



Gender and Social Class Inequalities in Active Ageing: Policy Meets Theory

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Countries involved:

EU-27

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Objectives

While active ageing (AA) has gained significant salience for both policy and research the issue of socio-economic inequalities in the ability to actively age has received little attention. The project investigates the links between the unequal distribution of resources needed to lead a fulfilling life (e.g. health, education, social inclusion) and AA achievement in European countries. We consider potential gaps both along the lines of gender and socio-economic condition (proxied by income).

Methods

We propose an analytical framework that complements standard outcome indicators for AA (1st tier), with inequality-sensitive indicators that reflect inequalities in the ageing experience of different groups (2nd tier), and indicators that aim to capture inequalities over the life course (3rd tier). We identify 27 indicators distributed between the four domains: employment, participation in society, independent, healthy and secure living and capacity and enabling environment. Four case studies (Estonia, Sweden, Denmark and the Netherlands) complement the quantitative analysis.

Figure 1 Indicators of gender and social class inequalities in active ageing by domain and level

				
Level 1 Active Ageing	Employment rate 55-64 & 65+ (SILC)	% of 55+ providing informal care (SHARE) % of 50+ engaged in volunteering activities (ESS)	Healthy Life Expectancy at age 50 (Eurostat) % of 55+ reporting good self-assessed health (SILC) % of 50+ feeling safe in their neighborhood (ESS)	% of 55+ with upper secondary education or higher (SILC) % of 55+ feeling depressed (SILC) % feeling free to decide for themselves (ESS)
Level 2 Inequalities & Processes in AA	% of 55+ employees in involuntary part-time (SILC) Reported reasons for working part-time (SILC) Gender pay gap (Eurostat) Sectoral gender segregation (LFS)	% providing daily personal care to another person (SHARE)	% of 55+ currently smoking (SHARE) % of 55+ drinking alcohol almost every day (SHARE) % of 55+ engaging in moderate physical activity weekly (SHARE) % of 55+ with unmet care needs (SILC) % reporting difficulty in making ends meet (SHARE)	% feeling very satisfied with life (SILC) % meeting socially with friends, relatives, colleagues at least once a month (ESS)
Level 3 Life-course	Average no. of years in paid employment (SILC) % above average cognitive skills in childhood (SHARELIFE)	No. of / length of maternity leaves (SHARELIFE) No. of children (SHARE)	% of 55+ who ever smoked (SHARE) % of 55+ reporting early childhood deprivation (SHARELIFE)	

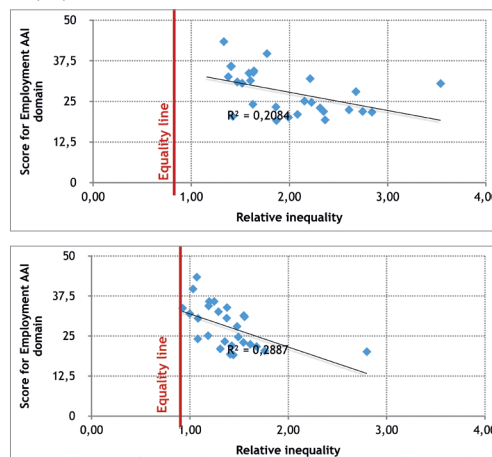
Findings/Results

- The lower educated are less likely to remain employed as they age, and this is especially the case where overall employment levels are low. Older women, more often than men, are working involuntarily in (low-paid) part-time positions.
- Because women often have poorer physical and mental health than men in old age and feel less safe in their environments, and individuals from lower socio-economic strata are exposed to higher health risks and face higher barriers to receive care, they are less likely to remain socially active.
- Countries with lower inequalities among older cohorts tend to perform better in AA achievement (Fig 2 exemplifies for inequalities in employment). However, even in front-runner countries some inequalities persist
- Policies that are effective in promoting general AA achievement can inadvertently contribute to increasing inequalities.

Take-away message

Existing inequalities across gender and income may limit the possibility of some groups to actively age, putting into question the objectives of active ageing policies.

Figure 2 Inequalities in the employment rate of the 55-64 year old group and AAI Employment domain achievement for EU28 countries



Further information see http://www.euro.centre.org/detail.php?xml_id=2563

