

BAGSO set up a consumer forum on its website, through which it collects exploratory, Internet-assisted survey data regarding consumer problems affecting older persons.

Website: [www.bagso.de](http://www.bagso.de)

### **General Equal Treatment Act (AGG)**

The General Equal Treatment Act (AGG), which came into force in August 2006 as Article 1 of the “Law for the Transposition of European Directives on the Realisation of the Principles of Equal Treatment“, ensures extensive protection against unjust discrimination because of age or other reasons. The AGG covers a wide range of labour law as well as general civil law for mass transactions and equivalent transactions and private insurance.

### **Act on Equal Opportunities for Disabled Persons (BGG)**

By putting into force the Social Security Code IX in June 2001 and the “Act on Equal Opportunities for Disabled Persons” (BGG) in May 2002, the German government and legislators secured the continuous participation of disabled persons and the associations that represent them by providing for rights to participation, hearing, and involvement.

The focus of the reform was and is to attain the goal of achieving full participation of disabled persons in life in our society. This goal can only be achieved if disabled persons are given the opportunity to live a self-determined life and to become as independent as possible.

This reform has not only laid the foundation for improvement of the situation of disabled persons in Germany, but also serves as a model at the international level.

The Federal Republic of Germany thus plays a leading role in European and international policy for the disabled.

### **The ZivilEngagement Initiative "With Each Other – For Each Other"**

The Federal Ministry of Family Affairs, Senior Citizens, Women and Youth concentrates the social forces in the area of volunteerism under one umbrella. The ZivilEngagement Initiative “With Each Other – For Each Other”, which was launched in August 2007, endeavours to recognize, develop and strengthen civic engagement. More than 23 million people in Germany are currently involved in volunteering



activities. These individuals donate their time, money, ideas and attention to other people.

Clubs, associations, churches, charitable organisations and foundations have served as a base for these activities for years. The ZivilEngagement Initiative "With Each Other – For Each Other" builds upon this base: It links, advises, trains and promotes different initiatives, thus elucidating the different facets of civic engagement and its value to the civically engaged and to society.

The ZivilEngagement Initiative encompasses the following six actions, which are to be continuously expanded and further developed in collaboration with the participating partners:

1. New volunteer services for new volunteers.

The "Voluntary Social Service Year" (FSJ) and "Voluntary Ecological Service Year" (FÖJ) programmes were modified. The German Act to Promote Youth Volunteer Services will make the time structure of these programmes more flexible and, thus, more attractive in the future; for example, the maximum duration of voluntary service was extended from 18 months to 24 months—this will first apply to national service and later (presumably in 2009) to international service; furthermore, the change will make it possible to divide national terms of voluntary service of at least six months' duration into blocks of at least three months each; alternatively, multiple terms of voluntary service of at least three months each can be combined to a maximum total duration of 24 months.

2. "Thank You Alone is not Enough".

Recognition and appreciation are the most important remuneration for persons engaged in volunteer work and are decisive incentives for their further civic engagement. The campaign conducted in collaboration with partners from all sectors of society is designed to more firmly establish the guiding concept of civil society and to more clearly emphasize its value to the civically engaged and to society.

3. "Support for Supporters".

Organisations that connect, advise and train volunteers and represent their interests form an infrastructure that makes civic engagement more effective and sustainable. These structures will be promoted and good framework conditions for new infrastructures created in order to further strengthen civic engagement. Model "schools of civil society" and "development agencies" that provide on-site assistance and services and disseminate information are to be established. Volunteers should receive qualification training. The conceivable offerings include project management, marketing, summer academies and volunteer management.

4. "Any and Everyone Can Participate, Regardless of Where They Come From".

For immigrants, civic engagement can serve as a bridge to society, thus paving the way to integration. It is therefore important to recognize and appreciate the voluntary civic engagement of immigrants. In coordination with immigrant associations and non-profit organisations, the Federal Government will therefore develop a strategy to promote the civic engagement of immigrant men and women. The government will also provide funding for research that focuses on forms of civic engagement, especially those involving second-generation immigrants.

5. "Businesses Should also Get Busy".

This new platform for promotion of civil society in the business sector will be established together with top corporate representatives. The objective is to have businesses promote the recognition and support of civic engagement and to agree to more firmly incorporate these criteria into their personnel and organisational policies. In addition, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth will systematically document and analyse corporate civic engagement activities and

will more intensively seek collaboration with centres of corporate citizenship.

#### 6. "New Developments on the Eastern Front"

Civil society and civic engagement contribute to the development of a region and are, at the same time, the best protection against extremism. The "Diversity is Good" programme of the Federal Government supports local strategies to strengthen civic engagement against right-wing extremism, xenophobia and anti-Semitism. The Federal Ministry of Family Affairs, Senior Citizens, Women and Youth therefore supports the development of civic foundations in the former East German states (new federal states).

#### "ZivilEngagement Representative"

In August 2007, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth appointed the first ZivilEngagement Representative, whose office is located at the Federal Ministry.

This post is an unsalaried position; the Representative's mission is to act as a consultant to more firmly establish the idea of civil society in policy and government action and to provide the impetus for additional initiatives. The ZivilEngagement Representative coordinates the various activities of the "With Each Other – For Each Other" initiative and broadens the initiative through partnerships with associations, foundations and businesses.

#### Funding of Federal Model Projects and Programmes

New ideas and innovative projects will be funded by the Federal Government in order to determine, with scientific collaboration and evaluation:

- Which possibilities for changes in the living environment exist;
- How perspectives for managing social developments can look like;
- How effects of a model project are and
- Whether nationwide portability is possible.

#### "Old Creates New – Active Ageing"

The number of so-called "young seniors", i.e. the population of 60 to 75-year-olds, will increase substantially by the year 2025; "young seniors" will then make up the largest group in the elderly population. This age group, in particular, exhibits a high level of civic engagement; with a growth rate of 6% points, it is also the fastest-growing group in volunteer civic engagement.

The "Old Creates New – Active Ageing" model programme of the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth endeavours to establish the principle of active ageing in German municipalities, to develop new action profiles, and to create a "social movement" for the active role of older persons in society with snowball effects.

Formulation of the memorandum "Help Develop and Decide" was a starting point. It is designed to send a signal to the public that older persons should be involved in development and decision-making processes. The memorandum provides for the voluntary engagement of older persons as a fundamental principle and focuses on subjects such as:

- Political participation
- Housing and living environment
- Education and culture
- Prevention and health
- Community assistance and services / consumer protection
- Infrastructure and basic municipal services.

After consensus, implementation of the memorandum will be tested in the municipalities starting in 2008.

### **“Intergenerational Volunteer Services – A Model Programme for the Strengthening of Civil Society”**

Under the motto “Active Together – Impetus for Civil Society”, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth supports the model programme “Intergenerational Volunteer Services”, a building block that can be used to strengthen civil society, utilise the opportunities of demographic change, and test new practical approaches to voluntary engagement.

The direction and design of the model programme are in line with the recommendations of the "Impetus to Civil Society" Commission, which stressed that the special potentials of the older generation should be specifically targeted. Opportunities for volunteer services, including traditional club and association activities as well as new forms of civic engagement, should be offered for people of all age groups—for youth as well as for men and women in the workforce or in the parenthood; this should also be done in an intergenerational context, not least, to promote a new relationship between the generations and to strengthen a culture in which volunteering comes naturally. The model programme for volunteers of all generations provides opportunities for volunteer work in kindergartens, schools, families, neighbourhood centres, hospitals, hospices and other sectors.

The federal model programme, which was launched in September 2005 and will end on 30 June 2008, features over 50 projects, some multipart. The Centre for Civil Society Development of the Freiburg Evangelical University (ZZE) is the scientific partner in the project. The experiences gained during the course of the model phase of the project will be compiled, documented and analysed in order to make the programme results and insights portable and useful to other interested parties and to derive experience-based recommendations for policy-making from them.

Benchmark data for the model programme as of the first quarter of 2007:

- 51 model projects nationwide
- Approx. 150 volunteer groups
- Over 930 volunteer work sites
- Approx. 4500 active volunteers, roughly two-thirds women.

The statistics of the Second Volunteer Survey (1999 – 2004) commissioned by the German government confirms that older persons in particular want to become civically engaged, and they are the fastest-growing group in the volunteer engagement sector.

The respective projects offer volunteer opportunities for all generations under consideration of their different time budgets and their specific potentials and skills. Different forms of useful volunteer training and strategies for achieving a positive culture of recognition of volunteers are being developed and tested. Locations at which volunteer services can be performed include kindergartens, schools, families, neighbourhood centres, hospitals, and hospices, etc.

There are volunteer positions available for people of all ages and for men and women in the workforce and in the parenting period. The intergenerational approach emphasizes the common ground between the generations and strengthens the cohesiveness of society.

In particular, it selectively utilises the life experience and special potentials of older persons. Accordingly, local volunteer services are to be managed by "*seniorTrainer* Competence Teams" (see p. 28), that is, not by full-time employees, but rather, by volunteers ("*seniorTrainers*"), in accordance with the specific local needs.

The statistics of the Second Volunteer Survey (1999 – 2004) commissioned by the German government confirm that older persons in particular wish to become civically engaged.

The experiences gained during the course of the 3-year model phase of the model programme will be compiled, documented and evaluated. This will make it possible to present the results in an objectivized, portable and useful form and to make experience-based proposals for policy-making based on these results.

The model programme was established in accordance with the recommendations of "Impetus for Civil Society" commission, which was appointed by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth in 2004, and in agreement with the recommendations of the Commission on the Future of Civil Society, a parliamentary "Enquete" commission which examines, among other things, the effects of demographic change.

### **The Federal Model Programme "Experience for Initiatives (EFI)"**

The EFI programme ended in 2006 and is being continued in a number of spin-off projects. In EFI, older persons support voluntary engagement in all age groups by sharing their decades of experience and knowledge (knowledge of experience) in the areas of work, family, volunteering and everyday life.

A *seniorTrainer* qualification course is offered, which qualifies these individuals for leadership positions and for "multiplier" functions in the volunteering sector. The *seniorTrainers* advise volunteering initiatives, clubs and associations; in addition, they set up their own projects and spread successful project ideas to other locations. They join forces with the local "*seniorTrainer* Competence Team" to form a civic engagement seed group in their community.

Focal points of the model programme:

- New media, computers, Internet use
- Old and young in action together
- Engagement of older persons for children and adolescents in kindergartens and schools
- Work in the community, for example, in the areas of housing counselling, neighbourhood structuring, and immigration/immigrants.

The model programme was conducted as a joint project in 10 federal states with the collaboration of 12 supra-regional educational institutions and infrastructure organisations for voluntary engagement in 35 municipalities. Its concepts are also being spread through the "Intergenerational Volunteer Services" model programme (see p. 26).

To date, about 1000 individuals nationwide have completed *seniorTrainer* training and, as such, have gone on to set up or supervise more than 4000 volunteer projects.

They interact with local “*seniorTrainer* Competence Teams” to provide impetus for civic engagement in German municipalities. These individuals work hand in hand with local infrastructure organisations for voluntary engagement. Work sectors extend throughout the entire range of voluntary engagement. Their work plays a decisive part in achieving and ensuring the sustainability of the Experience for Initiatives (EFI) concept. In 2006, the *seniorTrainers* and *seniorTrainer* Competence Teams united to form EFI Germany in order to uphold the interests of *seniorTrainers* and to further develop the model programme for basic services in German municipalities.

E-mail: [info@efideutschland.de](mailto:info@efideutschland.de), web addresses: [www.efi-programm.de](http://www.efi-programm.de), [www.seniortrainer.de](http://www.seniortrainer.de) and [www.efideutschland.de](http://www.efideutschland.de).

The model project is increasingly being transported to the European and international level.

Accordingly, reports of positive responses from abroad and reports of model projects, transfer projects and international exchange of *seniorTrainers* were heard on the occasion of the EFI congress in Berlin in April 2005. The concept of the “Experience for Initiatives” federal model programme was presented at the conference of the European “Learning in Later Life (LILL) network. The experts agreed that the creative linkage of life-long learning and the establishment of new and innovative roles for older persons will become an even greater focus in the future.

The new EU co-operation project entitled “Lifelong Learning and Active Citizenship in Europe’s Ageing Society” (LACE), which was launched in 2005, contributes to creating a positive image of older persons in Europe. The objectives of the two-year LACE project are to strengthen the participation of older persons using new concepts for encouragement of voluntary engagement and to increase the number of older persons actively involved in society (active citizenship).

### **The Federal Model Programme “Senior Citizens Offices”**

This model programme, initiated by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, ran from 1992 to 1998.

It led to the establishment of 58 information, mediation, and contact offices that advise older persons about volunteering activities and possibilities in their communities. The Senior Citizens Offices assist individuals interested in volunteering by helping them find volunteer positions commensurate with their needs, interests and skills.

Based on this model programme, Senior Citizens Offices have been set up in about 150 German municipalities.

In 1998, these offices became affiliated under the umbrella organisation “German National Association of Senior Citizens’ Organisations” (BAGSO/ see p.21).

### **The Federal Model Project “Self-Organisation of Older Persons in Restructuring the Social Welfare State”**

In many municipalities, basic municipal services such as swimming pools, libraries, public meeting places, and neighbourhood assistance centres are rated as voluntary services and are therefore suffering from cutbacks in funding. These services can only be maintained or expanded in response to need if citizens provide voluntary assistance or take personal responsibility. The “Best Practice Examples” survey and consultations with municipalities and initiatives have demonstrated the various roles

that older persons can assume in this context. Further ways to secure a need-based service structure should be found as a shared responsibility of the municipal government and citizens and under consideration of the conditions imposed by demographic change.

The project runs from 2005 to 2007 under the auspices of the Institute for Social Work and Social Education, E-mail: ludger.klein@iss-ffm.de, Internet: [www.iss-ffm.de](http://www.iss-ffm.de).

### **The Action Programme “Multi-Generation Houses”**

Demographic change and changes in living and working conditions have created tremendous social challenges. The age pyramid is changing dramatically, and the extended family is increasingly disappearing as a form of social organisation. In the future, more and more individuals will be unable to maintain mutual support and assistance networks with their own families. The existing professional services have not adequately compensated for this loss so far. New forms of service and strengthening of civic engagement are needed to build up civic competence and to sustain the economic capacity of families and affected family members.

The Federal Ministry of Family Affairs, Senior Citizens, Women and Youth's current political response to this problem is the "Multi-Generation Houses" action programme. The "multi-generation houses" called for in this federal programme will develop over the course of the project into "generation-spanning centres" that mediate and provide local services in proximity to families and households and respond to the needs and life circumstances of the affected individuals. These centres bring together professional service providers and voluntary service providers. In addition to strengthening civil society, they preserve the potentials of family networks and transpose them into a new form.

Multi-generation houses enhance the compatibility of work and living. They also evolve into service platforms for affordable, modern, intergenerational services for the region. They provide a space in which the generations can interact with each other. Older persons - who are now healthier and more competent than ever - are incorporated in the service offerings for families, children and adolescents. There are enough points of need for their skills, experience, knowledge and potentials - for example, for educational, recreational and professional knowledge transfer.

Multi-generation houses provide concrete, practical childcare assistance, help parents gain training competence, and provide opportunities for at-risk families. At the same time, they create positive conditions for the successful professional development of disadvantaged children and adolescents (social hot spots, immigration) by promoting language skills and educational counselling. They provide qualification measures that facilitate the entry or re-entry into the workforce of mothers and fathers ending the parenting period and of immigrants, disadvantaged adolescents, and older workers. Multi-generation houses co-operate in an ideal manner with the regional economy and include businesses in their work in order to enhance the employability of individuals, especially women.

To ensure sustainability, the programme is flanked by active impact studies with continuous reporting of results and by a service agency that promotes the further development of these facilities into information and service platforms.

By the end of 2007, a multi-generation house should be established in every German county and county borough, and the initial set-up phase should be completed. Thanks to support from the European Social Fund, the number of multi-generation

houses will increase from 439 potential houses to a total of 500 multi-generation houses, thereby exceeding the goals set in the Coalition Agreement of 2005.

### **The Federal Model Project “MoQua - Motivation and Qualification of Older Adults for Civil Engagement”**

This project of the Federal Ministry of Education of Research, which will be conducted from 2003 to 2007, concerns the development and testing of a concept for the recruitment, motivation and qualification of older persons who were formerly engaged in trade union work or who worked on staff councils or workers councils for post-professional volunteer work.

Project participants will be trained as “multipliers” and supervised in their civil engagement work at four different sites.

Subjects include the development of “basic tools” for voluntary engagement, motivational possibilities, organisational and legal conditions, co-operative relationships, public relations, acquisition of funds, and other educational and methodological know-how and skills such as group-specific preparation of contents, knowledge of methods, negotiation skills, work with small and large groups, methods for handling different types of learners, supervision of self-organised learning, and the value of informal learning ([www.moqua.arbeitundleben.de](http://www.moqua.arbeitundleben.de)).

### **The Campaign “Online Competence for the 50-Plus Generation”**

The project “Online Competence for the 50-Plus Generation” of the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, which was conducted in 2004 and 2005, promoted the Internet involvement and media competence of older persons because access to information and modern communication media is increasingly determined by the Internet today.

Utilisation of these new technologies has important benefits for older persons, and it additionally provides them opportunities to take part in social life.

Only around 28 percent of over-50-year-olds in Germany use the Internet. However, the Internet utilisation rate among the 50-plus generation is continuously rising.

website [www.50plus-ans-netz.de](http://www.50plus-ans-netz.de).

As a result of the campaign, the years 2006 and 2007 were proclaimed “Online Year 50 Plus” by the German Federal Working Party for Senior Citizens' Organisations (BAGSO; see p. 16) and the TeDiC (Technology, Diversity, and Equal Opportunity) competence centre in collaboration with the D21 Initiative, the German Telekom, Deutsche Bahn AG and other partners. BAGSO (Eifelstrasse 9, 53119 Bonn, [www.bagso.de](http://www.bagso.de)) is the responsible agency.

The service office is headquartered at the TeDiC Competence Centre (e-mail: [info@kompetenzz.de](mailto:info@kompetenzz.de) or Internet: [www.kompetenzz.de](http://www.kompetenzz.de)).

### **“Senior Citizens' Guide through the Digital World”**

Senior citizens are often intimidated by the plethora of offerings for information and communications technologies and therefore do not take advantage of information sources and communication forms that are taken for granted today for fear of unexpected costs.

Consequently, the Federal Ministry of Food, Agriculture and Consumer Protection promotes the publication and distribution of a “Senior Citizens’ Guide through the Digital World” by the German National Association of Senior Citizens’ Organisations – BAGSO (see p. 21). These efforts to acquaint Senior Citizens with Internet use and e-mail communications aim to promote the use of these new routes of communication by older persons and to ensure their participation in essential resources available on the Internet. Planned contents include subjects such as the search for reliable health information and secure online shopping and online banking. The guide will be distributed by BAGSO affiliates free of charge in 2008.

### **The Federal Model Project “Disabled Persons - Senior Citizens - Computer”**

This model project by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth in collaboration with the organisation “Jahresringe e.V.” was conducted from 2001 to 2004 in three locations: in the metropolitan city of Berlin, in the medium-sized city of Nürnberg, and in the rural state of Mecklenburg-Vorpommern.

Older persons with limited mobility received computer training in their own living environments in order to allow them to lead an independent life and to avoid social isolation. The trainers were persons with special training in geriatric education.

The accompanying scientific research showed that older persons with limited mobility can maintain their independence longer by using a personal computer and the Internet. Online services such as home banking, meal delivery, clothes shopping and travel booking facilitate their activities of daily living. The research also demonstrated that a positive change in mental and physical well-being occurs due to various related activities, e.g. keeping in touch with family members by e-mail, engaging in creative work on the PC, having the pleasure of surfing on the Internet, or doing constant finger exercise.

### **The Federal Model Project for Establishment of the Editorial Office of an Online Senior Citizens’ Magazine**

This project of the Federal Ministry of Education of Research was conducted from 2003 to 2006; it served to motivate, train and supervise older persons engaging in volunteer work in various locations in the Federal Republic of Germany to establish and run the editorial office of “Lern-Magazin”, a regularly published online magazine for senior citizens. This magazine reaches a wide audience of older and younger persons, providing them relevant information and challenging them to engage in further thinking and learning. At the same time, the model project improves the existing infrastructure of learning opportunities for older persons throughout Germany.

The editorial staff members independently prepares article on social, political, scientific, technical and economic developments in an interesting format and opens them for discussion.

This online senior citizens' magazine project serves as an example and model of participation of older persons in social dialogues, for self-driven and productive learning of older people in the sense of “lifelong learning”, and for creative use of the Internet by older persons ([www.senioren-redaktion.de](http://www.senioren-redaktion.de)).



### **The Federal Model Project “Richtig fit ab 50” (Really fit after 50)**

The Federal Ministry of Family Affairs, Senior Citizens, Women and Youth conducted this model project in 2003 to 2006 in collaboration with the German Sport Federation (DSB) and four state sports associations. Its primary objectives were to lower motivation- and activity-inhibiting access barriers to participation in sports and exercise by implementing various practice-related measures.

The projects were designed to encourage individuals, particularly women and men between the ages of 50 and 60, to start to engage in an active and health-conscious lifestyle. By networking numerous stakeholders in society, including clubs, associations, physicians, insurance companies, businesses, universities, municipalities and the media, resources were combined and synergistic effects were achieved.

These action measures were accompanied by intensive publicity, conferences and a brochure describing the results of the model projects. Valuable tips and information can be found on the DSB-run website [www.richtigfitab50.de](http://www.richtigfitab50.de).

### **The Federal Model Programme for “Self-determined Living in Old Age”**

Older persons wish to remain in their familiar living environment for as long as possible while maintaining a self-determined life. This has been demonstrated in various studies and surveys. Fulfilment of these wishes is contingent upon the compatibility of their home and entire living environment, including shopping opportunities, transportation links, doctors, etc., with the requirements for realisation of self-determined living.

The model programme for self-determined living was conducted by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth in collaboration with municipal governments, housing developers, architects, city planners and other organisations at 12 coordination sites. Project work involved trying and testing proposed solutions and assessing the portability of housing models. The main focal points were housing counselling, creation of barrier-free homes, and possibilities for community living or multi-generation home living.

Publications, conferences for professionals and the general public, a database and counselling on the main subjects of interest were accompanying elements of this successful model programme, which ran from 1998 to 2002.

### **Promotion of Model Housing Projects by the Federal Government**

In the scope of its social policy action measures for the older generation, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth also supports the building of model housing projects for older persons and disabled persons as well as those addressing the specific needs of older persons of immigrant origin.

These measures aim to improve the living situation of older persons, disabled persons and older immigrants, to provide nationwide impetus, and to acquire new insights by demonstrating new architectural and space utilisation design concepts. In particular, model institutions, homes and residences help older persons maintain a self-determined lifestyle. This helps to preserve the abilities and to promote the continued participation of older persons and disabled persons in social life.

Main eligibility requirements for support:

- Innovative design or space utilisation standards
- Innovative assistance and care concepts
- Model facilities for older persons with special life backgrounds and biographies
- Residential and nursing services for immigrants in need of nursing care
- Trial of new inpatient nursing care concepts for persons of foreign origin
- Novel format for co-operation between different social services organisations
- Innovative concepts for integration in the local neighbourhood
- Outstanding cost efficiency of the institution.

Current issues of emphasis include “the intelligent home”, “better integration in the community”, “improving social participation”, and “new living - counselling and co-operation for better quality of life in old age”; these themes stand for stronger community-based and alternative living and draw in new co-operation partners, for example, from the fields of trade and the housing industry.

An overview of selected projects can be found on the Internet portal “Baumodelle der Altenhilfe und der Behindertenhilfe” at the website [www.baumodelle-bmfsfj.de](http://www.baumodelle-bmfsfj.de).

### **Older Immigrants in the Federal Republic of Germany**

At the end of 2004, 705,790 foreigners over 60 years of age lived in the Federal Republic of Germany. This is equivalent to 10.5 percent of the overall foreign population. Older foreigners are a rapidly growing population group. One model calculation estimates that the number of over-60-year-old persons of foreign origin living in Germany will rise from 1.3 million by the year 2010, and to 2.8 million by 2030. In the group of 60 to 65-year-old immigrants, the number of men (176,277) is considerably higher than the number of women (106,589). The difference is not as great in the group of over-65-year-old immigrants (189,784 men versus 151,404 females).

Promotion of the integration and participation of immigrants is a task to be tackled by all of society. Policymakers, businesses and individuals, both native or immigrant, must be involved. Various conferences and workshops for experts have intensively discussed the subject of integration of persons of foreign origin in their municipalities and communities.

Formal and informal immigrant self-organisations are widely recognised as potentials and resources and are supported in networking committees. At the municipal level, networking structures in which immigrants are involved in the determination of the respective offerings frequently already exist.

Municipal governments, social security providers (e.g. health insurance companies) and health care institutions are already involved and are jointly considering how to provide information, advice and health counselling services as preventive measures while including social services for immigrants.

If a person of immigrant origin becomes in need of nursing care, then that person should be able to live in accordance with his or her individual, cultural and religious values. The provision of care should be so culturally sensitive that preservation of these values is possible in every day life.

To be able to fulfil these requirements, caregivers must be trained accordingly. According to the Geriatric Nursing Care Act (see p. 97), which came into force on 1 August 2003, ethno-specific and intercultural issues must be part of national training curricula for geriatric nurses.

A model project supported by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, which closed successfully in 2007, also contributed by developing a manual for culturally sensitive geriatric nurse training.

In the framework of a model programme for the improvement of care for persons in need of nursing care (see p. 102) the Federal Ministry of Health began practice-testing model measures for individuals of immigrant origin in 1996. The goal was to open nursing institutions for individuals of immigrant origin and to offer them culturally sensitive nursing care.

Support for model projects such as the Victor Gollanzc House in Frankfurt, in which older persons of different origins live in keeping with their ethnic and religious customs, also contributes to promoting the integration of older persons.

### **The Federal Government Commissioner for Immigration, Refugees and Integration**

In 2007, the office of the Federal Government Commissioner for Immigration, Refugees and Integration, which has been assigned to the Federal Chancellery for the 16th legislative period, looked back on a 29-year history. Although the name of the office has changed over the course of the years, its goals—which are laid down in the Residence Act of 2005—have remained basically the same.

All Commissioners have campaigned for acknowledgement of immigration as an irreversible process and have advocated legal and actual equality and promotion of integration and participation of immigrants. The integration of children and adolescents and the acquisition of German language skills are held by all to be an important precondition for successful integration.

The settlement of the Commissioner's office in the Federal Chancellery in 2005 has made it easier to establish integration policy as a cross-sectional problem that affects many different policy fields. This became clear in the process of drafting and passing the National Integration Plan in July 2007, which contains numerous self-commitments of the federal and state governments and various non-governmental organisations.

Further examples of promotion of the interests of older persons of immigrant origin include:

- Participation in the drafting of an information series for older immigrants entitled "Älter werden in Bundesrepublik Deutschland" (Growing Old in Germany)
- Collaboration in the drafting of the 2002 memorandum for culturally sensitive assistance for older persons
- National campaign for culturally sensitive assistance for older persons entitled "Aufeinander zugehen - voneinander lernen" (approaching one another - learning from each other)

## **IKoM – Information and Contact Centre for Immigration**

In establishing the IKoM information and contact centre for immigrants, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth has created an innovative project. The contact centre, which is run by the group "Aktion Courage", was a response to the need provide "multipliers" and professionals active in work with immigrants and immigrants themselves information concerning upcoming events, projects, liaison offices, etc. and to provide a network for interest groups and institutions and offerings.

Interested parties can receive information via the following sources:

- Contact database, which contains information about existing projects and offerings throughout Germany
- Bibliographic database, which provides an overview of publications
- Newsletter, which is published at regular intervals and provides information concerning projects, new releases, events, and training courses
- IKoM Documentation Service, which allows interest groups/organisations and professions to have their projects, offerings and publications centrally documented and made known nationwide.

Further information can be found at [www.aktioncourage.org](http://www.aktioncourage.org).

## **Federal Government Report on the Situation of Disabled Persons and the Development of Their Participation**

Since 1984, the Federal Government has published a report on the situation of disabled persons in the Germany during each legislative period.

The Federal Government Report on the Situation of Disabled Persons and the Development of Their Participation, which was completed in 2005, states that, following the major legal measures in the last years, such as German Social Security Code IX and the Act on Equal Opportunities for Disabled Persons Act (BGG), a significantly higher level of participation, equality and self-determination for disabled persons has developed.

Federal Government report gives a detailed account of the situation of disabled persons in Germany and the development of their participation in society. In accordance with the legal mandate, it additionally proposes further measures to achieve the goal of complete participation of disabled persons in society.

### **3. Statement of the Federal States**

"Seniorenvertretungen" (groups for representation of senior citizens in government) and "Seniorenbeauftragte" (senior citizens' representatives in government) serve to represent the political interests of older persons in all Federal States and in a steadily growing number of cities, municipalities and counties. The Seniorenvertretungen, in particular, are an important form of political participation of older persons. These organisations pool competences and demands in the pre-parliamentary arena, advise policymakers and municipal governments on questions concerning senior citizens, and work as drivers of municipal senior citizens' policy. With assistance from the "Landesseniorenvertretungen" (groups for representation of senior citizens in state government), the Federal States motivate older persons to actively implement

their expertise and experience, especially at the municipal level. Overall, the reports of the municipal administrations on the co-operation with Seniorenvertretungen have been very positive.

In the states of Schleswig-Holstein and Mecklenburg-Vorpommern, so-called "Seniors Parliaments" (Altenparlamente) are held at regular intervals. They are comprised of representatives from senior citizens' organisations, social and charitable organisations, unions and churches. Although these are not elected parliaments and although their members cannot pass any binding resolutions, the members of the Seniors Parliament clearly represent to both politicians and the public which political measures they feel are necessary in regard to the situation of older persons in their Federal State. In North Rhine-Westphalia, state senior citizens' conferences are held each year for this purpose. In Berlin, there is an annual "Seniors Debate in Parliament Week"; during this event, which is presided over the president of the parliament, the parliamentary fraction leaders answer the questions of the older generation. The Senior Citizens' Participation Act of the Federal State of Berlin came into force in May 2006. The "Landesseniorenbeirat" (LSBB, state senior citizens advisory council), the "Landesenienorenvertretungen" (LSV; groups for representation of senior citizens in state government), and the "Seniorenvertretungen" (groups for representation of senior citizens in local government) are institutionalised interest groups for representation of the older generation.

The Federal States support the civic engagement of older persons in many ways, for example, through the promotion of volunteer agencies, volunteer centres and senior citizens offices or through programmes for networking of existing engagement structures. The majority of Federal States have participated in the federal model programme "Experience for Initiatives" (EFI) and set up the appropriate contact points.

In addition, a number of other projects that aim to promote the social participation and integration of older persons are being supported. Thematic priorities are the utilisation of New Media, especially the Internet, and intergenerational dialogue. In the State of Hesse, the Landesseniorenvertretung trains "multipliers", individuals who share their knowledge of modern communications technologies with interested senior citizens, in a programme financed by the state government. Intergenerational dialogue is promoted, e.g. through funding of qualification measures for contemporary witnesses, who share their knowledge and experience with school classes.

Contact between young and old is promoted, for example, through the establishment of so-called "multi-generation houses". In addition to the intensification of contacts, a main goal of these efforts is to strengthen voluntary social engagement and to establish a network of information, counselling and support offerings.

Further activities focus on the social and cultural participation of older persons, for example, in senior citizens clubs/associations and senior citizens meeting places. In particular, voluntary engagement of older persons in the social services sector is specifically supported by many Federal States. Programmes such as "Aktion 55" in Saxony and ZWAR (*Zwischen Arbeit und Ruhestand* - between work and retirement) in North Rhine-Westphalia were and are a help to older persons making the transition into the new life phase and into the start or expansion of fulfilling voluntary work, which in many cases is continued after a person reaches the legal retirement age.

Another example in five Federal States is the training of volunteer tutors to advise and assist nursing home councils to exercise of their duties in conformity with nursing home law.

The aforementioned thematic priorities are additionally addressed in the scope of events and competitions supported with funds from the Federal States; their constant goal is to raise awareness of the potentials of older persons. The Saxonian Senior Citizens Days event, for example, was held for the 11th time in September 2005.

Within the scope of their possibilities, the Federal States also participate in measures to improve the framework conditions for voluntary engagement. Many Federal States, after issuing the appropriate bids for tenders, have signed framework contracts with private insurance companies designed to close existing gaps in insurance coverage for volunteer workers, especially in regard to accident insurance and liability insurance coverage. One form of acknowledgement of voluntary engagement is also the "Volunteer ID Card", which honours certain forms of voluntary engagement, especially in social services. Within the scope of programmes, volunteers may also receive an allowance for voluntary community service in certain cases. The networking of community engagement structures is another main focus of support.

The senior citizens self-help movement started in Berlin in the 1970s. The first initiative, Sozialwerk Berlin e.V., provided the impetus for establishment of many other self-help projects in Germany.

#### **4. Statement on the Part of Civil Society**

**In order to meet the challenges associated with demographic change, it is imperative that older persons also utilise their potentials. It is therefore necessary to achieve the active participation of older men and women in all relevant areas of society. The Federal Government, Federal States and local authorities must therefore create the necessary framework conditions and encourage older persons to participate in families, in their communities, in churches, in municipalities, in clubs and associations and other structures.**

The readiness of older persons to assume political responsibility must be more strongly awakened than before. As well as in the workforce, society needs co-operation between young and old in politics--in all political domains. In addition to this responsibility for all of society, which older persons assume above all through their participation in political parties, unions, associations and citizens' initiatives, they are also advocates for their own rights. In order for older persons to be able to represent their own interests with respect to health, nursing care, living in old age and statutory pension and as consumers, opportunities for them to be heard and to participate must be better utilised when present or created as needed.

BAGSO is an umbrella organisation comprised of 89 senior citizens' organisations with more than 12 million individual members. As such, it has become the lobby group for senior citizens in Germany. BAGSO and other relevant organisations should therefore be involved in the preparation of laws and acts affecting older persons. In addition to senior citizens' organisations, "Seniorenvertretungen" (groups for representations of senior citizens in local government) have become important partners in public administration. BAGSO has lobbied for a binding obligation to establish Seniorenvertretungen in the municipal codes of the Federal states for years. In addition, senior citizens should increasingly utilise the existing forms of civic participation, such as referendum petitions, referendums, other petitions, citizens' proposals, forums and roundtable discussions, especially at the municipal level.

New forms of participation for older persons should also be developed. For example, as users of offerings and services, older persons be directly involved in planning and

execution activities (e.g. nursing home councils). Furthermore, they should be given the opportunity to better recognise and articulate their interests, e.g. through surveys. There are still substantial gaps that must be closed in both areas.

Economic participation of older persons can be enhanced through consumer policy that specifically addresses the interests of this target group (for details, see Commitment 3).

The full potential of older persons in the volunteer work sector has not been utilised, as the Second Volunteer Survey shows. Considering the increasing need for such volunteer activities, it is necessary to more strongly promote the willingness of active, older persons to engage in such activities and to set aside funds for this work. This requires the co-operation of authorities and volunteer organisations at all levels. Volunteer work must, in no way, be a substitute for paid work.

Volunteers today want to do something for themselves as well as for others. Senior citizens are calling for more self-determination and self-organisation in their volunteer work. The structures of post-professional engagement should be distinctly different from those of working life. The government must accompany these developments. Structures that activate voluntary engagement must be established, expanded and sustainably promoted; the responsibility for their financing should be shared by many (federal, state and municipal government, charitable organisations, etc.).

The framework conditions for voluntary engagement must also be further improved. For example, new forms of acknowledgement of voluntary work should be developed. In order to provide adequate opportunities for qualification for civically engaged individuals, charitable organisations need the continuous support of the federal, state and municipal governments. In spite of the reform of the German Social Security Code VII (SGB VII), which came into effect on 1 January 2005, gaps in insurance coverage for volunteers still exist. Insofar as expenses for volunteer workers are not (or cannot be) reimbursed, it should be possible to claim these expenses as a tax deduction. Further tax relief measures should be considered. For example, the time donations of volunteers could be equated to financial donations. Especially for younger persons and for women, this would correspond to compensation and perhaps also an incentive for voluntary engagement if this meant the accrual of additional pension entitlements. Finally, more information and counselling on possibilities and conditions for voluntary engagement are needed. The federal, state and municipal governments can contribute actively and directly or indirectly by supporting the corresponding services.

The precondition for the active participation of older persons in society is the presence of an adequate infrastructure that is adapted to the needs of older persons. Therefore, concepts are needed that provide opportunities for older persons, especially those living in rural areas, to actively participate in community life and cultural events. Especially in rural areas, the municipal governments, charitable associations, self-help organisations and private providers must become more intensively involved in the care of persons in need of assistance. Relevant service concepts for promotion of integration and small-scale action must be developed so that social proximity can develop. Self-organised offerings such as meeting places, senior citizens offices and multi-generation houses must also be supported. These conditions allow the development of networks that help individuals to manage their everyday tasks and to remain in contact with society even when in advanced aged or hampered by limited mobility and, thus, help to avoid isolation, which is feared by many.

The situation of older immigrants, a population group growing at a disproportionate rate, demands special attention. In collaboration with the relevant organisations, the

specific needs of older immigrants must be determined at the local level, and their possibilities for participation and co-determination must be improved. We emphatically encourage older immigrants to participate in voluntary forms of engagement. In this sense, integration must be achieved by encouraging the voluntary engagement of immigrants; achieving the integration of older immigrant women is a particular challenge.



### **COMMITMENT III**

#### **TO PROMOTE EQUITABLE AND SUSTAINABLE ECONOMIC GROWTH IN RESPONSE TO POPULATION AGEING**

20. *Population ageing in the UNECE region will further increase the ratio of the number of persons who are not employed to the number of those who are. This trend will continue to raise concerns about the financial sustainability of social protection systems in general and pension schemes in particular. In this context, the fundamental economic issue is to share resources in an equitable and sustainable way between those employed and those not employed. In general, distribution and transfer issues are easier to address when the available resources are increasing at a sufficient rate. It is therefore important that every effort be made to raise the underlying rates of economic growth and productivity in the UNECE region, ensuring in the process that growth is environmentally and socially sustainable. Faster rates of economic growth will not automatically lead to satisfactory distributive outcomes but they will, if accompanied by a broad strategic policy response to population ageing, make it much easier to meet the challenges of this major demographic development.*

21. *Growth itself will not be sufficient to address the distributional issues raised by population ageing, nor indeed is there any guarantee that growth will lead to socially acceptable outcomes. Policymakers should be cognisant of the need for the benefits of growth to be as widely shared as possible. That is why the emphasis in policy discussion in recent years has started to focus on equitable and sustainable growth as, in other words, the result of growth should in no way be detrimental to individuals or population groups on the one hand, and long-term benefits and potentials for the many should not be jeopardised, on the other hand, by the attainment of short-term benefits to a few. It is thus felt that economic growth should ensure full employment, poverty eradication, price stability and sustainable fiscal and external balances in order for its benefits to reach all people, especially the poor. Moreover, there is compelling evidence that policies to support health, education, to reduce poverty and provide safety nets against the effects of economic shocks improve the prospects for growth. Social and health policies for the coming years must take into account the growth need for integral health care and social services for older persons, as well as the funding for benefits, which require sustained economic growth. But all these variables interact over time and it is therefore important for policy to act upon a broad front – including that of the macro-economy.*

22. *The existing differences in the macroeconomic situation and capabilities between the Western part of the region and economies in transition, in particular those who are not among candidates for accession to the EU, necessitate that economic and social policy reforms in these countries should respond to the challenges of their ageing societies.*

*The following policy objectives should be met as part of this commitment:*

*Aim to accelerate the underlying growth rate in Western Europe and North America*

23. *Recognising the interdependence between social and economic policies, the current stance of macro-economic policies in the region should be reviewed with the*

*aim of ensuring greater consistency between fiscal and monetary policy on the one hand and a greater weight for the objectives of growth and employment on the other. Fiscal policy should aim to stabilise the economy and to improve the foundations for economic growth with a medium term spending strategy for infrastructure, education training, support for research and development, etc. Monetary policy should focus on the underlying rates of inflation and play a counter-cyclical role by setting a range for the inflation target that should be wide enough to be credible and supportive of economic growth.*

*Aim to accelerate the underlying growth rate in countries with transition economies*

24. *Domestic and international strategies for transformation of the transition economies, with a view to eradicating poverty, especially among older persons, should be considered as a priority. Serious efforts for an economically efficient framework and institutional structures that contribute to fair competition and prevent corruption could trigger momentum for growth. International assistance should focus on softening the social costs of reforms and encourage the creation of effective institutions for market economies and new democracies.*

## ***Economic Growth***

### **1. Statement of the Federal Government**

Commitment III rightly states that **productivity rates in the UNECE region** need to be increased, while also ensuring that this **growth is socially and environmentally sustainable**.

Here the Federal Government sees the Federal Republic of Germany as facing four major challenges:

- In view of falling birth rates in the Federal Republic of Germany (approximately 1.35 births per female), accompanied by an increased life expectancy, both the economy and society will have to respond to changing needs.
- The number of older persons in gainful employment is too low. The percentage of persons in gainful employment between the ages of 55 and 64 has risen considerably in the past few years and was 49.7 per cent in the first quarter of 2007. In other words, the aim of the Lisbon Strategy, namely to increase the numbers of those engaged in gainful employment aged fifty-five or over to 50 per cent, has almost been reached. The Federal Republic of Germany intends to achieve at least 55 per cent in this age group by 2010.
- The burdens placed on the social security systems are increasing, for example the average period for which a pension is drawn is now 17.4 years and likely to rise. The corresponding average period in the 1960s was around 10 years.
- The Federal Republic of Germany sees itself as part of increasing global competition. The advancing, global opening up of consumer and capital markets, falling transportation costs and technical progress have all resulted in an intensification of global flows of goods and capital. This process is leading to a worldwide relocation of companies and jobs in a way never previously experienced.

Most of the measures and policies envisaged by the Federal Government and the federal states in their statements on Commitments IV, V, VI, and VIII serve the objectives of **promoting sustained economic growth**, i.e. they are in conformity with Commitment III. They are – just as aspects of Commitment VII – to be taken into consideration in order to provide responses to this Commitment and will not be discussed in detail in the context of this Commitment, which in terms of content is linked to the others referred to above. The objectives are innovation, a reduction in bureaucracy, increasing interest in the Federal Republic of Germany as a place to invest and work, increasing the numbers of older persons in gainful employment, raising the effective age of retirement, creating better quality jobs and modernised health care and social security systems.

**Programmes at local government level** also play a role.

In order to meet the above challenges, the Federal Government has developed **comprehensive tools for reform of economic policy** that reflect the call of Commitment III.

This has resulted in lower taxation at both the corporate and private levels, leading to greater scope to invest and consume. At the same time, the **health care and social security systems are being adapted in response to demographic change**. Even

so, further fine tuning is still needed to able them to respond to new developments and insights.

**Reform of the law on trades and crafts** has strengthened competition in this sector, made it easier for new enterprises to start up, and created **apprenticeships and jobs**.

The **reforms of the pension and health care systems** have brought ancillary wage costs down, making work for both enterprises and employees more worthwhile again. The **2003 and 2007 reforms of the health care system** have made the health service more efficient and guarantee quality health care for all persons irrespective of their age, gender or origin.

The **statutory retirement age** will be raised gradually **from 65 to 67** as of 2012. This is part of a long-term strategy, and in this context is a clear message to both society and the economy: What is required is rethinking on the attitude to the role of older employees and concrete changes in approach.

The **labour market reforms** under the motto of “Give and Take” aim to give greater reward to individual initiative. These reforms consist of a broad range of labour market policies to **increase the numbers of older employees in gainful employment**. The **law to improve the employment opportunities for older persons** is also a step in this direction.

**Merging unemployment benefits with supplementary welfare benefits** has eliminated inefficient dual structures and paved the way for new job opportunities – particularly for persons with no or few qualifications.

The policies adopted by the Federal Government to **promote the compatibility of raising a family and also holding down a job or caring for a family member while going out to work**, set out in Chapters IV, VIII and IX also contribute to ensuring economic growth,

Economic policy reforms coupled with dynamic international economic growth, pay agreements between the two sides of industry that lead to more jobs and greater effort on the part of industry to improve its competitiveness are having an impact. The sum total of all these factors is consolidation of growth and a further decrease in the numbers of those unemployed.

In this connection the Federal Republic of Germany welcomes the incorporation of the **Lisbon Strategy** that seeks to secure **growth and employment within the EU**. The EU will continue to pursue joint strategies with an aim to achieving positive results.

In addition to giving rise to challenges requiring responses, **demographic change** also provides new opportunities for more **growth and higher employment** and the continued development of a joint **European social model**. Senior citizens constitute a growing group of consumers of goods and services. The so-called “**silver economy**” offers tremendous potential for growth worldwide and, in consequence, will have a positive impact on the labour market.

## **2. Measures of the Federal Government**

### **Reforms of the Labour Market, Fiscal Law and Social Security Systems**

The reforms are a contribution to:

- Stimulating investment and consumption
- Increasing the numbers of older persons in gainful employment

- Improving incentives on both the supply and demand sides of the labour market
- Promoting independence and initiative
- Reducing ancillary wage costs

Their goals include:

- Sustained increase of the growth potential of the German economy
  - Higher employment
  - Making the Federal Republic of Germany increasingly attractive for investors
  - Reducing the high level of unemployment
  - Creating social security systems that can respond to demographic change
- Ensuring social equality, i.e. not denying assistance to any person in need of help while also obliging anyone who is helped to do everything within his or her power to live an independent life without such help.

### **Lisbon Strategy**

The Lisbon Strategy, an agenda on growth and employment, set out by the European Council in 2000 is an ambitious programme designed to achieve comprehensive economic and social reforms in the EU.

It stresses the equal value of economic, employment and social policies. Its processes to co-ordinate economic and employment policies as well as the tenet of greater co-operation in the area of social policies are based on the “open method” principle, i.e. agreement on common goals whose achievement is monitored by means of indicators.

Evaluations of the Lisbon Strategy took place in 2004 and 2005. They concluded that there had been a lack of adequate progress, particularly attributable to shortfalls in co-ordination and procedures and also in view of insufficient commitment by the individual member states.

The discussion on reform led to enactment of Integrated Guidelines for the period from 2005 to 2008. This served as a basis for the member states to draw up a National Reform Programme (NRP) and to report annually on its implementation.

### **“Marketplace for All Generations”**

This online service of the Federal Ministry of Family Affairs, Senior Citizens’ Women and Youth serves as a link between assistance for the elderly and the economic process. Members of the public as well as the business community can use the service to obtain information on the safety and user-friendliness of products, goods and services. The service also provides practical tips and suggestions on aspects of daily life such as housing, technology and mobility, leisure and wellness. ([www.wirtschaftskraft-alter.de](http://www.wirtschaftskraft-alter.de))

### **Family-Orientated Services**

The extension and development of a wide range of services designed to cater for the needs of families (see p. 144) are further prerequisites for tapping additional potential for growth and employment and making raising a family while holding down a job a

viable option. The Federal Government promotes models and schemes to achieve a viable and workable relationship between housework, leisure time and gainful employment.

### **3. Statement of the Federal States**

The economic policy of the federal states is based upon the principle of growth that is socially compatible, environmentally friendly and sustainable. By reducing bureaucratic hurdles and supporting start-ups, the federal states have – albeit to different extents – succeeded in attracting new businesses and, in consequence, at least in easing a challenging economic situation. Both private individuals and businesses profit from the endeavours of the federal states to simplify administrative procedures, e.g. by establishing offices responsible for all aspects of one and the same concern. The policy of encouraging science and research on the one hand and industry and business on the other to see themselves as partners ensures that research meets the needs of actual practice.

The federal states have also recognised the economic opportunities that demographic change brings. This particularly applies to policies on health care and senior citizens. The federal state governments are making increasing efforts to ensure that products and services meeting the needs of senior citizens are available. For example, the federal state of North Rhine-Westphalia has set up a silver economy initiative that contributes to the aspects of “housing, home repairs and services”, “leisure, tourism, sport and wellness” as well as to “new media and forms of telecommunication”. The objective is not only to increase the awareness of those concerned, but to identify shortcomings and areas where action is needed, to provide the impetus for and support of model project, to ensure that existing structures can be sustained, to support the formation of networks and formation of partnerships in all their forms. A further form of support that the federal state of North Rhine-Westphalia offers is training programmes for persons providing assistance for senior citizens. An example is the creation of courses of instruction for tour guides in the field of tourism for senior citizens and courses for members of the building trade on “housing that meets the needs of older persons”. The federal state of Hesse also offers courses of instruction for craftsmen and has launched a campaign entitled “Product development for the needs of senior citizens”; a campaign designed to draw the attention of consumers to the features of products that are user-friendly and also cater for the needs of senior citizens. The government of the city-state Berlin has launched the “Consumer protection network” that promotes the dialogue between active older persons and the business community with a view to ensuring that products and services better cater for the needs of older consumers. The “Generation Research Program” (GRP) of Bavaria engages in intergenerational pure research and developing strategies for innovative technologies.

#### **4. Statement on the Part of Civil Society**

An ageing society can be a relevant source of more growth and employment. Organisations that form a part of civil society have been lobbying for years for understanding as an opportunity the increasing demand for products and services that cater for the needs of senior citizens.

Senior citizens are the only section of the population that is growing. Generally speaking, they also have substantial purchasing power. Despite this, the interests and specific needs of older persons as consumers are hardly recognised by markets. This is demonstrated by the advertising that confronts us daily and that is always directed at the – decreasing group – of the 14-to-49-year-olds.

Japan serves as an example that shows this does not have to be the case. Japan has recognised there is a growth market for products and services catering for the needs of older persons and has also acted on this realisation. A first important move has been made to position age as an economic force: a campaign launched in the federal state of North Rhine-Westphalia to develop and adapt products and services to cater for the specific needs of older persons. Politicians, industry and associations are called upon to follow this example and take it further, particularly at local level.

We also call for target-group orientated information and advice for older consumers. One example of this is the project “Target-Group Orientated Consumer Work for and with Senior Citizens”. The project carried out by the consumers’ organisation in North Rhine-Westphalia in association with the Confederation of Senior Citizens’ Organisations has been a starting point in various consumer areas, and will be continued.

Another important aspect is to help older consumers to become aware of weak points in products and services and to concentrate their critical potential as consumers and bring this to the attention of the general public. The prerequisite for this is creating transparency particularly in the area of housing for the elderly and on the insurance market. Further issues addressed by the Confederation of Senior Citizens’ Organisations with the support of the Federal Ministry of Food, Consumer Protection and Agriculture and the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth in the form of online surveys are product safety, more comprehensible instructions for use, clearly visible “‘use by’ dates, cleaning information etc. In order to prevent such weak points from occurring in the first place, senior citizens and organisations representing them are to be involved in the development of products and services. It can also be assumed that all consumers will benefit from products and services designed to better suit the needs of senior citizens, i.e., quite simply one that are more user-friendly.

Products and services that cater for the needs of senior citizens should be found through competitions or recommendations given by consumer protection organisations, identified by seals of quality, and presented at consumer trade fairs. Checklists of the kind drawn up by the Confederation of Senior Citizens’ Organisations or the German Society for Home Economics for household appliances can be helpful when decisions on the choice of product or service are to be made. Finally workshops and specialist conferences should be held as a forum for experts and to enable discussion between manufacturers and service providers. The steps already taken are encouraging.

## **COMMITMENT IV**

### **TO ADJUST SOCIAL PROTECTION SYSTEMS IN RESPONSE TO DEMOGRAPHIC CHANGES AND THEIR SOCIAL AND ECONOMIC CONSEQUENCES**

25. *Social protection systems are usually seen as protecting individuals and their families from the risks and consequences of unemployment, major health setbacks, poverty and other contingencies arising from the vagaries of economic developments during the individual's life cycle. They can also contribute to adequate income maintenance and protect the rights of all groups of the population. These systems reflect broader political and social values of social justice and cohesion, which place limits on the degrees of inequality or social deprivation a society is willing to tolerate, as well as underlying theories of society which influence judgements as to whether or not social justice can best be achieved by government intervention. Steps should be taken to ensure financial sustainability of social protection systems in the face of demographic ageing.*

26. *Most national social security systems face a number of common challenges. The various types of benefit system -- social insurance (financed from but not directly related to contributions), universal benefits, means-tested benefits -- all have different implications for the behaviour of both recipients and their employers. In coping with the economic effects of population ageing, systems -- or combinations of them -- that strengthen incentives to participate in the labour force while ensuring protection for the weakest groups in society are desirable. Recognising that social security has to be acknowledged as a productive factor, it faces many challenges in adapting to changes in family structure, to the emergence of more unstable work patterns, to changes in the age profile of populations and globalisation.*

27. *In suggesting reforms of, and setting objectives for, social protection systems it is important to stress that they cannot be expected to cope with an accumulation of policy failures or deficiencies in other domains. To be effective, social protection systems should be effectively adjusted and need to be supported by high level of employment, comprehensive health services, educational systems which prepare the young for effective participation in the labour force, and active labour market policies which help employers to adjust to structural change and other economic shocks. Social protection can then focus on its basic functions of safeguarding those who are deprived and covering those who are at risk. By emphasising social inclusion and the development of human capabilities, social protection also promotes economic dynamism as well as social and political stability. In this way economic efficiency and social justice can become mutually supportive.*

*The following policy objectives should be met as part of this commitment:*

*Preserve and strengthen the basic objectives of social protection, namely to prevent poverty and provide adequate benefit levels for all*

28. *The extension of social protection systems to all sections of the population, from the very young to the very old, is a key element in its objective of promoting*



*social justice and social cohesion. For the young and those of working age, policy should seek to develop capabilities and support social inclusion through participation in the labour force. For persons who are not able to work due to disability and for persons beyond working age, a standard of living that allows them to maintain their self-respect and dignity should be promoted. This entails in particular the objective of achieving a sufficient income for all older persons.*

*Establish or develop a regulatory framework for occupational and private pension provision*

29. *Recognising the growing relevance of the role of private provision in social security, a regulatory framework for occupational and private pension provision should be established or further developed in order to reduce the negative impacts of market failures and to improve security in income maintenance in old age.*

*Adapt existing social protection systems to demographic changes and changes in family structures*

30. *Societal and demographic changes give rise to new needs and demands, and if social protection systems are slow to adapt to these there will be increased hardship for those who fall outside the reach of social protection. Policies should address the needs of older persons for a variety of social and health services, including sheltered housing and long-term care. Effective plans should be made to see that these needs are met in good time.*

*Pay special attention to the social protection of women and men throughout their life course*

31. *The equal treatment of men and women in social protection systems should be ensured and such systems should support a better reconciliation of work and family responsibilities throughout the life cycle. Special attention needs to be paid to the position of those family members who interrupt their employment to rear children or to care for family members and as a result suffer reduction in their pension entitlement and those who devote themselves to household work and the care of children and other relatives. Both groups often face a precarious financial situation in old age. Policies to alleviate these problems could include special leave arrangements for working parents and other caregivers, or other supportive measures such as respite care services.*

## ***Social Security Systems***

### **1. Statement of the Federal Government**

As declared in Commitment IV, the Federal Republic of Germany sees **preserving and extending the social security systems for all groups of the population** as one of its fundamental tasks. In order to enable existing social security systems to respond to demographic change, it has undertaken a number of major **reforms**. Details of the reforms are indicated below. Special attention has been paid to protection of women, older persons, single parents and the unemployed. This is in conformity with the tenets of Commitment IV.

Preserving and strengthening the basic objectives of social protection, namely **preventing poverty and providing adequate benefit levels for all** are guaranteed in the Federal Republic of Germany.

The **pension reform** implemented in 2001 has ensured that retirement pensions are secure for the future. Here it was a question of long-term viability of a system of **secure and affordable pensions**. The reform also takes concerns of social and fiscal policies into consideration and adheres to the principle of equability for all generations. Neither present nor future contributors to insurance schemes will be required to pay more than they can manage, and the level of benefits will remain at a level acceptable to future generations of pensioners. The most important aspect of the reform was to **extend the additional fully-funded pension schemes** that are also eligible for extensive state assistance. The pensions of today's pensioners will increase more slowly than had been expected as a result of demographic change. The statutory pension insurance system will be unable to guarantee the standard of living of future generations on its own. This has made additional, state-assisted individual insurance schemes a necessity.

The statutory pension scheme has introduced numerous provisions since 1986 that are particularly designed to ease the **gender-specific disadvantages that women incur due to periods spent raising children or providing care in the form of nursing family members**. Recognition of periods spent raising children was a decisive breakthrough in family affairs policy and also an important contribution to improving independent social security for women.

Nursing care insurance, introduced as far back as 1995, has made a substantial contribution to improving the **social security of persons providing such care**.

Supplementary, state-assisted pension insurance schemes have made **gender-neutral contributions** mandatory since 2006.

Poverty on account of old age is no longer a problem of any substance in the Federal Republic of Germany. While there are older persons who are only able to draw a small pension as, for example, they only paid into the scheme for a short period, their pensions are as a rule supplemented by **benefits from other pension schemes**.

Furthermore, the principle of **basic security in old age** and in cases of reduced earning capacity exists – as called for in Commitment IV – is anchored in Book Twelve of the Social Security Code.

The Federal Republic of Germany welcomes the statements in Commitment IV on protection of the individual against serious disadvantages on grounds of health and provision of a full range of health care services. By means of the **2003 health care reform** that came into force at the beginning of 2004, it has ensured the targeted use of funds and high-quality care of all those insured. The **quality of care and its cost efficiency have been increased** and transparency improved.

A wide range of integrated measures has perceptibly **taken the pressure off the statutory health insurance schemes**. All those involved, insured persons/ patients, health insurers and those providing health services, are called upon to play their part and respond to the challenges of structural change. Each will have to play a part in stabilising contributions at a level that is as low as possible, taking the pressure off ancillary wage costs, thereby leading to the creation of more jobs. Placing ceilings on payments particularly **protects families with children, persons on low incomes and the chronically ill** against having to make payments beyond their means.

The **Act on Strengthening Competition in Public Health Insurance (GKV-WSG)** is a further step towards the goal of providing a health service that is efficient and affordable and provides every individual with high-quality health care. In future every individual resident in the Federal Republic of Germany will be protected in the case of sickness. As of 1 January 2009 for the first time in the history of social protection in Germany all residents will be required by law to take out health insurance if they have no adequate protection in another form. This means that the **individual will have greater responsibility for his or her own health and check-ups**, and early recognition tests will be encouraged by incentives on regulations governing supplementary payments. Supplementary payments for insured persons who are chronically ill and therefore in need of permanent treatment will be capped.

To achieve long-term stability and achievement of the envisaged goals of guaranteeing contributions on the one hand and benefits on the other, given the background of increased life expectancy and falling birth rates, the Federal Republic of Germany has enacted **legislation to adjust the general age of retirement to demographic change** and to strengthen the financial bases of the statutory pension scheme; this legislation envisages **raising the general age of retirement** to 67 with effect from 2012 on.

Raising the general age of retirement must be accompanied by sustained improvement in the employment prospects of older persons: Even if the numbers of persons born in the low birth-rate years entering the labour market will be appreciably less in the future, additional programmes will still be necessary to **increase the opportunities of older persons on the labour market**. The legislation and programmes described above will serve to improve the employment opportunities of older persons.

## **2. Measures of the Federal Government**

### **2001 Pension Insurance Reform**

The aim of the 2001 reform was not to overtax present or future generations of contributors while also maintaining an acceptable level of pensions in the long term. Long term, i.e. a period of approximately thirty years, is to be understood in the sense of a sustainable policy envisaging a rate of contributions that is not unfair on the generation of those in gainful employment. At the same time, guarantees have been put in place to ensure that statutory pension insurance, supplemented by private insurance for which tax relief is available, will give future generations of pensioners the ability to maintain approximately the same standard of living they had had in their working life as a whole.

The federal subsidy to the statutory pension scheme that has been increased as a result of the eco tax reform serves to make a lump-sum contribution to benefits

provided by the statutory insurance scheme that are not covered by contributions and to reduce ancillary wage costs.

The rate of contributions was reduced at the time of the reform to under 20 per cent and is now 19.9 per cent. The act envisages a contributory rate of a maximum of 20 per cent until 2020 and a maximum rate of 22 per cent until 2030.

An important aspect of this reform was the introduction of additional fully-funded pension plans eligible for tax relief. The second and third pillars (company and private pension insurance schemes) are being strengthened as a further supplement to the first pillar (statutory pension insurance); however they are not intended to replace the first pillar.

Assistance is fundamentally given to all compulsory members of the statutory pension insurance scheme, i.e. also to apprentices and trainees, the unemployed, persons not in gainful employment in the three-year period of leave allowed for raising children persons performing military service or alternative forms of service, self-employed persons who are compulsory members of statutory schemes and persons in threshold employment (part-time low-paid employment) who have waived exemption from social security contributions, members of the German civil service and public sector employees.

Promotion of fully-funded private pension schemes takes the form of subsidies and tax relief. The scheme will be extended until 2008 and is primarily intended to assist families with children and those in the low income brackets.

The regulatory framework in the area of company pensions has been substantially improved: specifically by introduction of an individual entitlement of employees to a company pension in the form of conversion of income indices, exemption of pension contributions and savings from taxes and social security contributions as well as improvements in the possibilities of transferring claims when changing employer.

The continued policy of linking income and pensions will ensure that pensioners have a stake in economic growth in line with wage development.

By taking the changes in the pension contributions of those currently in employment into consideration in the adjustment formula, there will inevitably be checks on pension increases. As a result, while the level of pensions will fall moderately in the long term, legislation has been put in place to ensure that levels remain acceptable.

Lowering the level of statutory pensions is being compensated for by financial assistance given to supplementary, fully funded pension schemes.

At the same time, elements of solidarity have been perceptibly increased within the statutory system – particularly with regard to pensions for women.

In order to ease the consequences in terms of pensions arising from low income indices, the pension entitlements of persons raising children who in the qualifying period are in gainful employment while raising children (up to the age of 10), work primarily part-time and therefore earn less than average have been increased from 50 percent to a maximum of 100 per cent of average income. Persons raising children who are unable to take up regular employment in order to look after a child in need of nursing care also benefit from this until the child reaches the age of 18.

Comparable provisions exist for persons raising children who, as they are raising two or more children at the same time, cannot take up even part-time employment on a regular basis.

Periods spent raising children will also be taken into consideration in future in pensions for surviving dependents. The general rate of 55 per cent upon which a widow's pension is based will be increased by a child component (increment per child).

In order to improve the pension situation of women, spouses will have the opportunity to share the pension entitlements they have acquired during their marriage on a partnership basis. This means that the conventional system of providing for a spouse or surviving dependent (pension and surviving dependents pension) can be replaced by splitting the pension entitlements acquired during the marriage. This form of splitting generally results in women having higher pension entitlements of their own.

### **2004 Act on Pension Sustainability**

Demographic change and future developments in employment made adjustments to the 2001 pension insurance reform necessary. Measures designed to take effect in both the medium-term and the long-term were taken to ensure the continued sustainability of financing. Another aspect was to find a means of maintaining existing levels of employment and also creating new jobs.

An important aspect of the adjustment was the need to take the proportion of the number of pensioners to those paying contributions into consideration. In other words, pensioners will also have to play their part in shouldering the negative effects of demographic development.

Specific measures include the following:

- Modification of the pension adjustment formula by introduction of a sustainability factor which takes the relationship between those drawing pension benefits and those in employment and paying contributions into consideration. A protection clause ensures that in the case of developments in wages that fall below expectations the sustainability factor cannot – just as consideration of the changing provisions for pensions on the part of employees in the case of the pension adjustment reform – lead to decreases in pensions.
- Linking the rate of pension increments during the pension period to gross wages and salaries upon which contributions are payable.
- Legislation containing a clause to secure pension levels long term. The minimum pre-tax level will be 46 per cent until 2020 and 43 per cent until 2030. In other words, this minimum pre-tax level will have the same value as the contribution objectives named in the law, namely 20 per cent until 2020 and 23 per cent until 2030. The Federal Government is required to make proposals to parliament if it is foreseeable that these objectives will not be met. The minimum level serves as a lower ceiling.

However the aim is to achieve a level above 43 per cent in the years beyond 2020 as well.

For this reason, the Pension Insurance Sustainability Act commits the Federal Government to making proposals to parliament every four years aimed at maintaining the guaranteed pre-tax level of 46 per cent beyond 2020 while also keeping the rate of contributions stable.

- Raising the earliest age at which retirement pensions can be drawn prematurely on account of unemployment or part-time work only in later working life to the age of 63.
- Introducing the obligation of the Federal Government to draw up a report for 2008 on the framework conditions for raising the general age of retirement.
- Converting the fluctuation reserve fund of the statutory pension insurance scheme into a sustainability reserve fund by raising the upper target level of the fluctuation reserve fund to payments for 1.5 months.

### **Act to Adjust the General Retirement Age to Demographic Developments**

The following measures have been decided in the statutory pension insurance scheme with the aim of keeping the rate of contributions stable and guaranteeing the level of benefits:

- Gradually raising the general age of retirement to 67 as of 2012 beginning with those born in 1947 until 2029 and corresponding increases in the case of qualification for other forms of pensions as well as introduction of a new full retirement pension at the age of 65 for persons who have made contributions for at least 45 years based on employment, self-employment, provision of care or raising a child up to the age of 10.
- Modification of the protection clause in the pension adjustment: Adjustments not carried out since 2005 due to the need to curtail increments will take effect retroactively as of 2011, if positive developments in wages make pension increases possible.

However, increases in the ages at which a pension may be drawn may not in any circumstances be seen entirely as an instrument to achieve sustainable financing of the statutory pension insurance scheme.

This measure is to be understood as part of long-term strategy and in this context as an unmistakable message to society and the economy. What is required is rethinking in the attitude towards older employees and concrete changes in approach. The objectives of the measure are intended to

- increase the employment potential of older persons
- counteract the threatened lack of skilled labour
- make greater use of the knowledge and experience of older persons, and in this way
- accomplish greater economic growth, thereby securing and increasing prosperity.

### **Periods of Leave to Raise Young Children Count towards Pensions**

In order to recognise and promote the periods spent raising and looking after a child in his or her early years – an activity primarily carried out by women – as being on a par with employment outside the home, child raising periods as follows are taken into consideration when pensions are computed: one year in the case of births before 1991, up to three years in the case of births as of 1992. These periods count as 100 per cent of average income. The contributions are paid by the state.

Recognition of child-raising periods in the statutory pension insurance scheme was a decisive breakthrough towards recognising the contribution played by raising children in a family and is also a vital contribution to improving the independent social security of women.

### **Recognition of Periods of Nursing Care Work**

Social security for persons providing nursing care work has been substantially greater since 01 April 1995. Periods of providing nursing care on an honorary or non-professional basis (at least 14 hours per week) also count as qualifying periods for a pension as well as a basis for increasing a pension.

The periods are weighted according to the degree of need for nursing care and the extent of nursing care provided.

### **Basic Security in Old Age and in the Case of Decreased Earning Capacity (Social Security Code XII)**

This basic security is intended to ensure that persons who are entirely unable to earn a living have socio-cultural security independent of parental support. Basic security in old age and in the case of decreased earning capacity was included in the revised Book Twelve of the German Social Security Code that came into effect on 01 January 2005. The provisions of the previous act on means-tested basic security in old age and in the case of decreased earnings capacity were included in Book Twelve of the Social Security Code as a Fourth Chapter virtually unchanged.

Persons entitled to benefits are those aged 65 or older as well as persons over the age of 18 with a permanent incapacity to earn a living who are unable to achieve socio-cultural security from either income or capital and do not receive any or only insufficient financial support from adults with whom they share a household.

Basic security in old age and in the case of reduced earning capacity ensures a socio-cultural minimum living standard. In addition to ensuring that day-to-day needs can be met, adequate participation in social and community life is also provided for.

In this connection the option of recourse to parents or children for repayment of welfare benefits has been dropped except in cases in which such parents or children have income in excess of €100,000.00 per annum. In other words, parents or children who have substantial financial means at their disposal are not to be released from a duty to support each other at the expense of the taxpayer; however, welfare benefits may still be claimed, while recourse will be made to their family members. In the case of older persons women profit from basic security to a greater extent than men. This is due to their lower benefits in old age as well the greater average life expectancy of women.

### **The 2003 Health System Reform**

By means of the 2003 health system reform (see p. 89), the Federal Government ensured that all insured persons were entitled to the same necessary medical treatment irrespective of age, gender or income.

The risk of illness was covered by statutory health insurance for around 90 per cent of the population of the Federal Republic of Germany. The remaining 10 per cent was either insured through special schemes or privately; only an insignificant 0.2 per cent was without any health insurance for a variety of reasons. In cases of hardship the state assumed the cost of necessary medical treatment

## **The 2007 Health System Reform**

The Act on Strengthening Competition in Public Health Insurance (GKV-WSG) Insurance was a further step in providing a health service that is both efficient and affordable and has provided universal access to high-quality health care.

In future all persons resident in the Federal Republic of Germany will have insurance in the case of sickness. As of 1 January 2009, everyone resident in the Federal Republic of Germany will for the first time in the history of German social security be obliged to take out health insurance if they have no other means of protecting themselves against the financial consequences of sickness. This applies irrespective of the form of insurance - public or private (see p. 89)

### **3. Statement of the Federal States**

The federal states have little influence on social security systems. The right to structure such systems lies primarily with the Federal Government. Even so, the reforms of the social security systems carried out in the last few years have substantially had the endorsement of the federal states. The introduction of nursing care insurance has primarily taken the financial pressure off local authorities.

### **4. Statement on the Part of Civil Society**

**Reforms to ensure long-term stabilisation of social security systems are overdue. Even so, the ensuing burdens may not all be placed upon senior citizens, but must be shared by all sections of the population and generations fairly.**

The financial situation of older persons has improved in comparison to that of their parents. However, these achievements are jeopardized on account of the need of the public sector to practise austerity, the high unemployment rate – particularly among those over 50 – and the sacrifices expected of pensioners. Furthermore the gap between a majority living in happy prosperity and those who have to manage on meagre incomes is growing. A further factor to be borne on mind is the regional differences between the eastern and western parts of Germany. Measures to adjust social security systems to demographic change may not aggravate these differences further but should have acceptable standards of living for everyone as their goal.

In its statements on the cuts in pension, health and nursing care insurance, the Confederation of Senior Citizens' Organisations has drawn attention to the disproportionate cuts to the disadvantage of the older generation. While it sees the need for reform, it also calls for an equitable distribution of burdens and responsibilities among all members of society and generations. It calls for strategy designed to provide the legislative process and the resulting decisions with transparency.

The reforms that are necessary should also not be approached in terms of fiscal policy only, but also with a view to improving life situations, particularly those of older persons on low incomes. This particularly applies to measures designed to further privatise provisions for old-age pensions or increase the degree of retained risk in



health insurance that are disproportionately inequitable to persons with an interrupted history of earnings. A factor to be taken into account is that persons approaching retirement age have little to hardly any opportunity of taking out supplementary insurance on affordable conditions.

We categorically make reference to the problem of poverty in old age, something that particularly effects elderly women who are only entitled to a widow's pension and men who were either unemployed or unable to work on medical grounds for an extended period. Addressing these problems and finding solutions must be of central concern to all those who hold political office.

## **COMMITMENT V**

### **TO ENABLE LABOUR MARKETS TO RESPOND TO THE ECONOMIC AND SOCIAL CONSEQUENCES OF POPULATION AGEING**

32. *The challenges of population ageing can best be met by adjusting policies over a wide range of economic and social sectors and activities, and especially those that support higher rates of economic growth and employment. Appropriate labour market policies are likely to prove one of the most effective ways of responding to the economic challenge of ageing populations. Unemployment is an obvious waste of productive resources (not to mention a burden on the social security system) and creating a situation of full employment will help to raise the total resources available in any given economy.*

33. *Increasing the awareness of the benefits of including older persons in the workforce and eliminating age barriers and discrimination in recruitment and employment of older workers is a priority. Higher rates of economic participation should involve fostering the creation of job opportunities for older persons, including by tackling discriminatory employer practices and other impediments.*

34. *The size of the labour force can also be increased by encouraging higher rates of labour force participation among older women and men. Bringing actual retirement ages closer to those pension eligibility ages in the statutory old age pension schemes of individual countries could make it unnecessary to change this pension eligibility age. Measures should be taken in order to accommodate the employment needs of older persons such as the improvements of opportunities for part-time or temporary employment for that group.*

35. *Efforts should be stepped up to increase opportunities for older persons to remain in the labour market, for instance, through flexible and gradual retirement formulas and guaranteeing a real access to life-long learning. A progressive increase in effective average age at which people stop working should be sought. It is also essential to remove disincentives for women's participation in the labour force. Particular emphasis should be made on incentives for engaging older persons in small- and medium-sized enterprises, including family businesses, and broader use of Information and Communication Technology for provision of job opportunities for this group.*

36. *Labour migration from abroad can sometimes help to overcome particular labour or skill shortages but it cannot be considered as a solution to the issue of population ageing. It is undoubtedly an element to be taken into account when it comes to designing adequate strategies for economic growth and full employment. However if immigration of highly skilled labour is widely encouraged, it is likely that a significant proportion of these workers would migrate from countries that could ill afford to lose their contribution to the development process. Migration policies should be based on a broad assessment of economic, social and regional interests.*

37. *In many countries, migrant workers who arrived in earlier decades in the host country are now growing older. Special needs of ageing migrants should be taken into consideration, as appropriate, and consistent with national laws in the design and implementation of integration programmes to facilitate their participation in the*

social, cultural and economic life of countries of destination. As migrants and as older persons, they may face further disadvantages, which may be exacerbated by poor economic conditions. Governments should strive to develop measures to assist older migrants to sustain economic and health security. It is especially important to promote a positive image of their contribution to the host country and respect for their cultural differences.

38. In a highly competitive, global environment, improving productivity growth and shifting the structure of output towards higher value-added (“high tech”) activities will require investments in the skills and educational levels of the labour force i.e. an increase in human capital. Appropriate levels of education for those entering employment and maintaining and upgrading the skills of all those in work or returning to work are crucial for preserving competitiveness and full employment.

The following policy objectives should be met as part of this commitment:

*Seek a significant reduction in rates of unemployment, especially for older persons*

39. Measures to promote access to employment opportunities and reduce unemployment rates, especially for older persons, are necessary; such measures may vary to accommodate different circumstances. One option is to implement active labour market policies, such as job matching, job-search assistance, training, vocational guidance, counselling, and so on. Further, efforts aimed at shaping educational curricula to respond to labour market needs and at easing the transition between formal education and work can help promote employment. Measures to reduce non-wage labour costs while protecting workers’ rights can also have beneficial effects on employment levels. Other factors weakening the demand for labour, such as barriers to new business start-ups and regulations imposing heavy administrative costs on employers, should be carefully scrutinised and, where possible, eased.

*Improve the employability of older workers*

40. Employment difficulties faced by older workers often derive from an insufficient level of skills. Employability of older workers should be improved through vocational guidance and vocational training, based on life-long learning. Life-long learning is a long-term preventive strategy far broader than just providing second chance education for those adults who did not receive quality education and training earlier in life. It is also about delivering job-relevant learning to enable workers to adjust to changing labour markets and building the foundations for further learning. Employers should be encouraged to enable their employees to retrain and reskill through life-long learning. Other measures to improve the employability of older workers should focus on improving working conditions.

*Raise participation rates for all women and men*

41. Improve care facilities and introduce arrangements, which make it easier for all workers, women and men, to combine work and family responsibilities. Remove barriers and disincentives to work longer, including the incentives that encourage

*early retirement, promote the rehabilitation of workers with disabilities and their re-integration in the labour force, promote better training of older workers, and take measures against age discrimination. Review financial and other disincentives to the participation of retired persons in part-time or temporary employment. Increase through economic policy and incentives employment opportunities for persons living in rural and remote areas, in particular encouraging their distance learning and training.*

42. *Concerted measures are needed to increase labour force participation of women. These measures should aim to further broaden their job opportunities, better reconcile the professional and family responsibilities, and avoid discriminatory situations with regard to pension benefits or personal income experienced by many women. Important ways to achieve this are suitable education and training, including on-the-job training, job counselling and allowing for flexible work arrangements.*

*Take steps to raise the average effective age at which people stop working and make retirement more flexible and gradual*

43. *Labour market structures and economic policies should be promoted together with social protection systems that offer incentives for the participation of older workers, so that workers are not encouraged to take up early retirement and are not penalised for staying in the labour market as long as they wish and that pension systems and working arrangements facilitate the option of gradual retirement. Retirement should not be seen as a stage in one's lifetime, which hinders or stops the retiree from continuing being creative and capable of contributing to society. In the case of those who opt to retire, every effort should be made to promote a smooth and gradual transition from one type of life to another.*

## ***Labour Markets***

### **1. Statement of the Federal Government**

The Federal Government supports Commitment V, namely that a successful response to the challenges of population ageing will depend upon maintaining **employment levels and increasing economic growth**. This includes making greater use of the **potential older persons have** to offer both the economy and society generally. Rethinking is called for on the part of all actors.

The Federal Government has therefore initiated wide-reaching reforms that will have a sustained effect. **Keeping older persons in work** will benefit the labour market.

Unemployment is not only difficult for those affected, it also places burdens on the public purse and social security systems. The overriding prerequisite for higher employment – the Federal Government espouses Commitment V – is **achieving economic growth**. This is the only means of creating more jobs.

The Federal Government introduced a wide range of measures and policies in the last legislative period. **Legislation on modern services on the labour market** forms the strategic core.

The Federal Government is continuing to develop the **National Sustainability Strategy**. Its objective is to link the **needs of the present generation with the opportunities available to those to come** and to shape long-term development in a way that it is equitable for all concerned.

Given the demographic change taking place, older persons will have to play a more active role and assume more **responsibility in work processes and society** than has so far been the case. Only 59.5 per cent of those aged between 55 and 59 are at present in gainful employment and only 22.7 per cent of those aged between 60 and 64. The percentage of women in gainful employment is just 50 per cent in the case of those aged between 55 and 59 and 15 per cent in the case of those aged between 60 and 64.

It cannot be denied that there are two **contrary developments** here: On the one hand, the growing **lack of skilled labour** in the years ahead will slow economic development down unless older persons are given the opportunity to contribute their knowledge and skills and their capacity for work. On the other hand, current practice is to **dismiss older persons**. Rethinking and new policies are clearly called for.

The new regulatory framework has effectively raised the retirement age considerably. The average age of retirement rose by one year between 1998 and 2005. It was 63.2 in 2005 (not taking those with reduced earning capacity into account) in comparison with 62.2 in 1998. The difference between the numbers of older men and women (aged between 60 and 65) in employment still remains particularly large: 20.7 per cent in the case of women as opposed to 35.8 per cent in the case of men; albeit the number of women in employment in comparison with men has almost doubled since 1988: 11.3 per cent compared with 27.0 per cent.

The **Act to Adjust the General Retirement Age to Demographic Developments** and to Strengthen the Financial Bases of the Statutory Pension Insurance Scheme has raised the general age of retirement. Starting in 2012 and beginning with those born in 1947 it is to be raised gradually to the age of 67 by 2029. Persons with a qualifying period of 45 years will still be able to retire and draw a pension at 65 without any deductions.

With the measures and policies it has adopted the Federal Government aims to achieve the goal set by the European Union in the context of the **Lisbon Strategy**, namely to raise the **percentage of older persons in employment** (aged 55 to 64) to **50 per cent by 2010**. International experience shows that this calls for a package of co-ordinated measures in the areas of employment, education and health and that efforts will be needed to improve the employability and reintegration into the workforce of older employees. The success of this will depend on the **combined efforts of the economy, the social partners, i.e. the two sides of industry, the federal states and the regions**.

**Qualifications and health** are the key factors for the ability or willingness of older persons to remain in employment. The Federal Government has introduced a **paradigm change in its employment policy** for older workers by reducing **incentives to take early retirement** and **promoting the employment and further training of older members of the labour force** and **reducing prejudices regarding the qualifications, capacity and willingness** of older employees to work. The Federal Government has also put measures in place to ensure that in the case of employees who have become sick the emphasis is on enabling them to return to work. This is a move in conformity with the policy objectives of Commitment V.

Examples designed to achieve this objective include legislation on modern services on the labour market, the Labour Market Reform Act as well as the Part-Time and Fixed-Term Employment Act, the Pension Insurance Sustainability Act and legislation designed to adjust the minimum pensionable age in line with demographic change and to place the statutory pension insurance systems on a sounder financial footing.

The ideas competition “Opportunities for the Over-Fifties – Employment Pacts for Older Persons in the Regions” promotes regional projects designed to reintegrate long-term unemployed persons over the age of 50 into working life, while a federal government programme designed to create 30,000 additional jobs for older persons – employment opportunities with compensation **supports long-term unemployed men and women over the age of 58** with employment opportunities over a three-year period.

As part of the “50plus Initiative”, the Bundestag (Federal Parliament) has passed **legislation designed to improve the employment opportunities of older persons (Gesetz zur Verbesserung der Beschäftigungschancen älterer Menschen)**. The act addresses aspects of labour law and legislation on the promotion of employment.

## **2. Measures of the Federal Government**

### **Legislation on Modern Services on the Labour Market**

The labour market reforms include the following policies designed to reintegrate older employees into working life:

- **Guaranteed income:**  
This is designed to give persons over the age of fifty who are either unemployed or facing unemployment additional incentives to rejoin the labour force. As taking up new employment making contributions to the statutory pension insurance scheme mandatory often means financial disadvantages in comparison with the

income from previous periods of employment, the net difference in pay is partly offset by an increase in insured income for a limited period.

- Exemption from contributions to unemployment insurance:  
Employers who recruit an unemployed person over the age of 55 for the first time are exempted from unemployment contributions.
- Wage subsidies:  
Subsidies designed to integrate employees over the age of 50 can now be granted for a maximum of 36 months instead of the present 12 months.
- Further training and refresher courses:  
Qualification of employees aged 50 or over in SMEs is promoted if the employer continues to pay wages. Increasing the rate of participation of older employees in further training is a decisive prerequisite for ensuring that they remain employable in the later stage of the working life.
- Job-creation schemes:  
Job-creation schemes for employees aged 55 are eligible for promotion for a period of up to 36 months (instead of the previous maximum of 12 months only).

### **Part-Time and Fixed-Term Employment Act**

The possibility of concluding fixed-term employment contracts with employees over the age of 52 has been written into law. A further criterion envisaged for a fixed-term contract of employment in addition to the age criterion is that the employee in question was unemployed for at least four months immediately prior to taking up fixed-term employment.

This provision of law is in line with EU legislation.

### **50plus Initiative**

This Federal Government programme is designed to create an image of older age as a productive stage of life.

It seeks to change attitudes, particularly on the part of employees, and to reduce prejudice regarding the qualifications and skills and capacity for work on the part of older employees.

The Federal Government has combined measures already in place with new ones to create an effective programme and concentrated its labour market policy instruments to promote the employment of older persons and implemented this in the Act on Improving Employment Opportunities of Older Persons.

### **Act to Improve the Employment Opportunities of Older Persons**

The Act to Improve the Employment Opportunities of Older Persons came into force on 01 May 2007 and is part of the 50plus Initiative of the Federal Government.

The labour law and labour law promotion measures it envisages are intended to improve the employment opportunities of older persons and decrease long-term unemployment. They are also designed to flank the gradual transition to raising the age of retirement to 67.

Specifically legislation contains the following provisions designed to improve the employment opportunities of older persons:

- Vocational further training of employees in SMEs will still be promoted. Employees aged 45 or over in enterprises with fewer than 250 employees (previously employees aged 50 or over in enterprises with up to 100 employees) are entitled to reimbursement of further training costs. This takes the form of a further training voucher that will be accepted by any certified further training centre.
- Introduction of a new subsidised wage model gives employees aged 50 or over who take up lower paid employment and are still entitled to an unemployment benefit for at least 120 days a legal claim to partial equalisation of the difference between their net pay prior to unemployment and net pay in their new employment for which social security contributions are mandatory (income assurance). The net income difference is equalised by 50 per cent in the first year and 30 per cent in the second year. Contributions to statutory pension insurance payable on the basis of new employment are subsidised to up to 90 per cent of previous contributions.
- Employers recruiting workers aged 50 or over who were unemployed in the preceding six months, had taken part in specified labour market programmes or have personal difficulties preventing them from actively seeking employment can obtain integration subsidies for a minimum of one year and a maximum of three years of between 30 and a maximum of 50 per cent of wage costs. The prerequisite is a minimum one-year period of employment. There are further provisions in the case of recruitment of older persons with serious disabilities.
- New provisions governing fixed-term contracts of employment for employers aged 52 or over have been introduced. The prerequisite for a fixed-term employment contract without material reason is that the employee in question was unemployed for at least a four-month period prior to taking up fixed-term employment, had received transfer benefits for having to work short time or taken part in a publicly assisted employment programme or job-creation scheme. The maximum term of fixed employment with one and the same employer is five years. In other words, this new legislation is in conformity with the requirements set out by the European Court of Justice that had declared the previous version of Section 14 para. 3 of the Part-Time and Fixed-Term Employment Act to be in breach of the ban on discrimination on account of age to be non-applicable as it was in conflict with EU legislation.

### **Public Relations Work on Labour Market Policies and Issues**

Various public relations instruments have been put in place in order to provide individual information on harmonising family life and holding down a job.

- The web site of the Federal Ministry of Labour and Social Affairs <http://www.bmas.bund.de/> provides detailed information on the topic of part-time employment.
- The "New Quality of Work" campaign provides practical information on the consequences of demographic change for enterprises. The "30-40-50plus, Working and Ageing" campaign is an active forum for enterprises seeking to share their knowledge, experience and activities designed to improve the employability of older persons wanting to make their own contributions.
- The citizens' hotline of the Federal Ministry of Labour and Social Affairs provides individual information and advice (if requested anonymously) on matters relating to



part-time work and part-time work for older employees and its financial and legal aspects

- A calculator in the form of a DVD enables employees to calculate their income individually if their hours of work are reduced on account of part-time work or they work part time as an older employee. The DVD also includes films in sign language giving persons with a hearing disability information on part-time employment.

### **The Campaign “New Quality of Work”**

The objectives of this campaign launched by the Federal Government in 2002 in association with various partners and the business community include promoting the employability of older persons and supporting enterprises to enable them to make use of and expand their capacity for employment. Approximately 30,000 enterprises have already taken part in the campaign.

The “30-40-50plus, Working and Ageing” forum of experts supports enterprises in creating working conditions that reflect the needs of older employees, sustainable policies on human resources and health and safety at work and advocates lifelong learning for all employees.

A business network that concerns itself with the challenges posed by demographic change has been launched. The “Demography Network” was established as a society in 2006. The objectives of its members are to make demographic change a matter requiring executive decisions, i.e. not just a matter for debate, but one to be given a direction and made quantifiable, to see it as an opportunity and a chance to learn. (<http://inqa.de>)

### **“First and Second Demography Campaign”**

This campaign promoted by the Federal Ministry of Education and Research between 2002 and 2006 developed management instruments designed to provide responses to demographic change.

Approximately 100 best-practice cases served to create a “toolbox” which was published in the form of a brochure and a web portal ([www.demowerkzeuge.de](http://www.demowerkzeuge.de))

The objectives include:

- Raising the awareness of private employment agencies (e.g. agencies providing part-time and temporary staff) with a view to placing larger numbers of older persons in employment,
- Innovative further training management in software development in order to increase the duration of employment and reduce the shortage of skilled labour,
- Enabling employees to carry out activities that reflect their health needs and offering career opportunities designed to lengthen the period of active working life,
- Early recognition of problems based on age structure with a view to planning a balanced age mix and improvement of working relationships between young and old,
- Activating other actors (e.g. training institutes and organisations, chambers of commerce, statutory occupational accident insurance and protection schemes and trade unions) with a view to promoting and supporting forms of employment reflecting the needs of the employees in question.

### **The Campaign “Experience Means Future”**

The inter-ministerial “Experience of the Future” campaign launched in 2004 seeks to address the challenges of demographic change and campaigns for a new conception of age and ageing. The Federal Government and the co-initiators – the Confederation of German Trade Unions, the Confederation of German Employers’ Associations, the Central Organisation of the German Chambers of Commerce and Industry], the German Confederation of Skilled Crafts, the Confederation of Independent Welfare Organisations, the German Olympic Sports Association– have made it policy to show the prospects and opportunities of an ageing society and work together to accomplish the necessary reforms and changes. Existing and new activities in the areas of employment, start-ups, lifelong learning, health care and voluntary or honorary activities are to be brought into focus and networked. Those involved are seeking to share experience, make use of synergetic effects and provide new ideas.

The campaign supports the debate in society on the potential older persons to contribute to social and economic development. Actively involving them in the work process until they reach the general age of retirement not only makes better use of their potential, but also ensures a transfer of experience and knowledge from generation to generation. This is to the advantage of all concerned and the business community in particular. In future it will only be possible to provide a successful response to challenges facing society and the economy provided that older persons have a part to play and greater recourse is made to their experience and skills.

[www.erfahrung-ist-zukunft.de](http://www.erfahrung-ist-zukunft.de)

### **The Transfer Project “Public Relations and Marketing Strategy for Demographic Change”**

This project was the precursor of the “First and Second Demography Campaign” ([www.demotrans.de](http://www.demotrans.de)) (see p. 64) and was incorporated into the “Experience Means Future” - campaign.

This project of the Federal Ministry of Education and Research that ran between 1999 and 2003 provided a forum for experts in their field to provide information and advice for enterprises as well as trade unions and other relevant organisations. They worked together to develop solutions that could be put in place in actual practice.

### **Integration into the Labour Market of Persons of Foreign Origin**

The Immigration Act that came into force in 2005 is to be understood as a contribution to facilitating the opportunities of immigrants to access the German labour market and also providing its labour markets with support in using their potential that persons of foreign origin have to offer.

Legislation enables immigrants intending to settle in the Federal Republic of Germany permanently to take part in an integration course offering 600 hundred hours of instruction in the German language and a 30-hour-course providing instruction on the German constitution and its legal system as well as the history of Germany and its culture. Ideas to further improve these courses are currently under review.

### **Integration into the Labour Market of Persons with Disabilities**

With the Act to Promote the Training and Employment of the Severely Disabled that became law in 2004 the Federal Government has made a further contribution to improving the integration of the disabled and in this context also launched the “Employment – Jobs without Borders” campaign. One of the objectives of this campaign was to increase the employment opportunities for the severely disabled – particularly in SMEs – and to strengthen measures taken at company level to preserve and promote the health and abilities of all employees in the long term.

### **“Independence in Old Age – Services and Technologies”**

As part of the German research forum the Federal Ministry of Education and Research has supported forward-looking activities designed to preserve and secure a high level of participation of persons in social and economic life well into older life. This took place in the context of the debate on the standard deficit model of old age and establishment of a new definition focussing on the potential and opportunities of old age, ageing and a society that is ageing.

Research and development have provided the requisite services and technologies.

The following objectives were to be achieved:

- new markets for senior citizens by generating innovative services and technologies,
- strengthening the innovativeness of the “silver economy” by means of research and development,
- cooperation and partnerships aimed at promoting networks between organisations, state and regulatory bodies, intermediary bodies, technology developers and consumer organisations.

### **3. Statement of the Federal States**

Labour market policy is largely the responsibility of the Federal Government, which has, for example, passed a total of four acts designed to introduce modern services on the labour market. There are also areas in which the federal states have a say, e.g. legislation on civil servants taking early retirement or creating flexible working time for employees with family commitments (working time accounts, telework).

To the extent that they are required by law the federal governments play an active role in shaping labour market policy. A central aspect of their endeavours is to improve employability. Here the federal states abide by the criteria of European employment strategy that has named investment in employability as a central challenge for a successful, knowledge-based economy. In addition, support is given to older unemployed persons who start up a business of their own.

Measures can be co-financed through the European Social Fund. This is the most important financing instrument at European level providing funds to achieve the objectives of the European Employment Strategy: protecting jobs and promoting employment and combating unemployment, discrimination and marginalisation.

Ensuring the availability of skilled workers in both the medium and the long-term is also one of the responsibilities of the federal states. This is an issue of even greater

concern in the new federal states as the migration of large numbers of skilled workers is a serious threat to the attractiveness of east Germany as a place to do business, work and live. In contrast, the federal state of the Saarland anticipates an increase in the numbers of “commuters” from the region of Lorraine that like other regions of France has a comparatively young population structure.

The federal states have initiated projects and programmes intended to make enterprises aware of the opportunities and risks posed by demographic change and provide examples of good practice. Examples include the campaign for “Employment and Innovation in Response to Demographic Change” launched by the North Rhine-Westphalia Ministry of Labour with the backing of its social partners and the ideas competition launched in Brandenburg and Saxony with the objective of ensuring the demand for skilled labour. Particularly in SMEs where early retirement programmes have not had the same effect as in large companies opportunities exist that will enable older unemployed persons to be reintegrated into the labour market.

The federal states contribute to financing of structural adjustment measures for older unemployed persons pursuant to Section 272 et seq. of the German Social Security Code III.

Specific projects have been put in place in order to meet the demand for nursing care in our ageing society.

#### **4. Statement on the Part of Civil Society**

**The number of years spent in employment in Germany needs to be increased in the long term. This can take the form of shorter apprenticeship periods or an average increase in the age of retirement. An increase in the statutory age of retirement will only be possible if the employment opportunities of older workers in particular are improved.**

Enterprises need to understand that older employees have special qualities and to work with the ageing sections of their workforce as productively as possible. The most important prerequisite is creating working conditions that are conducive to health and providing necessary further training.

If types of work can only be carried out to a limited extent given their taxing physical or psychological nature, enterprises should offer their employees other career options. This can also include the possibility of self-employment.

Suitable human resource policies need to be adopted, in particular in the form of regular further training, in order to preserve the employability of individual workers for as long as possible. A prerequisite would be dovetailing basic vocational training and further vocational training. For example, the need for lifelong learning should be made evident during basic training.

Total life working times need to be taken into consideration when retirement ages are set. Different models for retiring need to be remain in place in the future.

Models allowing flexibility in working life giving more room for manoeuvre in the phase of raising a family or providing nursing care for a family member need to be realised and encouraged. Part-time employment models that make sense also need to be developed. These can also take the form of civic commitment at a place of employment or elsewhere.

Incentives to take early retirement need to be eliminated. Instead policies are required that offer incentives to remain in employment and in particular encourage recruitment of older employees.

When looking at the labour market and vocational training the social partners need to address the challenges posed by an ageing society. Abandoning the seniority principle in new collective agreements in the public-service sector is a step in the right direction. Regulatory conditions also need to reflect the changes on the labour market.

It is one of the responsibilities of the media to improve the image of older employees by reporting increasingly on positive examples of employing older persons.

## **COMMITMENT VI**

### **TO PROMOTE LIFE-LONG LEARNING AND ADAPT THE EDUCATIONAL SYSTEM IN ORDER TO MEET THE CHANGING ECONOMIC, SOCIAL AND DEMOGRAPHIC CONDITIONS**

44. *Contemporary societies require efficient, well-funded and comprehensive educational systems, to respond to social, economic and demographic changes. These changes affect all aspects of education, including, among others, allocation and distribution of educational materials, financial and human resources, infrastructure, curricula and programmes. This requires more emphasis on providing high quality education at all ages and on treating learners as active participants. Training programmes, especially on new technologies, are particularly relevant in this context. Addressing the needs of education for older persons requires specific strategies as well as practical measures.*

45. *Those who work with older persons should receive basic training and retraining for their tasks. Education and training should be multi-disciplinary in nature and should not be restricted to high levels of specialisation but should be made available to all levels and for different functions in the field of ageing. Older persons themselves need to be trained in self-care and other areas relevant to maintaining their quality of life.*

46. *The traditional ordering of education, work and retirement is no longer valid. The education system will necessarily have to be adapted in order to support increased flexibility during the life course.*

47. *The population of the UNECE countries are now better educated than ever before and older persons are potential resources for educational and other programmes for the exchange of knowledge and experience. Nevertheless, many challenges still face the educational systems. Promoting ways to eradicate functional illiteracy and to improve basic education levels of older persons, including older migrants and older members of minorities, vocational training, and adult and late-life education should be recognised as a productive investment, which not only results in positive returns in terms of economic growth, but also improves the quality of life and overall social development of older persons. In this regard, the role played by educational institutions for older persons, such as by universities of the third age, needs to be further recognised and supported. These, in a number of countries, have proved to be important means of enabling participation and involvement of older persons in society. Also, the discrepancy between the knowledge and skills that younger persons obtain in the educational system and the exigencies of the economy ought to be recognised and addressed, as this will affect positively all age groups. It will, *inter alia*, enable younger persons to enter more easily the labour market, relieving the problems created by the decline in the ratio between the economically active and non-active population, which affects adversely the social security system.*

48. *The following objectives need to be met in order to fulfil this commitment:*

*Facilitate and encourage life-long learning*

49. *Besides promoting employability of older workers through access to professional training and retraining, it is necessary to adjust education institutions to*

*the needs of persons in retirement including early retirement. In order to prepare those who are about to retire, pre-retirement programmes need to be provided to help them adapt to changes in their lifestyle and to adjust to these changes. The need to find an alternative purpose in life through new interests and occupations should be taken into account in adult educational schemes.*

50. *Onsite learning methods by trainers should be developed, where appropriate, to teach older persons the skills to handle technological tools for daily life, to use the new communication technologies, and to train their cognitive, physical and sensory skills. Special consideration has to be given to training of trainers within the group of persons who care for older persons who live in institutional settings, or who provide community care services for older persons.*

51. *The increasing life-span and rapid social change pose specific challenges for the educational system, which need to be addressed as part of the work towards this objective. Special emphasis should be put on building awareness among learners of all ages of life choices and their short-term and long-term consequences in terms of life styles and career prospects. School curricula should take into account the need to prepare for lives of continuous change that require flexible attitudes and skills. These curricula should put particular emphasis on the strategies for making life choices. The importance of learning for innovation should be recognised by all actors involved and should be encouraged through targeted policies and programmes. To achieve this, new didactic methods need to be used.*

*Ensure that the educational system achieves better employability of all persons*

52. *It is important that formal schooling, besides transmitting human values and basic skills, meets the needs of a competitive, knowledge-based economy and the needs of young people preparing to enter the labour market, or for those wishing to upgrade their skills. Therefore actions should be taken to establish closer links between educational institutions and employers and encourage employers to provide on-the-job training. Policy actions should be taken to increase – within the concept of life-long learning – the employability of older persons, thus supporting them to maintain and further develop their specific knowledge and skills.*

53. *Education programmes should be developed, recognised and made available to everyone at all ages. Measures should be taken to encourage regular participation in school life in all its aspects to increase retention rates and limit dropouts. Special programmes should also be developed for those who have left the formal education system early in order to facilitate their integration/re-integration into the labour market. Poor education may have negative repercussions throughout the life course and lead to unemployment, difficulties to find qualified jobs, low payment and consequently bad standards of living. This may also lead to poor health, premature onset of disease and increased mortality rates.*

54. *Formal schooling, including educational and vocational training programmes should reinforce gender equality and avoid stereotyping roles. The specific actions to be undertaken could include introducing gender sensitive curricula, education and training for jobs with good prospects, specific programmes in order to motivate and empower girls and women to take up technological jobs as well as specific*

*programmes to prepare for re-entry into the labour market, in particular for older women.*



## *Education and Life-long Learning*

### **1. Statement of the Federal Government**

In the Federal Republic of Germany, owing to its federal structure, the responsibility for secondary and tertiary level education lies with the Federal States. The Federation itself is solely responsible for professional vocational training.

As set out in Commitment VI, the federal government sees **training as the basis of an individual's later working life and earning potential**, which will have a bearing on pension payments and quality of life after the end of the working phase.

No less important, in the view of the federal government, is life-long learning before and after the training stage. It can enable the individual to compete on the labour market and to play a part in shaping society. Learning in all stages of life is therefore becoming more and more important because it is connected with social integration and democratic participation.

For these reasons it is absolutely necessary, the federal government believes, for the training system to be open to all, for later training and retraining to be possible, and for informally acquired knowledge to be recognised. In the Federal Republic of Germany these structures are partly in existence already, being provided by a combination of schools and educational establishments in the public and private sectors that offer general, vocational and specialised training.

The federal government's policy as a whole aims at improving **educational opportunities, encouraging talent, creating incentives for life-long learning** and generally raising **quality in the educational system**. This is in line with what is stated in Commitment VI.

In the tried and tested **dual training system**, practical on-the-job learning is accompanied by the simultaneous conveying of theoretical knowledge in a **close combination of training in-house and at an educational establishment**. Here too the Federal Republic of Germany is in compliance with the specifications of Commitment VI.

**Life-long learning** is important if people are to be able to remain economically active longer. Today nobody can expect to keep working in a given field with skills acquired in his/her youth without impulses from the development of the economy, science and technology.

In the **Strategy for Life-long Learning in the Federal Republic of Germany** which is financed by the Federation and the Federal States, the integration of older people into our society is specified as an important task. The aim is that a new and positive image of older people comes to be generally accepted, with older people being perceived not as a burden on the welfare state, or as cut off from the development of society, but rather as an integral element which is of benefit to society.

**Qualification strategies and professional retraining measures** should not cease when the individual reaches the age of 50. Workers should be ready and willing to have a longer working life and should ensure their employability on their **own initiative** by means of **further training and retraining**. This increasingly requires re-orientation on the part of the individual, and a readiness to retrain in response to changing requirements on the labour market.

Public and private training and retraining establishments in the Federal Republic of Germany offer a wide range of programmes for personal development and

supplementary qualification – as does the **in-house retraining** financed by the federal government.

An older person learns in a different way to a young person. Didactics, methodology and subject matter need to be adapted to meet their particular needs. This approach of the federal government is in line with Commitment VI.

Additionally it is important that **measures towards innovative work structuring and towards health promotion for company staff** gain ground. Both require long-term management strategies, which should be applied across the board, i.e. to young staff as well.

Over ten years ago there was a wave of **foundations of state or private-sector senior citizens' academies and senior citizens' universities**. In addition to senior citizens' academies almost all state-recognised establishments in the field of general and political retraining offer special courses for older persons.

Overwhelmingly it is women who take advantage of general retraining and political education courses.

Also as regards **voluntary involvement of older people**, further training or education measures are becoming ever more important. The upcoming generations of older people possess substantially better secondary-school and professional certificates and thus their openness to education and demand for education is greater. This is accompanied by a growing readiness to get involved. Increasingly, activities in the voluntary sphere are not unqualified charitable activities, but rather make high demands of volunteers in terms of knowledge, skills and social competence. Older people's preference for autonomy and self-reliance in their actions goes hand in hand with higher expectations regarding quality and with rising demand for appropriate professional qualification.

The federal government has furthermore supported **transgenerational aspects in education** since the generations can learn a great deal from each other. For example, younger people profit from the knowledge that comes from the experience of life when they interact with older persons, while older persons can be infected by younger people's curiosity and their positive attitude towards innovation. This exchange can, in the best case, generate new vitality for society.

The federal government sees further need for action since

- the economy cannot do without the working potential and creativity of older persons in view of the imminent reduction in the number of people in gainful employment and the growing financial burden of social security systems and public spending,
- older persons should not be excluded from developments in technical know-how, so that they are able to contribute to the economy and to society for longer, and can live in an independent manner,
- older persons need different teaching methodology and different subject matter specially adapted to their age group.

For any changes to work, however, a fundamental change in attitudes is necessary which takes account of the potential, the competence and the experience of older people and hence the opportunities available to an ageing society. The change in attitudes is already in evidence, accompanied by a growing self-confidence among older people, who are more active and more open to education.

## **2. Measures of the Federal Government**

### **The Federation / Federal States Commission on Educational Planning and the Promotion of Research (BLK) - Strategy for Life-Long Learning**

In the Federation/Federal States Commission on Educational Planning and Promotion of Research (BLK) the Federation and the federal states agreed the Strategy for Life-Long Learning in the Federal Republic of Germany in July 2004.

The strategy is targeted at successive phases of life from early childhood to old age. Realistic and sustainable perspectives have been elaborated which are based on existing educational structures, activities and experience. Among the development focuses of the strategy are learning consultation, a new learning culture and equality of access.

As part of the strategy, a wide range of more than 200 programmes, projects and measures are being systematically worked on by the Federation and the federal states and made available to the public.

### **Report of the Independent Expert Commission Financing Life-Long Learning – "The way to the future"**

The central objectives of the federal government in terms of education policy are supported by the work of the independent expert commission Financing Life-Long Learning.

The final report "The way to the future", presented by the commission in 2004, stresses the significance of life-long learning for the individual, society and the economy. The federal cabinet gave its opinion on the final report on 27 April 2005, making it clear that, against the background of the ongoing debate, the federal government supports the examination of all the commission's proposals.

### **The Model Programmes "Experience for Initiatives", "Disabled Persons-Senior Citizens-Computer" and "Online-Competence for the 50-plus Generation"**

With the senior trainer curriculum in the model programme "Experience for Initiatives" – EFI (see p. 27) an innovative curriculum has been designed specifically for the learning situation of older people, and it has been received by course participants with a very high satisfaction rate. An accompanying study has demonstrated that the course not only strengthened cognitive abilities but was also able to positively influence personality development in age, especially in terms of satisfaction with life, social competence and in dealing with critical events in life. This longitudinal study ran from 2003 to 2006 and was conducted at the University of Bremen.

With the programmes "Experience for Initiatives" (see p. 27), "Disabled Persons - Senior Citizens – Computer" (see p. 31) and "Online-Competence for the 50-plus Generation" (see p. 30) the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth has among other things contributed to further developing the acquisition of knowledge and the imparting of experience and knowledge. Particular emphasis was placed in this process on familiarisation with, and independent use of, the new media of communication.

The model programmes mentioned above were designed to retrain older people on the one hand and to increase their participation in society on the other. They are described in detail in Commitment II "Full social integration and participation of older people".

### **The Federal Model Project “KEB 40 Plus - Competence – Experience – Employability”**

This project of the Federal Ministry of Education and Research is aimed at developing and testing out retraining concepts concerning age-specific work for people who are middle-aged and older.

By 2008 further education / training modules will have been elaborated for personnel councils and works councils, for managers and staff of personnel departments and for foremen, with the intention of enhancing the potential of middle-aged and older employees in a specifically targeted way, and ensuring that that potential is of use to the companies concerned. The concept embraces both general and professional retraining. ([www.keb40plus.arbeitundleben.de](http://www.keb40plus.arbeitundleben.de))

### **The “Learning Regions” - Programme**

With the programme Learning Regions – Promotion of Networks (LRFN), which was launched in October 2000 and runs until 2007, the Federal Ministry of Education and Research is supporting life-long learning in all areas of education.

The objective is to establish lasting cooperation between schools and other educational facilities offering general and vocational training and further education, as well as businesses, employment centres, business development [organisations], chambers, communities, social partners, Agenda 21 projects, teachers and learners.

The programme is aimed at fostering a regional learning culture and innovative cooperation structures in order to facilitate the interaction of all parties, to enhance the accessibility of vacancies and thereby to encourage greater involvement in education. At present, 70 regions are being supported in this way by the Federation.

The challenges of demographic change are confronted primarily in a network of related topics collectively entitled New Transitions. It is in the transition from work to retirement that the processes of change are particularly evident. Here it is not enough to make educational services available to assist people in the transition to retirement; the appropriate response to the altered circumstances of our ageing society is for the transition scenario to be viewed as a re-integration scenario.

On the various levels of their network structure the Learning Regions are therefore pursuing the following aims:

1. The competencies and strengths of older people should be made beneficial for society.
2. The participation of older persons in life-long learning should be ensured so that they continue to benefit from progress in society.
3. Intergenerational exchange should be initiated and supported to promote the social integration of older people.

In various sub-projects the Learning Regions produce model solutions that can help reduce the exclusion and isolation of older people: in addition to the provision of special education courses for older persons and retraining courses for persons who work in the area of education, care or nursing of senior citizens, there are numerous

projects which make a priority of the active integration of older people in socially relevant practical fields:

### **The Learning Network Region of Rheingau-Taunus (Hessia)**

A central focus of the work of the project Old Helps Young is assistance offered to young people in attaining their school-leaving certificates by voluntarily active senior citizens. Senior citizens give extra tuition in German, mathematics and book-keeping at a vocational school in small groups, and offer training in how to apply for jobs in group or individual sessions. The project thus pursues several goals simultaneously: to maintain and utilise the professional competencies of older people; to requalify senior citizens, as they undergo special training to prepare for their new role; and to promote intergenerational exchange. Synergy effects are achieved for the people taking part through the reciprocal transfer of knowledge and competence and through the integrative impact of the project.

The school administration has provided an office with the necessary infrastructure in the school building for the project so that it has become an integral part of the school day. In the academic year 04/05 some 70 young people were tutored as part of the project.

The project will be supported until April 2007 in the framework of the programme. After this date there are good chances of the sub-project being sustained since the Engel Simon Foundation has pledged its support in the medium to long term.

Further information: <http://www.vhs-rtk.de/>

### **AMPEL: Labour Market, Political Development, Life-long Learning**

In the Europäische Senioren-Akademie e.V. further educational courses are being planned and offered in the field of geragogy. Geragogy is defined there as "the special accompaniment and support of learning processes in old age" and its approach to learning centres on the principles of action-orientation and independence. The life experience and learning experience of the participants are the starting point and the content of the training programme. The participants' specific interests in the possible application of what has been learnt later in life are a guideline in the learning process.

Persons aged between 30 and 70 took part in the first training course. The age-heterogeneity of the target group is intended to further the integration of older people and the exchange of skills.

The geragogic course developed in the AMPEL network has now been conceptually incorporated in the learning project "Creating transitions, arranging spaces - learning, action and life in old age". This learning project has the aim of providing a qualification for people who work, or wish to work, voluntarily in accompanying and caring for older persons in need of help.

Further information: <http://www.netzwerk-ampel.de/uebergang-beruf-alter>.

### **The Learning Association of Norderstedt/ Segeberg (Schleswig-Holstein)**

In Norderstedt, ladies and gentlemen of senior citizen age who have had little or no contact with the modern means of communication in their professional or private lives

have an opportunity to make up for this deficit at the "open hour at the PC for senior citizens", which has been a fixture there since the middle of 2003. Senior citizens who are adept at using the technology work in PCafés which they run by themselves. The target groups are women and senior citizens, who are to be given an initial experimental learning experience in the field. The knowledge women acquire in the ongoing training courses can be put to practical effect immediately and older persons can contribute their many years' professional experience. Retraitees and some highly proficient senior citizens have set the computers up, established a network and installed the server. The course content is decided on by the participants themselves. Individual consultations are carried out by senior citizens acting voluntarily. Further information: <http://www.norderstedt-lernt.de>.

### **FLUXUS – the Network for Life and Professional Orientation, Hannover (Lower Saxony)**

The aim of the "voluntary year for senior citizens" is to attract women and men at the end of their earning and family phase of life who might wish to discover a new sphere of activity beyond their family and circle of friends, where they can make use of their experience of life, their knowledge, aptitudes and energy. They are offered a range of interesting and varied activities in the area of social welfare, culture and ecology by various institutions and organisations. In 2004, such "voluntary year" activities were taken up by 20 senior citizens in eight different projects. Among the activities they performed were child care, help with schoolwork and – as part of the "Fantastic Building Site" - support in artistic education with young people, disabled people and migrants. A second year started at the beginning of 2006.

Further information:

[http://www.hannover.de/deutsch/bildung/fluxus//flux\\_werk\\_alt.htm](http://www.hannover.de/deutsch/bildung/fluxus//flux_werk_alt.htm).

### **The Learning Region of Tölzer Land (Bavaria)**

The project "New Start After 50" which ran from 2002 to 2006 offered advice about learning and was intended to provide enhancements for job application resumes as well as to promote self-knowledge and personal development.

Improving an in-company "dialogue of the generations" was the aim of both the further education courses in "New Impetus After 50" and the developmental measures relating to employees; together these helped businesses to activate the potential contribution older members of staff have to make, meaning that frictional loss due to conflicts between the generations were avoided.

Further information: <http://www.lrtl.de/neustart.htm>.

### **The Learning Region of Nürnberg-Fürth-Erlangen (Bavaria)**

Contrary to expectations, after reaching the age of retirement the majority of migrant workers chose to stay in the Federal Republic of Germany. The aim of the project Migration and Age is to inform citizens of non-German origin about what assistance is available for older persons and how to access it.

The project, which ran from 2002 to 2006, was therefore targeted at older migrant workers and at the professional groups that come into contact with such people. It devised educational programmes for both target groups.

Training offered as part of this assistance for older persons provided knowledge about immigrants' life situations, legal situations, and religions and cultural peculiarities in order to facilitate culturally sensitive assistance and nursing. Information in the immigrants' mother languages was prepared and made available; preventative measures for migrants in the area of "health", "growing older" and "nursing" were carried out, organised by district; and training in culturally sensitive nursing was made available to those who care for older persons.

Further information: <http://www.bz.nuernberg.de/lernenderegion/f0505.htm>.

### **3. Statement of the Federal States**

The federal states, as part of their policy on work, support both in-company retraining and external qualification courses for older persons. Particularly in small- and medium-sized businesses the level of qualification and regular retraining are significant factors in competitiveness. Consequently, when sponsoring projects, the federal states have access to funding from the European Social Fund.

Through a number of projects federal states seek to promote the concept of life-long learning. The retraining of young adults makes it possible for them to acquire secondary-school certificates. Middle-aged persons and older persons have to keep their professional knowledge up to date in order to keep step with technological and social developments.

The regional governments contribute a variety of concrete projects to the Federation / federal states programme "life-long learning".<sup>1</sup> The programme supports concepts on self-directed learning in organised educational classes. Informal learning processes are also an object of investigation. Concepts on the new role of the teacher (ranging from instruction to consultation) are being worked out in a number of projects. In a transregional project participants are developing and testing an "educational pass" which is intended to encourage learners and in particular to certify informal learning. The second chief aim of the programme is the establishment of educational institute networks which are intended to lead to the creation of educational programmes in new areas, and to ensure greater transparency, modularisation and better coordination of the various training programmes on offer, irrespective of the area of education.

The 22 projects of the Federation/federal states programme can be divided into several thematic groups. Retraining networks, which bring together the funding organisations behind educational and intermediary establishments on a regional basis, have elaborated, and successfully put into operation, subject-orientated associations to improve transparency among education programmes on offer, particularly as regards demand. Further, in the area of general secondary-level education and vocational training, self-directed learning has been tested in collaborative projects with vocational partners; these media-based self-learning concepts with an extracurricular syllabus led to new motivation in learning, even among those who were educationally disadvantaged. Since higher learning autonomy requires modified learning behaviour, a group of projects concentrated on

<sup>1</sup> With regard to what follows, see the short description supplied by the German Institute of Adult Education (DIE) at <http://www.blk-III.de/LLL/TagungAbschluss/LLL-Kurzbeschreibung.htm>.

"train the trainer" concepts. Other projects by contrast focused on organisation enhancement, i.e. where the organisations themselves learn; and this has resulted in new advisory models and an adjusted course portfolio on the part of the educational establishments. One project supported learner-groups of senior citizens who, under their own direction, set up professional homepages in the Internet relating to everyday matters.

In addition to this the federal states specifically support education and training for people in the post-professional phase. Since the late 1980s, for instance, numerous senior citizens' academies or academies for older persons have been established and have rapidly evolved into retraining institutions that are now in high demand. The wide range of courses they offer includes foreign languages, music, training for the mind and body, meditation, history seminars, religious and also age-specific subjects. Participants go on walks, museum visits and study trips together. Occasionally writing competitions are organised or a prize is awarded for senior citizen literature. On a federal state level, particular importance continues to be attached to computer and Internet courses in order to get older persons involved in the information and communication society and to familiarise them with the new media. After all, e-government and online administration can only be successfully introduced if all citizens can cope with it on the technological side.

Alongside senior citizens' academies a number of state-licensed establishments of general and political retraining offer special courses for older people. This includes the senior citizen curriculum, offered at many universities and some technical colleges, which differs from other retraining courses principally in that knowledge is imparted in a manner appropriate to older learners.

In addition to this older persons have the possibility of enrolling as guest auditors at colleges, just as younger people do. It is not necessary to make an application or to submit a secondary-school diploma; unlike regularly matriculated students, however, guest auditors do not receive an academic degree. In the Studium Generale a range of interdisciplinary courses are offered for students, guest auditors and visitors of all age groups.

The Centre for General Scientific Retraining (ZAWiW) at the University of Ulm, which is supported by the Ministry of Culture of the Federal State of Baden-Württemberg, has developed special educational programmes predominantly for older persons; for those wishing to take part there are no formal conditions of admission. The objectives include opening up the world of new media for older people; this begins with simple Internet introduction courses and goes as far as the training of real and virtual learning groups in the 50+ target group.

Finally, the federal states attach particular importance to qualifying people for post-professional voluntary work (see statement on Commitment 2).



#### **4. Statement on the Part of Civil Society**

**An ever growing number of people would like to use the time following their working life also to learn new things. By means of suitable retraining programmes offered by senior citizen organisations and by adult education measures it is possible to interest older people in voluntary activities. Professional training and retraining must also be adapted to fit the changing demographic circumstances.**

The retraining of older people is increasingly becoming a central task of many senior citizen organisations. These initiatives by older people must be supported. This includes the systematic networking of such programmes. In addition, greater efforts should be made to take account of the needs and interests of older people in contact with educational establishments such as Adult Education Centres and Family Education Centres.

With regard to the use of modern information and communication technologies it is important to overcome the "digital divide" within society. At present, too few older persons use these technologies. As people get older and less mobile, using the Internet can help them maintain an independent lifestyle and improve their participation in society. Older persons must therefore be made familiar with the Internet, as happens for example in the Federal Ministry for Family Affairs, Senior Citizen, Women and Youth sponsored project "Online-Competence for the 50-plus Generation".

Within the scope of their own competence, the federal states and communities must do more to meet the educational needs of older people. There are already plenty of practical models in the area of the education of older people. What is needed is, firstly, greater public awareness of these models and secondly the creation of greater possibilities of transfer.

With regard to the implementation of educational courses, we advocate the promotion and further development of intergenerational and age-specific education and training. This includes supporting the work of universities of the third age, senior citizen universities, senior citizen academies and similar establishments. Better integration can be achieved by offering a range of training and educational courses that acknowledge and accommodate the learning experience and life experience of older migrants.

An important aim of education policy for older persons is to arouse interest in voluntary work. Appropriate initiatives, projects and programmes must be supported by the Federation, federal states and communities in order that the potential of older people can be exploited in this sphere too.

The traditional concept of education – work – retirement, which is firmly rooted in the Federal Republic of Germany, must be tackled head-on. Professional further training and retraining must be seen instead as an ongoing task that accompanies an individual's working life. Practical concepts of life-long learning should be devised and developed and individual responsibility should be encouraged. Further it is necessary to develop specific learning programmes for older workers, relating for example to the use of technological devices and new communication technologies. The Federal Ministry of Education must also be more active in furthering life-long learning by backing suitable projects. Special training for the teachers also appears to be a necessity.

Professional and non-professional retraining opportunities must be open to all older people. Particular emphasis should be placed on the development of educational programmes for people who have not had such opportunities before; there is a real shortage of these in Germany, too. Furthermore, for rural areas consideration should be given to distance learning, as part of which new media can have special significance in combination with tried and tested retraining forms.

## **COMMITMENT VII**

### **TO STRIVE TO ENSURE QUALITY OF LIFE AT ALL AGES AND MAINTAIN INDEPENDENT LIVING INCLUDING HEALTH AND WELL-BEING**

55. *Good health is a vital individual asset, and at the same time a high overall level of health of the population is vital for economic growth and the development of societies. In this context, the long-term objective of health policies in the UNECE region should be to ensure that increased longevity is accompanied by the highest attainable standard of health, as defined by the World Health Organization as "the state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". Policies should promote life-long health, by reducing the risk factors, including the environmental, associated with major diseases, particularly chronic and noncommunicable diseases, through health promotion and disease prevention activities, by providing a continuum of affordable, accessible and quality health and social services. Such policies will increase quality of life and ensure the continued contributions of older persons to society. Healthy older people are a resource to their families, communities and the economy. This can only be achieved through a holistic and life-long approach integrating physical, mental, social, spiritual and environmental factors. Older persons, especially those who are dependent on care, must be closely involved in the design, implementation, delivery and evaluation of policies and programmes to improve the health and well-being of ageing populations.*

56. *The evidence on what determines health suggests that economic, social, cultural, environmental and behavioural factors are reliable predictors on how well both individuals and populations age. Environmental, agricultural, transport, financial, taxation, consumer protection, housing, education, employment, social protection and other policies have a profound influence on health and well-being. Improvements in the economic and social situation of older persons in particular will result in better health and well-being.*

57. *In order to meet the challenges of ageing populations, including older persons with disabilities, it is crucial that social and health services place increased emphasis on health promotion, disease prevention and physical and mental rehabilitation, which incorporates a life-long approach to positive health. The continuum of care provision needs to be from the primary care sector to the secondary and tertiary care sectors, fully utilising the skills of all health care providers. It is crucial that social and health services promote independence and assist older persons to participate fully in all aspects of society.*

58. *Adequate long-term care is part of a continuum, which aims at maintaining the highest level of well-being of all persons. Long-term care depends heavily on informal caregivers in families and communities, which requires that they be properly supported through community-based programmes. In particular, it is necessary to recognise and support the contribution of older persons in family care.*

59. *Older persons should, where possible, have the right to choose between different options of long-term care. Whenever this is not possible their legal representative should give consent as to where they are cared for. Geriatric and gerontological assessment is an effective instrument to determine whether institutionalisation is required. Where institutionalisation is unavoidable, it is imperative that the dignity and individuality of the older person be protected.*

60. *Mental as well as physical health in old age are issues of great significance, especially for the oldest old. As dementia is a prevalent disease in old age, especially Alzheimer's, treatment and rehabilitation programmes as well as long-term care are of increasing importance in an ageing world. Strategies to cope with such diseases include diagnosis, medication, psychosocial factors, cognitive training programmes, training for caring family members and caring staff and specific structures of inpatient care. To help dementia patients live at home for as long as possible, it is necessary to respond to their specific needs, for security, adequate social support and home care services. Specific programmes for psychosocial therapy should help to reintegrate patients discharged from hospital.*

61. *Nursing homes and geriatric centres should be developed to meet the specific needs of patients suffering from mental diseases. This includes multi-disciplinary geriatric and gerontological assessment (physical, psychological, social), counselling, care treatment and rehabilitation, accompanied by specific training schemes for care providers. Research should be undertaken, emphasising the systematic identification of the needs of patients and caregivers. An effective strategy should be developed to increase the level, quality assessment and diagnosis of Alzheimer's and related disorders at an early stage of the disease. Alzheimer's calls for a multidisciplinary approach that covers the needs of both patients and carers. Psychosocial interventions including home care services, primary care and day care institutions should contribute to prevent or postpone the need for patients suffering from mental diseases to stay in nursing homes or psychiatric institutions.*

62. *Particular attention should be placed on HIV/AIDS, which may affect older persons as persons at risk of an HIV infection, as HIV-infected persons, as informal and formal caregivers or as surviving family members. Increasing number of AIDS patients are surviving to old age. Older persons can be at increased risk of HIV because they are typically not addressed by information campaigns, prevention, and counselling. Moreover, HIV/AIDS diagnosis among older persons is difficult because symptoms can be mistaken for other immunodeficiency syndromes that occur in older persons. There is an urgent need to expand gender specific educational programmes on HIV/AIDS in the field of geriatrics and gerontology curricula and in education and prevention programmes on health for older people.*

63. *The provision of palliative care<sup>2</sup> and its integration into comprehensive health care should be supported. To this end, standards should be developed for training in palliative care, and multidisciplinary approaches encouraged for all service providers of palliative care. It is necessary to create and to integrate institutional and home-based services and to intensify interdisciplinary and a specific training in palliative*

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<sup>2</sup> Palliative care's definition based on WHO is active total care of patients whose disease is not responsive to curative treatment, namely by controlling pain and other symptoms of the disease and offering psychological, social and spiritual support to patients and their families.

care for all professions concerned.

64. *While more knowledge, information and health education is important at any age, this is even more so at older age. The evidence shows that decisions to adopt health-enhancing behaviour, for example healthy and adequate nutrition, physical exercise, are often constrained by the broader physical, social, economic and cultural environments, which influence the choices that individuals, groups and local communities make. The use of tobacco products, unhealthy diet, excessive alcohol consumption, drug abuse, and physical inactivity are harmful to health at all ages and have cumulative negative effects at older ages. It is never too late to adopt healthy lifestyles. Engaging in appropriate physical activity, healthy eating, no smoking and using alcohol in moderation or not at all can prevent disease and functional decline, extend longevity and enhance quality of life. Policy makers need to recognise the risks to health of unhealthy lifestyles and take appropriate multisectoral action to prevent them. The importance of healthy lifestyles is often overlooked and should be addressed by policy makers, communicators and the broader public, especially as older persons are often a role model for younger generations.*

65. *Governments should encourage the safe use of medication, household chemicals and other potentially harmful products by requiring manufacturers to indicate the necessary warnings and clear instructions for use.*

66. *Constraints to health other than on the individual level derive from harmful and disease-engendering labour and environmental conditions. New policies and programmes which focus on healthy working conditions that enable people to stay healthier and work longer should be developed on all levels, including by government authorities, employers associations, trade unions and health services.*

67. *Access to a wide range of tailor-made affordable social services that recognise that older people are not one homogeneous group, but rather have different social and cultural needs, is essential for their well-being, whether they need support to live in their own homes, or institutional care. Older persons need to be made aware of the range of social and health services available in their country.*

68. *The following objectives need to be met in order to fulfil this commitment:*

*Promote health and well-being over the entire life course, by mainstreaming health through inter-sectoral policies*

69. *Promoting health and well-being over the entire life course requires an inter-sectoral approach. This approach has to be developed taking into account the views and needs of older persons, while supporting their independent living. Governments and other concerned actors should, therefore, provide incentives that facilitate sectoral involvement and intersectoral co-operation. These incentives and measures should be based on health impact and functional ability assessments, which will not only look at the health consequences of policy decisions retrospectively, but also address the likely health consequences of future actions. All sectors should be held accountable for the effects of their policies and actions on health. More broadly, the social, economic and environmental determinants of health should be fully taken into account in policy development. The gender perspective should be given particular importance and gender inequalities in health over the life course, including the higher*

mortality of men, should be addressed. In this connection, all health care measures should be developed, improved and evaluated for their effects on men and women, within the scope of gender mainstreaming. In order to evaluate the effects and take appropriate action, it is necessary to collect data and have statistics that are differentiated by both sex and age.

*Ensure equal access to health and social services including long-term care for persons of all ages*

70. *Ensuring equal access to effective health and social services, irrespective of age and gender, should be the guiding principle in achieving this policy objective. Targeted efforts should be undertaken to decrease gender, age, race and income-related inequalities in access to health and social services. Special attention should be paid to older persons living in rural or remote areas, who often have difficulties accessing health and social services.*

71. *While independent living is desirable in principle, living in residential accommodation for older persons may be an appropriate alternative where a high level of professional standards are offered and social exclusion is avoided. However for these conditions to be met, residential accommodation should be accessible in all respects, the dignity of older persons should be ensured, adequate social facilities and adequate facilities for older persons with physical and mental disabilities should be present.*

72. *Policies and programmes should be established to provide conditions for independent living in the community, as well as health and long-term care for those who need them. Support and incentives should be given to those providing both formal and informal care. Further, a more equal sharing of caring responsibilities between men and women should be promoted through public policies and other means. Actions to achieve this objective include the design of appropriate primary health care services and programmes to respond to needs and expectations in health promotion, disease prevention, care and rehabilitation. This needs to be done by government authorities with the participation of local communities and other interested partners (*inter alia*, patients' organisations and consumer organisations).*

73. *The management of health services should respect the principle that primary health care should play a leading role, while referrals to secondary and tertiary hospital care should be limited to cases requiring specialist skills and facilities. The ultimate goal is to provide a continuum of care, including both community-based care for chronic health problems as well as prevention, acute care, and rehabilitation. Comprehensive mental health services should be developed. Care for older persons with disabilities should promote the maintenance of their maximum functional capacity, their independence and autonomy. Palliative care should be accessible for all older persons suffering from painful or incurable illness or disease. Governments need to adopt, in co-operation with other actors, standards for the quality of care services regardless of the setting in which care is being provided. In view of the strong demand for providing care at home, it is increasingly important to create effective support strategies for informal caregivers. Such support strategies should include financial support, information and training. In designing and implementing policies and programmes, governments should ensure that ethical issues in old age are taken into account.*

74. *Health and social services, public and private, should be better co-ordinated and integrated. Appropriate case management systems should be applied in order to make available the needed range of services, including medical services, home-care services and psychological support, both on an in-patient and outpatient basis. There is a need to develop and ensure observance of training and quality standards. Governments should facilitate the availability of assistive devices and appliances to older persons so that they can prolong their independent living.*

75. *The ageing of populations in the region requires that formal and informal care providers possess adequate professional as well as personal qualifications and skills. Education and on-going training programmes for professionals in the field of health care and social services at all levels should be offered and enhanced taking into account the evolving needs of older persons. Training for informal care providers should also be ensured. To reach old age in good health and well-being requires efforts throughout life and an environment within which such efforts can succeed. Furthermore, the quality of life and independence of older persons through self-care, health promotion, prevention of disease and disability requires new orientation and skills among older persons themselves.*

*Ensure appropriate financing of health and social services for persons of all ages*

76. *The actions to be undertaken to attain this objective should be based on the understanding that disbursement of health and social resources should be efficient, equitable and sustainable. Older persons should have equal access to the necessary health care and should not be discriminated against because of their age. Health priorities should be determined in a transparent fashion, and sufficient financial resources should be allocated to the achievement of the defined priorities in order to optimise health gains. The effect of funding and resource allocation on health service delivery and the health of the population should be monitored. Social security schemes, in the form of sickness insurance, health insurance, long-term care insurance and disability insurance can play where appropriate an important role as a means to provide these services.)*

*Enable people to make healthy choices*

77. *Governments, local authorities and other concerned actors should facilitate the adoption of healthy life-styles, by encouraging people of all ages to engage in appropriate physical activity, adopt healthy diets, avoid smoking and excess alcohol consumption, and opt for other health-related behaviours, that prevent disease and functional decline, extend longevity and enhance quality of life. This should be achieved through a range of policies, including appropriate information campaigns and education starting at an early age that enable people to make healthy choices. This should also be accomplished by ensuring an enabling and supportive environment through appropriate housing policies, urban planning and other measures that provide affordable, barrier free, and age-friendly living environments.*

## *Health and Quality of Life*

### **1. Statement of the Federal Government**

In agreement with the Second International Plan of Action on Ageing and the Regional Implementation Strategy, the federal government considers that **timely and life-long measures for the maintenance of health and the promotion of healthy ageing** are necessary.

The federal government supports a policy of **active ageing**. Alongside a **comprehensive health care system**, this also includes a series of different measures and action plans such as sport, the testing of lifestyles adopted to old age, tailored care structures, modified housing models, appropriate transport planning, network building in city districts, voluntary work engagement, further education opportunities, and engagement with resources and new communication media to enable persons with physical and mental disabilities to lead independent lives.

Furthermore, the government also promotes the development and qualitative evaluation of **products and services appropriate for senior citizens**. This includes the provision of decision-making material to aid in the selection of technical products appropriate for everyday use by senior citizens. Thus the government is in compliance with the stipulations of Commitment VII.

The government supports co-operation between, and co-ordination, of the existing range of services, the establishment of comprehensive and independent advisory services for people in need of care, and the maintenance of requisite consumer protection services.

With its health system reforms of 2003 and 2007, the federal government has provided **comprehensive safeguards against the risk of illness** for the population of the Federal Republic. In addition, incentives have been created for more **health promotion and preventive medicine** as well as regular **check-ups** for all population groups within the health care system, whilst new services for older people (hospice services, palliative care) have also been introduced. **People of all ages are given equal access to social and health care services including nursing care** – as called for in Commitment VII.

The federal government equally considers that **promotion of health and disease prevention from a very early age** is vital. Such measures should be a natural part of life from early years onwards. Both aspects, however, are equally important in later years. They are not merely targeted at healthy older persons but especially at all those who have not the good fortune to reach old age in a good state of health.

In terms of **disease prevention** for the target group of older persons, the federal government accordingly is engaged in a policy of information and co-operation with the key actors in the health care system together with the provision of a wide range of early diagnostic examinations.

**Rehabilitation takes precedence over nursing care** is one of the tenets of the German health care system as skills and abilities that have been lost in old age can be acquired anew. The commitment to medical rehabilitation introduced in the Social Security Code IX and reinforced by the 2007 reform of the health care system is an important factor in compensating for the consequences of illness that, especially in old age, can impede participation in social life. The forthcoming reform of the Social Security Code XI makes provision for supplementary regulations to aid in the



introduction of appropriate rehabilitation measures for people in need of nursing care. Old age should be seen as an opportunity and should be designed to promote enhanced quality of life.

**Independent living and quality of life** must be maintained even after people begin to require care or fall ill. The federal government also desires to maintain quality of life for all those in need of nursing care and assistance. Its objectives here are to **improve the quality of nursing care** and to continue to develop the **structures of assistance for older persons**. **Provision of health care** and the **quality of home and institutional nursing care and treatment** are at once the overarching goals and benchmarks of all the federal government's endeavours to establish a **sustainable policy of health and nursing care**. This also includes policy measures for **protection and security in old age**. The central concern of all such measures is to strengthen the **rights of people in need of assistance**.

Approval and dissemination of quality and nursing care standards in out-patient and residential nursing care remain important areas for action that allow elderly people and people in need of nursing care to live independent lives, and that improve the situation of people suffering from dementia and that of their families.

**The Nursing Home Act (*Heimgesetz*) and ordinances ensure quality of nursing care and support services**. Even if in future the public law component of nursing home law shall remain within the sole jurisdiction of the federal states, the federal government will pursue a policy of co-operation with the federal states to establish the broadest degree of uniform quality standards in the best interests of older persons, and to retain and improve previous quality standards in nursing homes.

In this respect the new approach adopted for the **training of nursing care providers for older persons** and the **reform of nursing staff training** shall contribute to better professional qualifications for nursing care staff.

The **Geriatric Nursing Care Act (*Altenpflegegesetz*)** that came into force in 2003 is an important instrument for steadily attracting more young people to professions of nursing care-giving to older persons and to **enhance the standing of nursing care to older persons as a professional service**.

**The Nursing Care Quality Control Act (*Pflege-Qualitätssicherungsgesetz* - PQsG)** that came into force in 2002 serves to secure and further develop the quality of nursing care and to reinforce consumer rights.

The increasing numbers of persons of advanced age also means a higher incidence of **dementia patients**. This illness poses a particularly heavy burden on those affected by it. Policies for the elderly are therefore also **policies for persons with dementia and their families**. Against the background of an ageing society, the federal government already considered in the coalition agreement of 2005 a concerted action for a "Dementia Lighthouse Project" as necessary.

The **introduction of nursing care insurance on 1 January 1995** means that in the Federal Republic the risk of needing nursing care is socially insured against in a comparable way to insurance against sickness, accident and unemployment whilst maintenance of income in old age is also ensured. This is line with the requirements of Commitment VII. Nursing care insurance contributes to easing the burden on those affected and their families of the physical, mental and financial problems associated with the need for nursing care.

The provision of **palliative care** mentioned in Commitment VII is being addressed on the institutional side in the Federal Republic and forms an integral part of the general health care system.

**Health care policies along with medical research and practical projects** are increasingly embracing a “**gender-mainstreaming approach**” and are thus in compliance with Commitment VII.

The theme of “**violence against older people**” needs to be further addressed.

## **2. Measures of the Federal Government**

### **The 2003 Health System Reform**

To ensure that in future as well all insured persons will continue to have the same access to the medical treatment they need irrespective of age, gender and income, funding needs to be deployed in a more efficient and effective way. At the same time medical progress – given increasing life expectancy and the demographic developments that are forecast – shall lead to further changes in service requirements which all need to be provided for and financed. The response to such requirements cannot be solely limited to increasing insurance contributions. This is why the focus is on socially just and comprehensive structural reforms which lead to increased efficiency and an appropriate balance between solidarity contributions and individual insurance contributions. This approach enables maintenance of a high level of health care services with appropriate fixed contribution rates.

The measures contained in the 2003 health system reform which have successively come into effect since 1 January 2004, represent a substantial contribution to the achievement of these goals. The Modernisation of Statutory Health Insurance Act (GMG) has stabilised the financial situation of health insurance funds, put effective caps on expenditure and boosted income with the result that compulsory health insurance funds in the red in 2003 have now moved to the black once more.

On top of this, savings achieved by the health system reform mean that some 35 million insured persons are now benefiting from lower insurance rates.

Insured persons equally benefit from higher competition for better quality in the health care system, integrated treatment, GP networks, health care centres, the opening up of hospitals for outpatient treatment, and quality-controlled treatment programmes for the chronically sick and elderly, while bonus programmes for healthy living offer greater quality and more choice for patients.

At the same time the principle of solidarity inherent in mandatory health insurance funds ensures that all insured persons – irrespective of their income – have equal access to the medical services they need. To realise the right to treatment in practice, the Federal Republic provides a comprehensive range of medical services. Charge capping protects persons of lower income, older people and the chronically sick from excessive financial burdens wherever provision is made for statutory extra payments. In this manner it is ensured that no citizen will be reduced to poverty through sickness.

### **The 2007 Health System Reform**

In future all German citizens will have some form of insurance against sickness. Starting on 1 January 2009 all residents are obliged to take out health insurance if they have no other commensurate form of protection such as special systems or private health insurance.

Private health insurance will offer a basic rate based on the range of services and peak contributions of mandatory health insurance. As risk premiums are not allowed for the basic rate, this makes it interesting for people with private insurance who have never had to pay them before.

Financing of statutory health insurance has been given a new shape with the introduction of a health fund. From 1 January 2009 all contributors will pay the same rate. This will bring the same kind of uniform contribution rates to statutory health insurance as are now found in statutory insurance for nursing care, pensions and unemployment. Each health insurance fund is allocated a lump sum for each insured person plus supplementary bonuses and deductions based on the morbidity rate of the persons it insures. Depending on their economic situation, health insurance funds can offer their insured financial benefits and premium payments or make them pay an additional contribution. Such extra contributions may not exceed one percent of income liable to contributions. The changes introduced by the 2007 health system reform for access to health insurance funds particularly benefit certain groups of older persons who have not benefited from insurance protection due to the particular nature of their life histories.

The new optional and bonus rates of health insurance funds mean that those with statutory health insurance will have a much greater choice of the medical treatment they need to meet their needs.

In a supplementary move the range of services will also be extended to meet needs. This includes financing of palliative care in the home. Meeting the human need to die in dignity and, wherever possible, in the home environment is a recognised social goal. This is why in future so-called "Palliative Care Teams" composed of medical and nursing staff shall be licensed to provide such people with care and supervision. The reform made clear that statutory health insurance also includes a legal right to the whole spectrum of medical rehabilitation in so far as no other bodies provide these services. One special focus of the reform was on geriatric rehabilitation targeted at the typical life situation of older persons. Reinforcement of geriatric rehabilitation services gives greater cogency to the tenet "Rehabilitation before and during care" while developing the range of existing geriatric services is also being pursued. Geriatric rehabilitation services are a means of avoiding the need for nursing care in old age for as long as possible while also preventing its possible aggravation.

In future domiciliary care will also be given as a service in the shape of new living communities or forms of housing as well as in residential institutions in special exceptional cases. This shall overcome previous restrictions limiting domiciliary care to private households.

### **Informing the Public about Health Policies**

To provide individually tailored information on the key topics of health policies / statutory health insurance and nursing care insurance, a range of instruments for Public Information work is available:

- The web site of the Federal Ministry of Health at [www.bmg.bund.de](http://www.bmg.bund.de) offers comprehensive in-depth information on these topics.
- [www.die-gesundheitsreform.de](http://www.die-gesundheitsreform.de) offers comprehensive in-depth information on the innovations introduced by the Act on Strengthening Competition in Public Health Insurance (GKV-WSG) but also on what reform of the health system means for

citizens. [www.die-praevention.de](http://www.die-praevention.de) is an information platform that advises citizens about healthy lifestyles.

- The free advice line for citizens run by the Federal Ministry of Health provides callers (who may remain anonymous if they wish) with individual information on statutory health insurance, insurance protection for all, nursing care and prevention.

### **Nursing Care Insurance**

The services of nursing care insurance which the nursing care insurance funds provide on application are based on an assessment of the need of nursing care made by the medical service department of the health insurance fund. Those in need of nursing care are assigned one of three Nursing Care Levels. Nursing care insurance provides services for out-patient, residential and semi-residential nursing care. Such services are always independent of the income or wealth of persons insured.

Nursing care insurance and its services shall in future also play a role in building up and extending the nursing care infrastructure of the Federal Republic. For such nursing care needs secure grounds supported by out-patient, residential and semi-residential services.

Those considered eligible for nursing care by nursing care insurance funds are persons who due to a physical, mental or psychiatric illness or disability are in need of a substantial or high degree of assistance for a period longer than at least six months to help them deal with the normal recurrent matters of everyday life. Persons with mental or psychiatric illnesses or disabilities enjoy parity of status with those suffering from a physical sickness or disability. The levels of assistance cover personal hygiene, eating, getting around and household chores.

Instead of non-cash nursing care services in out-patient nursing care (nursing care provided by out-patient nursing care providers licensed by the nursing care insurers), persons in need of nursing care may claim a nursing care allowance if nursing care is given by their own families. The nursing care allowance and non-cash nursing care services can also be combined on a pro-rata basis (so called "combination services"). Improvement of the old age security of the nursing care-giver is of especially importance when such a person cares for a person in his/her home environment on a non-paid basis for at least 14 hours a week, and due to this occupation is unable to be engaged in paid employment for a period exceeding 30 hours a week. The nursing care insurance funds pay contributions for these nursing care-givers into statutory pension insurance according to the level and extent of the nursing care given. In addition, the nursing care-giver activity is also included within the terms of statutory accident insurance. With pension insurance and statutory accident insurance the nursing care-giver activity is largely equal with an occupation liable for social insurance.

Other benefits in support of out-patient nursing care include:

- Nursing care aids and benefits to modify the home to accommodate special nursing care needs,
- Free training courses in nursing care for relatives and voluntary nursing care-givers, and
- Supplementary benefits of up to € 460 for those with considerable need of general care and treatment (persons with dementia, mentally handicapped persons or persons with a psychiatric illness).

With regard to residential nursing care, the nursing care insurance fund pays the charges for nursing care, social care and medical treatment at a flat rate fixed according to the level of nursing care. Board and lodging are paid for by the persons in need of nursing care themselves.

Financing investment for nursing care homes is under the jurisdiction of the federal states. If those do not bear full costs, these will be charged separately to those in need of nursing care.

The nursing care insurance funds are enjoined by law to ensure that the services they are obliged to deliver are constant, tailored to the needs of the insured and correspond to the generally recognised state of medical and nursing care-giving knowledge.

To this end the nursing care insurance funds enter into service and remuneration agreements with carriers of nursing care homes and out-patient nursing care services. To promote competition, licensing of residential and out-patient nursing care institutions as service providers is not dependent on existing demand.

The introduction of nursing care insurance led to an expansion of the nursing care-giving infrastructure in the out-patient, semi-residential and residential sectors. Against this background, it can be said that the Federal Republic of Germany now has a quantitatively robust nursing care infrastructure where all insured persons are guaranteed unlimited access to nursing care services.

Nursing care insurance and its services shall continue to play a role in building up and extending the nursing care infrastructure of the Federal Republic of Germany. Nursing care needs secure grounds supported by out-patient services and semi-residential and residential institutions.

### **The Future and Further Development of Nursing Care Insurance**

The introduction of statutory nursing care insurance on 1 January 1995 represents a basic decision in favour of solidarity-based protection against the risk of nursing care - not least of all because social nursing care insurance has gained a high degree of acceptance both among those insured and those in need of nursing care. Its services mean that many beneficiaries can now be cared for in their home in accordance with their wishes and they also help beneficiaries and their families to support the financial burdens linked with nursing care.

To ensure that nursing care insurance continues to fulfil its objective of providing solidarity-based safeguards against the risk of nursing care with equally strong acceptance, the reforms of nursing care insurance, now in the pipeline, aim at introducing structural changes and changes to eligibility for benefits. A draft law to this effect is now being discussed by the government. The legislative procedure should be concluded in the first six months of 2008.

The social nursing care insurance shall be kept within the social insurance as an independent branch. It will continue to be a "core security system" in line with its basic principle since its introduction. Facing demographic developments and taking into account the personal preferences of the majority of beneficiaries on how they wish to be cared for, the reform of the nursing care insurance aims to support and promote residential care structures according to the basic tenet that prefers out-patient to residential nursing care. To ensure that people continue in future to receive nursing care commensurate with their dignity, a care structure shall be put in place that is tailored to peoples' needs, is locally based and focussed on out-patient care-giving – without, however, neglecting residential nursing care. This involves setting

up a network of assistance and care services. Key roles in developing and extending neighbourhood-based care services are played by the planned Nursing Care Centres and the proposed introduction of Case Management.

Nowadays multigenerational families living under one roof are a rather seldom. Yet the wish to remain at home for as long as possible remains as strong as ever. This has given rise to new forms of housing – such as communities of senior citizens or out-patient forms of assisted living for those in need of nursing care. This development is taken into account in the reform of the nursing care system which promotes combined nursing care and care in new forms of housing by enabling a more flexible use of nursing care insurance services as was previously possible. In future more people in need of nursing care will be able to claim not only basic nursing care and assistance with household tasks but care services as non-cash benefits of nursing care insurance by bundling their claims and addressing them on a joint basis to a nursing care-provider service or individual nursing care-giver licensed by the insurance fund (so-called “pooling of benefit claims”). Pooling of benefit claims broadly enables a much more efficient form of nursing care and support than was previously possible. Obviously, however, such claims for non-cash benefits can only be made good with quality-controlled personnel, i.e. individual nursing care givers and nursing care services licensed by the nursing care insurance fund. In addition, further emphasis shall be placed on nursing day care. Until now opportunities offered by nursing day care have been rather neglected in practice, even though people rather like to be cared for in their own homes than in an institution, and nursing day care services can play an important role in achieving this. This is why the right to nursing day care is being reinforced with a 50% claim for non-cash nursing care benefits or a nursing care allowance. Putting a renewed emphasis on out-patient care will also serve to promote the range of low-level support services, especially for people with dementia where nursing care is provided by low-level helpers. Ensuring quality of life and human dignity is not just a matter for professional service providers but a vital mandate that concerns all sectors of the community. Voluntary work can also play an important role in providing support services and realising a “new culture of assistance”.

The overarching aim of all improved services is to support structural changes in a move towards neighbourhood-based participatory care. At the same time regulations are also planned for the introduction of a “nursing care term” for employed persons, for increasing the role of prevention and rehabilitation in nursing care, for extending quality control and for further development of more transparency.

### **The Amendment to the Nursing Care Insurance Act**

Entering into force on 1 January 2002, this amendment provides supplementary benefits for residential nursing care for those in particular need of support, provides more benefits and creates key impulses to drive forward the improvement and on-going development of care structures and concepts, especially those for persons affected by dementia.

The new law provides new ways for easing the burdens carried by relatives responsible for nursing care whilst also improving advisory services for beneficiaries in their homes.

On the basis of this law, informal care-giving networks were built alongside established structures, and alternative forms of care between traditional out-patient care and residential care were set up.

The law rests on the following key pillars:

- An additional support allowance of up to € 460 per calendar year for those in need of nursing care who are seriously limited in their everyday abilities. This support allowance is to be used for non-cash benefits to ease the burden of family nursing care-givers;
- Financial assistance for building up and extending so-called low-level support services and for the promotion of model projects for the further development of care concepts and care structures particularly aimed at people suffering from dementia. Funding to the tune of € 20 million is being supplied to this end by social and private nursing care insurance including federal state and local authority funding;
- Improvement of the range of advisory services through the further development of advisory services deployment as per Section 37 Para. 3 of the Social Security Code XI. Beneficiaries with a particular need for support have the right to double the frequency with which they receive advisory services. Nursing care-givers acting in an advisory capacity must have expert knowledge, in particular knowledge about geronto-psychiatric issues, together with experience in dealing with the particular forms of the illness and the disabilities. In the case of people with dementia, nursing care-givers must be able to inform their patients about specific forms of assistance available to them in their immediate vicinity.

### **The Nursing Home Act**

With the amendment to the Nursing Home Act (*Heimgesetz*) introduced on 1 January 2002, the federal government has taken a major step to improving the situation of people in need of residential care. This new law is the government's response to a variety of developments which led to a structural change in nursing homes and necessitated intervention. Key indicators of this structural change were the increasingly advanced old age of many residents together with their generally worsening state of health. An additional factor was that the type of care given in nursing homes has increasingly come in for public criticism.

The amendment to the Nursing Home Act which came into force on 1 January 2002 is especially aimed at improving the quality of care and supervision, at enhancing consumer rights and re-evaluating home supervisory authorities as a state instance of external quality control.

The amendments to the Nursing Home Act have clearly brought quality aspects to the forefront and placed a new emphasis on them. On the practical level this now means, for instance, that each nursing home shall be inspected at least once a year, and that nursing home operators must furnish proof of comprehensive quality assurance measures but it also means that novel housing-forms of assisted living – forms can now be set up, and tried and tested with a minimum of bureaucracy.

In terms of reinforcing consumer rights, the main measures involved concern extending the participatory and organisational rights of those in need of care in nursing homes. The formation of home advisory boards has been facilitated, for instance, by allowing the election of persons outside the home which in many cases now enables the advisory board to operate on a continuous basis for the very first time. Another key point is that participatory rights have been extended to cover economic and conceptual decision-making on the part of home carriers such as remuneration agreements, and service and quality agreements. On the other hand, the obligation of nursing home operators to inform residents and co-operate with the

home advisory board has been given a much more explicit and much broader definition. To this end, a new version of the Ordinance on Participatory Rights in Nursing Homes came into force on 1 August 2002.

The reform of the federal structures of Germany concluded in late 2006 means that legislative jurisdiction for the public law component of nursing home law was transferred to the federal states. However, jurisdiction for the civil law component of nursing home law still remains with the Federal Government. The federal states so far have no own nursing home laws or ordinances. The Nursing Home Act and its ordinances now in force still retain their validity as federal law.

### **Nursing Home Supervisory Bodies**

The new importance accorded to state run supervision of nursing homes is especially reflected in the new understanding of the role it plays as given in the amendment to the Nursing Home Act of 1 January 2002. On the one hand granted far reaching powers of intervention that could include the closure of nursing homes in the event of extreme misconduct, these home supervisory bodies are still enjoined to view themselves as “partners for the homes”. This includes a much broader advisory mandate for the home supervisory body covering the whole cast of actors involved in the nursing home. Nursing home operators and carriers are to be advised both on their investment decisions and on ascertained quality deficiencies. On top of this co-operation between the supervisory body and the medical services departments of health insurers (as the second key actor in external quality control) and the cost carriers has also been intensified. In the long-term this is also beneficial for nursing home operators as it enables the elimination of bureaucratic hurdles (such as multiple inspections of homes) and the building of mutual confidence.

Given their newly acquired powers of legislation, the federal states could well modify the mandate of nursing home supervisory authorities. However, there are no indications at the moment of any move to do so.

### **The Nursing Care Quality Control Act (Pflege-Qualitätssicherungsgesetz - PQsG)**

Quality inspections have shown that the realisation and implementation of quality standards as per the law on nursing care insurance in home and inpatient care have taken markedly different development paths. The introduction of the Nursing Care Quality Control Act was aimed in the first place at avoiding qualitatively poor nursing care and to take immediate action to eradicate it through targeted advisory services and other operative support measures. Nevertheless, we should not lose sight of the fact that although quality inspections are necessary and even indispensable in cases where there is substantiated evidence of misconduct, from the legislators’ point of view, quality of performance in care-giving cannot be improved and developed by sole recourse to more controls and monitoring. What is also needed are differentiated solutions for the assurance, promotion and intensification of the quality of long-term nursing care and which, crucially, encourage and promote the personal responsibility and self-interest of home carriers in providing high quality services in their nursing care homes.

Accordingly the law focuses on two key areas:

- Assuring, developing and monitoring the quality of nursing care, and



- Enhancing consumer rights.

In terms of the inpatient nursing care sector these aims and objectives are closely related to those of the amendment to the Nursing Home Act. Both these laws pursue a complimentary goal, namely to assure the quality of nursing care-giving in nursing homes through close co-operation between the home's own management and the state's home supervisory authority.

The overarching aim is to maintain and improve the quality of life of persons in nursing care. This also includes providing advisory services which empower beneficiaries and their families in the exercise of their rights. It further includes calling to financial account those nursing care homes who do not provide the residents placed in their charge with the necessary standard of care.

The law is formed by the view and the philosophy grounded in it that quality is not a matter that can be introduced into care homes from the outside by force of inspections, but which must be developed inwardly, nurtured by the personal responsibility of the institutional operators and the shared responsibility of those providing the services. What is needed here is a two track approach. On the one hand it is the carriers of nursing homes who bear the main responsibility for assuring and developing quality in their domiciliary, semi-inpatient and inpatient services. On the other, external quality assurance remains in the hands of the regional associations of nursing care insurers and state control through the home supervisory bodies. The nursing care home still has to respond to requests by the regional association of nursing care insurers, the medical services department of the health insurance funds (MDK) or by expert assessors appointed by the regional association of nursing care insurers, and enable inspections of the services it delivers and their quality standards by individual inspections, random inspections and comparative inspections.

The way has now been cleared for retroactive curtailment of remuneration if a care facility involved in domiciliary, semi-inpatient or inpatient care violates its contractual obligations to deliver services of the appropriate quality standard. This does not effect the rights of any concerned party in care to claim compensatory damages as enshrined in other legal provisions.

The nursing care insurers are empowered to support the persons they insure in pursuance of their claims for compensatory damages against the carriers of the nursing care facilities. Should serious deficiencies in inpatient care be ascertained that cannot be remedied in the short term, nursing care insurers are further obligated to respond to applications from the home's residents and find them another suitable nursing care facility that can immediately take over their care, medical treatment and supervision. Should the MDK ascertain grave deficiencies in home care, the authoritative insurer can provisionally ban the care provider from providing further services to people in its care. In such cases the nursing care insurers are obligated to provide those in need of care with another care provider who can smoothly assume charge of their treatment.

Furthermore, domiciliary care services are obligated to base their work on a written care agreement.

The personal responsibility of carriers ensuring the development of quality standards in care-giving in their facilities is independent of the mandate of the nursing care insurers to assure and enable insured persons in need of care access to adequate nursing services in kind through licensed care providers irrespective of their age or income. Institutional carriers must be empowered to take this responsibility seriously. In terms of the nursing care insurance system, this means that instruments must be

provided that enable facilities to make efficient enforcement of their claims for appropriate remuneration of their services vis-à-vis the cost carriers.

### **The Federal Government's Geriatric Care Act**

The federal government's Geriatric Care Act which came into force on 1 August 2003 introduces for the first time a uniform framework across the whole of the Federal Republic for training in geriatric professions. The aims and objectives of the law are to improve the level of training, to make the profession more attractive to young people, and to give it a much higher profile.

In support of the innovative approach to geriatric nursing training, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth has funded model programmes and studies on the realisation of the learning concept, on culturally sensitive geriatric nursing training, on the realisation of a code of practice, and on the functionality of the transfer of knowledge from theory to actual practice. Furthermore, from 2007 to 2010 finance has also been provided for the "Service Network for Geriatric Nursing Training" project which aims to encourage more nursing homes to provide training placements for geriatric nursing professions.

### **Report on the Development of Nursing Care Insurance**

The Federal Ministry of Health has an official mandate to submit a three yearly written report to the legislative bodies of the government on the development of nursing care insurance, the state and condition of the care-providing system in the Federal Republic, and on the implementation of recommendations and proposals of the Government Committee on Issues of Nursing Care Insurance.

In January 1998 and March 2001 the First and Second Reports on the Development of Nursing Care Insurance (BT-Drs. 13/9528 / 14/5590) were submitted while the Third Report (BT-Drs. 15/4125) was published in 2004. These reports use nursing statistics to build a comprehensive overview, and give detailed information on the actual situation of nursing care insurance, and in particular of the number of beneficiaries together with the impact of nursing care insurance on nursing structures and other areas of nursing care and supervision. They may be consulted at [www.bmg.bund.de](http://www.bmg.bund.de).

### **Reports of the Medical Service Departments of Insurance Schemes (MDS) on the Quality of Services in Domiciliary and Inpatient Care-Giving**

The Care Quality Control Act which entered into force on 1 January 2002 has commissioned the medical service departments of the health insurers umbrella organisations (MDS) with producing a comprehensive three yearly report (starting on 31 December 2003) on the findings of the quality inspections carried out by the MDS community in domiciliary and inpatient care-giving facilities.

Published in November 2004, the first report by the MDS was entitled "Quality in Domiciliary and Institutional Care-Giving. The First Report by the Medical Service Departments of the Insurers Umbrella Organisations in Accordance with Section 118 Para. 4 of the Social Security Code XI". The second report published on the same

topic on 31 August 2007 showed that a general improvement in quality had indeed taken place. It also noted that nursing homes have made visible efforts to improve and develop the quality of care they offer.

[www.mds-ev.org](http://www.mds-ev.org).

### **The First Report on the Condition of Nursing Homes and the Care offered to Residents**

The first federal government report published in 2007 was supervised by the Federal Ministry of Family Affairs, Women, Senior Citizens and Youth and drew on the participation of the federal states, charitable organisations, private care-providers as well as a variety of different contributions from academia and groups on the ground.

The report offered evidence to show that over the past few years a steady improvement of the conditions under which older persons live in nursing homes had taken place, such as higher numbers of single rooms, more human resources in the core sectors of nursing care and supervision, and the higher status accorded quality assurance and quality management by home carriers and their associations. The key challenges to be addressed in future are fluctuation of personnel and the heavy work loads they face together with the need to ensure an adequate level of activating care and general improvements in terminal and palliative care.

The report identified promotion of quality competition between the homes and the consolidation of the residents' consumer rights as the two key policy objectives where urgent action is needed.

The Report may be found at: [www.bmfsfj.de](http://www.bmfsfj.de).

### **“Round Table on Nursing Care”**

To improve the life situation of people in need of nursing care and assistance in the Federal Republic, in autumn 2003 the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth in conjunction with the Federal Ministry of Health established the “Round Table on Nursing Care” initiative – a joint initiative drawing together representatives of concerned associations, federal states and local authorities, on the ground groups and academia.

The “Round Table on Nursing Care” initiative aimed to draw up practically orientated proposals for action by autumn 2005 and to use best practice models to point the way forward for the realisation of humane, expert and financially affordable standards in nursing care and supervision. Not the least of its aims was to create a much greater awareness on the part of the whole cast of actors involved in nursing care for extant resources and existing potential, and to win their commitment for the eradication of current shortcomings.

A major result of the initiative is the following Charter:

### **“Charter of Rights for People in Need of Long-term Nursing Care and Assistance”**

People can be in need of nursing care and assistance at any stage of their lives. The Charter of Rights for People in Need of Long-term Nursing -Care and Assistance consolidates the role and legal status of such people and their families and provides information and proposals for shaping the care and assistance process.

The Charter is grounded in the work of the “Round Table on Nursing Care” initiative founded in autumn 2003. This was a joint initiative by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth and the then Federal Ministry of Health and Social Security designed to improve the life situation of people in need of nursing care and assistance in the Federal Republic. Some 200 experts from all sectors

involved in nursing care for the elderly (including federal states, local authorities, institutional carriers, charitable organisations, private associations of carriers, nursing home supervisory bodies, nursing care insurance funds, interest representation bodies for older people, academics and foundations) participated in drawing up the Charter.

By autumn 2005 workshops had drawn up action proposals for improving outpatient and residential nursing care and for eradicating bureaucracy and formulated the Charter of Rights for People in Need of Long-term Nursing Care and Assistance as a key instrument for achieving these goals.

The Charter gives specific definition to those rights enjoyed by people in need of nursing care and assistance in the Federal Republic. Some organisations and inpatient care carriers have already been very successful in implementing the Charter.

The German Centre of Gerontology (DZA – see p. 19) in Berlin has set up a Coordinating Office for Long-term Nursing Care to support the implementation process. More information on this is given at: [www.dza.de](http://www.dza.de).

Comprehensive information on the on-going implementation process can also be found in the internet at [www.bmfsfj.de](http://www.bmfsfj.de) and [www.bmg.bund.de](http://www.bmg.bund.de).

### **“Recommendations for Social Participatory Nursing Care” by the Federal Commissioner for the Affairs of Disabled Persons**

In December 2006 the federal government’s Commissioner for the Affairs of Disabled Persons presented a set of recommendations to further improve nursing care-giving in Germany that had been drawn up jointly with representatives of self-help organisations for disabled people, and charitable organisations.

The aim of these recommendations is so to tailor all services in nursing care that the people receiving them can participate in social life on a basis of equality. The key recommendations for the achievement of this objective concern optimal networking with the rehabilitation and participation services regulated by the Social Security Code IX (SGB IX) and the targeting of all services on the individual cases of persons irrespective of their age or where they might live or reside.

The recommendations can be found on the Commissioner’s web site at: <http://www.behindertenbeauftragte.de>.

### **The Government Committee on Nursing Care**

As set forth in the Social Security Code XI, the remit of the government committee on nursing care founded in 2001 is to advise the government on all matters connected with creating a more effective and economically efficient care-giving service for those who need it, in particular with the aim of co-ordinating the federal government and federal states in their efforts to implement Book XI of the Social Code, and of improving and developing social and private nursing care insurance.

The committee chair and committee management are within the jurisdiction of the Federal Ministry of Health. The committee meets at irregular intervals.

## **Official Statistics on Nursing Care**

Book XI of the Social Code gives the government powers to compile nation-wide statistics for the purposes of nursing care insurance. These give the government and the federal states statistical data on institutional facilities, the kind of services they provide and the number of people they cater for. The last survey took place in December 2005.

## **Nursing Care and Assistance at Home**

The internet advisory page called "Nursing Care and Assistance in Old Age" was commissioned by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth from the German Foundation for the Care of Elderly People (KDA). It offers a general overview of the field and helps older people and their families to locate and make use of services and operative support for their own individual situations. The spectrum of services it covers ranges from advisory centres to outpatient services and the financing of domiciliary nursing care.

Internet: [www.hilfe-und-pflege-im-alter.de](http://www.hilfe-und-pflege-im-alter.de)

## **Benchmarks in Nursing Care**

With funding from the Federal Ministry of Health, five benchmarks have been established for "Decubitus Prevention", "Patient Discharge Management", "Pain Management for Acute or Tumour-Related Chronic Pain", "Fall Prevention" and "Promotion of Continence".

These benchmarks are the fruit of a structured and consensual series of discussions between experts and provide an extremely valuable instrument for facilitating the internal development of quality in nursing care. The debate on quality development in nursing care has shown that approved expert standards are urgently needed in the everyday provision of care. In its capacity as the national coalition of experts in nursing care, the German Network for Quality Development in Nursing Care (DNQP) was in charge of the development, approval and implementation of the benchmarks recognised by the community of specialists. The key success factors in this venture were the high level of expertise shaping the benchmarks, and the broad specialist and health policy discussions that were waged within the nursing care professions and included representative of umbrella organisations and associations in the health care sector along with experts from other health care professions.

Three other benchmarks are currently being elaborated: "Care for People with Chronic Lesions", "Pain Management for Chronic Non-Malignant Pain" and "Appropriate Nutrition and Hydration for People in Nursing Care".

## **Federal Government Model Programmes**

Apart from legislative measures, the federal government is also supporting leading scientists and specialist institutions in the development of a broad variety of successful projects. These include the following:

### **The Model Project on the “Further Development of Nursing Care Professions”**

Progress made in the science of nursing care and medicine, and the rising need for expert staff must be reflected in professional training for nursing care professions. In future the issue of an intersectorial approach for the joint development of old age care, health care and nursing professions needs to be addressed.

In this context, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth is conducting a 4 year model project. Eight model projects have been designed to locate points of convergence between training for the nursing care of old people and training for nursing on the one hand, and training for nursing and paediatric nursing on the other. The trials will place a special focus on the educational goal of care for the elderly. The results of the scientific evaluation will be published in late 2008 ([www.pflegeausbildung.de](http://www.pflegeausbildung.de)).

### **The Model Projects on Quality Improvement in Assistance and Nursing Care**

With the aim of improving the quality of assistance and nursing care, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth has launched a series of projects which include:

- projects for the development, testing and evaluation of standards in nursing care,
- an inventory of existing standards and Quality Management Systems used in actual practice,
- a research project for the identification of potential areas for less bureaucracy in inpatient nursing care for the elderly,
- compilation of a “Practical Manual for Documentation in Nursing Care”,
- development and testing of professional further education opportunities for management in assisted living facilities for old people, and
- a project for improving workflow effectiveness in inpatient care for the elderly.

### **The Model Programme for “Future Structures of Help for Older People”**

Financed by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, this four year large-scale model programme concluded in 2004 has also delivered vital input for the possible future development of existing treatment structures.

A total of 20 different projects investigated new inpatient forms of housing and supervision, ways of consolidating consumer rights, the intertwining of rehabilitation and nursing care, the building of network structures and the establishment of Case Management.

They developed a number of practical solutions including ways of improving counselling/advisory services for older people, ways of providing on-going support for those in need of nursing care and assistance, and ways of improving co-operation and networking between existing help services.

The model projects have shown how quality standards can be developed for association networks, and how structures for improved organisation of complex single case-related assistance can be built.

They also established how the involvement of volunteer helpers can contribute to the creation of a stable form of supervision for those in need of assistance and nursing care complementary to the care provided by professional care-givers. Volunteer

activity especially lightens the burdens placed on the families of people with dementia, and displays its own social quality in relationship to that exercised by professional nursing care-givers. Such informal helpers, however, need adequate training and continuous supervision which in turn calls for a professional infrastructure to be put in place.

This model programme provides a valuable stimulus for the on-going development of assistance services for older people.

### **The Internet Portal “Models of Buildings to Help the Elderly and Disabled”**

The internet portal of the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth presents user-friendly ground plans, photos and explanations.

It can be viewed via ([www.baumodelle-bmfsfj.de](http://www.baumodelle-bmfsfj.de)).

### **The Model Programme “Improvement of Treatment for Persons in Need of Nursing Care”**

For several years now, this model programme run by the Federal Ministry of Health has been delivering insights in a range of concerns including the design of nursing care facilities, work in hospices, treatment of people with dementia, the networking of treatment measures and advisory/counselling services for people in nursing care.

Within the framework of this programme the federal government has sponsored some 600 projects from 1991 to 2004 with funding of over €417 million.

The programme has a mandate to support and monitor the practical implementation of nursing care insurance, and thus to play a part in closing treatment gaps in existing nursing care infrastructures, in developing new forward-looking approaches to treatment and in modernising existing nursing care services.

This means that the programme pursues a variety of development priorities such as adaptation of existing nursing home structures to modern requirements, development of new forward-looking forms of treatment for the home, semi-inpatient and inpatient sectors, specially tailored treatment concepts for individual groups of people such as people with dementia, brain damage, Alzheimer’s or Parkinson’s, and terminally ill people in outpatient and inpatient care in hospices.

It also supports the improvement of regional co-operation, the basic training, further training and advanced training of care-givers and doctors, the establishment of nursing facilities for special groups in need of nursing care, and of modern nursing facilities situated in the vicinity of patients’ homes, domiciliary care for people with dementia, novel forward-looking solutions for planning and documentation software and personnel evaluation.

The programme has also demonstrated that advisory services based on the needs of residents are an effective means of steadily enhancing the quality of investment measures for outpatient, semi-inpatient and inpatient model facilities.

The programme also included the recruitment, training and supervision of volunteer helpers together with a wider remit for civic engagement.

The SOPHIA project commissioned by the model programme (Social Supervision of Elderly People – Assistance in Old Age) provided the older residents of selected houses and apartments in the Joseph-Stiftung in Bamberg with aid and supplementary assistance services via telematic solutions that promote and support self-determined lifestyles. Tenants involved in the model programme could



communicate via monitors with a central service agency at any hour of the day or night. The services offered by the SOPHIA project are also suitable for people with disabilities and could be used as an alternative to follow-up supervision after people are discharged from hospital. SOPHIA proved a most valuable addition to those households where it was installed.

These model projects now influence the standard for modern nursing care facilities, open in their range of services and networked on the outside. Thus the model programme not only proved of value to people in the facilities on which it was focused; by raising the quality standard it also served to help the residents and workers in other new or modernised nursing facilities. The results achieved by the programme will serve as a beacon to light the way to a modern, economically robust, and forward-looking infrastructure of nursing care.

In nearly all cases a timely solution to the issue of follow-up financing was found before the model project reached its end.

The experience and information collected by the Institute for Social Research and the Social Economy (ISO) in its capacity as the project's scientific supervisor – especially material on architectures and concepts – is now available to other operators of nursing care facilities, architects, regulatory authorities, and decision-makers of the federal states as instruments to aid them in their planning and decision-making ([www.iso-institut.de](http://www.iso-institut.de)).

### **Quality Development Based on the DCM Procedure**

With the Dementia Care Mapping Procedure (DCM) the Federal Ministry of Health has presented and tested a care service for people with dementia which represents a tremendous advance in the quality of treatment offered to people in this group. Developed in England, the DCM procedure uses close observation to gain insights into the current state of well-being of the patient. Thus it is now possible to identify in which room of the facility or in which society with other residents the person concerned feels most at ease and which care-giver has the best access to him or her. The procedure tested on this basis has proven its worth for all levels of treatment for people with dementia.

### **Improvement of the Quality of Documentation through Voice-Control Technology**

The technology developed by the model project means that it is possible to use a programme that converts the spoken word into written text on a computer monitor from where it may be printed. The project has demonstrated that the inevitable nursing care documentation can now be recorded orally and much more quickly than with the old written form of documentation which was highly time-consuming and generally done at the end of a working day. The project run by the Federal Ministry of Health also showed that by using the spoken word more extensive and more detailed information could be recorded than was the case with the written form. In this sense voice-controlled documentation represents a significant improvement in documentation quality.

### **Practical Guidelines for Inpatient Facilities**

This project run in the state of North Rhine Westphalia involved 20 nursing facilities in the development and testing of a concept that not only assures quality of care in the facilities but actively develops it. The project showed that if institutional carriers and care-giving operators have the right kind of awareness, it is possible to raise the quality of care without significantly increasing the numbers of care-giving personnel. The project developed a manual in the form of practical guidelines for such instances as nursing process management, service description for the classification of measures in inpatient nursing care, and framework structures for quality assurance.

### **Establishment of a Complaints Department for Care of Older People in Munich**

This department with no counterpart anywhere else in the Federal Republic has now evolved into a broadly recognised institute. It has become so recognised and respected because it thoroughly investigates reasonable problem cases and, wherever necessary, proposes remedial action. Its objective work contributes to a remarkable improvement in the quality of nursing care.

### **The KDA - Error Reporting and Learning System for Care for Older People**

Critical events that lead to serious negative consequences for persons in need of care are a fairly frequent occurrence in the daily running of nursing facilities. If a functional Quality Assurance or Risk Management system is in place within the facility, and if properly effective use is made of it, it is generally possible to identify and process a large number of such critical events and avoid them in future. It should not be taken for granted, however, that such a functional system is in place in each and every facility. Such was the point of departure for this project: those people who experience critical events in the course of their geriatric work and have to process them should be given a medium which enables them to present the critical situation on a voluntary basis so that it can be reviewed by those not (immediately) affected by it.

Such a learning system offers the following advantages: concerned parties can decide for themselves whether they want to make public disclosure of the critical event; public disclosure relieves the concerned parties of emotional stress as they are openly talking about the critical situation; whilst on the other hand the review of the reported events may shed some light on underlying causes and may also possibly indicate some viable solutions and present some good practice models; finally the identification of trigger factors for critical events can enable other people confronted with a similar situation to avoid making the selfsame mistakes.

### **The Innovation Alliance “Independence in Old Age – Services and Technologies”**

The Federal Ministry of Education and Research in conjunction with companies from the medical technology and CIT sector, service sector enterprises, specialist organisations from the health care sector and research institutes, is planning the launch of the Innovation Alliance “Technology and Services for an Ageing Society”. The objective is to enable older people to lead self-determined lives in good health for as long as possible. The basis is the development of microsystem technology, communication and information technology and the services built on them. On an individual level this means the avoidance or reduction of stays in hospital, the lack of need for emergency services or residence in a nursing care facility, the avoidance of falls and injuries, and less erroneous medication. The Innovation Alliance also includes building a demonstrable infrastructure in an application-orientated field trial. The projects currently funded in the Microsystem Framework Programme with its focus on “Preventive Micromedicine” have been dealing with key research and development tasks in this sector since 2006. At the same time the Information and Communication Technology Programme 2020 (ICT 2020) shall start to develop appropriate telecommunications services from 2008 onwards.

### **“Ambient Assisted Living” (AAL) – A European Initiative as per Art. 169**

This initiative joins up AAL research and development efforts of member states and the European Commission into one common research programme. The Federal Ministry of Education and Research was a major mover in the preparation and set-up of this initiative and shall also play a substantial role in its roll-out. Programme launch is scheduled for 2008. In January 2008 the Federal Ministry of Education and Research and the VDE Engineering Association shall host a congress on “Ambient Assisted Living”.

### **The German Prevention Award**

The German Prevention Award 2005 – a co-operative venture between the Federal Ministry of Health, the Bertelsmann Foundation and the Federal Centre for Health Education (BzgA) – was entitled “Healthy Living in the Later Part of Life (50plus)” and identified, and published a series of exemplary prize-winning measures for health prevention and health promotion targeted at older people to activate their motivation. The aim was to nurture a positive image of old age and of active ageing with participation in social life and the world of work.

The German Prevention Award 2007 was awarded for local authority and regional programmes for better health and greater health prevention aimed to promote healthy lifestyles in the population at large, also including older persons.

[www.bmg.bund.de](http://www.bmg.bund.de)

### **The German Forum for Health Prevention and Health Promotion**

An initiative of the Federal Ministry of Health, the German Forum for Health Prevention and Health Promotion was founded in summer 2002. The Forum brings

together 70 key actors from the health care sector to co-operate on the development and realisation of widespread holistic disease-prevention concepts, and on the aggregation of a variety of disease prevention activities and strategies on the government, federal state, and local authority level.

With its “Growing Old in Good Health” working group the Forum has created a focus aiming to promote the physical and mental abilities of older people on a sustainable basis. This working group has begun to promote a positive image of growing older with its “Messages for Growing Old in Good Health” disseminated through its member associations. The strategy paper “Old Age as an Opportunity” presents fundamental starting points and strategies for disease prevention and health promotion in the second half of life. On the other hand, the “messages” are targeted at individual persons offering them 15 rules for growing old in good health. In April 2004 the Forum organised a conference in Berlin on “Society with a Future – Old Age as a Challenge for Disease Prevention and Health Promotion” which discussed current options for promoting good health in old age and helped to disseminate knowledge of such measures across the whole country.

In autumn 2007 the Forum shall publish its “Recommendations for the Development of Health Prevention Goals in the Later Part of Life”.

In late 2007 the German Forum for Health Prevention and Health Promotion was merged with the Federal Association for Health Prevention and Health Promotion.

For more information, see: [www.forumpraevention.de](http://www.forumpraevention.de).

### **Publication on “Growing Old in Good Health – Disease Prevention and Health Promotion in Advanced Old Age”**

Published by the Federal Ministry of Health, this brochure gives to-the-point information on a variety of topics including healthy eating, physical exercise, non-smoking and reducing alcohol consumption. The publication serves to activate the sense of personal responsibility of each individual.

It can be obtained free of charge from the Federal Ministry of Health. [www.bmg.bund.de](http://www.bmg.bund.de).

### **The Campaign “Keeping Fit in Old Age: Healthy Eating, Better Living”**

The aim of this campaign funded by the Federal Ministry of Food, Agriculture and Consumer Protection is to inform the increasing numbers of older people about a proper and balanced diet. The campaign highlights the special nutritional problems associated with this demographic group, and underlines the importance of healthy nutrition for physical and mental well-being.

In February 2007 the Federal Association of Organisations for Senior Citizens (*Bundesarbeitsgemeinschaft der Seniorenorganisationen* - BAGSO) (see p. 21) became an official partner of the campaign “Keeping Fit in Old Age – Healthy Eating, Better Living”. In terms of the project, it offers all its affiliated associations the chance to participate in free nation-wide professional training programmes for trainers. This further education opportunity is organised in co-operation with the German Nutrition Society (DGE), the Hamburg Office for Consumer Rights (VZ HH) and the German Society for Dentistry for Older People (DGAZ). The training courses provide schooling in the connections between eating habits and health and, for the first time, between nutrition and oral health.

The BAGSO web site can be found at: [www.bagso.de](http://www.bagso.de).

### **Early Diagnosis of Disease**

Statutory health insurance funds offer all the people they insure over 35 years old the opportunity of taking a health check-up every two years for early screening against cardiovascular and kidney malfunctions and diabetes. In addition, women over 20 and men over 45 may take in some cases a yearly check-up for the early recognition of certain types of cancer. The statutory early diagnostic programme is regulated by directives from the joint self-administration of physicians and health insurance funds and the Joint Federal Committee. The early diagnostic check-ups of the statutory screening programme are exempt from payment of the quarterly flat-rate charges to patients for outpatient treatment.

Since the introduction of the Strengthening Competition between Statutory Health Insurance Funds Act (GKV-WSG) on 1 April 2007, health insurers are obligated to inform the people they insure at the beginning of each calendar year about the key voluntary prophylactic or screening check-ups they may take advantage of.

### **The Federal Co-ordinating Office for Women's Health**

The federal government attaches great importance to the consistent implementation of the principle of gender mainstreaming in terms of nurturing a specific women's perspective in the health care system.

Accordingly, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth initiated a three year project terminating in February 2005 to establish a Federal Co-ordinating Office for Women's Health charged with the implementation of gender mainstreaming in the health care system.

### **Health Care Specifically for Women**

With the publication of its "Report on the Health Situation of Women in Germany" in 2001 and the follow-up expert conference on "Women's Health – Women's Lives-Women's Work" which placed a spotlight on the particular health situation of older women, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth provided a major stimulus for the implementation of health care specifically targeted at women.

The findings of a study on "The Life Situation of Older, Single, Non-German Women" showed that the major problems affecting the health of this group of persons are of a psychological and psychosomatic nature. Their serious lack of knowledge about the system and assistance services for older people further exacerbates their situation, and requires a range of assistance and support services to be put in place specially tailored to take account their age and special requirements so that less educated non-German women can also be better cared for with respect to quantity and quality.

## **“Health Prevention for Women in the Second Half of Life”**

The Federal Ministry of Health is conducting a departmental research project on “Health Prevention for Women in the Second Half of Life – from 55 upwards” to gain a clearer idea of the need for specific prevention programmes to address this particular target group.

## **The Women’s Health Internet Portal**

The Women’s Health Portal run by the Federal Office for Health Education (BZgA) offers among other topics practical guidance on health-conscious living for women of middle age. The guide was born from an initiative of the Federal Ministry of Health and represents an extension to the information services for women’s health provided by the Federal Office on the internet ([www.frauengesundheitsportal.de](http://www.frauengesundheitsportal.de)).

## **Violence against Older People**

The survey on “Crime and Violence in the Lives of Older People” is financed by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth and conducted by the Lower Saxony Criminology Research Institute (KFN), the German Centre of Gerontology (DZA see p. 19) and the University of Hildesheim. The study explores risks, consequences and coping strategies for victims and also enables gender comparisons. Following a survey of victims conducted in 1992 by the KFN, a comprehensive survey instrument is now being deployed for some 3000 persons to collect a very broad range of accounts of victimisation from families and household members.

The focus of the current survey is on physical violence, sexual violence, verbally aggressive and demeaning behaviour, material exploitation and specific forms of victimisation encountered by persons in need of nursing care and assistance from people close to them. Various methodological approaches are used to examine risks of violence and experience of violence in the out-patient care sector in parallel and in conjunction with one another.

Scheduled for completion in mid 2008, the study will throw a strong light on the experience of crime and violence against older people and their associated risks across a very broad array of life situations. An interim report is published on the home page of the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth at: [www.bmfsfj.de](http://www.bmfsfj.de).

Published in 2004, the representative survey on “The Life Situation, Security and Health of Women in Germany” for the first time collected data from 10,000 women between 16-85 years of age about the extent of violence to which they are exposed and the general way violence impinges on many of their lives. A special evaluation of the survey by a European research project also revealed the large extent to which violence impinges on the lives of women over 60 years: nearly one in seven women (13 percent) have experienced physical violence from their current or former partner. Special evaluation of the prevalence survey on the theme of “Perceptions of Security among Older Women” forming part of the survey on “The Life Situation, Security and Health of Women in Germany” shows that older women have a much more pronounced sense of insecurity and greater fear of crime and violence in public

places, and thus curtail their out of the house activities more drastically than younger women do.

### **The National Alzheimer Association of Germany**

There are now approximately 1 million people suffering from dementia in the Federal Republic and these numbers are increasing steadily.

Funded by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, the Deutsche Alzheimer Gesellschaft uses print and electronic media to inform the general public about the nature of Alzheimer's and ways of coping with the illness. It also provides advice and support for regional networks of the self-help movement for patients and their families.

It runs the database on Alzheimer's which stores up to date information used by the telephone advisory service of the Deutsche Alzheimer Gesellschaft and enables it to provide contact addresses in the immediate vicinity of callers. This service is complimented by an internet advisory service with a particular focus on legal and medical issues.

Deutsche Alzheimer Gesellschaft, Friedrichstrasse 236, 10969 Berlin, Tel.: 030-31505733, [www.deutsche-alzheimer.de](http://www.deutsche-alzheimer.de).

### **Alzheimer's Telephone Line**

Nursing care giving relatives, professional helpers and patients themselves show substantial need for information for example about the disease pattern, therapy, local support agencies, advice on how to settle conflicts in critical care situations etc..

The centralised telephone support and advisory services offered by the Alzheimer's Telephone Line were set up in November 2001 to address this need and provide a single nation-wide telephone number where callers are given help by trained staff from the offices of the National Alzheimer Association of Germany.

The number is 01803-171017.

### **The Dementia Action Programme**

This programme was created by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth and brings together under one roof all the key measures and projects for improving the situation of patients and their nursing care-giving relatives.

The main aims of the Dementia Action Programme are to:

- facilitate access to available information and assistance services for patients and potentially interested parties;
- encourage the development and networking of assistance structures;
- raise social awareness of the particular problems associated with dementia, and provide the basic skills and abilities needed to cope with life with dementia.

Accompanying measures such as organised events, initiatives, projects and operative aids develop a range of solutions for improving care and support to cope with dementia in everyday life. In particular such measures include the development of standards in nursing care and quality management.

Specific action will continue to be taken to reinforce measures to assist and ease the burdens of family members caring for people with dementia.

### **The Dementia Lighthouse Project**

Within the framework of the joint activities undertaken by the federal government to address the theme of dementia, the Federal Ministry of Health aims to use the Dementia Lighthouse Project to identify outstanding projects in 2007 in the fields of prevention, research, diagnostics, therapy and care, and to continue to develop, support and disseminate them in the follow-up period. The lighthouses are intended for projects and initiatives of an exemplary nature which act as beacons pointing the long-term way forward in their own respective fields. This intersectorial joint initiative especially aims to bring together activities of the large cast of concerned stakeholders, and to ensure that the insights gained from development measures are rapidly translated into actual everyday practice in care-giving.

Thus the Dementia Lighthouse Project has its focus trained on research into care. Support measures for the following four areas of work should follow in the course of the next few years:

1. Therapy and nursing care-giving measures: their effectiveness under everyday conditions;
2. Evaluation of care structures
3. Assurance of evidence-based care
4. Evaluation and development of professional training aimed at specific target groups.

### **The Dementia Information Campaign**

The Deutsche Alzheimer Gesellschaft was commissioned by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth with the development and delivery of a national-wide information campaign in 2005 and 2006. With the banner headline "Don't forget to help" the campaign conveyed its message about dementia in a personal, emotional and original way without, however, intending to shock. Thanks to a large number of sponsors and the support of a large number of institutions, excellent media visibility was ensured. The campaign is being continued with the "Book of Memories" in which well-known persons in public life write down their thoughts for coming generations. The "Book of Memories" will be an historical document of enduring value.

In such ways the campaign has helped to influence and shape public perceptions and ways of behaviour, especially in relation to dementia of the Alzheimer's type. It has activated untapped assistance potential in the form of voluntary engagement and eliminated much of the stigma attached to the illness.

### **The German Expert Group for Care for People with Dementia (DED)**

The work of this association of specialists, whose projects and measures are supported by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, produces co-ordinated material for proposals for the care of people with dementia. Its work is concerned with practical aspects and utility applications such as



fire protection, kitchen hygiene, nutrition and mobility. The group also gives valuable input for the development of standards of nursing care.

Its postal address is: Deutsche Expertengruppe Dementenbetreuung e.V. E-Mail: [info@demenz-ded.de](mailto:info@demenz-ded.de), and its internet web site is at: [www.demenz-ded.de](http://www.demenz-ded.de).

### **Development Focus: Care for People with Dementia in the Model Programme for “Improvement of Care for Persons in Need of Nursing Care”**

In its model programme for “Improvement of Care for Persons in Need of Nursing Care” (see p. 82) with its development focus on care-giving for people with dementia, the Federal Ministry of Health is pursuing a whole series of projects focussed on the special needs of people with dementia.

These projects range from the development of care structures adapted to the needs of people with dementia in inpatient and residential facilities, or projects for a self-determined life with dementia and outpatient assistance in and outside of residential housing communities to care-giving to people with dementia by volunteer helpers including their recruitment, training and support. The set of projects is supplemented by special assignments in care-giving to people with dementia such as semi-residential housing communities.

### **The Project for “Housing with Rural Orientation for People with Dementia”**

As an alternative to the nursing care home, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth is funding an apartment house in Brandenburg that is well integrated in the local community and offers opportunities for people with dementia to lead active lives.

Personal life histories of residents are taken into account and priority is given to those who come from the local area thus ensuring social continuity and recognition.

As far as possible the grounds of the house are tended and cultivated by the residents themselves. A geronto-psychiatric worker is on hand to offer support, but the main goal is use the leverage of voluntary engagement from members of the local community to ensure that the house is properly embedded in local community life ([www.baumodelle-bmfsfj.de](http://www.baumodelle-bmfsfj.de)).

### **Research Report on “Key Guidelines for Coping with Challenging Behaviour by People with Dementia in Residential Geriatric Care”**

The publication of the research report on “Key Guidelines for Coping with Challenging Behaviour by People with Dementia in Residential Geriatric Care” marked an important contribution to the Dementia Lighthouse Project (see p. 90) agreed on by the governing coalition.

The research project was commissioned by the Federal Ministry of Health and conducted by a research group composed of the Institute of Nursing Science of the University of Witten/Herdecke, the German Foundation for the Care of Elderly People (KDA), which is a research and advisory association for geriatric care in Cologne. Forms of behaviour such as aggression, agitation, apathy/withdrawal and voice malfunctions cause particular stress both for residents of nursing homes and nursing care-giving staff. The research report formulates key guidelines for the following

issues: understanding diagnostics, assessment instruments, validation, tending memory capacities, touch/sensory stimuli, encouraging mobility and identification of nursing care-giving responses to acute psychiatric crises. Thus the report offers a solid foundation for the future development of expert standards for greater quality assurance in nursing care.

Research Report 007 Health Promotion by the Federal Ministry of Health.

### **The Federal Government Programme for “Health Research: Research for Human Beings”**

Geriatric Research is included in the Federal Government’s health research programme “Health Research: Research for Human Beings” run jointly by the Federal Ministry of Education and Research and the Federal Ministry of Health is a key cross-sectional issue that figures largely in a very broad range of different development focuses.

Account is taken of a series of development measures which are either focussed on elderly patients (such as competence networks for dementia and Parkinson’s) or in which individual research projects are concerned with age-related themes – such as those within the framework of research into care-giving.

Moreover, in 2007 a special development focus on “Health in Old Age” was included in the health research programme which particularly addresses issues of multi-morbidity and the maintenance of mental and physical resources and autonomous lifestyles for older people. At the same time a specific strand of research concerned with issues connected with older people was set up in the Prevention Research Programme.

The Health Research Programme covers a variety of different fields:

- Effectively combating disease
- Research into the health care system
- Health research in co-operation with industry and science, and
- Consolidating the research landscape through structural optimisation / innovation.

The following research projects addressing issues of old age are mainly located in the first two fields:

### **Research Alliances on “Health in Old Age” (2007 – 2010)**

One of the major challenges here is the increasing prevalence of multiple diseases in old age (co- and multiple morbidity) often connected with the taking of many different kinds of medication (multiple medication). There is still a serious lack of research in this field.

Maintaining and promoting self-determined lifestyles and health resources is one of the key concerns of older people. In this context there is a need for research that promotes effective strategies for preventing the progress of existing illnesses and ensuring effective support that enables older patients to cope with physical and psychological impairments.

The root causes of many illnesses that mainly appear in old age stretch back to the patient’s early years. Thus, investigations of the mutual effects of behaviour and health are of especial importance. Social contexts and different forms of behaviour do not only influence the probability of a disease occurring but also impact on the ways

of dealing with diseases such as chronic illnesses and thus play a significant role in determining the weight of the illness.

Research sponsored by the Federal Ministry of Education and Research within the framework of this development focus is concerned with research issues which can provide a scientific basis for improving medical treatment and care for older people.

Six research alliances dealing with "Health in Old Age" are planned. The first development phase is scheduled to begin in 2007 / 2008 with a total duration of six years for the programme.

### **Development Focus: "Application-Orientated Prevention Research" (2004 – 2010)**

Targeted prevention is a great step forward to achieving the maximum degree of health benefits. In this context prevention and health promotion play a vital role. Thus "health promotion" should be understood to mean both the development of individual skills and abilities and the building of structures that promote health with a view to empowering people to make their own decisions about health. This equally includes support in the building and consolidation of individual health-related resources and skills for the avoidance of illness, and the building and consolidation of health-promoting structures in every area of life. In this context "primary prevention" is understood as prevention of the first appearance of an illness. This includes education to promote proficiency in individual strategies to cope with the risks and burdens of illness before the illness appears, along with support for enabling individuals to make health-related changes in their modes of behaviour.

Prevention and the health promotion associated with it are an especially important field of research for society in general. Health providers can meet the high expectations placed on preventive measures only if they are given evidence-based and target-group specific measures and standards for appropriate quality management.

The declared aims of the guidelines for the promotion of health prevention research first published in 2003 are to improve the quality of data records for evaluating the effectiveness of primary prevention and health promotion measures, to reduce socially rooted inequality of opportunity in accessing health care resources, and to provide evidence-based, quality controlled and target-group-based prevention measures for prevention providers.

The current development focus is on innovative projects for primary prevention and health promotion aimed at older people from 50 years of age upwards. 14 projects are funded concerned with nutrition/mobility, measures for particular demographic groups (the long-term unemployed, family nursing care-givers, people with dementia in nursing care homes, immigrants) and are setting-specific measures targeted at residential neighbourhoods and places of work.

### **Development Focus: "Application-Orientated Research in Nursing Care" (2004 – 2010)**

Obviously, it is mainly senior citizens and people of very advanced age who grow in need of nursing care and call on the relevant services. In the light of future demographic developments the need for nursing care services is set to steadily increase. In Germany the number of people in need of nursing care and enrolled in

social nursing care insurance is expected to increase from the present level of 1.9 million to over 3 million by the year 2030. The quality level too shall undergo long-term changes as quality standards for nursing care improve and patients' requirements increase. In nursing care changes and progress draw heavily on research. Scientifically grounded principles for action are just as important as traditional empirical knowledge in meeting the requirements of a modern health care system.

The Health Research Programme responded to these developments with the launch of "Application-Orientated Research in Nursing Care" in June 2001. Since February 2004 funding has been provided for two development phases comprising 50 projects stretching over a total six year period. The core of the programme is composed of some 20 projects focussed on geriatric care and in particular nursing care for people with dementia.

### **Development Focus: "Research in Care-Giving" (2001 – 2008)**

This development focus is supported jointly by the Federal Ministry of Education and Research and the umbrella organisation of statutory health insurance funds. The joint funding agreed on for a period of six years is to support projects in a variety of different fields. For the period 2001 - 2007 a total of 31 research projects have been sponsored, 7 of which are directly concerned with aspects of old age.

When the research in care-giving programme was first announced, the focus was on the complex of themes related to "care-giving procedures for older patients with multimorbidity". Within the terms of this research focus, the following projects have been funded:

- Old women and men with a heavy need of the health care system;
- Pharmacotherapy in old age – consistency in medication following a switch of the nursing facility;
- Investigations of the need for outpatient and hospital services by residents of geriatric homes and nursing care homes;
- Intersectorial evaluation of the quality of nursing care in the treatment of fractures of the femur neck.

Further projects relating to issues of old age were announced in the two further research programmes:

- Treatment procedures for chronically sick older people;
- Testing a modular-based training programme for nursing care-giving relatives of people with dementia;
- Outpatient physiotherapy for chronic apoplexy patients in their own homes.

### **Development Focus: "Rehabilitation Sciences" (1998 – 2007)**

This development focus was jointly funded by the Federal Ministry of Education and the Association for German Pension Insurance.

Between 1998 and 2005 eight alliances for research into rehabilitation science sponsored a total of some 180 research projects.

Given the responsibility of the Association for German Pension Insurance for its members in gainful employment, the main objective of the rehabilitation measures and their associated issues was geared to a return to the world of work in accordance with the maxim "rehabilitation takes precedence over pensioning". Thus research themes for the rehabilitation of people over 65 years of age do not form an explicit

part of the development focus. Even so, some of the findings of projects from the development focus can still be usefully applied to this group of older people. In particular these include research projects focussed on post-rehabilitation follow-up care, factors governing the long-term success of rehabilitation measures and those covering the types of illness which occur with greater frequency with advancing old age such as impairments of the musculoskeletal system and cardiovascular diseases.

Model projects in this field include the project on enhancing the long-term success factors for inpatient cardiological rehabilitation and the project on “Development and evaluation of a telephone-based follow-up care programme for cardiological rehabilitation: disease management by specialised care-givers”.

### **Development Focus: “Care-Giving-Related Research; Chronic Illness and Patient Orientation” (2007 – 2010)**

In 2006 the federal government and social insurance funds signed an agreement for funding care-giving-related research. This converged activities in the fields of care-giving research and rehabilitation sciences, and enabled research to be conducted beyond the confines of the social insurance system. The actors in this development focus are the Federal Ministries of Education and Research, Health, and Employment and Social Affairs, the Association for German Pension Insurance, the umbrella organisation of statutory health insurance funds, and the Association of Private Health Insurers. Acting on a joint basis, they support research in the field of “Chronic illness and patient orientation” and drive forward the transfer of new insights to clinical practice. The Federal Ministry of Education and Research together with the Association for German Pension Insurance, the umbrella organisation of statutory health insurance funds and the Association of Private Health Insurers shall provide funding for over 40 projects in the next six years. The first development phase shall begin in late 2007.

This first development focus places the accent on patient orientation in terms of targeted measures for the provision of appropriate information for patients, for the instruction of chronically sick people, and for improved co-determination rights for patients in deciding on the form of treatment. This common focus shared by a variety of different funding sources should serve to establish research spanning the entire domain of care-giving and to raise the awareness of stakeholders in the health care system about the quality, utility and sustainability of care.

Projects dealing with chronic illness inevitably have a high incidence of patients from the older age bracket in their target groups, especially when it comes to dealing with illnesses that are more prevalent in old age such as apoplexy and diabetes mellitus type 2. The testing and evaluation of a policy of active involvement and promotion of co-determination rights giving patients a voice in their own treatment and specially targeted at older patients should yield valuable input for the future organisation of care-giving for older people.

### **Development Focus: “Medical Competence Networks” (1999 – 2010)**

The Federal Ministry of Education and Research is currently funding 17 nation-wide medical competence networks, 9 of which are concerned with age-related illnesses or deal in part with age-related issues.

Medical Competence Networks treat specific disease patterns in the fields of oncology, inflammatory infectious diseases, neurological and psychiatric illness, and cardiovascular disease. The key task of the Medical Competence Networks lies in horizontal integration – a field which calls for interdisciplinary co-operation between basic science and clinical science, and the participation of the leading experts in Germany with a view to developing novel and efficient problem-solving strategies. A further aspect is vertical integration which calls for the involvement of the whole cast of actors in the health care system from universities down to licensed physicians and their patients. With the help of these networks knowledge scattered over a variety of points should be clearly revealed and collated. Furthermore, these networks are expected to facilitate the transfer of knowledge to practical and economically viable solutions and to contribute to improving the general quality and cost-effectiveness of the health care system. The establishment of sustainable and stable central network infrastructures are key goals on the way to ensuring that co-operative research and the transfer of project findings into medical practice are placed on secure and stable foundations.

Although the promotion of Medical Competence Networks is centred on fields of illness of key importance in epidemiological and health policy terms, many competence networks deal with illnesses which are particularly prevalent in old age and which constitute key problem areas for research into old age within health care research. The following sections discuss the importance of research into old age for the relevant competence networks taking into account the epidemiological background and the extent of funding they have received thus far.

### **The Acute and Chronic Leukaemia Competence Network (1999 – 2009)**

Leukaemia covers a group of cancer entities where the average age of infection is 60 for men and 64 for women. Even if in accordance with this statistic two thirds of all patients are over the age of 60, only a third of patients older than 60 are treated in therapy optimisation studies.

This Competence Network has drawn up a study protocol especially for the registration of patients over 60 suffering from acute myeloid leukaemia (ALM).

### **The Lymphoma Competence Network (1999 – 2009)**

The Lymphoma Competence Network deals with malignant lymphoma diseases including the so-called Hodgkin's and non-Hodgkin's types of lymphoma. Whilst Hodgkin's lymphoma mainly affects younger patients – incidence of the disease in industrialised countries reaches a first peak between the ages of 15 and 35, and a second smaller peak after the age of 65 – the majority of those suffering from non-Hodgkin's lymphoma are older adults (the average age here is just under 60).

The Competence Network has brought the main lymphoma study groups and licensed haemo-oncologists together under its roof in an endeavour to improve the quality of treatment and clinical research in this field. Furthermore, the Competence Network also hosts one of only two German Cochrane Groups dealing with haematological malignancies. This group draws up basic principles for non-commercial clinical studies informed by surveys and patient involvement.

### **The Dementia Competence Network (2002 – 2007)**

In the light of demographic developments, dementia-related illnesses pose one of the major health policy challenges to society whilst also being associated with serious economic implications. The key protagonist here is the Alzheimer's type of dementia. In Germany there are now some one million people with dementia, and this figure is expected to double by the year 2050.

The Dementia Competence Network is structured in a number of subordinate sections. Its aim is to improve early and differential diagnosis using neuropsychological testing, neurochemical dementia diagnostics and state of the art methods of disease mapping so that therapy can begin at the earliest stage possible. A prospective, multi-centered, longitudinal study is monitoring a large-scale cohort of over 3000 patients in general practitioner's surgeries over a long period. At the same time the Network is also working on more efficient forms of pharmacotherapy.

### **The Degenerative Dementia Competence Network (2007 – 2010)**

The Federal Ministry of Education and Research has now initiated a new generation of competence networks, the first of which concerns degenerative dementia. This network, with three major research syndicates, will begin work in autumn 2007 and in the following three years will investigate the development of new curative medicinal therapies, and conduct a prospective longitudinal study of patients for a detailed study of the critical transition from low-level mental impairment to full-blown dementia.

On condition that it works well, this network could be in existence for a 12 year period during which time it would grow and integrate areas of particular relevance for dealing with issues of dementia research. This could give rise to a national research community on dementia which addresses vital issues on a jointly co-ordinated basis.

### **The Apoplexy Competence Network (1999 – 2008)**

In industrialised countries apoplexy (strokes) are the third most common cause of death after heart attacks and cancer. In Germany alone each year 250,000 people suffer a stroke; approx. 75,000 of them die within the first month. Prevalence of apoplexy is about one percent of the overall population and there is a clear connection between it and age factors. The drop in the number of new cases that has been observed over the past 50 years and which is due to improved means of treatment has now levelled out in the past few years given the increasing numbers of older people in the population.

The Apoplexy Competence Network shall strive to intensify the intermeshing of basic and clinical research. Along with basic research into the mechanisms causing apoplexy and possible genetic factors contributing to the higher risk of a stroke, the pathophysiology of apoplexy is also being investigated using magnetic resonance tomography (MRT). In the search for new treatment methods trials are being run on using ultrasound technology to reopen vascular obliterations in bed-ridden patients with acute apoplexy while analysis of patients' coagulation systems is also being deepened to improve thrombolytic therapy. Development of new and more effective rehabilitation methods and the use of telemedicine for optimisation of care-giving for patients with strokes is also the subject of scientific investigation. Multi-centric clinical

studies are conducting trials on new medication, diagnostic procedures and surgical operation methods. Other projects are concerned with identifying the key factors that delay care-giving to people with strokes, and with investigating perceptions and communication of risk factors.

### **The Parkinson's Competence Network (1999 – 2008)**

150,000 to 200,000 people in Germany suffer from Parkinson's syndrome. It is one of the most common neurological diseases in old age – more than one percent of people over 65 are affected by it. It is caused by damage to nerve cells in a certain part of the brain whereby in most cases the original cause of the damage is unknown. The main symptoms of Parkinson's disease are a slowing of physical movement, tremor, muscle rigidity and impairment of holding reflexes.

The Parkinson's Competence Network aims to co-ordinate research in this field to facilitate the rapid transfer of knowledge from research into practice and practice into research, and to provide further training for patients, physicians and students. A central database was established to provide standardised clinical data on patients with Parkinson's for care-orientated and health care economy studies while collections of tissue facilitate cellular and genetic research into the causes of the disease.

### **The Depression Competence Network (1999 – 2008)**

Along with dementia, depression is one of the most common psychiatric illnesses in old age. Approximately 5% of people over 65 suffer from some form of depression requiring treatment. People living in retirement or nursing homes even have over a 10% risk of suffering from depression. In Germany alone the suicide rate is nearly twice as high as that for deaths in road accidents. Most suicides occur in cases of treatable depression; 40% of all suicides are committed by people over the age of 60. The chief problem in this context is the lack of care for patients. Depression in older people is frequently not recognised as it is masked by other more prominent illnesses and thus does not receive adequate treatment.

The Depression Competence Network builds models for the more efficient design of suicide prevention (such as the Nuremberg Alliance against Depression) and also develops special activities for the field of nursing care for older people. Training courses for care-giving staff using specially developed educational material have been conducted in 300 nursing facilities for older people.

### **The Atrial Fibrillation Competence Network (2003 – 2008)**

Atrial fibrillation (AF) is the most common form of irregular heart rhythm and is associated with a significant morbidity rate. One percent of the adult population has AF and its frequency doubles with every ten years of life. 2 to 3 new cases occur in every 1000 people in the 55 to 64 age bracket while 35 new cases are recorded for the 85 to 94 age group. Prevalence of AF among older people can be as high as 20 %. A recently published cohort study has forecast that demographic developments will lead to a 250% increase in patients with AF by the year 2050.



The Atrial Fibrillation Competence Network develops new methods of diagnosis and therapy. This includes conducting experimental investigations of the root causes in terms of genetics and molecular biology and analysis of the electro-physiological effects of atrial fibrillation. Patient data is collected on an anonymous basis to enable high quality clinical studies. Such data is especially useful as the basis for wide-angled epidemiological studies and for establishing a registry of patients. In addition, new medicinal and technical forms of treatment are being evaluated in clinical trials. A second network development stage of three years is planned.

### **The Cardiac Failure Competence Network (2003 – 2008)**

Cardiac failure is a very widespread disease affecting way in excess of two million people in Germany. Prevalence of cardiac failure is between 1% and 2%, yet whilst it is seldom seen in people younger than 40, its prevalence peaks at approx. 7-8% in people of over 75. Thus cardiac failure is an illness especially affecting people of advanced age.

The focus of the scientific projects run by the Competence Network is on co-ordinated research into cardiac failure ranging from its epidemiology and molecular genetic causes and modern diagnostic methods through to innovative forms of therapy. Diagnostics are focussed on non-invasive methods for mapping the geometry and functions of the heart with a secondary strand investigating the value of new serum markers. In terms of care-giving practical guidelines are being established for physicians in clinics and surgeries based on the latest scientific findings. The Competence Network also supplies patients with comprehensive information on disease patterns and the status of current research written in clear non-specialist language. A second network development phase of three years is planned.

### **The Community Acquired Pneumonia (CAPNETZ) Competence Network (2001 – 2010)**

Community acquired pneumonia (CAP) is the most common cause of death by infection for older patients (>65) and overall the sixth most common cause of death in Germany.

The incidence of CAP and its mortality rate is higher among older patients than among younger. Age in excess of 65 is a recognised independent risk factor for CAP. As the majority of clinical studies published and liable for licensing by the FDA or EMEA largely exclude elderly patients, their data on effectiveness, security and pharmacokinetics for this particular patient population (or even risk population in pharmacological terms) could well display certain shortcomings. The CAPNETZ is thus conducting a study on the optimisation of antibiotic therapy for older patients with community acquired pneumonia.

### **The Research Alliance on Retina Implants – Age-Associated Macular Degeneration (AMD) (2000 – 2006)**

Macular degeneration is a medical condition of the eye generally found in elderly adults and characterised by increasing impairment of the central (sharp) vision.

Although it does not cause blindness even in its final stages and the patient can still move around, it does cause impairment and results, for instance, in an inability to read or drive a car. Its prevalence increases with advancing age. Early forms of AMD occur in 35% of over 75s and its final phase in 5% of the same age group. The Federal Ministry of Education and Research funds development of an electronic retina implant as a substitute for the damaged macula area of the retina for patients with retinitis pigmentosa which could possibly be usefully applied to people with AMD.

### **Development Focus: “Application-Orientated Breast Cancer Research”**

Breast cancer in Germany is the most common form of cancer affecting women: one in four women with cancer has cancer of the breast. According to the German Cancer Research Centre in Heidelberg, every year around 43,000 women contract cancer, of whom only around 15,000 are younger than 60 at the time of diagnosis. The risk of contracting cancer increases sharply from the age of 40 upwards. Thus it is mainly older women who are affected by this condition.

In Germany there is a very clear lack of clinical patient-orientated research in the field of breast cancer. These development measures are designed to promote and reinforce interdisciplinary research into breast cancer which is so urgently needed. Research alliances are being developed to produce high quality studies by coupling the research project with care structures where breast cancer is given high-level quality assured treatment. At the same time the status of quality assurance measures is being enhanced in an endeavour to facilitate better treatment for patients independently of the mid-term implementation of the project findings.

### **The National Genome Research Network (NGFN)**

The key development measure for research into the human genome is the National Genome Research Network (NGFN; 1<sup>st</sup> development phase 2001 – 2004, 300 projects; 2<sup>nd</sup> current phase 2004 – 2008, approx. 400 projects).

With the co-operative networking of disease-orientated and cross-disease systematic genome research, the NGFN is building a highly integrative, strongly interdisciplinary major project focussed in health policy terms of key prevalent diseases which include a large number of diseases especially affecting people of advanced age.

In the second development phase (NGFN-2) the disease-related genome network (KG) “NeuroNet“ contains the “Alzheimer’s“ subnetwork (6 projects of three years duration) and the “Parkinson’s“ subnetwork (7 projects, three years duration) which are especially targeted at neuro-degenerative conditions of high frequency in old age which lead to increasing loss of brain functions resulting in a variety of impairments including chronic dementia, serious personality changes, and serious loss of control of bodily functions. These subnetworks are focussed on the search for genomes which lead to a disposition for illness, and their validation and functional mapping. The disease-related genome network KG “Apoplexy” (5 projects, three years duration) is concerned with research into gene regulatory cellular mechanisms for post-apoplexy rehabilitation with a variety of instruments including animal models and stem-cell-based methods. One of its main aims is to improve the effectiveness of clinical rehabilitation measures. Alzheimer’s, Parkinson’s and apoplexy are all illnesses which lead to an extremely high incidence of patients in need of

considerable nursing care, and thus are medical conditions carrying widespread social and economic implications. The disease-related genome network KG “CancerNet” (31 projects, three years duration) puts its research focus on acute leukaemia, bowel cancer and breast cancer and investigates relevant clinical issues such as therapy resistance and metastizing. It combines genome research approaches with those used in experimental tumour biology in an endeavour to develop improved therapy options for these serious conditions of such prevalence in old age. There is also a very sharp rise in cardiovascular diseases with advancing age. The disease-related genome network KG “Cardiovascular” contains 20 projects of three years duration that use the methods of genome research to identify new methods of diagnostics and therapy especially in the fields of high blood pressure, cardiac failure, heart attacks and cardiomyopathy; other indicators are arteriosclerosis and diabetes.

### **Informing the Public on Research and Issues Concerning Old Age**

#### **“Geriatric Research” Newsletter**

Depending on the type of definition used, up to four out of five Germans over the age of 60 are chronically ill. Numerous illnesses appear in old age with much greater frequency such as cardiovascular conditions, cancer, Alzheimer’s and Parkinson’s. In conjunction with the fact that no other population group exhibits such rapid growth as that of senior citizens, this means that the spotlight of medical research should be placed on the older generation. To compensate for shortcomings in this field, the Federal Ministry of Education and Research supports a broad variety of scientific projects which it presents in the “Geriatric Research” Newsletter (initiated May 2005). [http://www.gesundheitsforschung-bmbf.de/media/08\\_NL\\_Alternsforschung.pdf](http://www.gesundheitsforschung-bmbf.de/media/08_NL_Alternsforschung.pdf)

#### **Pamphlets on Particular Illnesses**

##### **Fighting Memory Loss – Focus on Dementia Research**

In the past few years scientists have researched basic molecular mechanisms and thus laid the foundations for a better understanding of disease processes and their triggers. For the first time the way has been opened to make causal interventions into the course of the illness. The point now is to continue to improve early recognition and diagnostics and to develop effective therapies for dementia-related illness.

With its new pamphlet “Fighting Memory Loss – Focus on Dementia Research”, the Federal Ministry of Education and Research offers all interested parties in-depth information on dementia-related illness. This pamphlet informs on the latest research insights into the causes of dementia, and its diagnostics and therapy, but also explores the issue of how patients and their families live and cope with the disease. Its service section lists contact addresses for key services for people affected by dementia as well as a selection of interesting literature and links.

<http://www.gesundheitsforschung-bmbf.de/media/Demenzforschung.pdf>

## **Press Workshops**

### Very Old, Healthy and Independent. The Current State of Geriatric Research (5/6 June 2007, Berlin)

The chances of arriving at old age are better than ever as life expectancy continues to rise. Even so, the risk of falling ill also increases with advancing age. By no means everybody can enjoy good health and independent living in this phase of life. Many people over the age of 60 are chronically sick and nearly all of them take pills on a regular basis. Numerous illnesses including Alzheimer's, Parkinson's and cancer are much more prevalent in old age. The increasing numbers of senior citizens in the general population poses major challenges for health research.

In this Press Workshop leading scientists gave information about the latest developments in health research covering all aspects of old age and ageing whilst the "AgeExplorer" old age simulation suit offered the audience an opportunity to see for themselves just what it feels like to be old and how difficult coping with everyday life can become.

[http://www.gesundheitsforschung-bmbf.de/media/Presseordner\\_Alter\\_www.pdf](http://www.gesundheitsforschung-bmbf.de/media/Presseordner_Alter_www.pdf)

### When Nerve Cells Die – Neurodegenerative Disease (24/25 November 2005, Frankfurt)

Some 100 billion nerve cells in our brains co-ordinate our thoughts, store memories, control our breathing and movements, and enable us to see, hear, smell, taste and feel. Given their vital importance in our lives, it is a catastrophe if parts of this highly complex system fall sick or cease to function as they do with Parkinson's, Alzheimer's, multiple sclerosis and prion-related diseases. No matter how disparate these disease patterns might be, they all entail extremely serious consequences for the people they affect. Thus one of the main objectives of research is to understand such diseases, to recognise them at an early stage and to develop appropriate forms of therapy.

At this Press Workshop famous scientists presented the latest developments of their research work in the field of neurodegenerative disease. An excursion to the Brain Imaging Center Frankfurt was also arranged where demonstrations of the use of state of the art visualisation technology in research and care-giving were given.

Internet: <http://www.gesundheitsforschung-bmbf.de/media/Presseordner-Neuro.pdf>

## **3. Statement of the Federal States**

The federal states are engaged in a broad variety of means to ensure that people can continue to live in their own apartments or houses in old age for as long as possible. Many states have taken part in the "Self-Determined Living in Old Age" model programme of the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth. One of the key findings of the programme was the perception that nationwide support measures are needed to ensure that advisory services for leading an autonomous life in old age are put in place on all levels down to the local authority level. This is not the least of the reasons that have led many states to set up their own advisory offices. One example of this is Lower Saxony's "Housing Advisory

Office for Independent Living in Old Age". Bavaria also runs a model project for "Assisted Living at Home with an Assisted Living Services Contract". A central care-giving agency co-ordinates the close intermeshing of support and assistance networks. The completion of an assisted living service contract which among other matters provides for regular home visits serves as a binding guarantee for the provision of services. In Bremen an expert commission is charged with co-ordination of joint projects shared between care providers and the housing sector ([www2.bremen.de](http://www2.bremen.de)).

A further focal point concerns the provision of barrier-free housing. In Saxony alone from 1995 to 2001 some 1,400 rented apartments were built specially for old people and people with disabilities. In Bremen two model apartments were built, one for demonstration and training purposes for interested parties, and the other for older people interested in building or converting apartments who were given high quality barrier-free package offers, grouping together the various specialist trades involved in the construction sector.

There has been a rapid rise in the number of assisted living opportunities on offer. The state of Baden-Württemberg, for instance, has created over 20,000 assisted living apartments for senior citizens since 1989. Many states have also developed uniform seals of approval as a means of assuring quality.

State programmes are also concerned with creating new forms of living for older people such as models for community living in houses and apartments. One example of this is the concept for "Nursing-home-related house community living" developed by the state of Hesse. The advisory office of the state of Rheinland-Palatinate for "Housing Space for Living" puts its development focus on community living for the elderly. One interesting way of supplementing existing forms of housing is the "Housing against Assistance" community project. Based on the principle "one working hour per month for one square metre of housing space", the Freiburg Student Union offers students co-operative housing partnerships with older people or families.

In many states one of the development focal points lies on networking existing service structures. The Ministry of Social Affairs of the State of Saxony, for instance, has provided funding for social workers in licensed welfare centres with the aim of putting in place comprehensive advisory and assistance services for care-giving and general needs. This advisory and networking service is now operated by a variety of different carriers.

Numerous measures from state governments are concerned with the provision of care-giving health services especially for older people. The state of Saarland has organised state-wide and regional events treating such issues as pain, apoplexy and cancer of the prostate and published a guidebook on health eating for senior citizens whilst the "Keeping Fit and Active in Old Age" project from the Saarland Gymnastics Association provides and informs about a broad variety of sports tailored to the needs of older people.

In many places geriatric services are being developed and extended. Baden-Württemberg's Gerontology Concept, for instance, has made for provision for the building of seven geriatric centres, 36 geriatric focal points, and 45 inpatient rehabilitation facilities in an endeavour to position medical services in co-ordinated care-service chains. In a variety of locations the state of Bavaria is funding mobile geriatric rehabilitation as a supplement to acute inpatient early geriatric care and inpatient geriatric rehabilitation facilities.

To investigate the potential dormant in rehabilitative geriatric measures for older people, the state of Hesse is funding the "Therapy and Rehabilitation in Gerontology" model project (email contact: [birgit.haas@wiesbaden.de](mailto:birgit.haas@wiesbaden.de)). Baden-Württemberg's

Ministry of Social Affairs is funding a model exploratory project for outpatient geriatric rehabilitation which has now been taken up by the associations of health insurance funds. In seven different locations trials are being run on organisational forms such as “General Practitioner/Medical Specialist Models”, “Institutional Outpatient Care” “Therapy Centres” and “Mobile Rehabilitation“. In the various therapy centres doctors, therapists, nursing staff and social service workers are integrated in interdisciplinary rehabilitation teams.

Over the past few years the federal states have deployed a wide variety of measures based on state law for nursing care to improve the quality of care-giving. In this context “Quality Management for Inpatient Care-giving Facilities for the Elderly” is a crucial guiding principle, even though the networking of services also plays a vital role. Thus, for instance, the working party on “Growing Older in Good Health” of the Lower Saxony State Association for Health sees itself as a forum for the exchange of information and experience from working with older people, where resources can be brought together and innovative concepts and projects can be discussed and developed on a joint basis. Its membership is composed of representatives from assisted living services and nursing facilities for old people, education institutes, associations in the public health care sector, voluntary initiatives and senior citizen interest groups. Such a broad membership base enables intersectorial and interdisciplinary work in which the interests of older people are also given a voice.

To release care-giving personnel from tasks not directly associated with care-giving, the interface between household work and care-giving must be improved. This theme is being addressed by a research project funded by the Bavarian government.

Several states have developed their own non-mandatory certification procedures for nursing care facilities such as the “Certified Quality of Care in Bavaria” rating or the “Saarland Plus” seal of quality.

Various state development programmes are dedicated to improving the quality of care given to people with dementia. In the state of Saarland this includes development of professional services for daytime and night-time care, setting up dedicated advisory and support services (the “Alzheimer’s Telephone”), publication of a “Guide to Alzheimer’s“, organisation of information and training events for the families of patients (like the Aspects of Alzheimer’s Day“), and building self-help groups. A further goal pursued by such measures is the networking of the whole cast of actors involved in the care-giving process with special emphasis on efficient full-time and voluntary work. This is predicated on the provision of in-depth professional training for volunteer helpers. Finally, trials are being conducted on model care-giving for disorientated older people in a networked system involving inpatient, semi-inpatient, outpatient and open assistance services. In its “Bavarian Care-Giving Network” Bavaria is funding 80 family care centres to support family members caring for patients, while the state of Bremen has set up an information and help centre for coping with dementia ([www2.bremen.de](http://www2.bremen.de)).

In an effort to ease the burdens on families giving care to a patient with dementia, other states have created additional care giving services in line with Section 45b of Book XI of the Social Code along with low-level care services as per Section 45c of Book XI of the Social Code. The state of Brandenburg is supporting a co-ordinating office for the development and extension of care-giving services in this field sponsored by the Alzheimer Gesellschaft, while the state of Schleswig-Holstein is co-operating with the same body to develop low-level help services. Bavaria is funding 12 model projects geared to the further development of care-giving structures and concepts in the outpatient sector especially for people with dementia. In a similar manner the state of Hesse also funds model projects aimed to test new structures

and approaches to care-giving specially tailored to the needs of people with dementia and those in nursing care.

To disseminate information on the range of services available, the cities of Hamburg and Bremen have set up internet portals for senior citizens ([www.senioren.hamburg.de/](http://www.senioren.hamburg.de/) [www.seniorenlotse.bremen.de](http://www.seniorenlotse.bremen.de)) and for information on assistance services for older people ([www.seniorenkompass.bremen.de](http://www.seniorenkompass.bremen.de) ). In Berlin the “Age Concern” co-ordinating offices ([www.senioren-berlin.de](http://www.senioren-berlin.de)) offer one-to-one and telephone information on all issues connected with old age such as housing, support services to relieve burdens on family care-givers, long-term health insurance or assistance in daily life. The comprehensive “Health Model” database ([www.hilfelotse-online.de](http://www.hilfelotse-online.de)) supports dissemination of information. The state of Hesse has also posted on the internet a guide to social facilities in the state as well as “Guidelines for Selecting the Right Kind of Care-giving Services”. The government of the state of Saarland has published information on selecting the right kind of outpatient care service, a list of all the retirement homes, nursing homes, and short-term nursing home in the state as well as a pamphlet on “Assisted Living in Saarland – Information to Help You Choose the Right Facilities”, while numerous states have set up a “Care service hotline” or “Emergency assistance hotline”.

All these efforts to improve the quality of care are supported by public-outreach campaigns such as the campaign on “Care-giving for older people in Bavaria – The pro-active Way“ or the creation of awards for outstanding nursing projects such as the Friederike Fliedner Prize awarded by the state government of Saarland.

To promote the wider use of the co-determination rights of residents of nursing care facilities, numerous states have funded training for voluntary multipliers who advise and support the home advisory committee in its work.

The federal states are also concerned with lightening the loads placed on nursing staff. In this context the Bavarian government is conducting a model project for the development of practical guidelines for improving the health of the care-giving staff working in inpatient nursing care facilities. Another focal area is further education and training for nursing staff. The states of Brandenburg and Bavaria, for instance, offer special courses for people to qualify as skilled geronto-psychiatric workers, while Hesse offers special training for skilled rehabilitation care-givers for older people.

The module-based training model for qualification as a care-giver for the elderly developed by the state of Saarland has been designated by the Robert-Bosch-Stiftung as a forward-looking training concept. The St. Wendel college of nursing for the elderly is currently testing an integrated nursing training course offering qualification as a nurse for old people, general nurse and paediatric nurse.

Advertising and image campaigns strive to attract greater numbers of school-leavers to the care-giving professions. At the same time care-givers who have left the profession are being encouraged to return to it. For instance Baden-Württemberg has created an internet portal at [www.berufe-mit-sinn.de](http://www.berufe-mit-sinn.de) offering extensive information about all types of nursing professions as well as a forum for training places and jobs in all types of facilities. Bremen, too, mounted an advertising campaign for nursing professions, while Bavaria has simplified its accreditation procedure in an effort to attract professional care-givers from non-EU member states.

Finally, many federal states have been involved in developing and extending their range of services for palliative medicine along with hospice facilities for outpatient, semi-inpatient and inpatient care. A model example of this is the community initiative run by the state of Brandenburg and called “Retaining Human Dignity till the End”. The state of Schleswig-Holstein has placed a special emphasis on palliative care further training for licensed general practitioners and nursing staff. And in 1999 the

Bavarian Hospice Foundation was founded with state support with the special aim of improving the quality of outpatient care offered to the terminally ill.

#### **4. Statement on the Part of Civil Society**

**To ensure that older people can lead independent lives for as long as possible, there is a need for more efforts to be made to improve their housing situation and to introduce measures for health prevention. The highest possible standard of health serves to delay the need of older people for nursing care.**

In future, houses and apartments should be built to allow free and unlimited use across all the ages of life. To achieve this requires concerted action on the part of politicians, industry associations and specialists. At the same time housing advisory services to promote conversion of the existing housing stock must be developed and placed on secure financial foundations.

The model project for “Self-determined Living in Old Age” run by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth has shed some light on part of the broad spectrum of alternative forms of housing and care. The insights gained from the project need to be disseminated and creatively used on the local level. At the same time there is a need for the further development of housing concepts which take account of older people’s need for nursing care and which enable small-scale integration of forms of housing and care. Model projects and initiatives which have proven their worth need to be placed on a secure and sustainable basis. These include such instances as the “Forum for Community Living” and the “Alliance for a Common Future for Young and Old”.

To ensure that older people with disabilities have a life and housing situation commensurate with their needs, institutions offering assistance to disabled people and older people must co-operate with one another. Integrated structures of care are vital in this context, even though they currently exist in Germany only on the model project level. Robust concepts also need to be developed for people whom advancing age forces to leave workshops for disabled people and who then need a new form of care and support, as well as for the increasing numbers of people with dementia-related illness to be found in these groups of people.

In terms of the development of the infrastructure, barrier-free criteria should play a decisive role in the award of public funding. Furthermore, the housing environment itself should serve to promote an independent, healthy and active lifestyle. Local authorities, the enterprise sector and senior citizen interest groups should work together with older people to formulate recommendations for improvements that can then be fed into urban development planning. In realising these goals the leverage of public private partnerships should not be neglected.

In the light of demographic development, the current trend of cutting back on voluntary engagement in geriatric care for financial reasons appears to be short-sighted. There is a need to counter such a trend through providing more funding for self-help structures and the on-going work of the relevant associations.

There can be no rationing of health services on account of old age. The central criterion for assessment of the need for each course of treatment must rather be the individual health needs of the individual patient him or herself. In addition to this, gender-related differentials in health care provision such as the below average provision of aids to older women, need to be eliminated. And adequate coverage with



health care and social services must be ensured in rural areas as well. The federal government and the states should provide incentives for local communities and rural districts to set up local health care centres and mobile advisory services.

General practitioners should have extensive knowledge of geriatric and geronto-psychiatric issues which is regularly refreshed and updated in independent further education courses. This equally applies to professional medical and nursing care staff. Dialogue with policy-makers and all those groups and organisations sharing responsibility for the health care system needs to be engaged to move towards the creation of further measures in health prevention and rehabilitation. Styles of behaviour encouraging effective health prevention need to be encouraged in every phase of life. An active style of life serves to prevent or delay sickness and the need for nursing care. People's sense of personal responsibility for their lives, especially that of people with low incomes and with little education, needs to be encouraged through in-depth information and appropriate (information) campaigns. The promotion of a much greater sense of awareness of healthy forms of life is a task that especially needs to be addressed by local authorities, the enterprise sector, educators and the media. It remains, however, a task that must also be addressed by the bodies responsible for social services, and in particular the health insurance funds, in the sense of their mandate for providing information, education and advice as enshrined in Book 1 of the Social Code.

Health prevention is also a key area in which the enterprise sector can act, especially to ensure that older workers remain in good health and fit for work. Major corporations in particular have developed excellent funds to this effect and companies in the small and medium size enterprise sector need to be supported in introducing such measures, for instance through a network of regional services. Consumer and sports associations need to continue their efforts with support from the relevant ministries to organise and realise measures for healthy nutrition and physical and mental activity in old age.

In line with the basic principle "Rehabilitation comes before nursing care", rehabilitation programmes specially targeted at older people need to be established. This applies equally to the residential sector and to centres for outpatient geriatric rehabilitation. Furthermore, particular consideration should be given to the concept of mobile (outreaching) rehabilitation, particularly as a follow-up to a stay in hospital.

Notwithstanding the expected increase in the numbers of people in need of nursing care, the quality of nursing care needs to be retained and improved wherever possible. This requires a differentiated range of care services and the availability of sufficient numbers of qualified staff. The public image of nursing care professions needs to be raised through a long-term campaign endorsed by the highest political levels.

In nursing care homes a dignified and self-determined life that expresses own individuality must be secured. Here as in the residential area, all forms of violence against old people need to be eradicated. Nursing care standards have to be further developed and quality controls put into place. Further funding needs to be provided for the development and application of standards in nursing care. National standards already in place (such as those for preventive measures for pain, decubitus, and falls) need yet to be developed further. In terms of staff, the ratio of professional nursing care needs to be maintained. Dental treatment and treatment by specialists in geriatric homes needs to be guaranteed.

The activating and rehabilitative aspect of treatment and nursing care is still underdeveloped in terms of the treatment offered to people with dementia. Research in dementia needs to be driven forward and the insights it offers should find rapid

implementation in training and further education. Early diagnostics and treatment could also be improved by the development of a cross-disciplinary concept. On the basis of what is already known, especially in the field of dementia prevention, accompanying activating measures for people with dementia need to be developed along with training courses for professional and family nursing care-givers – all of which go over and beyond the scope of measures already proposed by the Amendment to the Nursing Care Act.

The services and facilities engaged in the geriatric care must continue to receive support in tailoring their services to meet the needs of the older generation of immigrants.

Finally, the services offered by palliative medicine and palliative care need to be improved with a view to ensuring that seriously and terminally ill people in Germany are assured of receiving expert and humane care. Hospices and hospice services provide expert and humane care for the seriously and terminally sick; their work should be given better legal safeguards.

## **COMMITMENT VIII**

### **TO MAINSTREAM A GENDER APPROACH IN AN AGEING SOCIETY**

78. *Addressing the consequences of demographic change from a gender perspective is crucial for improving the situation of older persons, especially older women, in society and in the economy. The social and economic situation of women and men, especially for older persons, is not the same since they are affected differently by social, economic and demographic changes. Moreover, there is great diversity in the working and living conditions of both men and women among countries that are at different stages of development in the region. At the same time, achieving gender equality in all areas of public and private life should be a priority for the development of societies for all ages.*

79. *Caregivers to older persons are predominantly women and are to be considered as a priority for policy action. Governments should promote measures to encourage and make possible an equal sharing of family and care responsibilities between women and men, including by improving the supply of childcare facilities and responding appropriately to the growing needs for daily care services for older persons. High quality care facilities for children and older persons should be made available so that care may be provided by persons other than the immediate family. There is a need to provide more and better opportunities to combine work and family life through the implementation of family friendly policies, including provision of affordable and accessible high quality care facilities for children, but also for older persons living with their families. It is important to look at issues concerning the rights and possibilities for older persons not taken care of by the immediate family. It is important to take measures to maintain the rights and potential of these older persons, and make sure that reconciliation among the older persons, the family and society be secured through the organisation of care facilities.*

80. *Many women, particularly older women, are still at a disadvantage in the economy and in the labour market. They often receive lower wages, have lower levels of social protection than men, are underrepresented in decision-making positions, and experience barriers to achieve sufficient formal education and adequate vocational training. As a consequence of the traditional gender specific division of work and family responsibilities, they still perform most of the domestic work and are the key providers of care for children and older persons. Moreover, women are more often living in poverty and subject to social exclusion.*

81. *The following objectives need to be met in order to fulfil this commitment:*

*Achieve full gender equality*

82. *Governments should take measures to mainstream gender issues and to remove all obstacles to achieving gender equality, to eliminate all forms of discrimination against women and to promote the advancement and empowerment of women throughout their entire life cycle. In particular, the economic and social independence of women should be promoted. Measures should be taken to ensure*

*equal access to and equal treatment in education, health care, social protection, employment, vocational training and justice. Measures should also be taken to encourage the participation of women in politics, as voters and candidates, and to foster their equal participation in decision-making processes and leadership. Governments are encouraged to address the specific exigencies of women's health, throughout the women's life cycle, including reproductive and sexual health. Opportunities should be provided for older women to advocate on health issues that concern them and encourage their participation in developing programmes, so as to address better the problems older women themselves identify. In this context, explicit short- and long-term time bound targets or measurable goals should be set, and where appropriate, quotas and/or other measures could be considered.*

*Realise full equality between women and men in their contribution in the economy*

83. *Governments should promote the economic rights of women, particularly older women, including their equal access to and equal control over economic and other resources (such as loans for business), employment and appropriate working conditions. They should enact and enforce legislation to ensure equal pay for equal work or work of equal value for women and men, to protect women, and especially older women, against any form of gender-related discrimination in the labour market. Governments should take appropriate measures to facilitate the reconciliation of family life with paid work for both women and men and to overcome persistent gender-related role stereotypes. Companies should be encouraged to develop corresponding arrangements and change existing practices and policies in order to improve the career prospects of women, encourage female entrepreneurship, combat sexual harassment at the workplace and help women and men to reconcile family responsibilities with their situation at the workplace.*

*Ensure gender equality of access to social protection and social security systems*

84. *Governments and where appropriate social partners should ensure that women can participate in and benefit from full and equal access to social protection systems. Social protection policies should be reviewed where appropriate in order to take full account of the work and care responsibilities of women and men throughout the life cycle.*

*Promote shared responsibilities of women and men within their families*

85. *Governments should promote measures to encourage and facilitate equal sharing of family and care responsibilities between women and men. This could be achieved through the implementation of family-friendly policies, the provision of more and better opportunities to combine work and family life, providing affordable and high-quality care facilities for children and for older persons living with their families. It is important to take measures to maintain the rights and potential of older persons,*

*including those who are without families, or who are not taken care of by their immediate families.*

## ***Gender Mainstreaming***

### **1. Statement by the Federal Government**

The Federal Government expressly welcomes the efforts to achieve true gender equality in all UNECE member countries. In the German constitutional state, gender equality is a basic principle contained in the **equal rights provisions** laid down in Article 3 (2) of the **Grundgesetz** (Basic Law) of the Federal Republic of Germany.

Through the cabinet decision of 23 June 1999, the Federal Government acknowledged gender equality as a universal principle of action and resolved to fulfil this task by applying a **gender mainstreaming approach**. In addition to the dimension of age/ageing, this also incorporates the dimension of gender into the planning and implementation of **legislative measures and political and social action measures**.

The financial situation of older persons depends primarily on their level of participation in **socially secure, livelihood-protecting employment** during the course of their work biographies. Equality of women and men in the labour force is therefore a high priority of the Federal Government. Key goals are to **increase the overall percentage of women in employment**, to increase the percentage of women in future-orientated fields, and to increase the number of women in professional and leadership positions. It is also important to increase the percentage of women on the academic/scientific staff of universities and research institutions. The Federal Government additionally supports **female self-employment** through different forms of business start-up assistance.

Through all of these measures, the Federal Government is fulfilling the demands of Commitment VII.

**Achieving gender equality** in society and in the workforce greatly depends on whether **mothers and fathers can reconcile family and work** according to their wishes and needs. Measures ranging from **family-friendly employment opportunities, childcare assistance and workforce re-entry assistance** to the creation of a **family-friendly corporate culture** are therefore essential. The Federal Government promotes these goals by means of improved legal frameworks such as the Parenting Allowance (Elterngeld) and improved tax deductibility of childcare costs. The **Parenting Allowance Act**, which came into force in 2007, provides mothers and fathers the opportunity to take care of their newborn children without financial pressure. It enables both parents to secure the livelihood of their children themselves, and allows fathers to more actively participate in family responsibilities. Together with umbrella organisations of German trade and trade unions, the Federal Government advocates the "**Alliance for the Family**", which was established in 2003 to promote a family-friendly working environment and corporate culture.

Better reconciliation of family and work allows women and men to secure their own subsistence in old age with their own income. The granting of **pension credit for parenting leave** enables women to do this, even if they were not continuously employed.

**Pension credit for nursing care**, which was provided by the Nursing Care Insurance introduced in 1995, also improves the old age security of family nursing care-givers, the majority of whom are women. German Nursing Care Insurances fund accordingly pension contributions to improve the old age security of family nursing care-givers, around 90 percent of whom are women.

**Gender-differentiated health care and preventive health care** are being promoted. Gender-related aspects are also gaining increasing consideration in **medical research and geriatric research**.

The Act on Equal Opportunities for Disabled Persons (BGG) of 2002 and Social Security Code IX of 2001 have also incorporated gender mainstreaming in the German legislation concerning people with disabilities.

**Federal affirmative action measures for women and men** that help to compensate for deficits lead to a **self-determined, independent and satisfactory life in old age**. Action plans and measures that take the different needs of women and men into consideration, e.g. in the areas of nursing care or age-appropriate living, can have both competition-promoting and quality-improving effects.

A higher percentage of **older women** than older men are engaged in volunteer work. Older women often spend the last years of their lives without a partner because their average life expectancy is longer. In this period of life, they often have few personal contacts and must depend on persons outside the family for assistance. Society is called on to more strongly integrate older women who live alone and thus to **counteract social isolation in old age**.

The Federal Government is taking new approaches to meeting these targets. So-called “**multi-generation houses**”, for example, which serve as meeting points for people of all ages, are scheduled to be established in every county and county borough; this new model contributes not only to creating family-like structures that connect the generations, but also serve to prevent social isolation in old age.

## **2. Measures of the Federal Government**

### **Gender Equality**

Measures to promote gender equality also benefit older women because they are geared towards increasing the participation of women in the labour force in a quantitative and qualitative sense and towards making their employment biographies more continuous through better reconciliation of family and work.

Employment agencies and providers of basic social protection benefits to employment-seekers are obligated by law to work towards achieving gender equality in all regulatory areas of employment promotion in accordance with Book Two of the Social Security Code (cf. Section 1 (1) sentence 3 of SGB III) and in regulatory areas regarding basic social protection for persons seeking employment according to Book Two of the Social Security Code (cf. Section 1 (1) sentence 3 and sentence 4, item 3 of SGB II). Affirmative action for women is needed in order to eliminate existing discrimination against women and to overcome gender-specific segregation in the education, training and labour markets. The level of participation of women in promotion measures implemented by labour market policy should be at least equivalent to their share in the unemployment rate and commensurate with the relative impact of unemployment on them (cf. Section 8 SGB III, which is to be applied pursuant to Section 16 (1) sentence 4 of SGB II, also in regard to the provision of benefits by basic social protection providers for the facilitation of re-entry into the workforce).

For better reconciliation of family and work, the distribution of benefits for promotion of employment must give due consideration to the circumstances of women and men

who raise children or care for family members (Section 8a SGB III and Section 1 (1) sentence 4, item 4 of SGB II). For example, measures should be offered in a part-time format.

According to work promotion law, re-entry into the workforce is to be especially promoted. Persons wishing to return to the workforce after taking leave to take care of children requiring supervision or to care for family members in need of care or because of unemployment should, under the applicable legal conditions, receive the necessary active employment promotion services needed to facilitate their re-entry into the workforce. This includes, in particular, counselling and placement services as well as the promotion of further job training by assuming the costs of training (Section 8b SGB III).

In addition, the Federal Government has taken the following measures:

- According to an agreement between the Federal Government and the umbrella organisations of the German economy concerning the promotion of gender equality in the private sector, which was signed in July 2001, businesses have committed themselves to practising active equal opportunity policy. Targets include increasing the percentage of women in leadership positions. The second report on implementation of the agreement was published in February 2006. The subject of women in leadership is a main topic. The report contains a current situation report that concentrates on the subject and describes current concepts and measures to increase the percentage of women in leadership. Gender equality and the balance between family and work have been promoted and advanced through selective political and economic measures in many areas in the last two years. Especially positive tendencies and results were observed in relation to extending the job spectrum for women, career possibilities for women, and assistance in reconciliation of family and work.
- In order to provide carefully targeted information on work and careers for qualified women and to enable better networking between women, the Federal Government supports the federal women's Internet portal [www.frauenmachenkarriere.de](http://www.frauenmachenkarriere.de). Comprehensive, well-founded information on the subjects of work, career and business start-up for women are offered and networked.
- The Federal Government promotes the establishment and expansion of a nationwide agency for female entrepreneurs, the aim of which is to facilitate the start into self-employment for female entrepreneurs, to create a female entrepreneur-friendly climate, and to increase the number of business start-ups by women. Special counselling, networking and coaching services for female entrepreneurs and women who set up businesses are offered at [www.gruenderinnenagentur.de](http://www.gruenderinnenagentur.de), and a central hotline provides advisory services and information on how to contact female experts throughout Germany.

### **Equal Pay for Women and Men**

The Federal Government cannot take immediate regulatory intervention in wage issues. Except in the case of wage agreements for civil service employees, this is the responsibility of the social partners to a wage agreement.

Now and in the past, the Federal Government has nevertheless taken several initiatives, which include the publication of the "Report of the Federal Government Concerning the Work and Income Situation of Women and Men" in 2002, the hosting of the international conference on "Equal Pay" in June 2002, the publication of a



"Guide to Wage Equality" in 2003 (a revised version will be published in 2007), and the promotion of various projects on the subject of "Discrimination-Free Work Assessment".

### **Parenting Allowance (Elterngeld)**

The Parenting Allowance, which came into effect on 1st January 2007, signals that work and child-bearing go hand in hand. It significantly mitigates the loss of income after the birth of a child. For the first time, fathers also have an attractive incentive to take care of their children during the first months of life.

The Parenting Allowance can be received in the first 14 months after the birth of a child. One parent can receive the Parenting Allowance for no more than 12 months. The allowance may be paid 2 months longer if there is a loss of income during this period and the partner participates in caring for the child. The parents can freely divide the months among each other. The parents can apply for the Parenting Allowance consecutively or simultaneously. Single parents can receive the Parenting Allowance for the full 14 months.

The Parenting Allowance replaces 67 percent of lost income when the work load is reduced to a maximum of 30 hours per week; it ranges from a minimum net sum of € 300 to a maximum of € 1800. The minimum Parenting Allowance of € 300 is always paid during the core period of 12 months in cases in which one parent takes care of the child, even if there is no loss of income.

This applies to transfer recipients and sole wage earners. During this period, the minimum Parenting Allowance is not counted as income and thus is not subtracted from other benefits, such as Class II unemployment compensation (ALG II).

### **Girls' Day**

This annual action day launched by the Federal Government in 2001 supports the early career orientation of girls. The goal is to extend the range of career choices for girls in the direction of technology and science orientated training and careers.

In addition to providing information, companies and institutions throughout Germany provide girls the opportunity to experience the respective training and careers directly.

After the launch of the action programme, the number of participating companies and institutions as well as the number of girls participating has risen steadily each year.

The participation of business associations, the German Trade Union, the Federal Employment Agency, and Initiative D 21 as action partners and the involvement of working groups at the regional level have meanwhile enabled the formation of a comprehensive network.

### **Gender Mainstreaming as a Cross-Sectional Task**

Gender equality policy is a cross-sectional task. The Joint Rules of Procedure (GGO) of the Federal Ministries specify the obligation of all ministerial departments to take a gender mainstreaming approach to all political, normative and administrative measures of the Federal Government (Section 2 GGO)

Men are also expressly and deliberately addressed in the gender mainstreaming approach. This strategy of focusing on the implications, benefits and opportunities for both women and men instead of on the deficits of a single sex achieves added quality. Gender stereotypes are thereby challenged and impetus to change these stereotypes is given.

The legal obligation of the EU Member States deriving from the Amsterdam Treaty (Article 2 and Article 3 (2) of the EC Agreement) forms the background for this. All member countries are accordingly obligated to engage in active and integrated gender mainstreaming policies aimed at achieving gender equality.

Article 3 (2) of the Basic Law of Germany also forms an important legal basis for active gender mainstreaming policy. The State must actively endeavour to achieve actual implementation of gender mainstreaming strategy and to eliminate existing discrimination against women.

### **Gender Competence Centre**

The Gender Competence Centre (GenderKompetenzZentrum) provides information and counselling services on questions regarding the content of the gender mainstreaming approach and on administrative and organisational challenges concerning the implementation of this strategy since 2003.

The Gender Competence Centre is an independent research institution affiliated with Humboldt University-Berlin and financed by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth. The centre takes a multidisciplinary approach and supports the Federal Ministries and other institutions, e.g. businesses and scientific and social partners concerning the implementation of the gender mainstreaming strategy, in particular, with regard to process-related, strategic and methodological questions.

([www.genderkompetenz.info](http://www.genderkompetenz.info))

### **3. Statement of the Federal States**

The federal states have also committed themselves to engage in government programmes and action strategies for gender mainstreaming, i.e. to engage in active and integrated, interdepartmental policy to promote gender equality. This includes a variety of political measures, which can only be described fragmentarily in the following.

According to the requirement to promote equal sharing of family and care responsibilities between men and women as stipulated in the Regional Implementation Strategy (RIS), there are a number of measures and projects that support fathers who wish to assume family responsibility and care for their small children. Examples include the Hamburg model project for "Father Training in Parenting Schools" and [www.vaeter.de](http://www.vaeter.de), an Internet portal that provides online information and counselling services for fathers.

In addition, some federal states have specific measures to promote family-friendly personnel policy, including the "Dialogue with Hamburg Businesses" project in Hamburg and the "Audit Work and Family" model project in Saxony-Anhalt and Hesse.

Schleswig-Holstein has twelve "Woman and Work" counselling centres, the mission of which is to advise businesses on the creation of female- and family-friendly working conditions.

In the "Östliche Altmark Family Service Centre" in Saxony-Anhalt, senior citizen volunteers make a contribution towards improving the reconciliation of work and family.

Considering the existing gender differences in the distribution of benefits, women's health is also an important issue in the federal states, and numerous measures and projects address this problem. In Saxony-Anhalt, for example, seven state-funded women's centres offer older women training courses focusing on health and socio-political issues. The women's centres also serve as meeting places for self-help groups, in which primarily senior citizens are active.

Practically all public corporations, especially those in the municipalities and at universities, have a women's representative or equal opportunity officer who represents the interests of women, also of older women. In addition to these offices, numerous women's counselling centres exist.

#### **4. Statement on the Part of Civil Society**

**In many areas of society, women are relatively disadvantaged compared to men. One goal of the National Action Plan must also be to combat such gender-specific differences, whether they exist in the working world or in other areas of society.**

Even though the average income of older persons in Germany is higher than ever before, regional differences as well as gender-specific differences exist. In Eastern Germany, older women between the ages of 65 to 74 who live alone have the lowest monthly income. On average, the provision of health care, including health aids, to older women is worse than that afforded to older men. The elimination of such gender-related differences is an urgent task for health policy.

Overcoming these disadvantages in the long-term requires, in particular, the development of specific concepts to promote the entry or re-entry of women into the workforce. In Germany, even qualified women who have completed advanced training have tremendous problems returning to the labour force after interrupting their careers for a few years. Policymakers must create incentives to facilitate the re-entry into the workforce of women who have interrupted their careers for family reasons.

Gender-specific differences in the voluntary sector must also be combated. For centuries, men were characterised by life-long occupational work and women by family work. The gender role stereotypes arising from these expectations still show up in the voluntary sector today. Men are more often found in planning and organisation work, and women in practical social work. The increasing labour force participation of women throughout the life cycle and the decreasing predictability of career patterns for men will gradually dissolve such polarisation, thereby providing opportunities for less role-fixated engagement of the sexes. Actions to promote the willingness of older persons to assume political responsibility (see aforementioned statement regarding Commitment 2) should target older women in particular.

Lastly, the Regional Implementation Strategy calls for measures to facilitate the equal sharing of family and care responsibilities between men and women. As a first line of

action, more men must be motivated to assume care responsibilities. This is a long-term task for policymakers, organisations and the media. In order to achieve true gender equality, further social measures for pension compensation are needed for persons raising children and caring for family members.

## **COMMITMENT IX**

### **TO SUPPORT FAMILIES THAT PROVIDE CARE FOR OLDER PERSONS AND PROMOTE INTERGENERATIONAL AND INTRA-GENERATIONAL SOLIDARITY AMONG THEIR MEMBERS**

86. *The family is the basic unit of society and as such should be strengthened. It is entitled to receive comprehensive protection and support. In different cultural, political and social systems various forms of the family exist. The rights, capabilities and responsibilities of family members must be respected. Families are the major agent of sustainable social development and the preservation of a society's values. They are also a key element of stability in communities. Together with communities, they provide a vital framework for the growth and well-being of their members and for intergenerational and intra-generational solidarity. It is within families and communities that children are born, nurtured, socialised and prepared to take on the responsibilities of learning, work, parenthood participation and solidarity. It is also within families and communities that traditionally older persons interact with members of younger generations, are cared for and eventually pass away.*

87. *Population change and ageing are paralleled by a profound transformation of families. Their average size is decreasing, the number of generations within the multigenerational families is increasing, and each succeeding generation tends to be smaller than the preceding one. The picture is made more complex by the increasing instability of unions. Particularly in higher age, remote relatives and small informal networks such as neighbours and friends play an important role and can be considered as family networks. Changing economic and social environments also have an impact on the quality of life of families, influencing family relations and modifying the roles the different members play.*

88. *Family policies and/or policies aimed at achieving equal opportunities among family members vary in the different countries of the region. Their components include legislation, regulations and programmes that are designed to achieve specific objectives for the family as a whole, or for its individual members. Policy approaches should respond to the consequences of changes in the structure of families and in the role of its individual members.*

89. *The following objectives should be part of this commitment:*

*Respond to the needs and changing roles of individual family members and strengthen intergenerational and intra-generational solidarity*

90. *Governments should initiate or strengthen policies and programmes to address the special needs of all members of the family, respecting their rights, capacities and responsibilities. In order to do so, they should support, protect and strengthen the family to respond adequately to the needs of its members through the promotion of social, economic and family policies that stimulate and favour intergenerational and intra-generational solidarity. An important element in this respect is ensuring equality between men and women throughout their lives particularly regarding the distribution of responsibilities in terms of work and income,*

*care of dependent family members and social protection.*

91. *Older persons contribute to the well-being of their families in different ways, including tasks related to the care of children and other family members. Governments should promote awareness regarding the contribution older persons make to society and adopt measures to help families deal with the growing responsibilities of their older members, in order to improve their situation. Social infrastructures should be improved to address the responsibilities families bear in terms of the daily needs of caring for their members. It is also important to point out that as well as families, communities, organisations and associations play a relevant role when providing support and informal care.*

*Support the families in coping with the social and economic consequences of demographic change*

92. *Families, particularly those who provide care for older persons are entitled to receive comprehensive protection and support in performing their societal and developmental functions. In this regard, governments should strive to design, implement and promote family friendly policies and services, including affordable, accessible and quality care services for children and other dependants, parental and other leave schemes and campaigns to sensitise public opinion and other relevant actors on equal sharing of employment and family responsibilities between women and men.)*

93. *Housing policies and town planning should aim to adapt the infrastructure of towns to the needs of families and to enable generations to live together if they so wish. Particular attention should be given to making towns more friendly towards children and the older persons, with the purpose of increasing their participation in urban life through a better planning of services and facilities, also taking into account safety issues. These policies and planning should be achieved in collaboration with all concerned groups.*

## ***Intergenerational and Intragenerational Support among Family Members***

### **1. Statement of the Federal Government**

The institution of the family enjoys special protection in the Federal Republic of Germany. **The family is the basic unit of society and provides it with stability** – i.e. the Federal Government supports the tenets of Commitment IX.

Parents and grandparents, children and siblings accept responsibility for each other in the family. The family stands for lifelong solidarity between different generations, offers its members dependable mutual support and **safeguards intergenerational solidarity**. Never before have so many generations been alive together at the same time, often living in different localities, but in close contact with each other. The intergenerational climate has seldom been better. The Federal Republic of Germany is fully aware of the special duty it has towards the institution of the family and family solidarity. 90 per cent of the population considers the family to be very important. Numerous scientific studies show that there are strong intergenerational and intra-generational ties and relationships within families.

The objective of **sustainable family policy** of the Federal Government is to preserve and improve the social, economic and political framework that will enable generations to come to invest in the **raising of children, live out intergenerational solidarity** and see **caring for one another as part of their own view of life**.

Nursing Care Insurance provides a wide range of assistance and benefits for families providing nursing care for older family members is one of the instruments the Federal Government has put in place to support the institution of the family and intergenerational solidarity. Since 1995 social security through the **statutory pension insurance scheme** for persons caring for members of their own family has been substantially improved. Periods spent providing nursing care in an honorary capacity (at least 14 hours per week) also count towards pension entitlements.

**Recognition of periods spent raising a child** reflects the contribution this is to the system of the statutory pension insurance scheme that is on a pay-as-you-go basis and the unspoken “pact between the generations”. It is also an important contribution towards improving the independent social security of women.

Frequently when the subject of demographic change is raised, the crisis of the institution of the family and its decline is repeatedly predicted. The lack of solidarity between generations is bemoaned. There is much talk of conflicts between the generations and even of intergenerational fighting. The battleground is mostly the various **social security systems and financial transfers**. However, this is only one aspect. The interrelationship of intergenerational giving and taking is more differentiated. It is not just about financial transfers but about passing on help and assistance of a practical nature. It is a question of **handing down values, rules and virtues**.

There is a wide variety of intergenerational **relationships based on help and support** and these are only seldom one-sided. For example, grandparents and parents provide grandchildren and children with financial support while members of the younger generation provide the older ones with practical help and emotional support: for example one quarter of grown-up children aged between 40 and 85 help their parents or parents-in-law in the household even if they do not actually live there. In terms of **material support**, inheritances play a major role as do substantial gifts in the form of money and gifts made during the lifetime of the person making the gift.

Nearly one third of parents with grown-up children no longer living at home support them with monetary transfers.

Increased life expectancy means that never before have so many generations been alive together at the same time. Many children not only know their grandparents but also their great-grandparents. On the other hand, the consequence of lower birth rates is that parents are less likely to also become grandparents.

Studies show that sharing a home and having a single household is not a prerequisite for an intensive relationship between the generations. One third of parents aged between 40 and 85 live with their grown-up children in a single household, 40 per cent live in the same house. 80 per cent of grown-up children no longer living at home live no more than one hour away. 90 per cent of parents say they have a close relationship to their grown-up children no longer living at home. 85 per cent see or talk to each other at least once a week.

While it also goes without saying that there are intergenerational conflicts in families, these are fewer today than during times when one generation was always financially dependent on one another. Fewer than 10 per cent of those aged between 40 and 85 mentioned intergenerational conflicts. A number of studies show that today internal bonds such as shared interests, mutual affection, being there for each other and solidarity have often replaced external factors such as financial dependency or worrying about “what the neighbours think”. These changes in roles and values are also addressed by Commitment IX.

The variety of **forms that the family can take has also led to a wide variety of intergenerational relationships between adults**. The increase in childlessness means that a growing number of persons experience no family relationships to the generations that follow. One thing appears to be clear: If solidarity between the generations based on the family declines, this will have consequences for acceptance of the “pact between the generations” in society as a whole. The Seventh Family Report of the Federal Government drew the conclusion that a **new balance needs to be found between family members, forms of family life, relations between neighbours, working life and society**. One of the responses of the Federal Government to this is the concept of “**multi-generation houses**” that, among other things, serve as meeting places for persons of all ages, are places that encourage **networking and are a forum for individuals to help each other**. They strengthen the intergenerational and intragenerational solidarity called for in Commitment IX by enabling such solidarity to be experienced on a daily basis again outside the family. They are characterised by voluntary commitment and helping persons to learn to help themselves. Here the Federal Government is pursuing a policy that promotes and strengthens solidarity both inside and outside the family, and hence of society as a whole. This is one of the proposals contained in Commitment IX. The Federal Government is developing **models to strengthen social infrastructure and support individuals in adapting to the new structures of demographic change**. It defines the requirements of sound and secure family policy through the criteria of **intergenerational solidarity and sustainability**. In order to achieve a vital society for all generations, the Federal Government has increased the range of options open to older persons in terms of employment and voluntary work, improved possibilities of playing an active role in shaping policy and strengthened the ways young and old can live together.

By broadening and developing a wide range of **services that support families**, the prerequisites for giving families more time together are being created as is additional potential for growth and employment.



## **2. Measures of the Federal Government**

### **Family Reports**

In 1965 the German Bundestag (Federal Parliament) gave the Federal Government the task of drawing up a report on the situation of families in the Federal Republic of Germany in at least every second legislative period.

These reports on the family serve as a basis for the necessary decisions and adjustments in family affairs policies. The Federal Ministry of Family Affairs, Senior Citizens, Women and Youth appoints an independent commission consisting of up to seven experts to draw up these reports. The Federal Government then provides a detailed statement on the reports.

The first (1968), the third (1979) and the fifth (1994, the first in a reunified Germany) reports presented and discussed the situation of families in detail in the Federal Republic of Germany. The issues of the position of older family members and solidarity between the generations were discussed.

The following reports dealt with specific topics, namely

- Second Family Report (1975) "The Family and Socialisation – Contributions and Limitations of Families in the Process of Raising and Educating the Young"
- Fourth Family Report (1986) "The Situation of Older Persons in the Family"
- Sixth Family Report (2000) "Families of Foreign Origins in Germany"

They are obtainable via [www.bmfsfj.de](http://www.bmfsfj.de) .

### **The Seventh Family Report**

The Seventh Family Report of the Federal Government dated 2006 describes the family as "a community with strong bonds in which several generations take care of each other and assume responsibility for one another".

It has developed a new direction in family policy designed to create programmes in the framework of living and working biographies in which the family and family development can be practised on a sustainable basis: in other words, the report supports rethinking introduced by the Federal Government that aims to achieve family policies that are sustainable and integrated. It places emphasis on the objective of creating new relationships between working life and activities outside work so that there is more scope for family life and solidarity between the generations. "Social periods" must be understood as legitimate "time out" from gainful employment and corresponding provisions made for this. The aim is to enable both men and women to balance the tasks of caring for and raising a family and assuming responsibility for finances. The tenet of the industrialised society "either family or work and after that a pension" is not one set in stone. The Federal Government is creating policies based on the recommendations of the Seventh Family Report, e.g. in the form of parental allowances and establishment of a competence centre for family-related benefits.

The Seventh Family Report is obtainable via [www.bmfsfj.de](http://www.bmfsfj.de) .

### **Family-Orientated Services**

The Federal Government support all efforts to achieve an acceptable and viable balance between family life, housework, leisure time and gainful employment. It is both a question of assistance for those members of a family who look after and raise children as well as for members who provide care for older members of the family. The policies aim to achieve a better sustainable balance between family life and gainful employment and to enable families to spend more time together (see p. 44).

### **Local Alliances for Family**

This nationwide campaign launched by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth at the beginning of 2004 is designed to encourage and promote co-operation and partnership between policymakers, public administration, the business community, chambers of commerce, trade unions, independent organisations providing services for families, social and charitable organisations, religious denominations, campaigns and persons active in a voluntary or honorary capacity with a view to improving living and working conditions for families at local level. These alliances receive support in the form of free advisory and counselling services provided by a service centre financed by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, and the European Social Fund.

440 local alliances already exist; the focus of their policies being on improving the compatibility of family and working life, and measures designed to provide more flexible child care facilities. They can be rightly proud of their successes. Many of these alliances have also made a contribution to intergenerational solidarity, e.g. by support services for family members providing nursing care for another family member, setting up schemes to "lend a grandparent", learner-tutor projects for young and old, and ensuring spatial proximity of retirement homes and child care facilities.

The ministerial campaign is being further developed in terms of quality and scope to ensure its sustainability.

### **Alliance for the Family**

The Federal Ministry of Family Affairs, Senior Citizens, Women and Youth set up the "Alliance for the Family" in 2003 with the aim of making family-friendly policies and programmes a matter of priority for and a hallmark of German industry.

A wide range of successful projects and strategic co-operation agreements have already been set up with associations representing the business community, trade unions and foundations of various kinds with a view to promoting corporate governance that is family-friendly.

The programme entitled "The Family – a Companion to Corporate Success" launched in 2006 takes these activities further with a particular focus on the target group of entrepreneurs and those responsible for human resources management.

## **Child Allowances**

The purpose of a child allowance is to reduce the financial burdens that parents incur from providing a child with the necessary financial support.

The child allowances amounts to €154 for the first to the third child and increases to €179 for the fourth and further children.

The constitution of the Federal Republic of Germany obliges the state to allow all taxpayers a tax-free allowance on income to enable them to have the minimum requirements for a decent existence. What this means is that a sum of income needed to guarantee the minimum requirements of a child is guaranteed as a tax-free allowance under the constitution.

## **Child Allowance Increments**

It is the objective of the Federal Government to reduce the risk of child poverty. This has been put into practice by the child allowance increment benefit introduced in 2005 that comes into play where necessary at the interface between need for basic benefits and support on the part of the state and an independent ability to earn basic minimum income from gainful employment.

The child allowance increment benefit amounts to up to €140 per child and is paid to parents who, while able to support themselves through gainful employment, are unable to also provide for their child/children adequately. These sums together with the child allowance of €154 and, if applicable, a rent allowance are sufficient to cover the average needs of a child.

The document signed in November 2005 between the political parties that had agreed to form a governing coalition envisaging further improvements in child allowance increment in order to do greater justice to its objectives and expand the numbers of those with an entitlement.

## **Financial Advances of Child Maintenance Benefits**

Single parents often have to bring up a child in conditions that are financially difficult. This situation is aggravated if the parent with whom the child does not live refuses to meet his/her obligations towards the child entitled to maintenance, is not able to or only partly able to meet these obligations, or a parent has died and an orphan's benefit cannot be paid that is at least the equivalent of the applicable maintenance benefit. The objective of such advances of child maintenance benefits under legislation (*Unterhaltsvorschussgesetz - UVG*) introduced in 1980 is to alleviate special circumstances and hardship of this nature. Such benefits are, under the provisions of the act, particularly designed to cater for the needs of children of single parents.

Depending on individual circumstances, children under the age of 12 living in the household of a single parent are entitled maintenance benefits for a maximum period of 72 months.

## **Quality Child Care Meeting the Needs of Young Children and Parents**

When shaping family policy, the Federal Government substantially orientates itself by the interests and needs of children and their parents.

It makes a decisive contribution to providing quality care that meets the needs of children and their parents in order to improve the quality of life of families. Such policies provide families with stability and are an important basis for reliable planning of time and ensuring that parents can combine both family and working life. Improved job opportunities for parents widen financial leeway and reduce the risk of families and their children being afflicted by poverty. It is for these reasons that the Federal Government sets great store by education and child care that are of high quality and in line with defined needs.

The objectives are to create programmes and services designed to cater for the needs of families and care structures that are multi-faceted. Important first steps in this direction have already been taken.

All levels of government have agreed on policy measures to ensure that child care facilities will be available for approximately one third of children under the age of three by 2013. 750,000 places are envisaged in a wide variety of forms: ranging from crèches, mixed-age groups, child day care centres, care facilities at work, and private day care.

Total costs for this expansion phase (2008-2013) have been estimated at approximately €12 billion; a total €4 billion of which will be provided by the Federal Government. The Federal Government will contribute €770 million annually to the additional operating costs arising as of 2014 from the provision of day care facilities that go beyond the scope of those envisaged in legislation to provide education and care in early childhood (*Tagesbetreuungsausbaugesetz*) (s. below).

A further objective of the Federal Government is to improve the quality of child care to help all children make a contribution to society that is worthwhile. The federal states and local authorities are to be given further support in their efforts to increase standards. In addition, the Federal Government plans a joint qualification programme designed to improve the quality of both child day care centres and other forms of child care.

### **Child Care Costs**

Cost must not be allowed to act as a disincentive preventing parents from enabling a child to attend a kindergarten or a similar facility and receive further stimulation and support outside the home at an early age. The Federal Government provides financial assistance for child care and household-related services, which may also include child care, in that child care costs resulting from a parent being in employment are eligible for increased tax relief.

### **The Action Programme “Multi-Generation Houses”**

The multi-generation houses described in Commitment II (see p. 29) constitute a programme set up by the Federal Ministry of Social Affairs, Senior Citizens, Women and Youth to create centres that are open to all members of a local community and where intergenerational solidarity can be experienced in daily life. They provide a foundation for such solidarity that also exists outside the family. They serve to

counteract the growing weakness of otherwise typical community and social networks such as families and local communities by providing meeting places for different age groups in a local community. The integrated programmes and activities they offer cater for the needs of all generations under a single roof.

A special aim is to involve the older generations, draw on their experience and potential and help to reduce the increasing isolation and loneliness of older persons. Multi-generation houses generate civic involvement and commitment and are an appropriate means of supplementing the use of professional services.

The aim of the Federal Government in this legislative period is to set up a programme for action designed to be the driving force behind creating at least one multi-generation house in all local authority areas throughout Germany.

### **“Intergenerational Voluntary Services”**

With this model programme launched in the autumn of 2005 and already described in the response to Commitment II the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth is not only seeking to strengthen civil society generally but also specifically solidarity and cooperation between generations.

The three-year programme with a budget of €36 million covers over 50 individual nationwide projects, some complex in nature; they explore new structures for voluntary work and services and providing areas of activity for volunteers of all generations.

The recommendations of the Commission entitled “Impetus for Civil Society” are designed to provide persons of all age groups with the opportunity of performing voluntary work. Intergenerational voluntary services are the workshops that forge the principles of democracy as they give persons of all generations the opportunity to participate in civic life and play an active role. Voluntary services are always a vital contribution to civil society.

### **3. Statement of the Federal States**

The family policies pursued by the federal states play a vital role in implementing the above commitment. Examples of political objectives include the compatibility of raising a family while also holding down a job, extending the range of facilities designed to provide high-quality child care, ensuring that schools offer reliable hours, strengthening the exchange of social skills within families and last but not least integrating families of foreign origin. The Local Alliances for the Family supported by the federal states serve as examples.

Beyond this, promotion and support is given to campaigns and programmes launched by businesses, chambers of commerce, trade and business organisations and trade unions. The objective of such campaigns is to give greater focus to the abilities of the institution of the family to provide skills for working life. Programmes are also supported that have the goal of creating conditions of employment that also do justice for the needs of the family.

As an example, the strategic family affairs policy of the government of the federal state of the Saarland has named integrating the needs of the family as a maxim for political action. In other words, all new legislation, ordinances and administrative regulations will have to be examined to establish whether they are compatible with

the interests of the institution family. The federal state of the Saarland has issued an information brochure providing details of assistance available to families.

The federal state of Hesse has launched a "Pro-Family Campaign" designed to achieve a change in the social climate in favour of families and children. Programmes include the "Day of the Family" organised by the federal state of Hesse, the organisation "A Future for the Family", the federal state competition entitled "Pro-Family Local Authorities" that in 2005 addressed the topic of "Generations Living and Working Together" and the Family Atlas providing interactive Internet services provided by the Hesse Ministry of Social Affairs on family issues and concerns.

The federal state governments have set up numerous programmes designed to support the dialogue between the generations as well as intragenerational solidarity. Promotion of the "multi-generation houses" in the federal state of Lower Saxony is just one example of the way this dialogue is furthered.

Promoting solidarity amongst older persons is also given expression by the support given by the federal states to the work carried out by organisations and associations representing the interests of senior citizens. By promoting these institutions as well as projects and events such as regional senior citizens congresses, the federal states make a contribution to focussing attention on the contribution older persons make to society (cf. Para. 91 of the Regional Implementation Strategy).

In order to ease the burden on families that provide nursing care for a relative, both daytime and night services have been improved in many places. A further focus is on promoting a range of low-threshold services. For example, there are today a wide variety of counselling, information and training services and self-help groups in particular for families with a member suffering from dementia.

#### **4. Statement on the Part of Civil Society**

**The different generations of a family often constitute a viable network strong enough to cope with long-term burdens and strain. Many older persons provide care and other forms of assistance in the family and in society. This is a contribution of which the public needs to be made more aware than is at present the case. Genuine ways of easing burdens need to be created if the high level of willingness to provide such care is to be preserved.**

As has been shown by numerous studies, intergenerational solidarity is high even if members of the various generations live in different places. Grown-up children and their parents have strong emotional bonds, are often in regular contact with each other and provide mutual help in the forms of financial transfers and moral and emotional support. However, given falling birth rates, such a network will no longer be available to many older persons in the future.

The contribution that older persons, in particular older women, make in the family and society is still far from being adequately recognised and appreciated by the general public; policymakers also often underestimate the role they play. For example, older persons frequently provide nursing care and support in all its many forms for members of their family. The majority of persons in need of nursing care are still looked after at home. In other words, the family is the primary nursing care provider. And one half of this nursing care is provided by members of one and the same generation. Awareness of the contribution older persons make to society and to preserving intergenerational relationships, e.g. looking after grandchildren, therefore

needs to be heightened. This is not only a task for politicians; the media are also called upon to provide adequate coverage that shows the genuine contribution that older persons make.

If, true to the principle “care at home instead of institutional care”, ways of providing support, care and nursing care are to be strengthened, the abilities that those requiring care still have need to be recognised and those of persons providing nursing care either as family members or neighbours need to be increased by appropriate training. Professional residential nursing care services should be expanded.

In view of the high level of physical and emotional strain on family members, above all on women, who, as a rule, belong to the age group of the “young old”, effective means of easing burdens need to be realised if the high level of willingness to carry out such work is not to be lost. In particular, this means promoting what are known as low-threshold services such as counselling and self-help groups particularly for persons caring for a family member suffering from dementia as well as increasing the number of day nursing care facilities and mobile services designed to provide short-term nursing care. Creating family-orientated working time structures would make better use and preservation of nursing care resources within the family possible. Consideration should also be given to introducing “nursing care leave” into labour law (modelled on the parental leave).

What is called for above all is to promote a society in Germany that is child and family friendly, as children are an asset our society cannot afford to be without. This is one of the most pressing challenges facing employers and trade unions, schools and youth work services, churches and the media.

## **COMMITMENT X**

### **TO PROMOTE THE IMPLEMENTATION AND FOLLOW-UP OF THE REGIONAL IMPLEMENTATION STRATEGY THROUGH REGIONAL CO-OPERATION**

94. As it was agreed in the Madrid International Plan of Action on Ageing 2002, the systematic review of implementation of the International Plan of Action on Ageing by Member States of the United Nations is essential for its success in improving the quality of life of older persons and the social cohesion in society. The United Nations Regional Commissions have responsibility for translating the Madrid International Plan of Action 2002 into regional action plans in which civil society and other relevant stakeholders should be closely involved. They should also assist upon request national institutions in implementation and monitoring of their actions on ageing. The Commission for Social Development is responsible for the global follow-up and appraisal of the Madrid International Plan of Action on Ageing 2002 and will decide on their modalities at its next session.

95. UNECE member states have the primary responsibility for the implementation and follow-up of the Regional Implementation Strategy (RIS). This follow-up should focus on strengthening co-operation among UNECE member states in the field of ageing and should allow for an effective exchange of information, experience and best practices. Member states should provide opportunities for civil society, including NGOs, and other relevant stakeholders to co-operate in this process.

96. The follow up process to the RIS will be done by member states at the national level and within the existing framework of meetings of the UNECE, including as appropriate at its annual session under the item on follow-up to world conferences. This would allow the UNECE secretariat to provide government delegations with information on relevant implementation activities within the region. The UNECE secretariat could also suggest to member states specific priority issues to be analysed in depth and, when appropriate, guidelines for reporting requirements in the follow-up process, to ensure that this follow-up is in line with the overall implementation of the Madrid International Plan of Action on Ageing 2002.

97. In contributing to this process NGOs should follow the rules of procedure of the Commission. The UNECE secretariat will assist member states upon request, with implementing the RIS and in their evaluation of the achievements of the RIS at the national level supported by experts of the intergovernmental organisations and interested NGOs relevant in the field of ageing.

98. Taking into account decisions by the Commission for Social Development on the global follow-up, UNECE member states will take, as early as possible, further decisions on procedures and timing regarding the regional follow-up. A first overall assessment of the implementation of the whole RIS and its timing and modalities should be determined in line with the Commission's decisions.

99. Follow-up activities to the implementation of the RIS by the UNECE secretariat must be financed within existing resources. As stated in paragraph 112 of the Madrid International Plan of Action on Ageing 2002, the Economic and Social Council could consider strengthening the capacity of UNECE.



100. *Bearing in mind the necessity to avoid any duplication of work, the follow-up to the RIS should be in line with the overall implementation of the Madrid International Plan of Action 2002 and be consistent with the procedures and timing of its global monitoring and review. This process should rely basically on the work carried out by all relevant institutions, particularly those in the areas of statistics, indicators, training and research.*

## *International Co-operation*

### **1. Statement by the Federal Government**

At its 54th General Assembly, the United Nations resolved to thoroughly revise the International Plan of Action on Ageing, which had been passed by the **First World Assembly on Ageing in Vienna in 1982**.

Following an extensive preparatory process at the UN level, a new international plan of action was discussed and passed at the **Second World Assembly on Ageing in Madrid in April 2002**. The **Second International Plan of Action on Ageing** identifies various problems of demographic change and proposes political solutions. The Federal Government actively participated in the passage of the Second International Plan of Action on Ageing at the Second World Assembly on Ageing in Madrid in 2002.

In September 2002, the United Nations Economic Commission for Europe (UNECE) held a **Ministerial Conference on Ageing (MiCA) in Berlin**, which was **hosted by the Federal Republic of Germany**. With substantial participation of the Federal Republic of Germany, the participating countries passed a **Regional Implementation Strategy (RIS)** with Ten Commitments (self-obligations).

Pursuant to this agreement, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth have formulated the present **National Action Plan (NAP) for Implementation of the Second International Plan of Action on Ageing and Regional Implementation Strategy**.

The German National Action Plan responds to the questions on ageing posed in the resolutions passed at the Second World Assembly on Ageing from a German viewpoint and additionally describes the German federal and state policies for older persons.

These national activities, initiatives and experiences represent a contribution of Germany towards the United Nations' efforts to generate **positive and productive perspectives in regard to demographic developments**.

The Federal Government will **continue to work in international co-operation on the projection of positive images of dignified and active life in old age**. It is thereby following the guidelines of Commitment X.

**By including civil society in the task of preparing the National Action Plan**, the Federal Government is pursuing the "**bottom-up approach**" called for by the UNECE. This is in **conformity with the requirements of the Regional Implementation Strategy**.

The strong involvement of the affected target group, i.e. older persons, is a deliberate and hopefully exemplary paradigm change in the process of formulating National Action Plans.

**The German Federal States were also involved**. By virtue of the federal structure of the Federal Republic of Germany, the **jurisdiction for old-age assistance and old-age policy** lies in the federal states.

The Federal Government regards **demographic change as a worldwide political cross-sectional problem**. It therefore takes an active part in **monitoring implementation of the Regional Implementation Strategy and Second International Plan of Action on Ageing at the international and national level**. This includes follow-up activities and measures undertaken by the UNECE, the

Commission for Social Development, and the United Nations Population Commission—e.g. conferences, written reports and meetings of the Task Force on Monitoring of the Regional Implementation Strategy and verbal and written statements by the Federal Republic of Germany.

## **2. Measures of the Federal Government**

### **National Action Plan (NAP) on Implementation of the Second International Plan of Action on Ageing**

The German National Action Plan is a comprehensive account of the Federal Government's policies on ageing. It provides an extensive and up-to-date summary of all programmes, action plans and measures undertaken by the federal departments concerned with ageing and demographic change. This NAP is based on the Ten Commitments of the Regional Implementation Strategy passed by the UNECE in Berlin in 2002.

The National Action Plan additionally describes examples of engagement of the federal states in senior citizens' policies and provides information concerning co-operation between the Federal Governments and the federal states in the area of old-age policy.

It includes Statements on the Part of the Civil Society, i.e. on the part of German non-governmental organisations (NGOs) and academic and research institutions, in response to each of the Ten Commitments.

### **Steps towards Implementation of the National Action Plan**

#### **Step 1:**

#### **UNECE Ministerial Conference on Ageing in Berlin in September 2002**

By hosting the UNECE Ministerial Conference on Ageing (MiCA) in Berlin in September 2002, the Federal Government took a big step towards implementing the Second International Plan of Action on Ageing.

With significant contributions from the Federal Republic of Germany and with participation from national and international non-governmental organisations, the conference assembly passed the Ten Commitments of the Regional Implementation Strategy of Berlin 2002 on the Implementation of the Second International Plan of Action on Ageing.

The German National Action Plan presented here is based on this agreement.

#### **Step 2:**

#### **National Action Plan Office for Implementation of the Regional Implementation Strategy in Fulfilment of the Second International Plan of Action on Ageing**

From 2003 to 2005, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth maintained an office for co-ordination of the contribution of civil society to

the National Action Plan (NAP) at the headquarters of the German National Association of Senior Citizens' Organisations (BAGSO, see p. 21).

BAGSO is an umbrella organisation that currently includes 89 nationally active senior citizens' organisations and represents more than 12 million older persons in the Federal Republic of Germany. It participated in the passage of the Second International Plan of Action on Ageing at the Second World Assembly on Ageing in Madrid in 2002.

The National Action Plan Office fulfilled the following tasks:

- Compilation of contributions from non-governmental organisations and academic and research institutions to the drafting of a National Action Plan for the Federal Republic of Germany;
- Information of the public about the National Action Plan and the status of its implementation by the following means:
  - Brochure entitled "Forming the Future in an Ageing Society - A Challenge for All Generations / From the Second International Plan of Action on Ageing to a National Action Plan"
  - Quarterly members' magazine published by BAGSO
  - Internet portals:
    - [www.nationaler-aktionsplan.de](http://www.nationaler-aktionsplan.de)
    - [klumpp@bagso.de](mailto:klumpp@bagso.de)
    - [www.bagso.de](http://www.bagso.de)

By establishing a National Action Plan Office at the headquarters of the German National Association of Senior Citizens' Organisations (BAGSO), the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth contributed towards enabling non-governmental organisations and academic/scientific institutions to be informed about and make their contributions to the Regional Implementation Strategy (RIS) at the highest level, in compliance with the resolutions of the UNECE Ministerial Conference in 2002 and the Berlin Ministerial Declaration.

### **Step 3:**

#### **Six Major Expert Workshops Held in the Years 2004-2005**

In 2004 and 2005, the National Action Plan Office for co-ordination of the contribution of civil society held six major expert conferences on topics specified in the Regional Implementation Strategy with support from the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth.

The conference themes were "Integration and Participation" in 2004, and "Quality of Life, Health and Care" in 2005.

The themes of the individual conference were:

- "Voluntary Engagement of Older Persons" (18 May 2004)
- "Adapting the Living Environment to the Needs of Older Persons" (20 July 2004)
- "Political Engagement of Older Persons" (14 October 2004)
- "Prevention, Rehabilitation, Care" (21 April 2005)
- "Working in and for Old Age" (07 June 2005)
- "Living in a World of Changing Technology" (11 October 2005).

The results of the expert conferences are documented in the brochure described below.

**Step 4:****Brochure entitled "Forming the Future in a Ageing Society - A Challenge for All Generations / From the Second International Plan of Action on Ageing to a National Action Plan"**

Renowned experts from academic/research institutions and representatives of non-governmental organisations intensively discussed the Ten Commitments of the Regional Implementation Strategy and formulated their responses to them.

The experts drafted fundamental position statements on issues relating to forming the future in an ageing society, participation of older persons in the workforce, participation of older persons in society, and participation of older persons in the health system in regard to prevention, rehabilitation and care. The reflections and results of the aforementioned expert conferences were included the position statements.

The Federal Government welcomes these multifaceted positions and concepts as a source of guidance in fundamental policy issues for older persons.

The brochure is supplied by the German National Association of Senior Citizens' Organisations (BAGSO), Eifelstrasse 9, D-53119 Bonn, Phone +49 (0) 228 / 249-9930, e-mail: [klumpp@bagso.de](mailto:klumpp@bagso.de).

**Commission for Social Development (CSocD)**

The Federal Government reports on demand to the Commission for Social Development (CSocD) about progress on implementation of the Second International Plan of Action on Ageing and Regional Implementation Strategy.

The Commission for Social Development is responsible for follow-up and appraisal of implementation of the Madrid International Plan of Action on Ageing 2002. Resolution 42/1, which it passed in 2004, lays down guidelines for the follow-up procedure. The Commission therein resolved to review the Madrid Action Plan every five years, and that each 5-year cycle should focus on one of the priorities of the action plan.

Represented by a delegation led by the parliamentary State Secretary of the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, the Federal Government participated in the follow-up and appraisal process in the scope of the 45th session of the Commission for Social Development in New York in February 2007. At the session, the delegation spoke not only on the behalf of the Federal Republic of Germany, but also on behalf of all EU countries as the acting Council Presidency.

In Resolution 58/134, the United Nations called for the Commission for Social Development to carry out the periodic review process in conformity with the guidelines of the 2003 Resolution 57/270 B regarding the integrated and coordinated implementation and follow-up to the outcomes of the major United Nations World Conferences and summits in the economic and social fields. According to Resolution 57/270 B, the individual World Conferences should no longer be implemented or appraised as individual, unlinked, parallel strands, but rather, each should make a contribution to the implementation of other related follow-up processes, e.g. the Fourth World Women's Conference or the World Social Summit. This cross-sectional approach makes it possible to treat subjects such as older women or the integration of older persons in the labour market from different perspectives.

### **Task Force on Monitoring RIS**

A government representative, a leading German gerontologist, and a member of the board of the German National Association of Senior Citizens' Organisations (BAGSO, see p. 21) are delegated by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth to the Task Force on Monitoring RIS. This is in conformity with the "bottoms-up approach" specified by the UNECE.

The Task Force is comprised of government representatives from the UNECE member states, experts and representatives of important NGOs and UN organisations.

They have already supported the European Centre for Social Welfare and Social Policy in Vienna, which was commissioned by the Republic of Austria in co-operation with the UNECE Secretariat, in the following tasks:

- Establishment and maintenance of a database on implementation of the Second International Plan of Action on Ageing of Madrid 2002 that is accessible to all member states,
- Development of indicators that document the progress of implementation of the Regional Implementation Strategy (RIS).

### **UNECE Conference in Leon on 6 - 8 November 2007**

The Federal Government, represented by a government delegation, participated in preparatory activities - conferences and meetings - and in the major conference organised by the United Nations Economic Commission for Europe in co-operation with the Spanish government, which was held in Leon in autumn 2007 (conference theme: "Berlin plus 5") .

This conference summarised the progress made in implementing the Second International Plan of Action on Ageing and of the Regional Implementation Strategy in the last five years. A meeting of ministers and the announcement of a political declaration gave it high political impact. The Federal Republic of Germany participated in the formulation of the declaration.

## **3. Statement of the Federal States**

According to Article 95 of the Regional Implementation Strategy, translation of the commitments contained in the RIS into national policy is primarily the responsibility of the member states. In Germany, this falls under Federal Government jurisdiction.

Since demographic change impacts on practically all domains of society, the effects also fall under areas subject to state and municipal jurisdiction. There is a need for action, particularly in the municipalities. As a mayors' survey conducted by the Bertelsmann Foundation has shown, the municipalities are aware of the challenge. In Bavaria, for example, eight municipalities with up to 8000 residents have developed municipal old-age assistance concepts. Co-ordination of the different offerings and the creation of a "supply chain" play particularly important roles in the development of these concepts.

However, not all communities have concepts that address the entire range of effects of demographic change. Smaller municipalities, in particular, need support from Federal and State Government in order to carry out future-orientated senior citizens policy. The federal states have recognized the need for support and have initiated important initial measures. The State Government of Rhineland Palatinate, for example, is holding a series of conferences on the subject of demographic change.

#### **4. Statement on the Part of Civil Society**

**Through the National Action Plan Office, which was established at the headquarters of BAGSO, academic institutions, civic and social organisations and, above all, senior citizens themselves were included in the process of drafting the National Action Plan.**

With the drafting this National Action Plan, the Federal Government fulfils its obligation to translate into its national policy the Regional Implementation Strategy on the basis of the Madrid International Plan of Action on Ageing of April 2002. As in its contribution to the Second International Plan of Action on Ageing and Regional Implementation Strategy, the Federal Government has also included civil society into the process.

With support from the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth the German National Association of Senior Citizens' Organisations (BAGSO) maintained a National Action Plan Office for co-ordination of contributions from the academic/scientific community and civic and social organisations from July 2003 to December 2005. An initial step was to call up a group of experts—representatives of academic and research institutions and civic and social organisations- which had, like BAGSO, followed the previous process at the international level.

The experts prepared statements on subjects which, in their opinion, were most important; these statements were compiled and published by BAGSO in early 2006 and are also available on the Internet at the website of the National Action Plan Office ([www.nationaler-aktionsplan.de](http://www.nationaler-aktionsplan.de)).

In addition, different events were held to gather knowledge and experience and also to compile the demands of civic and social organisations and academic institutions with regard to the individual commitments. This approach allowed older persons, in particular, to express their views. The NAP office then conducted the following expert conferences on subjects identified as being thematic priorities:

- “Voluntary Engagement of Older Persons” (18 May 2004);
- “Adapting the Living Environment to the Needs of Older Persons” (20 July 2004);
- “Political Engagement of Older Persons” (14 October 2004);
- “Prevention, Rehabilitation, Care” (21 April 2005);
- “Working in and for Old Age” (07 June 2005);
- “Living in a World of Changing Technology” (11 October 2005).

The results of these conferences were factored into the further thematic work of the civic and social organisations and academic institutions, and they served as the basis for the statements of the group of experts on the Ten Commitments of the Regional Implementation Strategy.

The Federal Government has therewith fulfilled its obligation to implement the Regional Implementation Strategy in close co-operation with civil society, the private

sector, and other important interest groups, in particular, with older persons themselves in accordance with Article 9 of the Ministerial Declaration. As key stakeholders in work with older persons, it is important that the municipalities be included in the further development process and that they be supported in the implementation of concrete action measures.



**DIRECTORY OF FEDERAL MINISTRIES**

Berlin	Bonn
<b>Federal Ministry for Labour and Social Affairs</b>	
Wilhelmstrasse 49 D-10111 Berlin Phone: +49 3018 527-0 Fax: +49 3018 527-1830 E-mail: <a href="mailto:poststelle@bmas.bund.de">poststelle@bmas.bund.de</a>	Rochusstrasse 1 D-53123 Bonn Phone: +49 22899 527-0 Fax: +49 22899 527-1830 Internet: <a href="http://www.bmas.de">www.bmas.de</a>

<b>Federal Foreign Office</b>	
Werderscher Markt 1 D-10117 Berlin Phone: +49 30 5000-0 Fax: +49 30 5000-3402 E-mail: <a href="mailto:poststelle@auswaertiges-amt.de">poststelle@auswaertiges-amt.de</a>	Adenauerallee 99-103 D-53113 Bonn Phone: +49 1888 17-0 Fax: +49 1888 17-3402 Internet: <a href="http://www.auswaertiges-amt.de">www.auswaertiges-amt.de</a>

<b>Federal Ministry of the Interior</b>	
Alt-Moabit 101 D D-10559 Berlin Phone: +49 3018 681-0 Fax: +49 3018 681-2926 E-mail: <a href="mailto:poststelle@bmi.bund.de">poststelle@bmi.bund.de</a>	Graurheindorfer Strasse 198 D-53117 Bonn Phone: +49 22899 681-0 Fax: +49 22899 681-2926 Internet: <a href="http://www.bmi.bund.de">www.bmi.bund.de</a>

<b>Federal Ministry of Justice</b>	
Mohrenstrasse 37 D-10117 Berlin Phone: +49 1888 580-0 Fax: +49 1888 580-9525 E-mail: <a href="mailto:poststelle@bmj.bund.de">poststelle@bmj.bund.de</a>	Adenauerallee 99 - 103 D-53113 Bonn Phone: +49 1888 580-0 Fax: +49 1888 580-8325 Internet: <a href="http://www.bmj.bund.de">www.bmj.bund.de</a>

<b>Federal Ministry of Finance</b>	
Wilhelmstrasse 97 D-10117 Berlin Phone: +49 3018 682-0 Fax: +49 3018 682-4248 E-mail: <a href="mailto:poststelle@bmf.bund.de">poststelle@bmf.bund.de</a>	Graurheindorfer Strasse 108 D-53117 Bonn Phone: +49 3018 682-0 Fax: +49 3018 682-4420 Internet: <a href="http://www.bundesfinanzministerium.de">www.bundesfinanzministerium.de</a>

<b>Federal Ministry of Economics and Technology</b>	
Scharnhorststrasse 34-37 D-10115 Berlin Phone: +49 3018 615-0 Fax: +49 3018 615-7010 E-mail: <a href="mailto:info@bmwi.bund.de">info@bmwi.bund.de</a>	Villemombler Strasse 76 D-53123 Bonn Phone: +49 228 615-0 Fax: +49 228 615-4436 Internet: <a href="http://www.bmwi.bund.de">www.bmwi.bund.de</a>

<b>Federal Ministry of Food, Agriculture and Consumer Protection</b>	
Wilhelmstrasse 54 D-10117 Berlin Phone: +49 30 2006-0 Fax: +49 30 2006-4262 E-mail: <a href="mailto:poststelle@bmelv.bund.de">poststelle@bmelv.bund.de</a>	Rochusstrasse 1 D-53123 Bonn Phone: +49 228 529-0 Fax: +49 228 529-4262 Internet: <a href="http://www.bmelv.de">www.bmelv.de</a>

<b>Federal Ministry of Defence</b>	
Stauffenbergstrasse 18 D-10785 Berlin Phone: +49 30 2004-0 Fax: +49 30 2004-8333	Hardthöhe D-53125 Bonn Phone: +49 228 120-0 Fax: +49 228 120-5357
E-mail: <a href="mailto:poststelle@bmvgl.bund400.de">poststelle@bmvgl.bund400.de</a>	Internet: <a href="http://www.bmvgl.de">www.bmvgl.de</a>

<b>Federal Ministry of Family Affairs, Senior Citizens, Women and Youth</b>	
Alexanderstrasse 3 D-10178 Berlin Phone: +49 3018 555-0 Fax: +49 3018 555-1145	Rochusstrasse 8-10 D-53123 Bonn Phone: +49 3018 555-0 Fax: +49 3018 555-2221
E-mail: <a href="mailto:poststelle@bmfsfj.bund.de">poststelle@bmfsfj.bund.de</a>	Internet: <a href="http://www.bmfsfj.de">www.bmfsfj.de</a>

<b>Federal Ministry of Health</b>	
Friedrichstrasse 108 D-10117 Berlin Phone: +49 3018 441-0 Fax: +49 3018 441-1921	Am Propsthof 78 a D-53121 Bonn Phone: +49 22899 441-0 Fax: +49 22899 441-4900
E-mail: <a href="mailto:poststelle@bmg.bund.de">poststelle@bmg.bund.de</a>	Internet: <a href="http://www.bmg.bund.de">www.bmg.bund.de</a>

<b>Federal Ministry of Transport, Building and Urban Affairs</b>	
Invalidenstrasse 44 D-10115 Berlin Phone: +49 30 2008-0 Fax: +49 30 2008-1942	Robert-Schumann-Platz 1 D-53175 Bonn Phone: +49 1888 300-0 Fax: +49 1888 300-3428
E-mail: <a href="mailto:buengerinfo@bmvbs.bund.de">buengerinfo@bmvbs.bund.de</a>	Internet: <a href="http://www.bmvbs.de">www.bmvbs.de</a>

<b>Federal Ministry for the Environment, Nature Conservation and Nuclear Safety</b>	
Alexanderstrasse 3 D-10178 Berlin Phone: +49 3018 305-0 Fax: +49 3018 305-2044	Robert-Schumann-Platz 3 D-53175 Bonn Phone: +49 22899 305-0 Fax: +49 22899 305-3225
E-mail: <a href="mailto:service@bmu.bund.de">service@bmu.bund.de</a>	Internet: <a href="http://www.bmu.de">www.bmu.de</a>

<b>Federal Ministry of Education and Research</b>	
Hannoversche Strasse 28-30 D-10115 Berlin Phone: +49 3018 57-0 Fax: +49 3018 57-83601	Heinemannstrasse 2 D-53175 Bonn Phone: +49 22899 57-0 Fax: +49 22899 57-833601
E-mail: <a href="mailto:bmbf@bmbf.bund.de">bmbf@bmbf.bund.de</a>	Internet: <a href="http://www.bmbf.de">www.bmbf.de</a>

<b>Federal Ministry for Economic Cooperation and Development</b>	
Europahaus Stresemannstrasse 94 D-10963 Berlin Phone: +49 1888 535-0 Fax: +49 1888 535-2595	Adenauerallee 139-141 D-53113 Bonn Phone: +49 1888 535-0 Fax: +49 1888 535-3500
E-mail: <a href="mailto:poststelle@bmz.bund.de">poststelle@bmz.bund.de</a>	Internet: <a href="http://www.bmz.de">www.bmz.de</a>

<b>Press and Information Office of the Federal Government</b>		
Bundespresseamt Dorotheenstrasse 84 D-10117 Berlin Phone: +49 1888 270-0 Fax: +49 188 10 272-0		
E-mail: <a href="mailto:InternetPost@bundesregierung.de">InternetPost@bundesregierung.de</a>		Internet: <a href="http://www.bundespresseamt.de">www.bundespresseamt.de</a>

<b>Federal Government Commissioner for Culture and Media</b>		
Bundeskanzleramt Willy-Brandt-Strasse 1 D-10557 Berlin Phone: +49 1888 681-3837 Fax: +49 1888 681-3821		
E-mail: <a href="mailto:poststelle@bkm.bmi.bund.de">poststelle@bkm.bmi.bund.de</a>		Internet: <a href="http://www.kulturstaatsminister.de">www.kulturstaatsminister.de</a>

<b>Federal Government Commissioner for Immigration, Refugees and Integration</b>		
Bundeskanzleramt Willy-Brandt-Strasse 1 D-10557 Berlin Phone: +49 3018 400-1640 Fax: +49 3018 400-1606		
E-mail: <a href="mailto:internetpost@integrationsbeauftragte.de">internetpost@integrationsbeauftragte.de</a>		Internet: <a href="http://www.integrationsbeauftragte.de">www.integrationsbeauftragte.de</a>

<b>Federal Government Commissioner for the Interests of the Disabled</b>		
D-11017 Berlin Phone: +49 3018 527 2944 Fax: +49 3018 527 1871		
E-mail: <a href="mailto:info@behindertenbeauftragte.de">info@behindertenbeauftragte.de</a>		Internet: <a href="http://www.behindertenbeauftragte.de">www.behindertenbeauftragte.de</a>

<b>Federal Government Commissioner for Matters Relating to Repatriates and National Minorities</b>		
Alt-Moabit 101 D D-10559 Berlin Phone: +49 3018 681-0 Fax: +49 3018 681-2926		Graurheindorfer Strasse 198 D-53117 Bonn Phone: +49 22899 681-0
E-mail: <a href="mailto:poststelle@bmi.bund.de">poststelle@bmi.bund.de</a>		Internet: <a href="http://www.aussiedlerbeauftragter.de">www.aussiedlerbeauftragter.de</a>

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**Designed by:**

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