

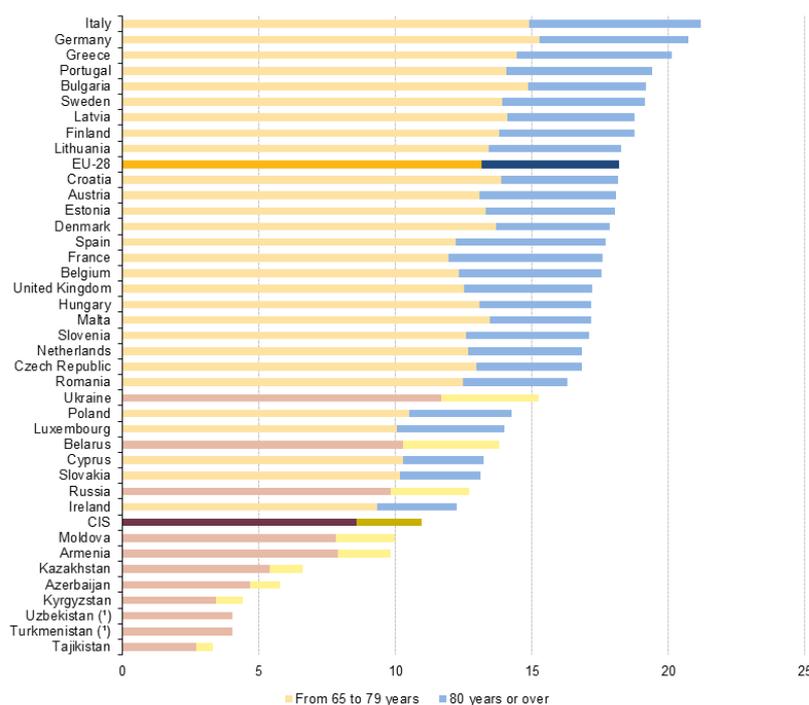
EU-Commonwealth of Independent States (CIS) - statistics on active ageing

Statistics Explained

Data extracted in August 2014. Most recent data: Further Eurostat information, Main tables and Database . No planned update.

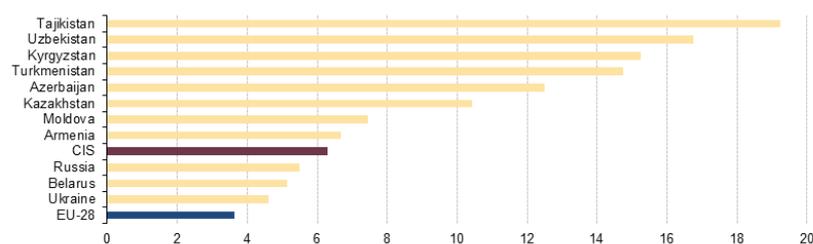
This article is part of an online publication [EU-Commonwealth of Independent States \(CIS\) - statistical overview](#) and focuses on the conditions that support the active participation of older people in everyday life and allow them to continue to contribute to society in general as healthy and autonomous individuals in both the countries of the [Commonwealth of Independent States \(CIS\)](#) and the [EU-28 Member States](#).

Older people are defined here as either people who are at least 65 years old or have retired from the labour market, depending on the context. In order to analyse active ageing several indicators are taken into account: the share of older people in the total population, their educational attainment and participation in the labour market after the age of 65 or retirement age, health services and infrastructure available and public expenditure on health, the retirement age and the purchasing power of an old-age pension.



(*) 65 years or over.

Figure 1: Share of population (65 and over) in total population, by country, 2013(%) Source: Eurostat (demopjangu), World Bank and CIS-STAT



(*) Persons aged 15 to 64 years per person aged 65 years or more.

Figure 2: Old-age dependency ratio, by country, 2012 (1)(%) Source: Eurostat (demopjangroup) and CIS-STAT

Main statistical findings

Share of older people in the total population

The share of people aged over 65 is lower in the CIS than in the EU-28

The share of older people in the total population has an impact on the level of support required by the older population and received from the younger population, as well as on the roles of government (both national and regional) and private institutions in facilitating the active participation of older people and their welfare in all aspects of everyday life.

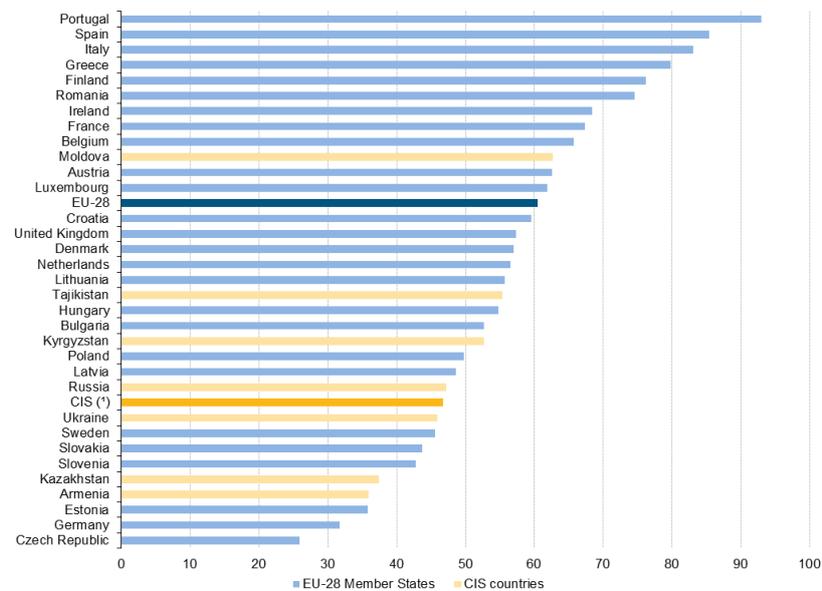
The share of the older population in CIS countries is considerably smaller (10.9 % on average) than in the EU-28 Member States (18.2 % on average). In Tajikistan, Uzbekistan, Turkmenistan and Kyrgyzstan the share of people aged 65 and over is less than 5 % (Figure 1).

The [old-age dependency ratio](#) is used to evaluate the potential support the younger population can provide to the older population through their labour and is calculated as the ratio between the population of working age (aged 15–64) and the older population (aged over 65). The old-age dependency ratio for all CIS countries (6.3 on average but even higher if Russia, Belarus and Ukraine are excluded, see Figure 2) is higher than for the EU-28 (3.6). Tajikistan, Uzbekistan, Turkmenistan, Kyrgyzstan and Azerbaijan stand out, with old-age dependency ratios of over 12 people of working age per 1 older individual (Figure 2).

Educational level of the elderly

Educational attainment of older people in the CIS is higher than in the EU-28

Figure 3 shows that over 50 % of the older population in most EU-28 Member States have not completed secondary education (EU-28 average: 60.5 %). The shares for Portugal (93.0 %), Spain (85.4 %), Italy (83.1 %) and Greece (79.9 %) are significantly higher. Russia (47.3 %) and Ukraine (45.9 %) on the other hand have a significantly lower share, while Moldova is the only CIS country with a share higher than the EU-28 average.



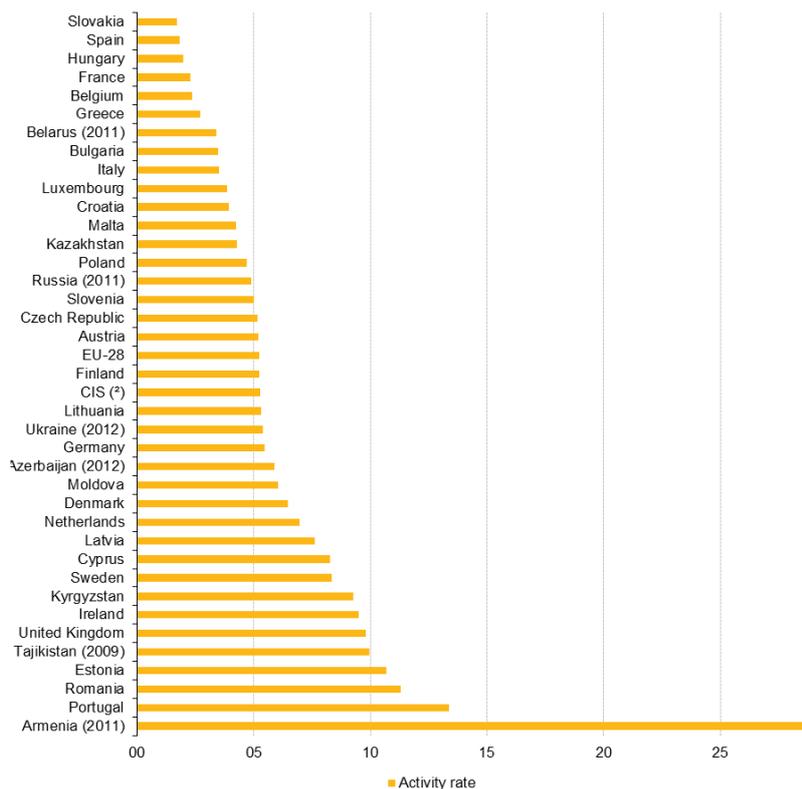
(*) Does not include Azerbaijan, Belarus, Turkmenistan or Uzbekistan.
Source: Barro-Lee educational attainment dataset, 2010

Figure 3: Share of the population (65 and over) with incomplete secondary education or lower education level, by country, 2010(% within the total population aged 65 or over)Source: Barro-Lee educational attainment dataset, 2010

Participation of older people in the labour market

Significant variations at country level but similar level of economic activity on average at CIS and EU-28 level

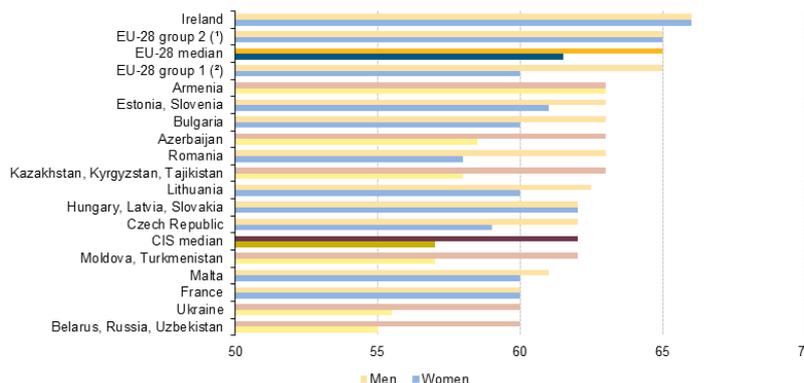
The activity rate of the older population is a key evaluation indicator of active ageing. Figure 4 shows that the average activity rate in the CIS countries (5.3 % on average) and the EU-28 (5.2 % on average) is almost the same. Armenia (29.0 % in 2011) has by far the highest activity rate, and Portugal (13.4 %), Romania (11.3 %) and Estonia (10.7 %) have the highest activity rates among the EU-28 Member States.



(*) Older data for some CIS countries (in parenthesis); no data available for Turkmenistan and Uzbekistan.
 (†) Weighted average of the 9 CIS countries.
 Source: Eurostat (online data code: lfsa_pganws), World Bank, CIS-STAT and ILO

Figure 4: Activity rate of people aged 65 or older, by country, 2013 (1)(%)Source: Eurostat (lfsapganws), World Bank, CIS-STAT and ILO

The regular retirement age is another key indicator of participation of older people in the labour market. The [median](#) retirement age in EU-28 Member States is 65 years for men and 61.5 years for women, while in the CIS countries it is 62 years for men and 57 years for women (Figure 5). Like the activity rate, the retirement age also varies significantly across countries.



(*) Belgium, Cyprus, Denmark, Finland, Germany, Luxembourg, Netherlands, Portugal, Spain and Sweden.
 (†) Austria, Croatia, Greece, Italy, Poland and United Kingdom.

Figure 5: Regular retirement age, by sex, by country, 2012Source: Eurostat CIS-STAT and UN DESA — Population Division (for Bulgaria, Croatia, Cyprus, Latvia, Lithuania, Malta and Romania)

Public expenditure on health, medical doctors and hospital beds

Higher public expenditure on health in the EU-28, more medical doctors and hospital beds in the CIS

Public expenditure on health and the number of doctors and hospital beds available to the population are indicators that convey the accessibility of health services provided by the government and institutions. These services are particularly vital to the older population, who face additional health related challenges at this stage in their lives.

Figure 6 shows that general government expenditure on health *per capita* in the CIS countries (EUR 238 on average) is significantly lower than both the World average (EUR 489) and the EU-28 average (EUR 1 905). In fact, with the exception of Bulgaria and Romania, all EU-28 Member States had higher expenditure than Russia (EUR 363), the CIS country with the highest general government expenditure per capita.

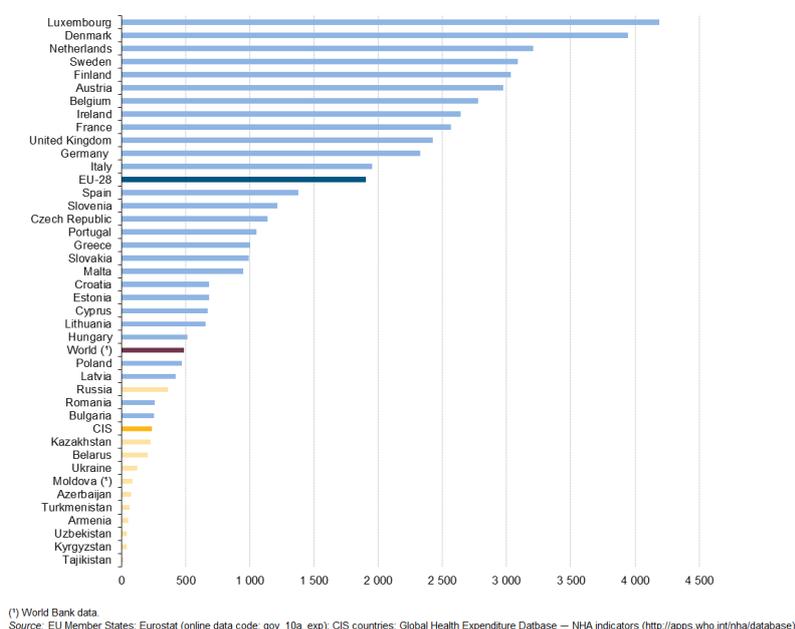


Figure 6: Annual general government health expenditure, by country, 2012 (EUR per capita) Source: EU Member States: Eurostat (gov10aexp); CIS countries: Global Health Expenditure Database — NHA indicators (<http://apps.who.int/nha/database>)

The fact that public expenditure on health is considerably higher in the EU-28 Member States than in the CIS countries is related to the fact that the EU has a greater share of the population aged 65 years or over. However, Belarus, Russia and Ukraine provide more than double the amount of medical doctors than the EU-28 average (22 per 100 000 population) and at least 70 % more available hospital beds (the EU-28 average is 54 per 100 000 population) (Figure 7).

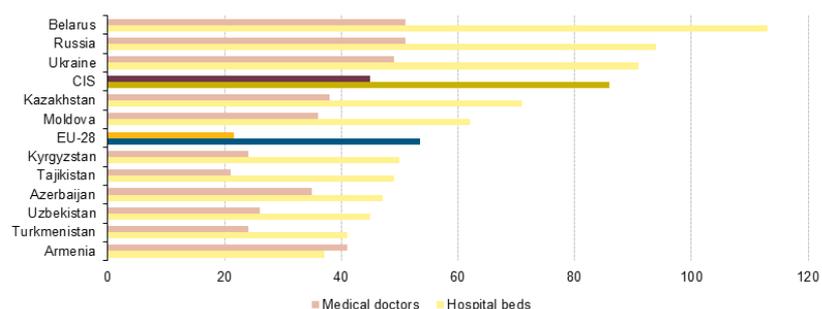


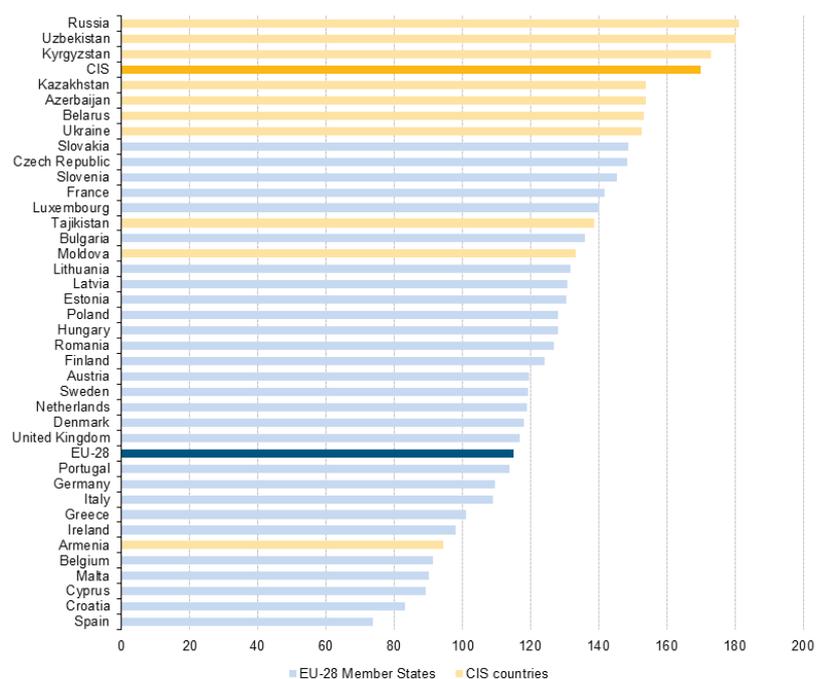
Figure 7: Medical doctors and hospitable beds available, by country, 2011(per 100 000 population)Source: Eurostat (hlthrsprshp1) and (hlthrsbds) and CIS-STAT

Old-age pension beneficiaries and average old-age pension

More beneficiaries, lower amounts for the CIS countries

An old-age pension is the most common source of income for the population over 65 years of age. Since the retirement age can be lower than 65 (Figure 5), the number of old-age pension beneficiaries is higher than the total population of people aged 65 or more. Figure 8 shows that in the CIS countries (except Armenia) and the EU-28 Member States (except Ireland, Belgium, Malta, Cyprus, Croatia and Spain) the rate exceeds 100 %. The ratio for Russia, Uzbekistan and Kyrgyzstan even exceeds 170 % (CIS average).

The usual criterion for the acquisition of old-age beneficiary status is reaching a certain age, even though the status can be obtained at a younger age if certain country-specific conditions are met. The number of beneficiaries is important for policy-making, and the average old-age pension is a measure of the purchasing power of this specific population and thus an important parameter of active ageing.



(*) Old-age pension beneficiaries per one person aged 65 or more (%).

Figure 8: Old-age pension beneficiaries' coverage, by country, 2011 (1)(%)Source: Eurostat (sprpnsben), CIS-STAT and World Bank

Table 1 shows that the average monthly pension in the EU-28 was EUR 976 in 2011, while in December of the

same year the average old-age pension for the CIS countries was EUR 169. The old-age pension in the CIS countries was significantly lower than in most of the EU-28 Member States. Bulgaria (EUR 116) and Romania (EUR 197) were the only EU-28 Member States with smaller monthly old-age pensions than some CIS countries. Inflation was also higher for the CIS countries (at 7.6 % it was lowest in Moldova among CIS countries, while the maximum among EU-28 Member States was 5.8 % in Romania), which indicates that the purchasing power of older people in the CIS countries was significantly smaller than in the EU-28 Member States.

	Pension expenditure per beneficiary (EUR/month)	Old-age pension beneficiaries (per 1 000 population)	Inflation (% annual change)
EU-28	976.3	192.2	3.3
Belgium	1 490.3	156.5	3.5
Bulgaria	116.0	231.6	4.2
Czech Republic	395.3	217.9	1.9
Denmark	1 978.2	177.8	2.8
Germany	1 025.7	213.2	2.1
Estonia	227.4	168.8	5.0
Ireland	1 445.2	110.0	2.6
Greece	688.3	180.1	3.3
Spain	1 027.6	116.8	3.2
France	1 304.1	244.1	2.1
Croatia	275.6	119.7	2.3
Italy	1 052.0	197.1	2.7
Cyprus	1 110.2	113.3	3.3
Latvia	250.1	235.7	4.4
Lithuania	214.0	229.3	4.1
Luxembourg	1 529.9	155.1	3.4
Hungary	278.9	188.5	4.0
Malta	676.0	141.3	2.7
Netherlands	1 517.8	181.1	2.3
Austria	1 465.1	196.5	3.3
Poland	330.9	149.7	4.3
Portugal	671.8	194.9	3.7
Romania	196.9	197.4	5.8
Slovenia	387.0	195.3	1.8
Slovakia	332.3	182.2	3.9
Finland	1 197.0	200.7	3.4
Sweden	1 371.9	199.9	3.0
United Kingdom	1 181.9	206.2	4.5
CIS (*)	168.7	190.2	-
Armenia	57.4	98.0	7.7
Azerbaijan	146.3	89.0	7.8
Belarus	83.8	211.0	53.2
Kazakhstan	166.5	101.0	8.3
Kyrgyzstan	64.0	74.0	16.5
Moldova	55.2	133.0	7.6
Russia	198.1	231.0	8.4
Tajikistan	21.4	45.0	12.4
Ukraine	112.6	233.0	8.0

(*) Weighted average of the 9 CIS countries (no data available for Turkmenistan and Uzbekistan).

Table 1: Pension expenditure per beneficiary, by country, 2011 Source: Eurostat (sprpnsben), (sprexpens) and (demopjangroup), CIS-STAT (pension data for CIS countries) and World Bank (inflation data for CIS and EU-28 Member States)

Data sources and availability

All data used in this publication are provided by [CIS-STAT](#) (latest annual data per indicator presented), except for the data mentioned below:

Population data for EU-28 Member States stem from [Eurostat](#). CIS-STAT and [World Bank](#) data were combined in order to produce comparable data for CIS countries.

All education attainment data used in this article stem from the latest version of the [Barro-Lee Educational Attainment Dataset](#). The dataset compiles information from UNESCO web database ([UIS.Stat](#)) and other national sources. No data are available for Belarus, Azerbaijan, Turkmenistan and Uzbekistan.

Employment data for the EU-28 stem from [Eurostat \(EU-LFS\)](#) . Comparable data were produced for the CIS countries by combining information from CIS-STAT, [ILO](#) and [World Bank](#) . No data are available for Turkmenistan and Uzbekistan. Retirement age data for Bulgaria, Croatia, Cyprus, Latvia, Lithuania, Malta and Romania stem from [United Nations](#) .

General government expenditure on health per capita for all CIS and EU-28 countries and aggregates was calculated by combining three different data sources: [World Bank](#) (for World total and Moldavia); Eurostat data on [Government expenditure by function \(COFOG\)](#) in the case of the EU Member States and the [Global Health Expenditure Database](#) — NHA indicators from the World Health Organization. EU-28 data on the availability of medical doctors and hospital beds stem from Eurostat.

EU-28 data on the old-age pension beneficiaries stem from [Eurostat](#) . Missing data for CIS countries were filled in by [Social Protection and Labor/BeneficiariesCoverage3Q2014.xlsx](#) [World Bank](#) figures. Old-age pension beneficiaries' coverage was calculated by dividing by the population 65+ years old, as provided by the same data source per country. Monthly old-age pension data for EU-28 Member States was calculated from annual [Eurostat](#) data converted in monthly USD values per capita. Inflation data stem from [World Bank](#) . No data are available for Turkmenistan and Uzbekistan.

Data provided by different sources are comparable at indicator level. CIS and EU-28 averages and aggregates were calculated from national data when not available in other sources.

Old-age-dependency ratio is calculated as the number of people aged 15–64 per one older person aged 65 or older.

The share of the elderly population with incomplete secondary education or lower educational level is calculated as the share of people aged 65 or older with no schooling, complete or incomplete primary education or incomplete secondary education.

For the calculation of activity rates for the EU-28 Member States, EU-LFS data for the total population are used instead of population census data.

Public expenditure on health per capita is calculated by multiplying the public expenditure on health as a share of GDP and the GDP in USD and then dividing by the total population. All data used for the CIS countries stem from the World Bank.

Old-age pension beneficiaries' coverage is calculated as the ratio between the total old-age pension beneficiaries and the population aged 65 or older, expressed as a percentage.

Context

The characteristics of active ageing vary considerably between the CIS countries and the EU-28 Member States. The purchasing power of old-age pension and the public expenditure on health per capita are significantly higher in the EU-28 (EUR 976 per month and EUR 1 905 per year respectively), while in the CIS countries the older population has a better chance to participate actively in everyday life by retiring at a younger age, being better educated and making use of more health services due to the support received by the younger population.

See also

- [EU-Commonwealth of Independent States \(CIS\) - statistical overview](#) - online publication
- [European Neighbourhood Policy - East - population statistics](#)
- [Population structure and ageing](#)
- [The EU in the world - population](#)
- [The EU in the world - health](#)

Further Eurostat information

Publications

- Active ageing and solidarity between generations — A statistical portrait of the European Union 2012

Source data for tables and figures (MS Excel)

- CIS-EU — statistics on active ageing Excel file

External links

- Interstate Statistical Committee of the CIS
- World Bank
- ISCED-97 classification
- Barro-Lee Educational Attainment Dataset
- UNESCO web database (UIS.Stat)
- International Labour Organization (ILO)
- United Nations Department of Economic and Social Affairs — Population Division

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