





www.stat.si

# The Elderly in Slovenia







# The Elderly in Slovenia

Author Nelka Vertot Translated by Nelka Vertot, Boris Panič, Marina Urbas Printed by Littera picta d. o. o.

The publication is available at www.stat.si/eng/pub.asp Information: Information Centre

phone: + 386 1 241 51 04 e-mail: info.stat@gov.si

CIP - Kataložni zapis o publikaciji Narodna in univerzitetna knjižnica, Ljubljana

314-053.6(497.4)

VERTOT, Nelka

The elderly in Slovenia / [author Petronela Vertot; translated by Nelka Vertot, Boris Panič, Marina Urbas. - Ljubljana: Statistical Office of the Republic of Slovenia, 2011

ISBN 978-961-239-220-8

1. Gl. stv. nasl.

254540032

#### Foreword

This is a time of great social changes, which are largely due to the development of political, economic and demographic factors. Due to continuous reduction in fertility and mortality (i.e. longer life expectancy), especially in the developed world – including European countries – we are faced with accelerated population ageing and the changes and problems related to it. We speak of population ageing when the share of the population over a selected age (most often the accomplished 65 years) in the total population is rising. The population ageing is thus one of the serious challenges facing the humanity today. Although the relevant indicators have for many years been drawing attention to this phenomenon, we must realize that "the population ageing is a quiet process, that it develops over a longer time and that it leads to consequences that are difficult to predict" (Antonio Galini¹). This is why the current situation of population ageing in the world is something new, unique, unpredictable and should be treated differently. "The older persons of today are not the older persons of yesterday, and will be different from the older persons of tomorrow." (Elizabeth Mullen²).

In the last decade the problem of population ageing has been intensively studied by the United Nations, the OECD and the European Union. The constant decrease in fertility and the longer life expectancy in recent decades have greatly changed the age structure of the population—the world's population is getting older. The majority of the EU-27 Member States are facing the consequences of the fact that their populations are gradually ageing. An increased share of the elderly causes a number of changes and is the reason for new challenges for which appropriate solutions must be found as soon as possible. Such demographic development requires profound social changes in the fields of social security, housing and employment, and probably elsewhere. In addition, the gradual process of population ageing also strongly affects the normal relationships between generations. More and more people feel that answers must be found by all generations together and that their efforts and search must be based on dialogue and mutual cooperation.

In 1991 (9 years after the first World Assembly on Ageing was held in 1982 in Vienna) the UN General Assembly adopted the United Nations principles for older persons and in 2002 (at the Second World Assembly on Ageing in Madrid) the International Action Plan on Ageing. With this plan the UN wanted to promote the development of a society for all ages and promote a new culture of ageing and thereby contribute to a more humane and happier old age in the  $21^{\rm st}$  century.

In October 1998, the "eve of" the International Year of Older Persons, 1999, the then UN Secretary General Mr. Kofi Annan said that "we are in the midst of a silent revolution, a revolution that extends well beyond demographics, with major economic, social, cultural, psychological and spiritual implications." He thought about the population ageing, i.e. the increase in the share of older people, which is mainly due to significant economic, social and health-related progress, but is also one of the most important challenges the world – first its developed part (including the EU) – will have to seriously address in the coming years.

<sup>&</sup>lt;sup>1</sup> Institute of Medical Biochemistry, Federal University of Rio de Janeiro.

<sup>&</sup>lt;sup>2</sup> American Association for Retired Persons (AARP).

In Slovenia, too, population ageing is a process that can not be avoided. With the decline or too modest number of births, with longer life expectancy and with lower mortality the age structure of the population is changing: the share of children aged 0-14 is decreasing, while the share of working age population (15-64 years) and the share of older people (aged 65+) are increasing. Between 1981 and 2004 the share of children decreased from 23% to 14%; in the same period the share of working age population (15-64 years) increased from 66% to 69.5%, while the share of people aged 65 or more – which was in the early 1980s around 10% – has been constantly increasing since 1987 and in 2004 exceeded 15%.

According to the medium variant of EUROPOP2008 population projections for Slovenia, by 2060 the share of people aged 65+ is expected to increase by more than 16 percentage points (to 33.4%); the number of people aged 65+ should increase to 589,900 (from 325,300 in 2008). The share of people aged 80+ is expected to increase to 14.1% or in absolute number to 249,500 (in 2008 the share was 3.5% or 71,200 people).

As in many countries the population ageing already threatens the sustainability of their public finance, much attention is focused on this problem and seeking of possible solutions. When speaking of the increased life expectancy and the associated modified health status of people discussions revolve around the possible financial implications of an ageing population, age is normally assessed by three possible scenarios: "living longer", "living in good health" and "living longer and staying in good health."

Despite the many unknowns about the future faced by humans (even those from Slovenia) today, it is the clear that tomorrow's society will be different from today's – also and especially due to demographic change. According to demographic indicators, our society has already entered the "mature years" as the share of older people – in the so-called "golden age" – is steadily increasing; at the same time the attitudes towards ageing and older people are also substantially changing. Experiencing and anticipating longer lives, our feelings are often mixed: we are delighted because we can hope to live long, but we are also afraid because we do not know whether at old age we will have the resources to survive.

In search of the most appropriate solutions in this area for our society, our new publication is an additional source of information necessary for planning future changes in this area and for defining some measurable objectives. Data showing only "extracts" for selected areas related to population ageing in Slovenia were, if possible, supplemented with data from other EU-27 Member States, which clearly show the position of Slovenia in the European context in view of some of the described areas. Even though Slovenia is a small country in terms of its territory and population, as regards the ageing indicators there are (larger or smaller) differences among individual "territorial parts" of the country (statistical regions and municipalities of the Republic of Slovenia).

The brochure also presents a selection of data on persons having pension insurance and receiving pensions in Slovenia, which were prepared by the Pension and Disability Insurance Institute from its records this time for the first time by municipalities of Slovenia.

Irena Križman Director-General



# CONTENTS

THE POPULATION AGEING IS AN ACHIEVEMENT OF THE SOCIETY	7
THE POPULATION KEEPS GETTING OLDER	10
THE NATURAL CHANGE OF POPULATION IS MODEST	21
(CO)EXISTENCE OF THE ELDERLY	27
THE EMPLOYMENT RATE OF THE ELDERLY IS LOW	35
INCOME OF THE ELDERLY	
HEALTH IN LATER YEARS	49
AT-RISK-OF-POVERTY RATE FOR THE ELDERLY	
CONCLUSION	54
METHODOLOGICAL EXPLANATIONS AND DEFINITIONS	
STATISTICAL AND OTHER SIGNS	
ABBREVIATIONS AND UNITS OF MEASUREMENT	58
LIST OF COUNTRIES: NAMES AND ABBREVIATIONS (ISO 3166)	59
MUNICIPALITIES OF THE REPUBLIC OF SLOVENIA, 1 January 2009	59
SOURCES AND LITERATURE	60



Photo: Nelka Vertot

Early to bed and early to rise makes a man healthy, wealthy and wise.

Slovenian proverb

A good rest is half the work.

Slovenian proverb

There are five ways in which to become wise: be silent, listen, remember, grow older and study.

Arabian proverb

Age is a very high price to pay for maturity.

Tom Stoppard

When a noble life has prepared old age, it is not decline that it reveals, but the first days of immortality.

Germaine De Stael

A society grows great when old men plant trees whose shade they know they shall never sit in.

Greek proverb

Old bread isn't hard, no bread, that is hard.

German proverb

If youth knew; if age could.

Henri Estienne

The more you know, the less you need.

Aboriginal Australian proverb

Men grow old, pearls grow yellow, there is no cure for it.

Chinese proverb

Age is an issue of mind over matter. If you don't mind, it doesn't matter.

Mark Twain

The strength of the old is their ready counsel.

Welsh proverb

What an elder sees sitting; the young can't see standing.

Gustave Flaubert

A new broom sweeps clean, but the old brush knows all the corners.

Irish proverb

The oldest trees often bear the sweetest fruit.

German proverb

Do not seek to follow in the footsteps of the men of old; seek what they sought.

Zen proverb

Old age needs so little but needs that little so much.

Margaret Willour



Photo: Nelka Vertot

## THE POPULATION AGEING IS AN ACHIEVEMENT OF THE SOCIETY

Changes in the social order and political systems as well as economic and technological development have always had a significant impact on the society and people living in it. In social sciences the time in which we live is called a post-modern society or even the age of "beyond". Many things that used to be taken for granted in human life have lost importance and social impact over the last decades (Social Development, UMAR, 2006), among them certainly the lengthening of life expectancy and the intergenerational co-existence inherently linked to it. Almost every day people are confronted with a number of new opportunities and choices and often forced to decide "in passing" without any time for a sober reflection and almost "daily" to at least correct if not radically change the ways of life and plans related to it. Statistical data do not only "draw attention" to the central demographic problem of today in developed countries, i.e. rapid population ageing, but also to the cause and effect of this phenomenon, i.e. the marked decline in birth rates and the lengthening of life expectancy at birth (which is an indicator of population health, the expected average number of years lived by a newborn on the assumption that age-related mortality remains the same). The size, age and sex structures and regional distribution of our population in the coming decades depend on the future levels of fertility, mortality and migration, but how we, a large crowd of individuals, will be living in this part of Europe to a large extent depends on what we are as individuals and as a whole - the society: namely, what are the preferred values which we live.

Values are increasingly becoming the factor that sets the limits for areas within which we talk about the challenges and ways to address issues of a rapidly changing modern world, which demands constant adjustments from everyone. Values are conceptions of what is important, what is worth pursuing and standing for. They determine how the society and its people fulfil a common mission and follow a common vision of future development. A well-regulated and solid society needs common criteria and values because without common values members of the society could not connect with each other. Connecting with others is essential for everyone because... only in relation to other fellow human beings one can get valuable experience on real values of life... Although it often seems that modern people no longer have a value system and objectives which they would strive to achieve all their lives, and that new value systems are becoming increasingly temporary and less clearly delineated, it just is not so. For good functioning of its people Slovenia also needs moral values and principles that put it in a certain value framework for operation in the future, and needs good intergenerational relations (i.e. good, consistent, cultural intergenerational relations useful for all people involved).

Life is an indivisible whole. Ageing is part of our life and to reach old age is an achievement, so it is normal to grow old. We can not prevent ageing, but a healthy lifestyle (healthy diet and proper amount of exercise) keeps a person more vital (full of life power). Ageing is accelerated by a number of factors: genetics, humid and hot climate, living in cities, the way of life, unhealthy nutrition, lack of exercise, type of job, harmful and bad habits.

The number of the elderly men and women is increasing, and life expectancy of people is getting longer, especially due to improved health and social conditions. Despite the fact that the elderly are now more able than they were decades ago, it seems that the preoccupation with age today is much greater than before. In modern culture, in which the values of youth, beauty and success are most admired, doubts about the value and meaning of ageing and age have already been spread; unfortunately, research increasingly mention suicide among the elderly...

#### THE POPULATION AGEING IS AN ACHIEVEMENT OF THE SOCIETY

Today probably the most important part of creating socio-economic development is to seek the most appropriate ways to include people of all ages in the society so that the discrimination due to age and involuntary isolation will be as rare phenomena as possible. Because ensuring the right to protection against poverty and social exclusion is especially important for the elderly (who are also increasingly helpless), it is essential to promote solidarity and mutual assistance (support) between generations. Because the quality of life of all generations is as important as longevity, the ageing people should be to the maximum extent possible enabled to live (as an integral part of the community) a full, healthy, safe and satisfactory life. Respect and care for the elderly must remain or become constants of human culture, therefore the issues of the life of the elderly should not be seen in isolation but as an important and necessary integral part of the overall development process of human society. Human dignity is, irrespective of the age of people, always the same and always "young".

The principal feature of the current and future demographic development in Europe is population ageing, which causes great problems especially to the developed countries. The phenomenon of population ageing is partly due to declining fertility rates and mostly due to the extremely noticeable extension of life expectancy. This is why the concern – especially in the European countries – is focused less on what the future population growth will be like in these countries and more on how the ratios between the individual, especially "broad" age groups will change: what will be the relative shares of those who work and contribute to tax revenues of the country and of those who depend on other people (children, youth and the elderly). The OECD estimates that in the EU Member States only 50% of people aged 55-64 are employed (in the EU the figure is even lower, 39%) while among people aged 25-54 more than 75% are active.

The population ageing in the EU is the result of four demographic trends which influence one another, even though their volume and rates among countries differ. These are:

- low average number of children per woman (the total fertility rate),
- reduction in fertility in recent decades that followed the post-war baby boom,
- a significant increase in life expectancy at birth (since 1960 by more than 8 years) and reduced mortality,
- a large number of immigrants from third countries (which will continue).

Declining birth rates and longer life expectancy in most developed countries are strongly changing the age structure of the population. In Slovenia, too, the mean age of the population has been constantly increasing: at the beginning of the 1950s it was about 30 years, at the end of 2004 it was 40.3 years and at the end of 2009 41.4 years.

## Who are the elderly and what is ageing or old age?

The boundary between middle age and old age cannot be defined exactly because it does not have the same meaning in all societies. People can begin to be considered "elderly" ("old") when certain changes happen in their activities or when their social role changes – e.g. when they become grandparents or when they retire – or when they reach a certain age.

There is no general agreement – not even within one country, let alone in Europe or the world – about who the elderly (old) are and when an individual can be labelled elderly (old). Therefore, various age limits are applied for various needs. In classifying people by age, the age of retirement is being increasingly used as the start of old age. For classifying people into broad age groups, in Slovenia the following divisions are normally used: persons aged 0-14 are labelled "young", persons aged 15-64 are labelled "working age" and persons aged 65 or more are labelled "old." Sometimes a slightly different distribution is used: 0-19 years "young", 20-59 years "adults" and 60 years or more "older adults".

#### THE POPULATION AGEING IS AN ACHIEVEMENT OF THE SOCIETY

The "definition" of old age is changing both in theories of social scientists as well as the vocabulary of politicians and various organizations. In recent years, the words "active ageing" have often been heard, which seek to emphasize that old age is far from being just an inactive (passive) period of life, since after retirement people should live in new forms of activities useful to the society. Thus, active ageing is increasingly understood as a continuous engagement in the economic, social, cultural and civil spheres, a way of upgrading (experience) of what has been achieved and not as prolonged physical activity for the elderly or prolongation of employment.

Ageing is a process which affects all living beings. We age from the moment of conception, so ageing is one of the most basic laws on earth. Most experts who deal with ageing agree that ageing is the overall result of various effects on the organism in its life (these include environmental factors, heredity, culture, nutrition, physical activity, etc.). In humans, ageing is a process of biological, psychological and social changes in an individual and may also affect an individual's personality and his or her position in society. Sciences dealing with ageing are gerontology (a science that explores ageing from biological and social aspects) and geriatrics (a science that deals with health problems of the elderly). Ageing is therefore a physiological process that for a person starts at conception while for a society it is a period in a person's life after a certain age. Just as younger people, the elderly too can be divided into several age groups: the first group includes people aged 65-74, the second people aged 75-84 and the third people aged 85 or more.

Table 1: Broad age groups of population and the ageing index, Slovenia

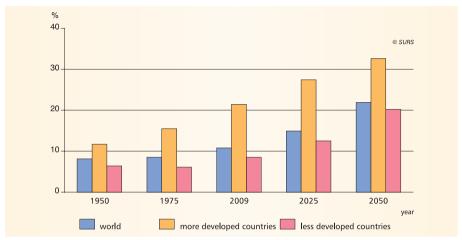
Age		Age groups (%)		The ageing index		
	0-14 years	15-64 years	65+			
1869	32.9	62.1	5.0	15.2		
1910	34.8	58.5	6.7	19.3		
1931	30.5	62.5	7.0	23.0		
1953	27.7	65.0	7.3	26.4		
1991	20.8	68.0	11.2	53.1		
2002	15.3	70.0	14.7	96.3		

Source: SORS (censuses)

- The age of the EU-27 population is expected to significantly increase; the median age of the EU-27 population (medium variant of EUROPOP2008 population projections) should increase from 40.4 years in 2008 to 47.9 years in 2060. The share of people aged 65 or more (in short: 65+) in the total EU-27 population is expected to increase from 17.1% to 30.0%, while the number of people aged 65+ should increase from 84.6 million in 2008 to 151.5 million in 2060. Similarly, between 2008 and 2060 the number of people aged 80+ in the EU-27 is expected to nearly triple: from 21.8 million to 61.4 million.
- The population ageing will, of course, be accompanied by a number of social, economic and geopolitical changes that will in no small extent be indirectly and directly the result of this very process. All these changes will in its way but noticeably influence the intensity and pace of technological development, the economic growth and the structure of people's consumption and the system of public finances.

# THE POPULATION KEEPS GETTING OLDER

Chart 1: Elderly (60+) among the population, world

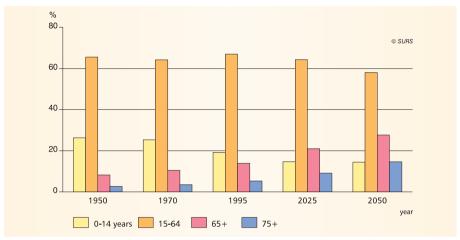


Vir: UN (Population ageing and development, 2009)

- At present the world population numbers 6.8 billion people, while according to the UN demographic projections in 2050 it shall number 9.1 billion. One of the major regions of the world where the population shall significantly decrease in the future is also the EU. EU-27 now has nearly 500 million inhabitants, but by 2050 the projections anticipate a population of 506 million. Slovenia now has over 2 million inhabitants, but in 2050 it is expected to have 1.88 million inhabitants.
- In the early 20th century the world population numbered less than 2 billion. According to the official 2008 revision of the UN World Population Prospects, the world population shall exceeded 9 billion by 2050. From 2005 to July 2009 the world population was forecast to increase by 78 million people per year, whereas according to the UN medium variant of population projections and due to reduced fertility it shall increase by approximately 33 million people per year and in 2050 a population of 9.1 billion is anticipated.
- Today there are two very different patterns of population growth in the world: slow growth or even decline in population in the richest countries and continued rapid population growth in the poorest countries in the world; the developed regions have a population of 1.2 billion people while less developed regions have a population of 5.5 billion. By mid-21st century, the share of people living in less developed countries shall increase from 82% to 86%, the number of people living in those parts of the world shall increase during the 2009-2050 period from 5.6 billion to 7.9 billion; thus the number of people aged 15-59 shall increase by 1.2 billion and the number of people aged 60 or more by 1.1 billion while the number of children should decline also in those countries. On the other hand, the population in the more developed regions of the world shall change only marginally, from 1.23 billion to 1.28 billion, or it might even decline to a projected 1.15 billion in case of no immigration from the developing countries (the migration balance envisages migration of an average of 2.4 million people per year).

#### THE POPULATION KEEPS GETTING OLDER

Chart 2: Population by broad age group, Europe

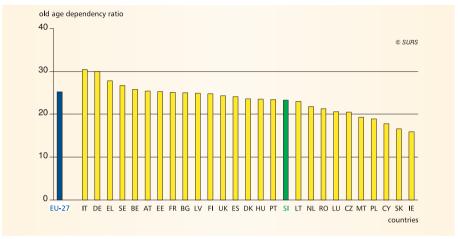


Source: IIASA (http://www.iiasa.ac.at/Research/ERD/DB/data/hum/dem/dem\_2.htm, 5 May 2010)

- The world population, particularly that of its developed part, is intensely growing old. In the more developed regions of the world today already 22% of the population is aged 60 or more (60+); by 2050 the share is expected to increase to 33%. In the developed countries of the world as a whole, the number of the elderly today is higher than the number of children younger than 15 years; by 2050 it shall be more than twice the number of children. Demographic trends in the developed world, a part of which is also Slovenia, predict intensive population ageing and consequently an increasing »lack« of young people.
- Population ageing is a serious problem also in the EU. The population of the EU-27 is projected to age considerably: the median age of the population from 2008 to 2060 is expected to rise from 40.4 years to 47.9 years. The share of persons aged 65 or more among the total population shall thus increase from 17.1% to 30.0%, which means that from 2008 to 2060 the number of all old people is expected to increase from 84.6 million to 151.5 million, whereas the number of at least 80 years old people in that period shall almost triple: from 21.8 million to 61.4 million.

#### THE POPULATION KEEPS GETTING OLDER

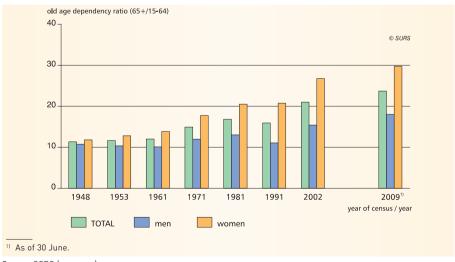
Chart 3: Old age dependency ratio, EU-27 Member States, 2008



Source: Eurostat (tsdde510)

The young age dependency ratio (which indicates how many people younger than 15 years are dependent on 100 working age population) in the EU-27 is forecast to increase moderately by 2060 (from 23.3% to 25.0%), whereas the old age dependency ratio (which indicates how many people aged 65 or more are dependent on 100 working age population) shall increase significantly by 2060 (from 25.4% to 53.5%).

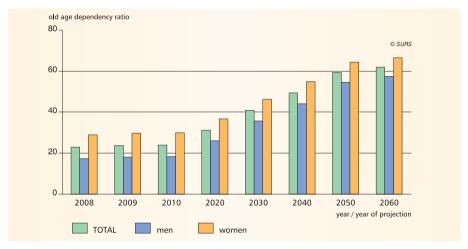
Chart 4: Old age dependency ratio by sex, Slovenia



Source: SORS (censuses)

#### THE POPULATION KEEPS GETTING OLDER

Chart 5: Old age dependency ratio by sex, population projections, Slovenia

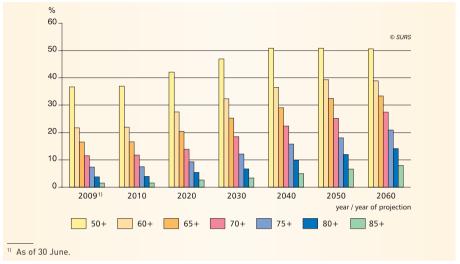


Source: Eurostat (EUROPOP2008, convergence scenario)

- Population ageing represents a large burden on the working age population (15-64 years). Usually it is measured by the age dependency ratio. In the past three decades the age structure of the population of Slovenia was favourable, so the total value of the age dependency ratio, which indicates the dependency of the youngest (0-14 years) and the oldest (aged 65 or more), regressed, mostly on account of the young age dependency ratio.
- In 2003 the regression of the old age dependency ratio stopped and its value began to rise since then the value of the total age dependency ratio largely depends on the old age dependency ratio, and not on the value of the young age dependency ratio. The dependency ratio of the old population namely accounts for almost three-quarters of the total age dependency ratio.

#### THE POPULATION KEEPS GETTING OLDER

Chart 6: Elderly by age1, Slovenia

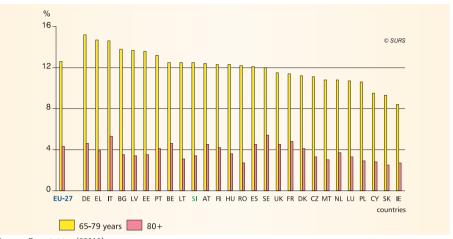


Sources: Eurostat, SORS

- Over the past twenty years, from 1989 to 2009, the share of the population in Slovenia aged at least 65 increased from 10.6% to 16.5%. Thus this age group increased by 125,000 people. During the same period the share of the population aged 0-14 decreased from 20.9% to 14.0%. This trend is projected to continue: in 2029 24.8% of the population is expected to be at least 65 years old and in 2059 already 33.5%; in 2029 12.9% of the population is expected to be less than 15 years old and in 2059 12.8%.
- The fastest is the increase in the share and number of population aged 85 or more (\*) the oldest old population. In Slovenia in 1989 they numbered slightly less than 15,000 (0.7% of the total population), by 2009 their number has more than doubled (30,369) and according to the projection they shall number 66,478 in 2029 and 136,720 in 2059. So by the end of the 2050s, their number shall have increased fivefold and they shall represent 7.6% of the total population.
- According to the population projections, Slovenia's population shall not only be modest in figures, but it shall also be significantly older. If in 2008 there were among the total population of Slovenia 16.0% of those aged 65 or more, the anticipated figure by the end of 2060 is 33.4% (over a third). Similar applies to other EU Member States (the basic variant of the EUROPOP2008 projections anticipates that in 2060 30% of the population shall be aged 65 or more and among them there shall be three times more of those aged 80 or more than in 2008).

#### THE POPULATION KEEPS GETTING OLDER

Chart 7: Elderly, EU-27 Member States, 2008



Source: Eurostat tps (00010)

- The age group of persons who have already completed 80 years annually increases by 3.8% and it represents more than one tenth (11%) of all the elderly (aged 65 or more) in the world. By the mid-21st century one-fifth of the "today's" older people is projected to reach the age of 80 or more. By 2050 the number of centenarians - in 1999 there were about 145.000 centenarians - is expected to rise by 15-times (to 2.2 million). In other words: the share of people aged 60 or more - at present representing almost 11% of the 6.9 billion world population (739 million in 2009) – is projected to increase to 22% (or to 2 billion people) by 2050 (the total population is expected to be more than 9 billion). Almost every tenth person will then be aged 80 or more. If fertility rates continue to decline, by 2050 for the first time in world history there will be more elderly than children (aged 0-14).
- Throughout the world and in the EU the ratio between men and women, both aged 65 or more (65+), is decreasing. In 1981 there were 189 women aged 65+ per 100 men of that age, whereas in 2009 there were 155 women per 100 men of that age. According to EUROPOP2008 population projections, the share of women aged 65 or more per 100 men of the same age shall decrease and in 2060 it shall stand at 114 women per 100 men of that age.

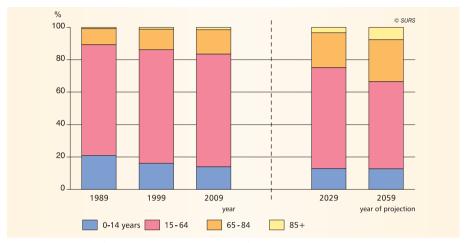
Tabela 2: Population by broad age group, Slovenia

Age											
group (years)	1948	1953	1961	1971	1981	1991	2002	30. 06. <b>2009</b>	2020	2040	2060
0-14	28.4	27.6	27.3	24.1	23.0	20.8	15.3	14.0	14.2	12.1	12.8
15-64	64.4	64.8	64.8	65.9	65.7	68.0	70.0	69.5	65.4	58.9	53.9
65+	7.3	7.6	7.8	9.8	11.1	11.2	14.7	16.5	20.4	29.1	33.4

Sources: SORS, Eurostat (EUROPOP2008, convergence scenario)

#### THE POPULATION KEEPS GETTING OLDER

Chart 8: Population by broad age group, Slovenia

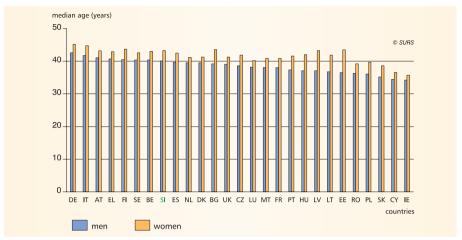


Sources: SURS, Eurostat (EUROPOP2008, convergence scenario)

- In Slovenia, the share of children (0-14 years) is decreasing, while the shares of the working age population (15-64 years) and the elderly (65+) are increasing. From 1981 to 2009 the share of children decreased from 23% to 14%, whereas during the same period the share of working age population (15-64 years) rose from 66% to almost 70%.
- In the 1980s the share of the elderly (65+) stagnated at 10%, but since 1987 it has shown continuous growth and in mid-2009 it already exceeded 16%; the share of the population aged 80+ then accounted for almost 4% (3.8%) of the population. According to the baseline variant of EUROPOP2008 population projections for Slovenia, by 2060 the share of people aged 65+ shall increase to 33.4% and the share of people aged 80+ to 14.1%. The age structure indicators are expected to start showing substantial deterioration of the shares between the stated age groups in the second half of the next decade.
- Up until recently those who had experienced a very advanced age were very rare in Slovenia. The progress in medical science and basic medical care and management of many diseases and the improvement of nutrition and lifestyle have all established the conditions for longer lifetime and thus an increase in the number and share of the elderly in Slovenia.
- During the last 50 years the population of Slovenia grew by nearly half a million (by 460,000). The continued growth in the population registered since the mid-1950s stopped in 1991. Although it reappeared after 1999, it was not of the same intensity as in the 1970s. In mid-2009 there were 2,042,335 people (1,011,767 men and 1,030,568 women) in Slovenia. Even according to the baseline variant of EUROPOP2008 population projections Slovenia's population shall grow in numbers only until the early 2020s, then it shall start to decrease and in 2060 Slovenia shall have only about as many inhabitants as at the beginning of the 1970s.

#### THE POPULATION KEEPS GETTING OLDER

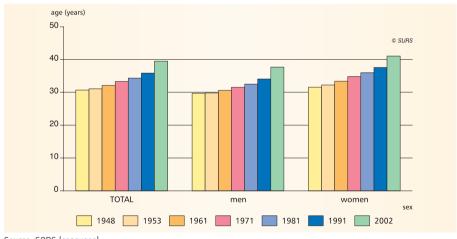
Chart 9: The median age of the population by sex, EU-27 Member States, 2009



Source: The CIA World Factbook 2009

■ The median age of the population in the EU-27 Member States is projected to have risen in the 2008-2060 period from 40.4 years to 47.9 years.

Chart 10: The mean age of the population by sex, Slovenia

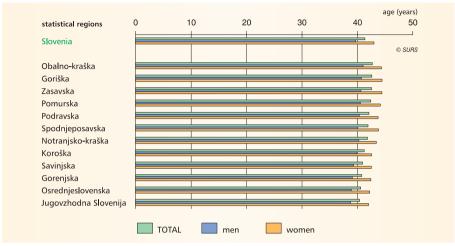


Source: SORS (censuses)

■ The growing number of the elderly in Slovenia influences also the mean age of the population of Slovenia, so that it keeps increasing. Over the past 30 years, this was a persistent and fairly steady rise: in 2009 it was already 7 years higher than in 1981 and in the 1989-2009 period it increased from 35.6 years to 41.4 years.

#### THE POPULATION KEEPS GETTING OLDER

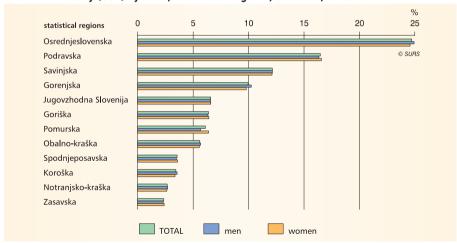
Chart 11: The mean age of the population by sex, statistical regions, Slovenia, 30 June 2009



Source: SORS

■ In mid-2009, the mean age of the population was the highest in the Obalno-kraška statistical region and the lowest in the Jugovzhodna Slovenija statistical region. Among the municipalities it was on average the highest in municipalities Osilnica and Kostel and on average the lowest in municipalities Benedikt and Gorenja vas - Poljane.

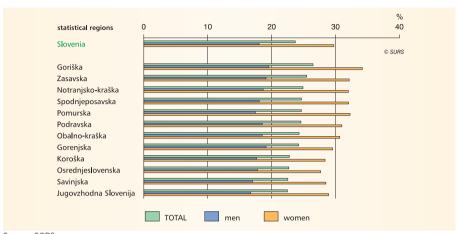
Chart 12: Elderly (65+) by sex11, statistical regions, Slovenia, 30 June 2009



<sup>1)</sup> SI by sex = 100. Source: SORS

#### THE POPULATION KEEPS GETTING OLDER

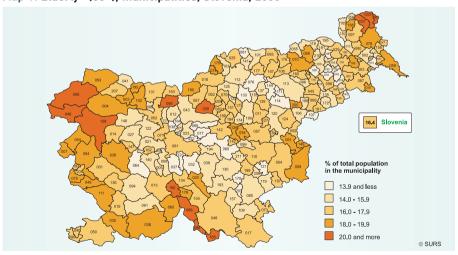
Chart 13: Old age dependency ratio by sex, statistical regions, Slovenia, 2009



Source: SORS

According to the old age dependency indicator, the most favourable position was that of the Jugovzhodna Slovenija statistical region (22.5); the highest values among all the statistical regions were registered in Goriška (26.5) and Zasavska (25.5).

Map 1: Elderly1 (65+), municipalities, Slovenia, 2008

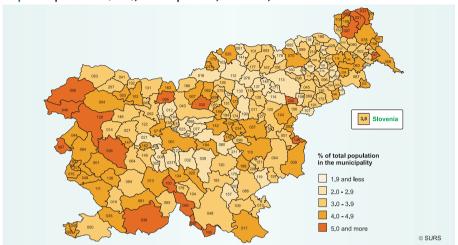


<sup>&</sup>lt;sup>1)</sup> More (men, women): http://www.stat.si/TematskaKartografija. Sources: SORS. GURS

<sup>■</sup> The highest shares of people aged 65+ and 80+ were recorded in municipalities along the western border of Slovenia.

#### THE POPULATION KEEPS GETTING OLDER

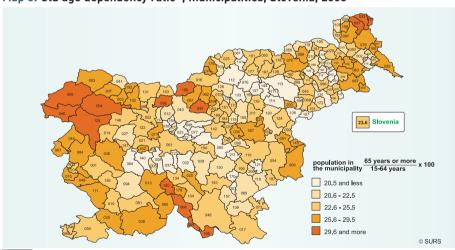
Map 2: Population11 (80+), municipalities, Slovenia, 2008



<sup>&</sup>lt;sup>11</sup> More (men, women): http://www.stat.si/TematskaKartografija Sources: SORS, GURS

■ In all municipalities women were on average older than men; the greatest difference was observed in Osilnica and Solčava, where women were on average 6.2 years older than men.

Map 3: Old age dependency ratio1, municipalities, Slovenia, 2008

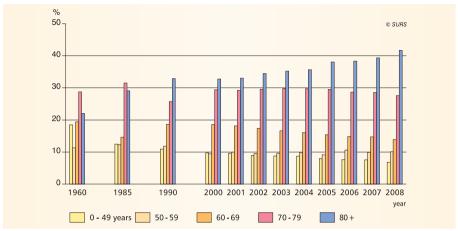


<sup>&</sup>lt;sup>11</sup> More (men, women): http://www.stat.si/TematskaKartografija Sources: SORS, GURS

The highest values of the old age dependency ratio were registered in municipalities Kostel (43.8) and Osilnica (39.2) and the lowest in municipalities Velenje (16.2) and Dornava (16.9).

## THE NATURAL CHANGE OF POPULATION IS MODEST

Chart 14: Deaths by age group, Slovenia



Source: SORS

- Fertility of the population has declined significantly over the recent decades, especially in the developed countries, and it even fell below the value necessary for ensuring population replacement. If the population of an area (e.g. country) is to ensure the replacement of generations, its total fertility rate should be 2.1 children per woman of childbearing age. In Europe, there is a low birth rate and a relatively low level of net migration these would namely possibly be able to mitigate the decline in population figures and the population ageing. The decline in the number of inhabitants does not happen instantly, as life expectancy is being prolonged, also due to better medical and social conditions, and in short-term this substitutes for the too low number of newborn children. However, it is increasingly difficult for the economically active population to "bear" the burdens of social care and health care of the "dependent" population: children, young people and an increasing number of the elderly.
- In Slovenia, too, the number of live births has been decreasing for more than 100 years, but with larger intensity after 1980. The so-called "baby boom" after World War II (when around 30,000 children were born per year or 20 children per 1000 population) in Slovenia lasted only until the mid-1950s and then the birth rate began to decline. About 30,000 children were again born per year only at the end of the 1970s, when women from the post-war "baby boom" generation were giving birth. After 1980 the number of newborn children started to fall and in 1992 fewer than 20,000 children were born. The fewest children so far were born in 2003 (17,321) and thereafter the number again began to rise slightly.
- The increase in the age of the deceased is also characteristic of the population of Slovenia. And also the value of the indicator "life expectancy at birth" shows that life expectancy is longer. In 2008, the men were aged 69.6 at death or on average they were 9.2 years younger than women who died in that year, whereas women were on average 78.8 years old at death. The mean age of men at death in 2008 was by 0.5 years higher and the mean age of women at death by 0.6 years higher than in 2007. In the last 50 years, the mean age of a man at death in Slovenia increased by almost 12 years (11.8 years), the mean age of a woman at death by 15 years, and also the difference in age at death between the sexes increased in favour of women. Thus only in the last 10 years in Slovenia the mean ages of men and women at death increased by slightly more than 3 years (by 3.1 years for men and by 3.4 years for women).

#### THE NATURAL CHANGE OF POPULATION IS MODEST

■ The increase in the mean age at death is also the result of successful prevention of premature death (i.e. potentially preventable causes of death) or premature mortality (i.e. in health statistics mortality prior to being 65 years of age). Fifty years ago, in Slovenia every second man and every third woman were younger than 65 years at death, whereas in 2008 every third man and every eighth woman. In the last 50 years the share of men who have died before their 65<sup>th</sup> birthday among all the men who died in each individual year decreased from 49.1% to 33.0%, while the share of women decreased from 36.2% to 13.7%.



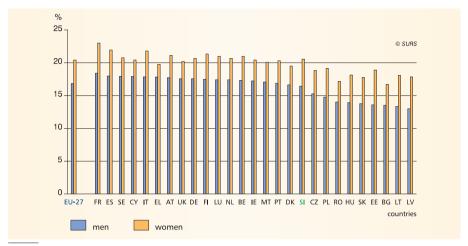
Chart 15: Life expectancy at birth11, Slovenia

- As the quality of life keeps increasing, it is understandable that nowadays people live longer than in the past and this is well reflected in the data on the shares of the deceased by age group. In the last 50 years in Slovenia the number and shares of deaths in the younger age groups decreased, but those of the elderly increased, especially the share of the elderly who were aged 80+ at death. The share of the deceased aged 60-69 and 70-79, however, has kept decreasing since 2000.
- The share of premature deaths (i.e. before 65 years of age) in Slovenia is declining. From 2000 to 2008 it decreased by almost 4%. This situation is, of course, the result of improved living and in particular health conditions. Compared to 2007, the share of men younger than 65 years at death declined by 0.5% (32.5% of all men at death) and that of women by 0.6% (13.1% of all women at death). The most common cause of death of the population before the age of 65 was neoplasms, followed by diseases of the circulatory system, injuries and poisonings.
- In Slovenia life expectancy for a newborn baby is also being prolonged: a boy born in 2006/07 in Slovenia can expect to live to the age of 75.0 and a girl born then and there to 82.3 years; in case of boys this is 8.9 years longer and in case of girls as much as 10.3 years longer than in the early 1960s. A man who was 65 years old in 2007 could expect to live another 16.0 years and a woman of the same age another 20.3 years (that was 2 years less than the EU average for men and 1.6 years less for women).

 $<sup>^{\</sup>rm 1l}\,$  For 2007 and 2008 life expectancy is calculated in line with the modified methodology. Source: SORS

#### THE NATURAL CHANGE OF POPULATION IS MODEST

Chart 16: Life expectancy at 65 years of age by sex, EU-27 Member States<sup>1)</sup>, 2008



<sup>&</sup>lt;sup>1)</sup> Data for EU-27 and Italy are for 2006, those for Belgium, France, Sweden and the United Kingdom are for 2007. Source: Eurostat (tps00025)

- With the rapid changing of the age structure of the population and its ageing, the value of the indicator life expectancy at age 65 is becoming increasingly important. This is the demographic age limit that divides the elderly from the working age population and in economic terms the retired from the active population. In the EU-27 life expectancy for men in this age group grew from 14.4 years in 2000-2002 to 15.8 years in 2007, and for women from 18.9 years in 2000-2002 to 19.9 years in 2007. Given the low retirement age in Slovenia, for economic analyses the analysis of the limits of life expectancy at the age of 60 would perhaps be more topical. Life expectancy for men at this age grew from 17.8 years to 19.4 years and for women from 23.1 years to 24.2 years.
- Mortality is different in different periods of people's life and it also depends on physiological characteristics of the people of a certain age. In Slovenia the mortality rises steeply after the age of 60. In 2001-2005 in Slovenia men aged 50-69 most frequently died of lung cancer, ischemic heart disease and gastrointestinal cancer, and slightly less frequently of liver disease and traffic accidents. For women the most common causes of death at this age were gastrointestinal cancer and breast cancer, followed by ischemic heart disease, stroke and liver disease. At age 70+ both men and women most frequently died of diseases of the heart and the circulatory system and of gastrointestinal cancer, while men also frequently died of respiratory cancer and genital cancer, and women of pneumonia, diseases of the circulatory system and diabetes.
- The differences in mortality among the population of Slovenia between the western and eastern part and among statistical regions are not negligible; mortality rates in the western part of the country are lower than in the eastern part. Diseases of the heart and the circulatory system are common causes of death among older people in the Zasavska and Pomurska statistical regions, and cancer among older people in the Zasavska and Savinjska statistical regions.

### THE NATURAL CHANGE OF POPULATION IS MODEST

Chart 17: Life expectancy at birth, men, EU-27 Member States<sup>1)</sup>, 2008



<sup>&</sup>lt;sup>1)</sup> Data for EU-27 and Italy are for 2006, those for Belgium, France, Sweden and the United Kingdom are for 2007. Source: Eurostat (tps00025)

Chart 18: Life expectancy at birth, women, EU-27 Member States<sup>1)</sup>, 2008



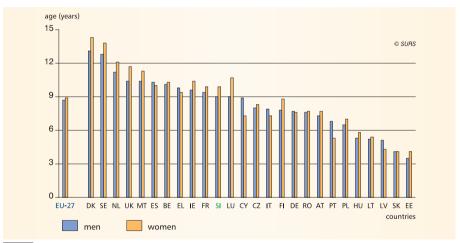
Data for EU-27 and Italy are for 2006, those for Belgium, France, Sweden and the United Kingdom are for 2007. Source: Eurostat (tps00025)

#### THE NATURAL CHANGE OF POPULATION IS MODEST

One of the reasons for population ageing in Europe is longer life expectancy in EU Member States, but with varying degrees of intensity. Life expectancy is getting longer the fastest in southern (Spain, Greece, Cyprus) and northern (Sweden, Finland) countries and the slowest in eastern countries (Romania and Bulgaria) and the Baltic States (Latvia, Lithuania, Estonia).

According to Eurostat data for 2008 for EU-27, boys born in 2008 can expect to live 77 years in fourteen EU Member States, while girls born in 2008 can expect to live 82 years in sixteen EU Member States. Life expectancy for men was shorter than 70 years in six EU Member States, while life expectancy for women was shorter than 80 years in seven EU Member States. In 2008 the value of this indicator was among the EU Member States the highest for men in Sweden (79.0 years) and for women in France (nearly 85 years) and the lowest for men in Lithuania (66.3 years) and Latvia (67.0 years) and for women in Bulgaria (77.0 years) and Romania (77.2 years). In all EU-27 Member States life expectancy of the population aged 65 or more is also getting longer.

Chart 19: The anticipated healthy life years at the age of 65, EU-27 Member States<sup>1)</sup>, 2007



<sup>1)</sup> There are no data for BG.

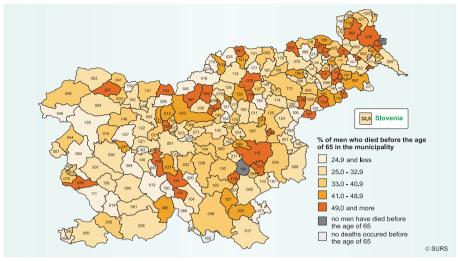
Source: Eurostat (tsdph220)

■ The expected healthy life years is a valid indicator for measuring and monitoring the number of years lived without disability or handicap in daily activities. Women live longer than men, but compared to men they experience health problems for a longer time, so they live fewer healthy life years.

■ Women in the EU-27 expect to live from 5 to 15 healthy life years less than their life expectancy, while men expect to live from 3.5 to 10.5 healthy life years less than their life expectancy.

#### THE NATURAL CHANGE OF POPULATION IS MODEST

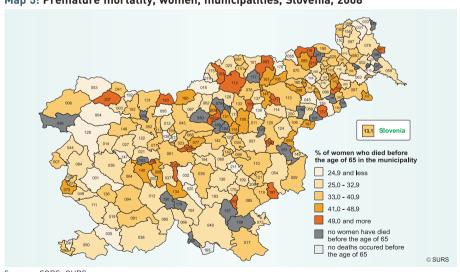
Map 4: Premature mortality, men, municipalities, Slovenia, 2008



Sources: SORS, GURS

■ In the 1989-2008 period 27.9% of all deaths were so-called premature deaths, i.e. deaths of persons who were at death younger than 65 years. Among these persons 70.3% were men and 29.7% were women. In the observed period the number of premature deaths decreased by 17.9%, more for men than for women.

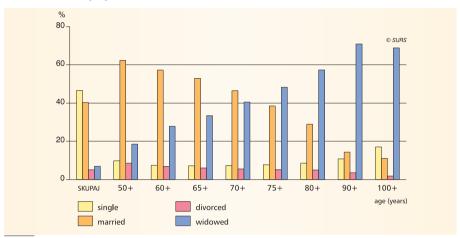
Map 5: Premature mortality, women, municipalities, Slovenia, 2008



Sources: SORS, GURS

# (CO)EXISTENCE OF THE ELDERLY

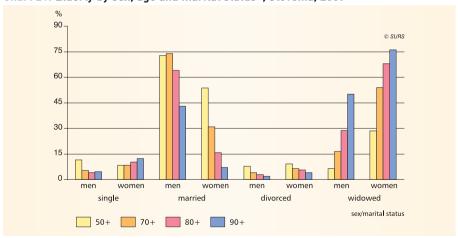
Chart 20: Elderly by marital status<sup>1)</sup>, Slovenia, 2009



<sup>1)</sup> Each age group = 100.

■ Because women in Slovenia (like in other European countries) die older than men, for both the marital status at the age of 65 or more is different than that of younger people. By the age of 65 the majority are still married and after that age, especially from the age of 80 on, the share of widowed is markedly higher than the share of married or single people; for women this applies even to a greater extent than for men. The oldest women among the "elderly" are thus widows, while the oldest men are either widowers or married.

Chart 21: Elderly by sex, age and marital status<sup>1)</sup>, Slovenia, 2009



<sup>&</sup>lt;sup>1)</sup> Each age group = 100. Source: SORS

#### (CO)EXISTENCE OF THE ELDERLY

Table 3: Private households by the number of the elderly (65+), Slovenia, 2002 Census

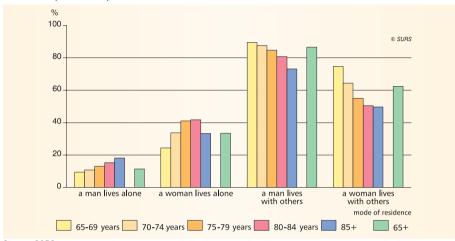
	Number of elderly	members (65+) in ho	usehold
none	one	two or more	TOTAL
68.3	22.9	8.8	10
51.0	47.7	1.3	100
78.5	21.5	-	100
34.6	65.4	-	100
48.2	35.9	15.9	100
74.8	14.7	10.5	100
	51.0 78.5 34.6 48.2	none         one           68.3         22.9           51.0         47.7           78.5         21.5           34.6         65.4           48.2         35.9	68.3     22.9     8.8       51.0     47.7     1.3       78.5     21.5     -       34.6     65.4     -       48.2     35.9     15.9

Source: SORS

- The population is ageing in all countries of the world and according to UN forecasts by mid-century the number of persons aged 60 or more should triple. More and more people not only live to old age, but also the elderly are living longer today. Therefore, families of 3 or even 4 generations are becoming more frequent. Thus, in parallel with demographic changes, the society is changing and with it the everyday family life. Young people are living longer with their parents, who provide security and often take care of their elderly parents.
- In relation to population ageing in the 21st century, living conditions of the elderly are a special challenge for governments of all countries because government policies must increasingly include a combination of measures to encourage the self-reliance of the elderly, provide services for those who need them because of old age, and encourage involvement of family members in caring for the elderly and taking care of their well-being.
- According to the UN study "Living Arrangements of Older Persons Around the World", 2005, which also contains information for Slovenia, one in seven elderly people then lived alone, which means about 90 million people, mostly women, and among them many were widows.
- At the 2002 Census, 31.7% of households had at least one household member aged 65+ (22.9% of households had one such member, while 8.8% of households had two or more such members).
- At the 2002 Census in Slovenia, the majority of persons who were then aged 65 or more were living in private two or more member households, i.e. together with at least one other member (among men of this age the share was 86.6% and among women of this age the share was 62.4%). Of course, the shares of both are decreasing with age (due to death and the departure to old people's homes, i.e. collective households).

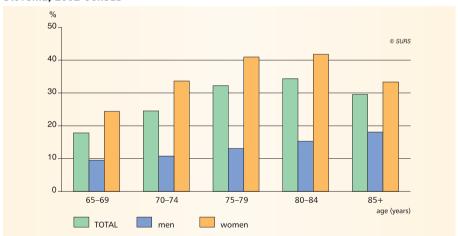
#### (CO)EXISTENCE OF THE ELDERLY

Chart 22: Elderly (65+) who live in private households by sex, age group and mode of residence, Slovenia, 2002 Census



Source: SORS

Chart 23: Elderly (65+) who live alone in a private household by sex and age group, Slovenia, 2002 Census

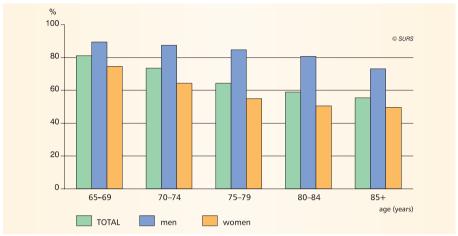


Source: SORS

Many people who were at the 2002 Census aged 65+ lived alone (i.e. in one member households), namely 25.3% (11.4% of men and 33.5% of women). In all age groups women who lived alone outnumbered men who lived alone at least by 2 to 1. In all age groups older than 70 years more than 33% of women lived alone; most of them (41.8%) were in the age group 80-84 years, while the share for men in this age group was only 15.3%.

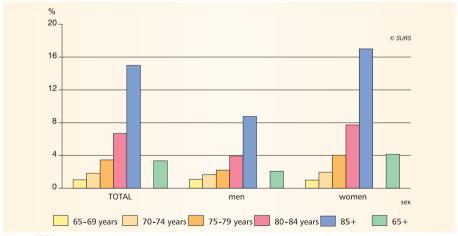
#### (CO)EXISTENCE OF THE ELDERLY

Chart 24: Elderly (65+) who live together in a private household by sex and age group, Slovenia, 2002 Census



Source: SORS

Chart 25: Elderly (65+) who live in private households by sex and age group, Slovenia, 2002 Census



Source: SORS

■ 3.4% of those who were at the 2002 Census aged 65+ lived in collective households (2.1% of men and 4.1% of women). The share of these persons is increasing rapidly in people who have already reached the age of 75. At the 2002 Census the share of those who lived in collective households was the highest among persons aged 85 or more, it was 15% (the share for men was 8.8% and for women 17.0%).

#### (CO)EXISTENCE OF THE ELDERLY

Table 4: The elderly by mode of (co)existence, age group and sex, Slovenia, 2002 Census

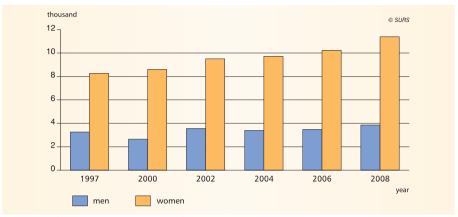
	TOTAL	50-59	Men (years) 60-74	75+	TOTAL 50+	TOTAL	50-59	Women (years) 60-74	75+	TOTAL 50+
TOTAL: couple, alone, with children	54.6	91.7	93.5	85.8	91.8	54.7	94.3	87.2	66.9	85.2
lives with partner		79.2	81.1	68.0	78.7	36.6	73.0	52.0	17.0	51.5
lives alone	5.9	9.5	9.7	14.5	10.2	9.2	8.4	24.7	39.6	22.4
lives without part	ner,									
but with children	1.5	3.0	2.7	3.3	2.9	8.9	12.8	10.5	10.3	11.2
lives with others	45.4	8.3	6.5	14.2	8.2	45.3	5.7	12.8	33.1	14.8
married couple	42.7	75.4	78.9	66.7	76.0	35.3	70.0	50.7	16.6	49.8
married couple with children	30.7	57.0	29.5	11.5	39.5	15.8	45.0	14.7	2.3	22.3
married couple without children	12.0	18.4	49.5	55.2	36.5	19.5	25.0	36.0	14.3	27.5
couple, lives in consensual union	4.4	3.8	2.2	1.3	2.8	1.2	3.0	1.4	0.4	1.7
couple, lives in co with children	nsensua 3.1	l union 2.1	0.5	0.1	1.2	0.4	1.3	0.2	0.0	0.5
couple, lives in co	nsensua	l union								
without children	1.3	1.6	1.6	1.2	1.6	0.8	1.7	1.1	0.3	1.2
TOTAL	100	100	100	100	100	100	100	100	100	100

Source: SORS (2002 Census)

- In Europe and the US the most common form of co-existence is a two-member household of partners (husband and wife) and the second most common form is individuals living alone.
- Elderly men are more likely to live in two-member households of partners with or without children, while older women are often (more often than men) living alone or together with relatives or even non-relatives.
- In all developed countries the number of the elderly living alone is increasing.
- Although it is difficult to accurately determine the extent to which living conditions affect health, the fact is that the disease affects the living conditions, and only those elderly who remain relatively healthy can live independently, while others are dependent on others.
- According to the mentioned study "Living Arrangements of Older Persons", 2001, more than half of all the elderly in the world live in Asia and a quarter in Europe; in 2050 63% of all the elderly are expected to live in Asia, while despite population ageing the share of the elderly in Europe is expected to decline to 11%.
- Since the elderly are the most numerous in urban areas (where over 51% of the world's older population lives) and by 2025 the share is expected to increase to 62% various problems and social distress associated with population ageing are more pronounced there. In developed countries 74% of the elderly (65+) live in urban areas, while in third-world countries the share is 37%.
- The number of people in care in old people's homes and similar institutions is relatively low, even for people aged 90 or more.

#### (CO)EXISTENCE OF THE ELDERLY

Chart 26: People in care in old people's homes by sex, Slovenia

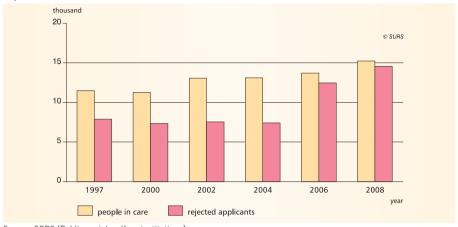


Source: SORS (Public social welfare institutions)

- For the elderly, social networks formed outside the domestic households are valuable and useful, and living together with other people is beneficial both for the older and the younger generations (intergenerational solidarity).
- In richer countries the share of the elderly living in institutions (old people's homes) is greater than in the less wealthy countries; in most countries the share of women living in these institutions is greater than that of men and also their mean age is higher.
- The need of people for assistance increases with age. Departure to the institution is in case of the "younger" elderly often associated with disease, while for the oldest among the elderly it is more often associated with social conditions.
- The number of the elderly who live alone or in institutions largely depends on cultural differences and government policies. This is the reason for the differences among the EU Member States. The percentage of the elderly who live alone is the highest in Scandinavia and the lowest in the Mediterranean countries. At the same time the share of people living in institutions is the lowest in the northern countries and by far the highest in the Netherlands. Living conditions of the elderly largely depend on the living patterns throughout their lives.
- Given the increased intensity of population ageing in Slovenia, increased demand for the opportunity of getting care or living in old people's homes is understandable. Compared to 2007, in 2008 the number of people in these homes increased by almost a tenth; 15,235 people of all ages (3,852 or 25.3% men and 11,383 or 74.7% women) lived in old people's homes.
- Among the people residing in old people's homes, in 2008 the shares of men aged up to 65 years and 65-69 years were higher than the shares of women in these ages. In all higher age groups the shares of women were higher than the shares of men (this difference was the greatest in persons aged 80+), as men are dying younger than women.
- In Slovenia in old people's homes the housing part and the nursing part are separated.
- Old people's homes in Slovenia can accommodate 5% of the elderly (65+).
- The most common reason for admission to an old people's home was the age of applicants, almost 70% of cases; many of these applicants were also quite ill and needed appropriate medical care in addition to nursing.

#### (CO)EXISTENCE OF THE ELDERLY

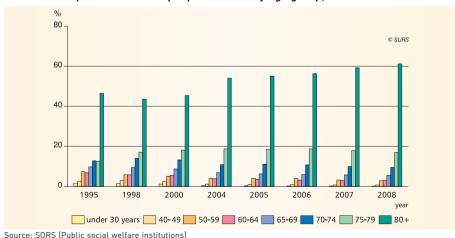
Chart 27: People in care in old people's homes and those whose application was rejected, Slovenia



Source: SORS (Public social welfare institutions)

- Although each year the capacity of old people's homes is expanded and new ones are established, the capacity of old people's homes does not allow admission to all applicants. In 2008, 15,235 people in care were living in old people's homes; among them persons aged 80 or more predominated, while 14,565 applicants were still waiting for admission.
- Nearly three quarters of posts in old people's homes are occupied by women; this is understandable when we know that more than half of people in care are aged 80 or more and that most of them are women. Their share among people in care in old people's homes is increasing (in the last decade it has increased by almost 3%).

Chart 28: People in care in old people's homes by age group, Slovenia



## (CO)EXISTENCE OF THE ELDERLY

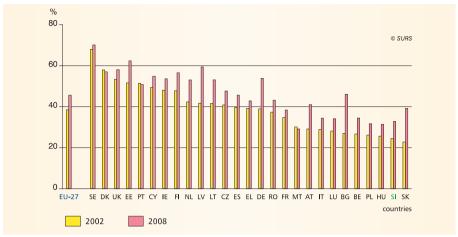
Table 5: People in care in old people's homes by sex and age group, Slovenia

TOTAL		Age groups (years)								
TUTAL	under 39 years	40-49	50-59	60-64	65-69	70-74	75-79	80+		
13,098	51	147	531	515	895	1,429	2.452	7.078		
3,388	21	88	320	280	439	520	651	1,069		
9,710	30	59	211	235	456	909	1,801	6,009		
13,641	46	134	564	479	858	1,520	2,527	7,513		
3,534	16	86	361	257	429	585	686	1,114		
10,107	30	48	203	222	429	935	1,841	6,399		
13,699	32	125	537	438	813	1,474	2,566	7,714		
3,478	12	72	340	237	412	572	709	1,124		
10,221	20	53	197	201	401	902	1,857	6,590		
13,856	32	105	446	418	793	1,387	2,474	8,201		
3,497	18	61	283	224	399	545	671	1,296		
10,359	14	44	163	194	394	842	1,803	6,905		
15,235	22	119	450	439	849	1,455	2,575	9,326		
3,852	15	70	281	248	440	564	738	1,496		
11,383	7	49	169	191	409	891	1,837	7,830		
2008										
69,529	183	630	2.528	2.289	4.208	7,265	12,594	39,832		
17,749	82	377	1,585	1,246	2,119	2,786	3,455	6,099		
51,780	101	253	943	1,043	2.089	4.479	9,139	33,733		
13,906	37	126	506	458	842	1,453	2.519	7.966		
3,550	16	75	317	249	424	557	691	1,220		
10,356	20	51	189	209	418	896	1,828	6,747		
%)										
100	0.3	0.9	3.6	3.3	6.1	10.4	18.1	57.3		
100	0.5	2.1	8.9	7.0	11.9	15.7	19.5	34.4		
	3,388 9,710  13,641 3,534 10,107  13,699 3,478 10,221  13,856 3,497 10,359  15,235 3,852 11,383 2008 69,529 17,749 51,780  13,906 3,550 10,356 [%]	13,098 51 3,388 21 9,710 30  13,641 46 3,534 16 10,107 30  13,699 32 3,478 12 10,221 20  13,856 32 3,497 18 10,359 14  15,235 22 3,852 15 11,383 7 2008  69,529 183 17,749 82 51,780 101  13,906 37 3,550 16 10,356 20  1%) 100 0.3	13,098 51 147 3,388 21 88 9,710 30 59  13,641 46 134 3,534 16 86 10,107 30 48  13,699 32 125 3,478 12 72 10,221 20 53  13,856 32 105 3,497 18 61 10,359 14 44  15,235 22 119 3,852 15 70 11,383 7 49 2008 69,529 183 630 17,749 82 377 51,780 101 253  13,906 37 126 3,550 16 75 10,356 20 51  100 0.3 0.9	13,098         51         147         531           3,388         21         88         320           9,710         30         59         211           13,641         46         134         564           3,534         16         86         361           10,107         30         48         203           13,699         32         125         537           3,478         12         72         340           10,221         20         53         197           13,856         32         105         446           3,497         18         61         283           10,359         14         44         163           15,235         22         119         450           3,852         15         70         281           11,383         7         49         169           1008         69,529         183         630         2.528           17,749         82         377         1,585           51,780         101         253         943           13,906         37         126         506           3,550	13,098     51     147     531     515       3,388     21     88     320     280       9,710     30     59     211     235       13,641     46     134     564     479       3,534     16     86     361     257       10,107     30     48     203     222       13,699     32     125     537     438       3,478     12     72     340     237       10,221     20     53     197     201       13,856     32     105     446     418       3,497     18     61     283     224       10,359     14     44     163     194       15,235     22     119     450     439       3,852     15     70     281     248       11,383     7     49     169     191       2008       69,529     183     630     2.528     2.289       17,749     82     377     1,585     1,246       51,780     101     253     943     1,043       13,906     37     126     506     458       3,550     16     75     317	13,098       51       147       531       515       895         3,388       21       88       320       280       439         9,710       30       59       211       235       456         13,641       46       134       564       479       858         3,534       16       86       361       257       429         10,107       30       48       203       222       429         13,699       32       125       537       438       813         3,478       12       72       340       237       412         10,221       20       53       197       201       401         13,856       32       105       446       418       793         3,497       18       61       283       224       399         10,359       14       44       163       194       394         15,235       22       119       450       439       849         3,852       15       70       281       248       440         11,383       7       49       169       191       409         2008 <td>13,098 51 147 531 515 895 1,429 3,388 21 88 320 280 439 520 9,710 30 59 211 235 456 909  13,641 46 134 564 479 858 1,520 3,534 16 86 361 257 429 585 10,107 30 48 203 222 429 935  13,699 32 125 537 438 813 1,474 3,478 12 72 340 237 412 572 10,221 20 53 197 201 401 902  13,856 32 105 446 418 793 1,387 3,497 18 61 283 224 399 545 10,359 14 44 163 194 394 842  15,235 22 119 450 439 849 1,455 3,852 15 70 281 248 440 564 11,383 7 49 169 191 409 891 2008  69,529 183 630 2.528 2.289 4.208 7,265 17,749 82 377 1,585 1,246 2,119 2,786 51,780 101 253 943 1,043 2.089 4.479  13,906 37 126 506 458 842 1,453 3,550 16 75 317 249 424 557 10,356 20 51 189 209 418 896</td> <td>13,098 51 147 531 515 895 1,429 2.452 3,388 21 88 320 280 439 520 651 9,710 30 59 211 235 456 909 1,801  13,641 46 134 564 479 858 1,520 2,527 3,534 16 86 361 257 429 585 686 10,107 30 48 203 222 429 935 1,841  13,699 32 125 537 438 813 1,474 2,566 3,478 12 72 340 237 412 572 709 10,221 20 53 197 201 401 902 1,857  13,856 32 105 446 418 793 1,387 2,474 3,497 18 61 283 224 399 545 671 10,359 14 44 163 194 394 842 1,803  15,235 22 119 450 439 849 1,455 2,575 3,852 15 70 281 248 440 564 738 11,383 7 49 169 191 409 891 1,837  2008  69,529 183 630 2.528 2.289 4.208 7,265 12,594 17,749 82 377 1,585 1,246 2,119 2,786 3,455 51,780 101 253 943 1,043 2.089 4.479 9,139  13,906 37 126 506 458 842 1,453 2.519 3,550 16 75 317 249 424 557 691 10,356 20 51 189 209 418 896 1,828</td>	13,098 51 147 531 515 895 1,429 3,388 21 88 320 280 439 520 9,710 30 59 211 235 456 909  13,641 46 134 564 479 858 1,520 3,534 16 86 361 257 429 585 10,107 30 48 203 222 429 935  13,699 32 125 537 438 813 1,474 3,478 12 72 340 237 412 572 10,221 20 53 197 201 401 902  13,856 32 105 446 418 793 1,387 3,497 18 61 283 224 399 545 10,359 14 44 163 194 394 842  15,235 22 119 450 439 849 1,455 3,852 15 70 281 248 440 564 11,383 7 49 169 191 409 891 2008  69,529 183 630 2.528 2.289 4.208 7,265 17,749 82 377 1,585 1,246 2,119 2,786 51,780 101 253 943 1,043 2.089 4.479  13,906 37 126 506 458 842 1,453 3,550 16 75 317 249 424 557 10,356 20 51 189 209 418 896	13,098 51 147 531 515 895 1,429 2.452 3,388 21 88 320 280 439 520 651 9,710 30 59 211 235 456 909 1,801  13,641 46 134 564 479 858 1,520 2,527 3,534 16 86 361 257 429 585 686 10,107 30 48 203 222 429 935 1,841  13,699 32 125 537 438 813 1,474 2,566 3,478 12 72 340 237 412 572 709 10,221 20 53 197 201 401 902 1,857  13,856 32 105 446 418 793 1,387 2,474 3,497 18 61 283 224 399 545 671 10,359 14 44 163 194 394 842 1,803  15,235 22 119 450 439 849 1,455 2,575 3,852 15 70 281 248 440 564 738 11,383 7 49 169 191 409 891 1,837  2008  69,529 183 630 2.528 2.289 4.208 7,265 12,594 17,749 82 377 1,585 1,246 2,119 2,786 3,455 51,780 101 253 943 1,043 2.089 4.479 9,139  13,906 37 126 506 458 842 1,453 2.519 3,550 16 75 317 249 424 557 691 10,356 20 51 189 209 418 896 1,828		

Source: SORS (Public social welfare institutions)

# THE EMPLOYMENT RATE OF THE ELDERLY IS LOW

Chart 29: The employment rate of the elderly (55-64 years), EU-27 Member States

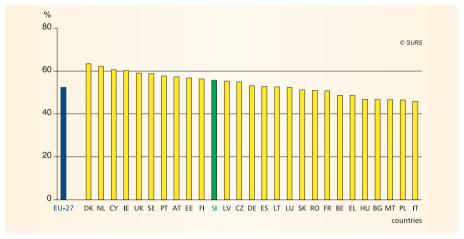


Source: Eurostat (tsiem020)

- The increase in the employment of the elderly is part of the Lisbon strategy, which stipulated that by 2010 the employment rate for the elderly working age population (50-64 years) in the EU should be 50%. In the EU-25 as a whole, in the 2000-2008 period the employment rate of the elderly increased from 36.6% to 45.6%, in fact it increased in all Member States, except in Portugal and Denmark. In 2005 the employment rate for the elderly working age men in the EU-25 was 51.8% and for the elderly working age women 33.7%. People aged 55-64 are not a homogeneous group in the labour market; the employment rate of people aged 55-59 is two times higher than the employment rate of people aged 60-64.
- For Europe the population ageing is today and will be in the future one of the greatest economic and social challenges also in terms of finding appropriate means and mechanisms to extend the period of employment. The low employment rate of the elderly working age population has been pointed out already by the European Council in March 2000 in Lisbon, while in 2001 the Stockholm European Council imposed on all Member States to achieve by 2010 the average 50% employment rate for people aged 55-64. The EU-27 is slowly drawing closer to this goal. The employment rate of people aged 55-64 was in the EU-27 in 2008 45.6%, thus significantly higher than in 2001 when it stood at 37.7%. In 2008 the employment rate of people of this age was over 50% in 12 EU Member States, the highest in Sweden (70.1%) and Estonia (62.4%), while in 15 Member States it was less than 50%, including Slovenia (32.8%), where since 2007 the employment rate of people of this age has even dropped.
- Although the number of the elderly working age population is growing, these are mostly not patients in need of nursing, but (due to a better living standard and better health) "an active part of the population". As regards the average age of citizens at retirement, Slovenia (56.2 years) is first among the EU Member States, while on average people retire the latest in Ireland (at age 64.6 years). In Slovenia, in 2006 the average age at retirement of old-age and disability pensioners was the lowest in the EU (59.6 years for old-age and 52.4 years for disability pensioners).

## THE EMPLOYMENT RATE OF THE ELDERLY IS LOW

Chart 30: Employment/population ratio, EU-27 Member States, 2006



Source: Eurostat (LFS)

Table 6: Employment/population ratio of the elderly by age group, Slovenia

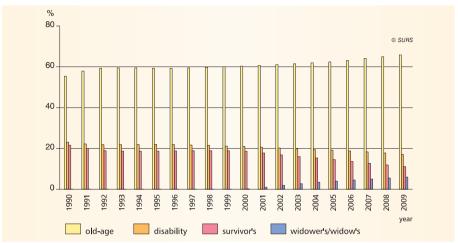
% Age groups 1998 2000 2005 2006 2007 2008 (years) TOTAL 60.0 57.7 58.7 59.9 60.2 59.2 50-54 63.4 70.0 74.9 78.2 78.4 80.1 55-59 34.1 48.1 47.3 31.4 46.9 47.0 60-64 178 149 16.0 16.0 20.1 18.0 65-69 9.9 13.6 9.4 15.3 10.8 11.8 7.2 70+ 5 9 5 5 6 1 7.6 4.9

Source: SORS (LFS)

- In 2008, Slovenia had 996,000 persons in employment (55% men and 45% women). The employment/population ratio i.e. the percentage of persons in employment among the population aged 15 or more was almost 57% (according to the guidelines of the Lisbon strategy it should be 70%). Slowly, however, this rate is rising also in Slovenia; 15 years ago it was just over 52%.
- Among persons in employment, in 2008 almost 86% were employed persons and nearly 20% were self-employed persons; the remaining 4% were unpaid family workers. Among employed persons, 83% had a permanent jobs and 17% had a temporary job. 9% of the persons in employment worked part time, fewer men [7%] than women (almost 11%).

# INCOME OF THE ELDERLY

Chart 31: Average number of pension recipients by type of pension and sex, Slovenia



Source: ZPIZ

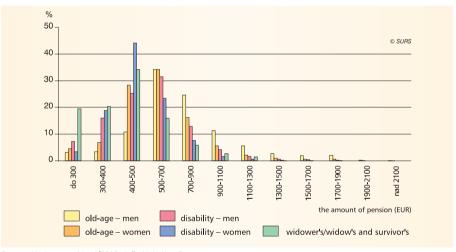
Table 7: Average number of pension recipients by type of pension, Slovenia

Year	old-age		pe of pens survivor's			old-age	disability		of pensior widower's /widow's	(%) TOTAL
1990	197,259	82,289	76,729	-	356,274	55.4	23.1	21.5	-	100
1991	227,524	87,194	78,482	-	393,200	57.9	22.2	20.0	-	100
1992	248,978	91,551	79,276	-	419,805	59.3	21.8	18.9	-	100
1993	255,985	93,857	80,439	-	430,291	59.5	21.8	18.7	-	100
1994	257,298	94,848	80,769	-	432,915	59.4	21.9	18.7	-	100
1995	259,253	96,058	81,740	-	437,051	59.3	22.0	18.7	-	100
1996	262,142	96,850	83,113	-	442,105	59.3	21.9	18.8	-	100
1997	266,854	97,369	84,530	-	448,753	59.5	21.7	18.8	-	100
1998	271,490	97,498	85,638	-	454,626	59.7	21.4	18.8	-	100
1999	276,255	97,382	86,643	-	460,280	60.0	21.2	18.8	-	100
2000	282,005	97,804	86,976	663	467,448	60.3	20.9	18.6	0.1	100
2001	287,926	97,704	84,260	4,617	474,507	60.7	20.6	17.8	1.0	100
2002	295,304	97,621	81,688	9,285	483,898	61.0	20.2	16.9	1.9	100
2003	302,365	97,433	78,818	13,295	491,911	61.5	19.8	16.0	2.7	100
2004	308,443	96,556	76,038	16,789	497,826	62.0	19.4	15.3	3.4	100
2005	315,092	96,665	73,254	19,977	504,988	62.4	19.1	14.5	4.0	100
2006	322,755	96,115	69,735	22,569	511,174	63.1	18.8	13.6	4.4	100
2007	332,780	94,511	65,601	25,913	518,805	64.1	18.2	12.6	5.0	100
2008	342,992	93,389	62,624	28,928	527,933	65.0	17.7	11.9	5.5	100
2009	354,514	92,123	59,699	32,119	538,455	65.8	17.1	11.1	6.0	100
- no o	- ccurrence (	of event								
C	CODC									

Source: SORS

- The intensity of the population ageing also reflects in the increasing number of pensioners. In Slovenia, over a quarter of the population is retired. In the last decade the number of pensioners (old-age, disability, survivors' and farmers') in Slovenia who have been granted the right to a pension in Slovenia has been increasing on average by 1.5% per year. Due to the global financial and economic crisis and the related employment reduction laying off of the increasing number of workers from the "baby boom" generation who have reached the requirements for retirement and due to the announced "modernizing" of the pension system (by lengthening the minimum required period of employment / pension qualifying period), however, retirement has been accelerated. In 2009, the average number of pensioners (oldage, disability, survivors', widower's/widow's pensions and the partial pension) in Slovenia increased significantly, by 2% compared to 2008, which was the highest growth rate in the last seven years.
- In 2009 there were on average 538,455 pensioners in Slovenia. The average number of insured persons (895,594) in the same year was 0.9% lower than in the previous year. Therefore, the ratio between the number of insured persons and the number of pensioners was reduced in 2009 it was 1.66.

Chart 32: Pension recipients by type and amount of pension and by sex, Slovenia, December 2009



Source: Vzajemnost No. 4/2010, Jože Kuhelj, p.9

In 2009 an average old-age pension in Slovenia amounted to EUR 687.96 (without considering recipients of pro rata pensions<sup>2</sup>); on average men received EUR 754.06 and women EUR 602.33. Disability pensions amounted on average to EUR 516.20 – the gender difference was somewhat smaller: on average men received EUR 542.97 and women EUR 479.03. Survivors' and widower's/widow's pensions in 2009 averaged around EUR 431.96 (survivors' pensions are determined also according to the number of family members who are entitled to the pension).

Pro rata pensions are relatively low because the are levied depending on the length of service completed in Slovenia.

Table 8: The average gross old-age and the average gross disability pension by pension qualifying period and sex, Slovenia, December 2009

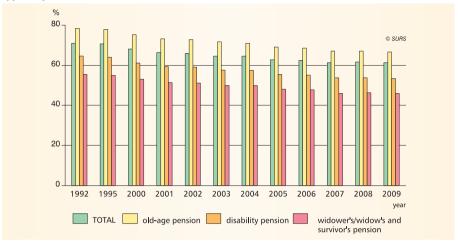
Pension qualifying	0	ld-age pension (E	Average gross	disa	bility pension (	FIIR)
period years)	men	women	TOTAL	men	women	TOTAL
ınder 14 years	309.01	392.94	367.40	348.34	390.57	367.72
15–19	210.66	276.37	261.92	341.78	407.95	375.52
20-24	273.95	355.18	328.27	384.95	432.36	408.23
25-29	349.95	411.76	389.32	484.82	518.93	501.08
30-34	461.01	564.91	548.15	606.29	574.50	594.98
5-39	652.54	654.01	653.50	654.61	477.09	638.49
40+	767.48	504.30	753.69	529.16	363.85	511.54
OTAL	668.60	579.85	620.93	507.76	478.86	496.19

Source: ZPIZ

- Women's pensions are lower primarily due to lower earnings of women which serve as a pension rating base and due to the length of the pension qualifying period. Men's earnings and women's earnings in Slovenia differed already in the past and so far not much has changed. The differences in the amounts of earnings paid of course also affect the differences in the levels of pensions.
- In 2008 the average monthly gross earnings of women EUR 1,369 amounted to 92.4% of the average monthly gross earnings of men EUR 1,481; which means that on average women earned just over EUR 110 less than men. Of course, these are averages and the differences are partly due to the different educational, age and occupational structures of the recipients.
- The difference between the earnings of women and men was the highest in financial and insurance activities. In 2008, gross earnings of women in financial and insurance activities were 33.8% lower than gross earnings of men in these activities. Approximately the same was the difference between men's and women's earnings in human health and social work activities, where women had on average 30.6% lower earnings than their male colleagues. Average earnings of men and women differed the least in transportation and storage; by EUR 88 in favour of women. However, women employed in this industry represented just over a fifth of all employees and had on average better paid jobs. Gross earnings of women were higher than gross earnings of men in three activities: construction (by 21.7%), water supply, sewerage, waste management and remediation activities (by 13.1%) and transportation and storage (by 6.5%).

#### INCOME OF THE ELDERLY

Chart 33: Ratios between the average net pension and the average net earnings by type of pension, Slovenia



Source: ZPIZ (Letno poročilo 2009, Letno poročilo 2005)

- During the time of receiving the pension the overall ratio between the amount of pension and average earnings in the country as it was at the implementation of the pension should be kept. This basic principle was in practice carried out in various ways, mainly depending on the level of inflation and the growth of earnings and on the financial sustainability of individual solutions. The criterion for the adjustment of pensions has always been the movement of average earnings per employee in the country according to official statistical data. In Slovenia in practice several versions to determine the bases for the adjustment of pensions have been tested: the monthly average of earnings in the penultimate year preceding the year in which the pensions were adjusted; the average of monthly earnings for the last year preceding the year in which the pensions were adjusted; the cumulative average of monthly earnings from the beginning of the year in which the pensions were adjusted; the average earnings for the last month before the adjustment of pensions for which the official statistics have been published.
- According to the regulations currently in force in Slovenia, pensions are adjusted according to the growth of the average earnings paid to persons employed by legal entities; these data are published by SORS in the Official Journal of the Republic of Slovenia. Average gross earnings are now taken into account, while according to the previous legislation average net earnings were taken into account. The mentioned change was the result of implementing the new Personal Income Tax Act (of 1 January 2005); among other things this act also had an effect on the different average level of taxes and contributions levied on earnings in the Republic of Slovenia. Due to the effects of the adjusted tax legislation, the divergence between the movements in the average gross and net earnings which had not been significantly different increased and also affected the accomplished ratios between pensions and earnings.
- Data on the amount of the pension by types of pensions and sex of recipients were always interesting and topical. In the current tight economic and financial situation, the question of how high they are is being raised ever more often. After 2000, since the current Pension and

Disability Insurance Act has been in force, from year to year the ratio between earnings and pensions keeps lowering. In 2000 the average old-age pension amounted to 75.3% and in 2009 only to 66.6% of average earnings.

- In 1992 the average old-age pension amounted to 78.4% of the average earnings, the average disability pension to 64.6%, the average survivor's pension to 55.4%, and all average pensions to 71.0% of average earnings.
- The objective of the pension legislation adopted in 2000 was to increase the retirement age and the pension qualifying period, which was at least for women well implemented as in 2000 they retired on average with 33 years and 7 months of the pension qualifying period and in 2009 with 35 years and 8 months of the pension qualifying period. As regards women who retired due to disability, the increase in the retirement age in this decade was lower, only by 1 year and 2 months.

Table 9: Ratios between the average pension and the average earnings by type of pension, Slovenia

Year		Тур	e of pension	
	old-age	disability	widower's/widow's /survivor's	total
1986	74.5	60.3	53.3	65.6
1990	89.2	73.1	63.4	79.9
1991	73.8	60.6	52.3	66.6
1995	76.2	63.0	54.2	69.2
1999	75.8	61.5	53.2	68.5
2000	75.3	61.1	53.0	68.1
2001	73.2	59.4	51.4	66.3
2002	72.8	59.1	51.1	65.9
2003	71.1	57.6	49.9	64.5
2004	70.2	56.7	49.2	63.7
2005	69.1	55.4	48.0	62.7
2006	68.6	55.1	47.8	62.5
2007	67.1	53.7	46.0	61.3
2008	67.1	53.8	46.3	61.6
2009	66.6	53.4	46.0	61.3

Source: ZPIZ (Letno poročilo 2009)

- The pension depends on the years of the pension qualifying period of the pension beneficiary and of the type of pension exercised by the person. The change in the valuation of the insurance periods under the Pension and Disability Insurance Act since 1 January 2000 has generally resulted in different levels of pensions established by different rules.
- The net old-age pension for 40 years of the pension qualifying period (for men) or 35 years the pension qualifying period (for women) measured from the minimum pension base in 2009 ranged from EUR 428.31 (established in 2009) to EUR 431.09 per month, and for the minimum pension qualifying period (i.e. 15 years) it was EUR 187.43. The latter amount is also the pension guaranteed by law, which is given to every insured person, regardless of how the person was insured.



#### INCOME OF THE ELDERLY

In Slovenia, the ratio between the average net pension and net earnings has been indicating persistent lowering of pensions in relation to earnings since 2000. In 2000 the average pension amounted to 68.1% of average earnings; the average old-age pension to 75.3%, the average disability pension to 61.1%, and the average survivor's pension to 53.0% of average earnings. In 2009 this ratio decreased for the average pension to 61.3% of average earnings; for the average old-age pension to 66.6%, for the average disability pension to 53.4%, and for the average survivor's pension to 46.0% of average earnings. Such a decline understandably leads to serious thinking about the lower limit to which it is permissible to lower pensions without undermining the livelihoods of retired persons.

Table 10: Average completed years of pension qualifying period at the retirement of "new" old-age and disability pensioners from the compulsory pension and disability insurance by sex, Slovenia

Year						Retire	ment					
			old-	-age				disab	ility			
	m	en	wo	men	TO	TAL	m	en	wo	men	TC	TAL
	years	months										
199011	36	7	31	8	34	0	27	9	23	4	26	2
19951)	36	11	31	9	34	4	27	10	23	6	26	5
20002]	37	3	33	7	35	0	28	3	25	6	27	3
200123	37	1	33	11	35	0	28	2	25	4	27	1
200223	37	0	34	1	35	4	28	0	25	4	27	0
20032]	37	5	34	5	35	8	28	11	26	4	27	11
200423	37	9	35	1	36	3	28	9	26	3	27	11
20052	38	0	35	4	36	7	28	4	25	11	27	6
20062]	38	4	35	8	36	11	28	1	26	10	27	8
20072]	38	3	35	10	37	1	28	7	26	6	27	10
20082]	38	3	36	0	37	0	28	0	27	0	27	7
20092)	38	2	35	8	36	10	28	3	26	8	27	8

<sup>1)</sup> Retired under general and special regulations.

Source: ZPIZ

■ The rights deriving from pension and disability insurance belong to people as social security rights. Social security is a broad concept, encompassing social insurance and social protection.

The right to receive the old-age pension depends on the age of the insured person and the completed years of the pension qualifying period; at the maximum age this must only cover the period of insurance. To qualify for the entitlement to this pension both conditions must be fulfilled. The mentioned conditions, however, differ according to sex of the insured; if, for example, a person reaches the statutory pension qualifying period (which, for example, is 40 years of age for men), he or she must also fulfil the age requirement (e.g. 58 years for men).

<sup>&</sup>lt;sup>2)</sup> Retired under general regulations.

- The right to receive the disability pension also dependents on the insured person's disability and meeting of certain other conditions specified by the law. The existence of a disability is determined by the disability commission at the Pension and Disability Insurance Institute of Slovenia.
- To obtain the right to receive the pension, the beneficiary must generally show the specified length of the pension qualifying period. The total length of the pension qualifying period does not only affect the fulfilment of the conditions for entitlement to a pension, but also its amount, since it is the criterion to determine the percentage in which the beneficiary's pension is determined from the pension rating base.
- In December 2008 the average pension qualifying period of all pensioners in Slovenia was 32 years and 2 months, which is well below the 40-year period that should be achieved. The low average pension qualifying period is partly due to previously existing conditions and partly also due to the fact that the insured because of the established category 1 of disability retire with a lower pension qualifying period and due to the possibility to retire with more than 20 years of the pension qualifying period or 15 years of insurance. And this fact lowers the average pension qualifying period at retirement.
- In the 1990-2009 period, the average pension qualifying period for old-age pensioners was extended by 2 years and 10 months (for men by 1 year and 7 months and for women by 4 years), and for disability pensioners by 1 year and 6 months (for men by 1 year and 6 months and for women by 3 years and 4 months).

Table 11: The average attained age (retirement age) of the pension recipients (old-age and disability) who were first granted the right to a pension, by sex, Slovenia

Year						Retire	ment					
			old-	-age				disab	ility			
	m	en	WOI	men	TO	TAL	m	en	wo	men	TC	TAL
	years	months										
1990	57	8	53	7	55	7	51	2	47	8	50	0
1995	57	6	53	1	55	7	48	8	44	1	47	1
2000	61	0	56	1	57	11	52	11	48	9	51	4
2001	62	0	56	2	58	2	53	3	49	1	51	6
2002	62	2	56	5	58	10	53	6	49	7	52	0
2003	62	2	56	6	58	10	53	8	49	9	52	0
2004	62	6	57	3	59	7	53	10	49	10	52	7
2005	61	8	57	3	59	5	53	11	50	1	52	7
2006	61	8	57	4	59	6	53	5	50	4	52	4
2007	61	10	57	7	59	8	54	9	50	8	53	4
2008	61	11	57	7	59	7	54	3	51	7	53	3
2009	62	0	58	1	59	11	54	8	51	11	53	8

Source: ZPIZ (http://www.zpiz.si/msp/201004/, 12. 5. 2010)

■ When it comes to pension systems, often the most attention is paid to the actual retirement age. The 1999 pension reform made the retirement conditions stricter – this is evident from data on the average retirement age of pension recipients and data on their pension qualifying period – although it also introduced some "benefits", which allow earlier retirement; for example, lowering the retirement age due to child care.

- The average retirement age of pension recipients in Slovenia changed significantly in the 1990-2009 period it increased more for women than for men. For old-age pensioners, it increased for men by 4 years and 4 months and for women by 4 years and 5 months. For disability pensioners, it increased for men by 3 years and 6 months and for women by 4 years and 3 months.
- In 2009 the average retirement age of men exercising the right to old-age pension was 62 years (1 year higher than in 2000), while the average retirement age of women who exercised the right to old-age pension was 58 years and 1 month (2 years higher than in 2000). For men who exercised the right to disability pension the average retirement age was 54 years and 8 months (1 year and 9 months more than in 2000) and for women who exercised the right to disability pension 51 years and 11 months (3 years and 2 months more than in 2000).
- The other condition prescribed by law for entitlement to old-age pension, i.e. the pension qualifying period, has also been increasing since 2000. In nine years the average pension qualifying period for men increased by 9 months (in 2009 it was 38 years and 2 months) and for women by 2 years and 1 month (in 2009 it was 35 years and 8 months).

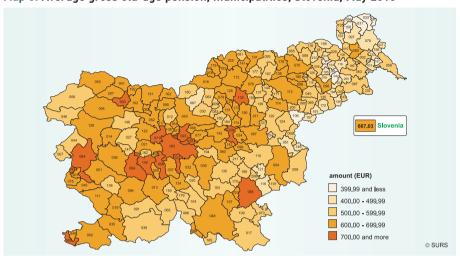
number of persons (1000) ratio 1000 2 © SUBS 800 1.8 600 1.6 400 200 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 year number of insured persons insured persons pension recipients per 1 pension recipient

Chart 34: The ratio between pension recipients and insured persons, Slovenia

Source: ZPIZ

- In recent years (from 2006 to 2008), the average number of insured persons in Slovenia has been growing faster than the number of pensioners. In 2009, however, as a result of the global economic crisis, the number of insured persons decreased by 1% (by 9,198), while the number of pensioners grew by 2% (by 10,522).
- The relationship between insured persons and pensioners from the compulsory insurance (they receive old-age, disability, survivors', widower's/widow's or partial pension) fell from 1.71 in 2008 to 1.66 in 2009 (the worst ratio in Slovenia so far).

Map 6: Average gross old-age pension, municipalities, Slovenia, May 2010

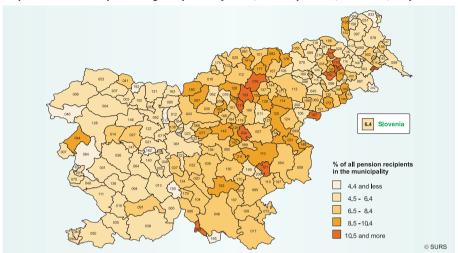


Sources: SORS, ZPIZ, GURS

- Average gross old-age pension received in May 2010 by pensioners in Slovenia amounted to less than EUR 400 in 11 municipalities, between EUR 400 and EUR 499 in 28 municipalities, between EUR 500 and EUR 599 in 79 municipalities, and between EUR 600 and EUR 699 in 76 municipalities: only in 16 municipalities it was EUR 700 or more.
- In May 2010 the lowest average gross old-age pension was registered in municipalities Grad (EUR 299.5) and Odranci (EUR 332.9), and the highest in municipalities Trzin (EUR 864.7) and Velenje (EUR 825.1).
- The average gross disability pension received in May 2010 by pensioners in Slovenia amounted to less than EUR 400 in 19 municipalities, between EUR 400 and EUR 499 in 78 municipalities, and between EUR 500 and EUR 599 in 110 municipalities; only in three municipalities it was between EUR 600 and EUR 699, and only in one EUR 700 or more (and only for men).
- In May 2010 the lowest average gross disability pension was registered in municipalities Kuzma (EUR 294.5) and Hodoš/Hodos (EUR 301.3), and the highest in municipalities Trzin (EUR 692.9) and Logatec (EUR 660.2). These are also the only municipalities in which the average gross disability pension exceeded EUR 600.

#### INCOME OF THE ELDERLY

Map 7: Pension recipients (aged up to 55 years), municipalities, Slovenia, May 2010

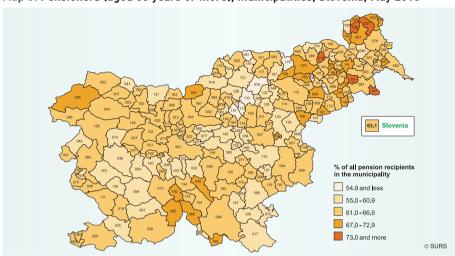


Sources: SORS, ZPIZ, GURS

- As regards the share of pension recipients who were not yet 55 years old, in May 2010 in 11 municipalities their share was less than 4.5%, in 86 municipalities between 4.5% and 6.4%, in 73 municipalities between 6.5% and 8.4%, in 28 municipalities between 8.5% and 10.4% and in 12 municipalities 10.5% or more.
- As regards municipalities, in May 2010 the shares of pension recipients who were not yet 55 years old were the lowest in municipalities Kostel, Bloke and Šalovci (3.5%), and the highest (i.e. more than 12%) in municipalities Osilnica (14.4%), Velenje (14.4%) and Polzela (12.1%).
- In May 2010 the lowest shares of pension recipients aged 55-64 (less than 20%) were recorded in municipalities Grad (15.9%), Sveti Tomaž (17.6%) and Sveti Jurij v Slovenskih goricah (18.6%), and the highest (more than 40%) in Polzela (44.8%), Miklavž (44.4%), Hajdina (43.2%) and Trzin (40.5%).

## INCOME OF THE ELDERLY

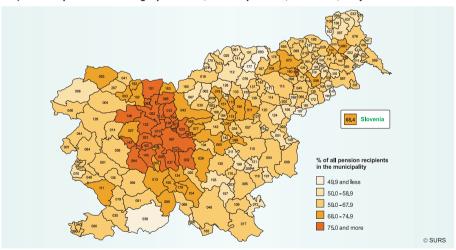
Map 8: Pensioners (aged 65 years or more), municipalities, Slovenia, May 2010



Sources: SORS, ZPIZ, GURS

■ The lowest shares of pension recipients over the age of 64 years – but all higher than 40% – were recorded in municipalities Polzela, Miklavž na Dravskem polju, Velenje and Hajdina, and the highest – at least 75% – in municipalities Grad, Sveti Jurij and Gornji Petrovci.

Map 9: Recipients of old-age pension11, municipalities, Slovenia, May 2010

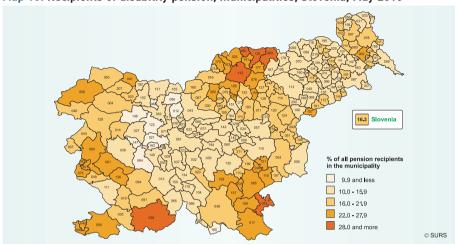


Onsidered are recipients of old-age pension and partial old-age pension. Sources: SORS, ZPIZ, GURS

<sup>■</sup> The lowest shares (less than 45%) of old-age pensioners were recorded in municipalities Ribnica na Pohorju, Podvelka and Zavrč, and the highest in municipalities Trzin, Žiri and Kranj.

## INCOME OF THE ELDERLY

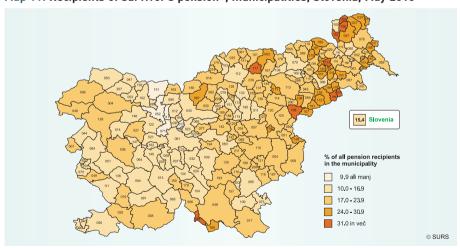
Map 10: Recipients of disability pension, municipalities, Slovenia, May 2010



Sources: SORS, ZPIZ, GURS

The lowest shares of disability pensioners were recorded in municipalities Kostel (7.6%), Žiri (7.9%) and Železniki (8.0%), and the highest in municipalities Slovenj Gradec (32.7%) and Metlika (31.5%).

Map 11: Recipients of survivor's pension11, municipalities, Slovenia, May 2010



Onsidered are recipients of widower's/widow's and survivor's pension. Sources: SORS, ZPIZ, GURS

<sup>■</sup> The lowest shares of survivor's and widower's/widow's pensions were recorded in municipalities Trzin [7.0%], Tržič (8.9%) and Kranj (9.3%), and the highest in municipalities Zavrč (37.8%), Ribnica na Pohorju (35.6%) and Osilnica (35.1%).

## **HEALTH IN LATER YEARS**

## Health is a value

As the main condition for increasing the well-being, for most modern societies health is the greatest value. Strengthening and protecting health of an individual requires the cooperation of both the individual and the society as a whole. The health of individuals and communities is namely affected by many interrelated factors: social and economic environment, external environment, and personal characteristics and lifestyle.

When we speak of the health of the elderly, this is usually information showing biological changes as negative consequences of old age (various diseases and age-related changes: atherosclerosis, heart attack, thrombosis, diabetes, cancer, memory and mood disorders, osteoporosis, hormone change, gynaecological and urological problems, problems with vision, hearing, skin, menopausal problems, infections, frequent injuries in later years, and many others), even though it would be more appropriate to show the real, potential biological change in humans in later years.

## More hope for recovery

Population ageing, new and more effective medicines, and modern medical technologies are a major challenge – a test and an opportunity – also for Slovenia, but they also mean more pressure on the health system. New methods of detecting and treating diseases provide to the individual a greater chance of survival and recovery, while the increasing needs and growing expectations of the population bring the dizzying increase in costs for the health system.

Similar to other developed European countries, in recent decades health of the population of Slovenia has significantly improved. This has been the result of a number of factors, especially the higher average level of people's education (this also affects the changes in people's habits), better living and working conditions, and greater social security and improved health services. Life expectancy has been extended, so that children born in Slovenia in the second half of the first decade of this century can expect to live, on average, slightly less than 80 years, which is almost ten years longer than those who were born five decades ago. The mean age at death is also increasing, while premature mortality (mortality before the age of 65) is declining.

## Key health issues for the elderly

The most important health problem for men and women aged 65 or more in Slovenia is cardiovascular disease: every tenth person of this age visits for the first time a general practitioner because of high blood pressure, every 12th due to the cardiovascular disease (heart disease and degeneration of heart muscle and valves, heart failure and heart rhythm disturbances), every 25th due to ischemic heart disease, and every 50th due to a stroke. So a quarter of people aged 65+ visit a doctor for the first time due to one of the listed diseases. The prevalence of disease for men aged 65+, if measured by hospitalizations, is a third higher than for women of the same age and after 1997 it has been slowly increasing for both men and women, while mortality has been declining for both sexes.

More than half of new cancer patients are at least 65 years old.

As regards injuries, the most common cause of death for the elderly are injuries that occur at home and during leisure time, especially falls, which have in the recent years killed more than 300 people aged 65+ in Slovenia.

Given the weakening of human physical and mental abilities, older people are also at risk due to transport; therefore, they require various preventative measures which facilitate the integration in road transport, but only of those of them whose physical and mental capabilities permit this.

#### **HEALTH IN LATER YEARS**

## Activity and care for better health...

The well-being and better health, and the ability to be independent in later years are to an important extent the result of healthy eating and regular physical activity. The selected balanced diet with normal nutrition preserves the physical and cognitive function of the body. And regular physical and mental activity are important protective factors of mental health.

## ...despite the (natural) reduction of ability

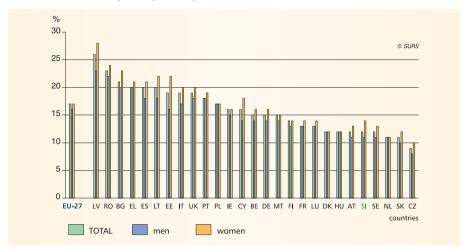
The period of ageing is characterized by the reduction in mental and physical abilities - as a result of normal physiological decline in living functions or the increasing number of chronic diseases and conditions, or both. Among such problems in the elderly dementia and depression most often stand out. And depression often leads to suicide. On average, 15% of the elderly are depressed, while for the elderly with serious medical problems (e.g. stroke, cancer, cardiovascular disease) this share is even higher. According to experts, the occurrence of depression is often associated with loneliness, being bored, being afraid of dying and death, and the symptoms are often different than those in younger people. In Slovenia the data collected with the survey on health and health care in 2006 showed that chronic depression and anxiety occur more frequently in the age group 65-74 years; chronic depression and chronic anxiety were "reported" by slightly more than 11% of the respondents (the most among all age groups).

Dementia affects about 1% of people aged 60+, and 30%-45% of people aged 85+. The number of people suffering from dementia, one of the most common mental disorders of the elderly, increases with age. Although the phenomenon is supposed to be about as frequent for men as for women, more women suffer from it (because women that old are more numerous than men). In Slovenia in the last decade, more and more elderly people have been suffering from depression. The suicide rate for people aged 65+ was more than twice as high as for people younger than 65 (44 suicides per 100,000 population); for men of this age it was 4-times higher than for women of this age.

- As regards suicide, the elderly are a group at great risk. In Slovenia the prevalence of suicide among people aged 65+ has been steadily growing, the reason being mental disorders, especially depression, impaired relationships, impairment of bodily functions, housing and mental problems. In Slovenia, which is in terms of the number of suicides of the elderly (65+) first in the world, the number of deaths due to suicide has been increasing for this age group since 1985. In Slovenia, for example, the number of suicides of people in the 65-69-year age group is twice as high as the average (30 deaths per year due to suicide); after the age of 70 years it is even higher (72 deaths per year). Separate statistics by sex is somewhat different: the value of the suicide rate for men aged 65+ ranks Slovenia at the very top of the European list, while the value of this indicator for women ranks our country 4<sup>th</sup> in Europe (more suicides of women in this age group are recorded in Lithuania, Switzerland and Serbia).
- Among the people who end their lives by suicide, in Slovenia men outnumber women by three to one, while suicide attempts are more frequent in women than men. Also, by the number of suicides among women in the world Slovenia is unfortunately highly ranked at 3<sup>rd</sup> place. As regards the marital status of people who die by suicide, in Slovenia the most at risk are widowed (229 per year) and divorced men (130 per year), and the least at risk are unmarried (6 per year) and married women (12 per year).
- People who die by suicide are in Slovenia on average about 50 years old. This is two decades less than the mean age of people who die of natural causes.
- Differences by the statistical regions of Slovenia are significant also regarding this indicator. Suicide is a large problem in the Jugovzhodna Slovenija, Spodnjeposavska, Savinjska, Zasavska and Pomurska statistical regions, and a slightly smaller problem in the Notranjsko-kraška and Goriška statistical regions.

## AT-RISK-OF-POVERTY RATE FOR THE ELDERLY

Chart 35: At-risk-of-poverty rate by sex, EU-27 Member States, 2008



Source: Eurostat (tsisc030)

- The analysis of socio-economic categories of persons and households shows that the most important causes of poverty in Slovenia are unemployment or inactivity and also age (especially for women), greater number of children, living in single or single parent households, and living in rented accommodation.
- The at-risk-of-poverty rate in Slovenia is slowly declining. In the last decade it has decreased from 14% to less than 12%, but it should be noted that these data only show the distribution of income among the population and do not take into account assets, savings, price movements, housing conditions, health and other factors that also affect the living standards of people.
- According to data from the Survey on Income and Living Conditions for 2008, the at-risk-of-poverty rate in Slovenia was 12.3%, which means that 12.3% of people were living below the poverty threshold, i.e. that annual income of 12.3% of the population (even after receiving social transfers) failed to rise above the income poverty threshold. With this value, Slovenia as a whole ranked among the eight EU Member States with the lowest at-risk-of-poverty rate (in the EU-27 the at-risk-of-poverty rate was 17%); however, for certain population groups the values of this indicator in Slovenia were higher than those in the EU-27 as a whole.

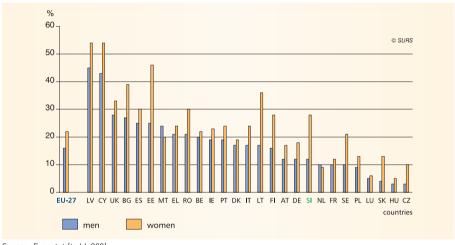
#### AT-RISK-OF-POVERTY RATE FOR THE ELDERLY

Table 12: At-risk-of-poverty rate (income excluding income in kind) by age groups and sex, Slovenia

Age	e TOTAL		TOTAL Men age (years)				Women		
	0-17	18-64	65+	0-17	18-64	65+	0-17	18-64	65+
2005	11.9	10.4	20.4	11.3	10.3	11.2	12.5	10.4	26.2
2006	11.5	9.8	20.0	10.9	9.9	12.0	12.3	9.7	24.9
2007	11.3	9.8	19.4	11.0	9.7	10.8	11.7	10.0	24.9
2008	11.6	10.5	21.3	10.8	10.9	11.7	12.5	10.0	27.6

Source: SORS

Chart 36: At-risk-of-poverty rate for the elderly by sex, EU-27 Member States, 2008



Source: Eurostat (tsdde320)

In 2008 Slovenia was as regards the at-risk-of-poverty indicator of the elderly slightly above the EU average (19%); the at-risk-of-poverty rate for women aged at least 64 was 21% or 9 percentage points higher than for the total population. The same rates as in Slovenia were recorded in Belgium, Ireland and Italy. However, in Slovenia the at-risk-of-poverty rate for this age group differs significantly by sex (excluding income in kind): the at-risk-of-poverty rate for the elderly women, for example, increased in one year by 2.7 percentage points (to 27.6%), while for the elderly men it increased by 0.9 of a percentage point (to 11.7%). So, 28% of women aged 65 or more lived in poverty and were thus among the most endangered people in Slovenia.

■ This difference is even more pronounced when we compare the value of this indicator for those women who are aged 65 or more and live alone (single-member households). In these households the at-risk-of-poverty rate is generally high (in 2008 it was 41.9%) and for women it is significantly higher (in 2008 it was 51.4%).

#### AT-RISK-OF-POVERTY RATE FOR THE ELDERLY

Table 13: At-risk-of-poverty rate (income excluding income in kind), single-member households by sex, Slovenia

Year 2005 2006 2007 2008 Single-member household 44 1 42.5 39.4 41.9 37 9 Single-member household, man 35 1 33 N 37.3 Single-member household, woman 48.5 44.7 42.6 44.3 Single-member household, age less than 65 years 43.0 38.8 33.6 35.8 Single-member household, age less than 65 years - man 39 1 39 4 35.6 417 Single-member household, age less than 65 years - woman 47.9 38.1 31.1 28.0 Single-member household, age 65 years and more 44.8 45.0 43.8 47.2 Single-member household, age 65 years and more - man 26 D 34 5 25.5 23 0 Single-member household, age 65 years and more - woman 48.8 47.1 47.1 51.4

Source: SORS

Table 14: At-risk-of-poverty rate for the elderly (65+) by tenure status and sex, household income (income excluding income in kind). Slovenia

Tenure	Sex		Ye	ear	
status		2005	2006	2007	2008
TOTAL					
	TOTAL	20.4	20.0	19.4	21.3
	men	11.2	12.0	10.8	11.7
	women	26.2	24.9	24.9	27.6
Owner or use	r				
	TOTAL	19.8	19.5	18.4	20.3
	men	10.7	11.6	10.2	11.6
	women	25.6	24.4	23.7	26.0
Tenant					
	TOTAL	29.5	32.3	40.6	49.4
	men	20.7	22.5	24.8	15.3
	women	33.6	38.0	47.1	63.0

Source: SORS

■ The data on the at-risk-of-poverty rate by tenure status for women show that among all age groups of women the most at risk are women aged 65 or more, and among them those who are tenants; in 2008 the at-risk-of-poverty rate for these women was 63% (for men of the same age it was "only" 15%).

If income did not include social transfers (family and social receipts), the at-risk-of-poverty rate would almost double; it would be 23.0%, and for the elderly 32.9%.

## CONCLUSION

## Effects of the demographic trends of ageing

The demographic trends of ageing strongly influence and will continue to influence everything, particularly the economic and employment structure of the society, and the consequences will be felt by everybody. The problem of the effects of ageing is too large to be at least mentioned here, and this is not the purpose of this brochure. We tried to point out only some of the selected problems and point out that some of them are becoming critical.

## Ageing is also a result of progress

Population ageing, i.e. increasing the share of older people, is mainly due to significant progress in the economic, social and health area, as this enables European citizens to live longer, more comfortable and safer lives than ever before. However – as was pointed out by the heads of states and governments at the informal summit at Hampton Court in October 2005 – this is also one of the most important challenges the European Union will have to face in the coming years. In their communication participants of this summit recognize that population ageing is a challenge which we can effectively tackle only if we create favourable conditions for supporting people who want to have children and exploit the best we can the opportunities offered by longer, more productive and healthier life.

## New approaches to the phenomenon of population ageing

Population ageing, a phenomenon characteristic of all modern developed industrial societies, can no longer be balanced in the society only with a policy of mere redistribution of parts of social income. The effective management of large-scale changes resulting from this phenomenon, increasingly requires new, suitable approaches (methods, procedures) of adjusting the policies of education, work and retirement. Only the constant changing of the relationship between the income of active population and the income of pensioners will not solve the problem; it is therefore increasingly important to promote alternative means of changing the relationship between the active and the pensioners. In recent years Slovenia has not been particularly successful in doing this, but this does not mean that there are no appropriate means to achieve this goal.

## Solving the problems of an ageing society

When Slovenia was holding the EU presidency in the first half of 2008, in solving the problems of an ageing society it focused on the implications that such a society has for individuals and the society as a whole, on discussions about what can be done to promote intergenerational solidarity, and on the integration of the elderly in all areas of private life and social life.

# Population ageing is something that happens in a society and is also an achievement of the society

We speak about population ageing when the share of older people in total population increases. The demographic profession presents this process differently. The main causes of population ageing in Slovenia are lower fertility, longer life expectancy and migration. Fertility has been declining in Slovenia for over 100 years. Currently, Slovenia ranks among the countries with the lowest birth rates. Low fertility is closely linked to women postponing the decision to have children (or the decision for maternity and paternity) to later years; this also reduces the women's fertile period. Rising life expectancy is a result of the improving of the living conditions; to a large extent this has been the result of advances in medicine, in particular the development and use of antibiotics and vaccines. An important factor in population ageing of individual countries is also migration, because young people often move to larger towns and to other countries, to where there are "better" possibilities for living and development. In Slovenia population ageing has been intensifying, and this will continue in the future. It is therefore very important to accept this as a fact and as much as possible to find suitable ways and means to make the best use of the growing potential of the third generation. Ageing is "not a failure of development, not an error of development, but a great achievement." This is what dr. Ana Krainc of the Slovenian Third Age University stated at the last panel of the 9th Festival of the Third Age entitled Solidarity between Generations. It is right that we become fully aware of this as soon as possible and accept it with gratitude.

## METHODOLOGICAL EXPLANATIONS AND DEFINITIONS

**Household** is a group of people living together and sharing their income for covering the basic costs of living (accommodation, food, other consumer goods, etc.) or a person living alone. More: http://www.stat.si/popis2002/en/definicije\_in\_pojasnila\_4.html

**Ageing index** is the ratio between the number of people aged 65 or more and the number of children aged 0-14 multiplied by 100.

**Public social welfare institutions** are old people's homes, special social welfare institutions and centres for protection and training. Old people's homes and combined social welfare institutions provide institutional care for the elderly, with which they substitute or supplement the functions of a home or one's own family (organised nutrition and care, and health care).

Young age dependency ratio is the ratio between the number of people aged between 0 and 14 and the number of the working age population (aged between 15 and 64) in a country or a territorial unit.

**Old age dependency ratio** is the ratio between the number of people aged 65 or more and the number of the working age population (aged between 15 and 64) in a country or a territorial unit.

**Healthy life years** is the indicator (also known as expected life free of disability) used to measure the number of years for which it is expected that the person of a certain age will live without disability.

**Median age** of a population is that age that divides a population into two groups of the same size, such that half of the total population is younger than this age, and the other half older.

**The new definition of the population of Slovenia** – in force in Slovenia from 1 January 2008. More: http://www.stat.si/doc/pub/Demographic2008.pdf, p. 56

**Pensions** - in this section the source for all entries is the Statistical Terminology Dictionary Mandatory Pension and Disability Insurance

http://www.zpiz.si/wps/wcm/connect/1800e580441e4bfa8363fb745e837060/ STslovar.pdf?MOD=AJPERES

**Pension recipient** is a person who is in accordance with the law or international treaty entitled to enjoyment of the old-age pension (including early pensions or pensions of employees whose insurance period was increased by a bonus and who retired at an early age, pensions of the National Liberation War veterans, administrative or extraordinary old-age pensions), disability pension and survivor's or widower's/widow's pensions.

**Beneficiary of rights under pension and disability insurance.** Term used by the Institute as one of the most commonly used terms, which marks ensuring and realization of already established rights associated to insured persons, pensioners (beneficiaries of old-age, disability, survivor's, widower's/ widow's and partial pensions under compulsory insurance) as well as other beneficiaries. As such, it comprises pension payments (receipts) and other cash benefits (income) to pension recipients of compulsory insurance as well as guarantee or enjoyment of some other rights, that belong to eligible insured persons (e.g. to occupational rehabilitation).

**Pension.** A regular monthly benefit under compulsory insurance which ensures financial and social security to a beneficiary in case of old age, disability or death of the insured person.

**Old-age pension.** A pension benefit to which an insured person is entitled on completion of a certain age and pension period if he/she fulfils conditions stipulated by the Pension and Disability Insurance Act.

**Disability pension.** A pension sum to which an insured person is entitled at the onset of disability, provided he fulfils the conditions in accordance to the Pension and Disability Insurance Act.

**Survivor's pension.** A right paid out by the Institute to family members of a deceased insured person or a beneficiary of rights under pension and disability insurance if they fulfil the conditions stipulated by that law.

#### METHODOLOGICAL EXPLANATIONS AND DEFINITIONS

**Widower's/widow's pension.** A pension benefit the survived spouse (or a divorced spouse or a partner in cohabitation who fulfils certain conditions) of a deceased insured person or a pension beneficiary is entitled to if he/she fulfils the conditions specified by The Pension and disability insurance act.

**Minimum pension.** An old-age pension assessed in the amount of 35% of the minimum pension base.

**Partial pension**. Partial pension is assessed in the amount of one half of old-age pension to the insured person who has fulfilled conditions for assertion of rights for old-age pension and has stayed in work relationship with half time basis at the most.

**Insured pension.** A person who is according to Pension and Disability Insurance Act compulsorily or voluntarily included in pension and disability insurance.

**Mean age** is the weighted arithmetic average of the age of a particular group of the population. When calculating the mean age, the means of 5-year age groups are considered as weights.

**Premature mortality.** People who died prematurely are those who died before the expected life expectancy; however, in health statistics premature deaths are deaths before the age of 65.

**Life expectancy** is the average number of years of life that can be expected by a person aged precisely x years if the mortality rate by age in the time of that person's life will be equal to the values of the mortality rate in life tables for the observed year.

**Population projections.** This expression means the calculation of the possible future size of the population and possible future population structure in a certain area by different marks; it is based on the hypotheses on the future development of fertility rate, mortality rate and migration.

**Total age dependency ratio** is the ratio between the number of people aged 0-14 and 65 or over and the number of working age population (aged 15-64) in a country or a territorial unit.

**Population ageing** is defined as an increase in the percentage of the population over a certain age limit (usually the age of 65) along with a simultaneous decrease in the number of population younger than 15 and the prolongation of the life expectancy of the whole population. The demographic age of the population is usually assessed according to the percentage of people older than 65 compared to the whole population. (E.g. if over 10% of the population is aged over 65 we talk about an old population.)

**Elderly.** The boundary between middle age and old age can not be defined exactly because it does not have the same meaning in all societies. In the developed world today the term "senior citizen" typically defines a target group of people aged 65 or more (in some cases 60+ and 70+). If older people are employed, the age group 50-64 years is usually taken into account. There is no general agreement about who the elderly (old) are. Various age limits are applied for various needs, even within one country, let alone in the EU and the world. As regards the definition of the "elderly" the authors of various disciplines have not yet reached a consensus (e.g. Pečjak V., 1998, Krajnc, A., 1999, Stuart-Hamilton I., 2000, Kuhar M., 2007).

**Age** is the period of time a person has lived from his/her birth to the moment of observation (census, survey) or to the observed event (marriage, birth of the first child, employment, death, etc.). It is usually measured in years, but can also be measured in months, days or even hours. It is classified in two ways: by completed years of age and by date of birth. These two classifications are only harmonised at the beginning (1 January) or at the end (31 December) of each calendar year. When this is not specifically marked, the age is presented by completed years of age.

**Employment/population ratio** represents persons in employment as a percentage of the working age population (all people aged 15 or more).

## METHODOLOGICAL EXPLANATIONS AND DEFINITIONS

**At-risk-of-poverty rate** represents the percentage of people with an income lower than 60% of the median of available income per equivalent member of household (basic at-risk-of-poverty threshold).

**Employment rate** is defined as the share of persons in employment in total working age population. SORS defines persons in employment according to the Labour Force Survey (i.e. persons who during the last week (from Monday to Sunday) prior to the interview did any work for pay or profit or family gain, or who had the status of an employed or self-employed person, even if they did not perform any work), whereas the working age population (in accordance with the guidelines of the International Labour Organisation – ILO) comprises all persons aged 15 or more.

**Health** is a state of complete physical, mental and social well-being. Originally, health was defined as an absence of illness or helplessness; however, according to the newest observations and positions of the World Health Organization, health is an integral and dynamic system capable of adjusting to all influences of the environment and which enables the individual or a community to perform all biological, social and vocational functions and prevent diseases, helplessness and premature death.

## STATISTICAL AND OTHER SIGNS

no occurrence of event

... not available

M less precise estimate - use with caution

+ and more (years, members, etc.)

1) footnote

Ø average

## ABBREVIATIONS AND UNITS OF MEASUREMENT

2002 Census 2002 Census of Population, Households and Housing in the Republic of Slovenia

Censuses censuses of population, households and housing

ESS Employment Service of Slovenia

EUR euro

GURS The Surveying and Mapping Authority of the Republic of Slovenia

LFS Labour Force Survey

OECD Organisation for Economic Co-operation and Development

RS Republic of Slovenia

SORS Statistical Office of the Republic of Slovenia

UMAR Institute of Macroeconomic Analysis and Development

UN United Nations

ZPIZ Pension and Disability Insurance Institute of Slovenia

WHO World Heath Organisation

% percentage km² square kilometre

# LIST OF COUNTRIES: NAMES AND ABBREVIATIONS (ISO 3166)

Country name	Abbr.	Country name	Abbr.
EU-27, TOTAL	EU-27	Italy	IT
Austria	AT	Latvia	LV
Belgium	BE	Lithuania	LT
Bulgaria	BG	Luxemburg	LU
Cyprus	CY	Malta	MT
Czech Republic	CZ	Netherlands	NL
Denmark .	DK	Poland	PL
Estonia	EE	Portugal	PT
Finland	FI	Romania	RO
France	FR	Slovakia	SK
Germany	DE	Slovenia	SI
Greece	EL	Spain	ES
Hungary	HU	Sweden	SE
Ireland	ΙE	United Kingdom	UK

# MUNICIPALITIES OF THE REPUBLIC OF SLOVENIA, 1 January 2009

ode Name	Code Name	Code Name	Code Name	Code Name
IO1 Ajdovščina	043 Kamnik	085 Novo mesto	127 Štore	170 Mirna Peč
102 Beltinci	044 Kanal	086 Odranci	128 Tolmin	171 Oplotnica
103 Bled	045 Kidričevo	087 Ormož	129 Trbovlje	172 Podlehnik
104 Bohini	046 Kobarid	088 Osilnica	130 Trebnje	173 Polzela
105 Borovnica	047 Kobilje	089 Pesnica	131 Tržič	174 Prebold
106 Bovec	048 Kočevje	090 Piran/Pirano	132 Turnišče	175 Prevalie
107 Brda	049 Komen	091 Pivka	133 Velenje	176 Razkrižje
108 Brezovica	050 Koper/Capodistria	092 Podčetrtek	134 Velike Lašče	177 Ribnica na Pohorju
109 Brežice	051 Kozje	093 Podvelka	135 Videm	178 Selnica ob Dravi
110 Tišina	052 Krani	094 Postoina	136 Vipava	179 Sodražica
111 Celie	053 Kranjska Gora	095 Preddyor	137 Vitanje	180 Solčava
112 Cerklje na Gorenjskem	054 Krško	096 Ptui	138 Vodice	181 Sveta Ana
113 Cerknica	055 Kungota	097 Puconci	139 Vojnik	182 Sveti Andraž v Slov. gorio
114 Cerkno	056 Kuzma	098 Rače - Fram	140 Vrhnika	183 Šempeter - Vrtojba
115 Črenšovci	057 Laško	099 Radeče	141 Vuzenica	184 Tabor
116 Črna na Koroškem	058 Lenart	100 Radenci	142 Zagorje ob Savi	185 Trnovska vas
	059 Lendava/Lendva		142 Zagorje ob Savi 143 Zavrč	186 Trzin
117 Crnomelj 118 Destrnik		101 Radlje ob Dravi	144 Zreče	187 Velika Polana
	060 Litija	102 Radovljica		
119 Divača	061 Ljubljana	103 Ravne na Koroškem	146 Zelezniki	188 Veržej
120 Dobrepolje	062 Ljubno	104 Ribnica	147 Žiri	189 Vransko
21 Dobrova - Polhov Gradec	063 Ljutomer	105 Rogašovci	148 Benedikt	190 Žalec
122 Dol pri Ljubljani	064 Logatec	106 Rogaška Slatina	149 Bistrica ob Sotli	191 Žetale
23 Domžale	065 Loška dolina	107 Rogatec	150 Bloke	192 Žirovnica
124 Dornava	066 Loški Potok	108 Ruše	151 Braslovče	193 Zužemberk
125 Dravograd	067 Luče	109 Semič	152 Cankova	194 Šmartno pri Litiji
126 Duplek	068 Lukovica	110 Sevnica	153 Cerkvenjak	195 Apače
127 Gorenja vas - Poljane	069 Majšperk	111 Sežana	154 Dobje	196 Cirkulane
128 Gorišnica	070 Maribor	112 Slovenj Gradec	155 Dobrna	197 Kostanjevica na Krki
129 Gornja Radgona	071 Medvode	113 Slovenska Bistrica	156 Dobrovnik/Dobronak	198 Makole
I30 Gornji Grad	072 Mengeš	114 Slovenske Konjice	157 Dolenjske Toplice	199 Mokronog - Trebelno
I31 Gornji Petrovci	073 Metlika	115 Starše	158 Grad	200 Poljčane
132 Grosuplje	074 Mežica	116 Sveti Jurij	159 Hajdina	201 Renče - Vogrsko
133 Šalovci	075 Miren - Kostanjevica	117 Šenčur	160 Hoče - Slivnica	202 Središče ob Dravi
134 Hrastnik	076 Mislinja	118 Šentilj	161 Hodoš/Hodos	203 Straža
35 Hrpelje - Kozina	077 Moravče	119 Šentjernej	162 Horjul	204 Sveta Trojica v Slov. gori
136 Idrija	078 Moravske Toplice	120 Šentjur	163 Jezérsko	205 Sveti Tomaž
137 lg	079 Mozirie	121 Škocjan	164 Komenda	206 Šmarješke Toplice
138 Ilirska Bistrica	080 Murska Sobota	122 Škofja Loka	165 Kostel	207 Gorje
I39 Ivančna Gorica	081 Muta	123 Škofljica	166 Križevci	208 Log - Dragomer
140 Izola/Isola	082 Naklo	124 Šmarje pri Jelšah	167 Lovrenc na Pohorju	209 Rečica ob Savinji
141 Jesenice	083 Nazarie	125 Šmartno ob Paki	168 Markovci	210 Sveti Jurij v Slov. gorical
142 Juršinci	084 Nova Gorica	126 Šoštanj	169 Miklavž na Dravskem	

## SOURCES AND LITERATURE

Apohal Vučković, I., Čelebič, T. (2010). *Socialni razgledi 2009*. Ljubljana: Urad za makroekonomske analize in razvoj. 138 pp. Retrieved on 12. 02. 2010 from the website:

http://www.umar.gov.si/fileadmin/user\_upload/publikacije/socrazgledi/2009/socialni\_razgledi\_2009.pdf

Ban Ki-Moon, editor (2007). World Economic and Social Survey 2007: Development in an Ageing World – DESA E/2007/50/Rev.1, ST/ESA/314, New York: United Nations, Department of Economic and Social Affairs. 212 pp.

Burja, J. et all. (2008). Statistični terminološki slovar obveznega pokojninskega in invalidskega zavarovanja / Statistical Terminology Dictionary of Mandatory Pension and Invalidity Insurance. ZPIZ, Ljubljana. 60 pp.

Retrieved on 28. 11. 2009 from the website: http://www.zpiz.si/att/STslovar.pdf

Discrimination in the European Union: Perceptions, Experiences and Attitudes. (2008). Special Eurobarometer 296 / Wave 69. 1160 pp. Retrieved on 02. 10. 2009 from the website:

http://ec.europa.eu/public opinion/archives/ebs/ebs 296 en.pdf

Family Care of Older People in Europe. (2001) Ur. I. Philp, Vol. 46 Biomedical and Health Research, IOS Press, the Netherlands, 281 pp.

Hlebec V., ured. (2009). Starejši ljudje v družbi sprememb. Ljubljana: Aristej, 279 pp.

Hoff, A. (2008). Tackling Poverty and Social Exclusion of Older People – Lessons from Europe. Working paper 308. Oxford Institute of Ageing. 76 pp.

Krajnc, A. (1999). Paradosk tretjega življenjskega obdobja: starejši imajo več osebne svobode, možnosti za uresničevanje ciljev pa manj. Andragoška spoznanja, 3. pp 5-18.

Kuhar, M. (2007). *Sociološki vidik: prevrednotenje staranja in starosti*. Zbornik. Retrieved on 12. 05. 2009 from the website http://www.kapitalska-druzba.si/ files/506/kad zbornik2007 metka kuhar.pdf

Living Arrangements of Older Persons: Critical Issues and Policy Responses. (2001). Population Bulletin of the United Nations; Special Issue No. 42/43 2001. United Nations, Population Division-Department of economic and social affairs. New York. 392 pp.

Stuart-Hamilton, I. (2000). *The Psychology of Ageing, An introduction*, 3rd edition, London and Philadelphia: Jessica Kingsley Publishers. 331 pp.

Living Conditions in Europe. (2007). Eurostat – Statistical pocketbook – Data 2002-2005. Luxembourg: Office for Official Publications of the European Communities. 107 pp.

Odnos Slovencey do starosti, pokojninskega sistema in varčevanja za starost; zbornik ob 10. obletnici

Kapitalske družbe. (2007). Zbornik. Kapitalska družba Ljubljana. Retrieved on 12. 04. 2008 from the website: http://www.kapitalska-druzba.si/pokojninski sistem/raziskave/raziskava o odnosu do starosti/zbornik

Ogg, J. (2005). Social Exclusion and Insecurity Among Older Europeans: The Influence of Welfare Regimes. Ageing & Society. 22 pp.

Pečjak, V. (1998). *Psihologija tretjega življenjskega obdobja*. Bled, samozaložba. Ljubljana, Znanstveni inštitut Filozofske fakultete.

Population ageing and Development. (2009). UN. Wall Chart. Retrieved on 12. 04. 2010 from the website: www.un.org/esa/population/.../ageing/ageing2009.htm

Staranje prebivalstva: Izziv in odgovornost države, podjetij in posameznikov. (2008). Zbornik. Kapitalska družba. Ljubljana. Retrieved on 10. 05. 2009 from the website:

 $http://www.kapitalska-druzba.si/pokojninski\_sistem/raziskave/\ raziskava\_o\_odnosu\_do\_starosti-podjetja\ zbornik/uros\_rozic$ 

The CIA World Factbook 2009. (2009). New York. 801 pp. Retrieved on 12. 04. 2010 from the website: https://www.cia.gov/library/publications/the-world-factbook

Tajnikar, M. (2009). Gospodarska kriza kot čas za korenite spremembe v slovenskem zdravstvu. V Zdravstvo v času gospodarske krize – smo pripravljeni na spremembe. Ljubljana: Društvo ekonomistov v zdravstvu. Retrieved on 02. 09. 2009 from the website:

http://www.devz.si/wp-content/uploads/2009/05/12 srecanje ekonomistov pomlad 09 web.pdf

Toth, M. (2003). Zdravje, zdravstveno varstvo, zdravstveno zavarovanje. Ljubljana: Zavod za zdravstveno zavarovanje Slovenije.

Vertot, N. (2007). Facts About Men and Women in Slovenia. Collection Brochures. Ljubljana, SORS. 52 pp.

Vertot, N. (2007). Disabled Persons, The Elderly and Other Persons with Special Needs in Slovenia. *Collection Brochures*. Ljubljana, SORS. 52 pp.

Vertot, N. (2009). Young People in Slovenia. Collection Brochures. Ljubljana, SORS. 127 pp.

Vertot, N., ... et al. (2001). Censuses in Slovenia 1948-1991 and Census 2002. Ljubljana, SORS. 69 pp.

Vertot, N. (2009). Slovenia's Population Today and Tomorrow, 2008-2060. EUROPOP2008 Population Projections for Slovenia. *Collection Brochures*. Ljubljana, SORS. 119 pp.