

Joint Programming Initiative

More Years, Better Lives
The Potential and Challenges of Demographic Change

Policy Brief

Austria

- → The population of Austria is growing and ageing.
- → The relatively low level of participation of older people in the labour market has been a major and widely addressed policy concern.
- → Data sources on demographic change in Austria are vast. However, some challenges remain as to the harmonisation of the Austrian data collection with international sources, the overrepresentation of administrative data, and the general accessibility.



1. Demographic context

In 2012, the total population of Austria was 8.4 million (8,443,018). The percentage of those aged 50 and over was 37.1%, and 17.7 % were 65+ years.

According to the latest population forecasts, the population will increase from the current 8.4 to about 9.5 million by 2050. As in other European countries, the age structure in Austria is shifting significantly towards older persons. The share of the working-age population, aged between 20 and 64, is projected to drop from 61.9% in 2011 to 53.4% by 2050 due to demographic ageing. Life expectancy among both men and women has been rising for decades, and reached 83 years for females and 80 years for males in 2011. Life expectancy at age 50 was 32.9 years (30.4 years for men and 35.1 years for women), while people at 65 years had an average remaining life expectancy of 20.1 years in 2011.

Cardiovascular diseases are the main cause of death for both males and females, followed by cancer. Increases in mortality from diabetes and certain infectious diseases can be observed in recent years. Furthermore, a pronounced increase in mental disorders have been recorded, which, together with musculoskeletal disorders, are the main causes of early retirement. Among older workers (aged 50+) in Austria, the employment rate increased from 24% in 2004 to 33% in 2012. The employment rates for these two age groups were at the level of the EU27 average in 2012. The average effective retirement age of recipients of direct pensions (oldage and invalidity pensions) was 58.4 years (59.4 years for men and 57.4 years for women) in 2012. Considering only oldage pensions, the actual retirement age for women was 59.3 years and 62.9 years for men. While the current statutory retirement age is 65 for men and 60 for women, the age at which women are eligible to retire and receive an oldage pension will be gradually raised between 2024 and 2033 to approach that of men.

The Austrian pension system strongly relies on the social insurance pensions system that combines the first (statutory) and second (occupational pension) pillars. In the early 2000s, the Austrian pension system was subject to several important reforms that can be seen, at least in part, as a response to the challenge of sustaining the pension systems. In Austria, the public pension system is the most important instrument providing financial security in old age (about 90% of the pension benefits are paid by the statutory pension insurance, which is compulsory for all economically active people in the framework of the general social insurance system).



2. Demographic change and policy concerns

The relatively low level of participation of older people in the labour market has been a key policy concern in Austria. In response to this problem, a wide variety of measures promoting older people's (re-) integration into the labour market have been undertaken, ranging from substantial reductions in ancillary wage costs to active support of integration through qualification measures. An additional measure, which aims to maintain the employment of older workers, is a part-time employment scheme that provides incentives for older employees to continue working. The Austrian government has implemented the National Reform Programme (NRP) and the Stability Programme in order to meet the goals set by the EU 2020 strategy. In order to meet the national 2020 employment targets, the Austrian government has developed a number of measures:

- 1. The retirement age of women will be gradually adjusted by 0.5-year intervals between 2024 and 2033 until it is equal to 65, which is the pensionable age for men.
- 2. Maintaining and improving the ability to work and the employability of older workers has become a main policy priority in Austria. Thus, in the past few years, the further development and integration of preventive and health-promoting elements in labour market policy programmes were intensified with the goal of reducing the number of people who, citing health reasons, end their active working lives prematurely.
- 3. Several reforms of early retirement schemes and general pension reforms have been adopted to increase the effective retirement age. First, following a reform of the disability pension system, the limited-term disability pension will be replaced with a set of benefits or rehabilitation benefits for all individuals under the age of 50 by 2014. In addition, the eligibility age for collecting a disability pension, which is currently 57, will be increased gradually to age 60 by 2017.
- 4. A number of instruments have also been developed in recent years to promote and monitor age diversity programmes in the workplace. As was set out in the Austrian Health and Safety at Work Strategy 2007-2012 and the subsequent 2020 strategy, the goal of these programmes is to motivate enterprises to analyse the workforce's age structures and to identify and implement age-appropriate measures for work processes tailored to the sector and organisation.

- 5. An important step in the promotion of lifelong learning in Austria has been the adoption of the Strategy for Lifelong Learning in 2011. The main goal of the strategy is to establish a country-wide resource for education and training services for older people, which are then provided in their local communities.
- 6. Austria's policy response to population ageing in the area of long-term care dates back to 1993, when the Federal Long-Term Care Act came into force. Since then, a number of measures have been implemented, e.g. a legal framework for supporting 24-hour care (2007), Long-term care benefits were increased (2009) and since 2011 the Long-Term Care Fund Act (Pflegefondsgesetz) provides the legal basis for creating the Long-Term Care Fund.

3. Data sources

General issues

A vast amount of data relevant to the issues of ageing and demographic change is collected by various Austrian government agencies and their research partners. Austria's main statistical body, which is operated by the national government, is Statistik Austria (Statistics Austria). Statistik Austria maintains and is responsible for publishing and providing access to many of the data sources included in the JPI data map. In 2011, the Federal Ministry of Labour, Social Affairs and Consumer Protection (BMASK) published the annotated bibliography "Austrian research data on the topic of old age", an invaluable resource on Austrian data sources related to ageing and the elderly. The Main Association of Austrian Social Security Institutions (Hauptverband der österreichischen Sozialversicherungsträger) is also an important source of data collection and processing, particularly in the Social Systems and Welfare and Work and Productivity domains. The Central Social Security Registry (CSSR) contains numerous databases and datasets of interest to researchers on health insurance and pension benefits and coverage. In addition, the Federal Ministry of Health (BMG) and the Institute for Empirical Social Research (IFES) are active in funding and/or implementing data sources that appear in the JPI data map for Austria.

There are a number of small-scale occasional studies that focused on the elderly population and investigated a broad range of topics, including productivity and employment, quality of life, technology use, and relations between the generations. Although these studies were conducted only once to fulfil specific research purposes, they provide rich information on the living conditions,

wellbeing and activities of the elderly, and are thus highly relevant for this JPI project. Another advantage is the internationally comparability of the Austrian data sources.

Health and Performance

The data sources included in the Health and Performance domain can be grouped into three main categories: surveys, registries and databases. The surveys capture mainly self-reported health status, patient satisfaction with care services and quality of life; while the registries consist largely of administrative and clinical data on the health of those who come into contact with the health care system, including information on cancer patients and life events (births and causes of death).

Social systems and welfare

TThe data sources included in this domain capture a broad range of data on all facets of Austria's social insurance bodies, including on the health insurance, pension and long-term care benefits received, as well as on household income, expenditures and consumption. The Consumption Survey, which has been carried out every five years since 2000 by Austria's central statistical office; and the Ageing Society survey, which was conducted once in two waves in 2006 and 2008; are the two national quantitative data sources in the Social Systems and Welfare domain.

Work and productivity

The data sources contained in the Work and Productivity domain include information on the employment status and work satisfaction of residents. In addition, people's use of time—including leisure time, volunteer activities and time spent caring for family members—is collected. A small cross-sectional survey also captures data specifically on the untapped resources of elderly Austrians.

The Employment Registry, which is coordinated jointly by the BMASK and the Austrian Employment Service (AMS), regularly collects and publishes data on the labour market, including variables such as unemployment/employment and the number of job seekers and job availability. Data on job training and unemployment benefit recipients are also collected.

Education and learning

Research conducted at the national level on education and learning among the elderly population is limited. Most of the data come from European or international-level sources, such as the PIACC (the first wave of which is currently underway), the Adult Education Survey, the Lifelong Learning Survey (ad-hoc LFS module 2003) and the Vocational Education and Training Survey (EU-LFS).

At the national level, two cross-sectional surveys have been conducted on the subject; both were funded by the BMASK: i.e., the Learning Needs and Arrangements of Elderly People Survey and the Education and Active Old Age Survey.

Housing, urban development and mobility

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Public attitudes towards old age

The two surveys included in the Public Attitudes Towards Old Age domain are the Intergenerational Solidarity in Austria survey, commissioned by the BMASK, and the Gender and Generations Survey (GGS).

Social, civic and cultural engagement

In this domain, data are available on how Austrians spend their time, including time spent at work and in social and civic engagements. The three data sources that have the most relevance for the Social, Civic and Cultural Engagement domain are all ad hoc, voluntary components of the Austrian Microcensus. The first is the Structure and Volume of Voluntary Work survey. The two other datasets, the Time Wealth Survey and the Time Use Survey, collect information on the subjective quality, purpose, and type of activities people are engaged in.

Uses of technology

Two of the studies in the Uses of Technology domain – Use of ICT in Households and the Austrian Online Monitor – are large-scale surveys that are conducted regularly over several years. The third survey, Senior-friendly Products — New Technologies, was carried out once in two waves and has a small sample size.

Wellbeing

The data sources in this domain can be loosely grouped into those that take a comprehensive approach to assessing subjective wellbeing, such as the Quality of Life in Old Age Survey and the Austrian Social Survey; those that address wellbeing from a health perspective, such as the AHIS, the ÖGIS and the IPSS; and those that are concerned with wellbeing from an employment and so-

cial security point of view, such as the Ageing Society Survey, the Consumption Survey and the Austrian Work Climate Index. Two additional datasets are included here because they hone in on specific aspects of wellbeing: the Time Wealth Survey and the Intergenerational Solidarity Survey.

Intergenerational relationships

Three surveys have relevance for the Intergenerational Relationships domain. They are: the Intergenerational Solidarity in Austria survey, the Gender and Generations Survey (GGS) as well as the Undiscovered and Unused Resources and Potential of the Elderly survey.

4. The data and the policy agenda: gaps and challenges

A number of gaps in data collection in the area of ageing and demographic change became apparent after the data mapping process was completed. The issues addressed in this section include the extent to which the Austrian data collection agenda is harmonised with the EU statistical data programme, the emphasis placed on reimbursement data in health-related data sources, the overrepresentation of administrative data, and the general accessibility of data sources contained in the data map.

The strong alignment of the Austrian data collection agenda and the integration of Austrian data sources in cross-national data series have multiple advantages, the most important is the comparability of data with other participating EU countries. This alignment also reflects a harmonisation of Austrian national policies on ageing within the broader policy framework of the EU. A significant disadvantage of this approach is, however, that social issues in the realm of ageing that are specific to the Austrian context are somewhat marginalised. A second area of policy concern is the lack of emphasis on surveys that seek to assess the health status of members of the population aged 50 and older. Most of the large datasets in the Health and Performance domain are primarily concerned with tracking reimbursement information for inpatient care and pharmaceutical use. Meanwhile, only

minimal amounts of data are available on outpatient and ambulatory care, and people living in institutions are generally excluded from sampling. There is a need for additional quantitative research that takes a longitudinal approach, that focuses on outpatient health and long-term care services, and that includes the elderly population living in institutions.

The predominance of registry data across multiple JPI domains is another significant issue. In the Health and Performance, the Social Systems and Welfare and the Work and Productivity domains in particular, administrative data collected by government agencies for internal use is the primary source of national data available to researchers and policy-makers, but the data needs to be accessible and affordable.

Policy-makers would benefit from incorporating a number of actions into the research and policy agenda for healthy ageing. First, an expansion of the scale and frequency of national surveys that focus on the circumstances of elderly people would provide researchers, as well as policy-makers, with important insights into the challenges and opportunities associated with demographic change. Second, although the coverage by Austrian data sources of the major variables is quite good, many of the datasets are several years old, and more current data are not always made readily available in a timely or affordable manner. To accomplish these and other aims, a stakeholder process could be initiated in which people representing all sides of the issue meet in a forum in which they are able to make suggestions and steer the agenda.

This policy brief summarises the major data sources for the ten policy fields identified by the working group of the Data Mapping Project of the Joint Programming Initiative "More Years, Better Lives". An extended version of the original text and more information on the described sources are available at http://www.jpi-dataproject.eu/.

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