



**Strategy and Planning Office**

## **REPORT OF PORTUGAL**

### **2nd CYCLE OF REVIEW AND APPRAISAL OF THE IMPLEMENTATION OF THE MADRID INTERNATIONAL PLAN OF ACTION ON AGEING (MIPAA)**



**Strategy and Planning Office**

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**TABLE OF CONTENTS**

<b>1. Executive Summary</b>	<b>3</b>
<b>2. General Information</b>	<b>4</b>
<b>2.1 Country name: Portugal</b>	<b>4</b>
<b>2.2 Name and information about the author(s) of the report</b>	<b>4</b>
<b>2.3 Name and contact details of the national focal point on ageing</b>	<b>4</b>
<b>3 Methodology</b>	<b>5</b>
<b>4 National Ageing Situation</b>	<b>6</b>
<b>5 Review and Appraisal of the National Actions to fulfil the Commitments of MIPAA/RIS</b>	<b>8</b>
<b>RIS Commitment 1: To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages</b>	<b>8</b>
<b>RIS Commitment 2: To ensure full integration and participation of older persons in society</b>	<b>9</b>
<b>RIS Commitment 3: To promote equitable and sustainable economic growth in response to population ageing</b>	<b>10</b>
<b>RIS Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences</b>	<b>12</b>
<b>RIS Commitment 5: To enable labour markets to respond to the economic and social consequences of population ageing</b>	<b>13</b>
<b>RIS Commitment 6: To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions</b>	<b>17</b>
<b>RIS Commitment 7: To strive to ensure quality of life at all ages and maintain independent living including health and well-being</b>	<b>18</b>
<b>RIS Commitment 8: To mainstream a gender approach in an ageing society</b>	<b>23</b>
<b>RIS Commitment 9: To support families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members</b>	<b>27</b>
<b>RIS Commitment 10: To promote the implementation and follow-up of the regional implementation strategy through regional cooperation</b>	<b>27</b>
<b>6 Conclusions and Priorities for the Future</b>	<b>29</b>



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### 1. Executive Summary

The present document constitutes the report of the 2nd cycle of review and appraisal of the implementation of the Madrid International Plan of Action on Ageing (MIPAA), with the aim of evaluating the fulfilment of the 10 MIPAA/RIS commitments, in the period from 2007 to May 2010.

This report was developed by the Ministry of Solidarity and Social Security (MSSS), through the direct participation of the Social Security Institute (ISS), the Directorate General of Social Security (DGSS), the Strategy and Planning Office (GEP), the Commission for Equality in Labour and Employment (CITE) and the Commission for Citizenship and Gender Equality (CIG).



## Strategy and Planning Office

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## Strategy and Planning Office

### 3 Methodology

The present report identifies and evaluates the programmes and initiatives developed in Portugal, aimed to the elderly population.

For the development of this report, a collection of assessment data was made on the results of different programmes and initiatives that are essentially from the responsibility of the Ministry of Solidarity and Social Security.

Considering the methodological choices presented in the 'guidelines' document, we focused on the analysis and processing of qualitative information from recently conducted surveys, with the participation of beneficiaries from the National Network of Integrated Continued Care (RNCCI) and with the involvement of older persons. In this particular initiative, presented in the RIS commitment 7, there has been a concern in developing satisfaction studies with professionals from the inpatient units, local coordinating teams and users of the RNCCI, as well as to Integrated Continued Care Teams (ECCI) and their users.



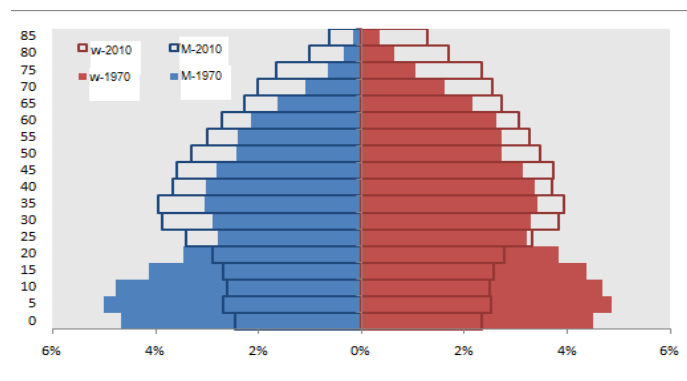
#### 4 National Ageing Situation

Portugal has been approaching an increasing pattern of modernization evidenced by the downward trend of birth rates and by the population ageing, due to increased life expectancy and putting the country on the same line of demographic patterns that characterize the more developed countries. The resident population has been increasing since 1970, but in the last two years this trend was not observed and there was even a decrease in 2010.

In the age pyramids, the ageing of the Portuguese population is clearly visible, or more specifically, the double ageing, with top enlargement and base narrowing of the pyramid.

The growing number of older persons requires additional effort from the working population, which is a key asset for the maintenance of a welfare system that guarantees a wide range of support for the elderly. On the other hand, the society has to face new challenges with new emerging issues related to full social integration of older people as well as the inclusion of the ageing 'issue' in all social, political, and economic spheres.

**Chart 1**  
**Age pyramid (1970 and 2010)**



Source: Annual Estimates of Resident Population, Live births and Deaths, from the National Statistical Institute (INE, IP)

Along with what was said earlier, the average number of live births per woman of childbearing age is decreasing (in 1970 there were three children per woman of childbearing age, on average, and in 2009 the value did not exceed 1,3). The ageing index has persistently increased (in 1970, there were 34 elderly per 100 young people resident in the country and in 2010 this number reached 121,1). And like the latter, the longevity index also recorded an increase over the past decades. Thus, in 1971 the percentage of individuals aged 75 or more in the total number of individuals aged 65 was of 32,5% and in 2010 it increased to 47,1%.

In fact, the total dependency rate has declined over the recent decades. In 1970 there were 61,7 dependents per 100 working age people, and in 2010 there were already 49,9 dependents per 100 working age people, but this decrease is due to the reduction of the younger generations percentage (in 1970 for each 5 working age adults there were 2,3 children and 0,8 elderly; in 2010 the number of dependent children has decreased to 1,1 while the number of elderly rose to 1,4).

The demographic contribution of migration has been important in terms of workforce renewal, by compensating, even partially, the deficit of births and, consequently, increasing the satisfaction of the labour market needs, and also in terms of the reinforcement that younger ages represent in society, especially at the fertile age level. However, since 2002 there was a very significant drop in immigration.

The activity rate in Portugal was 52,5% in 2010 and since 1998 has had a positive trend. The active population is also ageing, namely the employed population. In Portugal, the activity and employment rates from people aged 55 to 64 reach relatively high values when compared with the European context, 54% and 49,2 % respectively.



## Strategy and Planning Office

If we look at Chart 9 in the Annex, especially where the evolution of the number of inactive people per 100 of employees is represented<sup>1</sup>, we note that in 2010 there were 102 inactive people per every 100 employees, and this result derives from the reduction of employees and the increase of inactive people. This behaviour occurs after a period in which this indicator was declining due to the increase of the employed population.

In Portugal the elderly population is one of the groups most vulnerable to poverty, being 20,1% in 2009, hence above the national average. In fact, according to the results of the survey on income and living conditions (EU-SILC) held in 2009 and based on the 2008 income, about 17,9% of the resident population was at risk of poverty.

Although the elderly are one of the groups with the highest at-risk-of-poverty rate, over the period under review, this segment of the population has converged over the time, into the total value of poverty risk (see chart 10).

Considering only labour and capital income and private transfers, 85% of the elderly population in 2009 is at-risk-of-poverty. When including income from pensions, this group gets a reduction of 62 percentage points in the proportion of individuals at risk of poverty, with an at-risk-of-poverty rate of 23% after pensions and before social transfers. The contribution of social transfers related to disease and disability, family, unemployment and social integration was of 3 percentage points.

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<sup>1</sup> This indicator is used to measure the dependency degree of the inactive people on the employees' contributions.





## 5 Review and Appraisal of National Actions to fulfil the Commitments of MIPAA/RIS

### **RIS Commitment 1: To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages**

Ageing is being assumed as a challenge that arises in different areas of policy action. The measures mentioned in the previous report and the ones that are currently in force, are part of a framework for the mainstreaming of policies related to ageing, where the priorities continue to be the following: i) access of older people to the labour market; ii) creation of a system of lifelong learning and promotion of active ageing; iii) adjustment of solutions and social protection schemes to demographic and social changes iv) promotion of solidarity between generations v) promotion of independent living with higher quality vi) active participation of older people in society; vii) expansion of the social services and facilities network, promoting greater integration into communities; viii) promotion of social volunteering ix) adequacy of health care services specific for older people; xx) expansion of the national long-term care network.

In Portugal, the issues of ageing are transversal to the intervention areas of the various Ministries and are included in the various action programmes and measures in a coordinated manner.

The policies aimed to the older people, in force since 2007, are mostly a part of the Strategy for Social Protection and Social Inclusion 2008-2010<sup>2</sup>. In fact, the definition of national priorities for social protection and social inclusion for the period from 2008 to 2010 was based on two strategic intervention axes, namely: Axis 1 - 'Tackling the impact of demographic change' and Axis 2 - 'Promotion of social inclusion (reduction of inequalities)'. It should be noted that the first axis partly covers the challenges caused by ageing, since it gives priority to the promotion of quality active ageing and the prevention and support in situations of dependency.

It is important to mention also the National Reform Programme in the context of the European Strategy 2020 of the European Union and mainly the relative dimension of inclusive growth, in which are included the strategic lines of the Portuguese government commitment in the area of employment and combating poverty and social inequalities.

In addition, the Social Charter<sup>3</sup> (Charter of Social Services and Equipment), an initiative of the Strategy and Planning Office (GEP) is a guiding document concerning the investment in equipment and social services at the municipal level, which derives from a process of territorial, social and institutional diagnosis and the application of different methodologies of strategic planning and programming of equipment and social services. It also indicates the priority investment areas in order to guide the activities of cooperative and private actors. It contains an area of publications with studies about the Network<sup>4</sup> of Social Services and Equipment, an area of quantitative elements with the presentation of information disaggregated by district and/or Council and an area with current news on this subject. This result is part of an ongoing process of information dissemination to citizens about the social responses that are in place.

Within the scope of Health Services, we highlight the National Programme for the Health of the Elderly, approved in June 2004, that aims to contribute to the generalization and operationalization of the concept of older people active ageing, as recommended by the World Health Organization. This nationwide program is intended to be applied at regional and local levels by the health services that depend on the Regional Health Authorities.

In Portugal, the *Associação VIDA* (LIFE Association)<sup>5</sup> – Intergenerational Valorization and Active Development, founded in 2003 by professionals involved in Social Projects developed by the company Byweb since 1999 of which we highlight the following: the *Projecto TIO* (UNCLE Project) – *Terceira Idade Online* (Third Age Online)<sup>6</sup>, created in 1999 – it is a Portal dedicated to the elderly population in Portugal; The *Projecto Net@vó* (project Net

<sup>2</sup> [http://www.mtss.gov.pt/docs/ENPSIS2008\\_2010.pdf](http://www.mtss.gov.pt/docs/ENPSIS2008_2010.pdf)

<sup>3</sup> [www.gep.mtss.gov.pt](http://www.gep.mtss.gov.pt)

<sup>4</sup> Under the responsibility of the Ministry of Solidarity and Social Security.

<sup>5</sup> The mission of *Associação VIDA* is the development of Partnership Projects (at the National or European level) in areas of great social innovation, such as bringing the elderly closer to New Technologies (since 1999), the relationship between generations (since 2000), Senior Entrepreneurship (since 2007). In 2004 it became a member of the Board of Directors of the AGE - European Platform of Older People, recognized by the European Commission and accredited as lobby structure of the European Parliament.

<sup>6</sup> [www.projectotio.net](http://www.projectotio.net)



## Strategy and Planning Office

Grandparent) - distinguished by the Ministry of Education in 2000 - it is an interdisciplinary educational project, focusing on intergenerational learning, with use of audiovisual media and new technologies; and the *Projecto VIVER* (TO LIVE project)<sup>7</sup> – Developed at European level between 2001 and 2004, selected by experts from the European Commission as a "Good Practice" example and included in the New European Model of Equal Opportunities.

Currently, the *Associação VIDA* has in course the *Projecto CIDADES* (Cities Project) aimed to introduce the concept of "friendly city for the elderly" from the World Health Organization and to implement a checklist<sup>8</sup> in all Portuguese municipalities in order that every city may be an "elder-friendly city". In 2005 the World Health Organization launched the Guide "Global age-friendly Cities", later translated into Portuguese by the Calouste Gulbenkian Foundation. In practical terms, a friendly city for the elderly adapts its structures and services so that they include different needs and abilities and are accessible to older people.

This project is co-financed by the Directorate General of Health Services and by the Calouste Gulbenkian Foundation. It is open to all municipalities, associations with interest in the elderly population, academic institutions and people interested in making their cities more elderly-friendly. So far, 78 cities<sup>9</sup> have joined this initiative, as well as eleven institutions of higher education and tens of other organizations that work directly with the elderly population.

Within the scope of the *Projecto CIDADES* results – Non-slip sidewalks, good home support services, buildings clearly identified, an efficient public transport network, inclusion of the elderly in community activities or senior training, are some examples of the commitments that Portuguese cities like Lisbon, Aveiro and Oporto have made when joining the project and assuming the responsibility of ensuring the welfare of their elderly population.

Among the civil society initiatives, together with local actors, we highlight the project of "Senior Universities" addressed to students aged 50 or over, where activities that promote learning related to issues of culture, leisure and solidarity are developed. As an example of good practice, we present the USC<sup>10</sup> – Contemporary Senior University and the Universities of the Third Age Network Association - RUTIS<sup>11</sup>.

### **RIS Commitment 2: To ensure full integration and participation of older persons in society**

In Portugal, a set of initiatives and projects has been developed in order to promote greater participation and integration of the elderly in society. To this end, the projects presented illustrate what has been done at the level of older peoples' rights and the promotion of active citizenship, the equipment and services provided, as well as greater inclusion of underprivileged groups.

#### **- Information product "Rights of the Elderly" since 2011**

The Social Security Institute, PI has been promoting awareness raising activities targeted at older people, informing them about their rights, about social responses in terms of equipment and existing services and about what they should keep in mind when choosing and selecting one of these responses or services. To this end, the Social Security Institute developed an information product with simplified language aimed to contribute for the exercise of active citizenship and to promote autonomy and participation of older people in the management of their lives.

<sup>7</sup> [www.viver.org](http://www.viver.org)

<sup>8</sup> Public buildings and open spaces, Transportation, Housing, Social Participation, Respect and social inclusion, civic and employment Participation, Communication and information, and Community support and health services.

<sup>9</sup> Águeda, Arouca, Castelo De Paiva, Espinho, São João Da Madeira, Sever Do Vouga, Almodôvar, Mértola, Barcelos, Braga, Celorico de Basto, Esposende, Guimarães, Alfândega da Fé, Fundão, Sertã, Vila De Rei, Góis, Miranda do Corvo, Vila Nova de Poiares, Évora, Aljezur, Castro Marim, Monchique, Portimão, Silves, Tavira, Vila do Bispo, Lagoa, Celorico Da Beira, Guarda, Alcobaça, Leiria, Peniche, Loures, Oeiras, Alenquer, Alter do Chão, Campo Maior, Elvas, Ponte de Sôr, Portalegre, Felgueiras, Gondomar, Lousada, Marco De Canaveses, Paços De Ferreira, Paredes, Trofa, Valongo, Grândola, Palmela, Alcanena, Alpiarça, Rio Maior, Santarém, Sardoal, Ponte da Barca, Valença, Lamego, Nelas, Sátão, Vouzela, Alijó, Boticas, Mesão Frio, Santa Marta de Penaguião, Angra do Heroísmo, Lajes do Pico, Povoação, São Roque do Pico, Câmara De Lobos, Funchal, Porto Santo, Ribeira Brava, Santa Cruz, Santana.

<sup>10</sup> <http://usc.no.sapo.pt/saudacao.html>

<sup>11</sup> <http://www.rutis.pt/cgi-bin/reservado/scripts/command.cgi/?naction=4&mn=EkpFuVZZkAZZERXrPg>.



## Strategy and Planning Office

### - **Integrated Support Programme for the Elderly (PAII), 2006-2011**

The PAII<sup>12</sup> aims to promote the autonomy of older people and/or dependent people, primarily in their usual environments. It is addressed to people aged 65 or more, families, neighbours, volunteers, professionals and the general community. Under this programme, were created Local Projects like SAD (Home Support Service), *Forhum* (Human Resources Training), and Central Projects like - Passes "Terceira Idade"(Third Age season-tickets), Thermal Treatment for the Elderly and Promotion of Human Resources Training.

Between 2007 and 2011, the Local Projects covered 4567 beneficiaries, in a total of 114 projects (see Table 9, annexed to this report). In the case of Central Projects, between 2006 and 2010, they covered about 23 023 beneficiaries under the celebrated protocols (see Table 10, annexed to this report).

### - **Programme "Always on Vacation," from 2011**

In cooperation with the INATEL Foundation (National Institute for Workers' Leisure Time Promotion), since 2011, ISS, IP, in a logic of responses diversification, makes possible the participation of 20 people aged 60 and over who are autonomous and with low economic resources in Vacation Programmes, in hotels of the mentioned Foundation.

### - **Inclusion and Development programme (PROGRIDE), between 2005 and 2010**

The PROGRIDE programme was created in 2004 through the Administrative Rule no. 730/2004 of 24 June and regulated by Order no. 25/2005 of 3 January, following the Programme of Combating Poverty and covering the Portuguese Territory. The primary aim of PROGRIDE is, on the one hand, to promote social inclusion in marginalized and degraded areas and to combat isolation, desertification and exclusion in depressed areas and, on the other hand, to intervene with groups facing persistent exclusion, marginalization and poverty situations.

Under the actions taken by the PROGRIDE projects, the number of elderly people covered by the programme, for each one of the measures, was of 20 366 people in 2007, 24,971 in 2008 and 17 027 in 2009.

### - **"Social Development Local Contracts" Programme (CLDS), since April 2007**

The CLDS programme aims to enhance the social inclusion of citizens in a multi-sectorial and integrated way, through actions developed in partnership to combat persistent poverty and social exclusion in depressed territories.

From 2007 until the end of 2010, 77 social projects were functioning, 33 of which were operating in aged territories. This factor explains the significant weight of older people in the structure of the direct beneficiaries from these actions.

The considerable increased number of elderly beneficiaries from the social actions between 2008 and 2010 was due to the fact that, in 2008, only 19 CLDS (pilot phase) were operating. This number has grown exponentially in 2009 and ended with a total of 60 CLDS. In 2010 there were already 77 CLDS in full operation.

**Table 1 - Total Number of Elderly covered by year**

Year 2008	Year 2009	Year 2010
749	5514	22723

Source: ISS, I.P.

## **RIS Commitment 3: To promote equitable and sustainable economic growth in response to population ageing**

The impact of the demographic challenges exacerbated by the crisis has led to a reduction of economic growth and has placed public finances under pressure. The deep changes we have seen in the family structures reflect new social demands which imply, not only the need to adequate the guaranteed protection for the elderly, but also to ensure the social protection, necessary at every stage of life.

<sup>12</sup> Created by Joint Order of 1 July 1994, of the Ministry of Health and the Ministry of Employment and Social Security.



## Strategy and Planning Office

Furthermore, the process of double ageing that occurred in the Portuguese population and mentioned in Section 4 of this report, which, within the scope of social protection, resulted in the progressive increase of the total amount of pensioner population, particularly in what concerns the coverage of the contingencies of old age and survivors on the grounds of widowhood.

In fact, the welfare state in Portugal currently faces one of the major challenges that requires balance between social protection adequacy and sustainability. Looking for fairness in the citizens' social protection, more comprehensive strategies are being developed in terms of social protection or, in some cases, more focused in order to prevent or protect poverty situations.

Firstly, it is important to mention the National Strategy for Social Protection and Social Inclusion 2008/2010 and the National Action Plan for Inclusion, based on a multidimensional intervention logic that brings together a set of measures to promote social inclusion and to prevent situations of social poverty, through three priority policy objectives: 1) to combat poverty among children and the elderly, through measures that ensure their basic citizenship rights, 2) to correct disadvantages in education and training/qualification; 3) to overcome discrimination, reinforcing the integration of specific groups, namely: people with handicaps and disabilities, immigrants and ethnic minorities.

Under the social security reform of 2007<sup>13</sup> began the process of creating the Social Support Index (IAS), that has become the reference element for the calculation and updating of all social benefits, by replacing the National Minimum Wage (SMN). Since then, specific rules determined by law regulate the updating of the IAS.

This way, the updating rules may be more or less favourable depending on economic growth, measured by the real variation of the Gross Domestic Product. On the other hand, the updating calculation is based on three update levels: up to one and a half times the value of the IAS; between one and a half and six times the IAS; and between six and twelve times the IAS. The pension amounts higher than twelve times the IAS are not updated. However, regardless of the level of economic growth, it is always guaranteed the purchasing power for pension amounts up to one and a half the value of the IAS.

In the last years, there was a paradigm shift in terms of supporting older people in greatest need, particularly in what concerns the Solidarity Supplement for the Elderly (CSI). Seeking to minimize the budgetary effort and starting from a sustainable basis to increase minimum pension amounts, it was possible to build from scratch a benefit specifically aimed to combat poverty of older people. This benefit seeks to ensure an additional income for all older people, enabling them to have an income at the level of the poverty threshold (67% of median income per equivalent adult). This measure was gradually implemented (for  $\geq 80$  years in 2006, for  $\geq 75$  years in 2007, for  $\geq 65$  years in 2008), which explains the evolution of the number of beneficiaries since 2006 (see Table 6, annexed to this report).

The results of case studies as well as the results of Eurostat (SILC) surveys, enable us to conclude that CSI<sup>14</sup> is nowadays a key tool to mitigate the deficit of older people inclusion.

Currently, and based on data from September 2010, approximately 236 beneficiaries receive this benefit with an average benefit amount of 90 Euros (monthly).

In what concerns combating inequality and income poverty, namely of the elderly and children, we try to ensure a set of basic citizenship rights through a policy founded on income redistribution, in addition to what was already mentioned regarding the elderly, as for example: i) changes in the social protection scheme in the events of maternity, paternity and adoption<sup>15</sup>, aimed to encourage births, gender equality (by strengthening the rights of fathers), the sharing of the maternity leave by both parents, the reconciliation between work and family life and improving the care of children in early childhood, ii) the social benefits of parenthood, since 2008 became the guarantee of social protection of maternity, paternity and support to people in a situation of socio-economic deprivation. These benefits were subject to subsequent adjustments. They were increased and subject to new means testing rules in 2010<sup>16</sup>.

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<sup>13</sup> See Commitment 4

<sup>14</sup> Decree-Law no. 232/2005, of 29 December

<sup>15</sup> Decree-Law no. 91/2009, of 9 April, which came into force in May

<sup>16</sup> Decree-Law no. 70/2010, of 16 June



## Strategy and Planning Office

Also in a logic of combating poverty, we point out, among others, the Social Network Programme, which in the end of 2010 covered all of the Portuguese Mainland, materializing itself in 278 municipal supporting structures (corresponding to all the municipalities of the Mainland), and also the CLDS<sup>17</sup> (commitment 2).

The safeguarding of social and intergenerational cohesion has also been marked by a substantial investment, particularly since 2006, in the expansion and qualification of the Social Services and Equipment Network, seeking to facilitate people's access to quality equipment and services, particularly to major disadvantaged social groups, such as the elderly, children and persons with handicaps.

### **RIS Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences**

The combination of structural factors such as the maturation of the Portuguese social security system and the demographic evolution, where a steady increase in life expectancy, with cyclical factors, including low levels of economic growth, anticipation of age access to old-age pension, among others, have contributed to a marked erosion of the financial balance of the social security system.

The socio-economic changes of the last decades, with particular emphasis on the challenge posed by the ageing population, together with the growing risk coverage by the system, due to its relative youth, made the social security system reform in Portugal essential.

In this sense, and in what concerns social protection, we highlight the Basic Law on Social Security<sup>18</sup>, published in January 2007, materializing the Agreement on Social Security Reform in October 2006, signed by the Portuguese Government and Social Partners with sit on the Economic and Social Committee. The social security reform, which is being implemented since 2007, seeks, on one hand, the structural strengthening of the system coherence and, on the other hand, the strengthening of the triple sustainability, of social, economic and financial dimensions. Thus, the structure of the Basic Law on Social Security reinforced the strategy of modernization of the social protection system, based on three levels:

- a) A first level concerning the protection of citizenship, which includes means tested supports to fight poverty, financed by the national solidarity system, through taxes.
- b) A second level based on the principles of intergenerational and professional solidarity, structured under a system of contributory nature based on contribution payments from employees and employers;
- c) a third level concerning additional savings from citizens, operated by an optional contributory base, aimed to improve protection in old age, through the public system.

The social security reform was designed to ensure a stronger and more coherent social protection system in order to meet the new social and economic risks.

This way, it is important to mention, among others, the process of pensions updating that led to the creation of the IAS, the abandonment of the National Minimum Wage (SMN) as an updating reference of the minimum pension amounts and also the definition of clear rules for the updating pensions process now linked to the economic growth. Also in the field of social protection, a new non-contributory social benefit subject to means testing was created, the CSI (commitment 3), which reinforced the social protection in situations of absolute invalidity. These, are considered important factors to the reinforcement of the system's social sustainability.

The current social security system seeks to offer solutions that ensure the sustainability of public and private social security schemes. In this sense, it promotes the extension of working life and active ageing; ensures a fair balance between contributions and benefits; promotes affordability, and ensures the security of capitalization and private insurance schemes.

Among other measures, the social security system has now a new pension calculation formula that takes into account the whole contributory career. Pension calculations have become progressively based on wages reported over the entire contributory career, discouraging contributory evasion and strengthening the lifelong

<sup>17</sup> Administrative Rule no. 396/2007, of 2 April. Changes made by the Administrative Rule no. 285/2008 of 10 April. Order of the MTSS, of 7 July 2008.

<sup>18</sup> Law no. 4/2007, of 16 January, published in January 2007



## Strategy and Planning Office

contribution payment by citizens. It was also introduced a sustainability factor that implies the introduction of the life expectancy evolution element at the retirement date in pension calculations of the contributory scheme.

With these new premises, we expect to improve the financial situation of social security in the long run. The expected outcomes of the social security reform in Portugal were recognized at the level of the Council of the European Union<sup>19</sup>, where it was considered that the reform measures introduced in the Portuguese pension system contribute significantly to restrain the increase of expenses related to ageing and, thereby, allow the improvement of the country classification in terms of risks assessment of the public finances sustainability (from high to medium risk).

Tables 7 and 8 in the Annex illustrate the impact of the measures introduced in the social security reform on the financial sustainability of social security in the long term.

On a different level, the fight against contributory and benefit fraud and evasion is still one of the main pillars of the Social Security System sustainability, allowing the defence of Social Security and workers, and also contributing to the consolidation of the Social Security budget, and consequently of public spending. A bet was made in the improvement of the system's efficiency and there was a growing trend in the amounts determined in the fight against contributory and benefit fraud and evasion, particularly between the years 2005 and 2009, although between 2008 and 2009 there was a slight stabilization in the amounts determined. In 2010, there was a further increase, mainly due to the increase of debt collection.

In a logic of public spending restraint in a sustained manner and of combating the inefficiency of the system, it is important to mention the new rules under the Means Testing Law<sup>20</sup>, in force since August 2010, foreseeing the redefinition of the access conditions to social support.

In a context of contributory revenue increase (also with a strong impact in the promotion of the social security system sustainability), we should mention the adoption of the new Code of Contributory Schemes of the Social Security Welfare Scheme<sup>21</sup> that requires the review of the contributory schemes' special nature and the taxes rationalization, together with the enlargement of the contributory base and the new remuneration components. By approaching the contributory base to the incidence rate for income tax purposes, a more and better social protection and justice in the fight against tax evasion is ensured.

### **RIS Commitment 5: To enable labour markets to respond to the economic and social consequences of population ageing**

The demographic changes, including the ageing of national population, have been influencing the evolution and actual functioning of the labour market structure. According to estimates from the Survey on Employment, between 2007 and 2010 the percentage of individuals aged 55 years and over was increased by 1 percentage point, rising from 28,9% to 29,9% - i.e., about 30% of the national population was concentrated in older age groups, and, in 2010, 17,9% was more than 65 years old<sup>22</sup>.

The ageing of the Portuguese population that was observed is also replicated in the field of the labour market: in 2010, individuals aged 55 and over accounted for 18% of the total working population, while 12,3% was between 55 and 64 years old. The inactive population is growing, especially individuals aged 55 years and over who, in 2010, represented 43,1% of the total inactive population (41,4% in 2007 - more than 1,7 percentage points) 31,5% of which were aged 65 or more.

In what concerns the employed population, individuals aged 55 and over represented 18,9% of the total employees in 2010 (more than 0.4 percentage points compared to 2007), and the group aged between 55 and 64 constituted 12,6% of the total employees (12,1% in 2007).

Under the effects of economic and financial crisis, the employment rate of individuals aged 55 and over stood at 29,6% in 2010 (31,3% in 2007 - less than 1,7 percentage points.)<sup>23</sup>, with the 55-64 age group holding an

<sup>19</sup> Council Opinion of 4 March 2008 on the updated stability programme of Portugal, 2007-2011 (2008/C 73/02), Official Journal of the European Union, 19/03/2008.

<sup>20</sup> Decree-Law no. 70/2010, of 16 June

<sup>21</sup> Approved by Law no. 110/2009 and regulated by Decree-Law no. 1-A/2011 of 3 January

<sup>22</sup> In 2000, this percentage was 27%, and it was observed an increase of 2,9 pp in the decade.

<sup>23</sup> The employment rate of individuals aged 15 and over was 55.2% in 2010.



## Strategy and Planning Office

employment rate of 49,2% (50,9% in 2007). On the other hand, unemployment usually lower in these age groups, rose to 6,3% between 2007 and 2010 (4,4% in 2007) in the group aged 55 or over, and 8,9% (6,5% in 2007) in the group aged between 55 and 64; however it remained below the national average (10,8% in 2010 and 8,0% in 2007).

In a context characterized by a relatively high labour market participation by older people<sup>24</sup>, the policies specifically oriented for the elderly people continued to focus on the sustainability of social security, following the Agreement on Social Security Reform, signed by the Government and the Social Partners in October 2006 (commitment 4).

Afterwards, in 2007, the Basic Law on Social Security<sup>25</sup> entered into force (commitment 4). It frameworks the other measures agreed with the social partners: the new pension scheme<sup>26</sup>, the reviewing of the social security system funding model<sup>27</sup> and the implementation of the Public Capitalization Scheme<sup>28</sup>. In this context, and focusing on the labour market functioning, we highlight measures like the anticipation of the new rule for calculating new pension amounts, the new pension updating rule and the additional financial penalty in case of early retirement, which also entered into force in 2007. All these measures were aimed to promote active ageing. On the other hand, the introduction of the sustainability factor in the new pensions' calculation was implemented from January 2008. The convergence process of the various social protection systems also began at this time.

In 2008, the Portuguese Government and the Social Partners signed the Tripartite Agreement for a New Regulation System of Labour Relations, Employment Policies and Social Protection in Portugal. In this Agreement, it is stated that the overcoming of the main labour market problems involves the Labour Code reform as well as the adoption of specific measures in the field of active employment and social protection policies. In this regard, and in view of the Portuguese labour market modernization, a set of commitments on the adaptation of active labour market policies were assumed, namely: i) qualification policies, with special emphasis on their adequacy to the productive sector needs, ii) the promotion of employment and the improvement of employability conditions; iii) reversing the trend of exclusion from the labour market of the population segments with more integration difficulties.

In what concerns the labour market, between 2007 and 2010, measures continued to be implemented in order to promote the participation of the population in general and of older people, in particular. These measures were integrated in intervention policies aimed to improve employability and prevent unemployment, promote access to employment and combat unemployment and social exclusion. These measures found political and programmatic expression in the National Employment Plans of 2005-2008 and 2008-2010, and were properly framed by the National Action Programme for Growth and Employment, from 2005 to 2008 and by the National Reform Plan for 2008-2010.

From 2008 to 2010, the National Reform Plan has established the following priorities in its field 5 - More Positive Mobility through Qualifications, Employment and Social Cohesion, the "commitment to invest in education and training and improve the qualifications of the Portuguese population, foster job creation, prevent and combat unemployment and modernize social protection systems, and also to promote the balance between flexibility and security in the labour market". All programmes and measures implemented under this framework had an approach over the life cycle; therefore, they comprised all target groups, without prejudice of focusing on one or another particular group, such as older workers.

At the end of 2008, and with the worsening of economic and financial crisis, the Investment and Employment Initiative 2009 was approved, in order to promote economic recovery, prevent and combat unemployment, and support social cohesion. In 2010, and still under the recessive effects of the crisis, the Employment Initiative 2010 was launched and it had three intervention axes: i) employment maintenance, ii) young people inclusion, and iii) job creation and unemployment combating.

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<sup>24</sup> According to Eurostat, the employment rate in the EU27 for the group 55-64 was 49.7% in 2010, 4.3 pp less than the national (54%), being important to mention the high participation of Portuguese women in this age group (47%) considering the European average (41.1%), with a difference of 5.9 pp.

<sup>25</sup> Law no. 4/2007, of 16 January

<sup>26</sup> Decree-Law no. 187/2007, of 10 May

<sup>27</sup> Decree-Law no. 367/2007, of 2 November

<sup>28</sup> Decree-Law no. 26/2008, of 22 February



## Strategy and Planning Office

Over the period of 2008-2010 and taking into account all these programmatic lines, we highlight the following employment measures, some of which are temporary for the target group considered here:

- Intervention Programmes for the Unemployed, with different approaches according to specific target groups, including unemployed adults over 55 years. These programmes may include several activation measures depending on the unemployed individual characteristics.
- Support employment in micro and small enterprises for workers aged 45 or more, by reducing social security contributions in 3 pp.
- Support the recruitment of unemployed persons aged 55 or more, in order to promote the reintegration of older workers into the labour market, who because of their age, have more difficulty in access to employment. In 2010, the hiring of unemployed aged over 40 years, registered at job centres for more than nine months, started to be supported.
- Support employment maintenance and increase people's qualifications in times of extraordinary activity reduction in economically viable businesses with a strong perspective of full recovery of their productive capacity, through job-Qualification Programmes.
- Support the recruitment of beneficiaries of unemployment benefits or social unemployment benefits and beneficiaries of the Social Integration Income, through the Employment-Integration Contract and the Employment-Integration Contract +, respectively, in order to promote the employability of the most disadvantaged persons through socially necessary labour.
- Support business creation from the unemployed through the Support Programme for Entrepreneurship and the Creation of Self Employment.

Between 2007 and 2010, the public employment services covered 74 687 individuals older than 55 years with measures of employment, training and rehabilitation, with the following annual distribution:

**Table 1 – No. of covered people with more than 55 years, by measurement type**

Measures	2007			2008			2009			2010			Total		
	Total	Gender		Total	Gender		Total	Gender		Total	Gender		Total	Gender	
		W	M		W	M		W	M		W	M		W	M
Employment	7.816	4.003	3.813	7.768	3.973	3.795	8.077	4.079	3.998	7.452	3.677	3.775	31.113	15.732	15.381
Training	5.264	2.362	2.902	6.456	3.329	3.127	14.462	6.832	7.630	16.967	8.342	8.625	43.149	20.865	22.284
Rehabilitation	104	46	58	147	56	91	109	46	63	65	29	36	425	177	248
<b>Total</b>	<b>13.184</b>	<b>6.411</b>	<b>6.773</b>	<b>14.371</b>	<b>7.358</b>	<b>7.013</b>	<b>22.648</b>	<b>10.957</b>	<b>11.691</b>	<b>24.484</b>	<b>12.048</b>	<b>12.436</b>	<b>74.687</b>	<b>36.774</b>	<b>37.913</b>

Of these, over 50% were men, and the majority of people covered by employment measures were the women. Given the number of individuals covered by employment, training and rehabilitation measures promoted by the public employment services, older workers (aged over 55) have increased their representation - from 4,6% (2007) to 6,2% (2010), about 1,6 pp. By measurement type, we stress the reduction of their representation in employment measures (1,9 pp. less), and an increase of their representation in Training measures (more than 3,4 pp.).

**Table 2 – Percentage of covered people with more than 55 years, by measurement type, in the total covered**

Measures	2007	2008	2009	2010	Total
Employment	8,6%	8,7%	7,3%	6,7%	7,7%
Training	2,8%	3,3%	5,4%	6,2%	4,7%
Rehabilitation	1,0%	1,4%	1,2%	0,6%	1,0%
<b>%</b>	<b>4,6%</b>	<b>4,9%</b>	<b>5,8%</b>	<b>6,2%</b>	<b>5,5%</b>

Source: IEFP, IP (September 2011)

Still in the sequence of the mentioned Tripartite Agreement, the Labour Code revision was approved in 2009 (Law no. 7/2009 of 12 February), aiming to reform the legal framework of labour relationships, through the establishment of a set of flexibility measures and, simultaneously, the introduction of security elements, in order to promote balance between the parts. In this sense, some measures were introduced to combat precariousness and labour markets segmentation. These measures included:





## Strategy and Planning Office

- a. Change of the employment contract presumption, establishing the formation of a very serious administrative infraction against the employer, in cases where there are workers performing apparently autonomous activities in conditions where there should be an employment contract.
- b. Limitation of the fixed-term employment contract duration, which cannot exceed the limit of three years, with possible renewal up to three times<sup>29</sup>.
- c. Creation of two new types of employment contract: (i) the employment contract for special cases with very short duration - namely in seasonal agricultural work or to carry a tourist event for a period no longer than a week – although these contracts are not subject to written form, the employer must notify the social security of its celebration, (ii) the intermittent work contract, in companies whose activities are not continuous or have a variable intensity. This type of contract must be in written form and cannot be celebrated for a short term or in a temporary work scheme.
- d. Creation of legislative frameworks suitable for employment schemes specific to certain activity sectors, such as domestic work, maritime labour and road transport, taking into account their specific features.
- e. Introduction of amendments to the procedural discipline of labour law, by adapting the Labour Code Procedure to the new legal-labour realities introduced by the revision of the Labour Code<sup>30</sup>.
- f. Introduction of the possibility to create "banks of hours", "group adaptability" and "concentrated working hours"<sup>31</sup>. These flexibility mechanisms are aimed to promote the adaptability between the working hours and the working needs and, at the same time, ease the reconciliation between professional, personal and family lives of workers, increasing the equality of opportunities between men and women.
- g. Establishment of the right to vocational training by: (i) conditioning, through a "training clause", the admission into the labour market of young people who do not have compulsory education, binding employers and young people to make more suitable studies or training, (ii) in this respect, placing on an equal footing, workers with no-term or fixed-term contracts, standardizing the training requirements (each worker is entitled, for each year, to a minimum of 35 certified training hours), (iii) clarifying the rights of student-workers, in order to reconcile working time with the increasing of qualifications.
- h. Strengthening the sanctions framework, by establishing levels of seriousness of labour offenses and their values, putting the defence of social and labour rights into practice, assuming higher values in case of violation of rules on child labour, health and safety at work, the right to collective representation structures, and the right to strike.
- i. Integration of labour provisions in the legal system of temporary employment agencies and private placement agencies.

In what regards the working conditions, we highlight the role of the National Strategy for Safety and Health at Work 2008-2012, as an instrument to reinforce the workers' safety and health, aiming to reduce the rates of occupational accidents and gradually and continually improve levels of health and well-being at work through public policies and the promotion of health and safety in the workplace. In concrete terms, we observed a reduction of about 20%<sup>32</sup> in the number of fatal occupational accidents between 2007 and 2010.

### **RIS Commitment 6: To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions**

<sup>29</sup> The Law no. 107/2009 of 14 September created mechanisms and conditions that allow the services involved to have the legal instruments that enable them to pursue a preventive and effective enforcement action in combating the misuse of "false green receipts".

<sup>30</sup> Decree/Law no. 295/2009, of 13 October, that entered into force in 1 January 2010.

<sup>31</sup> Article 208.º (1) of Law no. 7/2009 of 12 February, which approves the revision of the Labour Code and foresees that, by means of collective labour regulation a bank of hours scheme may be imposed, in which the organization of working hours is subject to certain limits on daily and weekly working.

<sup>32</sup> According to information released by the Authority for Working Conditions, these accidents decreased from 163 in 2007 to 130 in 2010

([http://www.act.gov.pt/\(pt-PT\)/CentroInformacao/Estatisticas/DistribuicaoPormes/Paginas/default.aspx](http://www.act.gov.pt/(pt-PT)/CentroInformacao/Estatisticas/DistribuicaoPormes/Paginas/default.aspx)).



## Strategy and Planning Office

In the last years, Portugal has had several changes in the education and training systems, incorporating a strategy of lifelong learning (ALV) that includes measures aimed to older workers.

In this context, we highlight: (i) the vocational training system reform (ii) the Labor Code revision, and (iii) the pursuit and reassurance of the measures connected with the New Opportunities Initiative.

The vocational training reform<sup>33</sup> began in March 2007 with the Agreement on the Vocational Training Reform. Following this, and as one of the main commitments assumed in December 2007, the National Qualifications System<sup>34</sup> was created; this system was essential to the achievement of the qualification strategy defined in the New Opportunities Initiative. Thus, we highlight the main binding objectives: (a) generalize the secondary education level as a minimum level of qualification, (b) apply the double certification principle (academic and vocational) to all forms of education/training, (c) increase the qualification levels of the active population, (d) strengthen the system's role of recognition, validation and certification of competences, and (e) ensure the provision of training adjusted to the companies modernization needs.

The Labour Code<sup>35</sup>, in force since 2009, includes the vocational training system in a lifelong learning perspective. Among the several provisions, it should be mentioned that regardless of the contract celebrated, the employee shall be entitled to an annual minimum of 35 hours of certified training.

In the context of the New Opportunities Initiative and aiming to increase basic training of the adult working age population, several measures have been developed during the last years, such as:

- The generalization and dissemination of the National System of Recognition, Validation and Certification of Competences (RVCC), through the New Opportunities Centres Network<sup>36</sup> (CNO) that, on 30 September, 2010 was composed by 454 Centres.
- The enlargement, diversity, flexibility, modulation of multiple combinations of education/training offers for adults that may be, for example, the existence of double certification formative offers after working hours and the celebration of protocols with specific employers, in order to provide more adequacy to the needs of employed population.
- The integrated management of training offers and the public and private organizations network, by ensuring actions throughout the whole country that guarantee the scope and the diversity of groups and professional areas, regulating the offers through a constant process of close monitoring and follow-up.
- The consolidation and increased offer of Adult Education and Training<sup>37</sup> (EFA), at basic education level and the creation of EFA courses at the secondary education level<sup>38</sup>, in a logic of double certification (level of education and professional qualification)
- The introduction in 2007 of the Modular Training Courses<sup>39</sup>, within the scope of continuous training of workers, as a short term modular offer aimed to promote access to modular qualification itineraries.
- The Basic Competences Training Programme<sup>40</sup>, created in 2010, whose purpose is to offer to a significant number of adults the possibility to acquire basic competences of reading, writing, calculation and use of information technologies and communication, giving them the possibility to enter in qualification courses and, therefore, contributing to the social integration of adults and the increase of their employability.

In quantitative terms, from 2006 to 2010, the New Opportunities Initiative recorded about 1.732.182 enrolments in the different education and training modalities, in the adult axis. In terms of efficacy between the several forms of educational training, it is important to mention that, from 2001 to 2010, in the New Opportunities Centres there

<sup>33</sup> Council of Ministers Resolution No. 173/2007 of 7 November.

<sup>34</sup> Decree-Law no. 396/2007, of 31 December.

<sup>35</sup> cf. Law no. 7/2009, of 12 February, articles 67º to 69º, 127º, 130º, 131º, 133º, 187º (<http://dre.pt/pdf1s/2009/02/03000/0092601029.pdf>). The new Labour Code derived from the Tripartite Agreement for a new Regulation System of Labour Relations, Employment Policies and Social Protection in Portugal, signed by the Portuguese Government and the Social Partners (except the Trade Union CGTP-IN) in June 2008.

<sup>36</sup> New Opportunities Centres – Administrative Rule no. 370/2008 of 21 May. Structures whose mission is to give response to the qualification requirements of the adult population.

<sup>37</sup>Administrative Rule no. 817/2007, of 27 July.

<sup>38</sup> Second Level of Education EFA Courses– Administrative Rule no. 230/2008, of 7 March.

<sup>39</sup> Modular Training – Decree-Law no. 396/2007, of 31 December.

<sup>40</sup> Administrative Rule no. 1100/2010, of 22 October.



## Strategy and Planning Office

was a total of 410.121 adult certification through the process of recognition, validation and certification of competences, and 85.074 adult certifications, through the adult Education and Training Courses.

In terms of profiles of the persons enrolled in New Opportunities Centres<sup>41</sup>, from 2007 to September 2010, about 60.644 adults were in the group of people with more than 55 years of age, representing 6% of total enrolments.

In terms of higher education, we highlight the access to higher education for people aged over 23 years<sup>42</sup>. The implementation of this new legal framework has enabled the improvement of competences and qualifications of the Portuguese active population. In 2009, about 10 003 students were enrolled in higher education through this form of access.

### **RIS Commitment 7: To strive to ensure quality of life at all ages and maintain independent living including health and well-being**

- **National Network for Continued Integrated Care (RNCCI), since 2006**  
(methodology presented in Section 3)

Demographic ageing and the increase in life expectancy have reinforced the need for protection and adequate services for older persons, in particular those who are in situations of physical or psychological dependency. Conscious of the need to promote integrated health care and social services for dependent persons, the Government has set up the National Network for Continued Integrated Care, under the joint responsibility of the Health, and Labour and Social Solidarity Ministries, and with a clear focus on the coordination of public care policies. The Network comprises public and private institutions and it is composed of units and teams to provide continued health and social care, as well as palliative care, covering hospitals, health centres, district and local social security services, the Solidarity Network and local administration bodies. The present Network, set up in 2006, took on board the experience of projects already on the ground since 2002 when the 1SI network of continued integrated care became operational with the objective of promoting autonomy, increasing social integration and improving health care for dependent persons. Services (medium or long term) are provided by two types of units (in hospital and ambulatory) run by hospital and home care teams, respectively. Of particular relevance in the context of the promotion of autonomy is the continued integrated care multidisciplinary team that provides health / nursing / rehabilitation care as well as social care for people who need different forms of support to continue to live in their homes. The network is being progressively extended and it is expected that coverage will be complete by the end of 2013. Very recently a network of units and teams specifically for mental health patients was set up in close articulation with the existing Network.

Different types of services including day care centres and residential facilities are intended to support older persons in need of residential care and their families and are provided by public, non-profit and for-profit institutions.

Programmes such as the Programme to Support Investment in Social Services and the Programme for the Enlargement of the Social Services Network are being developed to further extend and consolidate the network so as to ensure adequate response to needs.

The physical implementation in June 2011 of the different types of hospitalisation comprises a total of 5.519 places, from which 890 were Convalescence Units; 1.730 Average Length of Stay and Rehabilitation Units; 2.714 Long-Term and Maintenance Units and 185 Palliative Care Units. In addition to the contracted beds, there are 235 ECCI – Integrated Continued Care Teams that ensure 7.119 places (see Tables 11 and 12, annexed to this report). In accordance with the development of RNCCI activities monitoring (until December 2010) 24.004 users were referenced. According to the cumulative number of users referenced in 2009 and 2010, there is an increase of 47% with a total of 75.154 users referenced since the beginning of the RNCCI, which is expected, due to the increasing network offer at the different typologies level (see Chart 13, annexed to this report). There is an

<sup>41</sup> New Opportunities Initiative: September of 2010:

[http://www.novasoportunidades.gov.pt/np4/%7B\\$clientServletPath%7D/?newsId=1300&fileName=Microsoft\\_Word\\_Briefing\\_IniciativaNova.pdf](http://www.novasoportunidades.gov.pt/np4/%7B$clientServletPath%7D/?newsId=1300&fileName=Microsoft_Word_Briefing_IniciativaNova.pdf)

<sup>42</sup> cf. Decree-Law no. 64/2006, of 21 March ([http://www.mctes.pt/archive/doc/M\\_23.pdf](http://www.mctes.pt/archive/doc/M_23.pdf))



## Strategy and Planning Office

increasing number of women users in comparison to the one in 2009. The age group older than 80 years represents 40% of users of both sexes; representing 42% in 2009 (see Table 13, annexed to this report).

During the year 2010, 25.990 people were assisted in the RNCCI. The cumulative number of assisted users grew from 40.083 in 2009 to 66.073 at the end of 2010, representing a variation of 65% (see Chart 14, annexed to this report). In what concerns users that were discharged from the RNCCI in 2010, we highlight the fact that their homes, with and without social support, were their main destination. The main reason for the RNCCI discharge is the range of therapeutic purposes; representing 64% of all the discharged users (see Table 14 and Chart 15, annexed to this report).

In 2008, the disabled and dependent users represented 87% on the admission in the RNCCI; in 2009 they represented 94% of the total users, and in 2010 represented 95%, showing a worsening of the disability/dependency on the admission in the RNCCI. In 2010, there was an improvement in 53% of the users assisted in the RNCCI (see Charts 16 and 17, annexed to this report).

As mentioned in the methodology section, and since the implementation of the RNCCI, there has been a concern in developing satisfaction surveys aimed to the professionals of the inpatient units, local coordinating teams and users of the RNCCI, as well as surveys in the ECCI and to their admitted users. As a result, the satisfaction surveys conducted in 2007 and 2008 with users admitted in inpatient units show a high level of satisfaction: 80% of users consider that they are better since they were admitted in the unit, 74% believe that the unity is better than they expected, being evaluated as "good" (47,5%) or "very good" (44,6%) and 98% of respondents would not hesitate to recommend it to a friend or family member.

Users assisted on ECCI <sup>43</sup> reveal great satisfaction with the care received and with the professionals' performance.

The period from 2010 to 2013 should allow the development of interventions oriented to the consolidation of the health care model, the improvement of supporting tools and the enlargement of the RNCCI in order to achieve the estimated coverage targets.

### - **Prevention of Violence against Older Persons, since 2011**

In Portugal, the mistreatment of older people is considered a public crime, i.e., due to its gravity, it is sufficient that the Public Prosecutor is aware of its occurrence to initiate criminal proceedings. This may occur in different contexts (family, institutional and social), and therefore deserve an inter-institutional integrated action from the actors who work with the elderly, families and institutions. Given this reality, the ISS, I.P. has participated as a partner in several working groups as well as in national and transnational projects:

- The Working Group "Prevention of Violence against Older Persons", from the Directorate General of Health Services (Ministry of Health), was created in 2008.

The intervention strategy defined by the working group was aimed to address three complementary levels. Firstly, the disclosure of information to older people, family and the community in general. Secondly, the development of training programmes aimed to professionals from the health services. Finally, the elaboration of recommendations aimed to alert about the need of adequate attention and intervention at various levels, in what concerns this phenomenon.

- The Transnational Project Monitoring Network "Violence against older women in intimate relationships", under the DAPHNE Programme, from the responsibility of the Social Intervention Study Centre (CESIS), which took place during 2009-2010.

In order to promote and facilitate the improvement of intervention systems in the field of domestic violence and to provide services to elderly women victims of violence in intimate relationships, were defined the following main objectives: fill in the existing knowledge gaps about violence against older women in intimate relationships; disseminate this knowledge and make recommendations for the future action of policy makers and service providers at the level of the participating countries and the EU.

- The Advisory Committee of the transnational Project "Breaking the Taboo II - Development and piloting of training tools," continued with the existing partnership with the CESIS.

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<sup>43</sup> Survey to the users admitted in ECCI, 2009



## Strategy and Planning Office

The project ran between 2010 and 2011 and its main objective was the development and piloting of a training *curriculum* aimed to professionals from health and social services and also potential *peer advisors*, who may be future contact persons and references within the organizations in the specific field of violence against older women.

- The partnership with the National Health Institute Dr. Ricardo Jorge, P.I for the development of the project called "Ageing and Violence" in 2011.

Financed by the Science and Technology Foundation, this project runs from 2011 to 2014 and aims to identify and characterize the violence situations in which the elderly (aged 60 and over), resident in the Mainland Portugal, are subject within their family context.

### - **Integrated Alert System, since 2011**

The Integrated Alert System was created in 2011. It is a public response to action and prevention of extreme isolation of the elderly. Its main objective is to promote the development of a strategy of warning, detection and intervention, integrated in the living contexts of older people who are beneficiaries of the National Pensions Centre (CNP) and namely, those who do not have any family and/or social support.

It is based on the implementation of a monthly alert mechanism aimed to investigate situations in which older people do not cash benefits/pensions issued by postal order during a period of three months, and operates with the cooperation of CNP, as the entity that receives the returned pension cheques, and local technicians responsible for the social customer information service and support. For the investigation of these situations there is also the cooperation of other partners such as Health Centres, Hospitals, Police Entities, Private Institutions of Social Solidarity or Similar, Local Authorities, Municipalities, among others.

### - **Telealarm Service (STA)**

Since 2000, the Integrated Support Programme for the Elderly<sup>44</sup> (PAII) enabled the use of the Telealarm Service (STA) by older people or persons in dependency situations, with free equipment installation in their own homes and the monthly payment for this service at low costs.

For technical reasons and in order to enable the sustainability and maintenance of the service, in 2008, ISS, I.P. integrated 307 beneficiaries of the STA in the Home Telecare service promoted by the Portuguese Red Cross that by that time had recently been created.

### - **Comfortable Housing Programme for the Elderly (PCHI), between 2007 and 2012**

The Comfortable Housing Programme for the Elderly (PCHI) is aimed at housing qualification in order to improve the basic housing and mobility conditions of older people, whose monthly *per capita* income is equal to or less than the social support index value and who benefit from home support services or attend Day Care Centres, in order to prevent and avoid institutionalization.

In 2007, the programme was implemented in three pilot districts - Beja, Bragança and Guarda, and in 2008 it was implemented in the districts of Castelo Branco, Portalegre and Vila Real. A total of 80 cooperation protocols were celebrated and 974 housing improvements were carried out and they benefited 1098 older people.

In 2011, the PCHI was extended to the districts of Coimbra, Évora, Faro, Leiria, Santarem, Viseu and Viana do Castelo, in a total of 53 municipalities, and 574 housing improvements are expected to be made.

### - **Cooperation Programme for the Qualification and Safety of Social Responses**

It is a programme that seeks to promote the quality of Social Responses under the public, private and solidary scope and, in this way, to guarantee that citizens have access to quality services adequate to their needs. The programme is divided in two working axes, with specific goals and associated products:

- Buildings Safety and Quality – to establish a set of minimum requirements for the construction of new social responses and adaptation of the existing ones (Technical Recommendations for Social Equipment)

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<sup>44</sup> Created by the Joint Order of 1 July 1994



## Strategy and Planning Office

- Quality Management of Social Responses – to define requirements for quality assessment (Model); to support the design of key processes (Key-Processes Manual) and the development of tools to assess the customer, collaborators and partners degree of satisfaction (Satisfaction Assessment Questionnaires).

### - **Cooperation between the State and the Private Social Solidarity Institutions**

In the context of social solidarity, the cooperation area between the State and Private Social Solidarity Institutions (IPSS) assumes a central importance in terms of the implementation of measures and social protection services.

Through the model that is already in force, the State provides to the IPSS the technical and financial support necessary to ensure the provision of these measures/services within the scope of social action/protection. The State believes that these measures/services should be "delegated" to civil society, through the establishment of cooperation and management agreements and not be developed directly by the state, provided that the necessary conditions for this are properly protected.

In 2011, the distribution of the total number of users by the six social responses specifically aimed to the elderly was the following (see Table 18, annexed to this report): Home Support Service (39,0%), Nursing Home/Residential Structure for the Elderly (29,4%); Day Centre (24,3%); Gathering Centre (7,2%); Night Centre (0,1%), and Family Home (0,0%).

In what concerns the evolution of the agreements number, between 2007 and 2011, we verify that only the Nursing Home and Day Centre responses recorded a growth of 10,9% and 3,2% respectively (see Table 15, annexed to this report). In what concerns the number of users it is noted that, in the mentioned period, almost all social responses have increased. The exceptions were the Night Centre (- 35,4%) and the Gathering Centre (- 3,3%) (see Table 16, annexed to this report).

### - **Social Network, since 2000**

The Social Network Programme, created by the Council of Ministers Resolution no. 197/97 of 18 November and later regulated by the Decree-Law no. 115/2006 of 14 June, started to be implemented in 2000 and is currently on a development and consolidation phase across the mainland. Approximately 9500 partners are registered as participating partners in the set of social responses or integrating the different structures and bodies of the Social Network.

The Social Network has developed an Information System which comprises two levels: the local level (under the responsibility of Social Action Local Councils - CLAS) and the national level (under the responsibility of the ISS, I.P.).

Through the analysis of this Database records, it is noted that 254 CLAS have introduced information about their social diagnoses. 43% of them have mentioned problems in the ageing area<sup>45</sup>. From the problems identified, we point out: the excessive institutionalization of the elderly, the existence of older people with dependent persons, physical/cognitive and social inactivity of the elderly population, insufficient family support, family and social isolation, geographic isolation of the elderly population, neglect and/or elderly abuse within the family, neglect and/or elderly abuse within the institutions, elderly population in a situation of dependency and without support.

On the other hand, 35% of the 236 CLAS with registered social development plans have also priority intervention axes specifically in this area (35% are referenced in the Central region, 25% in the Alentejo, 24% in the North region, 14% in Lisbon and Vale do Tejo, and only 2% in the Algarve). Although there is a great diversity of these axes, it is observed that they aim the promotion of life quality for older people, the creation/mobilization of integrated responses to support the elderly population, the combating of social and personal isolation of the elderly and dependent persons, the improvement of quality in social responses to the elderly, the creation of social responses and alternatives for the elderly, the family integration plan of generations, and others.

It is also possible to observe that, by June 2011, 177 CLAS registered at least 82 projects specifically aimed to the elderly population. Of these projects, 27% began before 2007 and the remaining 73% began in 2007 or after.

### - **Programme for the Extension of the Social Equipment Network (PARES), since 2006**

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<sup>45</sup> The problems related to the demographic area are not included here, namely natural negative growth rates or the high dependency rates. It should be noted that about 42% of these CLAS have diagnosed the problems in this area.



## Strategy and Planning Office

The PARES aims to broaden the social equipment network. It is one of the pillars of the integrated strategy development of the country's social policies. This extension of the equipment network focuses on the creation of new places. In what concerns the social responses aimed to older people, it was established the objective of increasing their capacity in 10%:

- by strengthening Home Support Services and Day Centres, by promoting autonomy conditions to the elderly people;
- by increasing the number of Nursing Homes places for the elderly in situations of greater dependency.

A total of 285 projects that focus on social responses aimed to older people were approved, 149 of which operate since 2006, and 136 since 2007 (see Table 17, annexed to this report).

- **Central Administration Investment and Expenditure Development Programme (PIDDAC), since 1981**

The PIDDAC includes support to Private Social Solidarity Institutions (IPSS) or equivalent, in the expansion and remodeling of the supporting infrastructure network to the person throughout his life, through the creation of places in different social responses.

Between the period of 2007 to 2010, 13 projects in the area of older people were concluded under the PIDDAC, where 1117 places were created, 504 of which in the Nursing Home social response, 261 places in the Day Centre social response, 322 in Home Support Service and 30 in Occupational Activities Centre.

However, 16 projects in the area of older people are still running for the creation and/or extension of the Nursing Home social response, 10 in Day Centre and 13 in Home Support Service. These projects foresee the creation of 1346 places, of which 483 projects in the Nursing Home social response, 332 projects in Day Centre, and 531 projects in Home Support Service.

- **Human Potential Operational Programme (POPH) - Typology of Intervention 6.12 - Investment Support to Integrated Social Support Responses, between 2009 and 2013**

The Type 6.12 of POPH in Axis 6 - Citizenship, Inclusion and Social Development, gives special emphasis to the extension of the social equipment network, foreseeing an increase of the social responses capacity in the areas of older people and persons with handicaps, namely in facilities of Nursing Homes, Home Support Services, Day Centres and Residential homes, Autonomous Housing, Home Support Service for Persons with Handicaps and Occupational Activities Centres.

Under the POPH 6.12, 129 projects are operating in the area of older people, 89 of which targeted to the creation and/or extension of the Nursing Home social response, 12 in Day Centre, and 28 in Home Support Service. These projects foresee the creation of 5.290 places, of which 3.620 in the Nursing Home social response, 646 in Day Centre, and 1.024 in Home Support Service.

- **The Social Equipment Safety Supporting Measure (MASES), from 2008 to 2011**

The MASES was established by the Order no. 16790/2008 of 06 June and is aimed at institutions that pursue forms of social action and social exclusion combating.

This measure aims to provide financial support for construction works in social support establishments when it is necessary to adapt facilities and substitute materials and equipment, particularly those whose absence or malfunction endangers the safety, well-being and the quality of services provided.

Under the MASES, 419 projects were developed in the area of older people, spread over the eighteen districts of Mainland Portugal, which covered the facilities of Nursing Homes, Day Centres, Gathering Centres, Night Centres, Home Support Services and Integrated Home Support Services, in a total of 55.303 beneficiaries (see Table 18, annexed to this report).

- **The Social Equipment Investment Supporting Programme (PAIES), from 2008 to 2019**

The extension of the social equipment network is a determinant factor for the well-being and improvement of living conditions of citizens and their families. Therefore, the PAIES focuses on specific responses, giving





## Strategy and Planning Office

particular attention to the creation of new places in social responses aimed to children, the elderly and persons with handicaps. The PAIES is an incentive to private investment, by supporting the promoting entities at the level of interest, allowing the use of credit and, consequently, part of the investment is supported with the social equipment functioning. This implies a fundamental principle of financial ability from the promoting entities to support the investment.

Under the PAIES, 20 projects targeted to the creation and/or extension of the Nursing Home social responses are operating. These projects foresee the remodelling of 69 places and the creation of 546 new places in the Nursing Home social response.

### - **Plan for Immigrant Integration (2010 - 2013)**

The Second Plan for Immigrant Integration consists of 90 measures, which put into practice the State sectorial commitments, and assumes as its great purpose the full integration of immigrants, particularly in the areas of culture and language, employment, vocational training and housing. In this Plan we highlight two new intervention areas: the diversity and interculturalism promotion, and the elderly immigrants. This latter aims to respond to the growing challenge of immigration in Portugal and precedes the preparation of actions and measures for the European year for active ageing and solidarity between generations, which is expected for 2012.

The ISS has created its Sectorial Plan, from which we highlight in the ageing area, the Measure 69: to combat the socio-economic vulnerability of the elderly immigrants, through the dissemination of institutional responses already available, where it was proposed the translation of the "Rights of Older Persons Guide" that aims to inform about the rights of the elderly, the social responses available and what they should keep in mind when choosing an equipment or service in this area. The translation of this Guide fully responds to the purpose of this measure.

According to the statistic data of the ISS, the countries with the highest number of foreigners registered in the Social Security with more than 65 years of age are: Cape Verde (2993), Spain (1509), United Kingdom (1457), Angola (926) and Germany (621).

### **RIS Commitment 8: To mainstream a gender approach in an ageing society**

Equality between women and men is a fundamental principle of the Constitution of the Republic of Portugal since 1976, leading to the development of a very egalitarian legislative framework. Mainstreaming Gender Equality at all levels is a political commitment, a strategy for achieving Gender Equality and is considered a requisite for good governance by the Portuguese Government.

Under these Plans, the Commission for Citizenship and Gender Equality (CIG) plays a key role in close cooperation with all ministries which are the responsible for the implementation of the measures in its area of intervention, coordinating interdepartmental teams composed of representatives of various areas, in each Ministry. These plans are based on concrete measures with indicators in order to enable further developments and measurable evaluation of the implementation of each measure by the ministries, which is a crucial step in the promotion of gender mainstreaming.

The budget for the promotion of gender equality policies was considerably reinforced for the period 2007-2013 in order to make available the resources needed for the implementation which policies, with a specific funding line of 83 million Euros distributed to 7 different areas.

The CIG is in charge of managing several of these technical and financial support lines. Examples of projects include (i) support to initiatives of NGOs and other civil society organizations operating in the field of gender equality, (ii) training in gender equality and prevention of gender based violence; (iii) development and evaluation of databases, diagnosis and good practices' guides; (iv) campaigns aimed at raising awareness and promoting gender equality as well as to combat gender based violence; (v) integrated intervention to combat domestic violence and trafficking in human beings; (vi) promoting Plans for gender equality in Central and Local Public Administration and in enterprises and support to women's entrepreneurship.

Several Council of Ministers' Resolutions (CMR) on this matter have been approved, such as CMR 82/2005 that established the integration of a gender perspective in the preparation of all legal Acts and CMR 64/2006,





## Strategy and Planning Office

establishing the integration of a gender equality dimension in the language used in the normative acts and in the written and visual language used in the Public Administration.

The commitment to mainstream gender and non-discrimination in all Government activities is reflected in the adoption of Equality Plans, in the institutionalization of Ministerial Equality Advisers and teams and in the progressive celebration of Protocols with municipalities.

The CMR nº 39/2010 was adopted the 25th May 2010 defining the status of the Local Gender Equality Advisers, giving them political support in order to be able to fully accomplish their functions. This Resolution aims at promoting the implementation of policies for gender mainstreaming in all areas of local policies, including reconciliation of professional, personal and family life, ensuring the access to rights and reinforcing the exercise of an active citizenship.

So far, the CIG has developed Protocols with 79 municipalities (out of 308 municipalities) aimed at promoting Gender Equality at the local level through the adoption of Municipal Plans for Equality and the appointment of Local Equality Advisers and teams. Until August 2011, there were appointed 70 Local Gender Equality Advisers.

Since 2010, CIG is promoting a project entitled “Gender and Ageing: Planning the future must begin today!” which general objectives are: Improve the knowledge of the situation of ageing population in Portugal, in a gender perspective; Make Recommendations directed to all relevant policies and programmes in order to ensure the mainstreaming in a gender and age perspectives; Create partnerships within policy and decision-makers in all sectors and other relevant stakeholders in order to promote quality active ageing, and preventing and supporting situations of dependency and poverty; Produce training materials and guides for Professionals as well as supportive documentation for policy makers; increase awareness and build consensus among decision makers and other influential professionals; Promote and build an active ageing public policy Framework.

The Commission for Equality in Labour and Employment (CITE) attributes together, with the CIG, prestige awards to companies that distinguish themselves in the promotion of gender equality in the workplace (“Equality is Quality” Award).

In order to promote the active participation of companies in combating the difficulty of reconciling work, family and private lives, the Council of Ministers’ Resolution no. 49/2007 was approved in 2007; this CMR establishes that companies owned by State, after making a diagnosis of the situation, should adopt equality plans in order to achieve effective equality of treatment and opportunities between men and women, eliminate discrimination and allow the reconciliation of private, family and professional lives. In this sense, CITE has been working with several companies, some of which develop best practices in the area of reconciling work and family lives. During 2009, the CITE has worked with three companies of the State enterprise sector, in order to perform diagnostics on the situation of gender equality in companies.

Under the POPH, CIG is also managing the technical and financial support for the promotion and implementation of Gender Equality Plans in public and private enterprises in order to ensure the equal access of women and men to jobs, equal pay, equal access to training, to career progression and the reconciliation of family and private life.

“Gender Equality in Portugal” is published every two years by the national mechanism for gender equality since 1980. It contains, namely, statistical data disaggregated by sex and legislation for each policy area. 5000 copies of this publication were issued in 2007 and in 2009.

At the same time, Portugal has been improving gender indicators and developing new instruments that allow for a closer monitoring and effective evaluation of gender equality, namely: (i) a Gender Database updated regularly in the National Statistical Office website since 2004; (ii) an Equality Website, aimed at supporting and promoting the implementation of gender and non discrimination mainstreaming at all levels of the Public Administration, created in March 2009; and (iii) a Gender Observatory, was set up by CIG in order to improve efficiency in the implementation of Gender Equality policies.

Since the III National Plan for Equality - Citizenship and Gender (2007-2010) that all statistics referring to people produced by the Public Administration should be disaggregated by sex. It also affirmed that the indicators used in gender research must be standardized and that the indicators adopted by the EU to monitor the implementation of the Beijing Platform for Action should be incorporated into the National Statistical Institute’s (INE) Gender Profile.



## Strategy and Planning Office

### - Promoting women's entrepreneurship

The Governmental Programme continues to give priority to the promotion of women's employability and entrepreneurship, including through improved mechanisms for supporting female entrepreneurship; promotion of measures for the elimination of gender segregation in the labour market and measures to close gender pay gap, as well as by encouraging and supporting the elaboration of plans for equality in public companies. Portugal has adopted governmental programmes for gender mainstreaming and support measures for enterprises and entrepreneurship, particularly co-financed by the European Social Fund.

Having a particular attention to promoting self-employment and female entrepreneurship, as well as the associativism and creation of corporate networks from economic activities managed by women, notably through the creation of products and services networks, using new technologies to disseminate promising practices in the area of entrepreneurship, these objectives which are present in two main thematic agendas of National Strategic Reference Framework (NSRF): the Agenda for Human Potential and the Competitiveness. Women and the female entrepreneurship should be at the centre of the search for solutions to the economic crisis. These strategies are also previewed in IV PNI (2011-2013) - National Plan for Equality, Gender, Citizenship.

Under the typology 7.6 - Support for Entrepreneurship, Associativism and creation of corporate networks from economic activities managed by women, of the Axis 7, of the POPH-NSRF, until September 2010, were created by women, 583 companies and promoted training for 1.416 women.

Under POFC/NSRF, 59 Projects have been supported (on a total of 207) for innovation in business by encouraging qualified entrepreneurship promoted by women owning, directly or indirectly a contribution equal to or exceeding 50% in the capital for two years and performing executive functions within the company and that keep it at least two years after the completion of the project.

Since 2009 the CIG is part of the national network of Corporate Social responsibility Organizations (REDE SPOT), whose mission is to promote the development of social responsibility, thus contributing to the implementation of policies and good practices, in particular environmental, economic, ecological, social, gender equality and social entrepreneurship.

CIG has created a network of female entrepreneurship, called "Be Entrepreneur", whose aim is to make known cases of successful women entrepreneurs and promoting female entrepreneurship through incentives and exchanging good practice and enterprising.

The CIG established a protocol with the CASES - Cooperative António Sérgio for Social Economy, in the context of National Microcredit Programme. The aim of this programme is intended to be a stimulus to job creation and entrepreneurship among populations with the greatest difficulty in accessing the labour market, thereby facilitating not only the access to credit, as well as the provision of technical support for the creation and consolidation of business projects.

A research on Portuguese Women and entrepreneurship, together with a research on the entrepreneurship of migrant women in Portugal was concluded in 2010 with the purpose of producing a diagnosis and recommendations that will enable the drafting of policies that will foster women's entrepreneurship.

In 2010, a protocol was signed between the CIG, the General-Directorate of Prison Services, the National Association of the Right to Credit and the National Association of Entrepreneur Women in order to enhance integration in employment of former female prisoners, which includes the possibility of access to bank loans. According to the 2007 edition of the Observatory of Enterprise Creation<sup>46</sup>, in Portugal, about a third of entrepreneurs are women. The large majority of them, almost 90%, intend to be actually involved with their business, which is very relevant. From these, three-quarters hold at least half of the partnership, while 30% have a majority participation in their companies. Furthermore, about a quarter own 100% of the partnership, being the only entrepreneur of the company. It may be noted that among the younger entrepreneurs (26-35 years old), the proportion of women tends to be a little larger, around 40%, reflecting a more balanced gender representation among the new generations.

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<sup>46</sup> The Observatory of Enterprise Creation in Portugal is a project conducted by IAPMEI (Portuguese Public Agency for SME Support and Innovation) since 1999, with the collaboration of the Portuguese Network of Business Formalities Centres. Entrepreneurs are surveyed at the moment of the legal constitution of their partnerships.



## Strategy and Planning Office

### - Labour Code

The connection between paid and unpaid work and the encouragement of family responsibilities sharing are becoming political priorities and central issues in the promotion of gender equality.

Recognizing the importance and need for measures that contribute to create favourable conditions to reconcile family and professional lives, some of the solutions advocated by the Labour Code, revised in 2009 (Law no. 7/2009 of 12 February), focused on the need to intervene in order to improve the possibilities of reconciliation of professional, private and family lives and the promotion of gender equality. This demonstrates the legislator's intention to contribute to the formation of a new paradigm.

Therefore, the guarantee of gender equality, promotion of parenthood and reconciliation of professional, family and private lives, are transversally mentioned in several chapters of the Labour Code. The old scheme of motherhood and fatherhood protection was significantly changed. Important mechanisms were established to facilitate the reconciliation of family and professional lives and promote gender equality in a logic of equal opportunities between men and women, not only in what concerns employment and working conditions, but also, and at this point with a particularly innovative nature, in the exercise of the parenthood rights.

Examples of new rules in the current scheme of parenthood, aimed to reconcile work and family responsibilities:

- Promotion of equal rights in what concerns the exercise of parenthood.
- The maternity and paternity leaves are now called parental leave; this parental leave may be initial and taken exclusively by the father or the mother.
- The sharing of parental leave is also fostered: without prejudice of the exclusive rights of the mother, namely the enjoyment of the six weeks after delivery and the possibility to anticipate the beginning of the leave, both parents are entitled to take parental leave, by deciding together how to share it. In the absence of a joint decision, the law states that the leave shall be taken by the working mother.
- The extension of the initial parental leave duration, that is increased by 30 days, if each parent takes exclusively a continuous or non-continuous period of 30 days of parental leave.
- The creation of the extended parental leave, in which any of the parents can enjoy more 3 months of leave, in a total of 6 months, supported by social security in 25% of the gross salary, which in practice allows both parents to ensure together the continuous stay with the child in his/her first 12 months of life.
- The reinforcement of the working father's rights, either by increasing the period of the initial compulsory leave after the birth of his child, from five to 10 days, five of which must be taken immediately after the birth of the child, or by granting an optional continuous or non-continuous period of 10 days leave, together with the leave taken by the mother.
- The employer has now the express duty to provide workers (men and women) the working conditions to facilitate the reconciliation of work with family and private lives.
- The social protection issue is defined in a specific document that establishes the list of income replacement benefits during the periods of absence from work, due to the exercise of parenthood rights.
- It is established the right of the worker to be absent from work up to 15 days per year to provide urgent and essential assistance, in case of illness or accident, to the spouse, cohabiting partner or the person living in common economy with the employee, and also to a relative or next-of-kin in the ascending line, that may not be a part of the same household, or a relative of the second degree in the collateral line.
- It is established the right of the worker (man or woman) to work in part-time or with flexible working-hours until the child reaches 12 years of age, unless the employer proves that this implies serious damage to the company activity.

The assessed data concerning the period in which this new scheme is in force already indicate a growth in the parental leave use, to which the father is entitled to, and a very positive evolution in sharing leaves between mother and father (see Table 19, annexed to this report). In terms of trends, we observe an increase in the allowances payment destined to the fathers, whether it concerns the Initial Parental Allowance, exclusively received by the Father, or the Initial Parental Allowance shared by both parents.



**RIS Commitment 9: To support families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members**

- **Caregivers Rest (RNCCI) since 2006**

The care provided by family members to dependent old people represent today an expression of family solidarity. The social and political recognition of this act of caring is essential to the sustainability of a more cohesive and solidary society.

The temporary hospitalization of the dependent person for the rest of the caregiver includes a set of interventions that aim to provide an effective break of the caregiving, although temporary, to reduce the overburden or the amount of care provided by informal caregivers and to enable the creation of coping strategies. It may also delay the permanent institutionalization of the dependent person and, therefore, foster a positive financial impact.

This type of response, associated with health education programmes and mutual help groups, facilitates a reduction of tension and emotional distress and increases resilience in informal caregivers, providing the potential development of the family potential as caregiver.

In Portugal, this type of service is recent. The rest of the caregiver measure is contemplated in the RNCCI as the possibility to admit the dependent person, on a temporary basis, up to 90 days per year, in Long Term and Maintenance Units (ULDM) when the family has difficulties in giving support or when the primary caregiver needs to rest. There are also some solutions of temporary care services from the initiative of social and private sector institutions.

In 2010, among the reasons of the proposed referral of users in the RNCCI, the caregivers rest represents 7% at the national level. The dependency on activities of daily living (AVD) is the main reason for referral (90%), followed by the user/informal caregiver training (85%). The Caregiver Rest presents 30% in the ULDM typology.

- **"Errands and Company" Project, since 2011**

The "Errands and Company" Project is promoted with the cooperation of the ISS, I.P. and the Portuguese Institute of Sport and Youth, P.I and aims to create an intergenerational social support network through the establishment of local networks of young volunteers (aged between 16 and 30) to support the elderly people who live alone and/or are isolated in their daily activities. These activities may include: shopping, going to the doctor, companionship, the promotion of leisure activities, among others.

The Pilot Experience of this solidarity network began in 2011 and has been developed by 60 young volunteers, covering about 240 elderly resident in the districts of Lisbon, Oporto and Setúbal.

**RIS Commitment 10: To promote the implementation and follow-up of the regional implementation strategy through regional cooperation**

Currently, there is an emerging need to promote reflection and debate on active ageing and intergenerational learning as a means to achieve intergenerational solidarity and address demographic changes in Europe. In the context of economic and financial crisis, together with an ageing population, it is of the utmost importance to discuss strategies that may help young people to overcome socio-economic vulnerability to which they are especially subject to. In this sense, a workshop was held<sup>47</sup> on 28 and 29 April 2011, in the Lusíada University of Lisbon, to celebrate the *European Day of Intergenerational Solidarity* (Solidarity Between Generations).

This workshop joined two projects around the same theme - solidarity and intergenerational practices: the "Act Age", a project within the scope of the "Youth in Action" which aims to be a platform for discussion and exchange of good practices, based on theoretical contributions and practical case studies about the development of non-formal education tools for intergenerational practice in youth projects; and the project "How to Age in Europe," within the scope of the "Europe for Citizens" Programme, that aims to get people to discuss and reflect about the construction of a Europe that faces ageing as a challenge and an opportunity to promote European citizenship, with the support of several organizations concerned with this issue.

<sup>47</sup> It was an initiative coordinated and organized by the Social Solidarity Cooperative CO(OP)RAÇÃO, with the participation of several European organizations



## Strategy and Planning Office

The Solidarity Between Generations workshop provided the participants a space for learning, reflection and debate, encouraging the creation of innovative projects in the field of intergenerational practices that contribute to give answers to the challenges of demographic change. The event was open to all professionals in the youth area, with or without experience, and also to professionals of gerontology, sociology, social work, sociocultural animation and psychology areas, among others, which directly or indirectly, contribute to intergenerational projects, and also Day Centres and Nursing Homes' professionals, teachers, kindergarten teachers, health professionals, etc.

The project **cIDADES**, promoted by the Associação VIDA (LIFE Association) and co-financed by the Directorate General of Health Services and the Calouste Gulbenkian Foundation, was presented at the Calouste Gulbenkian Foundation on 12 November 2010, during the workshop on "Age-Friendly Cities". The project presentation was preceded by the intervention of Alexandre Kalache<sup>48</sup>, from the New York Academy of Medicine, on "Active Ageing and quality of life of older people".

The active ageing issue has been discussed and reflected among the "key-actors" in various initiatives at the regional and local levels, among which we highlight some recent examples:

- In 2009, within the scope of the RNCCI, seven workshops were developed under the theme "Elderly abuse in institutional context", covering a total of 406 professionals of the National Network for Continued Integrated Care (RNCCI), from all the mainland and a workshop under the theme "Violence and abuse against vulnerable people", covering 20 RNCCI professionals.
- 4 June 2010: Polytechnic Institute of Leiria - presentation to the students of Master's degree in Gerontology
- 2 July 2010: Gerontology Symposium: New Intervention Perspectives - Viseu
- 14 September 2010: FORUM "social inclusion of older people - reality or utopia?" - Aveiro
- 28 September 2010: Cavado supra-municipal Platform - Braga
- 8 October 2010: Congress "A New Age, A New Time" - Funchal
- 28 October 2010: Senior Week, Workshop "Age-Friendly Cities" - Peniche
- 10 December 2010: Seminar "Age-Friendly Cities" - Lisbon
- 9 February 2011: presentation to the Social Action Local Council – Paços de Ferreira
- 20 May 2011: IV Portuguese Congress on Assessment and Intervention in Social Gerontology - Guimarães
- 7 June 2011: Symposium "Healthy and Active Ageing" - Castelo Branco
- In 2011, the ISS, IP organized a National Meeting entitled "Horizons of Change in Violence against Older People," whose main goals were to raise the issue of Violence against Older People as a priority for practitioners and policy makers to raise the awareness of the social actors and of the community in general to this reality and promote a space for learning, reflection and sharing in what concerns the features of this phenomenon.

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<sup>48</sup> Brazilian researcher in the ageing area and responsible for the development of the Global Age-friendly Cities Guide (he was the Director of the Department of Ageing and Health Care of the World Health Organization).



## 6. Conclusions and Priorities for the Future

Ageing is being assumed as a challenge that arises in different areas of policy action. The policies aimed to older people, in force after 2007, are mostly integrated in the Strategy for Social Protection and Social Inclusion 2008-2010<sup>49</sup>. Indeed, as it was already mentioned in this report, the national priorities for social protection and social inclusion for the period 2008-2010 were based on two strategic intervention axes, namely: Axis 1 - 'to tackle the impact of demographic change and Axis 2 – "the promotion of social inclusion (reduction of inequalities)." Note that the first axis partly covers the challenges caused by ageing, since it gives priority to the promotion of quality active ageing and to the prevention and support in situations of dependency.

Apart from changes in the updating of social benefits received by the most vulnerable persons, the safeguarding of social and intergenerational cohesion has been based on significant changes in the paradigm of supporting older people in greatest need, particularly in what concerns the Solidarity Supplement for the Elderly, as well as a substantial investment, particularly since 2006, in the extension and qualification of the network of Social Services and Equipment, trying to facilitate people's access to equipment and quality services, particularly the key disadvantaged social groups, such as the elderly, children and persons with handicap.

The demographic changes caused by the national population ageing have been influencing the evolution of the labour market structure and, probably, its own functioning. In a context characterized by a relatively high labour market participation by older people<sup>50</sup>, the policies specifically oriented to the elderly continued to focus on the social security sustainability, following the Agreement of Social Security Reform, signed by the Government and the Social Partners in October 2006.

At the same time, and in what concerns the labour market, during the period under review, measures continued to be implemented in order to promote the participation of the population in general and of older people in particular, integrated in intervention policies aiming to improve employability and to prevent unemployment, to promote the access to employment and combat unemployment and social exclusion. These measures found political and programmatic expression in the National Employment Plans of 2005-2008 and 2008-2010, adequately framed by the National Action Plan for Growth and Employment, from 2005 to 2008 and the National Reform Plan for 2008-2010.

Portugal, in the last years, has had several changes in education and training systems, incorporating a strategy of lifelong learning (ALV) that includes measures aimed to older workers. In this context, we highlight: (i) the vocational training system reform, (ii) the Labor Code revision, and (iii) the pursuit and reassurance of the measures connected with the New Opportunities Initiative.

Given the new demographic and epidemiological patterns, situations of dependency and weakness in need of social and family support, undeniable challenges for all stakeholders arise, particularly in the health and social systems. Due to their innovative nature and scope of intervention as well as the results that were already achieved, the RNCCI continues to be an evolutionary process that seeks to ensure accessibility, equity and quality in health care and social support services in a sustained manner.

Of course there is much to be done and greater attention should be given to the issue of ageing in the public policies area, which has been delivered to different sectorial interventions. Considering that 2012 is the European Year of Active Ageing and Solidarity between Generations<sup>51</sup> it is hoped that more attention will be given to policies that promote an active, dignified and healthy ageing.

Although the developments verified within the scope of the elderly protection, resulting from the policies, instruments and legislation to which reference was made throughout this report, the demographic changes we are witnessing, and the consequent needs of improving the living conditions of this population will continue to present themselves as challenges in the near future, particularly in the context of the economic and financial crisis. In this sense, the XIX Constitutional Government, in office since 5 June 2011, foresees in its Social Emergency Programme some measures that could respond to the older people's needs, with highly degraded income and higher health care needs, namely: the maintenance of power purchase in what concerns rural and social

<sup>49</sup> [http://www.mtss.gov.pt/docs/ENPSIS2008\\_2010.pdf](http://www.mtss.gov.pt/docs/ENPSIS2008_2010.pdf)

<sup>50</sup> According to Eurostat, the employment rate in the EU27 for the group aged 55-64 was 49.7% in 2010, 4.3 pp. less than the national rate (54%), and it is important to notice the high participation of the Portuguese women in this age group (47%) compared with the European average (41.1%), with a difference of 5.9 pp.

<sup>51</sup> Decision no. 940/2011/EU of 14 September 2011



## Strategy and Planning Office

minimum pensions<sup>52</sup>; the Medicines Bank; the raising and improving of the Home Support Service response, the TeleAlarm and the Solidarity Line; the creation of innovative responses, such as the Night Centres; the improvement of the elderly access to health care services; and the strengthening and coordination between the health care and the social security sectors at the level of the National Network of Continued Care.

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<sup>52</sup> In the amount of €247, €227 and €189, respectively.



**Strategy and Planning Office**

# **ANNEXES**





## TABLE OF CONTENTS

### CHARTS

Chart 1 – Resident population – Annual estimates (1970 to 2010) and projections (2008 to 2060)	4
Chart 2 – Age pyramid (1970 and 2010)	4
Chart 3 - Age pyramid (2010 and 2050)	5
Chart 4 - Rate of natural and migratory effective increase (1992 to 2010)	5
Chart 5 – Synthetic fertility index (1970 and 2009)	6
Chart 6 – Ageing index by gender (1970 to 2010)	7
Chart 7 – Dependency index - Estimates 1970/2010 - Projection 2011/2060	8
Chart 8 - Dependency index – Annual estimates (1970 and 2010) and projections (2050)	8
Chart 9 – Evolution of the number of inactive people per 100 employees (1998 to 2010)	9
Chart 10 – Poverty risk among the elderly compared to the total (1995 to 2009)	10
Chart 11 – Poverty risk before and after social transfers 2004/2009	11
Chart 12 – Poverty risk among the elderly before and after social transfers 2004/2009	11
Chart 13 – Referred users	15
Chart 14 -Annual growth rate concerning the number of users assisted	16
Chart 15 – Discharge motive	17
Chart 16 – Evolution of disabled/dependent people in the RNCCI admission	17
Chart 17 - Percentage of users that have improved their physical autonomy in the RNCCI	18



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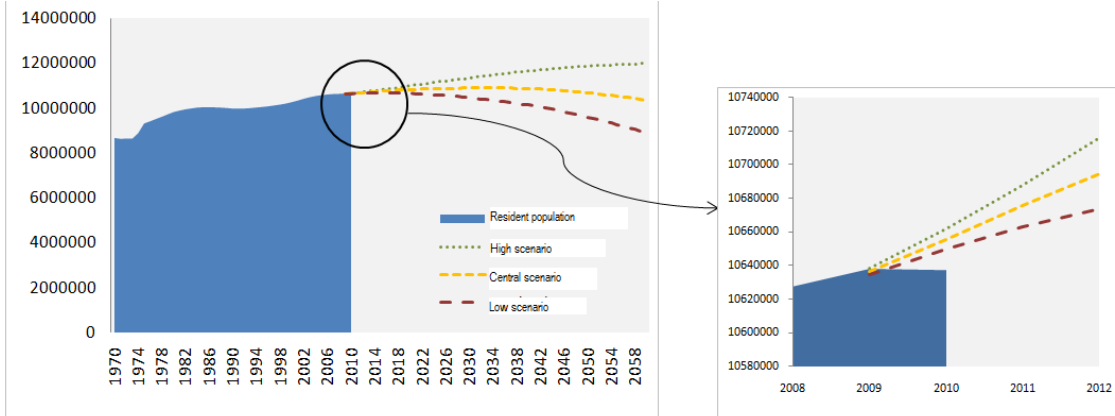
### TABLES

Table 1 - Synthetic fertility index (1970 to 2009)	6
Table 2 - Life expectancy at birth	6
Table 3 – Ageing index	7
Table 4 – Activity, employment and unemployment rates 1998-2010	9
Table 5 – Poverty risk before and after social transfers, by age group, 1995-2009	10
Table 6 – Evolution of the CSI beneficiaries' number	12
Table 7 - Total weight of Pensions as a % of GDP: Evolution between 2007 and 2060	12
Table 8 - Long-term projection of pension expenditure as a % of GDP. Situation in 2006 and 2009	13
Table 9 – PAll-Local Projects: Number of projects and beneficiaries 2007 – 2011	13
Table 10 - PAll-Central Projects: Number of beneficiaries 2006 – 2010	13
Table 11 – NATIONAL NETWORK FOR CONTINUED INTEGRATED CARE	14
Table 12 - NATIONAL NETWORK FOR CONTINUED INTEGRATED CARE	15
Table 13 - RNCCI – Distribution by age and gender	16
Table 14 – Destination of discharged users	16
Table 15 – Total number of users by social response	18
Table 16 – Total number of Agreements and Users, by social response types	19
Table 17 – Programme for the Extension of the Social Equipment Network (PARES)	19
Table 18 – Social Equipment Safety Supporting Measure (MASES), from 2008 to 2011	20
Table 19 – Evolution in the use of parental leaves (2005-2010)	21
Table 20 – Reasons for Referral 2010	21



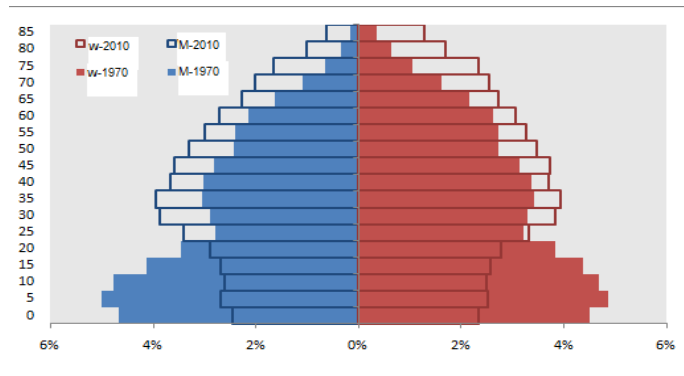
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**Chart 1**  
**Resident population – Annual estimates (1970 to 2010) and projections (2008 to 2060)**



Source: Annual estimates of the resident population, INE, IP and Eurostat, EUROPOP 2008

**Chart 2**  
**Age pyramid (1970 and 2010)**

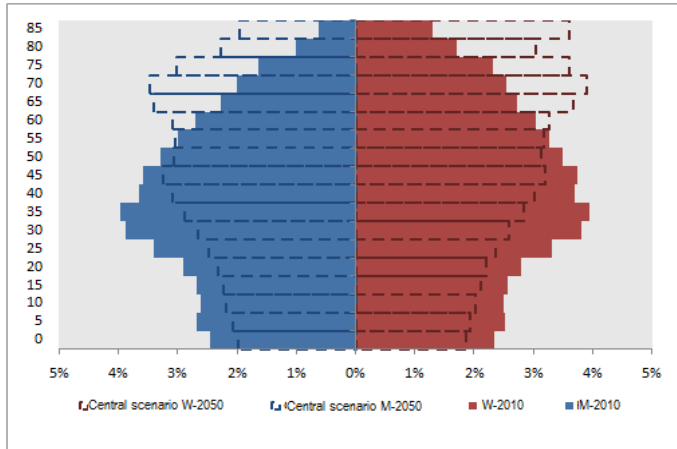


Source: Annual Estimates of Resident Population, Live births and Deaths, from the National Statistical Institute (INE, IP)



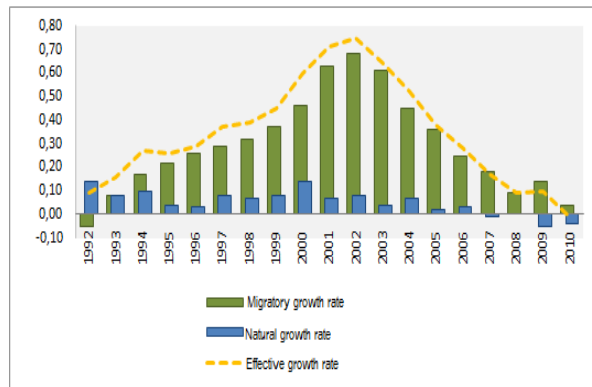
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Chart 3  
Age pyramid (2010 and 2050)



Source: Annual Estimates of Resident Population, Live births and Deaths, from the INE, IP e Eurostat, EUROPOP 2008

Chart 4  
Rate of natural and migratory effective increase, (1992 to 2010)





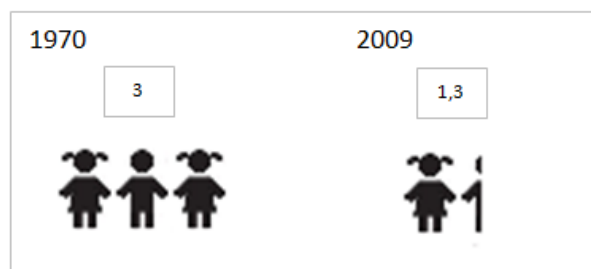
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**Table 1**  
**Synthetic fertility index (1970 to 2009)**

	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979
Synthetic	3	2,99	2,85	2,76	2,69	2,75	2,81	2,68	2,45	2,31
	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989
Fertility	2,3	2,1	2,1	2,0	1,9	1,7	1,7	1,6	1,6	1,6
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Index	1,6	1,6	1,5	1,5	1,4	1,4	1,4	1,5	1,5	1,5
	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
	1,6	1,5	1,5	1,4	1,4	1,4	1,4	1,3	1,4	1,3

Source: Demographic indicators, INE, IP

**Chart 5**  
**Synthetic fertility index (1970 and 2009)**



Source: Demographic indicators, INE, IP

**Table 2**  
**Life expectancy at birth**

		1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	
Life expectancy at birth	MW	67,1	66,8	68,5	67,6	68,2	68,4	69,0	70,1	70,5	71,0	
	M	64,0	63,6	65,3	64,5	64,8	64,7	65,3	66,5	67,0	67,9	
	W	70,3	70,1	71,5	70,7	71,4	72,1	72,6	73,7	73,8	74,6	
			1980	1981	1982	1983	1984	1985	1986	1987	1988	1989
	MW	71,1	71,7	72,5	72,4	72,6	72,9	73,4	73,8	73,8	74,4	
	M	67,8	68,2	69,0	68,9	69,1	69,4	69,9	70,3	70,3	70,9	
	W	74,8	75,2	76,0	75,8	76,1	76,4	76,8	77,2	77,3	77,8	
			1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
	MW	74,1	74,1	74,4	74,6	75,0	75,4	75,3	75,5	75,8	76,0	
	M	70,6	70,6	70,8	71,0	71,5	71,8	71,7	71,9	72,2	72,5	
	W	77,5	77,6	78,0	78,2	78,5	79,0	79,0	79,1	79,4	79,6	
			2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
MW	76,4	76,9	77,1	77,3	77,8	78,2	78,5	78,7	78,9	79,2		
M	72,9	73,4	73,7	74,0	74,5	74,8	75,2	75,5	75,8	76,1		
W	79,9	80,4	80,6	80,6	81,0	81,3	81,6	81,7	81,8	82,1		

Source: Demographic indicators, INE, IP



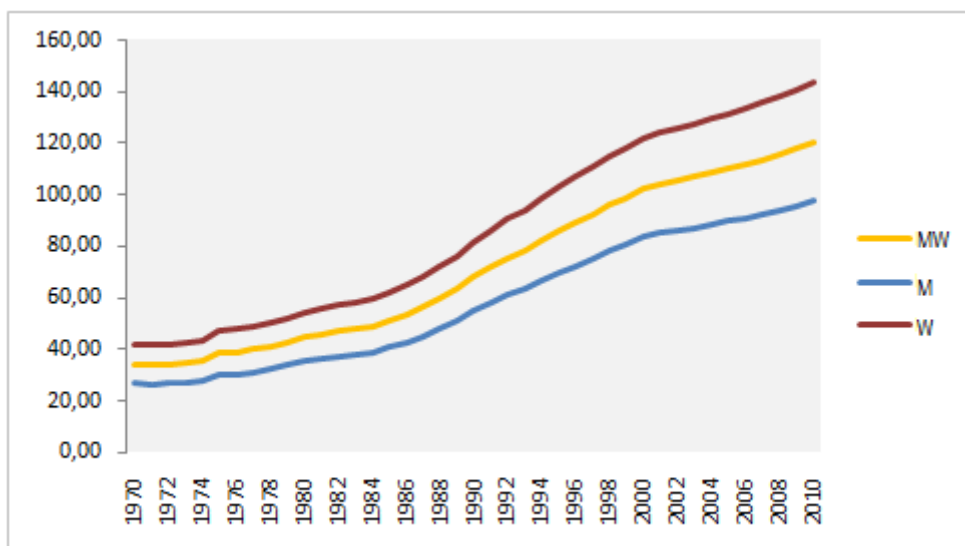
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**Table 3**  
**Ageing index**

		1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	
Ageing index	MW	34,0	33,9	34,2	34,6	35,3	38,4	38,9	39,8	41,1	42,8	
	M	26,7	26,6	26,9	27,1	27,5	29,9	30,3	31,2	32,3	33,9	
	W	41,5	41,4	41,8	42,5	43,2	47,0	47,7	48,8	50,2	52,2	
			1980	1981	1982	1983	1984	1985	1986	1987	1988	1989
	MW	44,9	46,0	47,0	48,0	49,1	51,3	53,6	56,4	59,5	63,5	
	M	35,7	36,6	37,4	38,1	39,0	40,7	42,7	45,1	47,8	51,2	
	W	54,4	55,8	57,1	58,3	59,8	62,3	65,0	68,2	71,8	76,3	
			1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
	MW	68,1	72,0	75,5	78,7	82,2	85,8	89,2	92,7	95,9	98,8	
	M	55,3	58,4	61,3	63,8	66,6	69,6	72,3	75,3	78,0	80,5	
	W	81,5	86,2	90,4	94,2	98,5	102,9	106,9	111,1	114,8	118,0	
			2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
MW	102,2	104,2	105,5	106,8	108,7	110,1	111,7	113,6	115,5	117,6		
M	83,6	85,1	86,1	87,2	88,7	89,7	90,9	92,4	94,0	95,7		
W	121,8	124,2	125,8	127,5	129,8	131,5	133,5	135,8	138,1	140,6		
		2010										
MW	120,1											
M	97,9											
W	143,5											

Source: Demographic indicators, INE, IP

**Chart 6**  
**Ageing index by gender (1970 to 2010)**

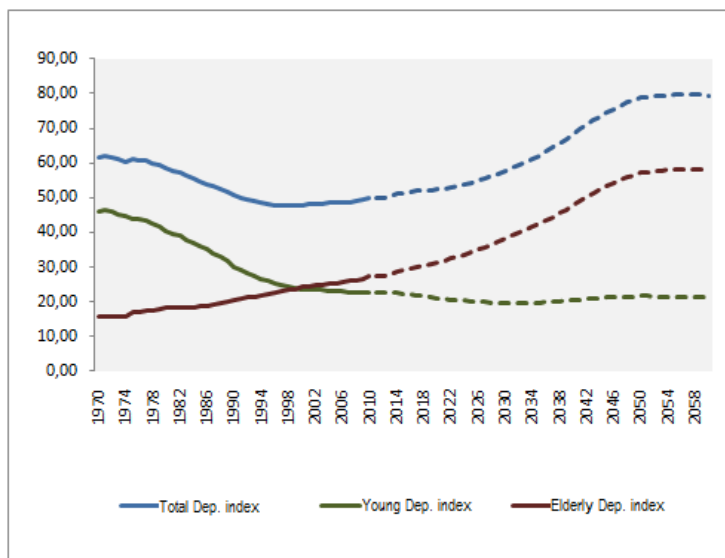


Source: Demographic indicators, INE, IP



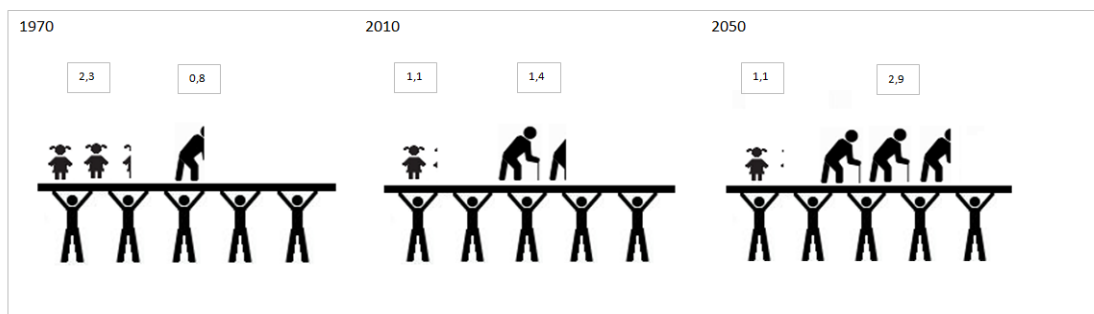
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**Chart 7**  
**Dependency index - Estimates 1970/2010 - Projection 2011/2060**



Source: Demographic indicators, INE, IP

**Chart 8**  
**Dependency index – Annual estimates (1970 and 2010) and projections (2050)**



Source: Demographic indicators, INE, IP e Eurostat, EUROPOP 2008



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**Table 4**  
**Activity, employment and unemployment rates 1998-2010**

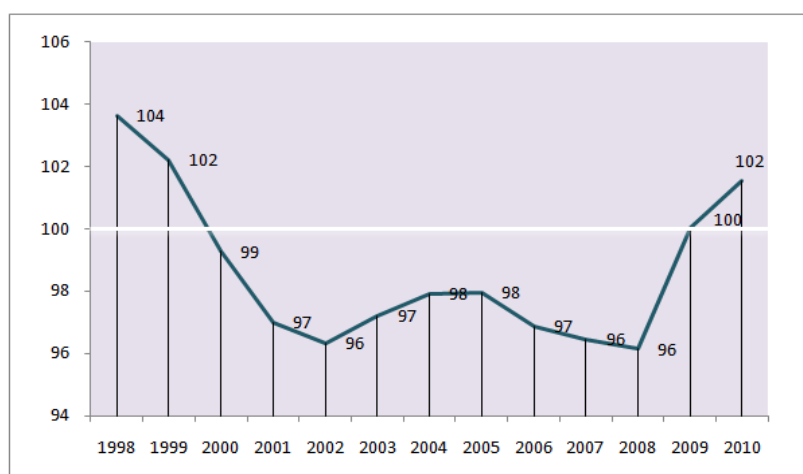
											1998	1999	2000	
Activity rate by gender	MW										50,3	50,5	51,1	
	M										57,4	57,5	57,9	
	W										43,7	44,0	44,8	
		2001	2002	2003	2004	2005	2006	2007	2008	2009	2010			
	MW	51,7	52,2	52,3	52,2	52,5	52,8	53,0	53,0	52,5	52,5			
	M	58,4	58,7	58,4	58,1	57,9	58,2	58,2	58,2	57,3	57,0			
	W	45,5	46,1	46,6	46,7	47,4	47,7	48,1	48,0	48,0	48,3			

											1998	1999	2000	
Employment rates by gender	MW										57,4	57,7	58,5	
	M										67,0	66,8	67,6	
	W										48,6	49,4	50,3	
		2001	2002	2003	2004	2005	2006	2007	2008	2009	2010			
	MW	59,1	58,9	58,2	57,8	57,5	57,7	57,6	57,8	56,0	55,2			
	M	68,0	67,6	66,2	65,6	64,8	65,1	65,0	64,9	62,2	61,2			
	W	50,9	50,9	50,8	50,6	50,8	50,8	50,9	51,2	50,3	49,6			

											1998	1999	2000	
Unemployment rate by gender	MW										4,9	4,4	3,9	
	M										3,9	3,9	3,1	
	W										6,2	5,0	4,9	
		2001	2002	2003	2004	2005	2006	2007	2008	2009	2010			
	MW	4,0	5,0	6,3	6,7	7,6	7,7	8,0	7,6	9,5	10,8			
	M	3,2	4,1	5,5	5,8	6,7	6,5	6,6	6,5	8,9	9,8			
	W	5,0	6,0	7,2	7,6	8,7	9,0	9,6	8,8	10,2	11,9			

Source: Employment survey, INE, IP

**Chart 9**  
**Evolution of the number of inactive people per 100 employees (1998 to 2010)**



Source: Employment survey, INE, IP





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**Table 5**  
**Poverty risk before and after social transfers, by age group, 1995-2009**

				1995		1996		1997		1998		1999					
Poverty risk (after social transfers)	Total			23		21		22		21		21					
	Aged less than 16			26		23		25		26		26					
	From 16 to 64 years																
	Aged 65 or more			38		36		37		35		33					
		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009						
Poverty risk before social transfers (except pensions)	Total	21		20		20,4		19,4		18,5		18,1		18,5		17,9	
	Aged less than 16	26		27		24,2		22,9		19,8		20,8		22,7		21,8	
	From 16 to 64 years	17,4		16,4		17,4		16,4		16,1		15,5		16,5		16,3	
	Aged 65 or more	33		30		28,9		27,6		26,1		25,5		22,3		20,1	

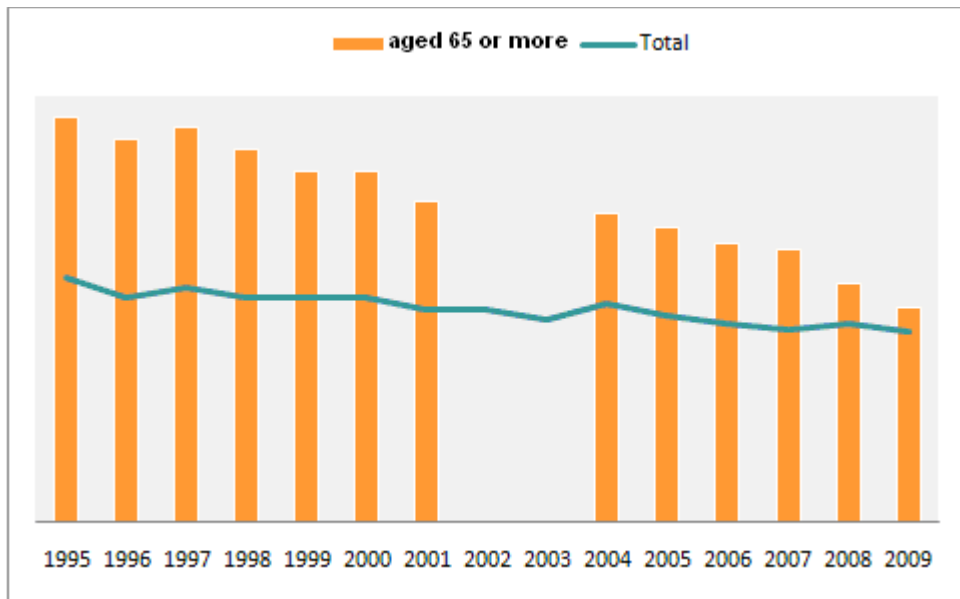
				1995		1996		1997		1998		1999					
Poverty risk before social transfers (including pensions)	Total			27		27		27		27		27					
	Aged less than 16 years																
	From 16 to 64 years																
	Aged 65 or more			41		38		41		40		38					
		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009						
Poverty risk before social transfers (including pensions)	Total	27		24		26,5		25,7		25,1		24,2		24,9		24,3	
	Aged less than 16 years	31,5		30,2		31,5		30,2		27,0		27,2		29,5		29,4	
	From 16 to 64 years	23,6		23,0		23,6		23,0		23,2		22,2		23,7		23,4	
	Aged 65 or more	37		34		32,9		31,8		30,9		29,2		24,9		23,1	

				1995		1996		1997		1998		1999					
Poverty risk before social transfers (including pensions)	Total			37		37		37		38		39					
	Aged less than 16			33		32		35		37		40					
	From 16 to 64 years			29		29		29		29		30					
	Aged 65 or more			76		75		76		76		77					
		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009						
Poverty risk before social transfers (including pensions)	Total	38		37		41,3		40,8		40,2		40,0		41,5		41,5	
	Aged less than 16	41		39		34,9		33,3		29,7		30,3		32,4		32,2	
	From 16 to 64 years	29		28		32,7		32,0		31,6		30,9		32,5		32,3	
	Aged 65 or more	76		74		81,8		82,0		83,5		84,2		84,5		84,5	

Source: Survey on income and living conditions, INE, IP

**Chart 10**  
**Poverty risk among the elderly compared to the total (1995 a 2009)**



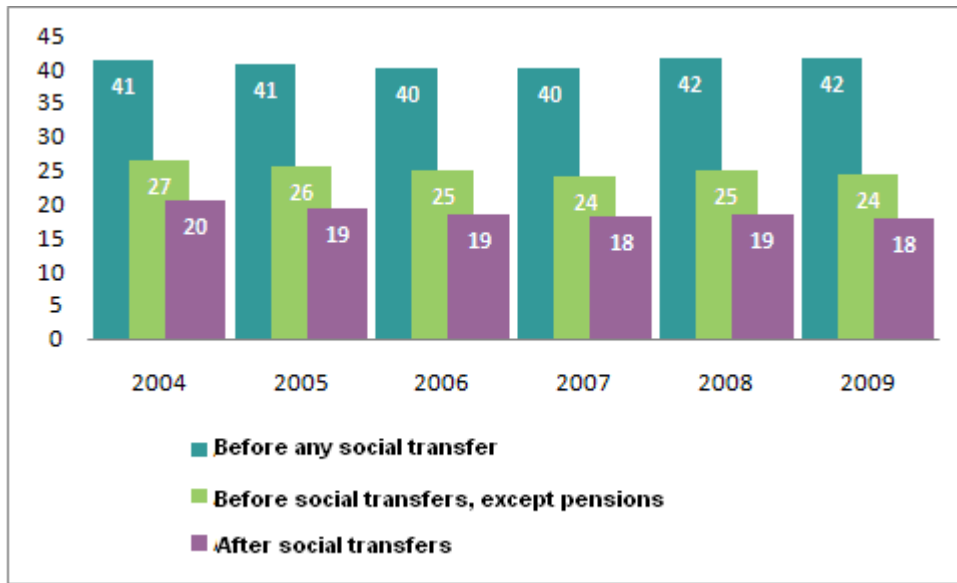
Source: Survey on income and living conditions, INE, IP

**Chart 11**



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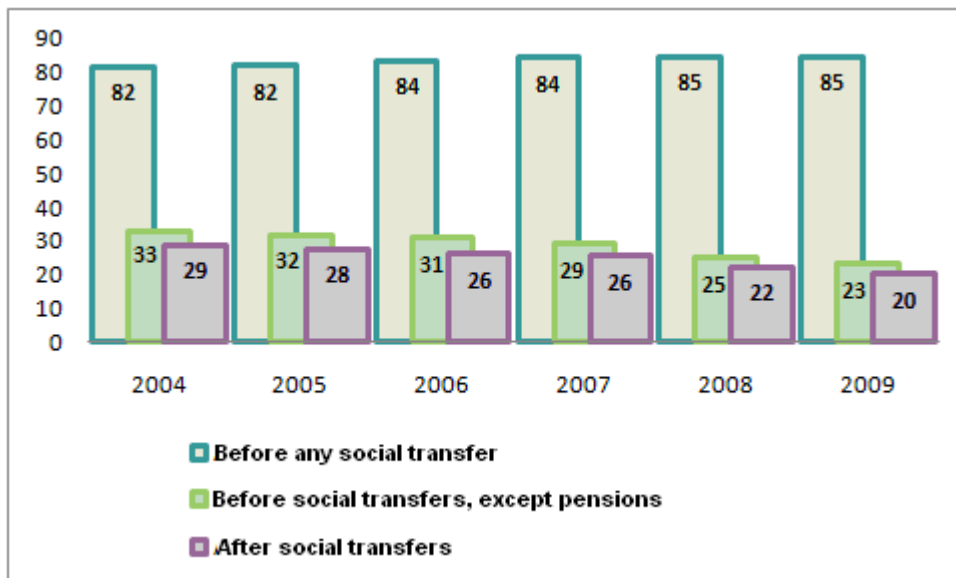
Poverty risk before and after social transfers 2004/2009



Source: Survey on income and living conditions, INE, IP

Chart 12

Poverty risk among the elderly before and after social transfers 2004/2009



Source: Survey on income and living conditions, INE, IP



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**Table 6**  
**Evolution of the CSI beneficiaries' number**

	2006	2007	2008	2009	2010
Women	13.291	38.349	116.501	149.453	158.704
Men	4.728	16.263	57.871	73.505	76.357
<b>Total</b>	<b>18.019</b>	<b>54.612</b>	<b>174.372</b>	<b>222.958</b>	<b>235.061</b>

Source: II, IP (data concerning the month of December of each year)

**Table 7**  
**Total weight of Pensions as a % of GDP: Evolution**  
**between 2007 and 2060**

<b>Pensions</b>		
	<b>2007</b>	<b>2007-60</b> <b>(variation)</b>
<b>Portugal</b>	<b>11.4</b>	<b>2.1</b>
<b>European Union</b>	<b>10.2</b>	<b>2.4</b>
<b>Eurozone</b>	<b>11.1</b>	<b>2.8</b>

Source: Economic Policy Committee (European Commission) – The 2009 Ageing Report



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**Table 8**  
**Long-term projection of pension expenditure as a % of GDP. Situation in 2006 e 2009**

		2005	2007	2020	2030	2040	2050
Ageing 2006	Report	11.5	11.7	14.1	16.0	18.8	20.8
Ageing 2009	Report	10.9	11.4	12.4	12.6	12.5	13.3

Source: Economic Policy Committee (European Commission) – The 2009 Ageing Report

**Table 9**  
**PAII-Local Projects: Number of projects and beneficiaries 2007 – 2011**

Projects	2007		2008		2009-2011	
	No. of ongoing projects	No. of covered beneficiaries	No. of ongoing projects	No. of covered beneficiaries	No. of ongoing projects	No. of covered beneficiaries
SAD	37	1538	0	0	16	751
FORHUM	11	1313	0	0	2	965

**Table 10**  
**PAII-Central projects: Number of beneficiaries 2006 – 2010**

Projects	2007	2008	2009-2010
	No. of covered beneficiaries	No. of covered beneficiaries	No. of covered beneficiaries
Third age Season-tickets	<b>a)</b>	<b>a)</b>	<b>a)</b>
Health and Thermal treatment for the Elderly	4809	4274	4859
Promotion of Human Resources Training	1128	2123	5830 <b>b)</b>

**a)** Transport companies do not present any Annual Report; therefore it is not possible to calculate the number of beneficiaries covered by this project.

**b)** The data are only from 2009, since the Protocols with the Union of the Portuguese Mutualities and the Union of the Portuguese Charitable institutions were terminated with effect from 31/12/2009.



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**Table 11**  
**NATIONAL NETWORK FOR CONTINUED INTEGRATED CARE**

THE IMPLEMENTATION PLAN MONITORING 2011 (PI 2011 - Approves SEAS AND SESS)							
TOTAL MAINLAND		NORTH	CENTRE	LISBON VT	ALENTEJO	ALGARVE	TOTAL
RECOVERY UNIT	PI 2011	334	292	150	135	110	1.021
	implemented	<b>316</b>	<b>202</b>	<b>157</b>	<b>135</b>	<b>80</b>	<b>890</b>
	implementation rate	94,61%	69,18%	104,67%	100,00%	72,73%	87,17%
MEDIUM-TERM REHABILITATION UNIT	PI 2011	639	654	440	148	104	1.985
	implemented	<b>534</b>	<b>581</b>	<b>363</b>	<b>148</b>	<b>104</b>	<b>1.730</b>
	implementation rate	83,57%	88,84%	82,50%	100,00%	100,00%	87,15%
LONG-TERM SUPPORT UNIT	PI 2011	1.201	918	637	308	252	3.316
	implemented	<b>891</b>	<b>761</b>	<b>541</b>	<b>302</b>	<b>219</b>	<b>2.714</b>
	implementation rate	74,19%	82,90%	84,93%	98,05%	86,90%	81,85%
PALLIATIVE CARE UNIT	PI 2011	55	65	78	17	25	240
	implemented	<b>43</b>	<b>45</b>	<b>75</b>	<b>12</b>	<b>10</b>	<b>185</b>
	implementation rate	78,18%	69,23%	96,15%	70,59%	40,00%	77,08%
TOTAL	PI 2011	2.229	1.929	1.305	608	491	6.562
	implemented	<b>1.784</b>	<b>1.589</b>	<b>1.136</b>	<b>597</b>	<b>413</b>	<b>5.519</b>
	implementation rate	80,04%	82,37%	87,05%	98,19%	84,11%	84,11%
UMDR AND ULDM	PI 2011	1.840	1.572	1.077	456	356	5.301
	Implemented	<b>1.425</b>	<b>1.342</b>	<b>904</b>	<b>450</b>	<b>323</b>	<b>4.444</b>
	Implementation rate	77,45%	85,37%	83,94%	98,68%	90,73%	83,83%

Source: ISS, I.P., Implementation Plan Monitoring of 2011, June 2011

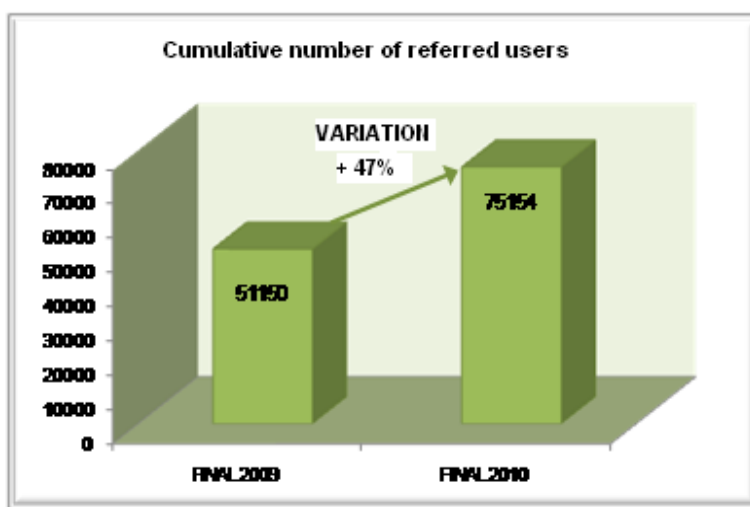


**Table 12**  
**NATIONAL NETWORK FOR CONTINUED INTEGRATED CARE**

No. of ECCI, Places and average capacity of the ECCI by region 2010 – 1 <sup>st</sup> Semester of 2011						
REGIONS	No. of ECCI		Places		Average no. of places	
	2010	2011	2010	2011	2010	2011
North	71	80	1410	1610	20	20
Centre	42	38	1557	1465	37	39
LVT	58	58	2744	2104	47	36
Alentejo	15	31	402	550	27	18
Algarve	28	28	1950	1390	70	50
<b>TOTAL</b>	<b>214</b>	<b>235</b>	<b>8063</b>	<b>7119</b>	<b>38</b>	<b>30</b>

Source; UMCCI, monitoring Interim Report of the National Network of continued Integrated Care, July 2011 (draft)

**Chart 13**  
**Referred users**



Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011

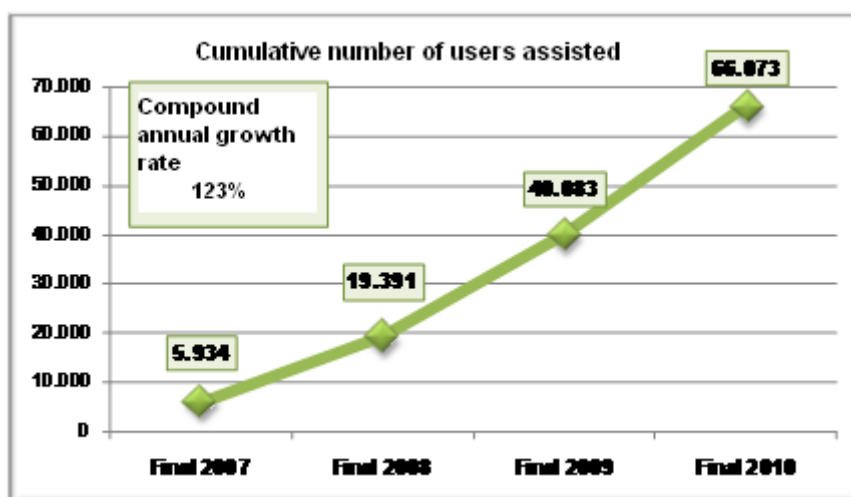


**Table 13**  
RNCCI – Distribution by age and gender

Age and Gender				
Age group	Women		Men	
	2009	2010	2009	2010
18-49	2%	2%	4%	4%
50-64	5%	6%	8%	9%
65-79	20%	21%	19%	19%
>80	26%	25%	16%	15%
<b>Total</b>	<b>53%</b>	<b>54%</b>	<b>47%</b>	<b>46%</b>

Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011

**Chart 14**  
Annual growth rate concerning the number of users assisted



Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011

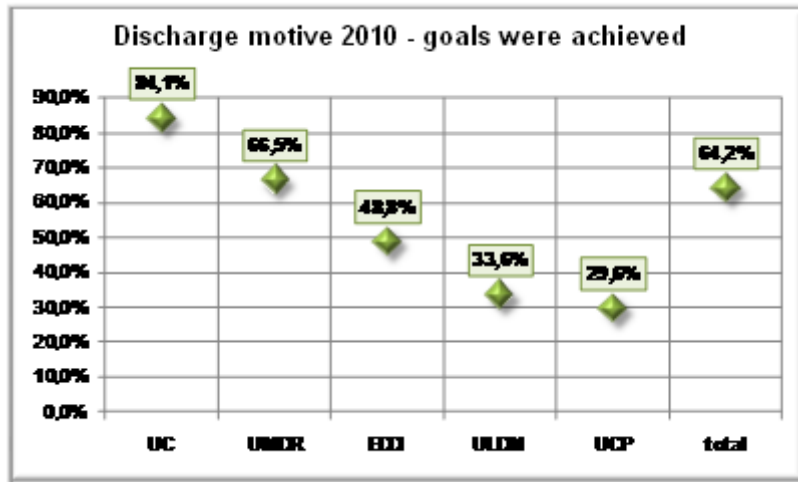
**Table 14**  
Destination of discharged users

Destination of discharged users by typology 2010					
	UC	UMDR	ULDM	ECCI	UCP
<b>DESTINATION</b>					
Home WITH social support	61,6%	57,1%	45,8%	63,7%	26,5%
Home WITHOUT social support	28,5%	12,4%	7,4%	9,7%	21,9%
Social answer or equipment	6,8%	14,0%	13,8%	5,1%	6,3%
Transferred to other typology	1,9%	9,8%	15,0%	18,6%	32,8%
Transferred to the proximity	1,2%	6,7%	18,0%	2,9%	12,5%

Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011

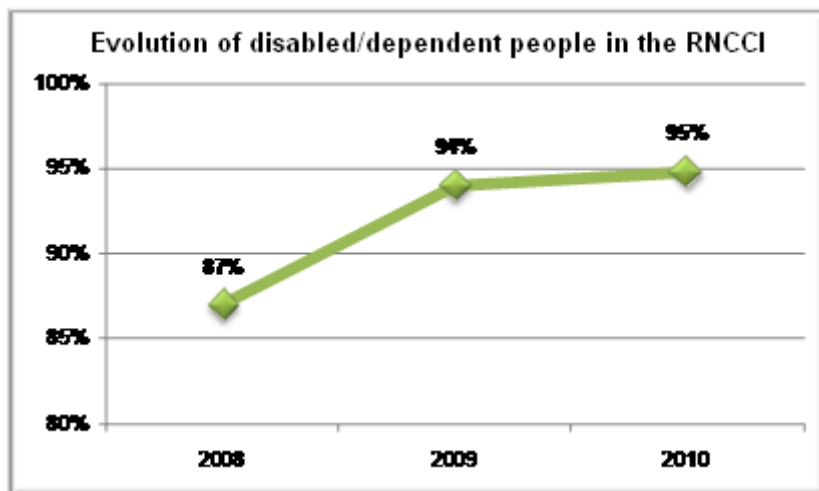


Chart 15  
Discharge motive



Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011

Chart 16  
Evolution of disabled/dependent people in the RNCCI

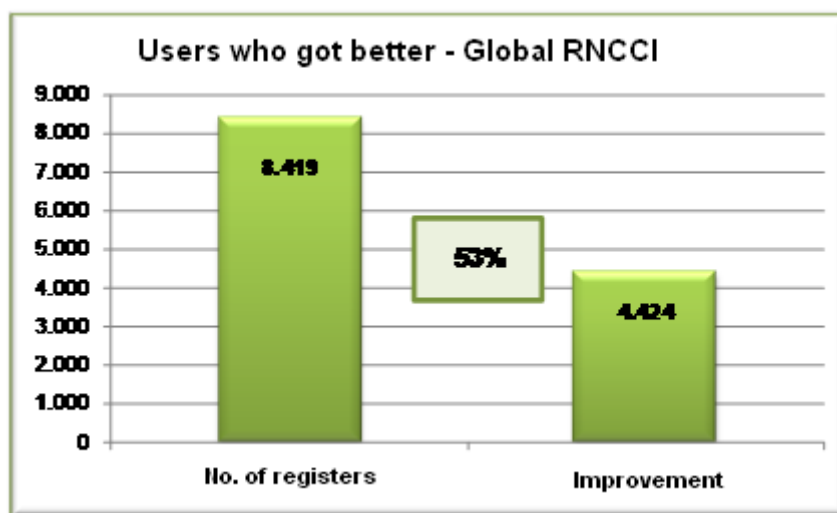


Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011





**Chart 17**  
**Percentage of users that have improved their physical autonomy in the RNCCI**



Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011

**Table 15**  
**Total number of users by social response**

	No.	%
Home Support Service	67.633	39,0
Nursing Home	51.009	29,4
Day Centre	42.103	24,3
Gathering Centre	12.504	7,2
Night Centre	165	0,1
Family Home	8	0,0
	173.422	100,0

Source: SISS COOP



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**Table 16**  
Total number of agreements and users, by social response types

	Home Support service		Nursing Home		Day Centre		Gathering Centre		Night Centre		Family Home	
	Agree.	Users	Agree.	Users	Agree.	Users	Agree.	Users	Agree.	Users	Agree.	Users
<b>2011</b>	2.365	67.633	1.313	51.009	1.881	42.103	451	12.504	17	165	1	8
<b>2010</b>	2.306	65.552	1.284	49.971	1.871	42.093	457	12.692	20	195	1	8
<b>2009</b>	2.285	64.268	1.234	48.629	1.845	41.701	463	13.155	21	205	1	8
<b>2008</b>	2.883	60.807	1.254	47.700	1.853	38.015	454	12.081	17	245	1	8
<b>2007</b>	2.911	60.337	1.184	46.153	1.823	37.772	460	12.929	25	302	0	0

Source: Indicators of Social Action Management 2010 - Supplement Cooperation except 2011 (2011 - SISS COOP)

**Table 17**  
Programme for the Extension of the Social Equipment Network (PARES)

Social Response type	No. of Projects	Nursing Home		Day Centre		SAD		TOTAL NO. OF PLACES
		No. of places to create	No. of places to remodel	No. of places to create	No. of places to remodel	No. of places to create	No. of places to remodel	
<b>PARES I</b>	149	2.618	174	3.022	224	2.448	484	8.970
<b>PARES II</b>	136	2.511	45	2.408	260	2.944	528	8.696
<b>PARES III</b>	0	0	0	0	0	0	0	0
<b>TOTAL</b>	<b>285</b>	<b>5.129</b>	<b>219</b>	<b>5.430</b>	<b>484</b>	<b>5.392</b>	<b>1.012</b>	<b>17.666</b>



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**Table 18**  
**Social Equipment Safety Supporting Measure (MASES), from 2008 to 2011**

Districts	No. Projects Older people area	No. of benef. covered in Nursing Home	No. of benef. covered in Day Centre	No. of benef. covered in Night Centre	No. of benef. covered in SAD	No. of benef. covered in integrated SAD	No. of benef. covered in Gathering Centre
Aveiro	45	11.787	6.669	253	8.081	218	1.101
Beja	7	406	220	-	200	-	-
Braga	8	500	83	-	71	-	10
Bragança	25	543	595	-	581	-	110
C.Branco	28	1.508	321	48	134	-	-
Coimbra	44	1.265	1.094	65	1.267	-	130
Évora	27	1.007	731	-	937	150	191
Faro	8	365	150	40	200	-	-
Guarda	54	436	282	-	402	-	-
Leiria	31	879	390	30	1.001	42	85
Lisboa	16	584	420	-	182	9	57
Portalegre	18	839	309	-	605	-	50
Porto	28	939	490	70	807	-	200
Santarém	35	581	758	-	108	17	113
Setúbal	9	209	268	-	175	-	60
V.Castelo	6	418	-	-	-	-	-
V. Real	14	500	178	-	671	-	-
Viseu	16	563	250	-	297	-	-
<b>Total</b>	<b>418</b>	<b>23.328</b>	<b>13.208</b>	<b>608</b>	<b>16.717</b>	<b>438</b>	<b>2.107</b>



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**Table 19**  
**Evolution in the use of parental leaves (2005-2010)**

Years	2005	2007	2008	2009	2010
Born children*	109.399	102.492	104.594	99.491	101.800
Men that received the compulsory leave allowance (5 days until April 2009 and 10 days since May 2009)	42.982	45.687	45.973	53.278	58.064
(% of born children)	39,3	44,6	44,0	53,6	57,0
(% of the total of women's leave)	56,5	60,7	61,2	62,6	71,2
Men that received parental leave allowance, exclusively received by the father (15 days until April 2009 and 10 days since May 2009)	32.945	37.552	38.442	44.447	49.816
(% of born children)	30,1	36,6	36,8	44,7	48,9
(% of the total of women's leave)	43,3	49,9	51,2	52,2	61,1
Men that shared the 120/150 day leave	413	551	577	8.593	19.711
(% of born children)	0,4%	0,5%	0,6%	8,6%	19,4%
(% of the total of women's leave)	0,5%	0,7%	0,8%	10,1%	24,2%
Women that received 120/150 day parental leave allowance	76.125	75.297	75.128	85.085	81.514
(% of born children)	69,6	73,5%	71,8%	85,5%	80,1%
Men that received the paternity social allowance/parental social allowance**				3.945	7.100
(% of born children)				4,0%	7,0%
(% of the total of leaves from women the benefit from the maternity social allowance)				17,9%	33,4%
Women that received the maternity social allowance/parental social allowance*			7.257	22.094	21.244
(% of born children)			6,9%	22,2%	20,9%

**Sources:** Information Technology Institute, P.I – MTSS; INE

**Observations:** n.a. – not available; \*Live-births (provisional data for 2010: number of Guthrie tests from the INSA); \*\*this measure only exists since 2008; the same beneficiary may have had more than one type of benefit processed. This fact should be considered in the data use and analysis.

**Table 20**  
**Reasons for Referral 2010**

Reasons for Referral 2010						
	UC	UMDR	ULDM	ECCI	UCP	National
<b>Reasons</b>						
DLA Dependency	92%	<b>94%</b>	89%	84%	78%	90%
User/caregiver training	88%	86%	80%	<b>91%</b>	74%	85%
Rehabilitation	<b>86%</b>	83%	28%	27%	3%	59%
Post surgical care	<b>39%</b>	20%	5%	20%	4%	21%
Wound/pressure ulcers treatment	6%	8%	19%	<b>44%</b>	9%	15%
Cardiovascular disease	15%	<b>19%</b>	15%	16%	3%	15%
Therapeutic scheme management	4%	4%	23%	13%	<b>56%</b>	13%
Multiple pressure ulcers	2%	5%	11%	<b>16%</b>	4%	7%
Caregiver's rest	1%	4%	<b>30%</b>	2%	5%	7%
Devices maintenance	2%	2%	<b>15%</b>	7%	9%	5%
Post traumatic care	4%	4%	2%	3%	0%	3%
Cognitive impairment	1%	2%	<b>7%</b>	4%	4%	3%
COPD	2%	2%	3%	3%	2%	3%
Malnutrition	1%	1%	1%	1%	<b>4%</b>	1%
Hepatopathy	1%	1%	1%	1%	3%	1%

Source: UMCCI, Monitoring report of the development and activity of the National Network for Continued Integrated Care 2010, March 2011