

A good place to grow older

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Introduction

Spain, like many other countries, must address the effects of an ageing society, which represents a major shift in population structure, with different needs and implications at all levels.

Some data to put the question to see the rapid growth of the elderly population: In 2007, January, the number of older people was 7,531,827, 16.7% of the total population. In 2008, January, the number of people over 65 years in Spain amounted to 7,633,807, of which 2,046,554 are over 80 and in 2060, according to projections by the National Institute of Statistics, the population over 65 will be 15,679,878, which represents 29% of the total population. Then, for each child between 0-14 years will be 2.3 persons older.

On the other hand, the projections show a significant rise in the old-age dependency ratio (24.1% in 2008, 24.45% in 2010 and 58.7% in 2050).

In the Spanish Constitution of 1978, a distribution of jurisdictions was between the various Autonomous Communities and the State, which were set forth in their respective Autonomous Statutes.

In this way the Autonomous Communities are the responsible for the implementation of social services. At national level, there are different bodies that affect older people.

The **Spanish pension system** relies on public earnings-related schemes (mandatory) financed by social contributions from workers (4.7% of earnings) and employers (23.6% of earnings). Employees can extend their working career beyond the 65-year limit through, for example, part-time contracts or incentives to access retirement beyond 65. Early-retirement is possible from the age of 61. **Private pension plans** are voluntary and cover both individual and occupational pension funds.

Minimum contributory pensions have income guaranteed by a 'top-up' benefit and amount to €7,997/year in 2008 for those over 65 years or plus (€9,222 for 65+ with a dependant spouse), representing 27% of the total number of pensions.

Non-contributory pensions and other means-tested welfare pensions act as basic universal provision, covering 11.4% of pensioners.

At present, there is a great debate at national level between the different social agents to address major reforms in the pension system.

The National Health System (NHS), defined as a mix of central government and regional government services, provides **universal coverage**. It is a decentralised system under which 17 autonomous regions run healthcare services, the Ministry of Health monitors and ensures the equity of the system and the Interterritorial Council of the NHS has a coordination role. Primary health care (PHC) is publicly managed and delivered in health centres. Patients register with a general practitioner (GP). GPs refer patients to specialists who refer them to hospital care. Outpatient ambulatory centres provide outpatient specialist care, an in-patient care is provided in hospitals which are publicly owned. It is a tax-based system, free at the point of access. Co-payments apply to pharmaceuticals except for retired and disabled people. Private voluntary supplementary insurance covers 4.7% of the population.

In June 2008 a major Pact for Health was signed by the Ministry of Health and all autonomous regions in the Inter-territorial Council with the aim of reinforcing the NHS. This agreement addresses crucial issues, such as improving human resources policy; creating a common portfolio of services; rationalising health care spending, increasing the quality and facilitating innovation in health services; facilitating universal access to palliative care; boosting preventive care and implementing policies to counter illicit drug consumption.

Traditionally, **the education of the older persons** has been supported at political and social levels by means of the participation of public Institutions, associations of older persons and trade unions at National, Autonomous Communities and local levels.

Organic Law 2/2006 on Education (LOE) considers education to be ongoing learning that takes place throughout life. *Consequently, all citizens should have the opportunity to obtain training both inside and outside the educational system in order to promote active citizenship, equality of opportunities for every sector of the population and a bigger social cohesion:*

To fulfil the above mentioned subject, educational administrations will be able to cooperate with public administrations with competences for adult education and, especially, with the administration competent in labour matters, local authorities and social partners.

Concerning concrete actions, it is to be mentioned the following aids and allocations on an annual basis.

- Aids to local authorities in the management realm of the Ministry of Education, to fulfil activities in the framework of adult education.
- Subsidies to private non-profit organisations in the realm of Ministry of Education to fulfil activities in the framework of adult education all the life-long.
- Subsidies directed to Foundations organically dependent to political parties with representation in the *Cortes Generales* to develop training activities within the subject of education for older persons.
- Subsidies to host congresses, meetings and other similar activities to private non-profit organisations to diffuse activities for the education of older persons in the framework of long-life learning.
- Miguel Hernández Awards, created in 1991 for the acknowledgment of the importance of removing education inequalities and removing the discrimination faced by those groups in basic training.

Formal education is planned, structured and regulated. It is divided in levels that ensure the unity of the educational process and facilitate the continuity of same throughout people's lives.

There are currently several possibilities that guarantee the access of the older persons to formal teaching at all levels, from primary and secondary to university studies.

The Education Administrations, in collaboration with the local and Autonomous Community Public Administrations, organise guidance and information services on the various education options in each territorial area and the possibilities for gaining access to same.

Access to these education options may be gained by both presence-based and distance learning.

The Ministry of Education and Science (MEC) has promoted the distance option via the Centre for Innovation and Development of Distance Education (CIDEAD), the functions of which include to provide easier access to education to adults, especially to those that cannot continue attendance based studies due to various circumstances.

Informal education consists of training activities that provide for personal development with a view of active participation by adults in the social, cultural and political activities of their surroundings.

This training is organised at public and private levels and includes the collaboration of various different Institutions at national, Autonomous Community or local levels: centres for adults, popular universities, associations of older persons, trade unions, local corporations, universities. The training offering is highly varied, according to the personal and social needs and interests of the corresponding environment. Some of the activities that are carried out in this area as regards the older persons are as follows:

University for the Elderly (PUM) programmes, carried out in Spanish universities. These programmes are aimed at older persons with an average age of between 55 and 70 years that are physically and mentally fit. The objective of these programmes is to strengthen their educational and cultural development. They are organised around five areas of knowledge: humanities and social sciences, legal and economic sciences, earth and environmental

Mentor Classes, an open, distance learning, Internet-based educational system, promoted by the Educational Information and Communication Centre in the Ministry of Education and Science, in collaboration with a wide number of Institutions (Ministries, Education Departments in Autonomous Communities, Educational Centres, City Councils and NGOs)

These classes are to be found especially in adult centres in rural areas or run by City Councils.

The **Institute for the Elderly and Social Services** (Imserso) is a managing body of Spain's Social Security under the Ministry of Health, Social Policy and Equality through the General Secretariat for Social Policy.

Imserso's action focuses specifically on developing policies and actions to address the needs of older persons and dependent people, especially those arising from the application of the Personal Autonomy and Care for Dependent Persons Act.

Imserso also has the task of developing **draft proposals for basic legislation** aimed at ensuring both the equality of citizens and the development of inter-territorial social cohesion policies on matters falling within its competence.

Spain's high life expectancy (84 years on average), together with its advanced healthcare system has meant that it is becoming a country with one of the largest ageing populations in the world. This situation leads the Institution to focus policies on two priority action lines: The promotion of active ageing and the prevention of dependency.

On dependency, three years ago the government of Spain adopted a piece of legislation of fundamental significance: **The Personal Autonomy and Care for Dependent Persons Act**.

This law has recognised a new subjective right to all Spanish citizens, independently of their age: The right to receive benefits and services whenever they need long-term care. At this time, this right has already been recognised to almost seven hundred thousand Spanish citizens and the families who care for them.

With regard to developing policies and programs on active ageing Imserso is working on a series of actions designed to maintain older persons, active and integrated into society

In this regard, one of the most highly-rated activities consists of **tourism programs and social spas**, by means of which older persons can enjoy tourist, cultural, artistic activities or being close to nature, as well as the health services such as spa treatments which spas have on offer. It has been shown that these programs have a very positive impact on the physical and psychological well-being and on social relations of older persons.

The '**Close to You**' programme is intended to respond to one of our priorities, combating social exclusion, in this case older persons suffering from loneliness. In Spain, about a million and half people over 65 live alone and feel isolated. The program is aimed at breaking the isolation faced by older persons and integrating them back into their environment. This aim is achieved through the active support of voluntary work, social awareness and creating opportunities for social participation at the regional and local levels.

Another of Imserso priorities is to address the needs of older persons living in rural areas. The **Rural Enclave program** aims to promote, identify, collect and disseminate best practices in the fields of ageing, disability and community services that are provided in rural areas to encourage the development of new initiatives that provide quality answers to the demands arising in those areas.

To give effect to this program, the Imserso has created a website called 'Enclaverural.es'. It collects and disseminates, social and health care activities carried out by public authorities or by the private sector through a catalogue of best practices.

The **Remote Home Assistance Service** is provided by a telephone line located in the users' homes, which allows the older persons to speak from any part of their homes, 24 hours a day, with a centre staffed by professionals that are trained to give an adequate response to the needs that arise, either by themselves or by mobilising other human and material resources, belonging to the user or existing in the community. The community is run at State level and carried out by means of an agreement between the IMSERSO, the Spanish Federation of Municipalities and Provinces (FEMP) and the Local Corporations.

Besides these programs, there are other activities to bring social policies closer to reality and thus achieve an effective use of resources of our Institute, among others:

A **study and research programme** aimed at collecting and analyzing sociological data enabling us to better understand the needs and demands of the Institute's target groups with a view to identifying the activities and services that will provide the most appropriate answers to them.

A **Training Plan specialised in social services**, targeting practitioners in different areas of Social Services. It provides training and refresher courses with a view to meeting the needs and demands of older and dependent persons.

A **Monitoring Centre for Older persons** whose goal is to collect, analyze and disseminate information useful to all actors involved in the development of policies, actions and initiatives to address the needs of older persons in Spain.

Information from the Monitoring Centre is posted in the **Website for Older Persons** www.imsersomayores.csic.e, which is a virtual area, collecting and disseminating the most relevant information and documentation on the elderly.

In Spain, participation by older persons in decision- making on policies and actions that affect them takes place through the **State Council of Older Persons**, an interministerial, collegiate body, having advisory and consultative status to the General State Administration. The Council is attached to the Ministry of Health, Social Policy and Equality.

The purpose of the National Council of Older Persons is to institutionalise cooperation and participation of older persons in defining, implementing and monitoring care policies, social integration and quality of life for older persons, within the powers granted to the General State Administration.

It also advises and reports on the consultations that are made by the ministerial departments and institutions in matters affecting their conditions and quality of life.

The State Council is made up of:

- Public Administrations: 7 from the General State Administration, 4 from the Autonomous Communities and 2 from the Local Authorities.
- Confederations, federations or associations of older persons: 15 at the state and 10 at non-state level.
- Councils and collegiate bodies with similar functions to those of the State Council in each of the Autonomous Communities and Cities of Ceuta and Melilla.

What are the priorities in respect to ageing and demographic change in your country? (What is your experience of integrating successful pilot projects into the policy framework? What are the related challenges?)

If we analyse the main priorities in the field of ageing in our country we have to highlight two major lines:

1. The promotion of active ageing.
 2. The Promotion of Personal Autonomy and Care for Dependent Persons
1. The promotion of **active ageing**. The basic idea is to involve the older person from the interaction-participation. It is essential at this stage of the life cycle to consider the older person as person who has to have opportunities to stay active. In the ageing not only damage or loss occur but also occur development processes. In this sense, gerontological educational programs are a key determinant that can help older people to play a positive role (university programs; intergenerational programs; community programs of civil society, ...).

Apart of the programs and activities developed by Imsero, some of them mentioned above, there are the programs implemented by the different Spanish Autonomous Communities and councils.

2. A new **Law on the Promotion of Personal Autonomy and Care for People in a Situation of Dependency** was approved by the Spanish Parliament in December 2006, as a result of a great collective project.

This new Law created the Autonomy and Dependency Care System (SAAD), designed to increase coverage to all people in situation of dependency to about 1,300,000 people by 2015 through a large boost in provision to be implemented in phases between 2007 and 2014, starting with those with higher dependency levels.

This System is a basic instrument to develop the Law in a jointly and coordinated action between General Administration of the State and the Autonomous Communities, and, if the case, Local Entities.

The Law expressly sets forth the **principle of inter-administrative cooperation**. Since the Spanish Constitution of 1978 there were several models (17) for care and social services, different according to the structure, economic possibilities and internal configuration of each Community. With the enactment of the law, an attempt is made to **guarantee basic conditions** which ensure equality in the exercise of the new citizens' rights, **establishing a common framework for all the Communities**.

Regarding decision making and the establishment of criteria which are common to the whole System two important bodies have been created, the Territorial Council and the Advisory Committee.

The Autonomous Communities, the State General Administration and the Local Entities are represented in the **Territorial Council**, according to a rotary system which is renewed every six months.

It is a very important body in terms of competences since the agreements reached at the Council tend to have a translation in terms of legislation.

It is responsible for, among others, agreeing the inter-administrative Cooperation Framework for the development of the Law, agreeing the standard for the evaluation of dependency, with the basic criteria for the evaluation process and the characteristics of the evaluation bodies, agreeing to the criteria for determining the level of protection of the services, agreeing to take measures for guaranteeing the quality of the System as common criteria for accrediting the centres, criteria of quality and safety for centres and services, quality indicators for assessment, continuous improvement and compared analysis of the centres and services of the system, best practices guides, service charters, adapted to specific conditions of the dependent persons.

Secondly, the **Advisory Committee** has been created, as an advisory body of a participating nature, given that representatives of the unions and business sectors have been included in it, thus making possible the institutional participation of such sectors in the System. Its functions are those of information, advice and proposals for new subjects which are of special interest for the functioning of the system.

User representatives have also institutional participation as consultative bodies through the State Council for older persons, the National Council for the Persons with Disabilities, the State Council of Non-Governmental Social Work Organisations.

According to the Statutes of Autonomy, the Communities, among others, are responsible of planning, ordering, coordinating and managing the services for the promotion of personal autonomy and care for dependent persons in the scope of their territories, managing the services and resources that are necessary for assessing and caring for dependent persons, elaboration of the rules and regulation on conditions for access to benefits and services.

At present, what we are seeing is that the law is being implemented at different rates for each community, because the competences of assessment of the situation of dependency, development of PIAS (individual care programme) and an important part of the allocation of resources depend on each Autonomous Community.

Therefore, it is very important the role of the Territorial Council where much negotiation and consensus is necessary to ensure the equality of citizens throughout the Spanish territory.

System services and benefits

The Dependency Law has set forth a broad list of **dependency benefits**, differentiating between services, on the one hand, and financial benefits on the other. It should be pointed out the fact that, it mainly involves benefits which already existed previously, and they were being provided through the Social Services of the respective Autonomous Communities.

Firstly, **the services**, which comprise social services for the promotion of personal autonomy and care for dependent persons, and which are given top priority in comparison to financial benefits. The following service typology has been established:

- Dependence prevention services and those for the promotion of personal autonomy
- Remote care services
- Home care services:
 - a) Care for needs of the home
 - b) Personal care
- Day and Night Centre services
- Residential care services:
 - (i) Home for elderly dependent people;
 - (ii) Care centre for dependent people, on account of the different types of disabilities.

As an instrument for providing all these types of services, a **Network of SAAD Services** has been established, which is integrated into the services network of the respective Autonomous Communities. A series of centres and homes with distinct legal legislation will be integrated into this Network. Thus, the following will form part of the Network of services:

- (i) Public Centres of the Autonomous Communities;
- (ii) The public centres of the Local Entities;
- (iii) The State Centres of Reference;
- (iv) The officially approved private centres.

In terms of the **participation of the beneficiary in the cost of the services**, the same Law establishes that the beneficiaries of the dependence benefits shall participate in their funding, according to the type and cost of the service and their personal financial situation, which shall also be taken into account for the determination of the amount of financial benefits. For this, the Territorial Council of the System for Autonomy and Care for Dependent Persons has set criteria for the application of those provisions.

Secondly, the **financial benefits**:

Regarding the types of economic benefits set forth in the Law, there are three types:

- (i) Financial benefit linked to the service;
- (ii) Financial benefits for care in the family environment and support for non-professional carers;
- (iii) Financial benefit for personal care.

In Spain the ageing index of the population will increase significantly until 2040. The phenomenon of ageing present in our country is influenced by the lower troop strength of the generations born during the Spanish civil war and the post-war immediately. This means that the ageing of the population will occur in two stages:

- the period 2011-2020, growth will characterised mainly by an increase of the group of 75-84 years, higher than the rest of groups of older persons.

- The period 2020-2040, is expected to increase superior of the group of 65-74 years.

In this way we cannot forget the differentiation of demographic change that exists in the urban and rural areas, influencing directly in an attention to the older person.

2. What characterises a 'good place to grow older' in your country?

Have an organised structure in the form of network to work in coordination and collaboration. Remain the responsibility of the autonomic government view social services and establish the guidelines, the criteria and formulas of general coordination of the system and coordination cross between departments, if necessary to improve the management and efficiency of the policy of social services/devices. It should be enhanced policies that generate participation individual and group. The design of participation should be developed in a:

- Participation from the interest of each person (relate to others, build new knowledge, promote the development staff, ...);
- Participation in projects to other elderly or other population groups, based on the willingness to contribute time, experience and skills;
- Participation from the public administration and the third sector (organising activities, performances of associations, performances and bodies of citizen participation).

3. How can communities be supported to become good places to grow older?

For communities to build and can become good places to grow, it must be based some key concepts:

- a) Older people are active in driving projects to promote social life in the territories premises. The current depersonalisation of some major cities should not dilute the feeling of local, encouraging social life and participating as an important change agent.
- b) Recognition of older people as an important part of the active citizenship and social. Many entities devote part of its time to facilitate the life of its neighbours and make more welcoming the neighbourhoods on the basis of volunteerism, it must be recognised all of these initiatives and to treat persons voluntary as active and solidarity;
- c) Recognition of the task of the professionals working in the projects of participation. We must recognise the important task organisational, management and dynamism that exist behind participation projects. These tasks are vital to the smooth development of the programs and are being developed by professionals.
- d) and finally, the bodies of participation, they have to be spaces that encourage coordination and cooperation between entities. The bodies of the participation of a territory have to promote cooperation between entities favouring the establishment and consolidation of local projects, of territory and collective.

4. What is the attitude towards taking into account and making use of local diversity in your country?

The diversity is in line with the heterogeneity in the group. At present is easier than there are persons older, interests and conditions varied, they develop their unique participatory processes and in turn, can feel recognised as members of a movement participatory broad.

In any of the modalities of participation, there is always the same attitude: all offer frames of social relationship. Through the contact and exchange that allows, to expand their gaze and his thinking.

5. Do you use indicators for evaluating policy measures? What is your country's approach to the (early) participation of researchers in the evaluation process?

The Autonomous Communities have the competences about the implementation of social services and therefore those who evaluate the results.

At national level, since 1 January 2007, there is an information system of the SAAD with statistical data concerning the implementation of the Promotion of Personal Autonomy and Care for Dependent Persons, updated every month with national data and communities.

Since 2000, through the Older Persons website is developed and published regularly 'The report of older persons in Spain' which collects statistics relating to demographic data, social protection to the old age, economic situation and relationship with the labour market, ways of living, personal relationships and the experience of ageing, daily-life, attitudes, values, emotions, social services and pensions for the elderly. This report is produced every two years and contains data at national, regional level and comparative. Imsero promotes, supports and publishes research in the fields of expertise related to long term care and or older persons.