

**RESOLUTION (70) 16**

*(Adopted by the Ministers' Deputies on 15 May 1970)*

**ON SOCIAL AND MEDICO-SOCIAL POLICY  
FOR OLD AGE**

Considering that the aim of the Council of Europe is to achieve greater unity between its Members for the purpose of safeguarding and realising the ideals and principles which are their common heritage and facilitating their economic and social progress;

Having regard to the principles governing social progress embodied in the European Social Charter and the European Code of Social Security and protocol;

Pursuant to the provisions of the Programme of Work of the Council of Europe relating to the drawing up of a social and medico-social policy for old age;

Having regard to the conclusions of the report submitted by the experts appointed to prepare this study on the proposal of the Social Committee and the European Public Health Committee;

Considering that it is desirable to define the principles of a social and medico-social policy for old age,

The Committee of Ministers,

(i) Considering that owing to the twofold effect of the fall in the birth rate and greater longevity during the last generations, the proportion of old people among the populations of the various European countries has risen considerably and continues to rise;

(ii) Considering that technical progress and changing working conditions make it often more difficult to keep older people employed or provide them with work suited to their abilities;

(iii) Considering that as a result of economic and social progress and particularly the development of an industrial civilisation, the changes in family life and housing conditions in urban areas, old people may tend to become isolated and to count less and less on the practical and moral support formerly provided by their next-of-kin under traditional civilisations;

(iv) Considering that the combined effect of these many developments leads too often to a more or less deliberate rejection of the aged by present-day society;

(v) Considering that the attitude of old people has changed and that they now tend to seek greater autonomy and independence;

(vi) Considering that it is therefore imperative to define and apply an overall old age policy aimed at permitting old people to occupy a suitable place in the society of today and tomorrow; that such a policy must provide for the co-ordination of measures taken in many closely interdependent fields,

Recommends the governments of member States to take into account in formulating their policy for old age, the following principles which should also be applied to aged foreigners residing on their territory, subject to a residence qualification where applicable.

### Introduction

1. The aim of an old age policy should be to ensure a better distribution of the burden of inactive old people among the active population and lead to the achievement of a healthy society based on an economic, psychological and social coexistence of members of different age groups.

2. In the distribution of the national income, an adequate share should be allocated to old people corresponding to their particular needs. Appropriate machinery should be devised to ensure that this share is allocated according to simple and sound criteria.

3. Apart from the question of material support, the definition of old people's

place in society calls for the continuous education and information of the active population, the aged themselves and public opinion as a whole on problems connected with old age and their solutions. This is a prerequisite for a better mutual understanding between the different generations.

4. Segregation of the elderly is generally to be deplored, and their integration within the wider community promotes a more balanced society.

5. The various measures called for by a rational old age policy are closely interdependent and cannot be fully effective unless applied jointly.

6. The social action for old people should be harmonised so as to preclude disparities in situations leading to economic and social imbalance which may become greater in the future owing to growing migration facilities.

#### Resources and income

7. Old age protection should be extended to the whole population as far as necessary.

8. The age of entitlement to the old age pension should be determined, *inter alia*, in the light of the population situation and the financial implications.

9. The old age pension rates should be as high as possible, bearing in mind the standards laid down in international social security instruments, notably the European Code of Social Security and protocol, the ILO Social Security Convention (minimum standards) of 1952 and the ILO Convention of 1967 on invalidity, old age and survivors' benefits.

10. The minimum old age pension rate secured to persons who have completed, prior to the contingency, the qualifying period required for the entitlement to a full pension (in the sense of paragraph 1 of Article 29 of the European Code of Social Security) should be adequate to guarantee the beneficiary a decent standard of living.

11. In the absence of an old age pension, as referred to in paragraph 10 above, needy old people should receive sufficient means to maintain a decent standard of living.

12. Both pensions and subsistence allowances should be adjusted at appropriate intervals to any variations in the cost of living or the general income trend arising from the increase in productivity.

13. There should be adequate co-ordination between statutory pension schemes so as to prevent changes in occupation from entailing loss of pension rights and to eliminate impediments to occupational mobility.

14. Similarly, with a view to avoiding all discrimination between old people living in the same community, it would be desirable to maintain and apply the principle of equality of treatment of nationals of other member States with the nationals of the State in question and to ensure the maintenance of acquired rights or rights in course of acquisition so far as old age pensions are concerned, by the ratification of international instruments concerning the social security of migrant workers; it being understood that the grant of non-contributory benefits could be made subject to certain conditions.

15. Measures should also be taken to harmonise the methods of protecting old people, both by the ratification of international instruments and by joint steps taken within the Council of Europe framework.

### Employment

16. In general, any policy governing the employment of the aged should be based on the principles established by the Manpower and Social Affairs Committee of OECD (Conclusions of 5 January 1967).

17. Measures to provide suitable employment opportunities for older people should be considered within the framework of an overall employment policy.

18. Measures should be taken to encourage and facilitate retention by the aged of an occupation suited to their capabilities so as to minimise the consequences and also one cause of individual ageing and to prevent the economic difficulties due to the presence of too large a group of inactive persons.

19. To enable the fullest possible adjustment of man to his work and vice versa, more particularly in the case of old people, measures should be taken to encourage and support adaptation of jobs to enable older people to continue working.

Where this adaptation is not desirable or possible it will be advisable to encourage the transfer of older workers.

In order to ensure that such a transfer is not too radical for workers approaching old age, the work they do during their whole working life should be continually adjusted to physiological and psychological changes all through life.

20. Measures should be taken to offer facilities for both education and training :

(a) educational steps should be taken in time to enable old people to maintain their powers of adjustment and to keep abreast of technical developments;

(b) training should be provided so as to facilitate a change of occupation to one more suited to the worker's preference and changing ability.

21. In order to provide quantitatively and qualitatively suitable jobs for older workers, efforts should be made to create jobs adapted to their needs and to encourage the flexible distribution of the various kinds of jobs among age groups by all appropriate means according to the circumstances of the country concerned.

22. Retirement schemes should be so adjusted as to promote both prolongation of active life and occupational mobility by making appropriate provision whereby pensions may be combined with paid employment.

23. Steps should be taken to adapt the employment exchange services and the methods used by them so as to facilitate the transfer and employment of old people.

24. Measures such as adaptation allowances and training grants should be taken to prevent unemployment of old people.

#### Housing

25. Steps should be taken to enable old people to remain in their own homes as long as possible.

26. A special effort should be made to adapt accommodation occupied by old people to meet their changing needs as well as their wishes.

27. Where it has not been proved possible for old people to remain in their homes, if need be after adapting them, and where they are consequently obliged to leave their homes (tied houses, ill-adapted or unadaptable accommodation, remoteness), public authorities should endeavour to provide new accommodation sufficiently large and especially designed for them in order to avoid their transfer to collective establishments.

28. The new accommodation should be situated either in population centres, or in their immediate vicinity, provided there are easy means of communication, and where the occupants can receive appropriate social and medical services.

In addition, account should be taken of old people's desire to live near their family.

29. Old persons should be able to select accommodation either interspersed with ordinary family dwellings or in special blocks of flats, with the availability of communal services in either case; a high density of the elderly population should, however, be avoided.

30. When new dwellings are built, account should be taken of the need to prevent those accidents to which old people are prone.

31. Recourse should be had to collective accommodation only when all the aforementioned measures are insufficient to enable old people to remain in their own homes.

32. Old people whose state of health is such that they require care which cannot be given at home should be able to receive it in establishments catering for their needs, namely :

- residential homes for those who are no longer able to care for themselves in their own homes even with the help which the social services can give them, but who do not need continuous nursing care;

- nursing homes for old people suffering from serious infirmities or chronic illnesses who need constant medical and nursing care.

33. It would be advisable to have available in each country the number of beds corresponding to the need, bearing in mind the steps taken to enable old people to remain at home.

34. The number of beds in an old people's home should ideally be small enough for the establishment to keep a home-like atmosphere <sup>1</sup>.

35. In an old people's home, each resident or couple should have a separate bedroom with its own washbasin and, if possible, its own toilet. It is desirable that the couples should have two beds and one extra room.

36. Installations and fittings in all old people's homes should be designed for easy use. Establishments with several floors should have lifts.

37. Where practicable, a doctor should be attached to each old people's home with responsibility for the general health requirements of the establishment, for giving residents the opportunity of regular medical examinations, and for treating those who do not have their own doctor. The presence of this doctor should never prevent residents from calling their own doctor if they wish.

The services of a social worker should also be available to each home.

38. To reduce difficulties encountered in the recruitment of staff for old people's homes, establishments should also be fitted with labour-saving devices, and the employment of part-time staff should be considered.

39. It would be desirable to organise special training for all staff for old people's homes and organisations and to supply all categories of staff specialising in the care of the elderly with appropriate information.

40. Obsolete old people's homes should be progressively abandoned in favour of modern homes suitable to the needs of elderly people and the premises of adaptable existing old institutions should, where possible, be converted into nursing homes for old people suffering from serious infirmities or chronic illnesses, if new nursing homes cannot be provided.

41. Establishments for the aged, whether medical or not, should be supervised by the public authorities to ensure that they comply with specified standards and are properly run administratively and technically.

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1. While 80 to 100 beds is considered the best number by some, others consider that the number may be higher, provided that architectural and functional provisions are adequate.

## Protection against road accidents

42. Special measures should be taken to protect old people in the streets. To this end :

1. Drivers of motor vehicles should be made aware of the special risks to which old people are exposed in the streets and should realise the following points :

- old people often step off the pavement without looking,
- they can often only manage to get across a road at all by walking slowly and watching every step,
- they sometimes lose their nerve in the middle of the road and turn back without warning,
- many old people have poor eyesight and are hard of hearing,
- they often have a preference for dark clothes and so are difficult to see at night ;

2. Local authorities should provide special facilities for old people crossing the road.

## Medical problems

43. It would be desirable, on the one hand, for all future doctors to undergo appropriate training in geriatrics and gerontology and, on the other hand, for post-graduate courses to be provided to enable doctors to supplement their knowledge and bring it up to date.

44. Medical schools should have a Chair of Geriatrics which would make it possible to co-ordinate the various geriatric activities within a school and to promote research.

45. Adequate theoretical information and practical experience should be included in the training courses for nurses, physiotherapists, occupational therapists and social workers as well as in post-graduate geriatric training courses.

46. Preventive care and treatment should aim at helping old people to preserve their physical and mental powers in the greatest measure possible.

47. Industrial medicine should provide advice on regular medical examinations, on prevention of accidents in work places, on planning employment adapted to elderly workers, as well as on preparation for retirement. It should pay special attention to the problems of workers over the age of 40.



48. The public should be informed regarding the advantages for elderly people of regular medical examinations, which might be organised on a voluntary basis, by the public authorities.
49. The public authorities and voluntary organisations concerned with the care of the aged should give special thought to health education.
50. Priority should be given to the care of old people who continue to live at home : such care should be given through normal home care services or specialised schemes such as mobile services.
51. Establishments for chronic patients and special functional rehabilitation centres should be provided for old people, where possible, in addition to the geriatric departments of teaching hospitals. Services provided in other hospitals should be co-ordinated with those provided in the teaching hospitals.
52. Hospitals for old people in need of continuous nursing and medical care may have more beds than residential homes. They should not, however, have more than 250 beds, divided into wards of 25 to 30 beds, where the construction of larger establishments is not required for medical reasons.
53. Such establishments must have a homely atmosphere and appropriate facilities not only for treating the sick but also for rehabilitation. These latter facilities must be available to out-patients.
54. These establishments, which are real nursing establishments, must have :
- (a) an adequate number of specialised medical staff;
  - (b) an adequate number of specialised nursing staff;
  - (c) a social service.
55. Old people suffering from minor mental disturbances need not normally be treated in specialised establishments. Those with more serious mental disorders should be admitted to smaller special establishments rather than be placed in psychiatric hospitals.
56. The medical care facilities for the aged at local level should be co-ordinated, as appropriate, without prejudice to liaison with social services.

57. All necessary measures should be taken to provide for the care of the aged to be financed either out of public funds or under the social security scheme.

#### Social services

58. Social service arrangements should, as a general rule, correspond with the wishes of the elderly.

59. Special measures should be taken to provide the common social services designed for the population as a whole with facilities enabling them to avoid segregating the aged from the young generation.

60. When dealing with the elderly, the social services should collaborate with as large a section of the local population as possible, in particular close relations and neighbours.

Those services should aim at attenuating, and, if possible, eliminating, the feeling of isolation, uselessness or dependence due to advancing age and at creating, on the contrary, such conditions as will enable the various generations to live together in an atmosphere of friendliness and mutual assistance.

61. The social services should pursue, inter alia, the following objectives :

(a) old people should play an active part in the community ;

(b) basic services designed for the aged should be maintained at the same level as those for other age groups ;

(c) services should be available free for every elderly person, apart from a contribution from those concerned, according to their means ;

(d) the best possible use should be made of the capabilities of the elderly, taking into account individual circumstances ;

(e) close association between generations in cultural, occupational and recreational matters.

62. In view of the need to secure for all old persons, whatever their physical or mental condition, maximum care, as appropriate, and the best conditions for a decent way of life, the principle of non-segregation should be applied as far as possible, even in the case of persons unable to adapt themselves to social conditions.

63. Special steps should be taken to see that social service staff are capable of understanding the old persons concerned and of handling their problems and treating their needs without any distinction necessarily being made between different generations.

64. Social services, which vary according to whether they are applied to able-bodied people living alone or able-bodied people living with their families, should be classified in accordance with priorities which should take into account the traditions, the political and social systems and the economic situation of each country. The general aim should be to reconcile, on the one hand, the wishes of the elderly to retain their independence and the opportunity to lead a purposeful life and, on the other hand, measures which make the best use of the national resources.

Once basic individual needs in the matter of income, general health, treatment, and care in case of illness or declining capacity have been met, the following social services should be provided, according to the economic, social and demographic situation of each country concerned :

(a) housing services ;

(b) services for the partially or totally incapacitated living alone or with their families, supervised accommodation, meals on wheels, transport arrangements ;

(c) services for the able-bodied living alone or with their families ;

(d) services for the able-bodied living in communal establishments ;

(e) comprehensive service centres for the elderly providing facilities in the social, medical and cultural fields.

Special attention should be paid to the creation of leisure-time facilities (study groups, clubs, meetings rooms, social centres etc.), the organisation of holidays and the provision of libraries.

65. Aid, including possibly financial aid, should be given if need be, to the family which continues to look after an old person.

66. In order to preserve the self-respect of elderly persons, social services should be presented in a form acceptable to them.

67. Old persons should be informed as fully and as precisely as possible of the services to which they are entitled or of which they may avail themselves. Proper planning should enable mass communication media to be used for that purpose.

68. Through the establishment of local advisory centres and the training of qualified personnel, old persons should be encouraged to seek for themselves information which is relevant to their circumstances and to make full use of the available advice and help which should be given to them free and in an impartial and tactful manner.

69. The information campaign designed to reach old persons, and indeed public opinion as a whole, should draw particular attention to the need to prepare them properly for their approaching retirement without overlooking the possibility of training them to practise a hobby.

70. In countries where private relief activities play a significant part in assistance for old people, special encouragement might be given to private organisations which should, in a spirit of good co-operation with the public services, be assisted financially and otherwise by the authorities who, naturally, should continue to assume full responsibility for social assistance.

Regular two-way consultation between private and public services is essential to ensure efficient aid to old persons, and this requires, moreover, the support of all sectors of the population.

71. Besides the steps recommended for local co-ordination of the various medical and social services, social policy for the elderly and, in particular, the social services made available to them in both the public and private sectors, should be co-ordinated nationally.

#### Scientific research

72. Research work, whose findings would throw light on the phenomenon of premature ageing and subsequently enable it to be prevented or halted, should be undertaken in the social, medical, biological, psychological, demographic and economic fields.

Emphasis should be laid specifically :

(a) on a study of the physiological and psycho-physiological mechanisms of senescence, with special reference to problems of nutrition and mental health;

(b) on a critical evaluation of routine medical examinations;

(c) on fundamental research into molecular biology;

(d) on ecological factors of all kinds which may affect the processes of senescence;

(e) on sociological and psychological research in connection with ageing and old people, their interaction with younger groups, public opinion and the attitude of society towards ageing and towards old people;

(f) on all the economic and technical problems raised by the employment of the elderly.

73. Research work already being undertaken in a number of different countries must be pursued and intensified with a view to securing improvement in the organisation of social and medical services for old persons.

74. An effort should be made to co-ordinate research work at European level by effecting liaison between existing organisations.