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## Economic Commission for Europe

### Standing Working Group on Ageing

#### **Eighteenth meeting**

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Item 7 of the provisional agenda

#### **Fifth review and appraisal of the implementation of the Madrid**

#### **International Plan of Action on Ageing and its Regional**

#### **Implementation Strategy**

## Guidelines for National Reports

### *Summary*

These reporting guidelines were developed to assist the United Nations Economic Commission for Europe (UNECE) member States in the preparation of their national reviews and national reports on measures taken between 2022 and 2026 in implementing the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy in the UNECE region. The information shared in the national reports will inform the regional synthesis of findings that will be prepared by UNECE in 2027 to inform the analysis of progress in the UNECE region, identify key challenges and policy priorities for the future.

Fifth review and appraisal of the implementation of the  
**Madrid International Plan of Action on Ageing**  
and its Regional Implementation Strategy in the UNECE region

## **Guidelines for National Reports**

October 2025

### **Introduction**

Population ageing continues to advance in the UNECE region requiring a decisive policy response and strategic foresight in preparing societies and economies for the implications of demographic shifts.

The Madrid International Plan of Action on Ageing (MIPAA) adopted in 2002, and its Regional Implementation Strategy (RIS) for the UNECE region, set an ambitious agenda for ageing-related policies which aim to improve the lives of older people and bring economies and societies into harmony with demographic change

The fifth periodic review and appraisal of MIPAA, which will mark its 25<sup>th</sup> anniversary, provides the opportunity to assess progress made in implementing MIPAA as well as regional agreements such as the UNECE Regional Implementation Strategy (2002), and the Rome Ministerial Declaration “A Sustainable World for All Ages: Joining Forces for Solidarity and Equal Opportunities Throughout Life” (2022).

These reporting guidelines were developed to assist UNECE member States in the preparation of their national reviews and national reports on measures taken between 2022 and 2026 in implementing the above. The information shared in the national reports will inform the regional synthesis of findings that will be prepared by UNECE in 2027 to inform the analysis of progress in the UNECE region, identify key challenges and policy priorities for the future.

## Goals and commitments

MIPAA identified three priority areas for action, notably “older persons and development”, “advancing health and well-being into old age” and “ensuring enabling and supportive environments”, to respond to the opportunities and challenges of population ageing in the twenty-first century and to promote the development of a society for all ages.<sup>1</sup>

The Regional Implementation Strategy for MIPAA tailored the comprehensive international plan to the specificities of the UNECE region<sup>2</sup>. The overarching emphasis of the strategy, known as MIPAA/RIS is to “mainstream ageing concerns in all policy fields with the aim of securing gender-sensitive and evidence-based co-ordinated and integrated policies to bring societies and economies into harmony with demographic change”.

MIPAA/RIS spans ten commitments covering different facets of population and individual ageing:

1. Mainstream ageing in all policy fields
2. Ensure full integration and participation of older persons in society
3. Promote equitable and sustainable economic growth in response to population ageing
4. Adjust social protection systems in response to demographic changes and their social and economic consequences
5. Enable labour markets to respond to the economic and social consequences of population ageing
6. Promote life-long learning and adapt the educational system in order to meet the changing economic, social and demographic conditions
7. Strive to ensure quality of life at all ages and maintain independent living including health and well-being
8. Mainstream a gender approach in an ageing society
9. Support families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members
10. Promote the implementation and follow-up of the regional implementation strategy through regional cooperation

In 2022, UNECE member States decided to focus on three broad goals during the fifth implementation cycle of MIPAA/RIS between 2022 and 2027, notably to:

1. Promote active and healthy ageing throughout life
2. Ensure access to long-term care and support carers and families, and
3. Mainstream ageing to advance a society for all ages

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<sup>1</sup> For details, see <https://unece.org/DAM/pau/age/mica2002/documents/Madrid2002Report.pdf>

<sup>2</sup> For details see [https://unece.org/DAM/pau/age/mica2002/documents/ECE\\_AC23\\_2002\\_2\\_Rev6\\_e.pdf](https://unece.org/DAM/pau/age/mica2002/documents/ECE_AC23_2002_2_Rev6_e.pdf)

In the national reports, member States are invited to share actions taken since 2022 towards meeting commitments agreed in Rome and more broadly towards implementing MIPAA/RIS.<sup>3</sup>

## Periodic reviews and appraisals of progress

The Madrid International Plan of Action on Ageing (MIPAA) adopted by the Second World Assembly on Ageing in April 2002, stipulated that a systematic review of its implementation was essential for the Plan's success in improving the quality of life of older persons. The UNECE Regional Implementation Strategy (RIS) for MIPAA, adopted by the UNECE Ministerial Conference on Ageing in Berlin in 2002, reaffirmed this commitment and stressed the importance of an effective follow-up to the implementation of the RIS that should allow for a productive exchange of information, experience and best practices.

The review and appraisal of the Madrid Plan of Action take place every five years. The recommended process involves a participatory approach engaging civil society and older persons themselves and is designed to assist member States in receiving feedback on the policies and programmes they have implemented.<sup>4</sup>

Following the national reviews, United Nations regional commissions consolidate the findings of the national reviews at the regional level. In the UNECE region, the first four cycles of review and appraisal of MIPAA/RIS were concluded by UNECE Ministerial Conferences in 2007 (Leon, Spain), 2012 (Vienna, Austria), 2017 (Lisbon, Portugal) and 2022 (Rome, Italy). Review and appraisal processes culminate with a global review by the Commission for Social Development.

## Modalities for the fifth review and appraisal of MIPAA/RIS

The modalities for the fifth review and appraisal of the Madrid International Plan of Action on Ageing (MIPAA), 2002, agreed by member States at the sixty-third session of the Commission for Social Development were endorsed by the Economic and Social Council Resolution E/RES/2025/8 on 10 June 2025<sup>5</sup>.

The Resolution recommends the following approach to the national reviews:

- *Invites member States to identify actions they have taken since the fourth review and appraisal exercise, with the aim of presenting this information to the regional commissions during 2027 and invites each member State to decide for itself the actions or activities it intends to review, utilizing a bottom-up participatory approach*

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<sup>3</sup> See the mapping in the Annex on corresponding policy goals and commitments

<sup>4</sup> [https://unece.org/DAM/pau/\\_images/MIPAA\\_Review\\_guidelines\\_global.pdf](https://unece.org/DAM/pau/_images/MIPAA_Review_guidelines_global.pdf)

<sup>5</sup> <https://docs.un.org/en/E/RES/2025/8>

- *Encourages member States to establish or strengthen a national coordination body or mechanism, as appropriate, in order to, inter alia, facilitate the implementation of the Madrid Plan of Action, including its review and appraisal*
- *Also encourages member States to utilize more fully, within their specific national circumstances, a bottom-up participatory approach to the review and appraisal of the Madrid Plan of Action by inviting, inter alia, civil society, including organizations of older persons, to participate in the fifth review and appraisal cycle at the national and regional levels by submitting their views on the implementation of the Plan of Action and on regional plans of action, and further encourages member States to consider providing adequate assistance for the participation of civil society in the review and appraisal*
- *Invites member States to consider collecting and utilizing, in their national review and appraisal exercises, a combination of quantitative and participatory qualitative data gathering and analysis, disaggregated by age and also, when necessary, by other relevant factors, including sex and disability, and, where appropriate, sharing of best practices in such data collection*

## **Timeline for the fifth review and appraisal<sup>6</sup>**

**2026:** National reviews and appraisal

**2027:** Regional review processes

**2028:** Global review by the Commission for Social Development at its sixty-sixth session

The fifth review and appraisal of MIPAA/RIS for the UNECE region will be launched with the 18<sup>th</sup> meeting of the Standing Working Group on Ageing in November 2025.

The timeline for the regional review process is as follows:

**November 2025-October 2026:** National review and appraisal processes

**October 2026:** Deadline for submitting national reports to the UNECE Secretariat

**July 2027:** Regional synthesis report will be issued

**September 2027:** UNECE Ministerial Conference on Ageing

Member States are requested to submit their national reports to the UNECE Secretariat by **1 October 2026** at the following address: **[unece.ageing@un.org](mailto:unece.ageing@un.org)**

The national reports are a crucial part of the review and appraisal exercise and provide the basis for the regional synthesis report on MIPAA/RIS implementation.

The present guidelines are designed to assist member States in reporting on the national follow-up to the MIPAA/RIS and 2022 Rome Ministerial Declaration during the period 2022-2026. They are intended for national focal points on ageing in charge of preparing the national report as well as other relevant stakeholders in the process. It is

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<sup>6</sup> E/RES/2025/8

hoped that the outline provided in this document will help focal points organize existing and newly collected material into a concise document.

### **For your information:**

All country reports received for previous cycles (2007, 2012, 2017 and 2022) can be found at: <http://www.unece.org/population/mipaa/reviewandappraisal.html>

The key documents – MIPAA, RIS and UNECE Ministerial Declarations can be consulted at: <https://www.unece.org/population/ageing.html>

## **Methodological Guidance**

As recommended by the Modalities Resolution cited above and building on past practice of periodic reviews, member States are encouraged to establish a coordination group and mechanism for the national review and appraisal of progress involving all relevant ministries, agencies and entities as well as societal non-governmental stakeholders including older people associations, the research community, service providers and older persons themselves.

Member States are encouraged to draw on both quantitative data, research and qualitative information for their analysis of the ageing situation.

One of the key objectives of the national reports is to allow member States to share progress since 2022 and highlight good practices as well as challenges in addressing the challenges and harnessing the opportunities related to increasing longevity and population ageing, considering the different contexts in which population ageing evolves.

In November 2024, UNECE launched the [Ageing Policies Database](#) as a central tool for the continuous monitoring and sharing of ageing-related policies and measures implemented across member States. National policies included in the database can inform the review and policy updates shared in national reports. Additional national policies shared through national reports will also be included in the database.

Report authors are therefore requested to clearly reference each policy measure shared in their MIPAA report, indicating the title (in both English and national language if different), the year the policy or measure was introduced, and the link to the policy document (if online) as per the “List of policies” template provided in Annex 1. Policy documents not available online can be shared with the UNECE Secretariat by email ([unece.ageing@un.org](mailto:unece.ageing@un.org)) for inclusion in the database.

The UNECE Secretariat stands ready to provide technical assistance and advice in the preparation of the national reviews and reports upon request.

# Report Outline

## Part I – Introduction / Executive Summary

- National Ageing Situation
- Methodology for the national review
- Achievements and challenges in implementing the commitments of MIPAA/RIS and the 2022 Rome Ministerial Declaration since 2022
- Main lessons learned and priorities for the next 5 years

## Part II – Progress since 2022

- Promoting active and healthy ageing throughout life
- Ensuring access to long-term care and support for carers and families
- Mainstreaming ageing to advance societies for all ages

## Part III – Conclusions and priorities for the future

- Key findings of the national review – achievements and challenges
- Regional and international cooperation
- Related policy agendas
- Outlook: priorities for the future

## Annexes

- Contact Details for follow-up
- List of policies for inclusion in Ageing Policies Database
- Relevant information, statistical data that you would like to share

The annexes will not be part of the official MIPAA report and will not be shared publicly.

## Part I – Introduction / Executive summary

*The summary should not exceed 4 pages and may be structured as follows:*

### **1. National Ageing Situation**

A brief overview of the demographic, social, economic and political developments and challenges related to population ageing in the country. In this part, please state how “older persons” are official defined in your country’s legal / statistical system.

### **2. Methodology used in the national review and appraisal**

A description of the methodology used for reviewing and evaluating the policy actions taken towards the implementation of MIPAA/RIS under the three broad goals of the 2022 Rome Ministerial Declaration, indicating a description of the national coordinating body or mechanism established for the MIPAA review and the institutions that participated in the review and appraisal exercise, including civil society organizations.

### **3. Achievements and challenges in implementing the commitments of MIPAA/RIS and the 2022 Rome Ministerial Declaration**

*3-5 major achievements since 2022*

*3-5 key challenges / implementation gaps*

### **4. Main lessons learned and priorities for the next 5 years**

*3-5 national ageing policy priorities to be addressed*



## Part II – Progress since 2022

In this part of the report member States are invited to share actions taken to implement the goals and commitments of the 2022 Rome Ministerial Declaration.

Please provide an overview of the measures taken towards the three broad policy goals of the Rome Declaration within the broader context of MIPAA/RIS. The guiding questions included in this section address the commitments taken in the 2022 Rome Ministerial Declaration (see Annex for full text of the Declaration) and highlight the key themes you may wish to address in this chapter. Each guiding questions indicates which Operative Paragraph (OP) or the 2022 Rome Ministerial Declaration (RD) it relates to.

In your report you may wish to discuss challenges and drawbacks experienced since the last review and actions taken to address them.

You may also wish to address in your reports, as appropriate, the issues raised by representatives of civil society and scientific research in the Declaration of the Joint Forum of Civil Society and Scientific Research (enclosed in Annex 3).

Annex 4 provides for your information a mapping which indicates the linkages between the policy priorities of the 2022 Rome Ministerial Declaration with the goals and objectives of MIPAA, RIS, the 2030 Agenda for Sustainable Development and the Decade of Healthy Ageing. You may wish to comment on your progress relating to these related agendas.

*There is no recommended page limit for Part II.*

### A: Promoting active and healthy ageing throughout life

1. **Opportunities for active and healthy ageing** (→OP 10 RD)
  - What concrete policy measures have you adopted to promote active and healthy ageing throughout the life course and ensure the full enjoyment of human rights by older persons?
2. **Involvement in policymaking** (→OP 11 RD)
  - How have you involved older persons and their organizations in the law- and policymaking processes at all levels to ensure their rights, needs, and interests are considered?
3. **Gender mainstreaming** (→OP 12 RD)
  - What steps have you taken to mainstream gender in policies that promote active and healthy ageing, considering the diverse needs and situations of all individuals over the life course?
4. **Participation in social, cultural, and civic life** (→OP 13 RD)
  - What measures have you taken to facilitate older persons' participation in social, cultural, and civic life?

5. **Promoting healthy lifestyles** (→OP 14 RD)
  - What strategies and activities have you invested in to promote a healthy lifestyle over the life course, including physical activity, healthy nutrition, preventive health interventions, and mental health and well-being? Which societal actors did you involve in this effort?
6. **Age-friendly environments** (→OP 15 RD)
  - What measures have you implemented to create more age-friendly environments, including innovative housing solutions, smart urban and rural planning, and accessible public transport and mobility services?
7. **Combating loneliness and social isolation** (→OP 16 RD)
  - What initiatives have you supported to combat loneliness and social isolation among older persons, including in local communities and by civil society?
8. **Positive culture and image of ageing** (→OP 17 RD)
  - What measures have you taken to promote a positive culture and image of ageing, making diversity among older persons an asset and highlighting the contributions of older persons to society?
9. **Combating ageism and discrimination** (→OP 18 RD)
  - What measures have you adopted or strengthened to protect older persons from ageism and all forms of discrimination?
10. **Protection from violence and abuse** (→OP 19&20 RD)
  - What steps have you taken to improve the protection of older persons, including the most vulnerable, from all forms of violence, abuse and neglect whether at home, in institutions or the community?
  - What measures have you taken to provide support services, complaint mechanisms and equal access to justice for older victims of violence?
11. **Participation in the labour market** (→OP 21&22 RD)
  - How are you promoting and facilitating the participation of older persons in the labour market to achieve longer working lives?
  - What measures have you developed to respond to ageing workforces (for example: support for older jobseekers, promotion of age management practices, intergenerational dialogue in the workplace, skills development, family-friendly working arrangements, healthy and safe workplaces)?
12. **Pension schemes** (→OP 23 RD)
  - What measures have you taken to make pension schemes more sustainable, inclusive, and equitable and enhance pension system coverage and pension adequacy that account for periods of unpaid care and prevent old-age poverty?
13. **Lifelong learning** (→OP 13 & 24 RD)
  - What investments have you made in formal and informal learning opportunities for older persons, and how are you improving participation in lifelong learning among the adult population?

**14. Digital inclusion, literacy and skills (→OP 25 RD)**

- How are you promoting digital inclusion, including user-friendly digitalization and enhancing digital skills and literacy among older persons to enable their (safe) participation in the digital world?

**15. Silver economy and age-friendly products (→OP 26 RD)**

- What initiatives have you supported to encourage innovation for the silver economy and to develop more age-friendly products and services (involving older persons in their design)?

**16. Independent bodies for older persons (→OP 27 RD)**

- Have you established independent bodies, such as ombudspersons, to mediate the rights, needs, and interests of older persons in all areas of society?

**B: Ensuring access to long-term care and support for carers and families**

**17. Person-centred and age-friendly care (→OP 28 RD)**

- What measures have you implemented to ensure a person-centred and age-friendly approach to care, providing universal and equal access to health, social, and long-term care services in support of independence, autonomy and dignity of older persons?

**18. Sustainable investments in health and care services (→OP 29 RD)**

- How have you promoted sustainable investments in health and care services?
- What measures have you taken to promote the development and improvement of long-term care systems in cooperation with local authorities and other stakeholders?

**19. Employment and working conditions of care workers (→OP 30 RD)**

- What steps have you taken to improve the terms of employment and working conditions of health and social care workers, including staffing, occupational health and safety, and access to education and training?

**20. Lessons from the COVID-19 pandemic (→OP 31 RD)**

- How have you built on the lessons learned during the COVID-19 pandemic to address older persons' rights, needs, and preferences, including in health crises and other emergency situations?

**21. Strategic planning for long-term care services (→OP 32 RD)**

- What measures are you taking to prepare for the anticipated increase in demand for long-term care services, ensuring sufficient capacities and sustainable financing?

**22. Skills and competence development (→OP 33 RD)**

- What measures have you taken to develop the skills, competences and continuous training of health and social care workers in geriatric, gerontological and digital skills to meet the evolving needs for quality and innovation in care?

**23. Support for informal and family care (→OP 34 RD)**

- What measures have you adopted to recognize and support the role of informal and family carers?

**24. Quality management in care services (→OP 35 RD)**

- How are you ensuring the high quality of health, social, and long-term care services through quality management, monitoring, auditing, and continuous improvement?

**25. Protection from neglect and abuse (→OP 36 RD)**

- What mechanisms have you adopted to expand protection from neglect and abuse in all care settings, including measures for prevention, complaints, and intervention?

**26. Dementia care (→OP 37 RD)**

- What measures have you taken to address dementia and ensure quality care for persons with cognitive and mental impairments?

**27. Palliative care (→OP 38 RD)**

- What steps have you taking to address the growing need for palliative care services and ensure an end of life with dignity?

**C: Mainstreaming ageing to advance a society for all ages:**

**28. National strategic framework for mainstreaming ageing (→OP 39 RD)**

- What steps have you taken to develop or strengthen a national strategic framework for mainstreaming individual and population ageing?
- How have you been integrating ageing aspects across policies at different levels of government?

**29. Research and data collection (→OP 40 RD)**

- How are you enhancing age- and gender-sensitive research and collecting sex-, age-, and disability-disaggregated data on population ageing and diverse situations of older persons to inform evidence-based policies, monitoring and evaluation?

**30. Human rights-based mainstreaming approach (→OP 41 RD)**

- What measures have you implemented to build a mainstreaming approach that is human rights-based, life-course-oriented, evidence-based, gender-responsive, and equitable?

**31. Coordination of ageing-related policies (→OP 42 RD)**

- How are you coordinating ageing-related policies across all levels of government? Have you developed a coordination mechanism?

**32. Capacity-building on mainstreaming ageing (→OP 43 RD)**

- Have you developed any methodologies for age- and gender-sensitive analysis and impact assessments of new laws and policies?

**33. Participatory stakeholder engagement (→ OP 44 RD)**

- How are you ensuring that older persons and organizations representing them are actively involved in meaningful cross-sectoral dialogue and collaboration on ageing?

**34. Emergency preparedness and response (→OP 45 RD)**

- What steps have you taken to strengthen the protection of older persons' human rights in the context of emergency and conflict situations, including pandemics, climate change adaptation and mitigation, and enhancing international cooperation in this regard?

### III – Conclusions and priorities for the future

*The conclusions should not exceed 4 pages and may address the following:*

#### **Key findings of the national review – achievements and challenges**

Reflections on the findings of the review: what do you see as the most important achievements and the key challenges faced over the reporting period.

#### **Regional and international cooperation**

Additionally, you may comment on your country's engagement in regional and international cooperation on ageing and indicate your country's requests, needs and wishes in respect of the work of regional and international organizations in the field of ageing.

#### **Related policy agendas**

You may comment on your country's participation in the UN Decade of Healthy Ageing (2021-2030), for instance if a specific action plan on healthy ageing was developed, the Global Campaign to Combat Ageism and the open-ended intergovernmental working group for the elaboration of a legally binding instrument on the promotion and protection of the human rights of older persons established by the Human Rights Council. You may also address here the relevance of ageing-related policies for sustainable development in your country, specifically the contributions to implementing the 2030 Agenda for Sustainable Development and its principle of leaving no-one behind.

#### **Outlook: priorities for the future**

You may comment here on the anticipated impact of demographic change on national sustainable development and priorities your country sets for future actions to be taken and policy adjustments needed; specifically in the next implementation cycle. Please also identify priorities for further policy research and data collection.

### Annex

Materials provided in the Annex will not be publicly shared on the UNECE webpage. Kindly include the following:

- Contact details of the report coordinator/author for any follow-up questions by the Secretariat.
- List of policies to be included in the Ageing Policies Database (See Annex 1)
- Any important information / documents or statistical data that were not included in the report, that you would like to share to inform the regional review.

As per usual practice the MIPAA25 reports will be posted on the UNECE website, unless requested otherwise.

## ANNEX 1

### List of policies (for inclusion in UNECE Ageing Policies Database)

*Member States are invited to list the policy measures implemented between 2022 and 2026 for inclusion in the UNECE Ageing Policies Database, using the template provided. (Running Number – reference for policy list). If web links to policy documents are not available, please send the PDF of policies to the UNECE Secretariat with the file name CountryCode\_Year\_PolicyID.*

Example (template for policy list):

Policy id (running number)	Name of the Policy in English	Name of Policy in original language (if different)	Year When introduced	Web link(s)
1	Working together to improve health care in Canada: Aging with dignity bilateral agreements	--	2024	<a href="https://www.canada.ca/en/health-canada/corporate/transparency/health-agreements/shared-health-priorities/aging-dignity-bilateral-agreements.html">https://www.canada.ca/en/health-canada/corporate/transparency/health-agreements/shared-health-priorities/aging-dignity-bilateral-agreements.html</a>
2	Lifelong Learning and Volunteering (BELL)	BELL – Bildung und Engagement ein Leben lang	2025	<a href="https://www.esf.de/portal/DE/ESF-Plus-2021-2027/Foerderprogramme/bmbfsfj/bell.html">https://www.esf.de/portal/DE/ESF-Plus-2021-2027/Foerderprogramme/bmbfsfj/bell.html</a>
3	Programme on active and healthy ageing for the years 2023- 2027	Programul privind îmbătrânirea activă și sănătoasă pentru anii 2023-2027	2023	<a href="https://www.legis.md/cautare/getResults?doc_id=138059&amp;lang=ro">https://www.legis.md/cautare/getResults?doc_id=138059&amp;lang=ro</a>
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## ANNEX 2

### 2022 ROME MINISTERIAL DECLARATION

“A Sustainable World for All Ages:  
Joining Forces for Solidarity and Equal Opportunities Throughout Life”

1. We, the representatives of the member States of the United Nations Economic Commission for Europe (UNECE), gathered at the fifth Ministerial Conference on Ageing from 16 to 17 June 2022 in Rome, Italy, reaffirm our commitment made in the Berlin Ministerial Declaration (2002), and subsequently confirmed by the León (2007), Vienna (2012), and Lisbon (2017) Ministerial Declarations to fulfil the UNECE Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing, 2002 (MIPAA), and to ensure older persons' full enjoyment of all human rights, indivisible and inherent to all human beings, regardless of age.
2. We celebrate significant longevity gains in the UNECE region over the last decades thanks to medical progress, better living and working conditions, increased welfare, and advances in public health. This enables older persons to stay healthy and active longer and to be more involved in their communities, giving our societies increased opportunities to benefit from their manifold contributions to the economy, society and families as active citizens and volunteers, consumers, caregivers, and as sources of experience and knowledge.
3. We recognise that older persons are becoming the fastest-growing segment of the population in the UNECE region, and we need to be more aware of and respond to the heterogeneity of their capacities and the inequalities accumulated over the life course, while respecting that older persons are not a homogeneous group, but diverse in their situations, identities, needs, preferences, and opportunities.
4. We acknowledge the significant progress made in implementing RIS/MIPAA over the past five years in particular towards recognizing the potential of older persons, encouraging longer working lives and the ability to work, and ensuring ageing with dignity. The frameworks on active and healthy ageing, age-friendly environments, and mainstreaming ageing are gaining recognition. We also welcome the growing engagement in ageing policy matters from civil society and public and private stakeholders.
5. We are aware that the implementation of RIS/MIPAA has occurred during times of major demographic, political, social, and economic changes. The last years have been marked by increased pressure on private and public finances as well as on

health and social services, together with a growing awareness of the impact of climate change, digital transformation and emergency crises, including pandemics, armed conflicts and disasters. There are still challenges to be addressed and necessary policy improvements to be made to better leverage the potential of older persons, including:

- a. further developing sustainable, accessible, and adequate social protection systems covering social security, universal health care and inclusive, quality social services, in particular long-term care services, that help to mitigate cumulative inequalities and prevent old-age poverty and exclusion;
- b. focusing on health promotion, including raising awareness of and access to sports, physical activity, healthy nutrition, and other preventive health measures over the life course;
- c. enhancing the involvement of older persons and their representatives in law- and policymaking at all levels to better reflect their rights and diverse needs and interests;
- d. making all environments, including physical, social, technological, and digital environments, more age-friendly and accessible for all, and increasing the availability of adapted housing and assistive devices;
- e. recognizing the intersectionality between disability and ageing across different areas of everyday life, and addressing obstacles older persons with disabilities face, including by promoting universal design and adaptations as a prerequisite for age-friendly environments;
- f. creating flexible conditions for longer and healthy working lives, ensuring inclusive labour markets and decent work for all ages, preventing and responding to gender inequalities, old-age poverty, and social exclusion;
- g. eliminating persistent gender inequalities by addressing the different impacts of demographic change on women and men through dedicated measures, including by mainstreaming gender in all policies and by collecting, using, and analysing sex- and age-disaggregated data;
- h. combating ageism and the perpetuation of stereotypes, prejudice and discrimination based on age in all spheres of society;
- i. adopting policies that strengthen inter- and intragenerational cooperation and solidarity, considering the needs of both current and future generations;
- j. better recognising and supporting the important role of both formal and informal carers, particularly older women, and promoting a distribution of care work that is not gender-based;



- k. fully recognising the active participation of older persons and the contributions they make to the functioning of our societies including in emergency and conflict situations.
6. We acknowledge that the COVID-19 pandemic, and the measures taken to fight it, have underscored a range of societal challenges and opportunities. The pandemic has:
- a. disproportionately affected persons in vulnerable situations, including those belonging to disadvantaged socio-economic groups and those living in institutions, and showed the importance of intra- and intergenerational justice, inclusion, and gender equality;
  - b. highlighted the vulnerability of many older persons who have been at higher risk of severe illness and mortality, and in some cases have faced difficulties accessing essential services, including testing, vaccination and treatment, and have been exposed to ageism and discriminatory care rationing. Public health measures such as physical distancing, restrictions in nursing homes, and temporary closures of day-care centres for older adults have caused and deepened social isolation of many older persons with serious consequences for their mental and physical health;
  - c. demonstrated the need to strengthen the capacity, emergency preparedness, and coordination of the health and long-term care sectors, in particular the protection of persons in vulnerable situations, and to develop flexible and innovative models of care across different settings to prevent vulnerability;
  - d. made clear that difficult public health decisions affecting older persons need to be guided by a commitment to dignity and the right to quality health and social services;
  - e. highlighted the need to better guarantee the full enjoyment of all human rights by older persons, including being able to speak for themselves and to exercise their right to individual autonomy, participation in decision-making, freedom of movement, and social participation;
  - f. underscored the importance of solid and inclusive welfare systems and solidarity in mitigating the economic and social consequences of crises;
  - g. demonstrated the strong engagement by civil society, volunteers of all ages, local communities, and families to improve the situation for older persons and others in need;
  - h. demonstrated older persons' contribution to our societies, exemplified by retired health and care personnel who returned to duty on a voluntary basis and supported the functioning of health and social care systems;
  - i. emphasized the importance of multilateral cooperation, including through sharing of good practices, experiences, knowledge, and data.

7. The near future will be characterised by the reshaping of our societies based on the lessons learned from the COVID-19 pandemic. As we recommit ourselves to RIS/MIPAA, which has for the last 20 years provided a framework for addressing the cross-sectoral and multidimensional issues of ageing, we stress the need to ensure the full enjoyment of human rights by older persons. We also acknowledge the importance of implementing ageing-related policies in fulfilling the 2030 Agenda for Sustainable Development and its aim of ‘leaving no one behind’ as well as the United Nations Decade of Healthy Ageing (2021-2030) and its vision of ‘a world in which all persons can live long, healthy lives’. We see that new challenges such as the ongoing digital transformation and climate change are rapidly transforming our societies. Informed by the lessons learned from the COVID-19 pandemic and achievements so far, we consider discussing adjustments to the international framework for ageing-related policies to address such challenges.
8. We commit ourselves to engage in initiatives for the exchange of information and good practices, for regional cooperation and capacity enhancement on ageing among UNECE member States and all relevant stakeholders, including older persons and their organizations.
9. We aspire to realize a sustainable world for all ages and to join forces for solidarity and equal opportunities throughout life. We are determined to work in a truly collaborative and multilateral partnership to achieve the following policy goals by 2027:

## **I – Promoting active and healthy ageing throughout life**

We commit to promoting active and healthy ageing throughout life by:

10. *adopting* concrete policy measures aimed at ensuring the full enjoyment of human rights by older persons, enabling individuals to seize opportunities for active and healthy ageing throughout the life course, unleashing the potential for expanding healthy life years while considering the diverse situations of older persons, gender differences, and combating inequalities to enable everyone to take part in and contribute to all spheres of life;
11. *involving* older persons and their organizations in a constructive and meaningful way in the law- and policymaking processes at all levels to ensure that their rights, needs, and interests are taken into account in policies, programmes, and laws that affect them;

12. *mainstreaming* gender in policies that promote active and healthy ageing, taking into account the diverse needs and situations of all individuals over the life course;
13. *facilitating* older persons' participation in social, cultural, and civic life, and promoting lifelong learning;
14. *investing* in strategies and activities and *involving* all actors of society to promote a healthy lifestyle over the life course by encouraging and facilitating physical activity, healthy nutrition, and preventive health interventions, and strengthening mental health and well-being, especially among older persons;
15. *investing* in the creation of more age-friendly environments by implementing innovative housing solutions, smart urban and rural planning, appropriate recreational infrastructure, and accessible public transport and mobility services; through the meaningful participation by older persons in this process, strengthening their autonomy and independence and enabling them to age safely in a place of their choice, while recognizing the value of the intergenerational approach to improve the lives of people of all ages, in line with WHO guidance on age-friendly environments;
16. *adopting* concrete measures to combat loneliness and social isolation among older persons, including by supporting initiatives in local communities and by civil society, stimulating increased social engagement, participation, and intergenerational solidarity, encouraging volunteering and social innovation, and enhancing digital skills;
17. *promoting* a positive culture and image of ageing by making the diversity among older persons an asset and by highlighting the manifold contributions of older persons to society;
18. *protecting* older persons against ageism and all forms of discrimination in all areas by adopting or strengthening the implementation of laws and other instruments at the local, national, or international level, by modifying existing instruments based on discriminatory or stereotypical attitudes or practices, by establishing educational and awareness-raising programmes and campaigns, and fostering intergenerational activities, dialogue, and support;
19. *improving* the protection of older persons, particularly women and persons with disabilities, including mental impairments, or in situations of dependency, from all forms of violence and abuse, whether it is physical, psychological, sexual, gender-based, or economic, as well as from neglect;

20. *acknowledging* that violence is a criminal act which can take place at home, in institutions, shared housing, or the community, posing significant public health concerns and reducing the victim's potential for active and healthy ageing; *making sure* that national domestic violence legislation addresses all forms of violence against older persons and provides relevant support services, adequate complaint mechanisms, and equal access to justice for older victims of violence;
21. *promoting and facilitating* the participation of older persons in the labour market to achieve longer working lives as a vital part of a sustainable and inclusive economy, social participation, financial security, and well-being of older persons;
22. *improving* active labour market policies that respond to an ageing workforce including tailored support for older jobseekers and encouraging employers to use age-management practices, promote intergenerational dialogue in the workplace, enhance skills development and family-friendly working arrangements, and to provide healthy, safe, and accessible workplaces that prevent work-related accidents and occupational diseases;
23. *developing* sustainable, inclusive, and equitable pension schemes and improving pension systems' coverage; *establishing* adequate pension entitlements that account for periods of unpaid care over the life course and prevent old-age poverty;
24. *facilitating and investing* in formal and informal learning opportunities for older persons beyond professional education to strengthen their potential for a fulfilled life in old age while also improving participation in lifelong learning among the adult population;
25. *promoting* user-friendly digitalisation, *enhancing* digital skills and literacy to enable older persons to participate in an increasingly digital world, while also *ensuring* the right to access to information, participation, and services through access to digital devices and the Internet, and to suitable offline or other secure alternatives in user-friendly and accessible formats;
26. *supporting* innovation for the silver economy and *valuing* the continued production and purchasing capacity of older persons and their contribution to social and economic activities by encouraging designers, businesses, and public enterprises to provide smarter digital, financial, and other services; *developing* more age-friendly products and services by involving older persons in their design and development;

27. *encouraging* the establishment of independent bodies, for example, ombudspersons, at national, subnational, and local levels that can mediate the rights, needs and interests of older persons in all areas of society.

## **II - Ensuring access to long-term care and support for carers and families**

We commit to ensuring access to long-term care and support for carers and families by:

28. *applying* a person-centred and age-friendly approach to care, *ensuring* the greatest degree of independence, autonomy, and dignity through universal and equal access to health, social, and long-term care services, built on the principles of prevention, early intervention, and integrated care, including support for families, paying attention to accumulated disadvantages across the life course;
29. *continuing* to promote sustainable investments in all health and care services, in particular to develop and continuously improve long-term care systems in cooperation with local authorities and other relevant stakeholders;
30. *improving* the terms of employment and working conditions of health and social care workers, including adequate staffing and occupational health and safety, access to education and training along with other dimensions of decent work;
31. *building* on the lessons learned during the COVID-19 pandemic to respond to older persons' rights, needs, and preferences regarding their personal freedom, privacy, autonomy and self-determination, including in health crises and other emergency situations;
32. *taking appropriate measures* to prepare for the anticipated increase in demand for long-term care services through comprehensive strategic planning for sufficient capacities both in quantitative and qualitative terms, based on equitable and sustainable financing. This will entail ensuring the availability of an appropriately qualified health and care workforce, improving management in care facilities, and cooperating with all relevant stakeholders, including national, subnational, and local authorities; health, social, and long-term care providers; academia; civil society; as well as older persons and their representatives;
33. *prioritising and investing* in skills and competence development and continuous training of health and social care workers in geriatric, gerontological, and digital skills to meet the evolving needs for quality and innovation in care; *investing* in research and innovation to provide knowledge-based training and practices in health and social

care, including awareness-raising and training on ageism, and older persons' right to privacy and individual autonomy;

34. *recognizing and supporting* the continued role of informal and family care as an important part of care provision by providing advice, relief, and social protection, taking measures to help balance paid work, care, and private life, and strengthening intergenerational solidarity as well as a more equal distribution of care work between women and men;
35. *ensuring* the high quality of health, social, and long-term care services based on quality management, monitoring, auditing, and continuous improvement by involving care workers, informal carers, older persons, and other relevant stakeholders; *assuring* that services are provided in dialogue with care receivers and that there is a system of assessment in place for those who consider they are not receiving the services to which they are entitled;
36. *expanding protection* from neglect and abuse in all care settings through the adoption and effective implementation of protection mechanisms, including measures for prevention, complaints, and intervention;
37. *developing, regularly updating, and implementing* national and subnational plans to address dementia and the provision of quality health, social, and long-term care services to ensure participation, dignity, and quality of life for persons with cognitive and mental impairments, as well as support for their family and informal carers;
38. *addressing* the growing need for adequate palliative care services through their integration into the continuum of care and support, and *ensuring* an end of life with dignity;

### **III - Mainstreaming ageing to advance a society for all ages**

We commit to mainstream ageing in all policies to create a society for all ages by:

39. *developing or strengthening*, where existent, a national strategic framework or process for mainstreaming ageing to support the systematic consideration and integration of both individual and population ageing aspects into all policies at local, subnational, national and international levels, including through the implementation of the 2030 Agenda for Sustainable Development and other relevant international policy frameworks;

40. *enhancing* age- and gender-sensitive research and sex-, age- and disability-disaggregated data collection on population ageing and the diverse situations of older persons to inform evidence-based policies, monitoring, and evaluation;
41. *building* a mainstreaming approach that is human rights-based, life-course-oriented, evidence-based, gender-responsive and equitable, and that considers ageing from both a societal and individual perspective, and reflects and recognizes multiple and intersecting forms of discrimination and the diverse needs, preferences and opportunities among older persons;
42. *coordinating* ageing-related policies across all levels of government through establishing or strengthening of inter-institutional coordination mechanisms to ensure systematic mainstreaming of the ageing dimension in all public policies;
43. *building* capacity on mainstreaming ageing by developing methodologies for age- and gender-sensitive analysis and impact assessments of new laws and policies;
44. *developing* a participatory stakeholder engagement approach in a whole-of-government and whole-of-society effort to ensure that older persons and organizations that represent them are listened to and actively involved in meaningful cross-sectoral dialogue and collaboration on ageing between all relevant actors in the public and private sector, academia, social partners, and civil society;
45. *strengthening* the protection of older persons' full enjoyment of human rights, including by addressing the challenges underscored by emergency and conflict situations and the COVID-19 pandemic and enhancing international cooperation in this regard.

### **Final remarks**

46. Bearing in mind the discussions, suggestions, and recommendations collected during this fifth Ministerial Conference on Ageing, we recognize and appreciate the important role of the UNECE Standing Working Group on Ageing as the main intergovernmental body fostering regional dialogue, cooperation, and capacity-building on ageing. We will continue to contribute to its activities and to further strengthen the Standing Working Group on Ageing and its secretariat.
47. We acknowledge the important role and value of RIS/MIPAA in developing and promoting for the past 20 years ageing-related policies geared towards a society for all ages and for the benefit and well-being of older persons, at both national and regional levels. We entrust the Standing Working Group on Ageing with the task of

updating RIS and exploring the possibility of also updating MIPAA to adapt ageing-related policy responses to economic, social, and digital transitions and emerging challenges, and developing further instruments to support them.

48. We appreciate the role that the UNECE Secretariat and other stakeholders will play in assisting member States in the implementation of RIS/MIPAA and the goals of the 2022 Rome Ministerial Declaration through, inter alia, support for developing and updating national strategies on ageing, strengthening capacities for mainstreaming ageing, and building on the lessons learned from COVID-19.
49. We recognize the importance of population ageing as a global trend that needs to be addressed in international frameworks and initiatives and we support the implementation of the 2030 Agenda for Sustainable Development and global and regional initiatives such as the United Nations Decade of Healthy Ageing (2021-2030), the Global Campaign to Combat Ageism, the Decade of Demographic Resilience (2022-2031), and the activities of the United Nations Open-ended Working Group on Ageing, among others.
50. We express our sincere gratitude to Italy for hosting the fifth UNECE Ministerial Conference on Ageing in June 2022.



## Annex 3

### Declaration of the Joint Forum of Civil Society and Scientific Research

#### **A fulfilling life throughout the life-course: a joint effort of civil society and research in policy making**

Rome, 15 June 2022

#### **Preamble**

1. We, the representatives of civil society and scientific research, welcome the opportunity offered to discuss the impact of the Madrid International Plan of Action on Ageing and its Regional Implementation Strategy (MIPAA/RIS) on older persons in the United Nations Economic Commission for Europe (UNECE) region.
2. We acknowledge the commitments made by member States of the UNECE in the 2022 Rome Ministerial Declaration (2022 MD). We particularly appreciate that in many areas the rights and needs of older people are being addressed and call on member States to fulfil their engagements taken under the previous and upcoming MIPAA Regional Implementation Strategies to enhance older persons' right to live in dignity and fully participate in society.
3. Recognising the different societal, political, economic, and environmental crises that many countries undergo, we state that it is precisely during hard times that MIPAA should be upheld, and efforts increased to better serve older persons.
4. We appreciate the human rights-based approach taken in the 2022 MD and call on member States to ensure that this approach is further pursued in all policies and programmes including data gathering, monitoring, and evaluation.
5. We note with increased concern that MIPAA is not universally applied and that it has failed to ensure member States fully respect, protect and fulfil the full enjoyment of human rights by older persons. The existing indicators are insufficient to fully assess the achievement of objectives and member States do not face any consequences if they do not comply with the commitments made under MIPAA.
6. The Joint Forum fully supports the recommendations of the United Nations (UN) High Commissioner for Human Rights, the Independent Expert on the enjoyment of all human rights by older persons, and the Global Alliance for the Rights of Older People (GAROP) that a UN legally binding instrument is urgently needed to promote and protect the human rights of older persons. Such an instrument would reinforce the commitments member States are taking under the MIPAA and allow them to attain its objectives. Therefore, the Joint Forum calls on member States to actively engage and support the discussions in the UN Open-Ended Working Group

on Ageing and to steer its discussion towards the binding outcome highlighted above, in accordance with its mandate.

7. We further support the life-course perspective taken in the 2022 MD to tackle the social inequalities accumulated over the life-course. These include – but are not limited to – social isolation and loneliness, two phenomena that are both a cause and a consequence of these inequalities. Policies must mitigate such processes by creating more equitable living conditions and access to social support and by fostering social solidarity.
8. We are extremely concerned about the impact that the COVID-19 pandemic has had on older persons across the region and which has led to unprecedented numbers of preventable deaths. The blanket isolation measures applied in some settings led to older persons paying a significant toll in terms of mental and physical health. Further, too many deaths were caused by age discrimination that deprived older persons of their rights and prevented them from receiving optimal services.
9. In later phases of the pandemic, vaccinations and the precautions taken by the entire population have made it possible to better protect older persons, albeit with continuing inequities in access and coverage. The review of MIPAA should therefore build on the lessons learned by the COVID-19 pandemic and on recent developments in the Human Rights Council (HRC) in condemning ageism and age discrimination (Resolution HRC/48/3 and report HRC 49/70) to accelerate and improve the protection of older persons' rights.
10. The topics addressed in the 2022 MD are crucial for both civil society and scientific research communities. Based on inputs from these communities, we shall underline specific issues and provide guidance for topics that will need to be addressed in the future.

### **Promoting active and healthy ageing**

11. The Joint Forum appreciates the aim to promote active and healthy ageing, but would like to underscore that, from a life-course and human-rights based perspective, environmental, contextual, and structural preconditions need to be considered more intensively to enable active and healthy ageing. For this purpose, the World Health Organization (WHO) Global Network for age friendly cities should be further developed in member States.
12. Older persons are a heterogenous group with hugely diverse characteristics such as gender identity, living places and environmental conditions, health status, socio- economic and educational backgrounds, social relations, race, religion, ethnicity, and sexual orientation, as well as various intersectionalities. This diversity must be reflected and valued in policy interventions regarding education, training, and life-long-learning (including for the oldest old); equal access to goods

and services; the extension of working lives and a decent work/life balance; environmental conditions regarding mobility and housing; as well as health promotion, disease prevention, and health and social care services, among other things. This must be underpinned by explicitly pursuing the principles of non-discrimination regarding age and other factors in the endeavour to realise all human rights. Only then we can build inclusive societies, together with younger generations, in which ageing and longevity will be fully appreciated as an opportunity for individual citizens and society as a whole.

13. We underline §12 of the 2022 MD that mainstreaming gender is crucial “in policies that promote active and healthy ageing, taking into account the different needs and situations of all individuals over the life course.” We also consider the support and reconstruction of career paths over the life-course as highly important, as well as the full recognition of unpaid care work as key to combatting the gender pension gap and female poverty in old age.
14. We stress the need to promote older persons’ active participation in advocating for their rights, through strengthening their empowerment for social and political participation, both on the individual level (training, volunteering, accessibility, etc.) and with respect to structures in the political system (independent support to representative organisations of older persons, consultation on and co-design of public policies, ministries, ombudspersons, community boards, etc.).
15. We recognise the importance of resisting the tendency to consider some physical and mental health conditions, such as arthritis, atherosclerosis, depression, and Alzheimer’s disease and related dementias, as an unavoidable part of the “normal” ageing process. This normalization has serious consequences for health care as well as well-being and quality of life of older persons.

### **Ensuring equal access to care and support to older persons and their caregivers**

16. We appreciate the high importance member States give to the development of accessible, integrated, and appropriately funded care systems and the acknowledgement of informal and unpaid carers. However, we would like to underline that there is an overreliance on unpaid care work in most member States that causes inequalities, particularly for women and those retiring from the labour market due to care responsibilities which, in turn, contributes to lower pensions and creates gender income- and pension gaps.
17. We call for a change in long-term care policies to focus on the best support they can provide to the right to independence and autonomy, emphasising the choice of persons in need for care about the form of quality care that best suits them. This can only be made possible by increasing investment into the development of all forms of quality care, particularly home care, community-based and nursing home care. This also calls for a social protection approach to long-term care, making care services universally available to all persons in need for support.

18. We advert to the changing family structures, increased mobility, increased urbanization, and other societal changes that make traditional concepts of care by family members unsustainable and reinforce social exclusion that unpaid, informal carers are facing. To promote community-based care, it will be necessary to invest in quality services that can support older persons living alone in need of care, especially those living in remote areas, and guarantee the full enjoyment of their human rights. Creating caring neighbourhoods, coordinated support in local settings, and multi-functional health and social care centres are social innovations that can show the way ahead in this context.
19. At the same time, informal carers must be supported by measures to balance paid work, care, and private life, for example, through ensuring social protection and providing income support, services for respite and day care, as well as training to cope with the physical and psychological challenges of caring.
20. The pandemic has shown that it is more urgent than ever to reconsider professional care work. The poor working conditions of care workers have been exposed, alongside the challenge to train, recruit, and retain care workers in most member States. It will be necessary to make the profession more attractive by improving working conditions, pay, shaping new job profiles, finding new ways of education and training, as well as new ways of organising care in the community.
21. We stress the importance of increasing the participation and involvement of people in need of care and their families in care policies, starting by establishing a dialogue with persons in need of care, family members and their wider community from the onset of care needs. We call for care systems that empower people at all stages of their lives, enable their participation and support their autonomy – that is care systems that ensure older persons can be part of society as equal and full citizens.

### **Mainstreaming ageing to advance a society for all ages**

22. We fully embrace the mainstreaming ageing approach at all levels. Older persons are an integral and valuable part of society, their dignity and quality of life are indicators of societal development. Enhancing the role of older persons by combating ageism and promoting intergenerational solidarity are therefore preconditions for building a society for all ages.
23. Member States are starting from very different bases so that research and development are needed to facilitate mutual learning and learning from good practice. This is particularly true for the issue of ageism, where it is necessary to develop tools to promote and measure both awareness and tangible implementation of appropriate interventions. Involving the media is a critical component to this strategy in this respect.
24. We recognise the broad support in the 2022 MD for older persons' rights but underline that related legislation has not been adopted nor fully implemented in all

member States, with many among them still hesitating to support a UN Convention on the rights of older persons. We therefore call for the creation of appropriate structures in member States to secure a human rights-based approach when dealing with demographic change and intergenerational solidarity, mainstreaming ageing, and related legislation.

### Future topics

25. The future of population ageing and of all generations will depend, among other factors, on whether and how societies will be able to solve current societal, political, economic, and environmental crises beyond demographic change. In the absence of a human rights framework regarding ageing, challenges need to be considered in the MIPAA/RIS process, to which civil society and research will contribute appropriately. This process needs to be underpinned by a powerful international entity to develop, monitor and safeguard the rights of older persons, for instance by an integration and significant upgrading of the various UN Programs and initiatives dealing with population ageing.
26. Research will contribute to the advancement of knowledge. In designing respective studies and research questions we need to **enhance our awareness of ageism, sexism, racism, and all other forms of discrimination and intersectionality**. We must promote geriatric and gerontological research that collects age and sex differentiated data on older people, ensuring the inclusion of older women, the oldest old, and frail older subjects as well as those living in nursing homes, and we need to include them in clinical trials. Moreover, multi-disciplinary research must address social inequalities at all levels, and research outcomes should always be translated into evidence-based policy decisions, produced in concert with all stakeholders concerned, that sustain a society for all ages.
27. The increasing **prevalence of emerging technologies** (like for instance those based on artificial intelligence) and the **impact of digitalisation** on individuals and societies need to be carefully analysed and underpinned by **strategies that promote equity and minimize bias by increasing access and avoiding social exclusion and digital divides**. This means upscaling efforts to provide digital skills, connectivity, and accessible and affordable technologies and tools to older persons. At the same time, users must be protected from intrusion, scams, fraud, and other violations of their rights when using digital devices and applications.
28. **Emergencies** due to wars and military interventions, climate change, and pandemics are likely to increase in the future and will continue to create higher risks for older persons. In this regard, we would like to express our solidarity with the Ukrainian population for the current aggression. For the future, it will be necessary to better adapt relief operations and related interventions to the rights and needs of older people and to involve them in the planning, implementation, and assessment of preventive and curative operations. This also includes research

on the currently under-explored area of how to develop intergenerational solidarity in relation to climate change.

29. The COVID 19-pandemic has prompted reflection on many issues concerning older people. Older persons, often described as “helpless victims” with respect to severe illness and high mortality, were remarkably resilient in other areas of life, such as in caring for grandchildren or in volunteering. Therefore, **participation of older persons must be ensured when deciding on their position and autonomy** versus forms of protection and care. In this context, rethinking the role of nursing homes is necessary as well, starting from principles of autonomy and person-centred care.
30. Older persons as a diverse societal group call for more awareness of individual needs with respect to public infrastructures that can no longer be shaped according to traditional types of family and relationships only. The **importance of all types of sentimental relationships and sexualities** in older age for emotional, spiritual, and physical well-being needs to be recognised and favourable societal conditions should be created for all persons to support enjoying the full potential of life.
31. In connection to this, it is important to understand how **different emerging phenomena will change the conditions and perceptions of age** in the years to come. They include changing family structures, following the growing share of persons living alone, of childless people and of those experiencing postponed parenthood; the experience of living into very old age with an increasing risk of sensory, physical or mental impairments; the impact of more globalised and digitised working conditions; the increasing diversity of sexual orientations; and the coexistence of mixed religious and ethnic communities.
32. **Social inequality** will continue to be a major challenge. Multidisciplinary and cross- cultural research in combination with the involvement of relevant stakeholders and an accurate monitoring of loneliness and social isolation will support the development of effective interventions.
33. Last, but not least, various **challenges related to migration and ageing** will have to be addressed as soon as possible. Migration is often described as an issue of younger generations, but it concerns older persons, too, both in countries of origin and in receiving countries. On the one hand, older persons left behind in countries of origin (including for instance Romania, Ukraine, Moldova, and Poland), need to take over care for their grandchildren or are left alone. On the other hand, older persons (and/or their families) in many receiving countries (like for example Austria, Germany, Italy, Spain, Switzerland) often become employers of live-in migrant carers.
34. Older persons having left their home countries because of environmental disasters or war, such as older refugees from Syria or Ukraine, are facing struggles with finding adequate housing, income support, maintaining their pension rights

and access health and care systems. A better understanding and **recognition of the specificity of needs and aspirations of refugees**, of “ageing in a foreign land” in general, **and of migrant carers** specifically, is therefore necessary. Dealing with migration must also address related issues of inequalities and fractures in the social tissue across UNECE member states.

### Concluding remarks

We are fully aware that a new approach to ageing and demographic change cannot be solved by incremental fixes to legislation or short-term policy initiatives alone. While recognising that it is not a human rights instrument, we conceive the MIPAA/RIS process as an opportunity to develop appropriate policies for older persons towards a holistic strategy at national and international levels together with all partners and countries involved, and to use it as a compass to measure their policies’ contributions toward the commitment to respect human rights for all and leave no one behind.

We appreciate the recognition of NGOs and the research community to be involved in the MIPAA process and underline the various roles of organisations, civil society and institutions in this process as promoters of innovation, providers of support services and knowledge as well as of advocates of older persons and their rights and needs.

As representatives of older persons and scientific researchers we are committed to intensifying our involvement also in the next review and appraisal of the MIPAA process and are ready to support the commitments made at the present Ministerial Conference to ensure that they are fully realized.

To underpin these endeavours, we deem it necessary to create without delay an international, legally binding instrument to substantiate the policy efforts made by member States on the promotion and protection of older persons’ rights. Therefore, we call on governments to support the drafting of a UN Convention for the rights of older persons to guarantee the equal application of universal human rights in older age at national and global levels.

## Annex 4 – Mapping of corresponding MIPAA goals, RIS commitments, policy goals of the 2022 Rome Ministerial Declaration, SDGs and action areas of the Decade of Healthy Ageing.

**Theme** (correspond to the [policy themes](#) of the [Ageing Policies Database](#))

**MIPAA** – [Madrid International Plan of Action on Ageing](#)

**RIS** – [UNECE Regional Implementation Strategy](#)

**RD** – [2022 Rome Ministerial Declaration on Ageing](#)

**SDG** – [Sustainable Development Goals \(2030 Agenda for Sustainable Development\)](#)

**DHA** – [Decade of Healthy Ageing : Plan of Action 2021-2030](#)

[to be provided according to below template]

Theme	MIPAA	RIS	RD	SDG	DHA
Employment	<b>Issue 2:</b> Work and the ageing labour force <b>Objective 1:</b> Employment opportunities for all older persons who want to work	<b>Commitment 5:</b> To enable labour markets to respond to the economic and social consequences of population ageing	<b>Policy goal 1:</b> active and healthy ageing  OP 20 & 21	<b>SDG 8</b> Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all	<b>Action area 2</b> Ensure that communities foster the abilities of older people
Lifelong learning	<b>Issue 4:</b> Access to knowledge, education and training <b>Objective 1:</b> Equality of opportunity throughout life with respect to continuing education, training, and retraining as well as vocational guidance and placement services	<b>Commitment 6:</b> To promote life-long learning and adapt the educational system in order to meet the changing economic, social and demographic conditions	<b>Policy goal 1:</b> Active and healthy ageing  OP	<b>SDG 4</b> Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all	<b>Action area 2</b> Ensure that communities foster the abilities of older people