



Recommendation 1254 (1994)¹

Medical and welfare rights of the elderly: ethics and policies

Parliamentary Assembly

1. The Assembly notes that there is a risk that, as they take on greater importance, the scientific and medical lobbies, as well as the economic lobby, will supplant political and legislative power when it comes to defining the main lines of welfare policy. The traditional rules of social welfare are therefore in danger of being replaced by policy rules of purely financial considerations.
2. In order to avoid this unacceptable prospect, the political authorities, in their capacity as guardians of democracy, must make decisive choices in social matters relating to vulnerable sections of the community. Because of its human and budgetary importance, its tangible nature and the seriousness of the problems faced, the medical and social welfare of the elderly is at the centre of this debate.
3. The end of the division of Europe and the ideological divide should provide an opportunity, in the medium to long term, for a more objective joint appraisal to be made of what policies to adopt in response to the ageing of our populations and the place of the elderly in society. It will be necessary for society to make fundamental choices, which will have to be put to the citizens' vote.
4. Nevertheless, for the moment, the Assembly cannot fail to note that the situation and the concerns of the two Europes, East and West, are currently quite different and call for correspondingly different measures.
5. The present economic situation in central and eastern Europe makes it impossible to draw up any long-term plan for social protection; what it demands is urgent action to preserve minimum social protection, centred on the most vulnerable sections of the community, and in particular on the elderly; these social priorities are essential in order to ensure that the transition is politically viable.
6. Western Europe, for its part, is in a recession. It must maintain cohesion between generations. To achieve this it must aim to preserve jobs for the active population, maintain the income of the retired and look after the sick.
7. Accordingly, the Assembly recommends that the Committee of Ministers call upon and help the states of central and eastern Europe, whether already members or candidates wishing to join the Council of Europe, to take minimum short-term measures aiming:
 - 7.1. to guarantee adequate minimum incomes for the vulnerable core of the community (the unemployed, the sick, the disabled and the elderly) in order to avoid tension and conflict;
 - 7.2. to combat the deterioration of the public health system and to maintain or establish simple structures for primary health care (community health centres for example), which are less expensive and financially accessible for people with very low incomes, such as the elderly;
 - 7.3. to develop local services for the elderly and introduce or develop training for welfare workers;
 - 7.4. to make public social services more effective so as to provide real support for the community and families.

1. See [Doc. 7170](#), report of the Social, Health and Family Affairs Committee, rapporteur: Ms Özver. Text adopted by the Standing Committee, acting on behalf of the Assembly, on 10 November 1994.



8. In addition, the Assembly recommends that the Committee of Ministers call on the western European member states to reaffirm their attachment to social cohesion and show this by adopting:

8.1. an employment and labour policy which establishes a new place for the elderly in active economic life:

- a. by breaking down the clear-cut distinction drawn today between periods of activity and inactivity and between those who work and those who do not work;
- b. by rethinking the concept of hierarchy in the workplace in order to avoid the adverse effects of gerontocracy and the risks of rejection of the elderly;
- c. by providing vocational training which enables mature workers to adapt to changes and thus avoid the alienation and exclusion that occur because they are elderly rather than because they are not efficient;

8.2. a retirement and pensions policy which encourages solidarity between the generations and guarantees the right to retirement, representation and involvement in the community for pensioners and the independence and neutrality of pension funds;

8.3. a suitable policy for the control of public health costs which avoids financial excesses and rejects ethical aberrations such as unequal treatment of patients, or treatment withdrawal or euthanasia on financial grounds;

8.4. a health and social policy which gives priority to:

- a. an all-round approach to providing for the risk of dependence;
- b. the use of new technology making it possible to "delocalise" medical care and provide treatment in the home;
- c. an increase in local services for the elderly providing a better quality of life and creating large numbers of jobs.

8.5. The Assembly further recommends that the Committee of Ministers invite the various relevant steering committees to take into account this recommendation when implementing the intergovernmental programme of activities.