

ACPA – Adapting European Cities to Population Ageing: Policy challenges and best practices

Targeted Analysis

Synthesis report

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Abbreviations

ACPA	Adapting (European) Cities to Population Ageing
BAME	Black, Asian and Minority Ethnic
DEMIFER	Demographic and Migratory Flows affecting European Regions and Cities
EC	European Commission
ESPON	European Territorial Observatory Network
ESPON EGTC	ESPON European Grouping of Territorial Cooperation
EU	European Union
LGBT	Lesbian, Gay, Bisexual, Transgender
NUTS	Nomenclature of Territorial Units for Statistics
WHO	World Health Organization

Introduction

Many countries in Europe are facing a demographic transition which also entails an increasing number of older people. This trend is usually most apparent in rural areas. However, in urban areas this phenomenon is starting to become visible as well. The cities of Amsterdam, Barcelona, Gothenburg, Hengelo, Greater Manchester, Nantes, Oslo and Zaragoza belong to a group of cities that are either already facing relatively high percentages of older people in their populations, or expect such high percentages in the near future. During the last years, these cities have undertaken action to improve quality of life for older people. Still, they have a knowledge need related to the following questions:

More specifically, the stakeholder cities showed the following knowledge needs:

- How do older people experience the daily life in the cities?
- What do older people view as benefits and constraints associated with urban living?
- How are the eight stakeholder cities responding to population ageing?
- Which policies have been the most effective in developing age-friendly cities and how have they been implemented and which are the success factors?

Previous ESPON research projects, like DEMIFER, have analyzed the territorial challenges posed by demographic change at the European scale. However, there is still a knowledge gap as regards to how cities can best adapt to an ageing population in practice. The targeted analysis ACPA is addressing this knowledge gap.

The present synthesis report summarizes the results of the ACPA project, with respect to demographic developments and views of older people, followed by analysis of the stakeholder's strategies, success factors and the challenges that are still ahead. We conclude with recommendations for the next steps to be taken. For more in-depth insight in the ACPA project, the reader is advised to read the ACPA main report and corresponding policy handbook.

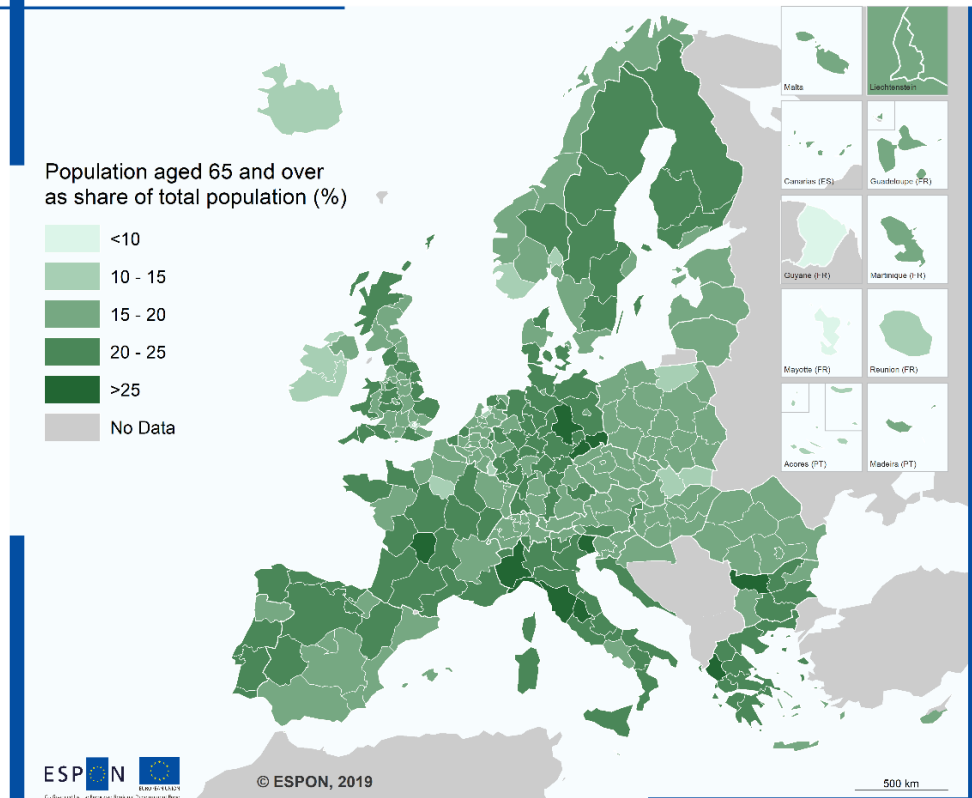
Trends and developments in population ageing

All European countries can expect an increase in the share of older people. In the year 2000, around 16% of the total population of the European Union was aged 65 and older. In the following years, this number increased significantly, although with **regional variation** (maps 1-2). By 2030, the percentage of older people is expected to have increased to 24% on average. More detailed analysis shows that there are relatively big differences in demographic patterns between the EU-28 countries on the one hand, but also within cities large differences exist between neighbourhoods (maps 3-10).¹ This shows that a neighbourhood approach is essential in developing urban ageing policy. Other indicators also reveal that population is a heterogenous process. For example, the investigated cities differ in terms of **gender balance** within the population aged 65 years and over, as well as their **life expectation** at age 65 and their **self-perceived health**.

¹ Also see Annex: Demographic maps and figures of the main report

Map 1: Share of older people in European regions in 2017

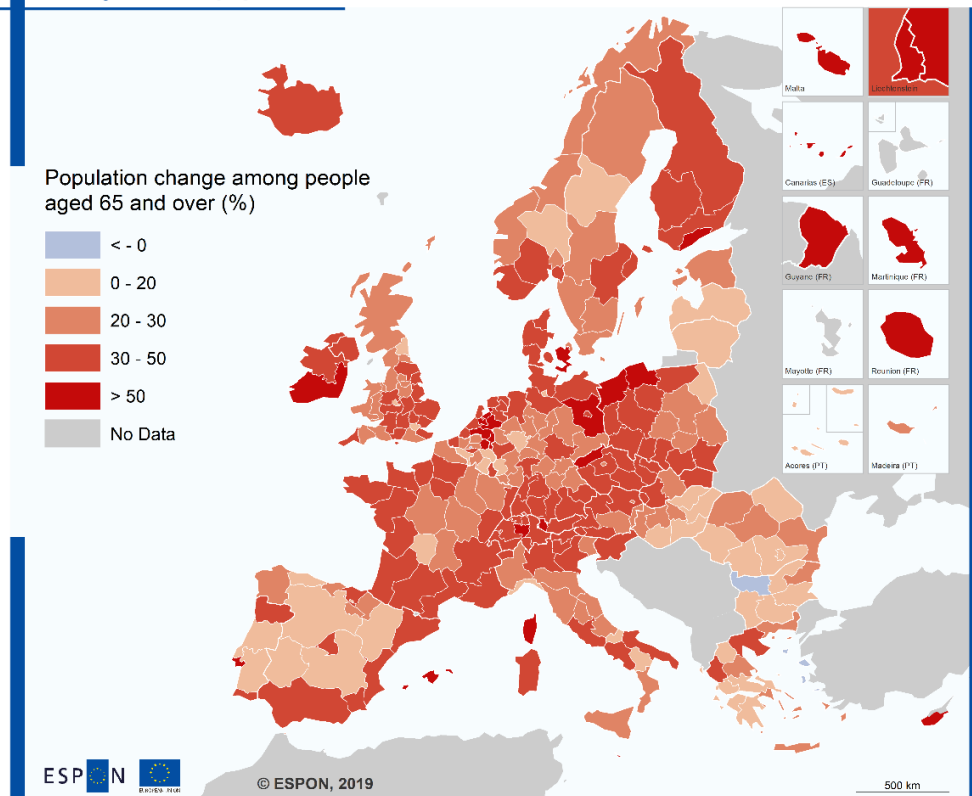
Share of older people in European regions 2017



Regional level: NUTS 2 (2013)
 Source: ESPON ACPA, 2020
 Origin of data: Eurostat, 2019
 © UMS RIATE for administrative boundaries

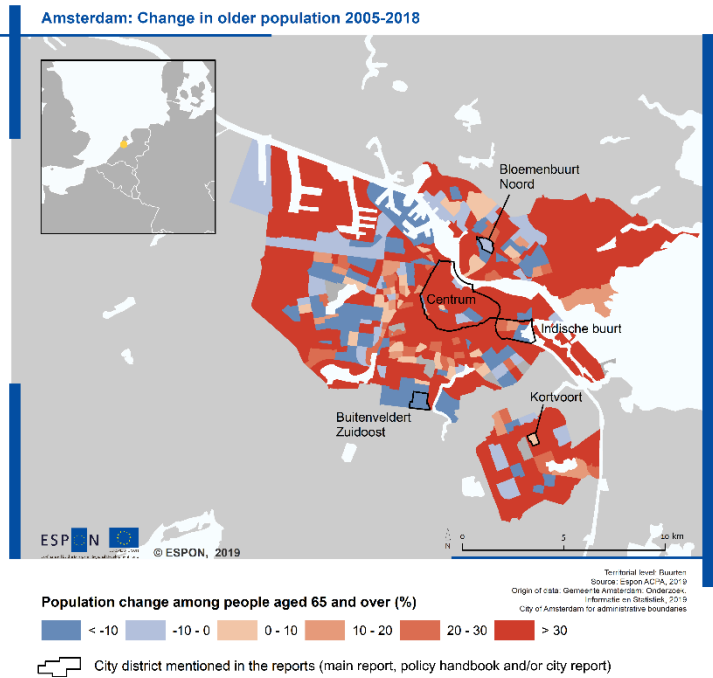
Map 2: Percentual change in older population between 2000 and 2017

Change in older population 2000-2017

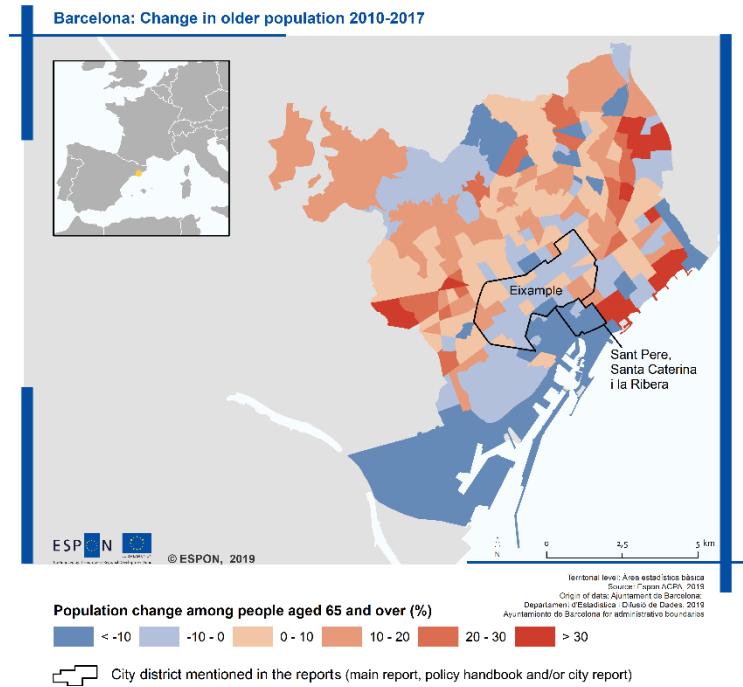


Regional level: NUTS 2 (2013) except DED;HU1;SI0;UKD;UKI;UKM NUTS 1 (2013)
 Source: ESPON ACPA, 2020
 Origin of data: Eurostat and NSIs (DK), 2019
 © UMS RIATE for administrative boundaries

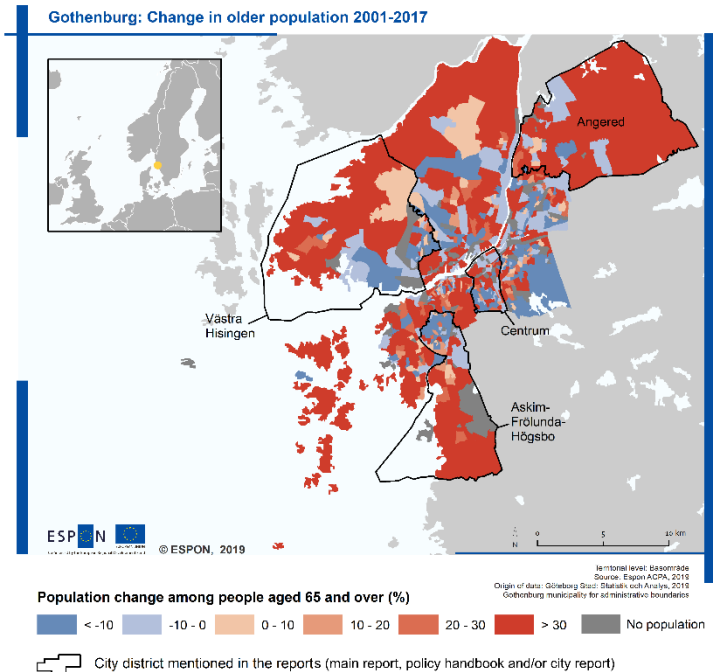
Map 3: Change in the number of older people in Amsterdam, 2005-2018 (in %)



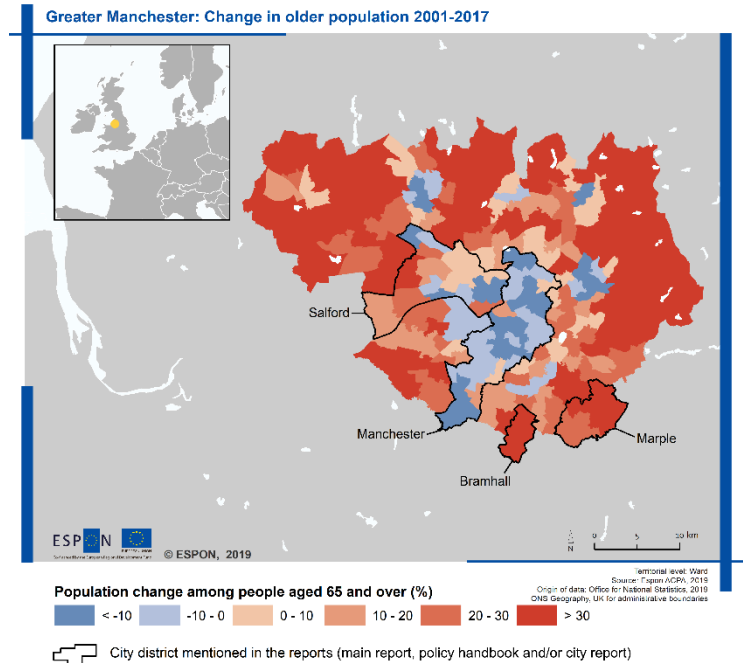
Map 4: Change in the number of older people in Barcelona, 2010-2017 (in %)



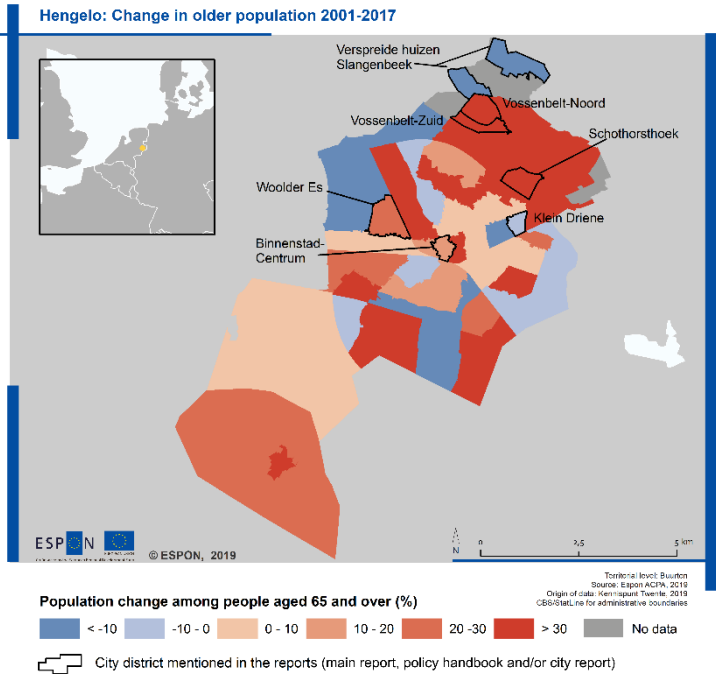
Map 5: Change in the number of older people in Gothenburg, 2001-2017 (in %)



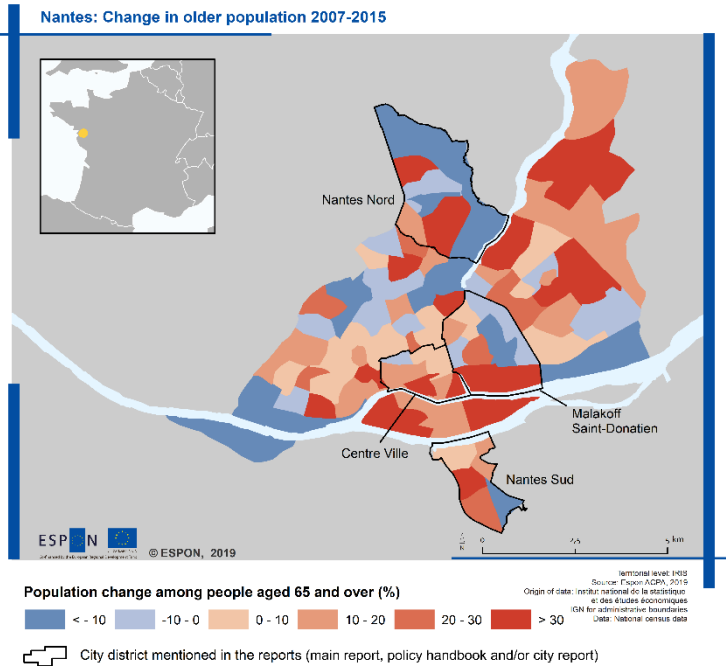
Map 6: Change in the number of older people in Greater Manchester, 2001-2017 (in %)



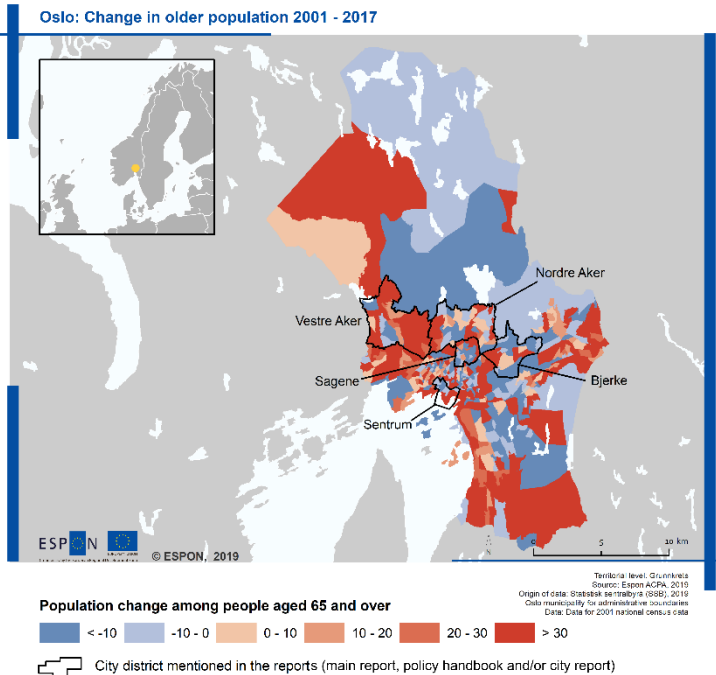
Map 9: Change in the number of older people in Hengelo, 2001-2017 (in %)



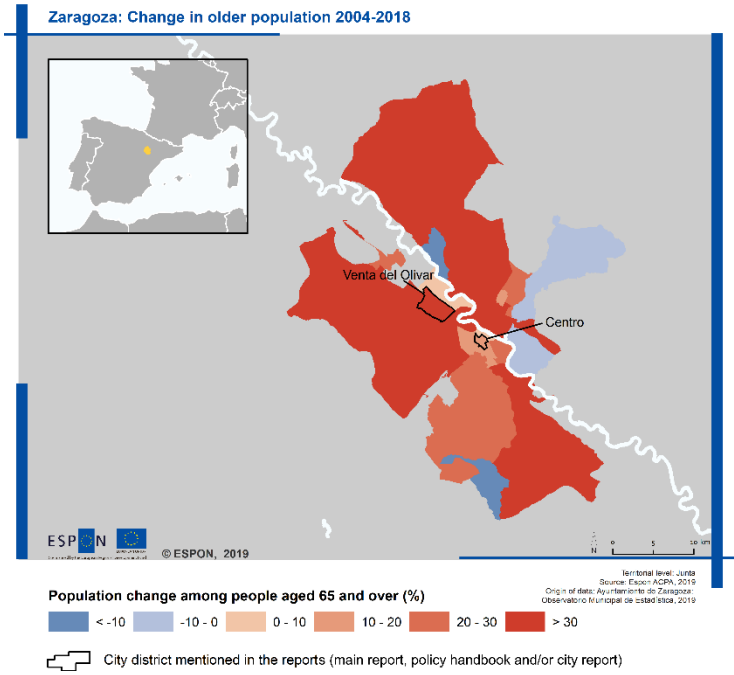
Map 10: Change in the number of older people in Nantes, 2007-2015 (in %)



Map 7: Change in the number of older people in Oslo, 2001-2017 (in %)



Map 8: Change in the number of older people in Zaragoza, 2004-2018 (in %)



Urban life from the senior's perspective

Zooming further in to the stakeholder cities, focus group discussions led to both differences and similarities between the eight stakeholder cities. The differences occur due to rather specific local trends and developments. Looking at the similarities, it becomes clear that the consulted older people are relatively content with their cities. Older people have expressed the **proximity to essential services and amenities** as important benefit associated with living in a city. Older people are relatively more bound to using public transport, and the relatively dense network of transport routes enables them to remain more active compared to living in a rural area. In the city, they are also more close to medical services and social activities.

However, across all cities, one theme is evidently worrying the consulted seniors: **accessibility**. In the first place, they are concerned about the accessibility of information. They are not comfortable with the increasing **digitalisation** of society – usually due to their lack of digital skills – and fear of being excluded from necessary information. Furthermore, they point at the accessibility of **buildings and public space (feelings of insecurity)**. Lastly, older people indicate that **transportation** is becoming increasingly difficult; and seen as a barrier to reach desired activities and services.

Other topics which the consulted older people are concerned about are the emphasis on **self-reliance**, lack of affordable and adapted **housing**, and lack of activities and services for **minorities**.

Stakeholder city's strategies

The eight case study cities in ACPA have mostly taken the WHO domains as inspiration for their own developed strategy. Overall, the picture is that roughly, the stakeholder cities have achieved the following **implementation** per domain:

1. **Outdoor spaces and built environment:** making grey and green public spaces more accessible to older people, for example by adding more rests and toilets to public space, or removing obstacles such as loose tiles;
2. **Transport and mobility:** providing additional mobility to reach destinations that are not accessible by public transport, or because the senior has difficulty with accessing buses and trains; often these services also provide extra assistance such as finding destinations and helping to aboard;
3. **Housing:** subsidies for and assistance with applying in-home adaptations to facilitate living longer at home independently; or providing clustered housing forms where older people live in a safe environment with various amenities at close hand. Also coaching to anticipate moving to a better suited home was discovered;
4. **Social participation:** stimulation of participation in social and leisure activities. These can be often found in neighbourhood centres, but also digital smartphone apps are emerging that enable seniors to maintain a social network;
5. **Respect and social inclusion:** creating positive attitude and awareness towards ageing – sometimes combined with intergenerational activities – and making culturally sensitive policies for minorities such as migrants;

6. **Civic participation and employment:** stimulating volunteering of older people and involving older people in decision making and design of policies and activities for older people;
7. **Communication and information:** teaching seniors to use digital technology, but also making sure that relevant information is available through non-digital channels;
8. **Community and health services:** providing healthcare interventions to keep older people active by physical exercise, and forming of informal supportive care networks.

The **most occurring domain** is that of social participation, inclusion and community support. This can be explained by the fact that measures in these domains are relatively cost efficient and provide opportunities for combinations with other policy domains, such as transport and outdoor spaces.²

From the policy analysis that has been carried out, it is possible to outline commonalities and differences between the stakeholder city approaches. The approaches exhibit some differences, but more commonalities are visible.

The **differences** in the approaches relate to the subsidiarity (governance level), definitions and policy demarcations. First, there are differences visible in the level at which governance takes place. In some cities (e.g. in Greater Manchester and Oslo) the districts have the autonomy to develop their own additional initiatives, and in some cities, the regional governance level is used relatively more than in other cities. Second, the age thresholds for target group demarcation differ per city (50+, 60+, 65+ or 67+ years). Also the policy choices related to target groups (general policy or differentiated by sub group) and geographical coverage (city wide or targeted at specific neighbourhoods) do differ per city.

Still, more **commonalities** are visible. All eight stakeholder cities experience big increases in the number of older people that are very locally concentrated. These ask for place-specific policy. Most policies aim to make older people more active and independent – often focusing on relatively vital seniors. The most popular themes in most approaches are social participation, inclusion and community support – though the cities themselves also deem housing as priority.

The actual design and implementation of many activities is also similar across the stakeholder cities. For example, cultural activities for older people are often in neighbourhood centres or in other public places. With respect to transport, tailored solutions prevail that can bring older people to locations where public transport is not available. With housing, the goal is often to let older people live longer independently, by providing adapted housing for living independently or funding where older people can apply for a subsidy to make adaptations to their own homes.

Yet, it is also notable that none of the cities has a clear **long-term strategy**, nor do the cities systematically **monitor and evaluate** their progress in making their city more age-friendly.

² The report and corresponding policy handbook provide more detailed insight in the implementation of ageing policy in the stakeholder cities. Especially the policy handbook pays much attention to good practices.

Success factors

The most effective ageing policies are developed as a result from thorough **problem analysis on the neighbourhood level**. This involves statistical analyses of past and projected trends and developments per neighbourhood ('policymaker's view'), as well as consultations of older people to learn about their wishes and needs ('senior's view').

Because active and inclusive ageing is a holistic concept, it also involves **a holistic policy design**. It requires various policy departments to work together in teams. Such 'task forces' should be formed per challenge, such as counteracting loneliness or fall prevention. Traditional sectoral departments working on ageing parallel to each other will be less successful.

A successful holistic policy design also **addresses multiple demands altogether**. A good example is Gothenburg's project Life Filming, where older people film their life with tablets in pairs and have the choice to report certain parts to the municipality. As such, one project teaches them to use digital technology, and also enables them to maintain social contacts, as well as being given a voice in public administration.

The following additional **success factors** influencing the outcomes of urban ageing policies have been identified:

- Funding and political support from the city council, preferably by the mayor or alderman;
- Tailoring of service provision to the target group. This includes using the language of the target group – literally and figuratively –, adapting activities to their culture, and making use of non-digital information and outreach channels when needed;
- Active involvement of older people in the design and implementation of policies and activities;
- Close collaboration of involved stakeholders. Not only within municipalities, but also within the wider city. Municipalities should play a facilitating role in bringing together other stakeholders, such as community workers, healthcare professionals and similar actors;
- Positive and informal approach towards older people: reaching older people becomes more effective when they are not called patronised and when it is not emphasised they have a 'problem'. Positive psychology plays an important role here;
- Improving intergenerational linkages can further help to increase awareness and support of older people.

Challenges

Population ageing will become increasingly manifest the coming decades. This increases the challenges that European cities are facing. There are challenges on both the strategic level and operational level.

On the strategic level, it is paramount to counteract current trends with potentially large negative effects. Effectively, the following challenges are worth mentioning here:

- The **financial consequences** of population ageing. Knowing that the number of older people is increasing and will continue to increase the coming decades, this means an increase in all costs that are caused by services for older people. This creates an urgency for measures to organise (health) services more efficiently, replace them by digitalisation where possible and try to avoid unnecessary healthcare costs;
- The **effects of various forms of inequality and growing divides** between a city's inhabitants. Cultural inequalities, financial inequalities, inequalities in digital skills are examples of such drivers of segregation. If these are not tackled, the result will be a growing divide between those who are able to participate in society and those stuck in loneliness or other forms of physical and socio-economic immobility. Many cities have acknowledged the need for inclusion, but the way ahead is a long one. Investing in good education is paramount to tackle financial inequalities and inequalities in digital skills. Education for older people can help them cope with new technologies, but especially good education for young people is important. It ensures more equal chances at later age;
- **Overcoming negativism and stereotypes.** The research findings indicate that among the broader urban population, there is often still a rather negative view of older people and the process of ageing. Sometimes plain misunderstanding of older people's needs is apparent. On the contrary, people providing public services, such as desk clerks and shopkeepers should be able to interact with older people, even the difficult groups such as those with dementia. Not only the broader public, but also older people themselves tend to have difficulty in dealing with ageing and anticipating physical and mental deterioration or admitting being in need;
- **Collaborative action and the emergence of leadership.** Too often, population ageing is taken up by different stakeholders within cities in isolation of each other. This leads to inefficient and ambiguous approaches. Instead, it is necessary that all relevant stakeholders join forces and led by a strong leader figure, develop a long-term strategy.

Besides more strategic challenges, there are also more practical, operational challenges ahead. These relate predominantly to safeguarding the success of activities undertaken.

- Firstly, there is need for **continuity in activities organized for older people.** Besides the good practices, many initiatives were found that can be classified as short-running pilot projects without follow-up. This is not only an unefficient use of resources, but also an impediment to recognition among a wide group of older people. The development of a long-term strategy will ensure stability;
- Moreover, it is a challenge to achieve **more and better learning from ageing policy.** This means that more attention has to be paid to learning from older people about their wishes and needs, and how to **involve them** as much as possible, but also to monitoring and evaluation of existing policies, and to more peer learning and exchange of good practices between cities;
- Related to the previous point, it is a challenge to **involve European bodies** as much as possible in age-friendly city activities. Many local policymakers turned out to make little to no use of European funding and exchange platforms, while these can provide essential resources. The existence of exchange bodies such as AGE Europe, the Eurocities working group on Ageing and the EIP-AHA is also less well known among many policy makers.

Policy recommendations

In relation to the challenges portrayed in the previous section, ACPA has led to the following recommendations for policymaking and future research.

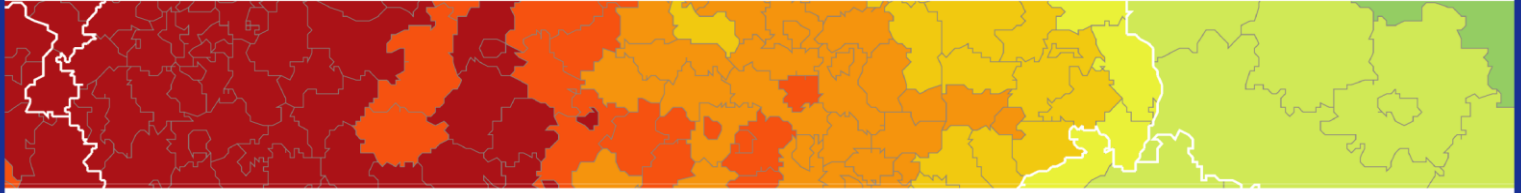
- **Continuation of the Age-friendly City network concept.** The cities that have been investigated for the ESPON ACPA project and that are part of the Age-Friendly City network are highly positive about the concept. They consider it as a crucial means to structure their policy programme and to apply focus to the most important and demanding topics within the phenomenon of population ageing, as well as allowing for ease in intra-municipal and inter-city collaboration and knowledge exchange;
- **Development of a holistic and long-term strategy** towards 2030. Many cities currently do not have such a strategy yet. It should link their vision to strategic and tactical goals – ensuring stability and higher probability of steady change. Furthermore, such a strategy should acknowledge the **urban dimension of ageing**, paying attention to issues such as differences between neighbourhoods, scarcity of space and the diversity of stakeholders and population groups (including BAME and LGBT seniors). At the same time, it should take into account that political stakeholders often demand tangible results within short time span;
- **During each city council period, the long-term goals should be translated into applicable 4- or 5-year goals**, covering the city council's term;
- **Development of an ecosystem for more collaboration of institutional and non-institutional stakeholders.** Municipalities should join forces with interest groups, civil society organisations, community workers, health organizations, leisure and sport facilities and restaurants to collectively develop the necessary long-term and holistic strategy. An ecosystem including a networking organisation is necessary to facilitate this. Also the role of private companies in general should be investigated: how can they contribute to an age-friendly city within the mentioned ecosystem?
- **Collective approach towards all relevant European institutions.** For example, all stakeholders should collectively bring the topic under attention of members of the European Parliament (MEPs), in order to get population ageing higher on the political agenda. For this, it is worthwhile to liaise with AGE Europe, which already works closely with the European Parliament;
- **More monitoring and evaluation.** For reliable knowledge exchange, it is essential to have insight into the effectiveness of policies through both quantitative and qualitative analysis, comparing the intervention outcome with the baseline situation;
- **Focus on developments and demands**, to ensure that current priorities match with ongoing societal developments and demands from older people, with attention to:
 - Digitalization and similar threats to inclusion;
 - Social inequality as well as diversifying populations and their needs;
 - Holistic approaches and multi-stakeholder involvement;
- **Raise public awareness about ageing.** This should turn negativism and stereotypes into a positive view on ageing, and understanding of senior's needs across the rest of the population;
- **Make more efficient use of resources on all geographical levels.** Within neighbourhoods, community workers and older people themselves often have very valuable knowledge about trends, developments and needs. At the European level, platforms such as the Eurocities Working Group on Urban Ageing, AGE Europe and the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA) form

excellent networks to exchange knowledge and more cities should look to join such networks and learn from each other.

Future research recommendations

Additionally, future research on population ageing in cities is necessary. There are questions that were out of ACPA's scope or have emerged as result of the project findings.

- **Perform more research on the urban dimension of population ageing.** ACPA has shown that using rural areas as contrasts is necessary to learn more about the urban dimension. Furthermore, developing a typology of cities with population ageing, a strategy for getting more favourable outcomes for older people in the urban battle for space, and models for predicting population ageing and its consequences per neighbourhood require future research;
- **Develop methods for the evaluation of social initiatives for older people.** Social outcomes and social impact are notoriously difficult to quantify, but this is paramount for assessing impact towards older people. Some progress has been made already (e.g. social cost benefit analysis and business cases), however methodological improvements are still necessary;
- **Study ageing from a positive perspective.** We should look for ways of seeing ageing populations as a societal resource rather than a burden, and identify the actual contribution of older people to society. Research towards positive ageing is still quite limited, and policy makers could benefit from additional information with this perspective in mind;
- **Further refine the relevant target groups and their needs.** The results have shown that older people are an heterogeneous group and that one size fits all policy will not work. However, the exact needs and wishes of groups such as older migrants and other minorities such as the Roma, LGBT seniors or older people with different income levels are not clear in many cities. Better research on their needs will further strengthen current policies.



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