

Chapter 1

Introduction: Older People under the Magnifying Glass

Kathrin Komp and Marja Aartsen

Europe is greying. In the beginning of the 21st century, Europe already was the oldest continent of the world, with every sixth European being 65 years or older. Researchers predict that older Europeans will become even more numerous in the future, with every fourth European being 65 years or older in 2050 (United Nations 2009). This development has far-reaching consequences for the citizens of Europe and for European societies. For example, when we sit in cafes, we will see older people at the tables next to us more often. Shop-keepers will include more products for seniors in their assortments, and public transportation will have to be even more accessible to handicapped individuals. Moreover, pension schemes and long-term care schemes might have to restructure their financial basis, considering that there will be an increasing number of individuals benefiting from these schemes. Those few examples already show that Europe's face is changing. This change raises a number of fundamental questions, such as: What will Europe look like in the future? Which European countries and which parts of society are most affected by population ageing? And how can we best react to the demographic change? The scientific discipline of gerontology provides answers to these questions.

1.1 What is Gerontology?

Gerontology is the study of human ageing, which draws from many scientific disciplines such as sociology, economy, biology, psychology, and epidemiology. The word 'gerontology' is derived from the Greek words 'geron', which means 'old man', and 'gerh', which means 'growing up, maturing, or aging' (Philippa et al. 2009). It, therefore, refers to the state of being old as well as the process of ageing. The term 'gerontology' itself was probably first used by Ilya Metchnikov, a Russian microbiologist who lived from 1845 until 1916. Despite the new terminology,

K. Komp (✉)
Department of Sociology, Umeå University, SE-901 87 Umeå, Sweden
e-mail: kathrin.komp@soc.umu.se

M. Aartsen
Social Sciences, VU University Amsterdam, Amsterdam, The Netherlands

the interest in gerontology persisted throughout history. For example, Marcus Tullius Cicero, a Roman philosopher, already wrote about ageing in the first century BC. In 'De Senectute', he held an impassioned plea against the established ideas of his time that age is nothing more than a withdrawal from work, a reduction of physical strength, lack of sensual pleasure and the approach of death.

1.2 What is Old Age?

When you ask around what it means to be old, you will often hear descriptions of physical change, such as greying hair, wrinkles, hearing problems, walking difficulties, and memory loss. Yet, old age is more than a mere biological phenomenon—it also is a social one. Society influences how we see ourselves, what opportunities we have, and how our lives are structured. For example, mandatory retirement laws lead people to withdraw from paid work at a certain age, which usually lies around 65 years in Europe. From this age on, people were often considered 'old'.

For a long time, the social and the biological understanding of old age went hand in hand. People often experienced health problems from around their retirement age on, which made the age of 65 a marker for both, health problems and retirement. However, during the last decades this situation changed. People started to retire earlier, while they also remained healthy until an increasingly old age. Consequently, age 65 nowadays is a poor marker for both, health problems and retirement. This raises the questions when old age starts and what exactly it is.

Current gerontological discussions stress the diversity of the ageing experience. These discussions work with different understandings of old age side by side: some state that people become old as early as 50, while others state that people only become old once they reach 75 years. A common solution for handling the diversity of old age is as a sequence of two separate and distinct periods of life. These periods are called the third and the fourth age, respectively the young-old and the old-old (Baltes and Smith 2003). The third age is characterized by a period of relative freedom and good health. People no longer have the responsibility for the upbringing of their children, nor are they obliged to participate in the labour force. The fourth age is characterized by accelerated decline of physical and mental health, and the number of losses in physical health and social relationships exceed the number of gains. All the different understandings of old age have their advantages and disadvantages, and their usefulness depends on the context. In this book, you will therefore also see different understandings of old age, depending on which topic is discussed.

1.3 How Grey is Europe?

Europe is a study object par excellence for anybody interested in old age. Europe is the oldest continent in the world, which means that there we encounter many older people and we can easily observe how societies change when

populations age. Moreover, Europe is heterogeneous in many respects. There are clearly visible differences within Europe in how old people are and in how individuals deal with old age. Remarkable, these differences do not only exist between countries, but also within countries (Walker and Maltby 1997). Consequently, we need to look into within- and between-country differences to understand how population ageing transforms Europe. To be able to adopt such a perspective, we first need to understand what dimensions population ageing has reached. We will therefore continue with a description of Europe's age-profile—stressing the uniqueness of Europe as well as differences within it.

In a global comparison, Europe shows a distinct age-profile. Table 1.1 reveals that Europe is older than any other region of the world. It is closely followed by Northern America, which is only slightly younger than Europe. The age-wise counterpart of Europe is Africa, which is the youngest continent of the world. Table 1.1 shows that the median age in Europe in 2009 was 40 years, which is 12 years more than the median age in the world and 21 years more than the median age in Africa. In 2009, 16 % of the European population were aged 65 years or older, which means that about every sixth European was in that age group. For comparison, only every 33th African was in the same age group in that year. The share of Europeans aged 80 years and older seems still low (4 %) in 2009, but we can expect to see this share increase over the next decades (Christensen et al. 2009).

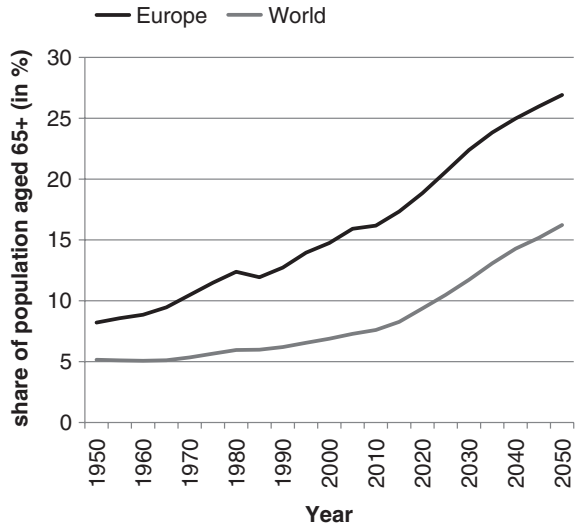
Even though Europe's population already is comparatively old, it will probably continue to age in the near future. Figure 1.1 shows us the progression of population ageing in Europe. It shows us how many Europeans were aged 65 years and older between 1950 and 2010. It moreover shows us a forecast for how the share of Europeans in that age group will develop until 2050. Finally, it also gives us the respective information for the entire world population, as a point of reference. Figure 1.1 shows that less than 10 % of Europeans were aged 65 years or older in 1950. Until 2010, this share increased to 16 %. The projection shows that this share might continue to increase to 27 % until 2050. This means that by 2050, every fourth European would be aged 65 years or older. If this projection is

Table 1.1 The age-profile of world regions, 2009

	Median age	Percentage of population aged ...	
		65 years and older	80 years and older
Europe	40	16	4
Northern America	37	13	4
Oceania	32	11	3
Asia	28	7	1
Latin America and the Caribbean	27	7	2
Africa	19	3	0
World	28	8	2

United Nations (2009)

Fig. 1.1 Share of the population aged 65 years and older, 1950–2050 (based on United Nations 2011b)



correct, then the share of Europeans in that age group will have more than doubled within a century. For comparison, only 5 % of the world population was aged 65 years and older in 1950. This share increased to 8 % by 2010, and it is assumed to further increase to 16 % by 2050. This means that every sixth person living in this world would be at least 65 years old by then.

The information just presented show how population ageing progresses in Europe. Even though the numbers describe the European continent in its entirety, the basic information also holds true for the individual European regions and countries. All European regions and countries are ageing, and the number of older people in them will reach considerable proportions in all of them in the future. The speed at which populations age and the level of population ageing reached, however, differs across Europe. In the 1950s, Northern and Western Europe were the oldest regions in Europe, while Southern and Eastern Europe were the youngest ones. In Northern Europe, population ageing progressed comparatively slowly, while the Southern European population aged comparatively quickly. As a result, the age-gradient within Europe will have shifted by 2050. By then, the oldest populations in Europe will be in the West and the South of the continent, while the North and the East will hold the youngest populations (United Nations 2011a, b).

Today, the age-gradient within Europe is changing. We can no longer see the northwest to southeast gradient that prevailed in the middle of the 20th century. However, we also cannot yet see the southwest to northeast gradient that is predicted to emerge by the middle of the 21st century. The pattern we see today is less crisp, as Fig. 1.2 portrays. This figure shows the median age in the individual European countries in 2010. It shows whether this median age is low (35 years or below), intermediate (36–40 years), or high (41 years or above). Figure 1.2 reveals that there is a small and geographically dispersed group of countries with

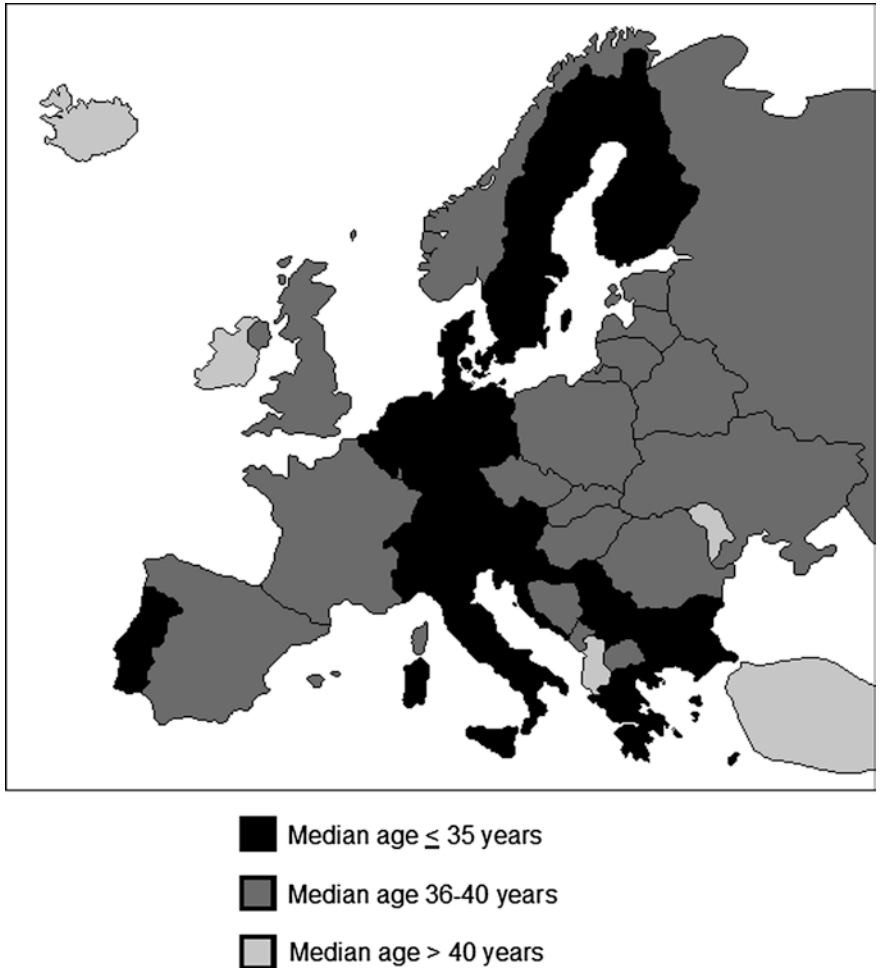


Fig. 1.2 The median age in European countries, 2010 (based on Eurostat 2012b; United Nations 2011a)

a comparatively low median age in Europe. This group of “young countries” consists of Iceland, Ireland, Albania, Moldova, and Turkey. The second group of countries, where the median age is on an intermediate level, shows a geographical pattern. This group of countries forms a belt running from the North to the South of Europe, thereby separating the West from the East. This belt starts with Sweden and Finland in the North, continues via e.g. Germany and the Czech Republic, and ends in the South with Italy and Greece. Portugal, which is situated in the southwest of Europe, is a geographical outlier in this group. The third group of countries, which has the highest median age in Europe, finally, is dispersed over the entire continent. Many of these “old countries” are in Eastern Europe,

others are in the North, South, or West of the continent. Examples for such countries are Estonia, Spain, Norway and France.

The portrayal of demographic differences within Europe shows that Europe is indeed greying—but instead of simply becoming grey, it is taking on different shades of grey. There are marked country-differences in how fast population ageing progresses and in how far it already progressed. This means that even though all European countries deal with the phenomenon of population ageing, this phenomenon has different levels of urgency and visibility for them. When we zoom in even further, then we discover that the shades of grey do not stop at the country level. Rather, they also co-exist within countries, because the populations within countries do not age homogeneously. There are marked differences between population groups when it comes to how fast population ageing progresses. For example, there are more women than men in the higher age groups (Stuart-Hamilton 2011), and the population in rural areas often ages faster than the population in cities (Destatis 2011; Walford and Kurek 2008). Moreover, factors such as migration patterns and local cultures can create within-country differences in how population ageing progresses.

Summing up, Europe is ageing and this process will continue for the decades to come. The ageing of the European population, however, does not progress evenly. There are marked differences between and within countries when it comes to the age-profile of Europe's population. We, therefore, need to have a closer look at the individual European countries and at the different population groups within them, if we want to better understand how Europe is ageing.

1.4 What Are Older Europeans Like?

The older European does not exist. Even though older Europeans resemble each other to some degree, there are also marked differences between them. On the one hand, this variation is caused by country-characteristics. Europe houses a range of political constellations, reaching from the (former) communistic East to the liberal-democratic West, and religious orientations, reaching from the mainly protestant North to the mainly catholic South. On the other hand, variation in Europe's older population is also due to differences between the individuals within a country. These individual differences align, for example, with gender, socioeconomic status, living arrangement, marital status, and religious affiliation. Taken together, older Europeans present themselves as a rather diverse and colorful group of people (Walker 2005).

One of the most obvious differences between older Europeans is their gender. While there are about as many men as women in Europe, this gender-ratio is slightly different in the older age groups. Among Europeans aged 65 years and older, we find slightly more women than men. The difference is marginal in countries such as Andorra, Iceland, and Macedonia. In Eastern European countries such as Latvia, Estonia, and the Ukraine, however, two out of three older people

are female (Eurostat 2012a). The gender-difference is the result of two factors. First, women live longer than men. As a result, women are over-represented in the older age-groups (World Health Organization 2012). Second, mostly men fight as soldiers in wars, which means that war-related deaths are particularly common among men. This fact further reduces the number of men in the generations that lived through World War II and similar conflicts (Destatis 2011).

Another important difference between older Europeans concerns their social networks, meaning their connections with friends and kin (Bourdieu 1986). Such connections are important for older people, because they enhance their well-being and health, and they are an important source of support in times of crisis (Berkman 1995; Cantor 1979). Although modernization processes led to a loosening of kinship ties during the last decades (Cantor 1979), those ties still persist to various extents throughout Europe. In the Nordic countries there is extended de-familialization, meaning that friends and associations become more important. Also, the highest levels of memberships of clubs and voluntary organizations are common in Scandinavian countries and The Netherlands. In the South and East of Europe, in contrast, family ties are still very important (Höllinger and Haller 1990; Pichler and Wallace 2007).

A third dividing line between older Europeans is their socio-economic status. A person's socio-economic status describes the position he or she has in society because of wealth, educational level, and occupational prestige (Shaw et al. 2007). The wealth of older Europeans is comparatively high in continental European countries such as Belgium, Switzerland, and France, and comparatively low in Eastern European countries such as the Czech Republic and Poland (Christelis et al. 2008). The educational level is higher in Continental and Northern Europe, e.g. in Denmark and Austria, than in Southern European, e.g. in Spain and Greece (Borsch-Supan and Mariuzzo 2005). Older people's occupational prestige, finally, is higher in Northern and Continental Europe than in Southern Europe (Komp et al. 2010).

A final important difference between older Europeans is their health status. The inhabitants of the Nordic countries (Sweden, Norway, Denmark, Finland) report to be in better health than the inhabitants of Southern (Portugal, Spain, Greece and Italy) and Eastern European countries (Czech Republic, Hungary, Poland and Slovenia). Moreover, men generally have higher levels of self-perceived health than women (Olson and Dahl 2007), whereas women have higher life expectancies (United Nations 2007). These health differences are partly due to life-style, partly to health care systems.

Generally speaking, in Eastern Europe the circumstances to age healthy and well are least favourable. Eastern Europeans have the highest prevalence of obesity and smoking and the lowest levels of economic resources for health care. Western and Northern Europe, in contrast, have the highest level of economic resources and the lowest level of risk factors for diseases. For example, the highest proportions of obese people exists in Eastern Europe (23 %), followed by Southern (22 %) and Northern Europe (21 %), with the lowest percentage existing in Western Europe (18 %). However, there is large variation

within these regions. The highest and lowest percentage of obese men can be found in Eastern Europe, with the Czech Republic having the highest (31 %) and Moldova the lowest percentage (10 %). The highest proportion of obese women can be found in the Russian Federation (30 %), and the lowest one in Switzerland (11 %) (World Health Organization 2011).

A more detailed insight into the situation of older Europeans can be gained when focussing on individual countries. In the following sections, we will therefore describe the situation in three European countries that differ dramatically when it comes to how far population ageing has progressed. First, we will describe Italy, which is one of the oldest countries in Europe. Then, we will look at Sweden, which has an average share of older people for European standards. Finally, we will look at Slovakia, which is one of the youngest countries in Europe.

1.4.1 Country-Profile: Old Age in Italy

If Europe is greying, then Italy represents a dark shade of grey. Italy currently is the second oldest country in Europe, after Germany, and the third oldest country in the world (United Nations 2009). Researchers and policy-makers, therefore, often look at Italy when they want to know how societies change when a population ages. In other words, studying today's Italy can help us understand what will happen in other European countries in the next decades.

In the beginning of the 21st century, 6 % of the Italian population were aged 80 years and over—which is a higher percentage than in any other European country. Correspondingly, seven of the ten European regions with the highest proportion of people aged 80 years and older living in them can also be found in Italy (Eurostat 2011a). This overrepresentation of the very old age groups is reflected in the ideas about old age that Italians hold. When they were asked when they thought old age started, Italians named an average age of 68 years. This is one of the highest ages named in Europe (European Commission 2012).

The activity pattern of older Italians is quite distinctive in that they have a comparatively low level of engagement in productive activities. For example, the employment rate of Italians aged 55–64 years was 37 % in 2009, which is one of the lowest percentages within Europe (Destatis 2011). Another example, older Italians are among the older Europeans least often participating in voluntary organizations, sports and social clubs, religious and political organizations (Sirven and Debrand 2008). The Italians themselves explain this comparatively low engagement level in community activities with older people's strong engagement within their families, where they e.g. help to hold those families together and often also look after their grandchildren. Therefore, they are not necessarily less engaged than other older Europeans, they might simply engage in a different context (Komp 2010).

One of the biggest challenges in ageing Italy is to organize care provision for frail older people. Public care services are comparatively scarce and their

availability differs widely across Italy, which leaves most of the care work to family members. Italians often support these family carers, which are mainly women, by hiring migrant care workers (“badanti”). The badanti usually live with the persons they provide care to and help them in their daily lives. Because of migration- and working-regulations, badanti alternate between working as a care-giver in Italy for several months and returning to their home countries for several months. While this model gives older Italians access to affordable care, it also raises questions about the working situation of the badanti (Bettio et al. 2006; Da Roit 2007).

1.4.2 Country-Profile: Old Age in Sweden

Within the European context, Sweden stands out for example because of the labour market situation of older people. In 2009, 70 % of the Swedes aged 55–64 worked for pay. That is the highest share within Europe, surpassing the European average by a whopping 24 % (Destatis 2011). Consequently, Sweden can be seen as a country where population ageing has comparatively little effect on the labour market and on pension schemes.

Sweden represents the European average when it comes to population ageing, although the meaning of old age in Sweden differs from the typical European one. In the early 21st century, the median age and the state of population ageing in Sweden were identical with the European average. However, Swedes live longer than the average European does and they stay healthy until a remarkably old age: once Swedes reach an age of 65 years, they can expect to still spend 14 more years in good health, and then 5 more years in poor health (Eurostat 2011b). Swedes also perceive old age to start comparatively late. When they were asked when they thought old age started, they named a value of 67 years, which is 3 years above the European average (European Commission 2012).

Their exceptionally good health status allows older Swedes to be active until a late age, and they do seize this opportunity. When we look at the Europeans aged 50 years and older, we see that Sweden has one of the highest shares of volunteers in this age group. Similarly, Swedes aged 50 years and older are also more likely to provide care and help than most other older Europeans. Some researchers therefore conclude that older Swedes are still productive to a comparatively high degree, engaging in various activities that benefit society, the community, and their families (Hank and Stuck 2008). In other activities, such as the participation in religious organizations, however, older Swedes are less active than most of their European counterparts (Sirven and Debrand 2008).

The Swedish government tries to enable its citizens to lead an active, independent live and be socially included as long as possible. For this purpose, it provides e.g. pension schemes, health and social services (Svensson and Iwarsson 2009). Interestingly, it also facilitated activities in old age by establishing the right to work until age 67, that is 2 years past the mandatory retirement age, if the older

individual wishes to do so (International Social Security Agency 2010). As a result of this right, the average Swedish man currently retires at an age of 66 years, which is one year after the mandatory retirement age (Organisation for Economic Co-operation and Development 2011).

1.4.3 Country-Profile: Old Age in Slovakia

Slovakia is one of the youngest countries in Europe. In 2010, the median age there was 37 years, which is 4 years lower than the European average (Eurostat 2011a). Slovakia is, therewith, a country that has the chance to learn from its older European neighbours and prepare for the aging of its population.

The relative youthfulness of Slovakia's population is visible in many ways. Slovaks aged 65 years, for example, could expect to live only three more years in good health and then 13 more years in poor health. This means that their further life-expectancy in good health is 5 years below the European average and even 11 years below the one in Sweden. Similarly, the total life-expectancy in Slovakia is 3 years below the European average. As a consequence, we see older individuals in Slovakia less often than in other European countries (Eurostat 2011b). The Slovaks themselves also have a more youthful understanding of old age than their European neighbours. When they were asked when they thought old age started, they named an age of 58 years. This age is the lowest one named in any European country, being 6 years below the European average (European Commission 2012).

The living situation of older Slovaks is quite distinct. In 2009, the average Slovakian retired at age 58. This is one of the lowest effective retirement ages in Europe, and it is even 4 years before the mandatory retirement age in Slovakia (Organisation for Economic Co-operation and Development 2011). Similarly, Slovakian pensioners are less likely to volunteer than other European pensioners. Only 14 % of them volunteered or did community work in 2008, which is 20 % less than the European average. These low levels of engagement in paid work and volunteering might be due to the early health deterioration in Slovakia. Fortunately, older Slovaks seem socially integrated despite the comparatively low engagement levels and the health decline. In a survey from 2007, the vast majority of older Slovaks stated that they felt integrated in society (Eurostat 2011a). Moreover, the at-risk-of-poverty rate of older people in Slovakia was among the lowest ones in Europe in 2008 (Destatis 2011).

The Slovakian government tackles the phenomenon of population ageing through various strategies. Two Slovakian ageing researchers identified health and social care as central issues in Slovakian old age policies. Those researchers stated that the Slovakian government has been regulating social and health care for older people throughout the last decades. However, they also criticized that such policies and regulations did not always put the emphasis on the situation of older Slovaks (Hegyí and Krajčík 2009). This emphasis might change as the Slovakian population continues to age.

1.5 This Book ...

The remainder of this book will describe the situation, causes and effects of population ageing across Europe. The following seven chapters will each adopt the perspective of one scientific discipline for these explanations, and the concluding chapter will then reflect on discussions in this book.

The first disciplinary chapter in this book discusses the question how ageing changes our bodies. To answer this question, Joel Ancri and Bernard Cassou use insight from bio- and health gerontology. They explain what health is, describe physical changes during the ageing process, and discuss how health care systems can help older Europeans.

The second disciplinary chapter then focusses on psychological development during the ageing process. In this chapter, Mike Martin, Nathan Theill, and Vera Schumacher discuss how mental functioning and perceptions change as people age. They, moreover, explain dementia, one of the most important mental health problems in old age.

The following chapter views older Europeans in their social context. Christina Victor draws from the social sciences, especially from sociology, when adopt this view. She explains older people's role in society as well as their activities and social networks.

The subsequent chapter turns to the discipline of political science. In this chapter, Kathrin Komp spells out why population ageing is relevant for states. She does this by discussing older people's voting behaviour and their role in welfare states. Moreover, she reflects on how policy-makers could help older people to remain active.

Then, a chapter is dedicated to the perspective of economics. Jolanta Perek-Bialas and Joop Schippers adopt this perspective to explore older people's roles as consumers and workers. Furthermore, they discuss how the current economic crisis might affect older Europeans.

The next chapter investigates how technology can help people as they age. Harald Künemund and Nele Tanschus describe such technologies and critically reflect on their potentials and drawbacks. They also discuss whether technologies can help to support caregivers in ageing populations.

The last disciplinary chapter reflects on old age from a cultural perspective. In this chapter, Ricca Edmondson explores how older people are perceived and valued in Europe. She, moreover, ponders whether older people can act as a source of inspiration nowadays.

References

- Baltes, P. B., & Smith, J. (2003). New frontiers in the future of aging: from successful aging of the young old to the dilemmas of the fourth age. *Gerontology*, 49(2), 123–135.
- Berkman, L. F. (1995). The role of social relations in health promotion. *Psychosomatic Medicine*, 57(3), 245–254.

- Bettio, F., Simonazzi, A., & Villa, P. (2006). Change in care regimes and female migration: the 'care drain' in the Mediterranean. *Journal of European Social Policy*, 16(3), 271–285.
- Borsch-Supan, A., & Mariuzzo, F. (2005). Our sample: 50+ in Europe. In A. Borsch-Supan, A. Brugiavini, H. Jurges, J. Mackenbach, J. Siegrist, & G. Weber (Eds.), *Health, ageing and retirement in Europe. First results from the survey of health, ageing and retirement in Europe* (pp. 30–34). Mannheim: Mannheim Research Institute for the Economics of Ageing.
- Bourdieu, P. (1986). The forms of capital. In J. C. Richardson (Ed.), *Handbook of theory and research for the sociology of education* (pp. 241–258). New York: Greenwood Press.
- Cantor, M. H. (1979). Neighbors and friends: an overlooked resource in the informal support system. *Research on Aging*, 1(4), 434–463.
- Christelis, D., Jappelli, T., & Padula, M. (2008). Real and financial assets in SHARE Wave 2. In A. Borsch-Supan, A. Brugiavini, H. Jurges, A. Kapteyn, J. Mackenbach, J. Siegrist, & G. Weber (Eds.), *First results from the survey of health, ageing and retirement in Europe (2004–2007). Starting the longitudinal dimension* (pp. 285–290). Mannheim: Mannheim Research Institute for the Economics of Ageing.
- Christensen, K., Doblhammer, G., Rau, R., & Vaupel, J. W. (2009). Ageing populations: the challenges ahead. *The Lancet*, 374, 1196–1208.
- Da Roit, B. (2007). Changing intergenerational solidarities within families in a Mediterranean welfare state: elderly care in Italy. *Current Sociology*, 55(2), 251–269.
- Destatis. (2011). *Older people in Germany and the EU*. Wiesbaden: Federal Statistical Office of Germany.
- European Commission (2012). *Active ageing. Report. Special eurobarometer 378*. http://ec.europa.eu/public_opinion/archives/ebs/ebs_378_en.pdf. Accessed February 01, 2012.
- Eurostat (2011a). *Active ageing and solidarity between generations. A statistical portrait of the European union 2012*. Luxembourg: Publications Office of the European Union.
- Eurostat (2011b). *Healthy life years and life expectancy at age 65, by gender. Excel-file*. <http://epp.eurostat.ec.europa.eu/tgm/download.do?tab=table&plugin=0&language=en&pcode=tsdph220>. Accessed February 01, 2012.
- Eurostat (2012a). *Population on 1 January by broad age group and sex. Excel-file*. <http://epp.eurostat.ec.europa.eu/portal/page/portal/population/data/database#>. Accessed June 13, 2012.
- Eurostat (2012b). *Population on 1 January: structure indicators. Excel-file*. http://appsso.eurostat.ec.europa.eu/nui/show.do?dataset=demo_pjanind&lang=en. Accessed January 29, 2012.
- Hank, K., & Stuck, S. (2008). Volunteer work, informal help, and care among the 50+ in Europe: further evidence for 'linked' productive activities at older ages. *Social Science Research*, 37(4), 1280–1291.
- Hegyí, L., & Krajčík, S. (2009). Slovakia. In E.B. Palmore, F. Whittington, & S. Kunkel (Eds.), *The international handbook on ageing. Current research and developments* (pp. 467–473). Santa Barbara: Praeger.
- Höllinger, F., & Haller, M. (1990). Kinship and social networks in modern societies: a cross-cultural comparison among seven nations. *European Sociological Review*, 6(2), 103–124.
- International Social Security Agency (2010). *Country profile: Sweden. Reforms*. <http://www.issa.int/Observatory/Country-Profiles/Regions/Europe/Sweden/Reforms2>. Accessed February 03, 2012.
- Komp, K. (2010). *The young old in Europe—burden on or resource to the welfare state?*. Amsterdam: Ipskamp.
- Komp, K., Van Tilburg, T., & Broese van Groenou, M. (2010). Paid work between age 60 and 70 years in Europe: a matter of socio-economic status? *International Journal of Ageing and Later Life*, 5(1), 45–75.
- Olsen, K. M., & Dahl, S.-A. (2007). Health differences between European countries. *Social Science and Medicine*, 64(8), 1665–1678.
- Organisation for Economic Co-operation and Development (2011). *Average effective age of retirement versus the official age, 2004–2009. Excel-file*. <http://www.oecd.org/dataoecd/3/2/39371902.xls>. Accessed February 01, 2012.

- Philippa, M., Debrabandere, F., Quak, A., Schoonheim, T., & Van der Sijs, N. (2009). *Etymologisch woordenboek van het Nederlands [Etymological Dutch dictionary]*. Amsterdam: Amsterdam University Press.
- Pichler, F., & Wallace, C. (2007). Patterns of formal and informal social capital in Europe. *European Sociological Review*, 23(4), 423–435.
- Shaw, M., Galobardes, B., Lawlor, D. A., Lynch, J., Wheeler, B., & Smith, G. D. (2007). *The handbook of inequality and socioeconomic position. Concepts and measures*. Bristol: Policy Press.
- Sirven, N., & Debrand, T. (2008). Social participation and healthy ageing: an international comparison using SHARE data. *Social Science and Medicine*, 67(12), 2017–2026.
- Stuart-Hamilton, I. (Ed.). (2011). *An introduction to gerontology*. Cambridge: Cambridge University Press.
- Svensson, T., & Iwarsson, S. (2009). Sweden. In E.B. Palmore, F. Whittington, & S. Kunkel (Eds.), *The international handbook on aging. Current research and developments* (pp. 521–537). Santa Barbara: Praeger.
- United Nations. (2007). *World population prospects. The 2006 revision*. New York: United Nations.
- United Nations. (2009). *World population ageing*. New York: United Nations.
- United Nations (2011a). *World population prospects, the 2010 revision: median age of population. Excel-file*. http://esa.un.org/unpd/wpp/Excel-Data/DB02_Stock_Indicators/WPP2010_DB2_F06_MEDIAN_AGE.XLS. Accessed January 29, 2012.
- United Nations (2011b). *World population prospects, the 2010 revision: population by age groups—both sexes. Excel-file*. http://esa.un.org/unpd/wpp/Excel-Data/DB03_Population_ByAgeSex_Quinquennial/WPP2010_DB3_F1_POPULATION_BY_AGE_BOTH_SEXES.XLS. Accessed January 27, 2012.
- Walford, N. S., & Kurek, S. (2008). A comparative analysis of population ageing in urban and rural areas of England and Wales, and Poland over the last three census intervals. *Population, Space and Place*, 14(5), 365–386.
- Walker, A. (Ed.). (2005). *Growing older in Europe*. Maidenhead: Open University Press/McGraw Hill.
- Walker, A., & Maltby, T. (1997). *Ageing Europe*. Buckingham: Open University Press.
- World Health Organization. (2011). *World health statistics 2011*. Geneva: World Health Organization.
- World Health Organization. (2012). *World health statistics 2012*. Geneva: World Health Organization.