

Project "Support to the implementation
of the National program of demographic security
of the Republic of Belarus"



Министерство труда
и социальной защиты
Республики Беларусь

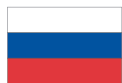
I. Kalabikhina, N. Krasovskaya, N. Kalmykova

Demographic ageing in the Republic of Belarus: CHALLENGES AND NEW OPPORTUNITIES



ANALYTICAL REPORT

2018



Ministry of Labour
and Social Protection
of the Republic of Belarus

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Global population ageing processes that have accelerated in recent decades in the economically developed countries of the world also manifested themselves in the Republic of Belarus.

In the Report, on the basis of official statistics of the Republic of Belarus, a description of the current age-sex structure of the population is given, demographic reasons and socio-economic challenges of ageing are considered. A comprehensive system of indicators of ageing of the population is proposed and emphasis is been placed on the need to improve the information base on various aspects of the life of the elderly population and the advantages of using a system of indicators both of the ageing process itself and of its consequences. Particular attention is paid to the analysis of national policies aimed at improving the quality of life of the population of older ages. It is concluded that active involvement of the older generation in the economy and social life is one of the most important conditions for sustainable development of the country and improving the quality of life of the population of older ages.

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CONTENT

INTRODUCTION	4
Demographic ageing in the context of key indicators	7
Demographic causes and socio-economic challenges of ageing	13
Ageing policy: international principles and national priorities	19
CONCLUSION	25
ANNEXES	
Appendix 1. Ageing indicators	27
Appendix 2. Statistical annex	29
Appendix 3. UNITED NATIONS PRINCIPLES FOR OLDER PERSONS	30
Appendix 4. ON THE CHARTER OF THE ELDERLY PEOPLE The Interparliamentary Assembly of the Member States of the Commonwealth of Independent States	32
Appendix 5. 2017 LISBON MINISTERIAL DECLARATION 4 th UNECE Ministerial Conference on Ageing “A Sustainable Society for All Ages: Realizing the potential of living longer”	34
Appendix 6. Normative legal support for the implementation of the Madrid International Plan of Action in the Republic of Belarus	39
REFERENCE LIST	42

INTRODUCTION

The processes of demographic ageing – increasing the proportion of older people in the total population – are recorded in most of the world's countries.

Practically from the first years of its operation the Population Division of the Department of Economic and Social Affairs of the United Nations deals issues of demographic ageing, producing retrospective and prospective calculations of the size and composition of the population of older ages and analyzing the causes and consequences of the ever larger increase in the relative and absolute number of elderly people. Beginning with the publication of the now historic report of 1956, devoted mainly to demographic ageing in the most developed countries of the world, UN experts constantly and consistently draw the attention of national governments and the international community to the issues of demographic ageing by regularly publishing reports and compilations of relevant statistical data.

In 2017, the number of inhabitants of the planet aged 60 years and over reached 962 million people, accounting for 13% of the world population¹. The number of elderly people is growing at a rate of 3% per year. It is expected that by 2050 a group of elderly people will constitute a quarter of the population of all regions, with the exception of Africa. The global number of elderly people, according to the projected forecasts, will reach about 1.4 billion people by 2030, 2.1 billion by 2050 and 3.1 billion by 2100 [1]. In 2060, the proportion of the elderly will be 33.2% in developed countries, 24.5% in developing countries and 11.8% in less developed countries. Even the least developed countries in 2060 will resemble developed countries of the middle of the last century by the share of older people. By about 2050, the number of elderly in the world will exceed the number of children [2].

It should be noted that the boundaries of old age and the boundaries of the working age of the population are not clearly defined. In the UNO World Population Ageing 2017 report, the upper boundary of the working age is noted as 64 years [5]. Thereby, the elderly population includes those aged 65 and older² [3]. The shift of the border of old age in older ages when analyzing the ageing process is associated with both growing life expectancy in all countries of the world, and with the changing boundaries of the retirement age in developed countries. In 2017 the United Nations was first to propose

accounting the elderly population on the basis of the concept of prospective age [4] – the age at which the population has 15 years to live on average. Such mobile and individual borders of old age for each country will help to determine policy guidelines in the labour market, in the pension and social security of ageing societies, that would be most effective for the economy and society.

The boundaries of the working age can be determined in different ways and change not only at the point of overcoming the working age, but also at the point of reaching this age.

In the UN World Population Ageing 2017 report [5] in the formula for the child dependency ratio the age group of 0–19 years (instead of the traditional group 0–15 years) was used. The prospective elderly dependency ratio (on the basis of the new approach of perspective age) is based on the age of 20 years as the age of entry into working life. This is due to the lengthening of the learning stage in the life cycle of young generations that have a longer horizon of life expectancy in general. The following age limits are used in this paper: 15/20 years – entry of the age of the able-bodied population, 60/65 years – exit from this socio-demographic group.

Demographic ageing entails a whole complex of consequences for the economy, healthcare systems, social security, socio-cultural relations, as well as for the position of the elderly themselves. Therefore, the policy in the area of demographic ageing comes to the forefront in many countries of the world, including in the Republic of Belarus. Statistical data and demographic analysis show that the country's population has entered the era of rapid ageing. Already today, 21% of the population of Belarus are people over the age of 60 and 15% – at the age of 65³. The increase in the share of elderly citizens implies the need to develop public policies aimed at ensuring social protection and integration of this category of citizens in accordance with their needs, as well as increasing the effectiveness of using their human potential.

In this context, two dimensions of making effective state decisions are important: obtaining reliable data on the dynamics of the ageing processes in Belarus and identifying the main directions of adaptation of national development programs taking into account this situation.

It was these two dimensions that determined the structure of the proposed work.

¹ According to the UN, the proportion of the population aged 60+ in 1950 in developed countries was 11.5%, and 5-6% in developing and least developed.

² According to the scale of the researcher J. Beaujeu-Garnier, the population is considered young if the share of the population over 60 years of age in the total population does not exceed 8%, and old, if this share is over 16%.

³ Here and further (unless otherwise indicated) the source of settlements for Belarus is the data of the National Statistical Committee of the Republic of Belarus (<http://dataportal.belstat.gov.by>) and the Ministry of Economy of the Republic of Belarus (<http://www.economy.gov.by/by/>).

In the first section “Demographic ageing in the context of key indicators”:

- population ageing indicators that are used to assess and monitor national ageing policies in the context of sustainable development (ageing process indicators, indicators of the causes of ageing, indicators of the effects of ageing on the economy, indicators of the situation of the elderly and future seniors) are analyzed;
- changes in the gender and age structure of the Republic of Belarus are described on the basis of the described indicators;
- prospective directions of research are offered for reception of authentic data – the basis of formation of a policy concerning demographic ageing of the population.

In the second section “Demographic causes and socio-economic challenges of ageing”:

- the causes and consequences of the change in the age and sex structure of the population are considered;
- priority areas for the adaptation of national economic and social policies to a new demographic situation are proposed.

In the 3rd section “Policy on ageing: international principles and national priorities”:

- the legal framework of the country is analyzed;
- measures are proposed to improve it.

In the conclusion, the main findings are drawn and recommendations are offered for the improvement of the national policy in the field of population ageing.

In particular, it is noted that most obvious among the consequences of ageing are a reduction in the workforce, a possible slowdown in economic growth, an increase in social spending for the elderly. At the same time, the consequences of population ageing are interrelated in such a way that efforts to mitigate each of the consequences simultaneously have a positive impact on others. Implementation of measures for preservation of the health and working capacity of the elderly contributes to the use of their labour potential to the fullest extent, and hence, creates conditions for mitigating problems related to social protection and medical care of the elderly, as well as reducing the burden of pension payments. Expansion of employment of older citizens creates financial conditions for improving their social support, and adequate pensions, in turn, can improve the overall economic situation by increasing effective demand behalf the elderly.

That is why the necessary conditions for an effective policy of adaptation of the Belarusian society to the processes of demographic ageing are:

- development of a comprehensive strategy in this area;
- the establishment of a national coordinating body;
- conducting an integrated assessment of national programs that address the issues of demographic ageing and the results of implementing policies in this area.

To this end, it is proposed to develop state programs for:

- 1) preservation of health and an increase in life expectancy for all age groups of the population, including older age groups (persons in pre-retirement and early retirement ages);
- 2) increasing the employment opportunities for the elderly (vocational training for pensioners and pre-retirees, the use of flexible work schedules, tax incentives and subsidies for enterprises and organizations that employ older people, further raising the retirement age, and facilitating entrepreneurship opportunities for the elderly);
- 3) implementation of “lifelong education” on the basis of differentiated programs of secondary and higher professional education, short courses, schools of personal financial literacy. Carrying out such a policy will help to increase the material and psychological well-being of older people, to support their human potential for the benefit of economic development and the introduction of innovations;
- 4) healthy ageing and the prevention of non-communicable diseases, as well as the promotion of adequate nutrition for older persons; to facilitate access to water supply and sanitation facilities; on the prevention of alcohol abuse and the reduction of the use of tobacco products;
- 5) raising public awareness of abuse of the elderly, legal support for older victims and training personnel in identifying cases of abuse of the elderly;
- 6) support of public organizations of the elderly, which not only guarantees public attention to the problems faced by this group of the population, but will also contribute to the personal well-being of the elderly.

It should also be noted that in order to successfully solve society’s adaptation to the challenges of ageing in the long run, it is necessary to think about a successful trajectory in the labour market and the health of young modern generations.

The population of older ages is as diverse as any other age group. The cumulative demographic data for the country as a whole may hide significant differences related to gender, ethnicity, place of residence (urban or rural), economic status, health status and functional abilities, as well as the level of education and literacy.

Therefore, the most important condition for the effectiveness of the national policy is:

- 1) collection and analysis of disaggregated demographic data;
- 2) conducting research aimed at studying:
 - prospects for changing the sex and age structure of the population;
 - opportunities to reduce the demographic burden (changing social security parameters, tax incentives, flexible working hours, stimulating the work of older people, integrating intra-family transfers into the formal pension system);
 - the potential for increasing labour productivity (through technological innovation);
 - effective measures to improve the situation of older persons.

Given that poverty is measured not only by income and expenditure, but also by other indicators (lack of access to resources essential for individual and public welfare, for example, limited access to healthcare, water supply, canalization, subjective assessments of one's financial situation), indicators for all these parameters. This will ensure the development of programs for healthcare and healthy nutrition for older people, including subsidizing food, water, medicine, etc.

An effective policy of adapting the Belarusian society to the processes of demographic ageing will open up the

possibilities of an ageing society in economic development, participation in domestic work, in decision-making and the accumulation of social capital. Ageing is not a problem, it is a new way of life for the whole society.

The recommendations proposed above are based on the basic prescription, as recorded in the Guide to the National Implementation of the Madrid International Plan of Action on Ageing (2008) [6]:

"From a policy perspective, ageing must be regarded as a lifelong process that begins at birth. Age-adjusted policies and programmes that encourage workplace flexibility, lifelong learning, participation, and healthy lifestyles, especially during periods of transition (such as those occurring between childhood, youth, early adulthood, midlife and later life), can influence choices that have a cumulative impact. Clear priorities for old-age policies are in many ways represented by the challenges facing today's youth, who may have to reinvent themselves again and again in fast-changing societies, and who will need to cultivate healthy lifestyles, flexibility and foresight, continually upgrading their work skills and maintaining supportive social networks. An intergenerational approach to ageing is beneficial for society, providing an integrated policy framework and allowing the entire life trajectory to be considered in the context of policy analysis and evaluation. A society-wide phenomenon, ageing affects local and global patterns in areas as diverse as labour and capital markets, government pensions, social services, and traditional support systems".

DEMOGRAPHIC AGEING IN THE CONTEXT OF KEY INDICATORS

Main indicators: a brief description

Correct use of the system of indicators of ageing is crucial for analyzing the impact of demographic ageing processes on the sustainable development of the economy and corresponding policy correction.

We propose the system of indicators of population ageing in the context of sustainable development consists of 4 groups:

- 1) indicators of the ageing process,
- 2) indicators of the causes of ageing,
- 3) indicators of the effects of ageing on the economy,
- 4) indicators of the situation of the elderly and the situation of the future elderly (Table 1).

Table 1. The system of indicators of population ageing in the context of sustainable development: indicators of the process, indicators of causes, indicators of the impact on the economy, indicators of the situation of the elderly and the future elderly

Indicators of the ageing process	Indicators of causes of ageing	Indicators of influence on the economy	Indicators of the situation of elderly groups and the future elderly
The proportion of elderly people in the country's population	Life expectancy at older ages	Total Demographic Load Factor	GAWI – Global AgeWatch Index
Ageing index	Cohabitation ratio to old age	Young people (children) and elderly dependency ratios	The Active Ageing Index (AAI) for European countries
Depth of Ageing Index	Number of births	Potential support ratio	Type of household in which elderly people live
Sex ratio in the elderly population	Total fertility rate	Parent support ratio	Indicators for cities that are friendly to the elderly
The growth rate of the entire population, the elderly and very elderly groups of the population	Indicators of the age composition of emigrants and immigrants	Perspective elderly dependency ratio factor	Indicators of the situation of youth (level of education of youth, youth employment and unemployment, affordability of housing compared to income, health of young people)
Median age of the population		Support coefficient	Indicators of the situation of the population in the ages of 40–59 (the number of years in the education system, health, financial position)
Percentage of persons of senior able-bodied age in the able-bodied population		The first demographic dividend	
Prospective age		The second demographic dividend	
The proportion of the elderly given the prospective age		Contribution of the elderly to the care of children (in household time budgets)	

In the last third of the twentieth century, the so-called classical approach to the evaluation of demographic ageing [7], including indicators of the ageing process itself (the number and proportion of elderly population groups of different ages), the causes of ageing, the effects of ageing on the economy (demographic dependency ratio factors), the situation of the elder groups of the

population (economic activity and literacy) [8]. This group of indicators is used in the UN reports on the ageing of the world's population and now [9].

In the early XXI century, researchers proposed an additional set of indicators that enable more accurate reflection of demographic processes.

Thus, the process of population ageing and its impact on the economy was proposed to be analyzed through an estimate of prospective age [10]. According to this approach, the old age border is marked using mortality tables for the indicator of residual life expectancy. It is assumed that a population that has no more than 15 years to live can be considered old.

The prospective age is the age at which the population has no more than 15 years to live on average. With this approach, the prognosis of demographic ageing changes completely. For example, taking this indicator into account, it turns out that the proportion of the elderly population in Europe does not grow or grows very slowly.

Since 2017, a new indicator of the impact of ageing on the economy is also being calculated – **a promising factor for the demographic burden of the elderly** (the number of people of the age at which life expectancy does not exceed 15 years (prospective age), per 100 people aged from 20 to the prospective age).

By the 10th anniversary of the Madrid International Plan of Action in 2012 the Council of Europe proposed estimating the **AAI – Active Ageing Index** in the framework of the proclaimed policy of active ageing and solidarity of generations. It consists of 22 indicators in 4 conceptual sections of measuring active ageing: employment of the elderly; participation in public life; independent, healthy and safe lifestyle; opportunities and environment for elderly people [11]. The limitation of this index is the fact that it does not take into account the welfare of older people, and is calculated only for European countries.

The HelpAge International Group, with the support of the United Nations Population Fund, developed the **GAWI (Global AgeWatch Index)**, which consists of 4 sections: income security, health status, education and employment, good living conditions [12].

In 2015 the World Health Organization proposed key **indicators for cities that are friendly to the elderly**: equality; accessibility of the physical environment for hiking, travel, housing and leisure; involvement in social life (positive attitude towards the elderly in society, volunteer work, paid employment, access to information, social services and services for health, involvement in decision-making and socio-cultural activities) [13].

Since 2017, an interactive database on the distribution of the population of various socio-demographic groups by type of household in which people, including the elderly, live (**Living Arrangements Interactive Data**) [5], has been created within the UN framework.

To study the impact of population ageing on the economy, nowadays not only dependency is assessed, but also the first and second demographic dividends (and the associated **support ratio**) [14, 38]. These estimates require a fairly complex work with data (Appendix 1).

To develop an effective policy on demographic ageing, it is necessary to have data on economic, demographic and social indicators disaggregated by sex, age, place of residence.

The collection of data on the situation of the elderly should be improved to obtain reliable sex-disaggregated data in order to gain a deeper understanding:

- of gender aspects of ageing;
- of changes in family composition and family support systems;
- of the contribution of the elderly to the life of the family, community;
- the level of poverty of older people;
- access to basic social and healthcare services; the impact of urbanization and migration on older people;
- the situation of the elderly in emergency situations, etc. [15].

Given that poverty is measured not only by income and expenditure, but also by other indicators (limited access to healthcare, water supply, and lack of sanitation), indicators for all these parameters are needed. This will ensure the development of programs to support older people in terms of nutrition, water supply, medicines, medical care for the elderly, subsidizing food items.

The sex and age structure of the population of the Republic of Belarus

The proportion of the population aged 15–59 years has been changing rather insignificantly for a long time. Similar processes were observed for people over the age of 60. In the period from 1950 to 1990, the share of this population grew by only 4% (from 12.6 to 16.6%). Then, slow growth was replaced by a rapid increase in the proportion of the elderly population. If the first 4% were added over 40 years, the second – over 25 years (by 2015), the next 4% will be added in only 10 years – by 2025. The proportion of people over the age of 60 was 16.6% in 1990 and 20.3% in 2015 [16]. It is projected that in 2025 the share of this age category will be 28.6% [16]. Thus, according to forecasts, the ageing rate of the population of Belarus in 1990–2030. will increase by more than 2 times compared with 1950–1990 (Figure 5).

As of January 1, 2017, the majority of the population of the country are people of working age. In the able-bodied population, older age groups predominate. The median age of the population of Belarus will increase from 39.7 to 45.2 years. In cities, the proportion of the population aged 60 years and over is 19%, and in rural areas – 28%, with 18% of this age group being women (Figure 2).

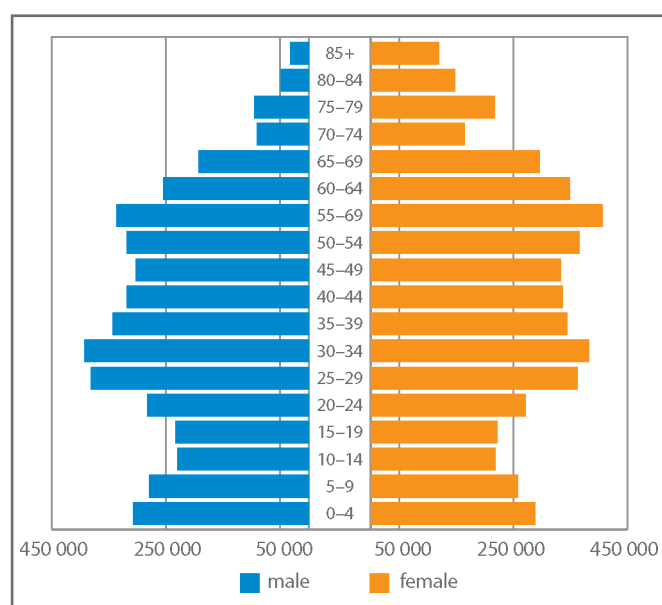


Figure 1. Sex and age structure of the population of Belarus as of 01.01.2017, persons

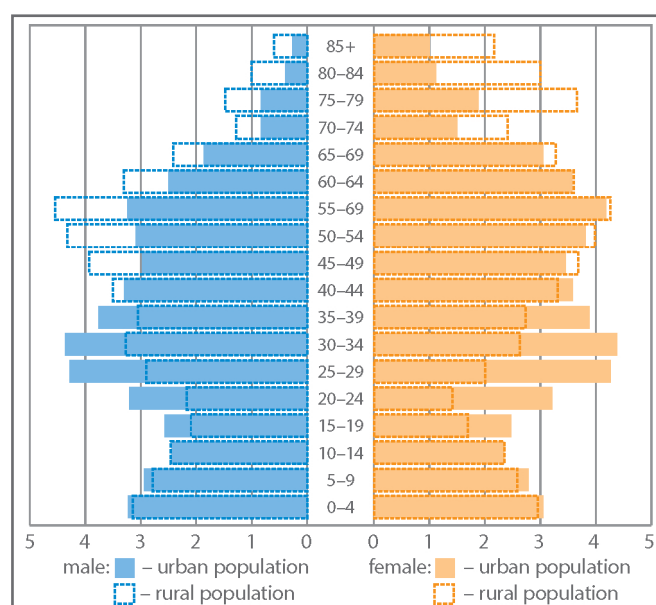


Figure 2. Sex and age structure of the urban and rural population of Belarus as of 01.01.2017, %

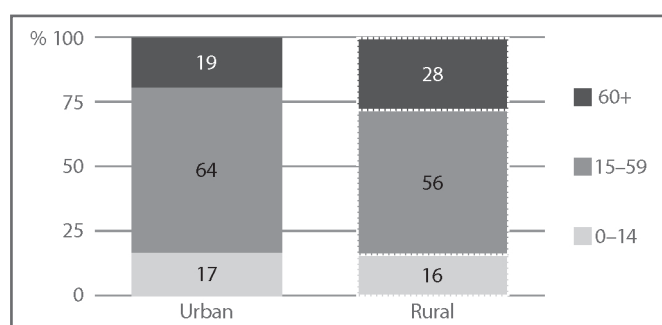


Figure 3. The population of Belarus by main age groups: urban/rural area in 2017, %

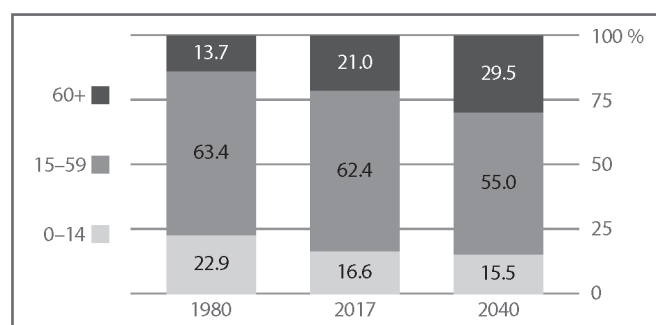


Figure 4. The population of Belarus by main age groups: yesterday, today, tomorrow, %

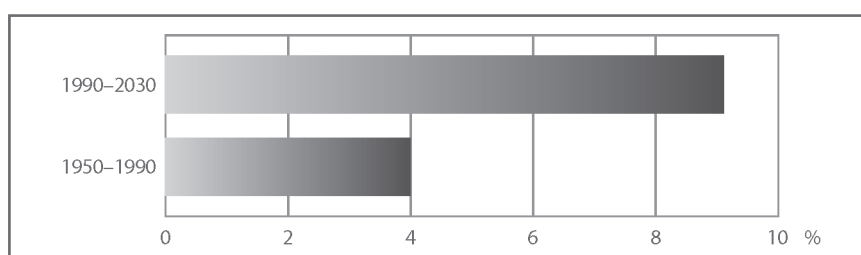


Figure 5. The rate of ageing of the population of Belarus (for the period of 40 years), %

The Republic of Belarus is first among the CIS countries in all indicators of ageing, ahead of Georgia and the Ukraine, but lags behind its neighbours – member-states of the European Union – Lithuania and Poland (Table 2).

As can be seen from table 3, the proportion of the elderly aged over 65 will grow from 14.7% in 2017 to 23% in 2040. But if we use the concept of perspective age, the proportion of elderly people in Belarus will not increase twofold (from 13.8% in 2013 to 26.7% in 2050), but by 4% – the proportion of people who do not have more than 15 years to live, will increase from 14.8 to 19.0% [42].

Because of the high mortality rate in the able-bodied and elderly, the proportion of the oldest (80+) is still not very high for both the entire population (less than 4%) and for the elderly (25%).

Analysis of the dynamics of the sex and age structure of the Republic of Belarus by a number of indices allows concluding that the population of the country is rapidly ageing. At the moment, the median age of the population is 39.7 years. By 2040, there will be 1.5 times more elderly people than children.

Table 2. Indicators of ageing in the CIS member states, Georgia, Lithuania, Poland, Ukraine

Country, date, source	Proportion of the population aged 60+, %	Proportion of elderly (65 years and older), %	Median age of the population	Ageing index number of persons aged 65 and over per 100 children under 15 years of age	The share of the oldest (80 years and older), %	The index of the depth of ageing (80+/65+)	The number of women per 100 men aged 65 and over
Belarus, 01.01.2017, National Statistics	21.0	14.7	39.7	88	3.6	0.25	208
Russia, 01.01.2017, National Statistics	20.7	14.2	39.1	82	3.2	0.22	206
Moldova, 2014, (census) National Statistics	17.3	10.9	36.0	63	2.1	0.19	168
Armenia, 01.01.2017, National Statistics	16.8	11.2	34.6	56	2.7	0.24	153
Kazakhstan, 01.01.2017, National Statistics	11.0	7.0	30.0	26	1.2	0.17	180
Kyrgyzstan, 01.01.2016, National Statistics	7.1	4.4	25.2	14	0.9	0.21	154
Azerbaijan, 01.01.2015, National Statistics	9.0	6.0	30.8	27	1.2	0.19	139
Uzbekistan, 2010–2017, UN	7.6	4.5	26.3	16	9.9	0.22	120 ¹
Turkmenistan, 2010–2017, UN	7.2	4.3	25.6	14	0.9	0.20	140 ¹
Tajikistan, 2010–2017, UN	5.8	3.5	22.4	10	0.8	0.21	112 ¹
Lithuania, 2010–2017, UN	25.3	19.0	42.7	128	5.5	0.29	180 ¹
Poland, 2010–2017, UN	23.9	16.8	39.7	113	4.3	0.26	140 ¹
Georgia, 2010–2017, UN	20.8	14.9	38.0	77	3.6	0.25	150 ¹
Ukraine, 01.01.2016, National Statistics	20.2	13.9	39.5	89	3.5	0.25	201

Source: calculations based on data from national statistical authorities (National Statistics) and the UN.

¹ – the number of women per 100 men aged 60 years and over. Note: Turkmenistan is an associated member of the CIS.

Table 3. The forecast of the dynamics of demographic ageing by main indicators in 2017 and 2040

Indicators	2017	2040
The proportion of elderly people in the population (65+)	14.7	23.0
The proportion of very elderly people in the population (80+)	3.66	6.75
The index of the depth of ageing (80+/65+)	0.25	0.29
Ageing index (65+/0–15)	88	149
Average annual growth rate of the elderly population (65+)	0.5 ¹	1.0 ²
Median age of the population	39.7	45.2
Sex ratio in the elderly age (women per 100 men)	208	183
The proportion of the elderly given the prospective age	14.8 ³	19.0 ⁴

Source: calculated according to Belstat, the Ministry of Economy of the Republic of Belarus, the Central Statistical Office of Sweden, the United Nations, Vienna Institute of Demography – Austrian Academy of Sciences,

¹ – in 2010–2015, ² – in 2045–2050, ³ – 2013, ⁴ – 2050.

The situation of the elderly

The level of employment in the elderly age is changing: employment is increasing among the “young” elderly at the age of 55–59 years and decreasing in the older group of the elderly population (65–69 years) (Figure 6).

From 2012 to 2015 40.6% of the population aged 55–64 are involved in paid employment [23]. In 2015, people older than the working age accounted for 7.3% of workers [17].

Education. According to the population census of 2009, 49% of the population of Belarus at the age of 60 and older had completed the second stage of secondary education or have higher professional education. The proportion of older people aged 55 to 69 years who have completed upper secondary education or have received higher professional education is 56% [18].

Material well-being. 93.5% of the country's population aged 65 and over receive a pension. The income level of the elderly at the age of 60 years and older is 73% of the average income of the rest of the population. 18.4% of the elderly at the age of 60 years and older have income less than the median for the country [23]. The absence of risk of poverty and severe material deprivation persist in the majority of the elderly population aged 65 years and over (97% of the population). The relative median equivalent disposable income of the population aged 65 and over grew from 2005 to 2015. However, in women it grew weaker, was and remains lower than in men (Figure 7).

Health and welfare. In 2016, according to the National Statistical Committee of the Republic of Belarus, life expectancy at birth is 69.4 years for men, 79.4 years for women. This is a significant increase compared to 2013 (66.4 and 77.0). Life expectancy at age 60 is 22.1 years for women and 15.8 years for men [19].

The increase in the life expectancy of men in 2000–2016 was to the greatest extent due to the reduction in mortality in older working age, and at retirement age in women. Despite the increase in life expectancy in Belarus, there is still a significant gap with the countries of “old” Europe, especially in pre-retirement and young retirement ages.

At the beginning of 2017, 9.4% of men age 60 and older believed that they led a healthy lifestyle; 89.9% – that it is necessary to adhere to a healthy lifestyle, but did not adhere to it; 0.7% – that there is no need to lead a healthy lifestyle and did not lead a healthy lifestyle. Among women aged 60 and over, 8.8% believed that they lead a healthy lifestyle; 90.2% – that it is necessary to adhere to a healthy lifestyle, but did not adhere to it; there is no need to lead a healthy lifestyle, and 1% did not lead a healthy lifestyle [20]. Access to healthcare and dental services among people aged 55 years and older is almost 86% (2015), with men – more than 89%, and women – less than 84%.

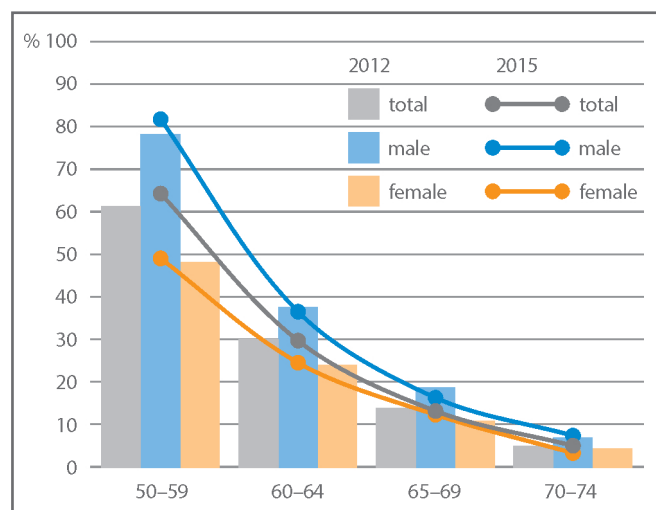


Figure 6. The level of employment among the elderly, women and men (2012, 2015)

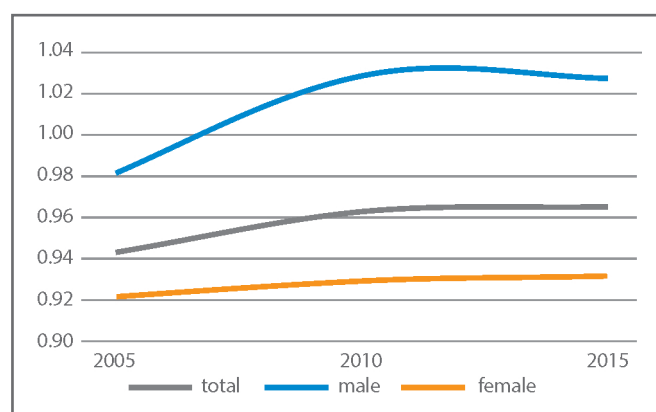


Figure 7. The relative median income of the elderly at the age of 65 years and over (ratio of the median equivalent disposable income of the population aged 65 and over to the median equivalent disposable income of the population under the age of 65)

The proportion of people aged 55 years and over who engage in physical exercise or sports 5 or more days a week is 9% for women and less than 6% for men. At the same time, the involvement of the elderly in physical activity grew in 2006–2010 and decreased in 2010–2015, especially in men (Figure 8).

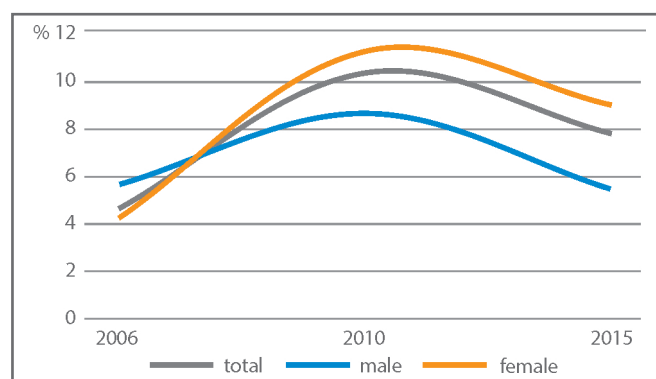


Figure 8. Percentage of people aged 55 years and over who are engaged in exercise or sports 5 or more days a week, %

Social relations, security and accessibility of infrastructure.

84 % of elderly people aged 50 and over can communicate with relatives and friends when they wish. 61% feel safe during night walks around the city or near their home. 64% are satisfied with the freedom of choice in their lives. 62% are satisfied with the local transport infrastructure [23].

The proportion of people aged 55 years or more who meet with friends, relatives or colleagues (informally/ beyond working time) at least once a week is 66% for men and 73% for women [20].

In 2016, 1,002 women and 1,546 men contracted a marriage at old age, while in 774 cases both of them were married at the age of 60 years and older [21].

Older women spend almost twice as much time on caring for underage children, while older men are more active in public activities, which makes their lives more saturated outside the household (Figure 9).

The proportion of people aged 55 to 74 who use the Internet at least once a week has grown in both men and women from 2011 to 2015, and was 23% in women and 30% in men (Figure 10).

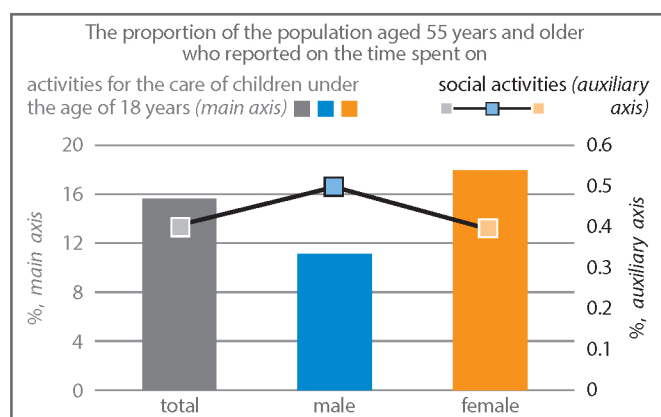


Figure 9. Public contribution of the elderly

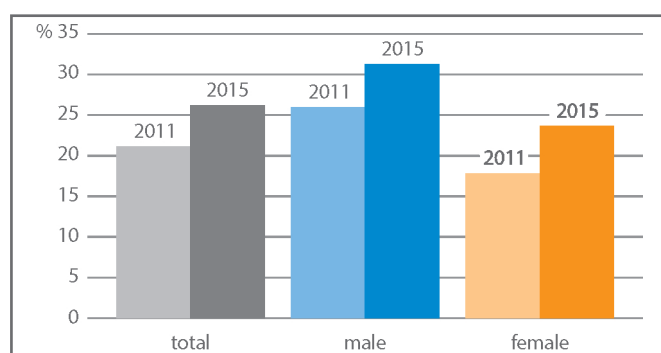


Figure 10. The proportion of people aged 55 to 74 who use the Internet at least once a week

Structure of households. The proportion of people aged 75 years or more living alone (in single-person households) or with a partner (two adults without dependent children) is over 20% for men and almost 50% for women. Regardless of children and other relatives, an average just over 40% of very old people live in Belarus.

61% of women and 65% of men live independently – alone or with a partner. Women live mostly alone (38%) or with children (33%), less often – with a partner (23%). Men live predominantly with a partner (almost 50%) or with children (30%), less often single (16%) (Figure 11). Women are twice more likely to live in single-person households [4]. They may have unmet demand for material and physical support from the outside.

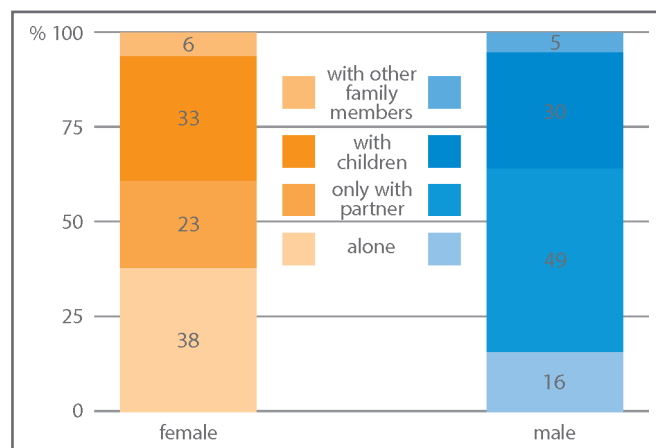


Figure 11. Accommodation of elderly people in different types of households (%), IPUMS 2009

Social activities and participation in the life of relatives.

Based on the results of the survey conducted in the Republic of Belarus in 2014–2015, inquiries into the use of the daily fund of time by the population, older citizens over the working age spend: 12.4% of the daily fund of time on caring for their grandchildren and motion related to the household and childcare, 20.8% of time on gardening and pet care, 55.3% on reading of the media, 12, 1% on communication [22].

Thus, for the most part, older people spend their time on themselves, their families, their household; they take minimal participation in public life. 65.8% of the population aged 50 and older believe that their lives have a purpose (compared to the population aged 35–49 who consider the same) [23].

Analysis of the processes of demographic ageing in the context of the main international indicators enables concluding that in Belarus:

- the situation of the elderly is relatively provided for and secure;
- people over 60 are distinguished by a high level of education;
- the employment rate in the first 5 years after retirement is almost 50%;
- the main problem in the situation of the elderly is gender inequality in access to free time, decent income, a high risk of loneliness in older women;
- for the most part, older people spend their time on themselves, their families, their household; and take minimal participation in public life.

DEMOGRAPHIC CAUSES AND SOCIO-ECONOMIC CHALLENGES OF AGEING

Population ageing can from a demographic perspective be caused by three groups of factors:

- low fertility;
- increased life expectancy in the elderly age;
- migration processes that in the short-term can change the ratio of age contingents due to outflow of young people or inflow of older people, and in the long-term because of the influx of migrants of the average age, which first increase the number of able-bodied population, and then, several decades later, accelerate the number of population of older ages at an elevated rate.

A decrease in fertility. The total fertility rate declined in the Republic of Belarus in the 1990s, contributing to the ageing of the population. Since the mid-2000s this indicator began to grow. However, the level of simple reproduction – an average of 2.1 children per woman has not yet been achieved (Figure 12).

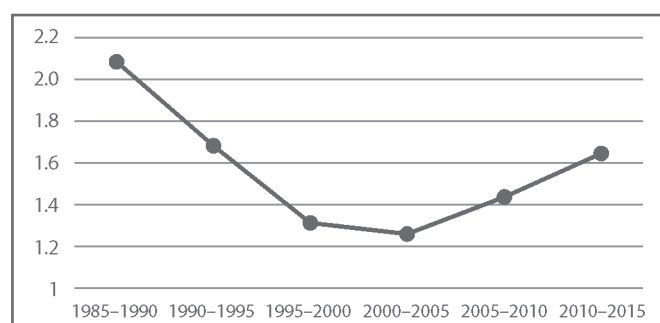


Figure 12. Total fertility rate, 1985–2015, number of children per woman

In recent years, the number of births in the country has increased (Figure 13), but the persistence of a low level of the total fertility rate with an unfavorable age structure (a low number of women in adolescent and young reproductive age) may lead to a decrease in the number of births in the future. In Belarus, young women aged 20–34 provide 84% of all births (the main contribution is made by 25–29-year-old women).

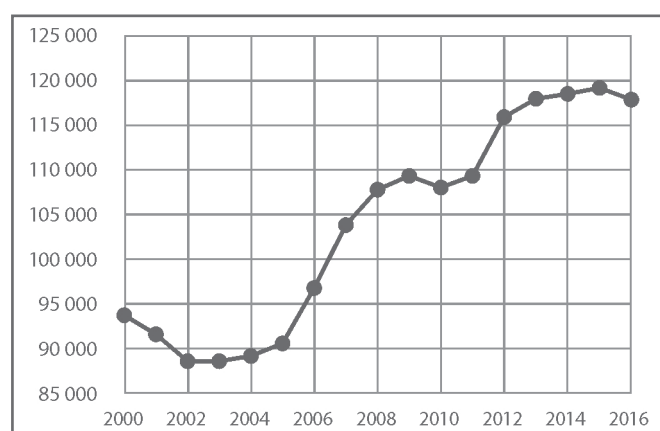


Figure 13. The dynamics of the number of births in the Republic of Belarus in 2000–2016

After 15 years there will be 1.5 times fewer women aged 20–34 years, and 1.7 times less women aged 25–29 years. Therefore, even if the number of births per woman does not decrease on average, the number of births as a whole will decrease. Therefore, it is important to continue the policy of supporting young families, creating all the conditions for the birth of the desired number of children, in order to mitigate the projected decline in the number of births in the country and the ageing of the population as a result of this reason.

Increased life expectancy in the elderly age. The increase in the proportion of the elderly population due to the increase in life expectancy in the elderly in the country began only in the early 2000s.⁴ Figures 14–17 show the dynamics of life expectancy in the elderly (50, 60, 70 and 80 years) in the Republic of Belarus in comparison with similar processes in Germany, Sweden, and Russia. From 2002 to 2014 life expectancy in Belarus increased by 3.3 years in 50-year-old women and by 3.2 years in 50-year-old men, by 2.7 years among 60-year-old women and 2.1 years in 60-year-old men. 70- and 80-year-old women and men began to live longer by 1.9 (f) and 1.3 (m) years and 1.1 (f) and 0.6 (m) years respectively.

At all ages, for women and men, the difference in life expectancy with the countries of “old” Europe (the maximum lag was observed in the late 1990s and early 2000s) is declining, but at a slower pace and to a greater extent in women. For 50-year-old Belarusian women the gap, for example, with Swedish women was 3.4 years in 1990, in 2002 – 6.2 years, in 2014 – 4.6 years. In men, respectively, – 5; 10.4 and 9.6 years. At 60 years, the life expectancy of women in Belarus is less by 3; 5.2 and 4 years, respectively, for men – 3.3; 7.5 and 7.5 years. In 70- and 80-year-old women and men, the gap in life expectancy with Western European peers is less (3–4 years and 2 years), there is almost no gender gap, but there is almost no narrowing of the gap (improvements at these ages are comparable in these countries).

The contribution of the decrease in mortality of older age groups to the ageing of the population can be determined on the basis of the decomposition of the growth of life expectancy by age [24]. An analysis shows that among women between 1990–2000 a positive

⁴ The survival rate to the age of 60 years in 2016 for men was 0.97, for women – 0.99 (Belstat).

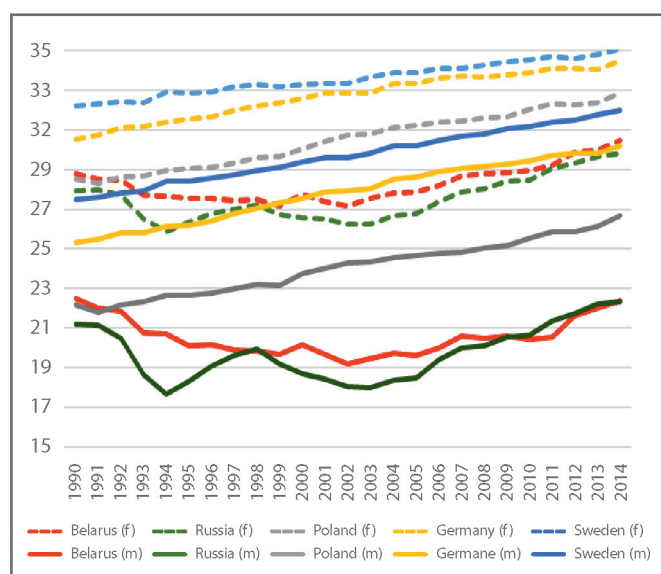


Figure 14. The dynamics of life expectancy in the Republic of Belarus at the age of 50 years in comparison with the countries of Europe and the Russian Federation

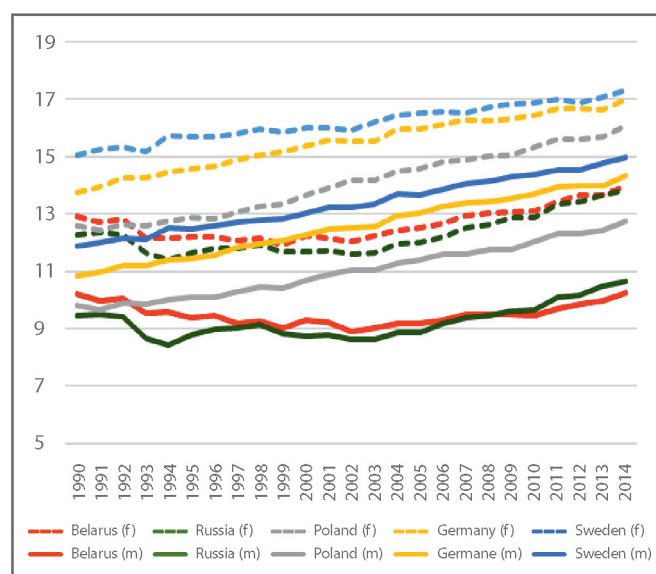


Figure 16. The dynamics of life expectancy in the Republic of Belarus at the age of 70 years in comparison with the countries of Europe and the Russian Federation

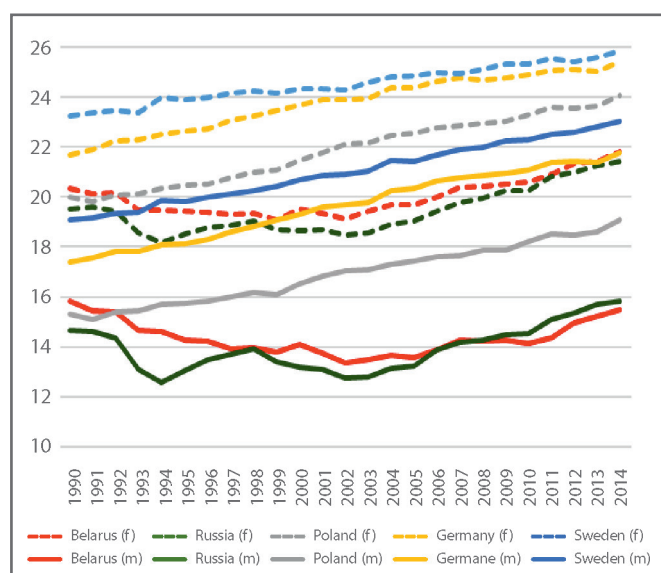


Figure 15. The dynamics of life expectancy in the Republic of Belarus at the age of 60 years in comparison with the countries of Europe and the Russian Federation

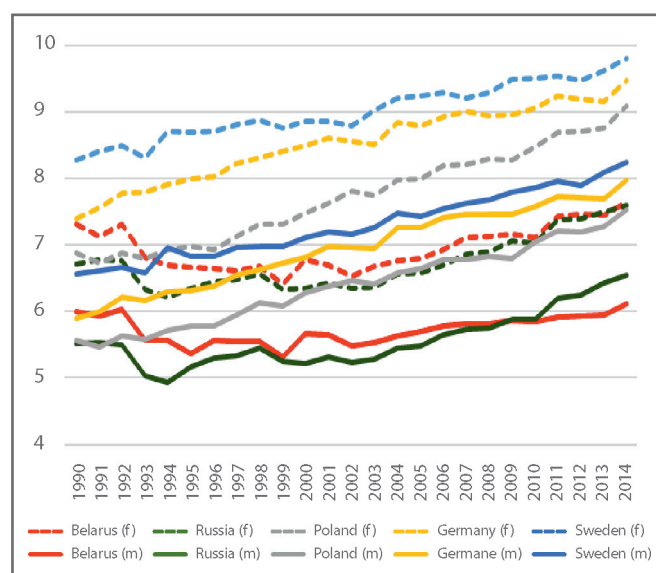


Figure 17. The dynamics of life expectancy in the Republic of Belarus at the age of 80 years in comparison with the countries of Europe and the Russian Federation

increase was observed only in the working age. At all other ages, the increase in mortality led to a reduction in life expectancy, with the decrease going up as the age increases. Between 2000 and 2016 a positive dynamic of life expectancy at birth was provided mainly by age 45+, with the age group of 60–74 years giving the greatest increase (Figure 18).

In men, the reduction in life expectancy between 1990–2000 was mainly on the age interval of 45–74 years, and the age of 75+ was hardly affected by this fall at all. The maximum increase in life expectancy between 1990 and 2016 was among the age group of 60–74 years (Figure 19).

The data presented allow us to conclude that the ageing of the female population “from above” is more pronounced than in men who have a higher mortality rate in older working and retirement ages that hinders this process.

The increase in the life expectancy of men in 2000–2016 was to the greatest extent due to a decrease in mortality in the older working age, for women – in the average retirement age. It is important to investigate why the increase in life expectancy is less dynamic in women in pre-retirement and early retirement ages, and in men in older retirement ages.

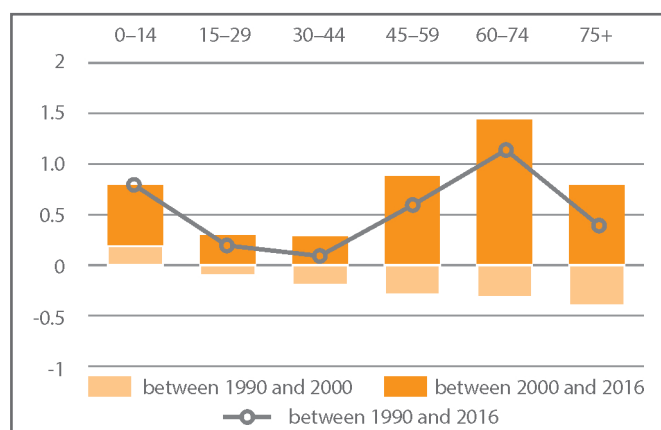


Figure 18. The contribution of age groups to changes in life expectancy at birth of women in 1990–2000 and 2000–2016

Influence of migration processes. Migration growth is the third factor that can contribute to the ageing of the population. In the Republic of Belarus, the sex-age structure of migrants varies from year to year (Figure 20). But the absolute values of migration growth in the country are insignificant – about 9 thousand people a year on average during 2000–2015⁵ and a little more than 1 thousand people on average during 1990–1999. For example, in 2016, 3,641 people over the working age arrived (men aged 60 and older, women aged 55 and older) [19]. The influx of young migrants is comparable and also small. We can conclude that there is no effect of migration on the ageing of the population in the Republic of Belarus.

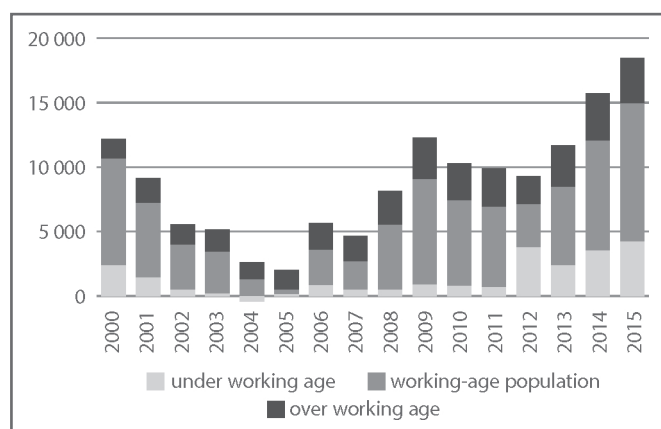


Figure 20. Net Migration, 2000–2015, number of people

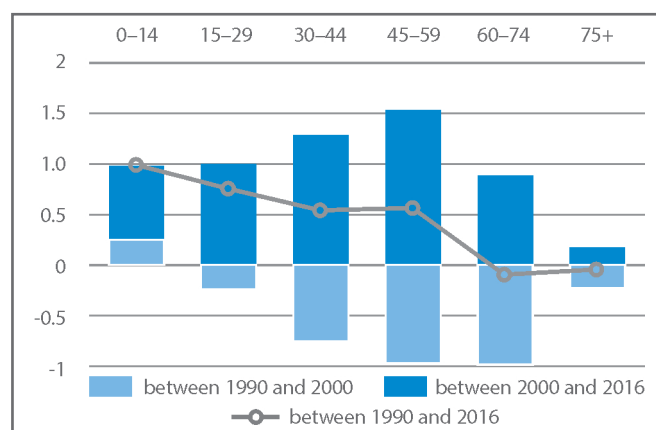


Figure 19. The contribution of age groups to changes in life expectancy at birth of men in 1990–2000 and 2000–2016

Thus, one of the main reasons for the ageing of the population in the Republic of Belarus is a decrease in the birth rate. The policy of supporting young families in the birth of the desired number of children is of particular importance in mitigating the fall in the birth rate. At the same time, an important role is played by the growth of life expectancy in the elderly. The implementation of measures aimed at accelerating this dynamic will lead to better health, quality of life and increased contribution of older people to the economy. Since the migration growth in the country is insignificant, migration did not have a significant impact on the processes of demographic ageing. Nevertheless, it is advisable to think about measures to promote the re-emigration of highly qualified specialists who have received education in foreign higher educational institutions.

Measures to overcome the causes of demographic ageing: stimulation of fertility and increasing the duration of a healthy life certainly give the desired effect, but, as a rule, in the long run. In order to adopt national programs to the processes of ageing, it is important to take into account a number of accompanying changes:

- an increase in the demographic dependency;
- reduction of the innovative potential of the economy;
- changes in the situation of the elderly, entailing the risk of material and social ill-being.

⁵ Interactive information-analytical system for distribution of official statistical information <http://dataportal.belstat.gov.by/> – data designer. (<http://dataportal.belstat.gov.by/AggregatedDb>)

Demographic dependency growth. The overall demographic dependency started to increase in Belarus in 2009, after a brief period of the “demographic window” 2007–2008, when it reached a minimum of 615 disabled for 1000 people of the working age. At the same time in the urban population the minimum was reached in 2007 (527 people), and in the rural – in 2009 (871). In general, the period of the second demographic dividend was very short in the country, less than 20 years – from the beginning of the 1990s until the end of the 2000s. The growth of the economy due to the increase in the proportion of the able-bodied population and the release of resources for the development of human capital were insignificant.

At present, the level of demographic dependency reflects the features of the age structure. In the rural population, as of January 1, 2017, there were 989 disabled people per 1000 able-bodied people, 2/3 of whom were older than the able-bodied age group. In the urban population of 692 non-working persons per 1000 able-bodied people slightly more than half (393 people) were of older age.

According to the forecasts, the children dependence ratio will not change significantly, and the load of the elderly will grow steadily (Figure 21).

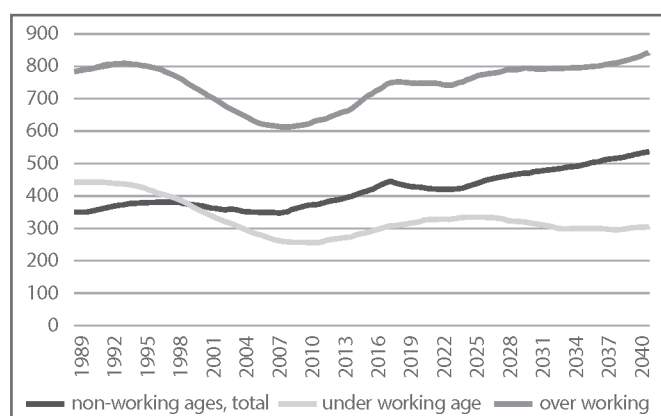


Figure 21. The dynamics of age dependency ratios in the Republic of Belarus:

overall, children and the elderly per 1000 people of the working age (women aged 16–54 years, men aged 16–59 years)

Support factor for parents (number of people aged 85 and over per 100 people aged 50–64 years) in 2017 will be 7.6, and in 2040 – 13. The potential support ratio (the number of people aged 15–64 per person at the age of 65 years old) in 2017 will be 4.6 people, in 2040 – 2.7 people.

Estimates of the prospective elderly dependency ratio factor in Belarus look more positive. If the usual elderly dependency ratio grows from 2015 to 2050 from 22.2 to 43.8 elderly persons per 100 people aged 20–64 years, the prospective dependency ratio increases only from 20.2 to 26.9 persons per 100 people aged from 20 years to the prospective age (Table 4).

Table 4. Demographic dependency in Belarus [4]

Types of Demographic dependency	Number of dependents per 100 able-bodied people by year			
	1980	2015	2030	2050
Overall dependency ratio (0–19 and 65+ / 20–64)	73.5	54.6	74.5	83.6
Elderly dependence ratio (65+ / 20–64)	18.7	22.2	34.5	43.8
Prospective elderly dependency ratio ($X+ / 20-X$, where X is the age at which the population has 15 years to live)	18.9	20.2	26.4	26.9

Increasing the demographic dependence can trigger growth of healthcare education and social support expenditure, decrease internal household inter-generational transfers.

Influence on the innovative potential of the economy.

In a number of studies it was proved that age influences the innovation potential and entrepreneurial activity of a person. In this regard, mention may be made of Benjamin Jones [25] who, on the basis of an analysis of the age of Nobel laureates and the age of authors of great inventions at the time of discovery, demonstrated that the peak of productivity is at the age of 40 years, with a rather large dispersion from 25 to 55 years. The influence of the age of entrepreneurs on the creation of new firms is proved by M. Levesque and M. Minniti [26]. The Global Entrepreneurship Monitoring Report [27] highlights 2 demographic characteristics that affect the likelihood of entrepreneurial activity – gender and age. In particular, the report refers to the age of entrepreneurial (or innovative, if we consider business activity as a component of innovation activity) activity: the most innovative age is 25–34, followed by 35–44.

The population of the Republic of Belarus at the age of 25–44 will be reduced by almost a third before 2040. This can significantly affect the innovative potential of the economy (Figure 22). The share of the population at the ages of 25–44 will decrease from 30 to 22%.

Ageing of the able-bodied population will increase the share of experienced workers and reduce the share of those most mobile and most included in the system of professional development of workers. All this has many-sided consequences for the economy and society. If in 2017 the population of Belarus at the age of 45–59 years was 35% of the population aged 15–59, in 2040 the senior group of the able-bodied population will be 40%. The share of the population aged 30–44 was 36% whereas by the forecast to 2040 that share is 28%.

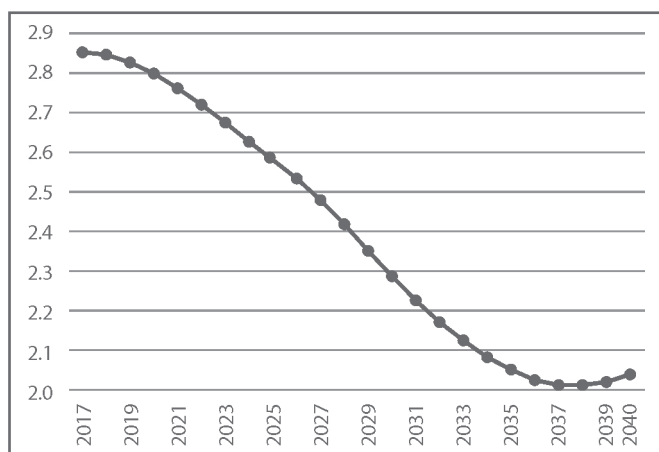


Figure 22. Population at the age of 25–44 years (2017–2040), million persons

The ageing able-bodied population can cause a decline in labour productivity in workplaces where physical labour is used. In the ageing society, the problem of youth unemployment and rotation of personnel in the generation section is also exacerbated.

The growing difference between life expectancy and retirement age threatens the sustainability of social protection systems. Modern Belarus is a social state with a well-developed system of social support, including the elderly. As of January 1, 2017, every fourth Belarusian (2.4 million people, or 25.3%) was above the working age. Of 2,619.3 thousand pensioners, 2,158.4 thousand people receive a pension by age. Pension expenditure of the republican budget (all pensioners) in 2017 amounted to 765.8 million Belarusian rubles. For comparison: healthcare expenditure (entire population) amounted to 878.8 million Belarusian rubles. The number of employed in the economy, per pensioner, fell from 1.8 to 1.6 people in the short period from 2010 to 2016.

Change in the situation of older people, which may entail the risk of material and social ill-being in society.

1. Gender imbalance and changes in the structure of households. The main problem in the situation of older people is gender inequality in access to free time, decent income, a high risk of loneliness in older women. The elderly are represented by women to a greater extent. The reason, as already noted, is the higher mortality of men in the working age. The predominance of women in Belarus (1.8 times higher than men) begins after 60 years of age (Figure 23).

In the short term, the share of households with single people will increase. Most of them will be represented by single, elderly women. This is not only a problem of loneliness (single living), but also a problem of physical weakness and lack of support.

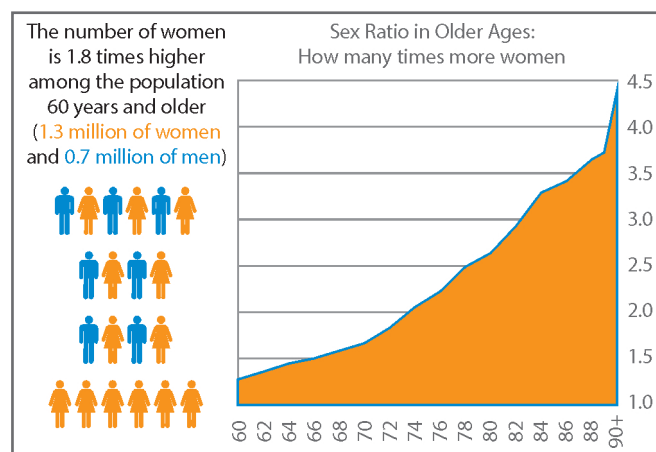


Figure 23. Sex ratio at age 60+

- 2. Economic dependence** (lack of work, sufficient income combined with a decrease in the level of social security) of the elderly from the economically and socially active population, a decrease in competitiveness in the labor market in pre-retirement and retirement ages may lead to the elderly being in a vulnerable and unequal position, will become victims of discrimination and abuse. Urbanization and increasing labour mobility in many cases provoke the isolation of elder people, which in turn makes them vulnerable to exploitation and violence.
- 3. Health and enabling environment.** Ageing is characterized by a decrease in adaptability to environmental challenges and changes in the internal environment of the body in connection with a decrease in the life activities of the body. The need to increase the physiological resource of a person and healthy longevity is one of the most pressing challenges of an "ageing society". Although genetics and lifestyle play an important role in determining the state of human health, economic and social factors are also important: income, nutrition, social status, level of healthcare, care, the course of illness among the elderly. Therefore, priority is given to the prevention and treatment of infectious and chronic diseases as age, dementia, and emotional disorders increase. A serious task is the development of effective systems and high standards of long-term care. The urban environment, formed in times of predominance of the working-age population, does not meet the needs of the growing number of older people.
- 4. Social activities and participation in the life of relatives.** Voluntary participation in the life of relatives (children, grandchildren and great-grandchildren, other relatives) and participation in community life at the level of local communities is an important component of a full life and active longevity. Older people, even if they do not work, remain full members of society, capable of taking both passive and active participation in the political life of the country.

Therefore, their problems should be considered in the context of the development of society as a whole and with the participation of these people themselves, and not within the inevitable burden of “state custody”.

5. **Perception of age.** At present, the perception of old age as a period characterized only by losses, fading, sickness, suffering and loneliness prevails in society. These unreasonable negative stereotypes prevail in the media and influence public policy, intergenerational links and the behavior of individuals, as well as the elderly people’s perception of themselves. Often these stereotypes provoke social isolation of older people.

Overcoming negative changes in the situation of older people is one of the most important tasks of the national socio-economic policy. At the same time, active involvement of the older generation in the economy is one of the most important conditions for sustainable development. Healthy older people can work longer, compensating for the shortage of labour associated with the decline in fertility. And their experience and knowledge are in many cases an invaluable professional resource.

This resource will begin to “work” only if the society as a whole realizes that:

- social and economic policies of the state can not fail to take into account the growing life expectancy;
- the category “non-working age” needs to be radically revised;
- citizens over 60 years of age are unclaimed potential, not a “dependency”;
- the identity of the concepts “ageing” and “disability” should be a thing of the past.

An effective policy of adapting the Belarusian society to the processes of demographic ageing will open up the opportunities of an ageing society in economic development, participation in domestic work, political participation and the accumulation of social capital [28]. Older people work in the formal and informal sectors of the labour market; can increase labour productivity in individual industries; pay taxes; consume products and services, activating domestic demand; transfer material resources to their children and grandchildren (sometimes being the only support); create demand for new information technologies in medicine, care, maintenance of the household, social support and communications, leisure; affect the development of new forms of consumption, smart homes and smart cities.

It is difficult to overestimate the contribution of the elderly, especially grandmothers, to helping to care for grandchildren and great-grandchildren, in supporting the livelihoods of households. The emancipation of young women in the twentieth century was largely on the shoulders of grandmothers.

With the development of democracy, older people play an increasing role in social and economic policy, as their share increases, their interests often do not coincide with the interests of the other part of society (growth of pensions and medical expenses against rising costs of education and support for families with children); they are more active in the elections. All this necessitates a dialogue between generations for the sake of the solidarity of generations.

Solidarity, cooperation, trust, shared values, peaceful coexistence, preservation of historical memory and cultural traditions can be based on the experience and wisdom of the elderly.

Recognition and activation of these opportunities of an ageing society is the basis for sustainable development of society.

AGEING POLICY: INTERNATIONAL PRINCIPLES AND NATIONAL PRIORITIES

“...many countries have made great strides in implementing new policies, strategies, plans and laws on ageing, but much remains to be done... to unlock the potential of our ageing world” [29].

The Sustainable Development Goals (2015–2030) are a guide to the formulation of ageing policies. The elimination of hunger and poverty, decent work, healthcare, the provision of high-quality education, the reduction of inequality and the development of gender equality, partnership and decent living conditions – all of these have a direct bearing on the situation of older people. Both clean water and affordable energy, sustainability of human settlements’ development and preservation of ecosystems, and the maintenance of peace are the directions of development, without which it is impossible to improve the health and well-being of the elderly.

Strategic foundations of activities aimed at increasing the role of older people, prolonging their active participation in society, preserving health, ensuring a decent level of income and security, are proposed in the policy documents of the UN, the World Health Organization, the International Labor Organization and others. The most important of these should be mentioned:

- Recommendation No. 162 of the International Labor Organization on “Older Workers” adopted by the 66th session of the General Conference of the International Labor Organization on June 4, 1980;
- The Vienna International Plan of Action on Ageing, adopted by the World Assembly on the Issues of Ageing (1982) and endorsed by the UN General Assembly in resolution 37/51 of December 3, 1982;
- The Madrid International Plan of Action adopted at the Second World Assembly on Ageing (2002);
- The United Nations Principles for older persons, adopted by the United Nations General Assembly on the 16th of December 1991;
- The Declaration on Ageing, approved by the UN General Assembly (1992);
- The Charter of Older Persons, adopted by the Inter-parliamentary Assembly of the States members of the Commonwealth of Independent States on June 15, 1998;
- Guide to the National Implementation of the Madrid International Plan of Action on Ageing (2008);
- The global strategy and action plan on ageing and health 2016–2020: towards a world in which everyone can live a long and healthy life, adopted by the 69th session of the World Health Organization.

The Madrid International Plan of Action on Ageing is fundamental to the international community. The document outlines the following directions for developing and implementing policies in this area:

- 1) **Elderly people and development:** work and labour; migration; poverty reduction; social protection (including social insurance and social assistance); knowledge, education and professional training; emergency response/disaster risk reduction.
- 2) **Health and welfare in the old age:** healthy ageing and non-communicable diseases; universal and equal access to healthcare services; elderly people and HIV/AIDS; training of healthcare professionals; mental health; disability; food.
- 3) **Enabling an enabling environment:** living conditions; care and support of persons providing assistance; violence, rights and discrimination by age; the image of the elderly, the relationship between generations and participation.

The UNECE Ministerial Conference on Ageing (September 2002) adopted the Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing (MIPAA), which sets out the priorities (commitments) of the policy on ageing [30]:

1.	Ensure organic reflection of ageing in all areas of policy so as to bring society and the economy in harmony with demographic shifts, and to build an accessible society for all ages.
2.	Ensure integration and participation of older persons in society.
3.	To promote sustainable and equitable economic growth in response to population ageing.
4.	To adjust social protection systems in response to demographic changes and their social and economic consequences.
5.	To enable labour markets to respond to the economic and social consequences of population ageing.
6.	Promote lifelong learning and adapt the education system to changing economic, social and demographic conditions.
7.	Ensure quality of life at all ages and maintain independent living.
8.	Mainstream a gender approach.
9.	To support families who provide care for older persons and promote intergenerational and intra-generational solidarity among their members.
10.	To promote the implementation and follow-up of the regional implementation strategy through regional cooperation.

In 2008, in the already mentioned Guide to the Implementation of the Madrid International Plan of Action on Ageing at the national level, a **framework** was proposed for the development of appropriate policies:

- *appeal to all areas of public policy*: not only to those that directly affect older persons;
- *recognition of the fact that older people are part of different groups of society* and that the policy towards these groups affects, among other things, the elderly – this must be taken into account when formulating strategies that ensure the cohesion of generations;
- *partnerships with civil society groups*, including organizations of older persons, women's organizations, academia, research funds, community-based organizations, including caregivers, and the private sector, to help build capacity on ageing;
- *effective use of existing data and other empirical data in the development, evaluation and implementation of policies*, support for comprehensive, diversified and specialized research activity on ageing;
- *overcoming discrimination against older persons* so that they are not at a disadvantage every time. This parameter is aimed at integrating older people and creating an enabling environment for them;
- *elimination of negative attitudes and stereotypes associated with elderly people* (it is necessary to consider the ageing of the population as a natural and positive development result, to favorably and respectfully treat the participation of older people in various fields of activity (including production activities)), to recognize the potential benefits arising from their wisdom and experience;
- *gender mainstreaming* in all policies on ageing, and special attention to the issue of discrimination based on gender and age.

The UN General Assembly recommends that governments focus on identifying those national priorities that are “realistic, sustainable, feasible and have the greatest likelihood of being achieved in the years ahead” and also suggested “to develop targets and indicators to measure progress in the implementation process”.

Particular attention in the UN documents on population ageing is devoted to the encouragement of member states to build the potential required to implement the Madrid Plan of Action. In this connection it is recommended, first of all:

- to strengthen the institutional framework for the development and implementation of appropriate policies,
- to intensify scientific research on issues of demographic ageing,
- improve data collection and analysis processes,
- provide training of qualified specialists,
- widely inform the population about the issues of ageing and the importance of the work being done.

The Republic of Belarus has acceded to the Madrid Plan on Ageing and has committed itself to pursuing policies aimed at increasing the participation of older persons, as full citizens, in the life of society, guaranteeing their right to a safe and dignified old age.

In order to implement the MIPAA in the Republic of Belarus, efforts are being made to:

- ensuring the social integration of older people, as well as strengthening their health and family well-being;
- improvement of the pension system with a view to its sustainable financing;
- ensuring the growth of life expectancy of the population;
- increase economic activity and welfare of older people;
- reduction of poverty of the specified age group of the population;
- improving the mechanism for protecting older persons from domestic violence [31] (see Appendix 2).

Institutional framework. National Institutional Mechanism on Ageing is the Ministry of Labor and Social Protection of the Republic of Belarus (hereinafter – the Ministry of Labor and Social Protection), which develops proposals and implements the main directions and priorities of state policy on all social issues [32]. The Ministry of Labor and Social Protection participates in the development and implementation of measures to improve the social protection of the elderly, veterans, victims of war; organizes and holds republican reviews on the best setting of work on servicing, ensuring healthy and safe living conditions for pensioners, etc. In the structure of the Ministry of Labor and Social Protection, there is an officially authorized coordinator on the issues of ageing. The Interdepartmental Commission on the Issues of Older Persons, Veterans and Victims of the Aftermath of Wars under the Ministry of Labor and Social Protection coordinates the implementation of the adopted state subprograms. (**State program on social protection and promoting employment of the population for 2016-2020**, approved by the Decree of the of the Council of Ministers of the Republic of Belarus of January 30, 2016 # 73 – subprogram 5 “Social integration of the disabled and elder citizens”; subprogram 4 “A barrier-free environment for the disabled and physically weakened persons”).

The Belarusian public association of veterans is actively functioning, uniting within its ranks about 2.5 million veterans of war and labour. The tasks of this public association are: protection of constitutional rights and freedoms of veterans; participation in the socio-political life of the country, in the development of normative legal acts and programs for the social protection of veterans, improvement of their financial situation, housing conditions, medical, cultural and other types of services.

Employment promotion. The state policy in the field of employment of the population is aimed at ensuring equal opportunities for all citizens, regardless of age. In accordance with the Labor Code of the Republic of Belarus, age indication in the proposals for vacancies is recognized as a discriminatory circumstance; a person who has reached the retirement age cannot be refused employment because of the retirement age; reaching the retirement age is not grounds for terminating the employment relationship with an employee; an employee who is a pensioner, during the period of work under an employment contract is subject to compulsory state social insurance and has the right to benefit in connection with disability [33]. In the Republic of Belarus, at the legislative level, the continuation of work by older people is encouraged. The pension legislation does not prevent elderly workers from combining employment with receiving a pension: the size of the pension during the period of work is only slightly limited.

Pension legislation. The main tasks in the area of pensions are to maintain the level of material well-being of disabled citizens and ensure the stable operation of the pension system. The right to pension provision is implemented via the Law of the Republic of Belarus "On Pension Provision" [34]. According to the Law, from January 1, 2017, the established retirement age is annually increased by 6 months to reach the age of 63 years for men, 58 for women (in 2017 it was 60 years and 6 months for men and for women). At the same rate, the age for prescribing early retirement pensions will increase. The mechanism of the so-called deferred pension has been implemented in the Republic of Belarus. Its meaning is that if a person continues to work at the retirement age and at the same time refuses to receive a pension, the amount of his pension constantly increases in accordance with the premium interest. Measures have been taken in the country to limit programs for early retirement at the expense of general pension funds. Non-working recipients of pensions that have reached the age of 75 years are entitled to surcharge to pensions in the amount of 75%, 80 years – 100% of the minimum age pension size. In order to provide citizens with the opportunity to have a higher income level in the elderly age, voluntary programs for the formation and accumulation of savings for one's old age in insurance organizations and banks are being developed.

The rights of the elderly and participation in public life. The most important human right is the right for effective representation in elected bodies, active participation in the life of society, in the development and implementation of its policies. The Electoral Code of the Republic of Belarus does not contain discriminatory provisions for older citizens. This is confirmed by the fact that the largest number of people over the age of 60 are employed in legislative bodies. Thus, at the beginning of 2017, among the 57 members of the Council of the Republic, 12 (28%) are over 60, among 110 deputies

of the House of Representatives there are 6 (5.4%). By the end of the convocation (2020), the number of parliamentarians over 60 years of age will reach 30% [35, 36]. People of the retirement age are fairly well represented in the local Councils of Deputies, especially the grass-roots level (district and rural).

Education throughout life. The Code of the Republic of Belarus on Education does not provide for restrictions in obtaining education on the basis of age. At the same time, it lacks specific norms that would consolidate and regulate the principle of the continuity of education throughout life. Later studenthood has a positive impact not only on psychological attitude, but also on the general state of health. It is more favourable for the state to make citizens of the "golden age" feel healthy and in demand among the members of society. The so-called "informal education" is developing quite actively in Belarus: Minsk City University of the third age; the University of the Golden Age in Grodno; the Institute of the third age in Brest; Kobrin University of the golden age.

Material well-being. To support low-income citizens, including the elderly, a system of state targeted social assistance has been created in the country, which is aimed at providing temporary material support and is provided, including in the form of social benefits for the purchase of food, medicines, clothing, etc., to pay for housing and communal services and (or) payments for the use of a dwelling. In order to maintain the material level of pensioners, tax privileges are fixed, for example, pensions are exempt from income tax, lands granted to pensioners by age are exempt from land taxes in the case of absence of registration of able-bodied persons at their place of residence e.t.c. Separate categories of pensioners are entitled to a 50 percent discount on the cost of maintenance and (or) use of the dwelling, maintenance of the elevator and utilities.

Health. The State Program "People's Health and Demographic Security of the Republic of Belarus" for 2016–2020 provides for the creation of conditions for improving the health of the population with coverage of all stages of life, broad awareness of the population about risk factors that threaten health, promoting a healthy lifestyle, increasing longevity, etc. The provision of medical care to the elderly is carried out by healthcare organizations without age restriction, but without any special features.

Taking into account the developing demographic trends, a geriatric service has been established in Belarus, which provides organizational and methodological support to the assistance provided to older people: 7 geriatric centers and 178 geriatric offices have been opened. To work with older people to promote a healthy lifestyle, schools of the "Third Age" have been established in all healthcare organizations. Palliative care is provided to single elderly people in nursing hospitals, on nursing beds and medical and social beds in healthcare organizations and hospices.

Providing an enabling environment. In order to ensure an enabling environment for the elderly, local Councils of Deputies are approving regional programs, concepts, action plans for housing construction, improvement, road construction, community and social services for citizens, social support for the disabled, the elderly, etc. The tasks of territorial public self-governance include participation in social support activities for families and various categories of citizens who need such support (elderly people, disabled people, etc.).

Local executive and administrative bodies take measures to economically stimulate the construction and placement of convenience stores, other retail facilities, public catering facilities that provide care for the elderly, etc. The town planning documentation provides for the creation of a network of facilities for physically disabled persons, taking into account their age and (or) diseases (hospitals, boarding homes, etc.). Turnover on the sale in the territory of the Republic of Belarus of services for the delivery of pensions and other social payments to individuals is exempt from the value added tax.

To protect the housing rights of the elderly, the Housing Code of the Republic of Belarus provides for the arrangement of housing contracts to families in the composition of which there are citizens who have reached the age of 60 at their written request for residential premises on the lower floors (no higher than 3) or in houses equipped with elevators; the right of registered pensioners who are in need of improvement of housing conditions to receive social housing.

To prevent domestic violence, including against older citizens, a number of legislative and organizational measures have been implemented in recent years: a document such as a protective order, establishing bans on communication, visiting, finding out the place of stay of a citizen who suffered from domestic violence was introduced; the duty of the citizen who committed violence in the family to be temporarily suspended from a dwelling common with the citizen who had suffered from violence.

Thus, active legislative and programmatic work is carried out in all three areas of the implementation of the Madrid Plan in the Republic of Belarus.

However, the multifaceted and interconnected challenges and opportunities associated with population ageing require the development of a whole range of measures and, above all, the improvement of legal and institutional support for the implementation of the Madrid Plan in the Republic of Belarus.

Documents characterizing national priorities in this area are national reports submitted by the Government of the Republic of Belarus on the implementation of the Regional Strategy for the Implementation of the Madrid Plan in the UNECE region. The report presented by the UNECE in 2016 contains an analysis of the state

policy on older citizens in the Republic of Belarus and an assessment of the progress achieved in the country after the adoption of the MIPAA RIS during the implementation of its third cycle [31].

It notes that the main objectives of the state policy in the field of supporting older citizens are:

- ensuring the growth of material and moral well-being of older citizens,
- strengthening the health of the nation,
- creation of conditions for productive employment of older people and their social integration,
- respect for the dignity of older citizens and overcoming negative stereotypes in the society with respect to the ageing population.

In accordance with the tasks set, **6 priority directions for the improvement of the state policy regarding the elderly are defined:**

at the national level:

- development of special state programs (action plans) aimed at ensuring active longevity;
- ensuring coordination of efforts of state bodies and organizations, civil society institutions, as well as creating an inter-agency mechanism for ensuring active longevity in the Republic of Belarus;
- consideration of the possibility of including indicators of the situation of older citizens in the methodology of individual state statistical observations (including using the international methodology for calculating the Active Ageing Index);
- expansion of scientific support for public policy measures in the field of active longevity;

at the international level:

- studying foreign experience in the development and implementation of the Roadmap for active longevity issues;
- further active participation of the representatives of the Republic of Belarus in the formulation and implementation of the international policy of active longevity.

The basis for effective adaptation of society to a changing demographic situation is the appeal to all areas of state policy. Therefore, first of all, it is advisable to **improve the legal framework**, in particular, the adoption of the law on old age, in which it is necessary to combine all the basic rights, freedoms, guarantees and benefits of the elderly as a particularly vulnerable population category, including pensions, healthcare and medical provision, social services, access to cultural events, leisure activities; provide for the creation of a special body to protect the rights of older citizens; to consolidate the functions of state bodies and other organizations that protect the rights and legitimate interests of the elderly.

For the same purposes, it is necessary to analyze and consider the possibility of introducing amendments to a number of laws of the Republic of Belarus:

- to fix the principle of lifelong education in the Code of the Republic of Belarus on Education; defining the category of older people as a special subject of relations in this area and foreseeing the development of special programs and methods for such persons, defining the specifics of their education;
- supplement section III of the Labor Code of the Republic of Belarus with a chapter on the peculiarities of the regulation of the work of older people; to fix the necessity of care of a family member who has reached the age of 80 in Article 260 as a good reason for the head of an organization to terminate the employment contract early without paying compensation to the employer;
- supplement the Law of the Republic of Belarus “On Physical Culture and Sport” with norms on securing the category of elderly people as a special subject of relations in this area and provide for the development of special programs and methods for such persons;
- supplement the laws of the Republic of Belarus “On healthcare”, “On the provision of psychological assistance”, “On the prevention of the spread of diseases that pose a threat to public health, the human immunodeficiency virus” with norms on securing the category of elderly people as a special subject of relations in this area and the specifics of providing medical care to them.

Development and adoption of the **Interdepartmental Strategy for addressing national problems related to population ageing and the growing number of elderly citizens** will enable uniting the efforts of various departments and ensuring rational use of existing opportunities and means to improve the quality of life, recognizing the value of the contribution of older people to the social, economic and cultural life of the country.

The basic concepts of the MIPAA should form the basis of the strategy:

- integration of ageing into national programs and policy documents for all sectors;
- an approach from the standpoint of the life path as the interaction of generations, emphasizing equality and inclusion of people of all age groups in all areas of national policy.

The proper institutional framework for the implementation of a comprehensive policy on ageing will be ensured by the creation of a separate body (the National Council) on the issues of ageing and the elderly.

The National Council can become a permanent body on public policy in the field of ensuring the rights of older citizens, coordinating and developing coherent actions aimed at ensuring the implementation of the provisions of the Madrid International Plan on Ageing, the Charter of Older Persons and other international legal documents.

The National Council can be formed from representatives of the National Assembly of the Republic of Belarus, the Administration of the President of the Republic of Belarus, the heads of the republican government bodies, local executive and administrative bodies, non-governmental organizations and scientists dealing with the issues of ageing and older people.

The most important task of the National Council should be a comprehensive assessment of social policies and programs for older people. Part of this assessment was carried out as part of the preparation of the Report on the Implementation of the Regional Implementation Strategy for the Madrid International Plan of Action on Ageing in the Republic of Belarus (2016). It was based on the analysis of:

- Quantitative and qualitative information obtained in the course of observing national politics;
- Reference data;
- Results of reviews and estimates on the “bottom up” principle with participation of elderly people, performed to analyze the influence of political actions on the quality of their life. In estimating the social policy and programs for elderly people, the following factors may also be used [43]:

Social consequences of the implementation of programs:

- the number of older persons covered by the program or policy and the consequences of resource allocation for different population groups in the country (defined by sex, socio-economic status, marital status, health status, place of residence);
- the relevance of the benefits and services offered to the actual needs of older persons and the risks to which they are exposed;
- Priority criteria for the allocation of funds (for example, coverage or severity of the problem).

Cost-effectiveness of programs:

- benefits and their recipients (cost-effective coverage of target groups);
- the cost of the program (policy) in comparison with the cost of other programs (policies), the comparative effectiveness of similar programs (policies);
- administrative costs for the implementation of the program as a percentage of the total cost and in comparison with the administrative costs of implementing other programs;
- evidence of long-term social benefits and side effects associated with the program.

Management problems related to the programs:

- the ability of local authorities to effectively implement programs;
- staff control and other means of ensuring effective use of program allocations;
- the existence of mechanisms that ensure and stimulate the participation of citizens and guarantee an impartial and responsive attitude to their concerns.

Sustainability and economic accessibility of programs:

- availability of the program now and in the future on the basis of projected costs, revenues and benefits;
- the alignment of the program with the Government's medium-term sectoral plans and the anticipated changes in funding resulting from the revision of development priorities; MTEFs – Medium-Term Exchiture Frameworks are an alternative;
- the need to search for other sources when there is a lack of funding;
- the role of international transfers through the general budget and SWAps – sector-wide approaches – as a new important mechanism for financing social programs for the elderly.

To **reduce the dependency ratio**, it is now important to develop measures aimed at implementing the potential of older people in employment and education:

- prepare programs for the training of persons of retirement and pre-retirement age,
- to create a program – lifetime education;
- to introduce tax incentives and subsidies for organizations that hire older persons;
- facilitate business opportunities for the elderly;
- calculate the change in the retirement age, taking into account the prospective age;
- encourage private pension schemes.

To ensure **health and welfare in the elderly**, it is recommended:

- to create conditions for social inclusion (providing free entry to museums, parks, tourist attractions, government subsidies for organizations and clubs of older people, as well as for the organization of forums for older people, joint seminars for the younger and older generations, etc.);
- to develop programs for healthy ageing and prevention of non-communicable diseases, to promote adequate nutrition for older persons; for access to water supply and sanitation facilities; for alcohol abuse prevention and reduction of the use of tobacco products;
- to include older people in HIV/AIDS prevention, treatment and care programs;
- to devote more attention to the organization of sports leisure for the elderly.
- to implement programs on personal financial literacy for the elderly;
- develop a strategy for advancement of the industry of goods and services for the elderly;
- implement awareness programs among young people on a healthy lifestyle. Which would lead to an active and well-off old age.

The future demand for healthcare services depends on a combination of several mutually reinforcing factors. Over the years, technical medical equipment is improving, which increases the cost of treatment. In parallel, the value of human life, the priority of preserving life and health from the point of view of public preferences are

growing. As a consequence, the readiness of the society to allocate more public funds to solve these problems is increasing, and paid healthcare services are being developed. Finally, the most important factor is the effect of population ageing on the prevalence of diseases and their severity. An increase in the proportion of older people in the overall population structure entails an increase in demand for healthcare services, long-term care, social services and pensions. Medical services require additional funds, expansion of the network of medical, gerontological institutions, qualitative restructuring of the healthcare system. Serious investments are required in the creation of systems for promoting and maintaining healthcare throughout the life cycle, creating an enabling physical and social environment that will reduce the cost of treatment and care in the future, will release able-bodied family members (mostly women) from additional workload, will make use of the potential of the elderly people.

To create an **enabling environment**, it is necessary:

- to take measures to spread positive images of ageing and the elderly people (bonuses for the elderly with exceptional achievements);
- to provide material support for cohabitation of persons of different generations, as well as cohabitation of elderly people and carers for elderly parents;
- to develop programs aimed at raising public awareness of ill-treatment of older persons, reducing and eliminating it, providing legal support to elderly victims and training to identify cases of abuse of the elderly in the healthcare sector;
- to provide access to water supply and sanitation facilities;
- to introduce transport schemes for access of elderly people from rural areas to public healthcare facilities, priority access to healthcare;
- to organize forums for older people, joint seminars of the younger and older generation;
- to provide government subsidies for clubs of older people.

Of course, effective implementation of policies for the elderly is impossible without the availability of special budgetary funds. Therefore, the introduction of expenditure items for specific population groups by age and gender into the Republican budget can in this context be considered as one of the mandatory conditions. It is also possible to set up a special fund to help the elderly.

The search for answers to the challenges of the future related to ageing of the world implies purposeful search for effective strategies and outstripping alignment of national mechanisms (institutions) that would enable really changing the role of older people in the modern world, transforming the experience, knowledge and capabilities of the ever-growing segment of “third-age” persons into a source of socio-economic development.

CONCLUSION

The dynamics of the gender and age structure of the Republic of Belarus by a number of indices enables concluding that the population of the country is rapidly ageing. At the moment, the median age of the population is 39.7 years. By 2040, there will be 1.5 times more elderly people than children. The share of the oldest (aged 80+) is under 4% for the entire population and 25% for the elderly. In cities, the proportion of the population aged 60 years and over is 19%, and 28% in rural areas, with 18% of this age group being women.

Analysis of the processes of demographic ageing of the Republic of Belarus in the context of the main international indicators enables concluding that:

- the situation of the elderly is relatively provided for and secure;
- people over 60 are distinguished by a high level of education;
- the employment rate in the first 5 years after retirement is almost 50%.

Among the changes in the situation of the elderly, gender inequality in access to free time, a decent income, and a high risk of being single in older women should be identified. According to GAWI, 2015, most elderly people spend their time on themselves, their families, their household; they take minimal participation in public life.

One of the main reasons for the ageing of the population in the Republic of Belarus is a decrease in fertility. The policy of supporting young families in the birth of the desired number of children is of particular importance in mitigating the fall in the birth rate. At the same time, an important role is played by the growth of life expectancy in the elderly. The implementation of measures aimed at accelerating this dynamic will lead to better health, quality of life and increased contribution of older people to the economy. Since the migration increase is insignificant, migration did not have a significant impact on the processes of demographic ageing. Nevertheless, it is advisable to think about measures to promote the re-emigration of highly qualified specialists who have received education in foreign higher educational institutions.

Measures to overcome the causes of demographic ageing: stimulation of fertility, increase in the duration of a healthy life, of course, give the desired effect, but, as a rule, in the long run. In order to adopt national programs to the processes of ageing, it is important to take into account a number of accompanying changes.

This is, above all, growth of the dependency ratio on the able-bodied population and overcoming negative changes in the situation of the elderly people. In rural areas, as of January 1, 2017, there were 989 disabled persons per 1,000 able-bodied people, of whom 2/3 of them were older than the able-bodied age group. In cities, of 692 non-working persons per 1000 able-bodied people, slightly more than half (393) were of

older age. In accordance with the forecasts, the elderly dependency ratio (over 65 years) will grow from 2015 to 2050 from 22.2 to 43.8 elderly per 100 people. Taking into account the perspective demographic load gives a more optimistic result: growth from 20.2 to 26.9 persons at the age of 65+ per 100 people aged 20 years to the prospective age (i.e., the age at which the population has 15 years to live on a whole).

Overcoming negative changes in the situation of older people is one of the most important tasks of the national socio-economic policy. At the same time, active involvement of the older generation in the economy is one of the most important conditions for sustainable development. Healthy older people can work longer, compensating for the shortage of labour associated with the decline in fertility. And their experience and knowledge are, in many cases, an invaluable professional resource.

To develop and implement effective demographic policy measures, taking into account the challenges of demographic ageing, the UN General Assembly recommends that governments focus on identifying those national priorities that are "realistic, sustainable, feasible and have the greatest likelihood of being achieved in the years ahead", and also proposed "to develop targets and indicators to measure progress in the implementation process" in their implementation.

Particular attention in the UN documents on population ageing is devoted to the encouragement of member states to build up the potential required to implement the Madrid Plan of Action. In this connection it is recommended, first of all:

- to strengthen the institutional framework for the development and implementation of appropriate policies;
- to intensify scientific research on the issues of demographic ageing;
- to improve data collection and analysis;
- to provide training of qualified specialists;
- widely inform the population about the issues of ageing and the importance of the work being done.

The Republic of Belarus has acceded to the Madrid Plan on Ageing and has committed itself to pursuing policies aimed at increasing the participation of older persons, as full citizens, in the life of society, guaranteeing their right to a safe and dignified old age.

In order to implement the MIPAA in the Republic of Belarus, efforts are being made to:

- ensuring the social integration of older people, as well as strengthening their health and family well-being;
- improvement of the pension system with a view to its sustainable financing;
- ensuring the growth of life expectancy of the population;
- increase economic activity and welfare of older people;
- reduction of poverty among the elderly;
- improving the mechanism for protecting older people from domestic violence.

In all three areas of the implementation of the Madrid Plan, active legislative and programmatic work is being carried out in the Republic of Belarus. However, the multifaceted and interconnected challenges and opportunities associated with population ageing require the development of a whole range of measures in the country, and, above all, the improvement of legal and institutional support for the implementation of the Madrid Plan.

In the Republic of Belarus priority directions of the policy regarding demographic ageing have been defined:

- development of special state programs (action plans) aimed at ensuring active longevity;
- ensuring coordination of efforts of state bodies and organizations, civil society institutions, as well as creating an inter-agency mechanism for ensuring active longevity in the Republic of Belarus;
- consideration of the possibility of including indicators of the situation of older citizens in the methodology of individual state statistical observations (including using the international methodology for calculating the Active Ageing Index);
- expansion of scientific support for public policy measures in the field of active longevity;
- studying foreign experience in the development and implementation of the Roadmap for active longevity issues;
- further active participation of the representatives of the Republic of Belarus in the formulation and implementation of the international policy of active longevity.

In this context, it is advisable to improve the regulatory and legal framework of demographic policy, in particular, the adoption of a Law on Ageing, which would unite all the basic rights, freedoms, guarantees and benefits for elderly people in Belarus.

Apart from that it is necessary to introduce analysis and revision of all the laws of the Republic of Belarus in order to provide for complete integration and participation of elderly people in the life of society. This will require, as noted above, correction of the positions the Code of the Republic of Belarus on Education, the Labour Code of the Republic of Belarus, the Law of the Republic of Belarus "On Physical Culture and Sport", "On Healthcare", "On Providing Psychological Assistance", "On Prevention of the Spread of Diseases Affecting Public Health, the Human Immunodeficiency Virus" and others.

Development and adoption of an Interdepartmental strategy to address issues related to demographic ageing and the situation of the elderly.

A perspective direction for development of state policy of the Republic of Belarus in the area of social integration of elder citizens may be the creation of conditions for increasing the level of participation of elder citizens themselves:

- Increasing the number of public unions of elder citizens;
- Considering the possibility of forming an insurance fund for the case of loss of capability of providing for oneself at an older age;

- Development of educational services, mass cultural and sport events with the participation of elder people, aimed at preventing social, physiological, psychological and other hurdles of active longevity;
- Advancement of information campaigns held in the media and focused on creating dignity of the elder generation, the value of their contribution to the life of the state and society in the mind of society and the elderly people themselves.

Development of an institutional framework is the creation of the National Council on Issues of Ageing and Older Persons with a goal of implementing a comprehensive policy on ageing. It seems important in the short term:

- in order to **reduce the dependency ratio**, to develop measures aimed at implementing the potential of older people in employment and education;
- to **ensure health and welfare in old age** to create conditions for social inclusion, develop programs for healthy longevity;
- to **create an enabling environment** to promote the spread of a positive image of ageing and older people.

To develop an effective policy on demographic ageing, it is necessary to have data on economic, demographic and social indicators disaggregated by sex, age, place of residence.

The collection of data on the situation of the elderly should be improved to obtain reliable sex-disaggregated data in order to gain a deeper understanding:

- of gender aspects of ageing;
- of changes in family composition and family support systems;
- of the contribution of the elderly to the life of the family, community;
- of the level of poverty among older people;
- of access to basic social and healthcare services; the impact of urbanization and migration on older people;
- of the situation of the elderly in emergency situations, etc. [15].

Given that poverty is measured not only by income and expenditure, but also by other indicators (limited access to healthcare, water supply, and lack of sanitation), indicators for all these parameters are needed. This will ensure the development of programs to support older people in terms of nutrition, water supply, medicines, medical care for the elderly, subsidizing food items.

To successfully search for answers to the challenges of demographic ageing, society as a whole needs to realize that the social and economic policies of the state can not fail to take into account the growing life expectancy and should be aimed at the effective use of the potential of older citizens. The acknowledged expert in the field of demographic research Anatoly Vishnevsky said in an interview with the Independent newspaper: "Demographic ageing is not a catastrophe, but an entire field of challenges for all social institutions. If society does not respond to the challenges of time, the challenges turn into a catastrophe" [37].

Appendix 1

AGEING INDICATORS

Indicators of the ageing process

The proportion of older people in the population is the proportion of people aged 65 and over (60 years and over) in the total population of the country.

The proportion of very elderly people in the population is the proportion of people aged 80 years and over in the total population of the country.

The depth of ageing index (longevity coefficient) is the proportion of very elderly (over 80 years) in the total number of the elderly (over 65 years).

The ageing index is the number of people aged 65 and over (60 years and over) per 100 people under the age of 15 years⁶.

The growth rate of the population as a whole and of individual age groups over a certain period of time is the average annual percentage change in the population over the period (assuming the constant nature of changes). The growth rate of the very old in the whole world is higher than the growth rate of the elderly population.

The median age of the population is the age that divides the population into two groups of the same size in number, so that half of the population is younger than this age, and the other half is older.

Sex ratio in old age – the number of men per 100 women in old age. Since there is a gender gap in life expectancy by sex, there is a situation of predominance of women in older ages.

The share of older able-bodied people in the able-bodied population is the proportion of senior citizens of the able-bodied population in the size of the able-bodied population. To assess the ageing of the able-bodied population, the shares of junior, middle and senior groups of the able-bodied population are calculated: for example, 15–29, 30–44, 45–59 years.

The prospective age is the age at which the population, on average, has to live no more than 15 years to live. With the increase in life expectancy, the prospective age increases.

The proportion of the elderly in the population, with regards to the prospective age, is the proportion of the population of the age at which life expectancy does not exceed 15 years.

Causes of ageing indicators

The total fertility rate is the average number of children born to a woman during her reproductive period (15–49 years), subject to maintaining the current age-specific fertility rates during her reproductive period.

The life expectancy at a certain age (at birth or at an elderly age) is the average number of years that a person will have to live at a given age, provided that the age-related death rates are maintained throughout his life.

The survival rate to the age of X is the proportion of newborns in a given year who will survive to the age of X, provided that the age-specific mortality rates are maintained for at least the next X years.

Indicators of the age composition of emigrants and immigrants – the proportion of older migrants in the total number of emigrants and immigrants.

Indicators of the effects of ageing

The overall dependency ratio is the number of people under the age of 15 and at the age of 65 and over per 100 people aged 15–64. It is child and elderly dependency.

Demographic child dependency ratio factor is the number of people under the age of 15 per 100 people aged 15–64.

The elderly dependency ratio is the number of people aged 65 and over per 100 people aged 15–64.

The prospective factor of the demographic burden of the elderly is the number of people aged at which the life expectancy does not exceed 15 years, per 100 people at the ages of 20 to this (prospective) age.

Parent support ratio is the number of people aged 85 and over per 100 people aged 50–64.

The potential support ratio is the number of people aged 15–64 per person at the age of 65 years and older.

Coefficient of support is the ratio of the number of producers to the number of consumers. The ratio of the number of effective (actual) consumers and producers is often used. The number of effective (actual) consumers, for example, is the number of consumers weighted by the age variation of consumer needs.

⁶ Further, as a rule, we shall not specify the exact age range of the elderly population – 65 or 60 years. Most of the indicators, which refer to the elderly population, are calculated for the borders of 65 and 60 years.

⁷ The coefficients of the overall dependency ratio, child dependency and elderly dependency can be calculated taking into account the age limits of the able-bodied population of 20 to 64 years. The coefficient of the overall dependency ratio, for example, is equal to the ratio of population aged 0–19, and 65 and older to the population aged 20–64.

The first demographic dividend is the GDP growth per actual consumer (GDP/P) in per cent per annum, which results from an increase in the proportion of the able-bodied population and, correspondingly, an increase in labour force growth rates [38]. The effective use of the first demographic dividend depends on labour productivity, the volume and structure of social policies to support children and the elderly.

The second demographic dividend is the growth in GDP per actual consumer (GDP/P) in per cent per year, which is the result of an increase in the proportion of elderly people with significant savings, which leads to increased accumulation of capital. The effective use of the second demographic dividend depends on the availability of reliable financial systems and other incentives to save capital by the age of retirement, as well as pension and social schemes.

Indicators of the situation of the elderly

The level of economic activity of the elderly is the number of economically active elderly people (working or seeking work) as a percentage of the elderly population as a whole.

The illiteracy rate of the elderly is the proportion of persons among the elderly who do not know how to read and write short sentences in everyday life.

The type of household in which elderly people live is the proportion of persons among the elderly population of private households living separately, living only with the spouse, living with children in private households of a different type.

Indicators for measurement cities, friendly to the elderly [13]. Indicators represent a system of three sections: equality; accessibility of the physical environment for hiking, travel, housing and leisure; involvement in social life (positive attitude towards the elderly in society, volunteer work, paid employment, access to information, social services and services for health, involvement in decision-making and socio-cultural activities).

Active ageing index (AAI). The index is currently calculated for 28 European countries, consists of 22 indicators in 4 conceptual sections for measuring active ageing: employment of the elderly; participation in public life; independent, healthy and safe life; opportunities and environment for elderly people [11].

Section "Employment of the elderly": employment in age groups 55–59, 60–64, 65–69, 70–74.

Section "Participation in public life": volunteer work, caring for children and grandchildren, caring for the older generation, participating in politics.

Section "Independent, healthy and safe life": physical exercise, access to healthcare, independent living, financial security (relative median income, no risk of poverty, lack of material deprivation), physical security, lifelong learning.

Section "Opportunities and environment for elderly people": life expectancy at age 55, the life expectancy at age 55 in relation to life expectancy at the age of 55, emotional and mental well-being, use of the Internet, communication with friends/relatives/colleagues, the proportion of older people with higher education.

Global AgeWatch Index (GAWI). The index consists of 4 sections: income security, health status, education and employment, good living conditions [12].

Section "Income security": the level of pensions, the level of poverty of the elderly, the relative well-being of the elderly, and GDP per capita.

Section "Health status": life expectancy at the age of 60 years, life expectancy at the age of 60 years, psychological well-being.

Section "Education and employment": employment of the elderly, the educational status of the elderly.

Section "Good living conditions": social links, physical security, civil liberties, access to public transport.

STATISTICAL ANNEX

1. The Global AgeWatch Index. Republic of Belarus

Belarus was 64th out of 96 in 2015 in the rating of the Global AgeWatch Index (GAWI). Among the partial indices of the Global Index Belarus is 50th in income security of pensioners, 84th in health, 66th in education and employment and 44th in conditions of life of older people [23].

The Indicators of the Global AgeWatch Index partially cover the directions of monitoring of the situation of the elderly according to the Madrid Plan:

- older people and development,
- health and welfare in old age,
- providing an enabling environment.

Income security			
level of pensions	poverty level of the elderly	relative well-being of the elderly	GDP per capita
93.5 %	18.4 %	73 %	US\$ 16,418
Health status			
life expectancy at the age of 60 years	life expectancy at the age of 60 years	psychological well-being	
19 years	13.6 years	65.8 %	
Education and employment			
employment of the elderly		educational status of the elderly	
40.6 %		45 %	
Living Conditions			
social relations	physical security	civil liberties	access to public transport
84 %	61 %	64 %	62 %

2. Main indicators of pension provision in the Republic of Belarus

	2008	2009	2010	2011	2012	2013	2014	2015	2016
Number of pensioners registered in labour, employment and social protection agencies, thousand people	2446.0	2454.3	2468.9	2486.9	2512.2	2537.3	2559.7	2592.8	2619.3
Average size of pensions, thousand rubles	389.4	429.5	584.7	940.4	1885.5	2206.8	2643.5	2805.7	297.0 ¹⁾
Real amount of assigned pensions, % to the previous year	104.7	100.2	123.9	77.1	164.6	100.5	103.1	94.8	95.7

¹⁾ Rubles, taking into account the denomination of 2016 (a decrease of 10 000 times).

3. Main indicators of pensions (at the end of the year)

	2010	2012	2013	2014	2015	2016
Number of pensioners ¹⁾ total, thousand people	2 614.7	2 648.8	2 671.7	2 694.2	2 727.9	2 755.3
% to the previous year	100.5	100.7	100.9	100.8	101.2	101.0
Number of employed in the economy, per pensioner, people	1.80	1.74	1.71	1.69	1.65	1.60
Minimum pension amount by age ²⁾ , thousand rubles, 2016 – rubles	319.9	1 343.5	1 569.9	1 912.0	2 085.4	221.6
Ratio of the minimum pension by age ²⁾ to the minimum wage, times	0.8	1.1	1.0	1.0	1.0	0.9
Average size of designated pensions ²⁾ , thousand rubles, 2016 – rubles	584.7	1 885.5	2 206.8	2 643.5	2 805.7	297.0
Budget of the subsistence minimum for pensioners, thousand rubles, 2016 – rubles	252.2	727.3	867.1	1 072.2	1 195.1	134.4
% to the previous year	113.0	156.9	119.2	123.7	111.5	112.5
Ratio of the average size of assigned pensions ²⁾ , % to the subsistence minimum for pensioners	231.8	259.3	254.5	246.5	234.8	221.0
to the average amount of accrued wages	36.6	39.8	37.7	38.8	37.8	37.1
Real amount of assigned pensions ²⁾ , % to the previous year	123.9	164.6	100.5	103.1	94.8	95.7

¹⁾ Including pensioners who are registered with the bodies of the Ministry of Defense of the Republic of Belarus, the Ministry of Internal Affairs of the Republic of Belarus, the State Security Committee of the Republic of Belarus and the Ministry for Emergency Situations of the Republic of Belarus.

²⁾ Data are given for pensioners who are registered with labor, employment and social protection agencies.

UNITED NATIONS PRINCIPLES FOR OLDER PERSONS *

To make the life of the elderly healthful

Adopted by General Assembly resolution 46/91 of 16 December 1991

The General Assembly,

appreciating the contribution that older persons make to their societies,

recognizing that, in the Charter of the United Nations, the peoples of the United Nations declare, inter alia, their determination to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small and to promote social progress and better standards of life in larger freedom,

noting the elaboration of those rights in the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights and the International Covenant on Civil and Political Rights and other declarations to ensure the application of universal standards to particular groups,

in pursuance of the International Plan of Action on Ageing, adopted by the World Assembly on Ageing and endorsed by the General Assembly in its resolution 37/51 of 3 December 1982,

appreciating the tremendous diversity in the situation of older persons, not only between countries but within countries and between individuals, which requires a variety of policy responses,

aware that in all countries, individuals are reaching an advanced age in greater numbers and in better health than ever before,

aware of the scientific research disproving many stereotypes about inevitable and irreversible declines with age,

convinced that in a world characterized by an increasing number and proportion of older persons, opportunities must be provided for willing and capable older persons to participate in and contribute to the ongoing activities of society,

mindful that the strains on family life in both developed and developing countries require support for those providing care to frail older persons,

bearing in mind the standards already set by the International Plan of Action on Ageing and the conventions, recommendations and resolutions of the International Labour Organization, the World Health Organization and other United Nations entities,

encourages Governments to incorporate the following principles into their national programmes whenever possible:

Independence

1. Older persons should have access to adequate food, water, shelter, clothing and health care through the provision of income, family and community support and self-help.
2. Older persons should have the opportunity to work or to have access to other income-generating opportunities.
3. Older persons should be able to participate in determining when and at what pace withdrawal from the labour force takes place.
4. Older persons should have access to appropriate educational and training programmes.
5. Older persons should be able to live in environments that are safe and adaptable to personal preferences and changing capacities.
6. Older persons should be able to reside at home for as long as possible.

* Based on the International Plan of Action on Ageing; see Report of the World Assembly on Ageing, Vienna, 26 July – 6 August 1982 (United Nations issue, sold as No. R.82.I.16), chap. VI, sect. A.

Participation

7. Older persons should remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their well-being and share their knowledge and skills with younger generations.
8. Older persons should be able to seek and develop opportunities for service to the community and to serve as volunteers in positions appropriate to their interests and capabilities.
9. Older persons should be able to form movements or associations of older persons.

Care

10. Older persons should benefit from family and community care and protection in accordance with each society's system of cultural values.
11. Older persons should have access to health care to help them to maintain or regain the optimum level of physical, mental and emotional well-being and to prevent or delay the onset of illness.
12. Older persons should have access to social and legal services to enhance their autonomy, protection and care.
13. Older persons should be able to utilize appropriate levels of institutional care providing protection, rehabilitation and social and mental stimulation in a humane and secure environment.
14. Older persons should be able to enjoy human rights and fundamental freedoms when residing in any shelter, care or treatment facility, including full respect for their dignity, beliefs, needs and privacy and for the right to make decisions about their care and the quality of their lives.

Self-fulfilment

15. Older persons should be able to pursue opportunities for the full development of their potential.
16. Older persons should have access to the educational, cultural, spiritual and recreational resources of society.

Dignity

17. Older persons should be able to live in dignity and security and be free of exploitation and physical or mental abuse.
18. Older persons should be treated fairly regardless of age, gender, racial or ethnic background, disability or other status, and be valued independently of their economic contribution.

ON THE CHARTER OF ELDERLY PEOPLE

THE INTERPARLIAMENTARY ASSEMBLY OF THE MEMBER STATES
OF THE COMMONWEALTH OF INDEPENDENT STATES

DECREE
ON THE CHARTER OF ELDERLY PEOPLE

Having considered the draft of the Charter of Older Persons presented by the Permanent Commission of the IPA on Social Policy and Human Rights, the Interparliamentary Assembly

decrees:

1. Adopt the Charter of Older Persons (attached).
2. To send the Charter to the parliaments of the CIS member states and recommend it for use in developing national legislation.

Chairman of the
Assembly's Council
E.S. Stroev

St. Petersburg
June 15, 1998
№ 11-15

THE CHARTER OF ELDERLY PEOPLE

The Interparliamentary Assembly,

considering the older generation as a bearer of collective life experience and traditions, as a nationwide intellectual potential, appreciating the contribution that older people make to society,

recognizing that, in the Charter of the United Nations, the peoples of the United Nations declare, inter alia, their determination to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small and to promote social progress and better standards of life in larger freedom,

based on a clear definition of these rights in the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights and other documents of the UN General Assembly,

in accordance with the United Nations principle for older persons, "To make the lives of the elderly healthful", the International Plan of Action on Ageing, the Program of Practical Measures for the Social Protection of Older Persons for the Period up to 2001, and the Program for the Preparation and Conduction in 1999 of the International Year of Older Persons,

considering that the number of elderly people is growing in all countries of the world, the health status of most of which allows them to lead an active lifestyle,

convinced that older persons need to be able to participate actively in the life of society and contribute to it in their own way,

recognizing the significant differences in the situation of older persons, not only between independent states – the former republics of the Soviet Union, but also within and between certain categories of older persons, and noting with concern the lack of a coherent policy in the CIS states in relation to the older generation,

calls upon parliaments and governments of independent states to consider the goal of their policy as the development of national programs and the adoption of legislation, the achievement of conditions under which the rights of older persons to a dignified existence, security and practical opportunity for the full realization of their human potential, would be established, in particular:

- the right to have a guaranteed pension, special benefits, other sources of income, in aggregate not lower than the subsistence minimum, necessary for conducting a decent way of life, to receive reliable protection of their savings and incomes;

- the right to freely choose a place of residence, including movement within the bounds of independent states;

- the right to work;

- the right to free and high-quality medical care, which enables maintaining and restoring the optimal level of physical, moral and emotional well-being for one's age, to prolong the period of active life;

- the right, in case of necessity, to receive vital services and home care, as well as to use the services of boarding houses, other guardianship institutions that provide humane and safe living conditions, respect for the basic political and civil rights and dignity of the elderly person;

- the right to participate in relevant general education and training programs;

- the right by effective representation in elective and administrative bodies for active participation in the life of society, in the development and implementation of its policies;

- the right to share their knowledge and experience with young people, to participate in the patriotic education of the younger generations;

- the right to create voluntary organizations of veterans, elderly people who have the opportunity to represent and defend their interests in government bodies, to organize leisure for the elderly.

The Interparliamentary Assembly calls on the parliaments of independent states to adopt laws on the basis of this Charter, guaranteeing the elderly people a decent way of life, the possibility of applying their forces and abilities for the benefit of their people, their country, in order to strengthen friendly relations among the peoples of independent states.

The text of the document is verified by:

"News bulletin of the Interparliamentary Assembly of CIS member states, No. 18, 1998 [39]"



2017 LISBON MINISTERIAL DECLARATION

“A Sustainable Society for All Ages: Realizing the potential of living longer”

22 September 2017

2017 LISBON MINISTERIAL DECLARATION
4th UNECE Ministerial Conference on Ageing
“A Sustainable Society for All Ages: Realizing the potential of living longer”

Preamble

1. We, the representatives of the member States of the United Nations Economic Commission for Europe (UNECE), gathered at the fourth Ministerial Conference on Ageing from 21 to 22 September 2017 in Lisbon, Portugal, reaffirm our commitment made in the Berlin Ministerial Declaration in 2002 and subsequently confirmed by the León (2007) and Vienna (2012) Ministerial Declarations to fulfil the Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing (MIPAA) and to safeguard older persons' enjoyment of all human rights as laid down in the relevant international and regional instruments.
2. We note with satisfaction that life expectancy has increased for both women and men in the UNECE member States, although this increase in longevity is not always accompanied by good health. We particularly appreciate the richness of life experience and knowledge of older persons and their contributions for the benefit of our societies and their own personal fulfilment.
3. We recognize that the ongoing demographic changes present opportunities and challenges for policymaking and for individuals in our countries, and acknowledge a need for gender equality and intergenerational solidarity.
4. We appreciate that older persons are not a homogenous group, but diverse in their needs, preferences, and opportunities throughout their life course.
5. We acknowledge the significant progress made by many member States, either at the national or local level, in fulfilling the ten commitments of the UNECE RIS/MIPAA during the third five-year cycle. At the same time, we are aware that the implementation of the UNECE RIS/MIPAA during the past five years has occurred in an environment of economic stagnation, pressures on social spending, rising migration and technological transformation. Notable achievements in implementation in the region include, among others, the following:
 - (a) increasing attention of policymakers, social partners, media, civil society and the general public to the issues of individual and population ageing, including the observance of older persons' dignity and enjoyment of all human rights, and recognition of their contributions to economic performance and society as well as to strengthening inter- and intragenerational solidarity
 - (b) advancing active ageing as the central concept and operational approach of national and regional policies on ageing
 - (c) setting up measures to adapt national social protection systems and labour markets to the consequences of demographic changes
 - (d) growing involvement of civil society, in particular organizations of older persons, in the development of policies addressing the rights, needs and fulfilment of the potential of older women and men
 - (e) wider use of innovative approaches in providing services related to education and training, employment, culture, leisure and social tourism, rehabilitation, health and social care, including technological and organizational innovations, as well as promoting stronger cross-sectoral multi-stakeholder involvement in developing such services.
6. We note that some UNECE member States have still to develop more comprehensive policy responses to the individual and societal needs of ageing populations, while other member States need to secure or enhance the existing access of older persons to adequate social protection and well-functioning systems of health and long-term care including access to advanced treatments offered by medical progress.

7. We are also cognizant that policies on health and welfare of older persons in many member States need to be complemented with measures aimed at empowering older persons, particularly older women, safeguarding their dignity and preventing all forms of discrimination, abuse, violence and neglect.
8. We realize that the contribution of growing numbers of older persons - as both consumers and producers - to economic and social innovation and development is not universally recognized. Likewise, the role of social and health service sectors supporting older persons calls for better appreciation not only as important and growing labour market, but also as contributing factor to the economy and social cohesion as well as healthy ageing.
9. We see a need to strengthen social cohesion in our societies by recognizing the potential of older persons and promoting opportunities for them to participate in society and the economy.
10. To foster the implementation of UNECE RIS/MIPAA during the fourth cycle from 2017 to 2021, we stress the importance of further mainstreaming ageing into relevant policy areas and combating ageism in its many forms. We stand together in reaffirming the commitment to designing and implementing integrated policies for active and healthy ageing, where older persons are continuously recognized as an asset for a sustainable and inclusive society for all ages.
11. We aspire to realize the potential of living longer and we are determined to work towards achieving the following policy goals by 2022:

I. Recognizing the potential of older persons by

12. *empowering* individuals to realize their potential for physical, mental and social well-being throughout their lives and to participate in and contribute to society according to their capacities, needs, and desires
13. *developing* and implementing socially responsible and future-oriented economic and financial strategies that encompass the needs, capacities and expectations of current and future generations, while valuing the potential of older persons, their life experience, their responsibility and support for all generations and for society
14. *fostering* effective consultations with, and involvement of, older persons and their representatives at the national, regional and local levels in designing policies, strategies and measures that directly or indirectly influence their lives, taking into account the diversity of older persons and their needs
15. *promoting* a positive image of older persons, acknowledging their contributions to society and strengthening multigenerational discourse and intergenerational learning by all stakeholders, cultivating a life-course perspective in education, the media and other areas to promote better understanding of individual and societal ageing and the opportunities it presents
16. *fostering* work and volunteering of younger and older persons in intergenerational settings to help them understand how important and rewarding communication, exchange of experiences, cooperation and intergenerational solidarity are in all areas of life, within and outside the family
17. *encouraging* businesses, non-profit organizations and public enterprises to involve older persons as consumers in the planning and design of goods and services to match their needs and preferences, and to engage them in monitoring the quality of such goods and services
18. *ensuring* that older persons can attain and maintain their highest possible level of health and functional capacity by supporting the development of age-friendly environments and housing, and adapting health and social care systems to provide integrated, prevention- and person-oriented services, including in deprived urban, rural and remote areas.

II. Encouraging longer working life and ability to work by

19. *recognizing* the potential embedded in the employment of older workers and developing labour market strategies to promote maximum participation opportunities for workers of all ages
20. *fostering* access to and promoting lifelong learning opportunities and development of skills as a prerequisite of an active and fulfilling life at all ages;
21. *developing* strategies to fight unemployment at all ages, reducing financial inequalities and poverty, taking up measures to reduce the gender pay gap as well as other gender inequalities, and preventing age-related discrimination in employment
22. *encouraging* employers to value the experience of, and to retain and hire, older workers, promoting age management in both the public and private sectors, and supporting age-adapted, safe, health-promoting, and flexible working conditions throughout the entire working life
23. *providing* incentives for longer working life opportunities and more flexible retirement choices and fostering alternatives to early retirement including, but not limited to, rehabilitation, reintegration into work and flexible employment options to retain older workers
24. *planning* and implementing pension reforms, as far as not yet done, that take into account the increasing longevity and the extension of working lives, to ensure intergenerational fairness as well as the sustainability and adequacy of pension systems
25. *facilitating* the reconciliation of employment and care work, providing access to flexible working arrangements and appropriate care services, and promoting an equal division of care work between women and men, while considering a possibility to account for the time spent on tasks of family care in the calculation of the old-age pension.

III. Ensuring ageing with dignity by

26. *protecting* older persons' enjoyment of all human rights and dignity, promoting their autonomy, self-determination and participation in society, and making sure that no law, policy or programme leaves room for discrimination of any kind
27. *supporting* the necessary infrastructure and assistance to prevent all types of abuse and violence against older persons, ensuring their economic, physical, and psychological safety
28. *fostering* the development of innovative methods and services as well as user- and age-friendly technology and products for reliable, accessible and affordable support and care suited to the varied and changing needs of older persons, allowing them to maintain social connections and stay in their preferred living environment for as long as possible
29. *raising* quality standards for integrated social and long-term care and health services, as appropriate, and continuously adapting the status, training and working conditions of professional care workers, including migrant care workers, to the growing need for culturally-sensitive care and health services, thus alleviating the strain on family and informal caregivers while also recognizing and supporting them in their fundamental role of providing care
30. *supporting* research on individual and population ageing processes to better address emerging needs in ageing societies, with special attention to the situation of persons with dementia and/or mental and behavioural disorders, and their families
31. *promoting* the participation of both persons with dementia and/or mental and behavioural disorders and their informal carers in social and community life, and ensuring integrated care on a local basis with treatment, care, and support after diagnosis as needed, especially through community-based services
32. *respecting* the self-determination, independence and dignity of older persons, especially, but not limited to, towards the end of life, through patient-centred medical and social care, including access to appropriate palliative care and aspiring to facilitate where possible the preferences of older couples to be cared for together.

Final remarks

33. We emphasize that policies on ageing and their implementation are to be seen as a shared responsibility of all major actors in society. Consequently, there is a need for intergenerational dialogue and for effective collaboration among governments, policymakers, the private sector, social partners, researchers and non-governmental organizations, especially organizations of and for older persons, including migrant organizations, and older men and women themselves.
34. We underline the importance of monitoring and evaluating ageing-related policies on the basis of research and improved data collection, as specified in the UNECE Recommendations on Ageing-related Statistics, involving older persons and their organizations throughout this process.
35. We recognize the relationship between population ageing and economic, social and environmental development and uphold our commitment to the United Nations 2030 Agenda and its Sustainable Development Goals, including ending poverty in all its forms everywhere, ensuring healthy lives and promoting well-being at all ages, achieving gender equality, promoting full and productive employment and decent work for all as well as access to lifelong learning opportunities, and making cities and human settlements inclusive, safe, resilient and sustainable for persons of all ages.
36. We acknowledge recent international initiatives that highlight the importance of a life-course approach in mitigating entrenched inequities by implementing comprehensive, multisectoral policies that can deliver stronger growth, greater inclusiveness, and more intergenerational mobility.
37. We acknowledge the adoption of the Global Strategy and Action Plan on Ageing and Health adopted by the World Health Assembly in May 2016 which calls for combatting ageism, developing age-friendly environments, aligning health systems to the needs of older populations and developing sustainable and equitable systems for providing long-term care (at home, in communities, and in institutions).
38. We acknowledge that the UNECE Working Group on Ageing has proven its added value as an intergovernmental body that provides an institutional framework for the exchange of information and good practice and for engaging stakeholders, including civil society and the scientific community, in ageing-related policymaking. To further support the intergovernmental collaboration in the field of population ageing, we also acknowledge the need to explore the possibility of a resource-neutral transformation of the Working Group on Ageing to a standing sectoral committee without prejudice to the work of the UNECE in other areas of its mandate. We are committed to continue to actively participate in the Working Group for the implementation of the UNECE RIS/MIPAA and will contribute to its activities.
39. We appreciate the role of the UNECE secretariat and other stakeholders in assisting member States in implementing the UNECE RIS/MIPAA and the goals of the Ministerial Declaration 2017 through, inter alia, the support provided for developing national capacities on ageing.
40. We thank Portugal for hosting the fourth UNECE Ministerial Conference on Ageing in September 2017.

Appendix 6

Normative legal support for the implementation of the Madrid International Plan of Action in the Republic of Belarus

The main Law of the country (a legitimate national referendum) – the Constitution, proclaimed that the Republic of Belarus is a social legal state in which a person, his rights, freedoms and guarantees for their implementation are the highest value and purpose. Thus, the state undertook to create conditions for free and dignified development of each person, regardless of gender, age, religion, nationality, etc.

The social policy of the Republic of Belarus is based on the most important international legal documents – the Universal Declaration of Human Rights and the International Covenant on Economic, Social and Cultural Rights and is aimed at developing the social sphere, improving the conditions, image and quality of life of citizens, ensuring their vital needs and protection. Transformational changes in the social structure of the Belarusian society necessitate a change in the country's social policy vector towards the elderly population. At the same time, the main objective in accordance with the Madrid Plan and the goals of sustainable development is the desire to make an effective move away from state paternalism and to enable every person to live freely and independently in an ordinary social environment.

Being a member of the Commonwealth of Independent States, the Republic of Belarus accepted the appeal of the Interparliamentary Assembly of the CIS member states, addressed to parliaments and governments, “to consider the goal of its policy as the development of national programs and the adoption of legislative acts, the achievement of conditions under which the rights of older people to a dignified existence, security and the practical possibility of full realization of its human potential” [39].

Taking into account the principles and commitments enshrined in these documents, national legislation is being built. The basic rights and freedoms of citizens, including the elderly, are enshrined in section II of the Constitution of the Republic of Belarus and the normative legal acts adopted in its development. Currently, the country is implementing the State Program on Social Protection and Employment Promotion for 2016–2020, which includes the “Social Integration of Disabled People and Senior Citizens” subprogram, and the State Program “People’s Health and Demographic Security of the Republic of Belarus” for 2016–2020 [40, 41].

The Law of the Republic of Belarus “On Demographic Security of the Republic of Belarus” defines ageing of the population as one of the demographic threats. In this regard, state policy includes the improvement and provision of social and legal protection and the creation of decent conditions for the existence of the elderly; provision of conditions conducive to the prolongation of the active life of the elderly; social security of citizens in old age. Belarus is gradually implementing a concept that allows changing the negative expectations of the effects of ageing on the opportunities for more active use of the potential of older people.

It should be noted that, despite the current policy in the field of ensuring the rights of older citizens, the terms “old age”, “ageing”, “elderly age” and their definitions are not fixed in national legislation. At the same time, differentiation of the norms of legislation is present, for example, legal regulation is provided for persons of general established retirement age (hereinafter referred to as retirement age), persons over 75, 80 years old, etc. In the Criminal Code of the Republic of Belarus, for the purposes of the Code, the term “elderly” is defined, which means a person who has reached the age of 70 years.

The effectiveness of the state policy on ageing depends to a great extent on the institutional structure, that is, the organizational and coordinating framework that is used to define and implement policies for older people.

The National Institutional Mechanism on Ageing is the Ministry of Labor and Social Protection of the Republic of Belarus, which develops proposals and implements the main directions and priorities of state policy on all social issues. In its structure, there is an officially authorized coordinator on ageing. The Interdepartmental Commission on the Issues of Older Persons, Veterans and Persons Affected by the Aftermath of Wars, under the Ministry of Labor and Social Protection, coordinates the adopted state subprograms.

The table below presents the main provisions of the current legislation and institutional provisions for the Madrid Plan in Belarus.

Current legislation of the Republic of Belarus and institutional maintenance of the Madrid Plan

Criteria	Implementation
Basic normative legal acts	<p>The Constitution of the Republic of Belarus</p> <p>Law of the Republic of Belarus "On public service in the Republic of Belarus"</p> <p>The Labor Code of the Republic of Belarus</p> <p>The Law of the Republic of Belarus "On employment of the population of the Republic of Belarus"</p> <p>The Law of the Republic of Belarus "On Pensions"</p> <p>The Law of the Republic of Belarus "On Social Services"</p> <p>The Law of the Republic of Belarus "On State Social Benefits, Rights and Guarantees for Certain Categories of Citizens"</p> <p>Decree of the President of the Republic of Belarus "On State Targeted Social Assistance"</p> <p>Law of the Republic of Belarus "On Social Protection of Persons with Disabilities in the Republic of Belarus"</p> <p>Code of the Republic of Belarus on Education</p> <p>The Tax Code of the Republic of Belarus</p> <p>The Criminal Code of the Republic of Belarus and others</p>
Institutional structures	<p>Ministry of Labor and Social Protection of the Republic of Belarus</p> <p>Ministry of Education of the Republic of Belarus</p> <p>Interdepartmental Commission on the Issues of the Elderly, Veterans and Persons Affected by the Aftermath of Wars under the Ministry of Labor and Social Protection of the Republic of Belarus</p> <p>Belarusian Public Association of Veterans</p>
Statistical data	<p>Official annual statistical data of the National Statistical Committee of the Republic of Belarus (<i>in the public domain on the committee's website</i>)</p> <p>Statistical compilations (<i>publicly available on the committee website</i>):</p> <ul style="list-style-type: none"> Demographic Yearbook of the Republic of Belarus; Social situation and living standards of the population of the Republic of Belarus; Labor and employment in the Republic of Belarus; Family in the Republic of Belarus; Women and men of the Republic of Belarus; Culture in the Republic of Belarus; Network, staff of healthcare organizations and incidence of the population in the Republic of Belarus; Violations of law in the Republic of Belarus, etc. <p>Statistics of state bodies of the Republic of Belarus (<i>in the public domain on the websites of state bodies</i>)</p>
Budgets, funds	Social Protection Fund of the Ministry of Labor and Social Protection of the Republic of Belarus
A specific direction – Health and welfare in old age	<p>The provision of medical care to the elderly is carried out by healthcare organizations without age restriction, but without any special features.</p> <p>A geriatric service was established (7 geriatric centers and 178 geriatric offices).</p> <p>In all health organizations, schools of the "Third Age" have been established.</p> <p>Palliative care is provided to single elderly citizens in nursing hospitals, on nursing beds and medical and social beds in healthcare organizations and hospices.</p> <p>There are boarding homes for the elderly and disabled.</p> <p>For citizens who have reached the retirement age, disability is established without specifying the period of reassessment.</p> <p>In cases and in the manner determined by the Council of Ministers of the Republic of Belarus, information on food products contains information about indications for use by certain age groups.</p>

Criteria	Implementation
A specific direction – Elderly people and development	<p>Indication of age in the proposals on the available vacancies is recognized as a discriminatory circumstance.</p> <p>A person who has reached retirement age cannot be denied employment because of retirement age.</p> <p>Reaching retirement age is not a basis for termination of an employment relationship with an employee.</p> <p>An employee who is a pensioner, during the period of employment under an employment contract, is subject to compulsory state social insurance and is entitled to disability benefits.</p> <p>State targeted social assistance has been introduced.</p> <p>Tax privileges are fixed.</p> <p>Separate categories of pensioners are entitled to a 50 per cent discount on maintenance fees and (or) use of living quarters, maintenance of the elevator and utilities.</p> <p>The retirement age from January 1, 2017 is 60.5 years for men and 55.5 years for women, it will increase every year for 6 months to reach the age of 63 years for men and 58 years for women.</p> <p>Appeal for the appointment of any type of pension is a right, and not an obligation of the employee. If the person continues to work at the retirement age and at the same time refuses to receive a pension, the amount of his pension increases in accordance with the premium interest.</p> <p>Non-working recipients of pensions that have reached the age of 75 and 80 years have had their pensions supplemented.</p> <p>The mechanism of the state social order was introduced.</p>
A specific direction – Providing an enabling environment	<p>Local Councils of Deputies approve regional programs, concepts, action plans on the issues of social support for older people, and others.</p> <p>The tasks of territorial public self-governance include participation in social support activities for various categories of citizens who need such support (elderly people, etc.).</p> <p>Local executive and administrative bodies take measures to economically stimulate the construction and placement of retail facilities, public catering facilities, which provide care for the elderly, etc.</p> <p>The town planning documentation should provide for the creation of a network of facilities for physically weakened persons, taking into account their age and (or) diseases (hospitals, boarding homes, etc.).</p> <p>Turnover on the sale in the territory of the Republic of Belarus of services for the delivery of pensions and other social payments to individuals is exempt from the value added tax.</p> <p>Under contracts for the hiring of living quarters, families with citizens who have reached the age of 60 at their written request are provided with accommodation at the lower floors (no higher than 3) or in houses with elevators.</p> <p>Those who are in need of improvement of housing conditions, pensioners have the right to receive residential premises of social use.</p> <p>Local executive and administrative bodies, in cooperation with authorized bodies and organizations, carry out preventive measures aimed at preventing fires and other emergencies and related deaths, targeted inspections of the condition of living quarters (including single and lonely elderly citizens) and take measures for ensuring safe living conditions.</p> <p>Persons who have reached the age of retirement are released from the places of deprivation of liberty and, if necessary, by their consent, go to boarding homes for the elderly and disabled.</p> <p>The responsibility of adult children is provided for the care of disabled parents.</p> <p>A document such as a protective order establishing bans on communication, visiting, finding out the place of stay of a citizen who suffered from domestic violence was introduced.</p> <p>The duty of the citizen who committed violence in the family to temporarily leave the dwelling common to the citizen, who suffered from violence, is fixed.</p> <p>An institution of mentoring in organizations is consolidated.</p> <p>The elderly or retirement age is considered in determining the type of administrative and criminal penalties.</p>

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Scientific edition

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