



Policies for extending working lives.

Policy Reviews: Sweden, Denmark, Canada and the UK

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INTRODUCTION

This document will review policies relevant to old age, disability, work and retirement for four countries: Canada, Denmark, Sweden and the UK. This policy review will focus is on four different policy areas: policies that seek to influence the financial incentives affecting older people; policies that seek to improve the employability of older workers; policies that seek to influence working conditions and the behaviour of employers; and policies affecting unpaid/informal care.

To cover these areas, we will cover pension policy, disability and sickness insurance, unemployment insurance, Active Labour Market Policies, working condition protections, and support for informal caregivers. This review will discuss the current situation in each country, and a brief history to describe the influence of policy reforms. A policy timeline is included for each country is in the appendices which lists the policy reforms in the four policy areas of interest.

CANADA

Introduction

Canada has a population of 36 million with 17 per cent aged over the age of 65. A recurring concern for policymakers has been poverty among older Canadians [1] and numerous policies have been implemented aimed at alleviating poverty and reducing income inequalities among elderly people [2]. Responsibility for social programmes, including social security, is determined by the Canadian Constitution, which sets out roles and responsibilities for the federal and provincial/territorial governments. As a result of the ageing population, provincial governments are implementing incentive programmes and legislation to influence working conditions and employer behaviours. Recently, changes to employment and labour legislation have been introduced to implement benefits and programmes that help employees with care responsibilities. Disability benefits are provided either through the disability aspect of the pension, or through employment insurance, and additional provincial disability support programmes. Active Labour Market Programmes are provided provincially within Canada to support the employment of older people, funded through Labour Market Agreements.

Pension, sickness, disability and unemployment benefits

Pensions and retirement

Canada has a multi-pillar pension system which combines public and private pensions and different modes of financing (see Appendix A for timeline). Canada's first pillar consists of the federal Old Age Security programme (OAS) which provides for a minimum floor benefit based on residency in Canada. The OAS is financed through general tax revenues on a pay-as-you-go basis. The second pillar is composed of two programmes – the Canadian Pension Plan (CCP) and the Quebec Pension Plan (QPP) - covering all individuals with employment earnings. Private saving schemes complement the public pension system and are funded through employer and/or employee contributions. Canada also supports low-income pensioners through tax regulations.

Canada introduced a genuine universal flat pension scheme in 1951. Known as Old Age Security (OAS), this programme, supported exclusively by the federal government from general taxation revenues, transformed the pension to a universal pension for all Canadians aged 70 or over. The OAS objective is to prevent poverty among older people. The OAS is not based on contributions or work experience and provides monthly pension to most Canadians aged over 65.

The OAS is a residence-based pension targeted at Canadian citizens or legal residents of Canada or Canadians living abroad; each year of Canadian residence after the age of 18 up to a maximum of 40 years earns 2.5 per cent of the maximum pension. A minimum of 10 years is required to receive a pension benefit. The OAS is payable from the age of 65 onwards [3]. While legislation was passed in 2013 that gradually increased the eligibility age for OAS from 65 to 67, this was subsequently reversed in 2016.

To further address poverty among older people, in 1967 the federal government added the Guaranteed Income Supplement (GIS) which provides a monthly non-taxable benefit to Old Age Security pension recipients who have a low income and are living in Canada. Funded through general taxation since 1973, the GIS was initially funded through contributions, and has undergone multiple expansions between 1971 and 2006 to target low-income elderly people who were below the poverty line [4]. It ensures targeting of elderly people reliant on the OAS through reduction of CAN\$ 0.50 for every CAN\$ 1 of other income. The Allowance is another component of the OAS that was introduced in 1975. An additional benefit (the Allowance) is available to low-income individuals aged 60 to 64 who are the spouse or common law partner of a GIS recipient, are Canadian citizens or legal residents, have resided in Canada for the last 10 years, and whose combined annual income is less than the maximum allowable threshold (CAN\$ 32,448 in 2017).

An exemption of up to CAN\$ 3,500 of employment income is incorporated into the GIS benefit calculation was introduced in 2008, and is designed to increase flexibility for low-income elderly people to work while receiving GIS [5]. Overall, the combined effect of OAS and GIS has proved instrumental in the sharp reduction in elderly poverty witnessed in Canada since the 1970s. Collectively, GIS and OAS are considered to be the first pillar of the pension system that is designed to provide for adequate retirement for all Canadians.

The Canadian Pension Plan (CPP) and its Quebec counterpart, the Quebec Pension Plan (QPP), were established as a mandatory contributory pension plan in 1967 to which both employees and employers are required by law to contribute. It is a public contributory pension scheme providing earnings-related pensions on a partially funded Defined Benefit basis (DB). The CPP covers virtually all members of the labour force in Canada, including employees and self-employed people between the age of 18 and 70 with employment earnings, and income over CAN\$ 3,500.

The public pension schemes provide good coverage but fairly low replacement rates (approximately 42 per cent for those with average industrial earnings in Canada compared with almost 60 per cent for OECD countries) [6]. Consequently, the public pension system is not considered to provide a strong incentive for early retirement.

For the CPP, the normal pension age is 65 but a reduced pension can be claimed as early as 60 and an enhanced pension can be claimed as late as age 70. The CPP also gives an income to the surviving spouse in the event of death. The survivor benefit is 60 per cent of the income that was received by the deceased spouse for those aged 65 or over, and 37.5 per cent of the benefit plus a flat amount for those aged under 65. However, when the surviving spouse also has a CPP pension of his or her own, the combined benefit cannot exceed the maximum CPP payment annually [4].

The CPP was modified in 2011 so that employees aged under 65 are required to contribute to the CPP based on their earnings and their employers are also required to contribute an equal amount on their behalf, even if the employee is already receiving CPP payments. In addition, workers who are between the ages of 65 and 70 can continue to make their own CPP contributions and have their employer contribute on their behalf. Any contributing employee can choose to withdraw from the scheme with one year's notice. Under recent provisions individuals can apply for CPP payments without having to quit work or reduce their earnings. This allows individuals to continue to work and collect CPP before the age of 65, if they so choose.

The amendments enhance flexibility, allowing CPP contributors more options as they make the transition from work to retirement. The benefits of delaying retirement after the age of 65 were

increased, allowing people to combine work and receive a pension from the mandatory public scheme (CPP) at the same time. Over the course of their working life individuals might experience career breaks, voluntary or involuntary, affecting pensions benefit level and, in some cases, incentivising them to work longer. In the light of this, Canada decided to ease the rules with a specific formula. Past earnings are ranked in descending order and the months with the lowest earnings are dropped from the pension benefit calculation. The number of months which can be disregarded has been increased [5]. As of January 2012, individuals under the age of 70 who work while receiving their CPP retirement pension can increase their retirement income by continuing to contribute into the CPP in order to earn the new Post-Retirement Benefit (PRB). These adjustments ensure that there are no unfair advantages or disadvantages in taking pensions before or after the age of 65, and so strengthen financial incentives to carry on working [7]. Recent minor changes to the work-related public pension (CPP) may also encourage delayed retirement. For example, to receive a retirement pension from the age of 60 to 64 (early pension with actuarial adjustment), individuals needed to stop working or reduce their earnings for at least two months. Mandatory retirement is blocked under both federal and provincial human rights laws [8].

The most recent actuarial review of the CPP concluded that, despite increasing benefits paid due to an ageing population, it is financially sustainable [9]. However, the low replacement rates of the CPP may present a growing challenge in the future. According to some estimates, the capacity of income to replace pre-retirement consumption rose until 1990 but has declined since 2005 [10]. This is caused by a mixture of lower private pension coverage, a trend to move from defined benefit private pension plans to defined contribution plans, lower return rates and the valorisation method used within the age-related public pension [7]. The CPP has a disability programme that significantly raises the probability of moving to full retirement for workers aged 50-59, although it should be noted that only a small proportion of workers is eligible for this programme [8].

The Registered Retirement Savings Plan (RRSP) and Registered Pension Plan (RPP) have ensured that the public pension system is complemented by private savings schemes. Contributions to RRSPs are tax deductible in the year of contribution with taxes paid in the year savings are withdrawn. Interest accrued remains tax exempt until withdrawn.

To promote private pension plans, in 2012 the federal government introduced the Pooled Registered Pension Plan (PRPP). It is a retirement savings option for individuals, including the self-employed. The new plan, which is voluntary for employers, except in Quebec, and based on auto-enrolment of employees, is meant to address low workplace pension coverage, increase portability, reduce fees and lower employers' investment risk [11].

In 2007, amendments to income tax regulations were passed to allow for phased retirement under defined benefit registered pension plans. These changes allow individuals to receive up to 60 per cent of their pension while at the same time continuing to accrue pension benefits through continued contributions from the same plan or another plan of the same or related employer. The changes also provide employers with more flexibility to retain older workers [5].

In 2009, changes to the *Pension Benefits Standards Act* were made to permit phased retirement in federally regulated defined benefit pension plans. Some provinces have followed suit and made changes to their legislation to specifically address phased retirement for those with regulated defined

benefit plans at provincial level. To remove disincentives to work, the minimum age of benefit eligibility from the RRSP and RPP was increased from 69 to 71 years from 2007 [5]. Early pensions can be claimed from the age of 60. The earnings-related pension can be deferred, earning a six per cent increment for each year after the age of 65 - up to a maximum of five years. Overall, several studies have shown the effect of having a registered pension plan encourages early retirement [12].

Disability and sickness benefits

In Canada there are seven distinct sources of disability income security benefits at the federal and provincial level. Aggregated, these programmes provide more than CAN\$ 25 billion annually in disability income security benefits. The seven programmes differ in terms of eligibility and benefit amount [13]. Approximately 5-7 per cent of working age Canadians are recipients of disability income security benefits [13]. The benefits under federal jurisdiction are the Canada Pension Plan Disability (CPP-D) and Quebec Pension Plan Disability (QPP-D), the Employment Insurance Sickness Benefit, and the Veterans' benefits for disability and two tax measures related to disability. In 2008-09 CPP-D and QPP-D benefit expenditures of CAN\$ 4.1 billion were received by 390,000 working age adults. Employment insurance sickness benefit expenditures of CAN\$ 1 billion were provided to 330,000 recipients. Veterans' disability benefits of CAN\$ 2 billion were provided to 177,000 recipients [13]. Canada has relatively high expenditure on private disability insurance, with employment-based long-term disability insurance, provided by the for-profit insurance industry, represents expenditures in the range of CAN\$ 4.7 billion [13].

The Canadian Pension Plan Disability Benefit (CPP-D) programme is part of the Canada Pension Plan (CPP) and it is the largest federal disability insurance scheme. The benefit is treated as a base income and assumed to be supplemented with other benefits. The Programme is based on a stringent definition of disability as "severe and prolonged disability such as the person is incapable of gainful employment" [14]. It is calculated as a sum of a flat-rate amount plus 75 per cent of the contributor's predicted CPP pension amount at the age of 65. The CPP-D is available to anyone who meets the eligibility criteria irrespective of other benefits, such as provincial social assistance, workers' compensation or private disability insurance benefits [15]. When recipients return to work they are not eligible for CPP disability benefits once they earn over CAN\$ 5,100 a year.

The Employment Insurance (EI) Sickness Benefit is a time limited benefit of maximum 15 weeks for periods of temporary illness. It is administered as a "last-payer" programme and benefits are reduced when recipients receive benefits from workers' compensation, group insurance income and accident compensation for lost wages. The criteria to access the benefit require the claimant to demonstrate that their regular weekly earnings have decreased more than 40 per cent due to disability and that 600 insured hours have accumulated over the previous 52 weeks or since the previous claim [14].

The Canada Revenue Agency administers two tax measures related to disability: the Disability Tax Credit (DTC) which is a non-refunded tax credit and the Registered Disability Saving Plan (RDSP) which was established in 2008. The DTC is available to people who are blind, are receiving life sustaining therapy or have impairments or physical or mental functions that have lasted or are expected to last one year. Recipients eligible for a DTC and under 60 years of age are eligible to open a RDSP.

Three disability income security schemes are under provincial jurisdiction including the provincial social assistance disability benefit, the provincial workers' compensation benefit and the employment-based long-term disability plans. Provincial government social assistance expenditures

for people with disabilities are estimated to be CAN\$ 8 billion [13]. Short and long-term income security benefits provided by provincial workers compensation authorities total approximately CAN\$ 5.4 billion.

The provincial government social assistance disability scheme in Ontario is called The Ontario Disability Support Program (ODSP). The Ontario Disability Support Program (ODSP) offers financial assistance to help with essential living expenses as well as benefits including prescription drugs and vision care¹. It is a means-tested program available to all Ontario residents who meet certain financial and medical eligibility requirements. As in other provinces, Ontario adjusts these benefits to account for assets. These can include cash, properties, trust funds, registered retirement saving plans (RRSP), stock and bonds [13].

An individual is eligible for the ODSP if they have a substantial mental or physical impairment that is continuous or recurrent and is expected to last for a year or more. Eligibility is assessed by the Disability Adjudication Unit (DAU), made up of allied health professionals. The ODSP has no time limits and allows beneficiaries to work – while keeping 50 per cent of each dollar earned following a CAN\$ 200 per month exemption[14]. The medical review and adjudication process for the ODSP was simplified in 2016 after significant lobbying from mental health patient, advocates, stakeholders and organisations.

Provincial workers' compensation agencies administer benefits for wage losses arising from disabling disease or injuries caused by work. In Ontario, benefits combined with labour market earnings are designed to replace 80 per cent of post-tax pre-injuries earnings [14].

Unemployment benefits

Unemployment benefits were first successfully introduced in Canada in 1935, when the *Unemployment Insurance Act* was passed. This was superseded in 1971 by a new unemployment insurance act which liberalised access to, and adequacy of the benefit. The original version of the Act only covered 42 per cent of the workforce, compared to 96 per cent of the 1971 version. Since the 1971, significant changes and reforms have been implemented, mainly as a response to increasing costs related to the liberalisation and economic downturns. These changes led to a tightening of eligibility criteria and a reduction in adequacy [16].

Initially, the cost of unemployment insurance (UI) was shared between employees, employers, and the federal government. In 1990, the programme was made self-financing, as the government removed their own financial responsibilities to UI, and costs were shared between employees and employers alone. The name of the programme was changed in 1996 to Employment Insurance (EI). This was to move away from the image of supporting unemployment and highlight the core aim of promoting employment. Currently, eligibility for EI includes: being in insurable employment; becoming unemployed through no fault; been unemployed for at least seven consecutive days, and worked the required hours for EI, in the previous year; and, actively looking for work. Exemptions to

¹ <http://www.mcass.gov.on.ca/en/mcass/programs/social/odsp/index.aspx>

EI entitlements include; voluntarily leaving a job; dismissal for misconduct; and, unemployment due to participation in a labour dispute [17].

To qualify for EI, applicants are required to have worked a required number of hours of in insurable employment during the qualifying period (usually 52 weeks prior to application). This equates to between 420 and 700 hours depending on applicant circumstances. The basic rate of EI is 55 per cent of your average insurable weekly earnings, up to CAN\$ 51,700, or CAN\$ 547 per week. The EI payment period can be between 14 and 45 weeks, depending on the number of insurable hours worked and the employment rate of the region of residence [17].

Active Labour Market Programmes

The following measures focus on the policies that seek to improve the employability of older workers. Canada has introduced different programmes to support the education and training of older workers. Other measures introduced for better integration of older workers into employment seek either to help older people retain existing employment or encourage re-employment of inactive older workers.

In Canada, the provinces and territories are responsible for the delivery of education and there is no national or federal department of education, although Human Resource and Skills Development Canada (HRSDC) has some responsibility for funding training services for adult labour force participants. Adult education is delivered through an array of providers of training for unemployed and workplace education, such as provincial institutions of education, and voluntary or community associations. The role of the federal government is to provide financial resources for workforce skills development, training for the unemployed etc.

Labour Market Agreements (LMAs) are a measure introduced by the Government since 2008-9 providing CAN\$ 500 million annually to provinces and territories to support the delivery of eligible labour market programmes. These bilateral agreements provide provinces and territories the flexibility to design and deliver programmes aimed at increasing the labour market participation and skill sets of unemployed individuals who are not eligible for Employment Insurance (EI), including older workers and other underrepresented groups.

According to the OECD thematic follow-up review (2012) each year, Labour Market Agreements for Persons with Disabilities (LMA PDs) support approximately 300,000 participants through over 100 programmes that are funded in part by the Canadian Government and designed and delivered by provinces. This gives provinces the flexibility to determine their own priorities and approaches to best address the needs of people with disabilities in their jurisdiction. These broad, flexible programmes are supplemented by initiatives aimed at improving the labour market participation of older workers through grants and contributions. One of these projects has the objective of creating an effective and replicable online community-based model to assist older workers in accessing job opportunities: the model embeds essential skills into job search strategies for older workers and into recruitment strategies for employers [5].

The Targeted Initiative for Older Workers (TIOW) was introduced in 2006 as a cost sharing measure between federal government and provinces/territories to provide employment assistance services and activities to improve employability through skills upgrading and work experience. The targeted groups are unemployed workers aged 55+ who live in communities of 250,000 or fewer, experience on-going high unemployment or rely heavily on one employer or industry affected by downsizing or closure. The TIOW supports tailoring of projects to the needs of local communities and to the learning

styles of individual participants. It provides a suite of employment assistance and employability improvement measures, including skills development and work placements, offered in a group-based setting where participants can benefit from peer support. As of June 2012, 354 projects had targeted over 17,800 participants [5].

A strategy to extending working life among self-employed people is the self-employment (SE) benefit, one of five forms of employment assistance as part of the EI act. It is intended to help unemployed individuals create jobs for themselves by starting a business or becoming self-employed [5].

Working Conditions

Health and Safety

In Canada, occupational health and safety is broadly the responsibility of the provinces [18]. For example, in Ontario, Health and Safety standards are set by the Ministry of Labour [19]. Despite this, there are federal aspects to the area of health and safety at work. The Workplace Hazardous Materials Information System is the national classification and communication standard for hazards [20]. Additional to this, there are national laws which cover health and safety, including:

- Hazardous Products Act;
- Canada Labour Code;
- Controlled Products Regulations;
- Canada Occupational Health and Safety Regulations; and,
- Canadian Centre for Occupational Health and Safety Act

Employee Rights

All provinces and territories in Canada have legislation designed to protect human rights and ensure equality. In addition, the federal government has legislation that covers industries that are considered to be federal undertakings, which are outside the scope of provincial and territorial jurisdiction.

The provisions that prohibit discrimination on the basis of age are grounded in section 15(1) of the Canadian Charter of Rights and Freedoms (Charter) which states:

“Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination, and in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.”

Stemming from the federal Charter, human rights legislation falls largely under the jurisdiction of the provinces and territories, which leads to some difference in specific legal provisions. Notwithstanding these differences, all must be in keeping with the protections provided in the Charter.

Section 5(1) of Ontario’s Human Rights Code (Code) prohibits discrimination in employment, including on the basis of age. The section applies broadly to “every person”, which means it includes anybody in an employment relationship, paid, unpaid, temporary, casual, probationary etc.). It also

includes hiring practices, as well as policies and practices for those who are on the job. Before 2006, the definition in the Ontario Code did not apply to people aged over 65. Since 2006, those over the age of 65 are covered, and as a consequence, mandatory retirement is prohibited. There are some exceptions. All jurisdictions allow jobs to be terminated or people refused employment on the basis of age where the employer can demonstrate it is based on a “bona fide occupational requirement”. This demonstration must be done on a case by case basis, and the Supreme Court of Canada has developed factors to guide its application.

These human rights protections for older workers and people with disabilities aim to address the barriers older workers face finding employment, accessing promotion or workplace training programmes, or being subject to differing or higher levels of performance management on the job. Employers are required to accommodate workers with health impairments as long as this does not cause “undue hardship” to the organisation. The threshold for undue hardship is relatively high. For example, in Ontario the Code prescribes only three relevant considerations when assessing whether an accommodation would cause undue hardship: cost, outside sources of funding, and health and safety requirements. No other factors can be considered. In order to claim the undue hardship defence, the organisation responsible for making the accommodation has the onus of proof. The nature of the evidence required to prove undue hardship must be objective, real, direct and quantifiable [21].

Policies Affecting Unpaid/Informal care

More than six million people – 35 per cent of Canada’s workforce – provide unpaid, informal care while balancing job responsibilities. Most working carers spend nine hours or fewer per week caring, but some (24 per cent) are spending at least 30 hours. The recipients of care are primarily older people, and most caregivers are 45 and older [22].

Health and social care system changes that impact on informal care

Canada’s health care system is decentralised, with provinces and territories having primary responsibility for organising and delivering health services and supervising providers. Regional health authorities have been established by many to plan and deliver publicly funded services locally. The *Canada Health Act* 1984 established five underlying principals which set the standards for medically necessary hospital, diagnostic and physician services. These principals state that each provincial health care insurance plan needs to be: publicly administered; comprehensive in coverage; universal; portable across provinces; and accessible (without user fees).

The provinces and territories administer their own universal health insurance programmes, covering all provincial and territorial residents according to their own residency requirements. Private health insurance is held by approximately two-thirds of Canadians and covers services which are excluded from public reimbursement, such as vision and dental care, prescription drugs, rehabilitation services, home care and private rooms in hospitals.

At the annual meeting of Canada’s provincial premiers in July 2015, dementia, senior care, appropriateness of care, and pharmaceuticals were identified as national health care priorities [23].

Cash benefits for carers and recipients of care

Programmes available to caregivers vary from one region to another [24], although the proportion of regular carers who received money from a government programme or a federal tax credit showed

little variation [25]. Cash benefits, for example, which are paid to the care recipient offer direct support to the person who is most in need but are not only or necessarily used to compensate carers. Many provinces and territories in Canada have well-established self-managed care schemes, providing eligible users with cash benefits to manage care delivery, including by paying family carers and friends.

Another financial provision is tax credits benefiting carers. Carers may be eligible for financial support through the federal tax system. These include the Family Caregiver Amount Tax Credit (which includes separate amounts for eligible dependents, infirm dependents over 18, spouse or common-law partner, and children under 18), the Disability Amount Tax Credit Transfer, and the Medical Expenses Tax Credit (METC) [26]. Under the METC, caregivers can claim, on behalf of a dependent relative, up to CAN\$ 2,302 or 3 per cent of the dependants net income, in medical and disability expenses. The infirm dependent amount is limited to CAN\$ 6,986 per dependant. The spouse or common-law partner amount is CAN\$ 2,182.

In addition to the federal tax credits, comparable caregiver tax credits are available in each of Canada's 13 provinces and territories. Different provinces also make additional provisions. The provinces of Québec and Manitoba also offer refundable tax credits to eligible caregivers [27].

The Ontario Family Medical Leave programme builds upon the 2004 Federal Compassionate Care Benefits programme, through which employees can receive eight weeks of employment insurance (EI) for an approved period of leave to provide care or support to an individual with a serious medical condition and who has a significant risk of death occurring. In all instances, a medical note is required to qualify.

Saskatchewan provides up to 12 weeks per year for any serious illnesses that requires caregiving, with an additional four-week top-up when the employee is in receipt of EI compassionate care benefits. Similar to the Ontario legislation, employees in Saskatchewan are not limited to taking leave only during a palliative caregiving situation; rather, they can be protected during a broader caregiving needs. Quebec also provides up to 12 weeks; however, the caregiving must be for someone in a palliative care situation. All other provinces, with the exception of Alberta, provide up to eight weeks' unpaid leave as part of provincial-based compassionate care leave legislated programmes².

Over the past few years, employers have begun to introduce programmes that offer additional support for working carers. Some examples include: the care management and advocacy programme which provides the employee with access to an expert case manager who can provide guidance, navigational support, case management and access to resources and services (such as home care or backup care and emergency monitoring services) to assist with the caregiving challenge. Some employers have begun to provide short-term paid leaves of absence that can be used for a number of different reasons, including a caregiving situation. Most often, these programmes offer three to five days that can be used on short notice throughout the year. Leading backup care providers supply services to address both childcare and eldercare needs. Care can be

² Source: <http://www.benefitscanada.com/benefits/health-benefits/family-caregiver-leave-options-and-new-legislation-29563>

arranged on an emergency basis across the country as needed. In some cases, employers provide direct funding that can be used to pay for the care. Most employee assistance programmes have expanded their offerings to include access to resources to help employees with caregiving challenges. These programmes provide basic information about resources, which employees can then contact to arrange services.

Services to support informal carers

Various policies and programmes, such as renovation credits, respite services, practical advice and emotional support, have been implemented by provincial and territorial governments. In 2014, the Government of Canada launched the Canadian Employers for Caregivers Plan (CECP) to explore ways to help working carers participate as fully as possible in the labour market. These include tax measures, income replacement through employment insurance, and provision of targeted programmes for carers.

DENMARK

Introduction

Nineteen per cent of the Danish population is over 65. Danish labour market model is characterised by a unique combination of flexibility and security. Denmark has high labour market flexibility through job rotation and mobility and relative low employment protection, whilst having generous and long-term social protection and extensive investment in programmes to support people out of work into employment, so called flexicurity. Active labour market programmes are a core aspect of the flexicurity approach, with a key programme being 'Fleksjobs', a subsidised employment scheme. The public pension system provides good coverage with a relatively good minimum pension effectively minimising poverty in old age and most people also have additional more generous private pensions. One unusual aspect of policy in Denmark has been a series of policies actively encouraging early retirement – initially introduced to improve the employment of younger age groups. Whilst these have been reduced in recent years some still remain. The Disability and sickness benefits systems have been through major reforms in 2013 and 2014, which have increased assessment requirements, developed a comprehensive process of vocational rehabilitation and expanded the wage subsidy scheme (see Appendix B). The work environment for older workers and people with disabilities is characterised by a great deal of flexibility – particular due to measures that are part of the collective labour market agreements that cover most employees [28]. Levels of provision of unpaid care are generally low potentially due to the extensive provision of formal social care services.

Pensions, sickness, disability and unemployment benefits

Pensions and retirement

The Danish state pension scheme was introduced in the late 1950s and the public old age pension (OAP) called "Folkepension" in Danish, was implemented in its current form in 1964. The pension is based on residency and consists of three elements: the basic amount, the pension allowance and a supplementary benefit for economically disadvantaged pensioners. It provides all persons reaching the legal retirement age who have lived in Denmark for at least 40 years with basic amount (flat-rate pension). The basic amount of the public old age pension offers the same benefit level to everyone who has fulfilled the minimum requirement for a certain number of residence years in the country³, irrespective of their previous income and employment history. The amount constituting the pension allowance varies whether the pensioner is living by her/himself or is married or cohabiting. Supplements depend on income and wealth targeting economically disadvantaged pensioners. Pensioners can furthermore be eligible for supplements such as heating or health expenditure and

³ Eligibility requires residence in 40 years within the age of 15 and 65, if this requirement is not fulfilled the pension is reduced proportionally to the accumulated period of residence.

they can access housing benefits depending on their economic situation. The supplements aim to ensure that all pensioners have a decent living standard. The OAP offers high non-contributory public benefits to workers that have accrued lower levels of private pension benefits. In 2004, the age for accessing OAP was lowered from 67 to 65 [29], but it will be increasing again in the coming years. From 2011, working at least 750 hours a year enables people to receive a pension increment by deferring take up beyond state pension age (Opsat folkepension). The uptake can be deferred no more than twice [30]. The virtue of the Danish OAP is that it constitutes a very good minimum pension combating poverty in old age, although it does not provide a good substitute income for middle and higher earners.

In addition to the basic old age pension the Danish government in 1964 introduced the Labour Market Supplementary Pension (ATP) as a compulsory scheme. It is a statutory, fully funded, defined contribution scheme. All employees working more than 9 hours a week, as well as most of the recipients of social security benefit have to pay contributions to the scheme, while membership is voluntary for self-employed people. Occupational contribution pension schemes have been included in all collective labour agreements since the early 1990s covering today about 90 per cent of the labour force [31]. The contributions vary depending on income, with an average contribution of approximately 11 to 12 per cent of gross salary.[30] The amount of contribution depends on the numbers of weekly working hours and years before retirement, but not previous income level. The contributions vary between 12 per cent for low income workers and 18 per cent for some income groups. One third is paid by the employee while two thirds is paid by the employer. Pensions from these schemes are in a number of cases as high as three to four times the basic amount of the state old-age pension system [32].

The retirement age in Denmark is currently 65 years but, as part of the Welfare Reform of 2006, it was agreed that the retirement age would gradually increase to 67 by 2027. However, this process was then advanced by five years as part of the Retirement Reform of 2011. The retirement age will, therefore, increase gradually to the age of 67 over the period 2019-2022 [33], [34]. In addition, the reforms of public pensions in 2006 and 2011 further introduced a new initiative stating that the retirement age will be adjusted in line with increases in the remaining average life expectancy at age 60. In 2008, mandatory retirement at the age of 70 for the majority of civil servants was abolished, but it is still in place in selected areas in the private sector.[30] There are ongoing negotiations to abolish the remaining mandatory retirement ages [34].

Pensioners are encouraged to work and were previously allowed to earn up to DKK 30,000 per year without any pension reduction [35]. As part of the Retirement Reform in 2011, it was agreed that the maximum earnings from employment that can be received without affecting the state retirement pension would be raised to DKK 60 000 per year [34] and these changes were put into effect from 2014 [36], [37]. People working beyond the state pension age can defer receipt of their pension and receive a higher rate. The minimum number of hours people are required to work to defer their pension was reduced in 2011 from 1 000 to 750 a year [34]. A voluntary early retirement programme (VERP, Efterløn), was established in 1979 allowing people to leave the labour market earlier than pension age. To be eligible for VERP workers have to be members of an unemployment insurance fund (UIF). The requirements for qualifying for VERP schemes have been adjusted several times, but currently the main requirements include having paid contributions for VERP for at least 30 years and being member of a UIF [33], [34]. However, the Welfare Reform in 2006 also introduced an option to enter the VERP scheme for people who had initially opted out if they have been a member of a UIF since the age of 24 and signed up for the VERP scheme no later than 15 years before they

were eligible to claim VERP. In this option the final pay out of VERP is adjusted for the lower number of years contributing to the scheme [33]. As part of the Agreement on Later Retirement ('Tilbageføringsreform' 2011), the VERP benefit period has been gradually reduced from five to three years. People born before 1954 who fulfil basic requirements can obtain a voluntary early pension for a period of five years from age 60 to 65. For people born between 1954 and 1955, the age limit is gradually increased from 60 to 62.

In the early 1990s, the government introduced several measures that allowed people to retire even before they became eligible for VERP. In 1992, the government introduced the transitional benefit programme (TBP) or "Overgangsydelse" this enabled older unemployed workers to extend receipt of unemployment benefits until they were eligible for VERP older workers. Initially the minimum age was 55 this was then lowered further to 50 in 1994. The programme was closed to new entrants in 1996 and the last person left the programme in 2006 [38]. In 1994, the extended right to unemployment benefits (den forlængede dagpengere) was introduced for older workers. This programme meant that older unemployed workers in the age from 50-59, who had exhausted the ordinary right to unemployment benefits had their benefits extended up until they turned 60 years old. This extended right was reduced in the 2006 welfare reforms (see below).

The law on tax reduction for seniors were introduced in 2008 as a way to give a financial incentive for older workers to remain in employment longer i.e. it was targeted at individuals considering leaving the work force before turning 65. The law provided a tax reduction of up to DKK 100,000 for 64-years-olds in employment who had been a full-time employee since the age of 60 and had an average yearly income of less than DKK 550,000 [39], [40]. The scheme was closed in 2017.

Disability and sickness benefits

In Denmark sickness benefits are provided to support people who are unable to work due to an illness. This is a short-term benefit and in principle people are only allowed to receive the benefit for up to 22 weeks out of the last 9 months, although there are circumstances where this can be extended. The benefit can be either full time or part time [41]. If a worker is not entitled to receive the full salary during sickness absence through an employment contract or collective labour market agreement they receive sickness benefits, otherwise the amount of benefit goes as a subsidy to the employer. During the first 30 days, sickness benefits are paid by the employer after which the municipality is responsible for paying sickness benefits, either as a compensation to the employers which pay full salary or directly to the employee. There are several requirements to be met if one is to be eligible to receive sickness benefits from the municipality. One has to be entitled to receive unemployment benefits or have worked a minimum of 240 hours within the last six months with a minimum of 40 hours per month [41]. In addition, if an employee suffers from a chronic or longstanding illness, which is likely to result in additional sickness absence it is possible to apply for a formal agreement, which financially compensates the employer from the first day of sickness absence given the absence is due to the specific disease covered by the agreement. The disease has to give rise to more than 10 additional sick days per year for an agreement to be established or it can be given in certain circumstances to cover leave due to treatments [42], [43]. Since 2009 employers are required to conduct sickness absence interviews with employees within 4 weeks of sickness absence, the employer and employee have a duty to attend this interview and the

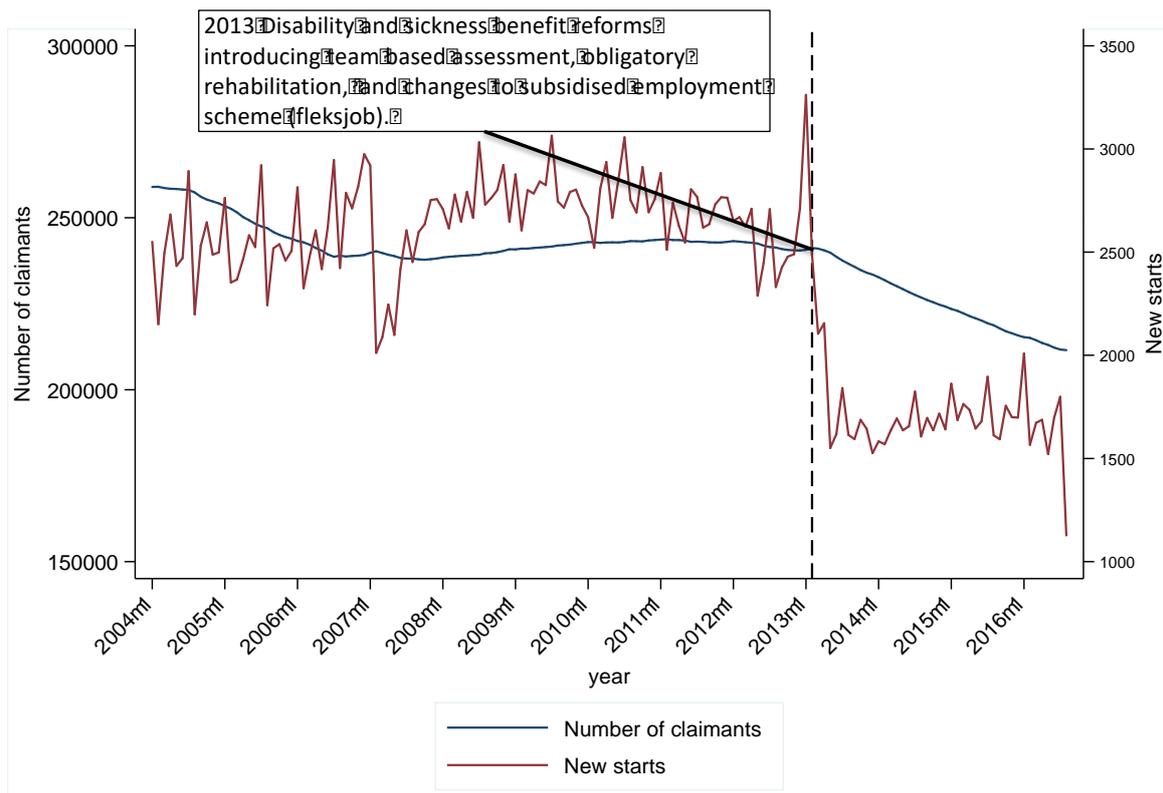
employees are entitled to ask for a return-to-work plan at any point in the process if they expect to be off sick for more than 8 weeks.

The disability pension (førtidspension) is a tax-financed disability pension for people who have permanently lost their work capability. There are no eligibility requirements related to contributions or career record. The size of the disability pension depends to a limited extent on the civil status and claimant status of the household and it is possible to combine disability pension with income from work [44]. Benefits are reduced if earnings exceed DKK 75.800/120.100 (single/couple) [45].

In 2013, the disability pension scheme underwent major reforms. Disability pensions were effectively no longer available for people under the age of 40 unless functional limitations were without any doubt limiting employment prospects for example in the case of severe developmental disorders. Generally, disability pensions can only be granted where there is no possibility of returning to work. Where claimants have any chance of improving their work ability in order to return to work, they receive obligatory vocational rehabilitation ('ressourceforløb'). This is based on an assessment from a 'Rehabilitation team' that includes participation from municipality employment, health, social and education sectors, as well as from the newly established sections of social medicine, located in all 5 regions and affiliated to the public hospital system (see below).

In 2014, related reforms were made to the sickness benefits scheme, introducing an assessment process from the same 'Rehabilitation team' after people have been on sick leave for 5 months. Claimants evaluated with risk of further sickness absence at this point are offered the same vocational rehabilitation program as with regard to disability pension [30]. During this process the person can be granted benefits equal to social assistance. These 2013/2014 reforms led to a 50 per cent reduction in the on-flow rate into disability benefits in Denmark and has started to reduce the benefit caseload (see Figure 2)

Figure 1 Trend in disability benefit numbers and new starts for disability benefits, before and after 2013 reforms in Denmark.



Unemployment benefits

The Danish income support system differentiates between insured and non-insured unemployed. Insured unemployed receives insurance benefits, while uninsured might have access to social assistance if complying with means-tested conditions. Unemployment insurance benefits (UIBs) are financed by a universal membership fee of €510 per year and by contributions from the state budget. It is a voluntary program and when opting in one chooses between being insured on a full or part time basis [41]. However, to qualify the person must have worked 52 weeks within the last three years. Eligibility requires registration of the jobseeker with the municipal jobcentre and to be available and actively and continuously looking for jobs. In 2015 the benefit amounted to 90 per cent of former earnings with a ceiling of €111 per day. Unemployed people who are not eligible for UIB can receive social assistance benefits which is financed by general taxes and administrated by municipalities. In 2015 the monthly social assistance benefit was €1,454 for persons without dependent children and

€1,932 for persons with dependent children. Married, but not unmarried couples might have reduced social assistance benefits with regard to the spouses income [46].

The period one can receive unemployment benefits has been changed several times since the beginning of the 1990s. Before 1993, the period one could receive UIB was in practice unlimited, but in 1993 a restriction of seven years was introduced for the general population. In addition, the maximum time on UIB was restricted to two and a half years for people who had turned 60. The time one could receive UIB was further restricted several times during the 1990s. As part of the Welfare Reform in 2006, the extended right to UIB for 55-59 years olds was reduced from up to nine years before the reform to a maximum of four years. At the same time the UIB for people above 60 was raised to four years so that the maximum time on UIB now was identical across all age groups [47]. With the Unemployment Benefit Reform of 2010, the unemployment insurance benefit period was reduced from four to two years, although this change wasn't actually introduced until 2013 because of political pressure on the new social democratic government. In 2013 about 34.000 persons lost their unemployment benefits. Afterwards the law was adjusted several times to support those long-term unemployed, with special job-search support and new temporary benefits ('arbejdsmarkedsydelse'). The temporary benefits included the non-means-tested temporary labour market benefit (midlertidig arbejdsmarkedsydelse) at 60 per cent of the maximum unemployment insurance benefit and the educational benefit (uddannelsesyldelse) [46]. Temporary unemployment benefits were introduced for an interim period and stopped in 2016. Additional changes included in the Unemployment Benefit Reform included an introduction of changes to cap the maximum amount of social assistance unemployed people can receive and the number of weeks of work required to be eligible for a new round of UIB was increased from 26 to 52 weeks [46].

In 2015 further reforms to the unemployment insurance were introduced. This changed the way a participant's potential unemployment insurance benefit period was calculated and the ways the benefit level was calculated [48]. These reforms required the unemployed to participate in regular meetings with the job center. The meetings are especially intensified during the first six months where participation in monthly meetings is mandatory. These measures are accelerated for the youngest and the oldest age groups. Unemployed below 30 and above 50 years are entitled and obligated to have started an active employment effort no later than after three months of unemployment, whereas the deadline is six months for the unemployed between 30-49 years.

In 2015, a new reform on social security was agreed specifying new terms for people who are unemployed and are not entitled to UIB. The main elements of this agreement were the introduction of a new cap of social benefits and increased demands of showing availability on the labour market. This cap implies that there is a limit to the total amount of social aid a person can receive. The cap includes social benefits such as social security, housing benefits and special support for housing (which covers extraordinary high housing costs due to social events such as unemployment, illness or divorce or higher housing expenses due to a large provider burden). The cap does not, however, include social benefits related to children. The cap varies depending on age, whether the recipient is a single household or cohabiting as well as the number of children. The rules apply to all types of social security benefits (social security, educational benefits and integration benefits). In addition, the reform introduced the 225-hour rule to show availability on the labour market. This rule states that all recipients of the different types of social security, and who are able to work, must meet the requirement of working for a minimum of 225 hours during the course of a year. People who fail to meet this requirement will experience a reduction in the level of social security received. The weeks of holidays for people on social security was also reduced from five to four [49], [50].

Active Labour Market Programmes

A number of policies have been introduced in Denmark to reduce sickness absence and to assist return to work for unemployed and disabled people. Extensive activation programmes are an integral part of Denmark's "flexicurity" model alongside high levels of labour market flexibility through job rotation and mobility, generous and long-term benefits and relatively low employment protection [51].

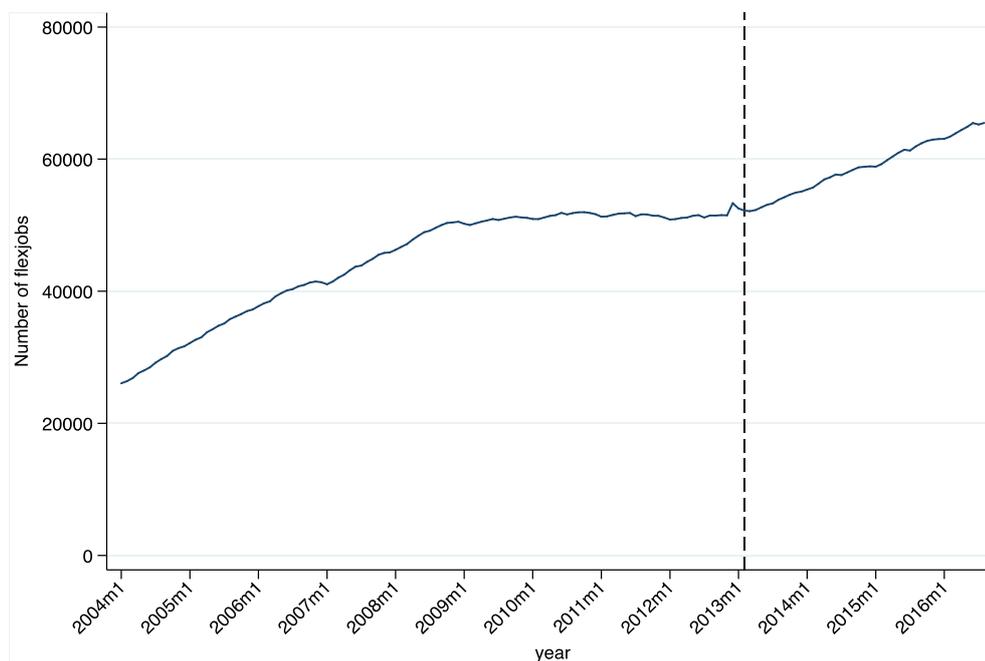
As mentioned above the Sickness benefit and disability pension reforms in 2013 and 2014 introduced a workability assessment process for people receiving sickness benefits for more than 5 months. If the person is still unable to return to the previous or any other job on the labour market and no further prolongation is possible, at this point, they are transferred to meet the municipal rehabilitation teams that includes participation from municipality employment, health, social and education sectors, as well as from the regional sections of social medicine in an attempt to re-evaluate health status, unmet treatment or rehabilitation and any social barriers for developing work capability. Based on this assessment, the team develops individual, tailor-made vocational rehabilitation ('ressourceforløb') which can consist of health-related interventions, social interventions, educational or employment measures coordinated by a case manager [30]. Vocational rehabilitation can be granted for periods of one to five years. If the person is not back at work during this period, but a return is still assessed to be likely later on, further vocational rehabilitation process periods can be granted.

During the assessment process a decision might also be made about entitlement subsidized employment scheme ('Fleksjob'). Fleksjobs are subsidized jobs offered to people who have certified permanent functional limitations and are not able to fill a normal full time job. The scheme was first introduced in 1998. Employers who hire eligible workers are entitled to a wage subsidy of between 1/3 and 2/3 of their wages graduated according to the degree of reduction of working capacity[52]

The eligibility criteria to access a fleksjob are: the person has to be below the statutory retirement age; the municipality has assessed work ability as significantly and permanently reduced; all treatment and rehabilitation options must have been exhausted/approved; and the person is regularly assessed for the ability to continue working. People with disabilities who are approved for fleksjobs are supported by municipal job centres like other unemployed people. Centres offer similarly guidance and skill development courses when required, and assist in the search for appropriate fleksjobs. Since the 2013 reforms employers pay salaries for the work hours performed and municipalities pay an extra wage subsidy directly to the employee [30].

The 2013 disability pension reforms also expanded the fleksjob scheme to include more part-time jobs of fewer than around 12 hours, which was the former lower boundary. Since 2013, fleksjobs for less than 12 hours per week are permitted when it is reasonable to assume that working hours could increase over time. Entitlement for fleksjob is valid for five years, after which a re-evaluation or work ability is mandatory (see Figure 3).

Figure 2 Trend in fleksjob numbers before and after 2013 reforms in Denmark.



Unemployed older people who lost their right to unemployment benefit because of the 2006 Welfare Reform have a right to a guaranteed job provided by their municipality – referred to as a 'senior job'. The Senior Job scheme was written into the 2006 Welfare Agreement as part of a package to promote later retirement. This measure is accessible only to a selected group of people who are unemployed; members of a UIF; have paid a premium to the VERP; are entitled to a VERP when they reaches the age of entitlement of this benefit; will have exhausted all rights to unemployment benefits no later than 5 years before entitlement to VERP. Normal wage and working conditions regulations apply and the person can keep the job until they reach VERP eligibility. The municipality receives a subsidy of about DKK 136,410 per year for a full-time senior job [53]. In 2014, 4872 people were granted a Senior Job.

In 2014 the government introduced the Employment Policy Reform, which aimed to integrate the unemployed faster in the labour market and to provide them with better, and more individualised, support for the unemployed. The main elements in the reform include several educational funds. There is a regional educational fund focused on upgrading qualifications of more people on UIB through shorter, vocational education targeted in areas with expected job openings in the next six months (DKK 100 million per year). Furthermore, other funds focus on unemployed with the largest needs get the opportunity to upgrade from unskilled to skilled workers (DKK 150 million per year). These funds ensure that unskilled workers or people with out of date qualifications, who are above 30 years old, can start an education from the beginning of the UIB period at a rate corresponding to 80 per of the UIB and the possibility to take up a loan for the remaining 20 per cent. The reform also introduced changes to a shorter self-elected education of six weeks, which now has to be targeted to selected employment areas and focused on people with low education [54]. Unemployed people aged 55 and over who have been unemployed for at least 12 months can also gain a subsidised job

in the private sector for six months. They are not guaranteed a job, but if they find one the company is granted a subsidy.

A further measure that aims to help older unemployed people into work is the Senior Network (Senior Erhverv). These were started as a private initiative in 1995, they now receive financing from the public budget and the Danish government has allocated DKK 6.3 million per year for the period 2014-2017. They are independent networks of volunteers who provide peer support for unemployed older workers to contact employers directly and other activities such as visits to companies, training, social activities, CV writing etc. [55]. To be eligible for public support the local network must have a cooperation agreement with at least one jobcentre and at least 25 unemployed members over the age of 50. In 2016 there were 23 and 1270 members of whom 915 are in jobs [56].

Working Conditions

Health and Safety.

Denmark has had regulation on worker protection since 1873 when the Danish Working Environment Authority was set up. In 1975, the working environment rules were consolidated into a single Act, the Danish *Working Environment Act*. The current *Working Environment Act* was passed in 2010 and it aims to prevent accidents and diseases at the workplace and focuses the performance of the work, the design of the workplace, technical equipment, substances and materials, rest periods. There are not specific provisions in relation to older workers. The Working Environment Authority oversees the implementation of the Act helping to ensure a safe, healthy and constantly improving working environment through effective supervision, appropriate regulation and information. The Authority can impose various sanctions on employers that are not compliant with the Act [57]

In 2006, a Prevention Fund was established to prevent physical and mental disabilities in selected industries characterised by hard physical labour and low educational level. The fund aims to contribute to a later retirement from employment by supplying funding for private and public companies that focus on changing straining working procedures and routines, better rehabilitation of people who are sick or handicapped, strengthening of initiatives focussing on increasing the awareness of the health risks associated life style [58]. In 2010, another main purpose of the fund was added, which meant a focus on occupations with an increased risk of mental strains [59]. In 2013, the Prevention Fund was extended to focus specifically on promoting a better working life for older workers, this included a 'Senior Starter Kit' introduced in 2013, that highlights health and safety issues at work for older workers, broader health needs, qualification and skills, and consideration of special needs and access to flexible working arrangements [30], [60]. These kits are very popular and in 2014 they covered enterprises in 13 different industries.

Employee rights.

In 2004, Denmark introduced an amendment to its existing *Anti-discrimination Act* spurred by 2000 EU Directive on Equal treatment in employment and occupation [30]. This amendment added both disability and age as protected characteristics to which employers are prohibited from direct and indirect discrimination with regard to recruitment, employment and dismissal. Several initiatives have also been launched which help to increase awareness of not discriminating older applicants in the

hiring process [61]. It is notable that initial implementation of antidiscrimination legislation was limited. This is because the Danish definition of disability was narrow; disability had to both be permanent and requiring of compensation. To add to this, the definition of reasonable accommodation was also strict; for example, a reduction in working hours was not viewed as such. In 2013, both the definitions of disability and reasonable adjustments were extended, as a reaction to statement from the EU Court of Justice. While employment rights for disabled worker are being extended in Denmark, this has been a slow process and is generally reactive to European Directives [62].

All employees in the public sector are covered by a collective labour agreement (CLA) as well as about 70 per cent of employees in the private sector. Most of these CLAs includes some specific measures to support older workers in employment. Provision for older workers in CLAs such as remuneration, training and other working conditions are negotiated every two to three years by workers' unions and employers' organisation. The nature of provision for older workers however differs between the public and private sectors, with the public sector generally providing greater support [30].

Since 1995 the majority CLAs have included "social chapters". These effectively mean that employers can set pay and working hours conditions for long-term unemployed, disabled and older people, that deviate from general provisions of the collective agreement. These jobs can include targeted support for people with reduced work capacity. Following the 2013 reforms outlined above if an employer wishes to convert an employee's position into a fleksjob – and receive a wage subsidy, the employee must have been working for one year in a "social chapter" job and this must include a written agreement between the employee and the employer describing which work functions causes the employee to experience problems and what measures have been taken to assist the employee. Exceptions to this rule are for those with newly diagnosed acute disease, which substantially reduces work ability and where no further treatment or rehabilitation options are available. In those cases entitlement to fleksjobs is possible without those conditions [63].

A further measure included in many CLAs is 'Senior Freedom'. When an employee has five years or less left until official retirement age they can draw up an agreement for shorter working hours or more days off called 'Seniors Days'. This measure is part of the employer's contribution to the occupational pension scheme and can be used to finance the extra time off [30], but the specific terms and number of senior days can vary between individual CLAs.

Policies Affecting Unpaid/Informal Care

In Denmark formal care provision is the main way in which the state supports work life balance for people with relatives with extensive care needs. Formal care mostly consists of domiciliary care through personal and practical help or nursing homes. It is provided by municipalities and there is little out of pocket expenditure required by households. As a result of this Denmark has the lowest share (1.3%) of men and women in Europe who provide unpaid care on a daily basis [64].

Several measures are also in place to support recipients of care directly. Disabled people aged 12-67 with reduced functional capacity are entitled to receive a companion (ledsagerordning) and personal assistance (borgerstyret personlig assistance, BPA). The companion scheme is for people with reduced physical and mental function capacity and it is in addition to other help such as practical help at home. The scheme offers up to 15 hours of help per month for e.g. grocery shopping or participation in social and cultural events. The municipality has to approve of the person hired as a

companion, but it is possible for the person receiving help to recommend a companion to the municipality. The companion cannot be a family member with whom the person has a close relation [65].

Cash benefits for carers and recipients of care.

Any person who takes leave to care for a relative or a close friend is entitled to a financial compensation through the care allowance (plejevederlaget). One element of this is applied when a person takes leave to care for a relative or a close friend who is dying and wishes to stay in his or her own home. The care allowance is obtained by applying to the municipality where the person dying will take residence in their final days. For people inside the labour market the benefit is 1.5 times the amount of any sickness benefit that the person would have been entitled to if absent from work, but the amount can never exceed the carers regular salary. In case the carer is entitled to maintain their regular salary during the leave the care allowance is paid to the employer [66]. People who are outside the labour market are entitled to receive a flat rate amount of € 2010 per month [67]. If two or more people share the care responsibility, the care allowance can be distributed and there is no fixed limit to the benefit period [68]. The eligibility criteria for obtaining care allowance are that a physician has assessed that treatment in addition to palliative care is futile, the survival time is limited, the dying person has a care need, both parties agree on the care task, and the care can be tended to at home [69], [70]. The care allowance in relation to caring for a dying relative or close friend was introduced in 1990. The original proposal did not incorporate the right to leave for people who were employed, but this would be granted solely on a voluntary basis from the employer though it was expected that public offices would comply with the intentions and grant the leave in case it was requested [71]. As of 1 April 1997, public employees have – through their CLAs – been entitled to partial or full time leave to care for a close friend or relative who wishes to die at home. Two years later, on 1 April 1999 the public employees gained the right to maintain their salary during the leave [68]. However, in 2004 the right to leave based on taking care of a person dying in their own home was implemented in the legislation [72].

Another element of the care allowance is for people in work who take leave to assist relatives with a significant or severe chronic or long standing illness. The maximum benefit period is 6 months but this period can be extended by up to 3 months in special circumstances. The care allowance is € 2220 per months and the carer builds up pension contributions of 12 per cent per month (4 per cent paid by the individual and 8 per cent by the municipality). The conditions for obtaining care allowance for a relative with chronic or longstanding illness or handicap is that the alternative to care at home is 24 hour care outside of the home, that the level of care corresponds to a full time job, that the person who is ill or handicapped lives in a private home (i.e. not in an institution), that both parties agree on the care arrangement and it is assessed by the municipality that the carer is capable of managing the care and the carer has an association with the labour market [69]. The right to leave from work when taking care of a relative or a close friend with severe and longstanding illness or handicap was implemented in the legislation in 2002 [73]. In 2014, municipalities spent € 25.8 million on care allowances and cash benefits to pay for equipment needed for the care of terminally ill people in their own home [46]

SWEDEN

Introduction

Twenty per cent of the population in Sweden is aged over 65 and one in twenty is aged over 85 [74]. The country is characterised by relatively high levels of welfare spending, and a decentralised system of government, meaning the county and municipal levels are responsible for most decision-making. In Sweden, the policy environment regarding work, disability and pensions has gone through considerable change during the period 1990-2015, much related to extending working lives beyond retirement age (see Appendix C). Early in this period, employment rates were high, including among people with health problems and there was an emphasis on active labour market policies, including re-training schemes [75]. After the 1992-1994 economic recession, the labour market became more challenging, especially for people with health problems and low skills [76].

Disability policy has focused on developing a more clearly defined process of assessment and rehabilitation in relation to sickness and disability related benefits. The state pension system in Sweden provides strong incentives to stay in work at older ages with pension accrual automatically adjusted to wage growth and life expectancy. In recent years, Swedish tax reforms have focused on increasing incentive for older people to stay on work. Employment at older ages is supported through well-resourced active labour market programmes often actively involving social partners and unions. There is however some disparity in the provision of these services with white collar workers generally getting better support. Sweden has relatively strong employment protection measures although these were weakened during the 1990s. A comprehensive universal social care system with few out of pocket expenses has historically limited the burden of unpaid care. In recent years, however, reductions in the availability of residential care for the elderly have increased the pressure on middle-aged women and men to care for their relatives [77].

Pensions, sickness, disability and unemployment benefits

Pensions and retirement

The Great Pension Reform began in June 1994 resulting in the adoption of the main principles of the current state pensions system. In 1998, detailed legislation was passed which resulted in implementation of the new system in 1999, which was fully operational by 2003. It transformed the Swedish Pension system from an earnings-related pension scheme indexed to prices, to a notional defined contribution scheme with pension accrual and payouts automatically adjusted to wage growth and life expectancy.

The current state pension system has three parts: the Income Pension (inkomstpension), the Premium Pension and the Guarantee Pension. The total pension contribution is 18.5 per cent of pensionable income: 16 per cent for the Income Pension and 2.5 per cent for the Premium Pension. For those that are working, just over half of this contribution is paid by the employer. The Swedish Government pays the pension contribution for those receiving social insurance or unemployment insurance benefits [78]. There is no fixed national pension age for the state pension– the lowest possible pensionable age is 61 but there is no upper ceiling.

The Income Pension is a Notional Defined Contribution (NDC) pension based on lifetime earnings. All insured people have an account with the Swedish Pensions Agency (Pensionsmyndigheten). Upon retirement, the account balance is converted to an annuity using a measurement called the “annuity divisor”. In real terms, this is the expected remaining life expectancy for the individual (based on their date of birth) plus an internal rate of 1.6 per cent. Therefore, this policy creates an incentive to retire later since those retiring earlier have receive much smaller pensions [78].

The Swedish Pensions Agency also holds the Premium Pensions (Premiepension), but participants can place their Premium Pension contribution in up to five investment funds [78]. When a person fails to select a fund, the capital is invested in a state-run default fund. Upon retirement, the balance can be paid out as either a fixed or a variable annuity and is calculated using the annuity divisor previously mentioned.

The Guarantee Pension (garantipension) pays basic income support for those without sufficient pension based on income. People with more than three years’ residency are eligible for a guarantee Pension, although the maximum guarantee pension is earned with 40 years’ residency and is reduced proportionally for shorter periods. The Guaranteed Pension cannot be claimed before the age of 65. The Guarantee Pension cover approximately 24 per cent of gross average earnings. Earnings above a threshold are reduced from the Guarantee Pension. When earnings-related pensions reach a level of about 35 per cent of average earnings, entitlement to the guarantee is exhausted. Approximately 100,000 Swedes only have a Guarantee Pension and 800,000 Swedes have a partial Guarantee Pension. Approximately 82 per cent of Guarantee Pension recipients are women. [79]

In addition to these three standard types of pension, Old Age Income Support is a last resort income-based fund for those over the age of 65. Less than one per cent of the population are in receipt of this, most of which are those who have not lived in Sweden for sufficient years and therefore are ineligible for the full Guarantee Pension [78].

In addition to state pension provision, occupational pensions cover nearly 90 per cent of Swedish wage-earners [78]. Four separate schemes cover: blue-collar private sector workers, white-collar private sector workers, state employees and municipal employees. The two private sector schemes are defined contribution and participants can choose their type of funded pension product. They are similar in structure to the Premium Pension with participants enjoying a wide choice of products but they bear all the risk. In contrast, the two public sector schemes are hybrid schemes combining defined contribution and defined benefit and participants must meet certain criteria in order to have access to the fund assortment [78]. Occupational pensions (Tjänstepension) can start paying out at the age of 55. In May 2001, the Swedish parliament enacted legislation enabling employees to remain in work until the age of 67 if they wished and stipulating that future collective agreements cannot include any rules forcing someone to retire at 65 [80].

In 2007, Sweden introduced an in-work tax credit to increase labour supply. The in-work tax credit is larger for those older than 65, encouraging them to stay in the labour force longer. Since its introduction, the scheme has been extended several times for specific age groups, with the aim of increasing their labour participation. However, the credit for those older than 65 is substantially larger than for other age groups. In 2011, the maximum credit for those younger than 65 was SEK 21,249

annually (at the average municipal tax rate) while the maximum credit for those older than 65 was SEK 30,000 annually [74].

Disability and Sickness Benefits

In Sweden, there are two main sickness insurance/disability benefit schemes administered by (the Swedish Social Insurance Agency (Försäkringskassan), sick leave benefit (Sjukpenning) and disability pension / activity benefit (Sjukersättning/ Aktivitetsersättning). Sick leave benefit (Sjukpenning) is for short-term sickness absence from work lasting up to two and a half years, however recipients can receive it for longer if unable to participate in rehabilitation.[74] The first 14 days of sick leave is paid for by the employer, after that people can apply for sick leave benefit. You must be away from work for at least one-fourth of your regular working hours to be able to receive sick leave benefit. People on sick leave benefit received approximately 80 per cent of their salary.

The disability pension (Sjukersättning) is for those aged 30 and older who are not in employment due to a permanent or long-term disability, and the activity benefit (Aktivitetsersättning) is for those under 30 years of age and can be provided for up to 3 years.[81] In 2003, the disability pension moved from the pension system to the social security system – the names of the programmes were changed but the eligibility criteria remained the same. Depending on how much the work capacity is diminished, full, three-quarter or one-quarter disability pension may be paid. Persons receiving a disability pension can work and still receive 25 per cent of their benefit for up to 12 months.

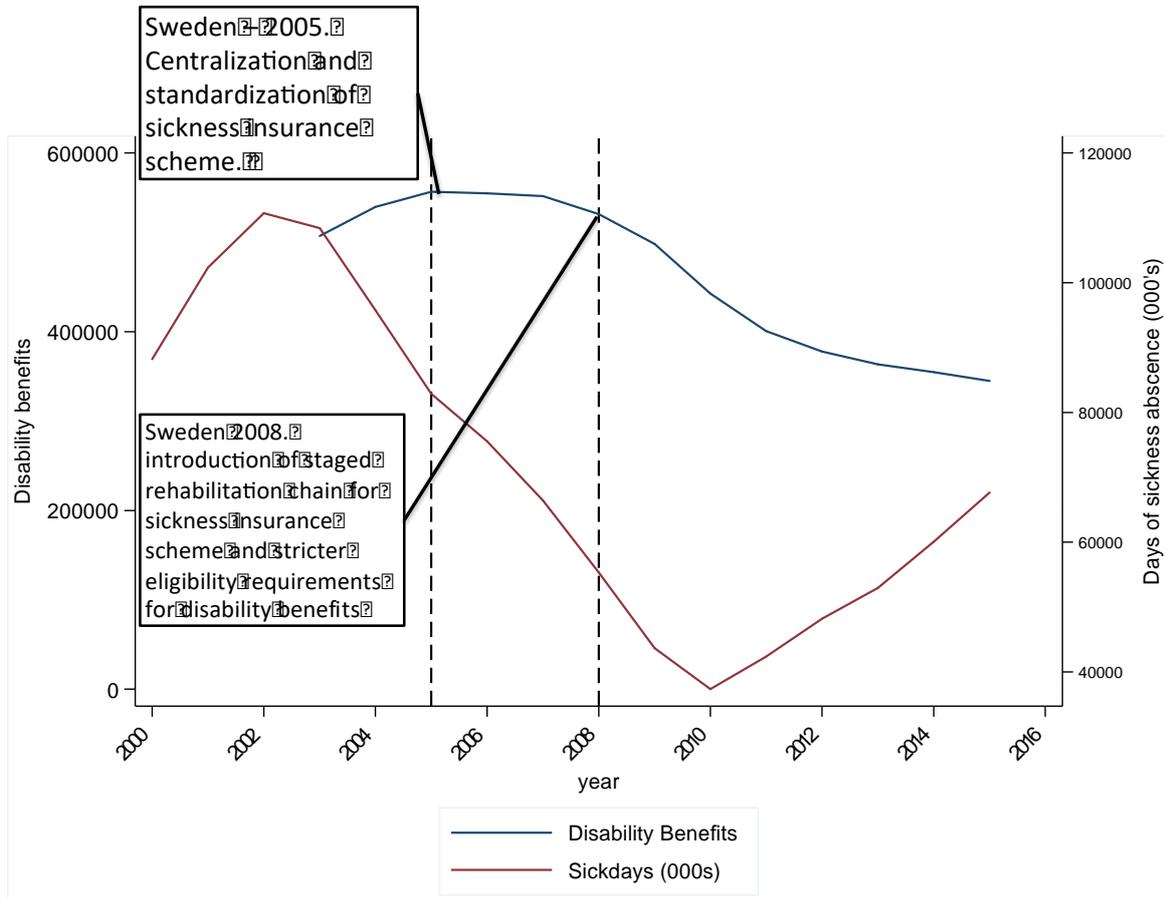
Prior to 1991 older workers could be eligible for a disability pension for labour market reasons after unemployment benefits had been exhausted. In 1991, applicants were no longer eligible for a disability pension solely for labour market reasons, and by 1997, applicants could no longer apply for combined medical and labour market reasons. In 2005 the assessment of claims was centralised to reduce variation, and in 2008 the eligibility criteria for the disability pension was tightened, with assessment focusing on workability rather than medical criteria [82], [83].

In 2005 and 2008, Sweden introduced changes to the sickness insurance system and the disability benefit system that reduced the flow of claimants from sickness onto disability benefits. This included the establishment of a timeline for the provision of rehabilitation services under the sickness absence programme (called the 'rehabilitation chain'), a reduction in the value of sickness benefits for those who did not return to work and the tightening of eligibility requirements for disability benefits. Following these reforms, the number of newly granted cases of disability benefits decreased by more than 50 per cent and led to a 40 per cent decline in the number of people receiving disability benefits between 2005 and 2015 (see Figure 1).

Since January 2009 disability benefit recipients have been eligible to work while receiving benefits under the so called special rules of continuous deduction. Eligible recipients get to keep some or all of their benefits while earning a working income. The aim of the reform was to increase incentives to return to work. The previous scheme known as *resting benefits*, did not provide adequate financial incentives to take up work and take up was low. Recipients receive no reduction of benefits if annual income from work is below an earnings disregard.

Working under the rules of continuous deduction implies if annual income exceeds the earnings disregard, benefits are reduced by SEK 0.5 for every additional SEK earned. The level of the earnings disregard depends on the extent of benefits, to take into account that part-time benefit recipients are presumed to work on the part without benefits [84].

Figure 3 Trend in disability benefit numbers and sickness absence days in Sweden and major policy reforms



Unemployment benefits

In Sweden, national and local governments share responsibility for providing unemployment programmes/services [85]. The Swedish Public Employment Service (Arbetsförmedlingen) provides and funds employment policy while local government is responsible for social welfare, economic development and supporting unemployed people who are ineligible for unemployment benefits. The Swedish unemployment insurance system is comprised of basic insurance and voluntary income-related insurance. Everyone, who meets minimum requirements⁴, is granted basic insurance. However, additional insurance is provided through one of 36 independent unemployment funds⁵. Membership to these funds is voluntary but members have to be employed for at least one month prior to joining. Workers are entitled to receive an earning-related daily allowance of up to 80 per

⁴ Anyone aged over 20 who is enrolled at the employment office and is completing a job-seeking plan receives SEK 320 per day.

⁵ An economic association tied to a Trade Union that administrates and pays unemployment benefits.

cent of his or her normal income (up to a threshold) after one year of uninterrupted membership of an unemployment fund and six months of part-time work. After the first 200 days, the replacement rate decreases to 70 per cent until the 300th day, and is 70 per cent from day 301 to day 450 (only available for parents of children under the age of 18). After 300 (or 450) benefit days, anyone who is still unemployed can obtain a place in a job and development labour market programme [86].

In 2007, changes to unemployment insurance in Sweden led to a reduction in coverage from 80 per cent to 67 per cent of the population and a reduction in the replacement rate paid to the long-term unemployed. The proportion of unemployed people covered by unemployment insurance (UI) benefit decreased from 70 per cent in 2004 to 55 per cent in 2007. Membership fees significantly increased from 10 per cent of total benefit paid to 40-45 per cent, causing over 300,000 individuals to leave the UI regimes and a reduction in new members. The greatest membership decline was seen among blue-collar workers, those entering employment and those approaching retirement (60-64) [87]. Policy changes have created inequality in the membership fees – those with a lower risk of unemployment pay less and those with higher risk pay more. Tightened eligibility criteria made it more difficult for those working part-time to gain access to these benefits. Replacement rates were reformed into a step-rate design decreasing from 80 per cent to 65 per cent over the first year of unemployment [88]. In Sweden, unions and unemployment insurance are optional and therefore it is up to the individual to navigate and select the most appropriate option.

Active labour market programmes

Sweden also has a long tradition of active labour market policy (ALMP), under which unemployed people receive generous training opportunities and benefits [89]. These often actively involve social partners and unions. Since the 1970's job Security Councils were developed out of the system of collective agreements to provide additional support for displaced workers complementing the efforts of the Public Employment Service. Sixteen Job Security Councils operate nationally and are sector specific. Monthly fees are paid on behalf of the employee at about 0.3 per cent of their salary [90]. Career Transition Agreements are included in collective agreements between job security councils and unions to support workers in the case of redundancies. Although Career Transition Agreements do not target older workers specifically, they have become especially important to this group. The career transition agreements consist of various measures including; career planning from a life-course perspective, counselling and financial support to help redundant workers find a new job and/or change job. This has however led to disparities between the comprehensiveness of ALMPs for white-collar and blue-collar workers [86].

In 2007, Arbetsförmedlingen introduced the New-Start Jobs programme (Nystartsjobb), which reduced the cost of employing the long-term unemployed through tax credits to employers. The scheme targets people who have been receiving unemployment benefit, sickness benefit, sickness and activity compensation or financial assistance for more than one year. The programme has most benefited people aged 55-65. Since 2008, New-Start Jobs have been open to all employers for all types of employment, including part-time and casual work [91]. In October 2011, the number of New-Start Jobs was almost 46,000 according to statistics from the Arbetsförmedlingen, more than expected by the government. According to an evaluation from 2012, New-Start Jobs led to a 17 per cent increase in people employed (compared to the situation before the initiative) [91].

The 2008 sickness and disability benefit reforms (see previous section) introduced various requirements for people to engage in rehabilitation, referred to a 'rehabilitation chain'. This involves

the assessment of work capacity at specific time points. In the first 90 days of sickness absence the Social Insurance Agency assesses the employee as to whether they can handle their regular work, if the employer is able to offer the employee a temporary alternative role or make other workplace adjustments. Often this assessment also involves their employer, doctor and/or a rehabilitation specialist [92]. If it is assessed that the employee cannot return to work with these adjustments they are entitled to sick leave benefits.

When an employee has been reported sick for 90 days, the Social Insurance Agency assessing if the employer has the possibility of offering the employee an alternative job that he or she can handle despite the illness. The employee only has the right to sickness benefits if he or she cannot do any work at all at his or her employer.

If the employee still cannot work after 181 days, it is determined whether the employee can handle a job with another employer. If so, they are not entitled to sickness benefits. This does not apply if Social Insurance Agency assesses that the employee is very likely to be able to return to a job somewhere in the same organisation before day 365. Nor does it apply if the Social Insurance Agency assesses that it is unlikely the employee has capacity to work in *any* job in the labour market [93]. It is only if incapacity is considered permanent (often after long periods claiming sickness benefit) that some claimants move on to the permanent disability benefit ('Sjukersättning'); or if they are under 30, to the less permanent activity compensation, ('Aktivitetsersättning'). Since 2010, those too ill to participate in rehabilitation can continue receiving compensation from the sickness insurance system beyond 2.5 years [74].

People receiving sick leave benefit are required to establish a return to work and rehabilitation plan with the Social Insurance Agency providing an overview of the measures and interventions necessary to enable them to regain their work capacity. The plan is used to coordinate rehabilitation support between employer, healthcare and social insurance. Those participating in rehabilitation as part of this plan can receive a rehabilitation allowance for example to cover – travel costs, study resources and course fees.

Working Conditions

Health and Safety.

Most workplaces in Sweden have statutory health and safety committees, either in the form of a safety representative, a regional safety representative or a safety committee. The role of the health and safety representative or committee is to ensure that the employer follows work environment regulations, both physical and psychological. The *Work Environment Act* (Arbetsmiljölagen) requires that each workplace with five employees or more must have a health and safety representative [94].

The Swedish Work Environment Authority (Arbetsmiljöverket) provides guidance on managing older people. The Authority offers companies, social partners and stakeholders a checklist for changes in physical and mental capacity, learning skills, self-reliance, individual adjustments, and mental health issues for older workers. Specifically, it has been delivering the Healthy Workplaces for all Ages campaign developed by the European Agency for Safety and Health at Work in Bilbao (EU-OSHA).

Within the framework of the campaign, the Swedish Work Environment Authority carried out a number of activities including seminars with labour market partners (Swedish Work Environment Authority 2016), inspecting employers to raise awareness about what creates a healthy workplace for all ages.

Employee rights

In 1982, the *Employment Protection Act* (Lagen om Anställningsskydd) was passed outlining the rules for governing the firing of workers and the use of temporary contracts. The aim of the legislation was to reduce the risk of job loss resulting from adverse economic conditions and arbitrary dismissals. In 1997, the Swedish Government amended the *Employment Protection Act* to include special rules for calculating older employees' time in work. However, these provisions were deemed to have a negative effect on older workers by making it more difficult for them to get a job and were subsequently repealed [74]. At the same time, a more flexible temporary contract was introduced meaning that an employer can now re-employ the same worker for a total period of two years within a five-year period. After the two-year threshold, the contract becomes open-ended [74].

In 2009, the *Discrimination Act* (Diskrimineringslagen) (which prohibits discrimination on the grounds of protected characteristics, such as age and disability) was enacted and applies to all areas of working life including: educational activities; labour market policy activities; employment services not under public contract; hiring policies of those starting or running a business; professional recognition; and membership of certain organisations. The law requires employers to adapt working conditions to meet people's physical and mental capabilities and needs [95]. The Equality Ombudsman (Diskriminerings ombudsmannen) monitors compliance with the Act [74]. The Act has resulted in an increased number of complaints filed by older workers to the Equality Ombudsman. In 2011, it was the second largest ground for discrimination in working life [95].

In Sweden, disability is defined as “*every permanent physical, mental or intellectual limitation of a person's functional capacity that is a consequence of an injury or illness that existed at birth, arose thereafter or may be expected to arise*” [96].

Policies Affecting Unpaid/Informal Care

Services supporting carers.

The Swedish approach to care has been one of public responsibility and promotion of independence. Sweden has a comprehensive long-term care (LTC) system in place for those with disabilities and the elderly so that those who need care are not reliant on their family members. In recent years, however, informal carers have provided a growing amount of care resulting in carers reducing working hours and in some cases leaving paid employment [97].

Municipalities provide two main forms of LTC: home help services (i.e. help with bathing, dressing, etc.) and institutional care. LTC is primarily financed through local taxation at the municipal level (85 per cent) and some national government grants (11–12 per cent) [85]. Among the OECD countries, Sweden spends the most on public LTC and has little private out-of-pocket spending [85]. Some municipalities also ‘employ’ family members (generally paid by the hour) to provide care in order to reduce the amount of home-care services. In 2006, fewer than 2,000 people were employed as family carers.

Following a three-year Action Plan, the Family Carer 300 Initiative (1999-2001), municipalities developed an infrastructure of services targeting family caregivers, e.g. by setting up caregiver resource centres offering training, counselling, support groups, respite care, formation and resources for family caregivers, including day care programmes for their disabled family members. [98] The Swedish Government allocated SEK 300 million (£23.5 million) for distribution amongst the municipalities that provide services such as respite care for family carers [99].

Cash benefits for carers and recipients of care

There are few cash benefits provided directly to carers and the recipients of care. The LTC system is seen as relieving most of the care burden for informal carers and providing respite for informal carers [97].

Some dependent people may receive an home care allowance (hemvårdsbidrag) , through their municipality to pay family members for help. However, the national governments does not regulate the allowance and municipalities have the discretion in deciding on eligibility criteria and the level of payment [97].

In 1994, the attendance allowance (Assistansersättning) was introduced providing cash payments for personal assistance for those under 65 years of age with considerable and permanent functional impairments. The allowance is only available when care exceeds the 20 hours provided by municipalities. In 2006, about 5,000 people received attendance allowance.

In 1989, the Swedish Government introduced care leave (Närståendepenning). The benefit is available to those under the age of 67 years who forgo employment to take care of a severely ill (ie life-threatening condition), person they are closely related to, either at home or at a care facility. Care, in this context, means being nearby and providing support to the sick person. The benefit is available for up to 100 days and covers approximately 80 per cent of the carer's ordinary income up to a threshold [97]. In 2009, on average, recipients of the benefit only used it for about two weeks [100].

UNITED KINGDOM

Introduction

The UK population is 66 million with 18 per cent aged over 65 and 2.4 per cent aged over 85. Government policy related to disability, employment and welfare at older ages has gone through several reforms in recent years (see Appendix D). Disability policy has focused on reducing the numbers of people in receipt of disability related welfare benefits and increasing the employment of disabled people. This has particularly involved stricter assessments for benefits and reducing the perceived work disincentives associated with receipt of disability benefits. Compared to other countries the generosity of disability benefits in the UK is low and is decreasing [101]. State pensions are also low and paid at a flat rate unrelated to prior earnings. Pension levels have however increased relative to working age welfare benefits over recent decades – leading to marked reductions in pensioner poverty. Pension policy has focused on some increases in the minimum levels received and on increasing the age at which people become eligible for a state pension. Active labour market programmes have focused on individual case management providing job-search assistance, training, and education to support disabled people moving into employment. Increasingly receipt of benefits has become conditional on participation in these schemes. They have however been relatively poorly resourced. Employment protection measures are generally weaker in the UK than in most other European countries. Social care services are means tested and under increasing financial constraints – potentially increasing the burden on unpaid carers. Support for unpaid carers in the UK includes cash benefits paid directly to carers who are unable to work because of caring responsibilities.

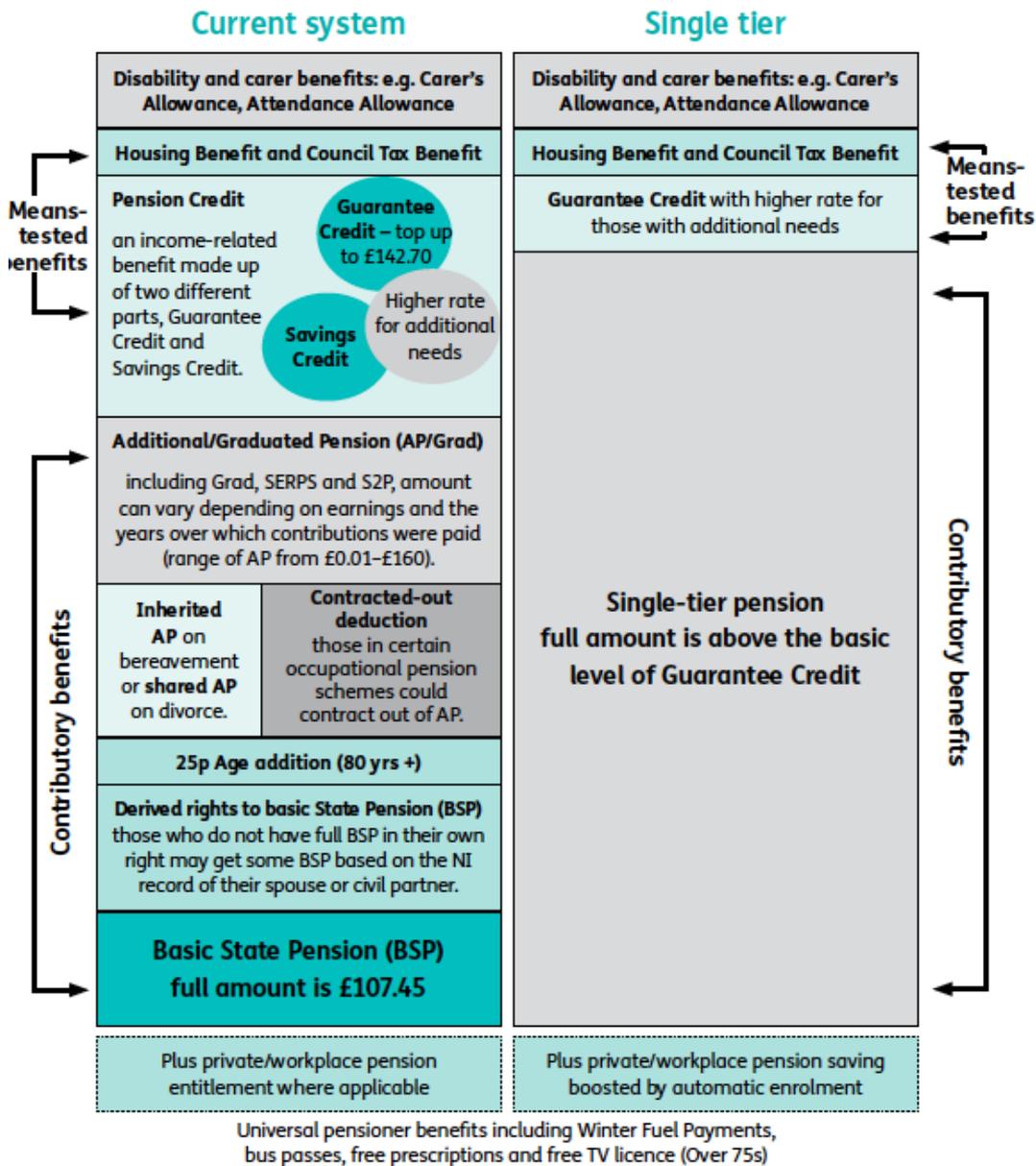
Pensions, sickness, disability and unemployment benefits

Pensions and retirement

Prior to 1995 the state pension age for men was 65 and for women was 60. The 1995 *Pensions Act* legislated for an increase in the State Pension Age for women from 60 to 65 over a period of ten years from 2010. The *Pensions Act* 2011 hastened that process by increasing women's State Pension Age more quickly from April 2016, resulting in the State Pension Age for women reaching 65 in November 2018. From December 2018 the State Pension Age for both men and women will start to increase to reach 66 for all workers by October 2020 [102]. The *Pensions Act* 2014 brought the increase in the State Pension Age from 66 to 67 forward by eight years. The State Pension Age for men and women will now increase to 67 between 2026 and 2028.

In order to mitigate poverty in old age various means-tested pension programmes have been introduced to supplement the state pension. Pension Credits were introduced in 2003 to top up the state pension, replacing the previous minimum income guarantee scheme. Pension Credits are means tested and about 45 per cent of pensioners are eligible. However, Pension Credits are not claimed by around a third of pensioners who are entitled to them, a proportion which has proved fairly resilient despite efforts by successive governments to encourage pensioners to take up their entitlement [103]. The percentage eligible for Pension Credits is projected to fall to around a third by 2050, as more pensioners qualify for a full state pension and benefit from a more generous uprating of the Basic State Pension.

Figure 4: Changes to the Pension system implemented in April 2016. Source: Seeleib-Kaiser, 2014.



Until 2016 the state pension was comprised of several components as shown in Figure 4. The 2016 Pensions Bill has, however, implemented a new single-tier state pension for those reaching State Pension Age from April 2016 that will replace the current State Pension. Figure 4 illustrates the new pension which is set just above the current Guarantee Credit level, at £144 per week in 2012/13 prices. The changes will not apply to people who are over State Pension Age (SPA) in April 2016. People reaching State Pension Age from 6 April 2016 will require 35 years of contribution to receive a full new State Pension amount, and the minimum qualifying period will be 10 years. Individuals

can request State Pension deferral, and thus receive either an extra state pension or a single lump sum payment for the deferral of pension receipt beyond the SPA [104]. Workers who retire early have to wait until the state pension age before claiming a state pension.

Under the *Pensions Act 2008*, auto-enrolment into a workplace pension scheme was phased in, starting with the UK's largest employers. The legislation requires every UK employer to enrol staff into a pension scheme and contribute towards it by 1 February 2018. Employees must be at least 22 years old, not yet have reached State Pension Age, earning a salary of at least £10,000 per year, and normally work in the UK under a contract of employment [105]. Self-employed people are not automatically enrolled but are able to join NEST (National Employment Savings Trust). NEST was introduced in 2012 and is a low-cost, workplace, defined-contribution pension "master-trust" scheme that is available to any employer [106].

The Employment Equality (Age) Regulations 2006 gave employees the right to request the opportunity to work beyond any mandatory retirement age, which employers had an obligation to consider and in 2011 The Employment Equality (Repeal of Retirement Age Provisions) Regulations 2011 meant that employers cannot force retirement on the basis of age unless they provide a legally defensible justification. This legislation was introduced partially in response to requirements on age discrimination from the EU [104].

Disability and sickness benefits

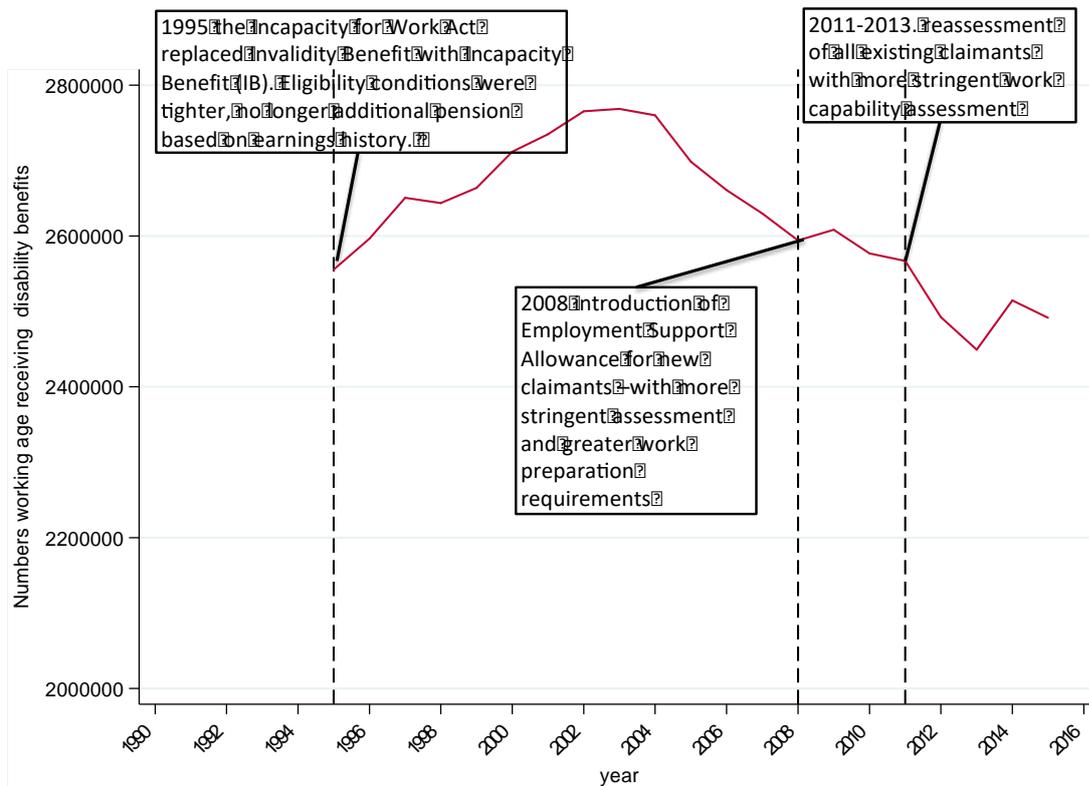
In the UK, sickness absence from employment is covered by Statutory Sick Pay (SSP). SSP is paid for 28 weeks by the employer and is set at £92.05 per week. To be eligible for SSP, the individual must be earning over £116 per week pre-tax; be sick for more than four consecutive days; and inform the employer with seven days. Continuous linked periods of sickness absence (lasting over four days, spaced less than eight weeks apart) are eligible for SSP. Individuals whose SSP period ends need to move onto longer term disability benefits to continue claiming [107].

Since 1971, there have been a number of income-replacement disability benefit schemes in the UK. These are all nationally administered, with benefits generally paid at a flat rate, although before 1995 there was a component that depended on prior earnings. In 1995 the *Incapacity for Work Act* replaced Invalidity Benefit with Incapacity Benefit (IB). Unlike Invalidity Benefit, IB was not available to people over state pension age, eligibility conditions were tighter, those claiming IB no longer received an additional pension based on earnings history, and as a result of this the benefit level for older workers reduced by about 37 per cent [105]. In 1999 contribution conditions were modified, additional information was required on ability to work, and income from private pensions taken into account in assessing the amount of benefit to be paid out. In 2008 Incapacity Benefit (IB) was replaced with Employment Support Allowance (ESA). ESA included the Work Capability Assessment (WCA), a more stringent functional assessment and required claimants with a moderate disability to make preparations for work or risk losing their benefits.

ESA is a two-tier benefit with those deemed to be capable of work-related activity receiving lower benefits than those judged unable to work. Those in the first group are required to undertake work-related activity or risk losing their benefit [106]. Between 2011 and 2013 the WCA was applied to all 1.5 million existing claimants of IB with those found "fit for work" removed from the benefit caseload. Further changes to ESA were introduced in 2012, with the benefit becoming means-tested for those in the work-related activity group for more than 1 year. In 2017 the ESA's value was cut for new

claimants in the work-related activity group by 30 per cent, from around £100 per week to £70 per week, reducing it to the level of unemployment benefits [108].

Figure 5. Change in disability benefit caseload in the UK since 1995, and timing of major reforms.



Unemployment benefits

Jobseeker's allowance (JSA) was introduced in 1996, requiring claimants to demonstrate they were actively seeking work or risk losing their benefits [109]. Alongside the changes in conditionality, there has been a reduction in the contributory component of unemployment benefits and an increase in means testing [109]. During 2011 the Jobseeker's Allowance (Employment, Skills and Enterprise) Regulations were brought into force which introduced a period of four weeks of mandatory work activity for some claimants. In 2015 this scheme was scrapped.

Since 2013 the UK has begun to replace a number of benefits including Jobseeker's Allowance and in work tax credits with a new benefit – Universal Credit. This reduces the level of benefit paid and increases the job search requirements that job seekers need to meet or risk losing their benefits. By 2018 there will be an estimated 1 million unemployed people receiving Universal Credit, 0.75 million

of whom will be an average of £2,300 a year worse off, than they would have been under the previous scheme. JSA claimants are eligible to receive up to £57.90 (under 25), up to £73.10 (25 and over), or up to £114.85 (couples aged over 18).

There are three types of JSA. Contribution based and 'new style' JSA are based on National Insurance contributions. Contribution based JSA can be claimed if the claimant has made sufficient National Insurance contributions in the previous two years, and lasts for up to six months. 'New style' JSA is available in areas where Universal Credit has been rolled out. Income based JSA can be claimed if the claimant works less than 16 hours per week, their partner works less than 24 hours per week, and savings between the individual and partner total less than £16,000. Claimants who have never worked can only claim income based JSA [110].

Active Labour Market Programmes

Alongside these changes to the disability benefit system, several welfare-to-work programs have been introduced that have provided job-search assistance, training, and education to support the unemployed and disabled people into employment.

In 1999 the ONE Advisory Service integrated the Employment Service and Benefits Agency into a single point of contact tailored to the needs of individuals. New and repeat claimants of disability benefits were assigned a Personal Adviser to process their benefit claim and, through work-focused interviews, review their job readiness, options for work, and barriers to work and provide services such as a better-off calculation and advice about in-work benefits.

In 2000, the Government created the New Deal 50 plus and the New Deal for Disabled People, voluntary schemes for over 50s and people with disabilities who had been in receipt of various employment or incapacity benefits for six months or more. They were given their own Personal Adviser at a Jobcentre, who offered CV advice, individual action plans, training courses, and anything else to improve employability. A training grant of £1,500 was available on joining the scheme to develop skills.

Pathways to Work was first piloted in 2003 then rolled out nationally by 2008 for all new claimants of Incapacity Benefit. New claimants undertook six mandatory interviews with a Personal Adviser, within the first 12 months of a claim. They were offered support to manage their disability or health condition through a Condition Management Programme, and given an extra £40 per week credit for the first 12 months of employment. This Return to work credit was available to people who had been receiving incapacity benefits for at least 13 weeks, who had found a job for at least 16 hours, and were earning less than £15,000 per annum.

In 2011 all the previous welfare-to-work programs in the UK were replaced by a new initiative called the Work Programme. The main difference between this program and previous initiatives was that private and third sector contractors provided it through a payment-by-results framework. While contractors were free to design programs as they saw fit, the payments they received depended on the number of clients that entered employment [111]. The payment-by-results model of the Work Program may have reduced the focus on older people and people with disabilities as it incentivised providers to pick participants who were most likely to return to work at the expense of individuals most in need of support [111]–[113].

Since 2013 Unemployed people receiving Job Seeker Allowance or Universal Credit in the UK are required to sign an agreement – called a claimant commitment, outlining what they need to do to look for work and how many hours a week they will spend looking for work. Claimants are required to attend the job centre every 2 weeks and provide evidence they have carried out the activities included in their claimant commitment or risk losing their benefits. Various support can be accessed through Job Centres to support unemployed people into work. The work experience programme for example allows people to secure eight weeks of work experience without losing access to unemployment benefits, It is one of a series of Get Britain Working measures, and it is part of the Jobcentre Plus flexible menu of support to help claimants seek and obtain employment prior to their eligibility for referral to the Work Programme [114].

From 2011 the Government introduced the New Enterprise Allowance (NEA), a payment to unemployed benefits claimants who wish to start their own business and are assessed as having a reasonable plan for doing so. According to the Government, the NEA however has not been widely used: up to June 2013, 9,260 people aged 50 and over had started a new business with the help of the NEA [115].

Working Conditions

Health and safety

The *Health and Safety at Work Act 1974* places a duty on employers to “ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees”, including older workers. The *Management of Health and Safety at Work Regulations 1999* placed a duty on employers to make a “suitable and sufficient assessment of the risks to the health and safety of his employees to which they are exposed whilst they are at work”. There is no specific provision which focuses specifically on older workers. A key organisation in this area are the Health and Safety Executive (HSE). The HSE are responsible for the independent regulation and enforcement of occupational health and safety in the UK, and provide information and advice to employers and employees [116].

Employee rights

The *Employment Rights Act 1996* consolidated existing legislation relating to employment rights. Amongst various other provisions, the Act gives employees the rights not be unfairly dismissed, and redundancy payments. Despite the existence of the 1996 Act, people over the age of 65 had relatively few employment rights prior to 2006. Before then, over 65s were explicitly exempted from some of the provisions in the 1996 Act, such as the rights to redundancy payments and not to be unfairly dismissed. The Act also creates a right to a “reasonable amount” of time off to deal with emergencies relating to dependants [117]. This does not entitle to the employee to any pay. Carers have no entitlement to paid leave [27].

The *Employment Equality (Age) Regulations 2006* made it unlawful to take decisions on employment and vocational training based on chronological age rather than competence and covered both indirect and direct discrimination. The *Disability Discrimination Act (DDA) 1995*, made it unlawful to discriminate against people with disabilities in employment, in the provision of goods, and in the

management of premises [118]. This was then repealed by the *Equality Act 2010*, which consolidated discrimination legislation in the UK, and prohibits discrimination against workers or job seekers by age, disability and other protected characteristics (sexual orientation, ethnicity) unless it is objectively justifiable to do so (i.e. the discrimination is a “proportionate means to a legitimate aim”). This applies in recruitment, terms of employment, promotion, training opportunities, dismissal and/or redundancy. In the *Equality Act 2010*, disability is defined as “a *physical or mental impairment and the impairment has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities*”. The definition does not include addiction [119].

The Flexible Working Regulations 2014 introduced the right to request flexible working to all employees with at least 26 weeks’ service. Previously, the right had been extended only to parents and carers. To request flexible working, an employee must write to their employer explaining and justifying their request. The employer then must deal with that request “in a reasonable manner” within three months unless longer is agreed with the employee. An employer can reject a request for a number of reasons. If the employer accepts the request, they must change the employee’s contract. Employees can complain to an employment tribunal if the employer disagrees. Employees can only request flexible working once a year [120].

Other provision

The Government’s “Disability Confident” campaign sought to change employer attitudes to people with disabilities and long-term health conditions, and to encourage them to remove barriers to employment for disabled people. Employers were given the opportunity to join the “Disability Confident Employer Scheme”, with membership to one of three levels awarded based on how supportive the organisation is for disabled employees. The scheme has not been widely supported, with only 129 organisations – many of them in the public and third sectors – signed up by June 2016 [121].

Policies Affecting Unpaid/Informal Care

Support for those providing unpaid care for elderly or disabled relatives in the UK is characterised by relatively limited support through social care services alongside some support through cash benefits paid to carers and/or the recipients of care.

Support services offer help with daily living activities, or home carers or personal assistants. Across the UK social care is funded by municipalities (local government) and is means tested, whilst health care is generally free at the point of need. Local government had its funding from central government cut by 40 per cent in real terms between 2009/10 and 2013/14 [122]. This has led to reductions in services, particularly in community care, where 25-30 per cent fewer people are getting publicly funded care [123]. These factors could increase the reliance on unpaid carers.

Local authorities are able to offer respite care for carers following a care and support needs assessment (an assessment of the needs of a cared-for person) or a carer’s assessment (an assessment of the support needed for a friend or family member to continue caring) [124]. Local authorities have a duty to carry out assessments when they become aware of a person who appears to need help or support. Funding for respite care is however means tested [125].

Cash benefits for carers and recipients of care.

There are a number of cash benefits that are paid to carers and the recipients of care in the UK covering the additional costs of having a long-term health condition and to provide income support to people who are unable to work due to caring responsibilities.

Attendance Allowance (AA) is available to people who are being cared for who are aged 65 and over, have a physical or mental disability, and have required care for six months (or has a terminal illness). The allowance is offered to help with the costs of personal care. AA is not means-tested, and is paid after the claimant has satisfied certain disability tests for six months [126]. In February 2016, there were 1.46 million recipients of AA, down from its peak of 1.63million in November 2010 [127]. AA is set at £57.30 per week (if support needed day or night) or £85.60 (if support needed day and night, or if illness is terminal) [128].

Disability Living Allowance (DLA) was introduced in 1992 as a benefit for people who became disabled before the age of 65 to cover the extra living costs of having a long-term health condition or disability [127]. New claims for people of working age for the DLA were replaced with a new system of Personal Independence Payments (PIP) in April 2013 (ibid). Since then, existing DLA claimants have been systematically reassessed and moved onto PIP where appropriate. The Office for Budget Responsibility [129] expects reassessments to be complete by 2018/19 [129]. In February 2016, 725,000 people were claiming PIP, while 2.90 million were claiming DLA. The number of people claiming either benefit has been increasing in the last few years; 4 per cent more people were claiming either benefit in February 2016 compared to a year earlier [127]. Recipients of PIP receive between £22.65 and £145.35 per week, based on a daily living component and a mobility component [130].

Carer's Allowance (CA) is available to people who care for someone on Attendance Allowance, Disability Living Allowance, or Personal Independence Payments. The carer must spend at least 35 hours per week caring, and not be earning more than £120 per week after tax, and is eligible for up to £64.60 per week. The carer must also not be in full time education or study for 21 hours a week or more. Cared-for people with a carer taking CA are not entitled to the severe disability premium. If caring for someone over 20 hours a week but not claiming CA, the carer is eligible for Carer's Credit (a National Insurance credit) [131].

CONCLUSION

This review has described the current and historical situation of different policy areas that influence employment for older and disabled workers in Canada, Denmark, Sweden and the UK. It has demonstrated that despite significant variations in policy design and responsibility, there are common themes that exist across the four countries. For pensions, all four countries are introducing reforms that aim to increase employment at older ages, such as increasing the retirement age, financial incentives to increase working past the retirement age, removal of mandatory retirement and restrictions on early retirement.

More variation is seen regarding disability and sickness benefit. In Canada and Denmark, the commonest forms of disability income support are provided through the pension programme, whereas for the UK and Sweden it is with the social security programme. Reforms to both this and unemployment insurance have varied across countries. The UK have reformed both programmes to have tighter eligibility and lower replacement rates, thus making them harder to get and less appealing. Conversely, Denmark has linked the sickness benefit to rehabilitation support to prevent entry into the disability pension. Sweden has used both approaches. Another large variation concerns ALMPs, with Denmark and Sweden both having rehabilitation linked to sickness benefit, while the UK focusses more on welfare to work and individual training, and Canada has the labour market agreement. This policy review provides of the variable approaches to increasing working lives.

POLICY TIMELINES:

Appendix A: Canada Policy Timeline

Year	Reforms
Pensions, disability and unemployment benefits	
1951	Old Age Security Programme introduced.
1967	Guaranteed Income Supplement (GIS) introduced. CPP/QPP introduced as a mandatory contributory scheme.
1975	Additional Allowance introduced to OAS.
1971 and 2006	Expansion of the GIS to target low-income elderly people who were below the poverty line.
2007	Amendments to income tax regulations were passed to allow for phased retirement under defined benefit registered pension plans.
2008	Reform to GIS – allowing up to CAN 3,500 of employment income to be exempted from the GIS benefit calculation.
2009	Changes to the <i>Pension Benefits Standards Act</i> were made to permit phased retirement in federally regulated defined benefit pension plans.
2011	The CPP was modified so employees aged under 65 are required to contribute to CPP based on their earnings and their employers are also required to contribute an equal amount on their behalf, even if the employee is already receiving CPP payments.
2012	As of January 2012, individuals under the age of 70 who work while receiving their CPP retirement pension can increase their retirement income by continuing in the CPP in order to earn the new Post-Retirement Benefit (PRB). Pooled Registered Pension Plan (PRPP) introduced.
Employability and workability	
2006	Targeted Initiative for Older Workers introduced.
2008-09	Labour Market Agreements for Persons with Disabilities (LMAPDs) introduced.
Working conditions	
1982	The <i>Constitution Act</i> enshrines the Canadian Charter of Rights and Freedoms in the Constitution.

Year	Reforms
1982-2013	All provinces, territories and the federal government pass human rights legislation prohibiting discrimination on the basis of age.

Appendix B: Denmark Policy Timeline

Year	Reform
Pensions, disability and unemployment benefits.	
1979	The voluntary early retirement programme (VERP)- Contribution-based scheme with public subsidies, allowing people to leave the labour market earlier than pension age. The scheme was later changed in 1998, 2006, and 2011..
2004	The pension age is lowered from 67 to 65 years. The changes were part of the reform of the VERP in 1998 scheme, but changes only went into effect starting 1 st July 2004
2004	Introduction of the deferred pension scheme. The scheme was adapted in 2008 and again in 2011.
2006	The 2006 Welfare Agreement. VERP: The age one could make use of the VERP scheme was increased from 60 to 62 in the time from 2019-2022, the requirements were tightened further and an option for people who had initially opted out of the programme was introduced OAP: Increase the age of retirement to 67 towards 2027. The extended right to UIB was abolished for the age group 55-59 years was abolished. It will be phased out by 1 st January 2007. 58-59 year olds gain the right and obligation to activation in line with other unemployed.
2008	Mandatory retirement at the age of 70 for civil servants was abolished but it is still in place in the private sector
2010	Reform of unemployment benefits - The UIB period is reduced from four to two years and the conditions for earning a new benefit period is harmonised (implemented by??)
2011	2011 Agreement on Later Retirement - VERP benefit period has been gradually reduced from five to three years. Increasing the age for eligibility for VERP from 60 to 62 years was accelerated by five years and is now implemented from 2014-2017. Introduced the senior disability pension (seniorførtidspension) scheme Increasing the age for OAP from 65 to 67 is likewise accelerated by five years and implemented in the time from 2019-2022.

2015	Agreement on social security - Introduced cap on benefits for people on social security and 225 hour rule for people ready to enter the labour market.
Employability and workability.	
1998	- Introduction of the fleksjob scheme for people with a working capacity which is permanently decreased. The scheme was later adapted in 2003, 2006 and 2012.
2003	<p>Reform of the disability pension - Previously there were four different levels of disability pension. The reform introduced that everyone granted disability pension after 1. January 2003 received the same benefit. The benefit can, however, be lowered based on other income levels. The purpose of the reform was to increase the efforts to retain more people in the labour market through testing of their work capacity e.g. through vocational rehabilitation (revalidering), fleksjobs and job training</p> <p>Comment: the reform did not have the intended effect on people staying in the labour market, which led to the new reform in 2013 (Tilkendelser af førtidspension og fleksjob).</p>
2013	Reform of disability pensions and fleksjobs -Disability and sickness benefit reforms - restricted access to disability only to individuals over 40 and introduced a rehabilitation programme stipulation prior to being able to receive any disability benefit. Expanded Fleksjob scheme to include work of down to a few hours a week.
2014	Reform of sickness benefits - Moved reassessment of sickness benefits from after twelve months of benefits to five months of benefits.
Working conditions,	
2004	Amendment to <i>Anti-discrimination Act</i> - Denmark introduced an amendment to its existing <i>Anti-discrimination Act</i> - prohibiting direct and indirect age discrimination
2006	The Prevention Fund . The fund seeks to prevent physical and mental disabilities of workers in selected occupations which are physically demanding
2010	<p>The Prevention Fund</p> <ul style="list-style-type: none"> - The fund gains an additional aim, which focuses on mental disability in selected high risk occupations
2012	<p>The Prevention Fund</p> <ul style="list-style-type: none"> - For the first time, the fund gains a specific focus on improved working lives of seniors. Focus on assisting companies with development of senior policies and step-by-step descriptions of assessment of needs, possibilities and expectation
Informal care	
1990	Amendment to the <i>Social Service Act</i> - Introduction of the care allowance for persons caring for a dying friend or relative at home

2002	The right to leave from work when taking care of a close friend or relative suffering from severe chronic illness or handicap was secured in the legislation
2004	The right to leave from work was also secured for people taking care of a close friend or relative dying at home

Appendix C: Sweden Policy Timeline

Year	Reform
Pensions, disability and unemployment benefits.	
1991	Changes to disability pensions meaning eligibility can no longer be based solely on labour market reasons.
1997	Changes applicants could no longer apply for combined medical and labour market reasons.
1998	Great Pension Reform - passed transforming Sweden's public pension system to a notional defined-contribution (NDC) plan. Also separated the early-retirement/disability pensions from pension systems.
2001	Legislation enabling employees to remain in work until the age of 67 and stipulating that future collective agreements cannot include any rules forcing someone to retire at 65
2003	Disability pension eligibility criteria shifted from medical criteria to workability.
2005	Centralisation and standardisation of sick leave benefit scheme.
2007	In-work tax credit introduced, the credit was higher for those aged 65 and older.
2007	Changes to unemployment insurance leading to a reduction in coverage from 80 per cent to 67 per cent of the population and a reduction in the replacement rate paid to the long-term unemployed.
2007	Wage subsidy scheme for people who have been receiving unemployment benefit, sickness benefit, sickness and activity compensation or financial
2008	Reforms to the sickness insurance scheme included introducing time limits, reassessment dates and stricter eligibility criteria. Similar reforms were introduced for the Disability Pension.
2008	Older workers are able to retain eligibility for the housing supplement even when earned income rises.
2015	Unemployment insurance ceiling increased for the first time since 2002.
2015	New sanctions introduced for activity grant ("aktivitetsstöd")
Employability and workability.	

2007	New-start job programme introduced to encourage employers to hire long-term unemployed workers and newly landed immigrants.
2008	Introduction of “rehabilitation” chain as part of sick leave scheme.
Working conditions	
1995	Reduced employment protection for temporary employees.
2001	New legislation (Automatic balance mechanism) passed enabled employees to remain in work until the age of 67 and stipulated that future collective agreements cannot include any rules forcing someone to retire at 65.
2007	The <i>Employment Protection Act</i> amended redefining how to calculate older employees’ time in work
2008	The Swedish <i>Discrimination Act</i> - consolidating previous anti-discrimination laws into one act. According to the Act, direct and indirect discrimination based on age is prohibited.
Informal care	
1989	<i>Care Leave Act</i> - Introduced right to paid leave for 60 days to look after a dying family member.
1991-2001	The Family Carer 300 Initiative - The Swedish Government provided SEK 300 million for distribution amongst the municipalities that provide services such as respite care for family carers.
1992	Community Care reform - transferred the responsibility for nursing and home care from the country councils to the municipalities.
1994	<i>Support and Services Act</i> amended to include a legislative right for a limited group of disabled people to personal assistants.
1994	<i>Act Concerning Support and Service for Persons with Certain Functional Impairments</i> – introduced Attendance allowance (Assistansersättning) was introduced providing cash payments for personal assistance for those under 65 years of age with considerable and permanent
1998	<i>Social Services Act</i> amended to include support for family carers to municipalities.
2009	Amendment to <i>Social Services Act</i> that social services are obliged to provide to support to carers.

Appendix D: UK Policy Timeline

Year	Reform
Disability, retirement and unemployment benefits	
1995	<i>Incapacity for Work Act</i> . Replaced Invalidity Benefit with Incapacity Benefit (IB). The new benefit was not available to people over State Pension Age, eligibility conditions were tighter, those claiming IB no longer received an additional pension based on earnings history
2003	Pension Credits , Pension Credits were introduced in 2003 to top up the state pension, replacing minimum income guarantee.
2007	<i>Welfare Reform Act</i> replaced IB with Employment and Support Allowance (ESA)
2008	Auto-enrolment into a workplace pensions scheme was phased in starting with the UK's largest employers
2011-2013	IB reassessment programme. All remaining IB claimants, reassessed and moved onto ESA.
2011	The Employment Equality (Repeal of Retirement Age Provisions) Regulations 2011 meant that employers cannot force retirement on the basis of age unless they provide a legally defensible justification.
2011	Women's State Pension Age increased to 65 between April 2016 and November 2018. From December 2018 the State Pension age for both men and women will start to increase to reach 66 by October 2020
2014	The increase in the State Pension Age from 66 to 67 brought forward by eight years.
2016	<i>Pensions Act 2016</i> . A new single-tier state pension for those reaching State Pension Age from April 2016 to replace the current Basic State Pension (BSP) and the State Second Pension (S2P).
Active Labour Market Programmes	
1999	One Advisory Service , New and repeat claimants of disability benefits were assigned a Personal Adviser to process their benefit claim.
2000	New Deal 50 plus/New Deal for Disabled People , Voluntary return to work scheme - own Personal Adviser at a Jobcentre, who offered CV advice, individual action plans.
2003	Pathways to Work ,Mandatory Scheme for new claimants of Incapacity Benefits.
2011	The Work Programme, Subcontracted payment-by-results welfare to work scheme.
Working conditions	

Year	Reform
1974	<i>Health and Safety at Work Act</i> . Placed a duty on employers to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees
1996	<i>Employment Rights Act 1996</i> , Gave employees the rights to not be unfairly dismissed, to receive redundancy payments, and the right to request time off for dependent emergencies.
1999	Management of Health and Safety at Work Regulations 1999, Placed a duty on employers to make a “suitable and sufficient assessment of the risks to the health and safety of his employees to which they are exposed whilst they are at work”.
2006	Employment Equality (Age) Regulations 2006, Made it unlawful to take decisions on employment and vocational training based on chronological age rather than competence and covered both indirect and direct discrimination.
2010	<i>Equality Act 2010</i> , Prohibited discrimination against workers or job seekers by age, disability or other protected characteristics.
2014	Flexible Working Regulations 2014, Introduced the right to request flexible working to all employees with at least 26 weeks’ service.
Informal care	
2013	Introduction of Personal Independence Payments (PIP) which replaces Disability Living Allowance for people who became disabled before the age of 65 to cover the extra living costs of having a long-term health condition. This new benefit included a new more stringent assessment process.

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