Closing Speech of the 6th World Ageing & Generations Congress 2010

by Ilona Kickbusch

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Every year at the end of the WDA Forum I am asked – as chairperson – to give a personal impression of the key issues that have emerged. No single Forum can take all pertinent issues related to Demography and Ageing into account, but we from the WDA Forum aim to ensure a continuity that links to our mission, to coordinate the worldwide efforts and activities concerning demographic change, generations and migration, and that helps sharpen and deepen the discourse on a number of critical issues.

Each WDA Forum develops its own focus: last year in 2009 we were very focused on the interface between ageing, poverty and social justice (Kickbusch, 2009) and had a very extensive debate on approaches to development in view of the demographic challenge. We agreed on the necessity to apply the human development framework as we debate demography and ageing. Emerging economies and less developed countries need to be supported to establish the two basic forms of protection: minimum health protection and minimum income protection. Development aid strategies need to take this into account much more forcefully.

This year in 2010 the WDA Forum highlighted the strategic and political impact of the interface between demography, development, geopolitics and quality of life while keeping the issues discussed in 2009 in mind – particularly the challenge of equity and human development. Out of the interdisciplinary debate some alternative paradigms related to demography and ageing begin to emerge.
Political relevance: the power shift

The WDA Forum recognized the political importance of demographic shifts – not only in relation to national policies but in particular to regional or global dynamics as well as the new global geopolitical order that is emerging. Seminal shifts in power are occurring and demography is both a driving force and a potential risk in the positioning of countries. It seems that governments do not yet fully understand the political risk and global challenge that comes with demographic change and an uneven pace of demographic transition. One message was very clear at the WDA Forum: while all countries are experiencing major demographic shifts and are ageing, their specific development is divergent. One recent analysis (Howe & Jackson, 2008) indicates: the regions of the world will become more unalike before they become more alike and this will lead to danger points in political and security terms. We are at such a critical point of transition on a global scale: worldwide there soon will be more people over 65 then people under five.

Analysts warn that midway through the transition the inequities turn out to be the greatest and it becomes important for political stability to identify the groups in society that will lose most at this point. This is where policy needs to act in order to reduce social conflict.

The politics of vocabulary

The WDA Forum highlighted that meaningful classifications are needed which bring together demographic change, economic development, health development and political power shifts. At present we lack both the vocabulary and the metrics to describe the complexity of the transformation under way.

In order to understand the impact of demographic change the division of the world into two development spaces and two datasets, one for developed and one for developing countries, is insufficient. The divergence of demographic and economic change creates more complex patterns and new strategies for development require more precision to better count, account and describe developments in different societies. Some of the wording that has been used during this WDA Forum can give us an indication of new types of groupings and classifications that could be used to move the debate forward in a productive way.
Most countries in the rich parts of the world are experiencing Hyper Ageing; this implies that countries not only have a rapidly ageing population, but at the same time a stagnant population or perhaps even a declining one. We can also identify regions of decline in relation to life expectancy which are geographically quite apart such as some countries in Africa on the one hand and countries in Eastern Europe on the other hand. We need to understand that many emerging economies are also rising states in terms of their political power and we must begin to factor the demographic challenges into the political and economic calculations of their future progress. More precision is needed in terms of the famous statement that these countries will get old before they get rich – some of these countries are getting rich and old and more unequal at the same time. This leads to a domestic political challenge of enormous scope while these countries aim to position themselves in the multipolar global environment.

In his keynote Nobel Laureate Robert Fogel stated that there will be a continued perhaps even accelerated increase in life expectancy in the 21 century. His concept of accelerated ageing provides us with an understanding of the very important intergenerational effect that occurs for the countries that experience low fertility, high mortality in the working population plus emigration of young people at the same time. Increasingly migration movements are not only from the global south to the global north, many of these movements are now within a region and we will need to analyse these enormous regional effects more precisely for their political, economic, social and demographic implications.

Conceptual flaws

Picking up on discussions from last year, the WDA Forum 2010 drew attention to the flaws inherent in the concept of the dependency ratio. Not only does it not hold for societies where most of older people work and where they work within an informal economy; the concept is based on a construct of dependency that originates in western welfare states. But the construction of social security and pension systems in other parts of the world may need to be based on a different premise. At the WDA Forum very interesting examples of non-contributive pension schemes were described that have shown, not only a significant economic impact, but also an important positive intergenerational impact. In contrast, some of the richer societies have done an “export job” – they have given security to the older part of the population at the cost of insecurity for the younger part
of the population. In the long run, no society can afford such intergenerational inequity, particularly not societies that are ageing rapidly. Could intergenerational impact become a defining factor for new schemes that are introduced around the world? How will they contribute to sustainable economic and social development? How will they link to human development models?

Another conceptual flaw is the tendency to concentrate on burdens of mortality rather than understand the burden of disability. The WDA Forum strongly underlined the challenge to explore psychological longevity in tandem with physical longevity. This year’s discussion of dementia was exemplary of the need for such a shift: what do we gain if we continue to have the major increase in longevity but have, at the same time, high levels of dementia in the population? Will the doubling of dementia every 10 years continue? Will the explosion of diabetes in all parts of the world continue? The discussion showed that new research paradigms are needed: for example, we need to study healthy people not only diseases. The focus of the research agenda might shift from cure to postponement and to slowing progression, as in relation to dementia. What consequences does this have for the pharmaceutical industry and for pharmacology? The debate also indicated that the research agenda itself is influenced by ageism: it is partial to which diseases are studied and what kind of research is financed. Here there is a clear need for strong advocacy that could come from the WDA Forum.

The change of paradigms in health and care

Will health care systems be able to respond? How will families and communities organize around the new challenges in different parts of the world? The starting point has frequently been that healthcare systems in the poorer parts of the world should mirror and extend the model in the western world. But we probably need healthcare systems that start out from the household, the family and the community in quite different ways and would in consequence imply different financing models and new ways of sharing care and financial responsibility. To what extent can we learn from different parts – also poorer parts – of the world how to construct healthcare systems in a sustainable manner? A new word was introduced to describe that part of care that happens in the family and in the household: proximology. This is not about having informal carers taking on the
entire care burden – it is about organisational models, new professions, new technologies and new
types of carers as well as new types of self care. It is also about a new economics of informal care
that shows its value to society. This takes us back a full circle to the very first point: economics
based on a human development model.

**Steps forward**

The next two years will see critical dates at the level of the United Nations debate with relevance to
demography and ageing and the work of the WDA Forum. This year from 20-22 of September
2010 – just after this WDA Forum – the *Millennium Development Goals* of the United Nations are
being reviewed at a UN Summit. One suggestion that has been tabled is to extend goal 3 which
promotes gender equality to be expanded to include gender *and age* equality. This is relevant also
because women constitute the majority of older people. This links to the on-going advocacy for a
UN Convention for older people, first championed by Robert Butler.

The United Nations is further engaged in a review of the *Madrid Plan of Action on Ageing* which will
be presented in 2012. The WDA Forum is challenged to influence its future directions in the
context of the bottom-up evaluations that have been proposed – definitely many of you have
suggested to use the WDA Forum in 2011 to prepare a contribution. One step that has already
been taken during this meeting has been to strengthen the active ageing approach by developing
an index on active ageing. A working group has begun to outline a set of key indicators so that we
hope to be able to propose an index of active ageing in 2011 and take forward to 2012 to
contribute to the review of the Madrid Plan of Action.

In 2011 another very important discussion will take place at the UN: The NCD Summit 2011,
officially called the *‘High-level Meeting of the United Nations General Assembly on the prevention
and control of non-communicable diseases’*. It will take place in September 2011 in New York and
will be convened with the participation of Heads of State and Government. It is expected that the
NCD Summit 2011 will focus on galvanizing action at global and national levels to halt and address
the health and socio-economic impact of NCDs through multi-sectoral approaches. It will be critical
to use this Summit to generate awareness of demographic issues such as dementia and diabetes
which the WDA Forum discussed this year.
Dreams and nightmares

As always a very rich agenda has emerged from this year’s WDA Forum discussions. We also drew attention to issues that need to be included in future WDA Forums, such as a discussion with the countries concerned on how to make use of the youth bulge and youth power. But above all, each year at the WDA Forum in St. Gallen we aim to contribute to a better understanding of a new form of society of all ages that is taking shape. Our intent is to link the demographic transition to a vision that is not based on threat, but on an experience of longevity that is positively integrated and embedded in people’s lives.

In a recent book, the sociologist Anthony Giddens draws attention to the fact that Martin Luther King did not stir people to action by saying “I have a nightmare”. But it is in terms of a nightmare that demographic issues are usually discussed. We are confronted with humanity’s dream of a longer and healthier life becoming a reality for an increasing number of people despite all the problems we have analysed. And more and more people can participate in this dream despite the transition problems. It is really up to all of us who also partly belong to different generations to construct the political and social innovation that will allow an ever increasing number of people to live this dream in their everyday life.

Thank you very much.
Professor Dr. Ilona Kickbusch, St. Gallen 27th of August 2010

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