



Misión Colombia envejece

Una investigación viva



Acknowledgements

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1

Chapter: Demographics and Perceptions of Old Age

1 Chapter: Demographics and Perceptions of Old Age

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Ageing is a global phenomenon. We are witnessing unprecedented growth in the population over 60 while simultaneously observing a decline in the population under 15 years old. This demographic transition can be attributed to the global decline in fertility and mortality rates, which play a significant role in the ageing process. Moreover, the growth of the older population is not uniform across countries

as it responds to specific social, cultural, and economic factors.

According to Huenchuan, Colombia is at a moderately advanced stage of population ageing. Ageing processes vary across regions within the country, with some areas experiencing a higher degree of ageing than others. This diversity poses challenges in terms of public policy to address the social protection, healthcare,

pension, and caregiving needs of the older population, while adhering to the principles of active ageing advocated by the World Health Organization. The objective of this chapter is to analyze the evolution of the Colombian population between 1985 and 2070 by differentiating the demographic shifts occurring at the aggregate level (households and individuals), and exploring the perception of old age among the Colombian population.

1.1 Conceptual Framework



Ageing is a complex process that can be examined from various perspectives, including biological, physiological, anthropological, and sociocultural. The first two focuses on the decline in functional capacities and physical changes that occur as a result of the natural passage of time. The last two recognize ageing as a social construct influenced by the norms and cultural factors prevalent in each society.

Furthermore, the perception of old age also carries a psychosocial component. There is a prevailing stereotype in society that associates well-being with youth. As a

result, older people may adjust their self-perception and how they perceive their own ageing experience in accordance with stereotypes due to their culture.

Along the ageing process, people's self perception evolves. Diehl et al. suggest that beyond the age of 65, there is a growing awareness of social and physical losses, which tends to increase until around the age of 80. Additionally, personal development gradually declines between the ages of 55 and 70, with a more noticeable decline occurring around the age of 70. These age milestones are closely associated with the normative retirement age, as the onset of old age is often linked to the age at which individuals retire. Consequently, the chronological aspect of ageing is intertwined with sociocultural influences.

Demographic ageing is influenced not only by trends in mortality and fertility rates but also by migration patterns. Older people tend to migrate less frequently than younger individuals, and this phenomenon can have significant implications for the age structure of countries. Moreover, as individuals age, so do households. Demographic ageing leads to a higher number of households with older people. Multiple generations coexist within the same living space and new social relationships emerge to provide care for its older members.

1.2. Findings



1.2.1. Latin America

As reported by the United Nations, older people in Latin America currently account for 13% of the population, a figure that is projected to rise to 17% (2050). While this percentage may be higher in other regions globally, Latin America stands out for its rapidly ageing population.

Population ageing in Latin America and the Caribbean can be attributed to declining mortality, fertility rates, and migration. This transition not only shapes the population's age structure but also contributes to the increased representation of older adults. The region has witnessed a significant life expectancy increase, from 51 years in 1950 to 76 years in 2018. This improvement in life expectancy is associated with advancements in controlling infectious, parasitic, maternal, and perinatal diseases. Furthermore, fertility rates have been notably reduced, dropping from an average of 6.1 children per woman in 1950 to 2.2 in 2018. This decline can be attributed to cultural changes, shifts in social norms regarding family size, and the increased participation of women in the labor market, among other factors.

The demographic transition in Latin America and the Caribbean is not uniform across countries but varies based on their respective social, economic, and political contexts. Colombia has experienced an accelerated ageing process. Between 1958 and 2018, Colombia gained a total of 21 years in life expectancy, with individuals aged 60-79 gaining an additional 25.2 years. This increase in life expectancy can be attributed to improvements in socioeconomic conditions and decreased deaths caused by external factors, such as homicides. While Colombia's life expectancy may be lower than the regional average, the country has achieved overall fertility rates below the replacement level (1.7 children per woman).

In addition to mortality and fertility, migration also plays a significant role in shaping the age structure of populations because migrants tend to be relatively young. This is the case in Cuba, where the advanced ageing of the population is attributed, in part, to a significant number of young and adult emigrants.

1.2.2. Colombia

1.2.2.1. Demographic Ageing

Between 1950 and 2000, Colombia experienced significant population growth, expanding from 14 million to 39 million people, representing an increase

of nearly 188%. However, this growth rate has gradually declined over the years, dropping from 2.2% during that period to 1.3% in the first two decades of the 21st century. Projections indicate negative growth rates by the end of the century. Additionally, when comparing urban and rural areas, it is evident that urban populations have grown due to internal migration driven by factors such as violence and limited land tenure opportunities.

The age composition of Colombia's population has also undergone significant changes over time. There has been an evident decrease in the population aged 0-14, and although the population in the 15-59 age range is currently the most represented group, it is projected to experience negative growth rates from 2020 onwards. On the other hand, the population over 80 years old continues to grow dynamically, in contrast to the younger age groups. Furthermore, the population over 60 years old has grown significantly.

Examining the population from an ethnic perspective, the 2018 National Population and Housing Census identified that 6.5% of the population aged over 60 belongs to an ethnic group. Among this group, 64.6% are recognized as Afro-descendants, 34.5% as indigenous, 0.6% as Raizal, 0.2% as Palenquero, and 0.1% as

Gypsy (Roma). It is important to note that while ageing has not yet permeated ethnic populations in Colombia, the perception of ageing varies across different ethnic groups due to their distinct social structures.

In terms of migration, Colombia has experienced a higher number of emigrants compared to immigrants. However, in 2019, the number of immigrants increased significantly due to the influx of Venezuelans. Both emigrants and immigrants tend to be concentrated in the youth and adult age groups. However, the impact of migratory flows on the age composition and ageing of the Colombian population remains inconclusive, as there continues to be a positive balance between emigrants and immigrants.

Due to the growth of the older population, the dependency ratio is projected to increase. This ratio assesses the social support required from the active working-age population to the younger and older populations. By 2070, 70% of the dependent population will be over 60 years old.

In the same line, the ageing index trend indicates an accelerated growth. This index indicates the number of population over 60 years old compared with the population under 15 years old. In Colombia, by 2060, this index will surpass 200%, meaning that for every 200 older persons, there will be 100 persons under 15 years old.

1.2.2.2. Ageing Households

The ageing of the population has resulted in a corresponding ageing of households, with an increasing number of households having one or more older residents. In 2015, 34.7% of Colombian households had at least one resident over 60, with 35.9% in rural areas and 34.4% in urban areas. The Central region (Boyacá, Cundinamarca, Meta and Tolima) had a higher proportion of households with older people compared to other regions.

Furthermore, there have been changes in household configurations, including nuclear, extended, composite, single-person, and co-resident households. Among these configurations, nuclear households remain the most prevalent. However, there has been a notable increase in single-person households, with their relative weight rising from 6.1% to 10.6% between 1990 and 2015. This increase can be partially attributed to the behavior of households with older adults. In 2015, approximately 13.9% of households with at least one member aged 60 or older were single-person households, while 8.8% were single-person households of individuals under 60 years old.

When examining the composition of households with older persons, it is noteworthy that among nuclear households with only older persons, the most frequent arrangement is households

where adults between 15 and 59 coexist with older persons. Additionally, nuclear households with older persons, including those living with a partner, increased by almost a quarter in 2015. On the other hand, there was a significant reduction in households multiple generations (individuals under 15 years old, adults and older adults), which decreased from 15.2% of nuclear households with older persons in 1990 to 4.9% in 2015.

Moreover, the importance of older adults in household roles has become more pronounced. In 1990, 20% of households had a head of household over 60 years old, a proportion that increased to 28% by 2015. When examining gender differences, female-headed households within this age group have grown, rising from 14.8% in 1990 to 18.2% in 2015. This increase may be attributed to factors such as widowhood, but it has also been observed that more women are designated as household heads, even in two-parent households.

1.2.2.3. Individual Ageing

Over the years, life expectancy at birth in Colombia has seen a significant improvement. In 1985, it was estimated to be 69.6 years for women and 63 years for men. However, by 2020, it had increased to 80 years for women and 73 years for men. This increase in life expectancy also

applies to the advanced stages of life, where women tend to have a longer life expectancy than men. This phenomenon is known as the feminization of ageing, which refers to the higher representation of women in the older age groups. Although women live longer, they not necessarily have a better quality of life. For instance, according to Huenchuan (2018), older women experience specific conditions in the ageing process due to biological factors, such as a higher prevalence of debilitating chronic diseases, as well as social factors like widowhood and gender gaps that can lead to dependency.

remains inconclusive and requires further investigation.

This chapter provided a general overview of population ageing in Colombia to be considered for policy design. The next chapters will provide evidence and recommendations for public policies in this regard. For instance to ensure comprehensive access to social protection, healthcare, pensions, care, and welfare rights. These policies must include the perspectives of individuals, households, and society as a whole.

1.3. Conclusions



Population ageing is evident in certain locations of the country, in the households composition and their leading roles. For instance, population ageing is predominant in urban areas and the country's central region. Moreover, while households are increasingly integrated and headed by older people (both single-person households and nuclear households), there has been a reduction in multigenerational arrangements within households. Yet, the impact on population ageing due to migratory flows



2

Chapter: Physical and Mental Health of Older Persons

2 Chapter: Physical and Mental Health of Older Persons

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The increase in life expectancy in the coming decades poses a significant challenge to health systems worldwide, including those in Latin America. The rise in healthcare costs associated with longer life expectancy threatens the financial sustainability of these systems. This concern is widely shared among researchers and authors studying this topic.

The health chapter of **Misión Colombia envejece - Una investigación viva** focuses on identifying key aspects of the provision of healthcare services for older persons in Colombia by the General System of Social Security in Health (SGSSS). The Colombian SGSSS serves the population through to two schemes, the contributory and the subsidised

(non-contributory). The first serves people who contribute economically to the system through their salary and the second one the people who are fully covered by the State. For this purpose, the chapter assesses the possible effects of retirement on aspects such as health services' utilization, the development of chronic diseases, changes in disease burden among individuals, and users' perspectives on the SGSSS performance in delivering services to older people. Based on the challenges identified, we present a set of recommendations for developing health policies that promote the well-being of older persons and ensure the sustainability of the SGSSS, both challenged by population ageing.

To assess the performance of the SGSSS in Colombia, the authors use descriptive statistics based on aggregate data from the Integrated Social Protection Information System (SISPRO) of the Ministry of Health and Social Protection, microdata from the Vital Records of the National Administrative Department of Statistics, the 2015-2020 National Quality of Life Surveys, and the 2015 National Study of Health, Well-being, and Ageing (SABE).

In addition, inferential statistics are employed using retrospective cohort data from retirees and non-retirees to assess the effects of retirement on health status and consumption of health services. This data is sourced from the Single Affiliation Database (BDUA), the Integrated Contribution Settlement Form (PILA), and the sufficiency study of the Capitation Payment Unit (UPC).

Lastly, qualitative research techniques such as focus groups were conducted to incorporate users' perspectives on the performance of the SGSSS. These focus groups represented various socioeconomic strata and were held in different geographic regions of the country.

The main results of the research are described below:

1 Between 2015 and 2020, the coverage provided by the Colombian health system for individuals over 55 remained relatively stable, with coverage rates

above 95%. However, a notable decrease in coverage was observed in 2020, particularly in regions such as the Amazon and the Caribbean. No apparent differences were observed in the population in rural areas insured by the contributory system between 2015 and 2020 in rural areas.

2 Access to preventive health services for individuals over 55 showed no apparent differences between 2015 and 2019. The percentage of men who sought preventive health services at least once a year was 70% in 2015 and 70.3% in 2019, while for women, it was 81% in 2015 and 83.24% in 2019. However, these percentages report significant variations based on the area of residence and geographic regions. There were no apparent changes in the proportions of the population over 55 accessing outpatient health services financed by the SGSSS between 2015 and 2020, nor in access to hospital services when required.

3 In 2015, the prevalence of depressive symptoms among older people in Colombia ranged from 47.9% in men to 51.5% in women. No apparent differences were identified based on educational level, geographic region, age group, socioeconomic stratum,

marital status, or area of residence. On the other hand, Mild Cognitive Impairment (MCI) was found to be prevalent in people over 60 years old, with a rate of 17.6% in 2015. The MCI rate increased progressively from 7.4% in the 60-64 age group to 52.5% in the 80+ age group. Apparent differences were identified based on educational level (between 41.8% in individuals with no schooling and 1.5% in individuals with university or graduate level), area of residence and region of the country.

Moreover, 52.3% of the population over 55 years old experienced difficulties for carrying out at least one type of daily activities. Nearly one-third of this population considered to have severe difficulties for activities regarding visual impairments. The main activities associated with severe disability among individuals over 55 years of age were visual impairments (8.7%), gross motor skills such as body movement, walking, or climbing stairs (5.8%), auditory impairments (3.09%), fine motor skills such as grasping or moving objects (2.28%), and self-care activities such as eating, dressing, or bathing independently (2.14%).

4 Between 2015 and 2020, circulatory diseases, cancer, and chronic respiratory diseases were the leading

causes of death among older persons, based on death certificate records. The effects of circulatory diseases as primary causes of death vary according the type of SGSSS affiliation and the persons age range. In the contributory regime, they were the main cause of death only after age 65. In the subsidised regime, they were the primary cause of death at the age of 50. Instead, for persons not affiliated to the SGSSS, circulatory diseases were the principal cause of death at 40. When considering age- and sex-adjusted mortality rates, individuals affiliated with the subsidized regime generally had higher mortality rates, except for cancer, where the mortality rate was higher for individuals affiliated with the contributory regime for most age groups.

5 Public spending in the contributory regime increased by 14.25 percentage points between 2015 and 2019, rising from 15.7 billion to 17.98 billion. This increase in healthcare costs was particularly significant for individuals aged 60 years or older, with a 29.3 percentage point increase during the same period. Moreover, the costs also increased by 6 percentage points for people younger than 60 years old. For both age groups,

costs per capita showed minimal variations over this period. The costs associated with circulatory diseases, cancer, chronic respiratory diseases, diabetes (including microvascular complications), and neurological and mental diseases accounted for approximately one-third of the expenses related to the Healthcare Service Plan (PBS) provided to older adults affiliated with the contributory scheme in 2019.

6 Private health spending in Colombia reached approximately \$476,704 million per month in 2019, with the Andean region accounting for 62.1%, followed by the Pacific region at 25.25%, the Caribbean region at 8.48%, and the Orinoquia and Amazon regions at 4.17%. However, when considering health expenditures deemed catastrophic (exceeding 10% of monthly income), variations were observed based on the region and area of residence of households with at least one older person.

7 The pensioner cohort demonstrates a higher prevalence of individuals with at least one chronic disease and a higher Charlson Comorbidity Index (CCI) than the non-pensioner cohort. Additionally, the level of

healthcare service utilization, both outpatient and inpatient, is greater among pensioners. The average costs associated with care for the pensioner cohort are significantly higher than those observed in the non-pensioner cohort, with values of \$2,431,000 and \$1,527,000, respectively. These findings remained consistent across different statistical models, indicating their robustness.

In summary, Colombia has made progress in providing health insurance coverage to nearly the entire population, and this coverage has remained relatively stable since 2015. Universalizing insurance has facilitated access to essential health services and preventive measures for populations historically with limited healthcare utilisation. However, the analysis also uncovers certain aspects that could potentially impact the well-being of older persons and the long-term sustainability of the SGSSS in the face of population ageing. To address these challenges, it is important to ensure reforms that: 1) Implement new service delivery models that promote better access to healthcare in rural and remote areas; 2) Raise awareness about mental health among healthcare professionals and the general community; 3) Promote training on health and wellness among

3

Chapter: Lifelong Education



3 Chapter: Lifelong Education

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older individuals with disabilities and 4) Encourage the adoption of healthy lifestyle habits throughout the life course.

In **Misión Colombia envejece - Una investigación viva**, the chapter on education includes a comprehensive analysis to explore the relationship between age, cognition, and education, with a specific focus on the well-being of older persons. The findings of this analysis are presented in three subsections, namely: 1) Coverage, comprising the highest educational levels achieved by the population, attendance rates in formal education, illiteracy levels, and territorial disparities due to location, urban-rural

divide, gender, disability. 2) Quality Dimensions, referring to the relationship between knowledge and the dimensions of intellectual development, health (physical and mental) and recreation, internet access, and the development of digital skills; and 3) Relevance, considering two main labor market trends, namely occupation automation and the increasing demand for professionals in care and education of early childhood and older people.

Accelerated ageing processes occurring in Colombia and across the globe require a critical examination of actions that influence the well-being of older persons

and their meaningful participation in society. Colombia's education system lacks specific and adequate educational programs intended for older people to increase labour productivity, (labour - GB), improve physical and mental health, preserve cognitive abilities, and foster democratic engagement.

Lifelong education plays a vital role in active ageing, health promotion, caregiving, economic security, social participation, and the overall well-being of older adults. The level of education and literacy of older people, and the economic development the regions they inhabit are interdependent. For instance, in rural areas, educational disparities and higher levels of illiteracy are particularly evident among the older population. Furthermore, narrowing the educational gaps between the older generations (70 years and above) and younger age groups poses significant challenges, especially considering that the average educational attainment among older persons is elementary school.

In this context, it is essential to acknowledge that learning can occur inside or outside the traditional classroom setting and at any age. Recognizing this, the Article 20 of the Inter-American Convention on the Rights of Older Persons emphasizes the right to education for older individuals, promoting equal access and non-discrimination. The Convention encourages the participation of older people in existing educational

programs at all levels and emphasizes the value of sharing their knowledge and experiences across generations. Additionally, the Convention highlights the importance of promoting the education and training of older adults in Information and Communication Technologies (ICT) to bridge the digital, generational, and geographic divides and enhance social and community integration.

Learning is not only possible but also highly desirable for older individuals. Lifelong learning enables them to define new objectives for their life projects, maintain a sense of capability and purpose beyond retirement, and avoid associating retirement with the end of their useful life. Recent studies have demonstrated that lifelong learning has positive effects on cognitive skills, including working memory, episodic memory, cognitive control, and functional independence. Moreover, older adults who continue learning tend to experience a slower decline in cognitive abilities than those who do not engage in ongoing education later in life.

Lifelong learning also has the capacity to slow down the deterioration of cognitive skills, regardless of an individual's initial skill level. It has a differential impact on the age at which functional impairment thresholds are reached, particularly for cognitive skills developed earlier in life. Lifelong learning helps preserve fluid intelligence and allows

the utilization of crystallized intelligence. As a result, individuals experience less cognitive decline, leading to improved well-being, higher levels of life satisfaction, increased economic productivity, and enhanced social integration among the older population.

3.1. Coverage



Across countries, increases in education coverage are progressive and are closely linked to the development of their education systems. These improvements result in higher average years of schooling per cohort, but they also create a significant gap between the average years of schooling and the maximum educational levels achieved by the population. In Colombia, progress made in educational coverage has further widened the noticeable disparities between the older population and the rest of the adult population. As coverage continues to expand in the coming decades, the cognitive skills of older persons will be overshadowed. Therefore, it is crucial to prioritize policies in education that consider older person's particular conditions.

According to the Quality of Life Survey conducted in 2020, in Colombia,

individuals aged 25 to 60 have on average 9.74 years of schooling. However, the older population has an average of only 6.2 years of schooling, slightly surpassing the duration of primary education. Among older adults, 48.1% completed primary school as their highest level achieved, with only 15.2% attaining a higher level of education. It is also important to note that two-thirds of illiterate individuals in Colombia belong to the older adult population, accounting for 57.09% of the illiterate population.

The educational coverage of the older adult population in Colombia exhibits significant territorial heterogeneity, closely tied to economic inequality across regions, and disparities between urban and rural areas.

Furthermore, it is worth highlighting that educational levels are even lower among older individuals with disabilities. While 13.1% of the older population claims to have no education, this figure rises to 20.4% for older individuals with disabilities. This underlines the need for adaptations, adjustments, and support to ensure the inclusion of this population, which is clearly at a disadvantage; 50.43% of individuals with disabilities in Colombia are aged 25 or older.

3.2. Quality



When it comes to enhancing the quality of education for older persons, the Microsoft Certified Educator (MCE) program emphasizes the importance of interventions that stimulate cognitive skills through engaging activities such as games, social gatherings, group meetings, and especially physical wellness activities. The latter is crucial, as they directly impact brain architecture and can help delay cognitive decline.

Assessing the quality of education for older persons involves considering two key aspects in line with the objectives of the educational system to facilitate effective learning: 1) the topics taught in educational courses should be relevant for older people, taking into account their individual and collective preferences and 2) education for older adults should strive for the continuous improvement of their conditions and overall quality of life, considering the primary factors that influence their well-being.

The main motivations for older people to engage in lifelong learning processes include active ageing, the opportunity to connect with new people, and the desire to pass on their knowledge and experiences. As mentioned in the previous section, increased

physical activity and exercise play a vital role in maintaining cognitive development during old age and reducing the risk of disease. Mental health also holds significant importance in cognitive development, as it is a critical factor that impacts various aspects of life.

The rapid digitization of the job market has indeed jeopardized older individuals' employability due to their relatively lower digital skills and lack of familiarity with new technological tools. Moreover, the COVID-19 pandemic accelerated the adoption of digital skills and resulted in the displacement of unskilled workers from the job market, underlining the need to approach workforce education with a differential approach.

3.3. Relevance



This section addresses the relationship between education and well-being (material and productive) with a specific focus on the impact of labor market automation on the older population. It also examines the increased labor demands for care of early childhood and older people.

Firstly, educational offerings should be relevant by ensuring that older individuals feel valued and meaningful in society. This involves facilitating the exploration and

achievement of their individual, family, and collective life goals, and purpose.

Secondly, lifelong learning, particularly with an emphasis on intellectual well-being, plays a crucial role in the development of older individuals. It enables them to feel valued, expand their knowledge, and actively contribute to the community with objective and critical insights in the realms of politics, economics, and social issues.

The level of education attained by individuals is intricately linked to their long-term work performance, especially in terms of the cognitive functions that are stimulated and developed during schooling, such as memory and verbal fluency. Moreover, developing skills is essential for promoting autonomy, decision-making abilities, and even programming daily activities.

Another objective of lifelong learning is to elevate the skill level of employed adults, preparing them to perform effectively in higher positions or new fields of work. By updating their knowledge - or retraining - older people can overcome the barriers imposed by labor automation processes and remain active in the job market.

Furthermore, the relevance of lifelong learning must also take into account other significant trends in the labor market, particularly the increasing demand for professionals in the healthcare, caregiving, and education sectors. This emphasis on labor demand is driven by three key

factors: the low likelihood of automation in these fields, the ageing population, and the increasing efforts to improve education and healthcare coverage for children.

In other words, skill training for older adults in the workforce should consider developing digital skills that enable them to participate in the workforce, retraining employees in occupations at risk of automation, such as administrative and accounting assistants. Moreover, a significant emphasis should be placed on areas of work related to early childhood education and care, as well as the care of older people.

The research findings underscore the importance of adopting a differentiated approach that addresses the specific needs of the older population and the territorial inequalities, taking into account factors such as age groups across the life cycle, urban and rural areas, disability, gender, race, and ethnicity. It is crucial to promote a wider understanding of the diversity of people, communities, and contexts, their magnitude and complexity regarding the expansion of educational coverage, quality and relevance, the availability and timely and sufficient accessibility to infrastructure, and access to technologies and educational resources.

In essence, while educational programs and services for older persons in Colombia have traditionally focused on addressing cognitive and physical decline, the concept

of lifelong learning offers continuous opportunities. It empowers older individuals to have a say in their own learning journey, allowing them to decide when, what, and how to learn, and most importantly, why to learn.

3.4. Conclusion and Recommendations



Taking an integrative approach, **Misión Colombia envejece - Una investigación viva** emphasizes the importance of designing an inclusive and equitable educational policy that guarantees the right to education, training, and qualification throughout the entire life cycle. Such a policy should promote active and healthy ageing, starting from early education and extending to diverse educational trajectories for older persons, considering their specific needs.

In order to promote well-being across the life cycle, education at all levels - from preschool to higher education, continuing education, and adult education - should address diverse topics. These include health education (both physical and mental), sports, financial literacy, caregiving, training for democracy, participation, coexistence, and citizenship, among others.

Likewise, it is essential to offer a broad range of educational programs specifically tailored to the life projects of older adults. This includes updating and retraining them in the development of digital skills and preparing them for the challenges and opportunities of old age. Pedagogically, this requires careful planning and methodological approaches that are continuously adjusted and flexible, addressing the diverse characteristics and demands of the older population.

Furthermore, it is crucial to strengthen institutional coordination and coherence in educational policies for older people. One recommendation is to establish an intersectoral commission that can define short-, medium-, and long-term actions, indicators, goals, and technical guidelines. An exemplary model in this regard is the Intersectoral Commission for Early Childhood (CIPI), which has successfully resulted in a comprehensive state policy for the well-being of young children. Similarly, it is advisable to involve key stakeholders such as the Presidency of the Republic, the Ministries of Education, Health, and Labor, the Department for Social Prosperity, the National Planning Department, and the National Learning Service in the intersectoral commission for the well-being of the older population.



4

Chapter: Caregiving and Caregivers of Older Persons

4

Chapter:
Caregiving and
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This chapter addresses the current situation regarding caregiving for the older population in Colombia. The analysis begins by establishing a conceptual framework that defines the concept of care, outlines its key dynamics and categories, explores various international care models, and assesses the costs and impact of the pandemic on care. Subsequently, a descriptive study is conducted through a statistical analysis of microdata and the qualitative findings derived from focus groups to evaluate the demand for and supply of care in Colombia. Lastly, the chapter explores the repercussions of care activities on the well-

being of both older individuals receiving care and their caregivers, and discusses proposals to enhance the quality and expand the coverage of care services at the national level.

4.1. Findings



In Colombia, care provision is heavily reliant on household members' unpaid work, accounting for 70.7% of total care provided in 2020. Notably, the burden of care

predominantly falls on women, who carry out 84.8% of unpaid care in the country. Conversely, formal care services have limited significance, comprising only 5.6% of the total in 2020, with a marginal increase of 0.02 percentage points compared to 2018. However, disparities in accessing formal care are evident when examining different socioeconomic levels. While it represents 8.7% in higher socioeconomic levels, it only reaches 1.5% among the lowest level. These inequalities are also mirrored at the regional level, with Los Llanos (The Plains Region) and the Eje Cafetero (Coffee Growing Region) reporting the highest percentages of older individuals requiring care but not receiving it (25.1% and 15.3%, respectively).

Furthermore, an analysis of caregivers' education levels reveals a concentration of higher levels of education among unpaid caregivers from higher socioeconomic strata. For instance, while 86% of caregivers from higher socioeconomic strata had attained secondary or higher education, only 16% of caregivers in lower strata had reached the same education level. Additionally, it is evident that in-home caregivers who are actively engaged in the labor market (accounting for 22.3% of the total) face challenges in balancing caregiving responsibilities, work obligations, and time for rest.

Data from the National Survey on Time Use (ENUT) indicates that (i) between 2017

and 2021, the average daily hours dedicated to care increased from 1.98 to 2.3; (ii) those who exceed this average, reduced sleep time (0.14 hours less in 2021), increased time spent on housework (0.73 additional hours), and reduced time for paid work (0.74 fewer hours). Furthermore, the ENUT highlights that the burden of care and household chores disproportionately affect women, a situation exacerbated by the pandemic.

These circumstances directly impact caregivers' well-being and the older individuals they care for, as caregiving entails an interdependent relationship between the caregiver and the care recipient. Furthermore, insights gathered through focus groups and data from the National Survey of Health, Well-being, and Ageing (SABE) emphasize the subjective value that caregivers derive from recognition and respect for their work. Lastly, statistical analysis reveals that 43% of caregivers tending to older people are themselves seniors who play the dual roles of caregiver and care receiver.

4.2. Conclusion and Recommendations



In light of the distinctive characteristics of caregiving in Colombia, five key conclusions can be drawn: i) it is evident that prioritizing the socioeconomic, physical, and mental well-being of caregivers should be a fundamental political and social concern; ii) given the prevalence of unpaid care, there is significant potential in providing training and formalization opportunities for caregivers, promoting preventive care and good health practices; iii) in order to enhance the welfare of unpaid caregivers, it is equally vital to ensure they have access to adequate income and social security; iv) closing the care gap requires addressing the scarcity and affordability issues surrounding formal care services, as home-based care services remain virtually non-existent in Colombia; v) considering the clear predominance of women in the caregiving field, care policies should incorporate a gender-specific approach.



5 Chapter: Financial Protection for Older Persons

5

Chapter:
Financial
Protection
for Older
Persons

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Ensuring economic stability for older persons is one of the primary goals of a comprehensive social protection system. Economic stability significantly impacts various well-being dimensions, encompassing health, care, social inclusion, participation, and mental well-being, among others. This chapter addresses economic protection in old age, extending beyond the scope of the pension system. It explores two distinct active and passive roles on income. The active role regards the desire or necessity of older individuals to continue generating income through

work or entrepreneurship. Conversely, the passive role entails the development of social protection mechanisms to guarantee economic income for those who save for a pension and those who are unable to do it (vulnerable population).

The first section focuses on the analysis of the National Transfer Accounts provided by the National Department of Statistics (DANE). This data allows us to observe the Colombian population's income, expenditures, and transfers throughout their life cycle. The second section focuses on the active component of economic protection,

specifically labor participation among older persons and entrepreneurship as viable sources of income. The third section analyzes the sources of passive income. Firstly, from a social protection perspective, it describes the functioning of contributory pension schemes, the non-contributory program known as Colombia Mayor (Senior Colombia), and the semi-contributory system called Periodic Economic Benefits (BEPS). Secondly, it examines the role of savings in assets as an alternative income source during retirement. The fourth and last section presents 28 policy recommendations classified into five major strategies.

5.1. National Transfer Accounts



National Transfer Accounts (NTA) is a methodological framework designed to comprehend the economic implications of demographic shifts within a society by analyzing the income and consumption patterns across different age groups, measuring intergenerational transfers, and examining asset reallocation.

Based on the official findings published by DANE in 2017, in Colombia people enter their surplus stage at the age of 25, seven years after reaching adulthood, while the

deficit stage starts at 56, four years before they are classified as older adults. Regarding labor income, variations occur depend on both age and occupation. Employees typically experience their highest income levels between the ages of 30 and 40, whereas self-employed individuals reach their peak average income around 52.

Per capita consumption exhibits substantial growth until the age of 18, after which it stabilizes within a range of 14 to 16 million pesos per year, with slight fluctuations until age 62. The consumption of health-related goods and services tends to increase with age, with a significant surge observed from age 76 onwards. On the other hand, consumption of educational goods and services peaks between the ages of 5 and 26, diminishes considerably between 32 and 49, and eventually becomes negligible, on average, after 50.

5.2. The Active Role of Older People



One of the primary objectives of **Misión Colombia envejece - Una investigación viva** is to present a fresh perspective on old age as a strategic sector for the country. This vision

recognizes population ageing as an opportunity to contribute to the country's economic development by generating numerous jobs and fostering enterprises where older adults play an active role instead of merely being recipients of subsidies. Population ageing also unveils a wide range of economic opportunities for the emergence of the Silver Economy. This segment of the global economy is shaped by demographic changes and focuses on meeting the needs and demands of older adults.

5.2.1. The Labor Market for Older People

The process of population ageing in Colombia has been accompanied by an increase in labor participation among older persons. The employment rate exhibits an inverted U-shaped pattern, peaking at 74% between the ages of 30 and 49, and gradually declining thereafter. However, for the older population, there are notable variations in employment rates across age groups. Individuals between 60 and 69 years old have a relatively high employment rate of (43,8%), compared to the 70 to 79 age group (19,4%) and the group of 80 and above (6.2%).

Nevertheless, significant differences exist when comparing different population groups. In terms of geographic location,

the older population residing in rural areas shows a higher dedication to work (30.3%) compared to their urban counterparts (20.8%). Additionally, when examining employment by gender, women tend to be engaged primarily in "housework" (62.8%) and "other activities" (21.1%), with only 10.6% participating in the workforce. In contrast, the work participation rate for men stands at 38%, which is nearly four times higher than women's.

During the focus groups conducted in various regions of the country, some older individuals expressed their interest in entering the labor market. However, they encountered barriers and difficulties finding employment opportunities that align with their expectations. Older individuals face challenges in being hired due to three main aspects that influence hiring decisions: i) uncertainty regarding their productivity, ii) the unfavorable cost-productivity ratio associated with declining productivity in older age, and iii) the age of the decision-maker, as older individuals are more likely to hire other older individuals.

Examining the primary sectors where this population is engaged is critical to gain further insights into the labor participation of older people. The study reveals that the main activity for older people is agriculture, accounting for 25.6% of their labor participation. This is followed by wholesale and retail trade (20.5%), manufacturing

industry (9.6%), and transportation and storage (6.1%). The significant involvement of older individuals in agriculture can be partly attributed to internal migration dynamics. As younger people seek job opportunities in urban areas, older individuals remain in rural regions, dedicating a larger portion of their time to agricultural pursuits.

However, it is important to note that these average figures conceal notable gender differences. Men tend to be employed primarily in four sectors, in descending order of importance: agriculture (33.7%), commerce (17.3%), transportation and storage (8.9%), and industry (8%). On the other hand, women are employed more evenly across different sectors, with commerce being the primary sector of employment (27.0%), followed by accommodation and food services (13.7%), and industry (11.8%)

Additionally, it is crucial to highlight the prevalence of women in the care economy and unpaid household activities. Older women play a significant role in caring for children, adolescents, and older persons. As the number of dependent older individuals and single-person households continues to increase (18% of total households per the 2018 Census), with female-headed households expanding as well, the importance of care becomes a primary concern within the country's economic dynamics. Recognizing these realities is

essential when designing labor policies that take into account the specific needs and circumstances of older individuals in Colombia.

5.2.2. Entrepreneurship and Older Persons in Colombia

As the population continues to age, we can expect to see a rise in the number of new businesses being established and led by individuals over the age of 60. We can gain an initial understanding of entrepreneurship as an active income source for older adults in Colombia by examining their occupational categories in the labor market. The findings indicate a shift from waged employment to self-employment as individuals grow older. While self-employment accounts for 57.5% among those aged 50 to 59, it rises to 69.3% for the 60 to 69 age group and exceeds 82% for those over 70.

The higher prevalence of self-employment among older workers suggests a greater inclination towards entrepreneurship and a desire for increased labor and financial autonomy. It could also indicate greater economic vulnerability and more unstable working conditions as the population ages.

Another perspective on entrepreneurship among older persons in Colombia can be collected from the results of the Microbusiness Survey (EMICRON) conducted by DANE in 2020. The survey revealed that

82.0% of registered businesses are owned by individuals under 60, while 18.0% are owned by those aged 60 and above. Considering that the representation of this age group in the total population is close to half this figure, it can be concluded that their participation in micro-business creation is more than proportional to their representation in the reference population. When examining the ownership of microbusinesses by age and gender, it is observed that 32.0% belong to women and 68.0% to men, mirroring the disparities observed in labor participation.

Analyzing the results by economic sector, three sectors stand out as having a higher concentration of older individuals: agriculture, livestock, hunting, forestry, and fishing (31.4%); commerce and repair of motor vehicles and motorcycles (26.0%); and manufacturing industry (11.8%). In contrast, individuals under 60 are more evenly distributed across other sectors, with significantly lower participation in agriculture.

Due to the challenges they face in accessing the traditional labor market, older individuals often turn to entrepreneurship as a viable option to generate income and meet their needs. According to the Global Entrepreneurship Monitor (GEM) Senior 2017 report, the group most inclined towards entrepreneurship is the unemployed, with 35% expressing intentions of starting their own businesses. Additionally, one-fifth of unemployed seniors plan to establish a

business within the next three years.

Similarly, during focus group discussions, it became evident that older individuals perceive barriers when attempting to enter the job market. In light of these obstacles, many participants view entrepreneurship as the most favorable alternative, not only to secure their own income but also as a means to provide employment opportunities for individuals who face exclusion based on factors such as age, disability, lack of work experience or college studies, or a scarcity of job prospects.

5.3. The Passive Role of Older People



Another way to ensure a stable income for older people is through passive income, which refers to income generated without the need for work or engaging in an active commitment. Passive income can originate from various sources, broadly classified into two categories. Firstly, there is income derived from social policies aimed at providing economic protection for older people. Secondly, there is passive income generated through family savings and the accumulation of assets.

5.3.1. The Economic Protection System for Older Persons

Pension systems serve two primary functions. The first function, as insurance, aims to smooth the transition in individuals' living standards upon retirement by utilizing their savings to provide a consistent income proportional to their earnings during their active years. The second function -of a welfare nature- seeks to alleviate poverty among the most vulnerable older individuals by offering non-contributory subsidies, which are not linked to individual savings, and provide access to a Minimum Expenditure Basket. In this sense, two strategies can be pursued to achieve pension coverage for the entire population: increasing workers' pension savings during their active years to enable them to qualify for a pension, or expanding monetary subsidy programs for vulnerable older individuals who were unable to save adequately during their working lives.

The first strategy heavily relies on the pension system, which converts workers' savings accumulated during their active years into a lifelong monthly income during their passive stage. Regrettably, the Colombian pension system does not fully adhere to any of the four principles of an effective economic protection system for old age, namely: a) universal coverage; b) vertical equity; c) horizontal equity; and d)

fiscal and financial sustainability.

Regarding coverage, the proportion of contributors does not exceed 32.2% of the working-age population. Furthermore, meeting the minimum period of formal employment required for a pension is very challenging, and only a quarter of the older people in Colombia are covered by a contributory pension. The issue lies not only in the design of the pension system itself but also reflects underlying problems within the labor market. Contributory schemes are structurally limited, targeting formal workers in a labor market characterized by elevated levels of informality. Consequently, the low coverage of the contributory system directly stems from the substantial prevalence of labor informality.

Furthermore, the inadequate design of both contributory regimes exacerbates the issues. On the one hand, the public regime exhibits regressive subsidies, concentrating them among a few individuals who receive high pensions, while workers who are unable to retire may even face negative subsidies. On the other hand, the Individual Savings Regime with Solidarity (RAIS) faces several challenges during the accumulation stage, such as the system's inability to provide life annuities, the regressive nature of the Minimum Pension Guarantee Fund (which collects contributions from all workers but only benefits those who manage to retire), and the concentration of the market, which

has reduced the number of Pension Funds (AFPs) from nine to the current four.

In summary, this assessment presents a worrisome picture of the pension system in Colombia. Its high fiscal costs and regressive subsidies do not align with its limited coverage and modest impact on the well-being of the older population. The problems stem from the very foundation of the system, which is based on the coexistence of two regimes -the Average Premium Regime (RPM) and the RAIS- and operates under the logic of competition. Additionally, the results from focus groups have revealed a lack of trust in the pension system, particularly among young people who are uncertain about their prospects of reaching old age and having good health conditions to enjoy their pension.

Given the structural barriers faced by the contributory regimes, the coverage of the economic protection system for old age in Colombia has expanded in the past decade through non-contributory mechanisms, primarily represented by subsidies provided through the Senior Colombia (*Colombia Mayor*) program. This program, currently benefiting 27% of the older population in Colombia, consists of targeted monetary benefits aimed at reducing poverty levels among this age group. Additionally, it is complemented by social services offered through the Welfare Centers for Older Adults.

However, the low amount of the subsidy,

combined with the targeting criteria based on the System for the Identification of Potential Beneficiaries of Social Programs (SISBEN), has limited the potential impact of the Colombia Mayor (Senior Colombia) program on the well-being of the older population. While achieving universal health coverage should be a policy goal, it is important to consider the advantages and disadvantages of providing a significantly higher non-contributory benefit to the older population. While a more generous policy would have immediate positive effects on the welfare of older persons, a high non-contributory benefit can lead to macroeconomic challenges by straining fiscal sustainability and can also create negative incentives at the microeconomic level. These microeconomic effects can be attributed to the income effect, which may lead to adverse changes in savings and labor participation patterns during the active stage because individuals will expect a substantial subsidy in the passive stage that does not depend on their contributions.

Additionally, there is the semi-contributory system known as Periodic Economic Benefits (BEPS), designed as a flexible savings scheme for informal workers who did not contribute to pensions or whose income was insufficient to enter the contributory scheme. The BEPS program serves two purposes. Firstly, during the active stage, it enables workers with

incomes below the minimum wage to save voluntarily in a flexible scheme that does not demand regular contributions (with a minimum savings requirement of \$5,000 pesos). Secondly, in the decumulation phase, it allows individuals who do not meet the minimum contribution requirements for a pension from the contributory schemes to receive a pension by converting their savings balance into a life annuity lower than the minimum wage. The State provides a subsidy of 20% of the member's initial contributions in this scenario. However, despite being a mechanism offering economic protection opportunities for vulnerable workers in old age, the impact of the BEPS program has been relatively limited. Nevertheless, it should be noted that the program is relatively new and has significant potential to address gaps in economic protection for the informal population. A crucial step in this direction was the regulation of the "Minimum Social Protection Floor" (Decree 1174 of 2020).

In conclusion, although the rapid ageing of the Colombian population poses significant challenges in terms of public policy, as the demographic dividend fades and the dependency ratio between active and non-active individuals increases, ageing can also be seen as an opportunity. Efforts to harness the potential of the silver economy can transform older persons from passive recipients of public policy into active participants who contribute to

the nation's economic and social progress. In light of this perspective, public policy should not only focus on safeguarding older individuals but also on integrating them into economic activities. This can be achieved by promoting entrepreneurship among older individuals and creating favorable conditions that enable them to extend their working lives. In addition to this new outlook on the active role of older persons, it is crucial to strengthen the social protection system. This entails integrating contributory pension schemes with welfare subsidy mechanisms, as well as introducing alternative semi-contributory, voluntary, and informal savings options.

5.4. Recommendations



This chapter presents 28 policy recommendations grouped into five key strategies. The first category is the effective integration of older individuals into the labor market, which entails policy measures to enhance their labor productivity in high-demand sectors, such as agriculture and commerce. Additionally, this also entails strengthening labor retraining programs to facilitate the transition of older individuals into high-growth sectors. This can be accomplished through training programs

in digital education and information and communication technologies (ICTs).

The second category revolves around empowering entrepreneurship among older persons. It distinguishes between opportunity entrepreneurship and subsistence entrepreneurship and offers recommendations concerning access to credit for seed capital, gender-focused policies and the identification of sectors that will thrive with the expansion of the silver economy.

The third strategy involves reforming the economic protection system for older individuals. To contribute to the pension reform, the chapter provides a concise overview of four recent proposals to structurally reform the economic protection system for the older population in Colombia: the pillar-based system proposed by Fedesarrollo, the adoption of notional accounts by Asofondos and the Universidad de los Andes, the Multipillar reform by Villar and Forero (2018), and Colpensiones' gradual extinction set forth by Asociación Nacional de Instituciones Financieras (ANIF).

In order to choose the best option, the chapter sets forth four main principles that should guide the design of the Pension reform: (i) ending regressive subsidies in the public regime and focusing them on low-income population, (ii) enhancing horizontal equity by ensuring that workers who have saved the same amount in the system

receive equivalent pensions, (iii) expanding the coverage of both contributory and non-contributory regimes to achieve universal coverage for all adults over 65, and (iv) establishing a straightforward scheme where savers see a direct relationship between their present savings and the benefits they will receive in old age. The reform could also include innovative parametric reforms, such as introducing a voluntary pension age that discourages early withdrawals through lower replacement rates.

The fourth strategy focuses on promoting savings and emphasizes the importance of financial education. It also underlines the significance of adapting formal savings mechanisms to suit the conditions of different regions and extending informal savings methods to encourage long-term savings habits.

Lastly, the fifth strategy revolves around the care economy. It highlights the need to establish a functional market for care activities. This entails redirecting a portion of the non-contributory subsidy not through monetary payments to beneficiaries, but instead through care coupons or vouchers that can be redeemed by caregivers.



6

Chapter: Older Persons' Well-being and Social Participation

6

Chapter: Older Persons' Well-being and Social Participation

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In an effort to contribute to the ongoing shift in our perceptions of old age and ageing, this chapter examines the realms of well-being, good living, and social participation. It considers the numerous factors that facilitate the transition into old age while providing an update on the country's current realities, challenges, and opportunities. As a result, this chapter contributes to the evolving narrative surrounding old age and ageing and reshapes how we perceive ourselves and others in relation to this stage of life.

The primary aim of this study is to

provide a descriptive and analytical overview of the current position of Colombians concerning the essential dimensions required for good living. It also explores the factors associated with social participation and the challenges linked to the promotion of active and healthy ageing. Furthermore, the study places special emphasis on examining the impacts and challenges that have emerged as a result of the COVID-19 pandemic. An intergenerational analysis is conducted to gain a comprehensive understanding from an age perspective

and the periods before and during the pandemic are compared. This analysis includes insights from the World Values Survey and Values in a Crisis Survey, as well as the Social Pulse Survey.

The chapter is structured into five sections. The first section presents the relationship between well-being, good living, social participation, ageing, and old age in Colombia. The second section discusses the comprehensive conceptualization of well-being for **Misión Colombia envejece - Una investigación viva**. The third section offers a five-fold analysis, covering the following areas: 1) life satisfaction as an indicator of well-being, 2) the role of spirituality in promoting wellbeing and social participation, 3) the impact of gender, age, and race on well-being in old age, 4) local and global trust, and 5) emerging concerns related to well-being. The fourth section presents the conclusions drawn from the chapter, while the concluding section outlines recommendations to strengthen social participation, based on support and care networks, reconstructions of public spaces, and the importance of bringing old age closer to both public and private institutions.

6.1. Theoretical framework



Well-being has been extensively studied, with theoretical perspectives emerging from both Eurocentric and South global contexts. This chapter undertakes a triangulation of these theoretical views to gain a comprehensive understanding of well-being and good living. The chapter recognizes the significance of subjective and objective factors in defining well-being, and it portrays good living as a bottom-up approach to social development, placing value on local knowledge and the importance of the territory. Thus, the chapter acknowledges the top-down (well-being) and bottom-up (good living) perspectives, which are reflected in the findings, conclusions, and recommendations throughout the Mission's various chapters.

Furthermore, the chapter provides a theoretical framework for understanding that ageing well inherently requires active engagement by older persons in their life journeys. It emphasizes the importance of the active role in optimizing opportunities that enhance the quality of life as individuals grow old. Additionally, it highlights the connection between the

quality of old age and the ability to directly participate in decision-making processes that impact their lives at various stages of their life courses.

6.2. Conclusions and recommendations



In Colombia, older persons exhibit higher levels of happiness, life satisfaction, and contentment with their economic situation. Before the pandemic, they expressed greater overall satisfaction and a slightly more positive view of their economic well-being. They also demonstrate a heightened sense of pride in being Colombian. While they tend to be more religious and politically engaged, they are less receptive toward accepting migrants. Older individuals report higher confidence levels and active participation in traditional organizations like churches. Moreover, before the pandemic, they felt more secure than the rest of the population.

The study also reveals an intergenerational gap concerning environmental interest. Despite its detrimental effects on the health and functioning of older persons, age

discrimination has not been given sufficient attention as a public health priority. In Colombia, the findings are mixed, as the majority perceives little respect for older people while simultaneously believing that they hold significant political power and are accepted as leaders.

Furthermore, the econometric analyses highlight two key aspects. First, the opportunities due to the older persons' elevated level of trust towards institutions in general, including the government and mayor's offices. Second, the significant barriers due to discriminatory traits, particularly gender discrimination.

The older population demonstrates important levels of satisfaction in various aspects of life, a strong sense of national pride, trust in institutions, reduced fear of economic crises and COVID-19, and greater optimism about the future. Consequently, older people are essential allies for Colombia's post-COVID social and economic recovery.

The optimism observed in the Values in a Crisis Survey (VEC) study presents an opportunity to include lessons on positive ageing interventions for this population. Despite stereotypes of vulnerability or fear, seniors' attitudes reflect their perceptions overcome such limitations. Instead, their optimism and hope can catalyze individual, family, community, economic, and social empowerment processes.



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