Ageing in mountain areas
Contributions of Euromontana for the Green Paper on Ageing

Updated position paper
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Euromontana: the European Association for Mountain Areas.

Founded in 1996, it assembles around 65 organisations (regions, universities, chambers of commerce, of agriculture, development and environmental agencies) from 15 European countries. Dedicated to the improvement of the quality of life of mountain people, Euromontana is working on different themes of crucial importance for mountain areas, such as mountain products, agriculture and forestry, cohesion policy, rural development, climate change, innovation, tourism, transport, youth... Euromontana is also officially supporting the RUMRA & Smart Villages (Rural, Mountainous and Remote Areas) intergroup of the European Parliament. Euromontana has some expert seats in the Civil Dialogue Groups on Rural Development, CAP, Quality and promotion of products and is also taking part in the Steering Committee of ENRD, such as its thematic group on Smart Villages. It also represents EU civil society at the FAO, Mountain Partnership of the UN.

Our vision of living mountains

Mountains areas cover nearly 29% of EU27 countries and host 13% of its population. These areas constitute the water tower of Europe, they are also the continent’s ecological backbone containing a huge reservoir of natural resources: 43 % of Natura 2000 areas are mountainous and 15% of EU species exclusively exist in mountain area.

Nonetheless, mountain areas face permanent and structural handicaps such as hypersensitivity to climate change, and the impact of slopes, altitude. They also quite often face problems of remoteness and accessibility, outmigration (including of young people), sparseness of population and loss of businesses.

Mountain regions are also very vulnerable to crises such as the Covid-19-crisis of Spring 2020. The tourism sector, for example, as one of the main pillars of mountain economy was completely shut down from one day to the next. Everywhere, of course, the education system had to switch to home schooling and workers stayed at home for home office. But these changes would not have been possible without the potentials of digitalisation which are significantly less advanced and available in mountains. Rural areas rely on robust digital infrastructures and good digital skills. The main goal of any future rural policy must be to strengthen the resilience of rural areas in this respect and to further encourage regional value chains.

Nonetheless, despite these difficulties, there exist much latent potential. We affirm that mountain areas can bring a lot not only to mountain inhabitants but also to all citizens thanks to a good quality
of life, preserved and renewable resources (forest, water, air), production of public goods and ecosystem services, good conditions for sustainable production (preserved biodiversity, landscape management, innovative management of natural resources, food safety).

This is why we want to unleash the (innovative) potential of mountain areas and keep living mountains with inhabitants in them. More info: www.euromontana.org

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18.9% of the European Union’s population is over 65. The geographical distribution of older people in Europe, however, varies considerably between regions. The highest concentrations of people over 65 can be observed in rural, mountainous and sparsely population areas. Looking at Eurostat statistics, on the top 6 of ageing regions in Europe, 4 are mountainous: Evrytania (Greece), Ourense (Spain), Creuse (France) and Alto Tâmega (Portugal), with respectively 35.8%, 31.2%, 30.1% and 30% of their population being over 65. As recently stressed by the Joint Research Centre, there is a combination of factors aggravating ageing in mountainous areas, such as general population shrinkage and land abandonment. If the gap between mountain and non-mountain areas is expected to narrow by 2050, demographic forecasts still predict an increase in the share of older adults in mountain populations at least until 2030. The problems caused by the ageing of the population will be of particular concern in Greece, Cyprus, Sweden, and Portugal, which are foreseen to be the countries with the highest proportions of elderly population in mountainous areas in the EU.

The COVID-19 crisis confirmed how vulnerable older adults can be. Being the most affected segment of the population, seniors were required, more than others, to stay at home. But self-isolation brings different situations for older adults; 40% of European women aged 65 or more for instance live alone and are more at risk of social isolation when they live in remote villages. Yet, despite the lack of services, some rural and mountainous villages have demonstrated a real sense of solidarity by supporting each other, such as the local association La Javie Autrefois in the Durance valley, France, which abandoned its previous activities to focus on manufacturing and distributing masks to its ageing population. Many other initiatives were developed in mountainous areas during the pandemic, like in Spain and Italy were many people, associations and municipalities organised food deliveries for isolated older people. Mountain villages are real testbeds to develop innovative schemes adapted to older adults’ needs.

Rural, mountainous, and sparsely populated areas are the territories most affected by the challenges arising from an ageing population: lack of adapted goods and services, especially in welfare and healthcare services, need for care employees, mobility and housing issues and need for adapted cultural and tourism offer to meet the needs of active, fragile, and dependent older adults. Considering the demographic forecast, the impacts of demographic change need to be more considered in rural, mountainous, and sparsely populated areas in future in order to implement territorial development strategies that address older adults’ needs.

ENSURE ACCESSIBLE AND INNOVATIVE CARE SERVICES

Older adults are among those most in need of access to adapted and local health services. Maintaining health services and developing innovative care can benefit older generations but also entire mountain communities, especially in remote areas. In some EU countries, such as Greece, Sweden, and Spain, more than 50% of mountain massif population lives at more than 1-hour drive from the nearest hospital. In the Apuseni mountains, Romania, the population has easier access to hospital services; however, there is an important lack of pharmacies in the region. In most of the area, there is only 1 pharmacy for more than 5,000 people, this is four times less pharmacies than in the rest of the country.

2 Joint Research Centre, “The Demographic Landscape of EU Territories”, 2021
3 NordRegion, “Mountain Areas in Europe: Analysis of mountain areas in EU member states, acceding and other European countries”, January 2004
With the natural constraints in mountain areas, such poor supply means a long distance to travel for medication\(^4\). Access to basic healthcare services, such as general practitioners, also varies a lot depending on countries and regions. While in Spain, there is a practitioner in most mountain villages, other mountain populations live at more than 40 minutes’ drive from the closest doctor, such as in the Wolfsberg district\(^5\), Austria, or in the Southern part of the Region of Calabria\(^6\), Italy.

Situations vary greatly from one country to another, with different health services lacking from one region to another, which all the more requires a place-based approach taking into account the specific needs of the area.

In terms of rural development, it is thus essential to create more incentives to encourage general practitioners to stay or move to mountain villages all year long (and not only during the tourism season). The University of Zaragoza for example created the Desafio programme in 2018, which enables students to take a paid internship in rural depopulated municipalities of the Province. Medical students and future nurses had the opportunity to practice their skills in rural retirement homes or with homecare enterprises. This voluntary model should be widely replicated to encourage future practitioners to set up their medical practice in mountain areas.

Telemedicine also needs to be developed in rural mountainous areas to ensure easier access to health care, with adequate care and connectivity investments. The Aosta Valley in particular has pioneered the development of mountain telemedicine, with the implementation of a call centre and telemonitoring tools\(^7\) that facilitates a regular follow-up of older patients and constant results by avoiding the variation of indicators like blood pressure due to changing altitude. More recently, within the Interreg Alcotra MisMI project the Aosta Valley tested teleconsultation in retirement homes to ensure better medical care for geographically isolated patients and tested telemonitoring for older adults at home to increase the response time of medical services.

Mountain areas have also been innovative in developing new care models, especially in remote villages. Within the Interreg Alpine Space CoNSENSo project, the Community Nurses model was developed. Far from replacing the services of a home care nurse, and indeed not applicable to medical care, the model providing training to mountain people willing to offer support to older adults in their community. The model aims at supporting seniors in their daily life and in reporting if they are in need of medical care; this way, it helps building a more socially active and community. In Italy, thanks to the Interreg project Cuore Solidale and SociaLab, a similar role appeared with “community social managers”, a person working in mountain villages to support communities in assisting and taking care of fragile older adults, with the ultimate goal of maintaining their autonomy and helping them to continue living at home.

Likewise, territorial planning in regions should better take into account the demographic trends in order to offer more adapted housing options and avoid uprooting older adults by forcing them to move to retirement homes in urban areas. Mountainous regions can make the difference by proposing housing offers adapted to people suffering from a loss of autonomy that also take advantage of the natural assets of the area. In the Swedish Dalarna region for example, the Gullogården retirement home is a social enterprise company that managed to use the natural environment to provide a pleasant place to live with high quality care and outdoor activities for the well-being of residents. More examples of innovative housing for the ageing rural population can be found in the database of SILVER

\(^5\) ESPON PROFEKY, “Case Study Report. Wolfsberg (Austria)”, December 2017
\(^6\) ESPON PROFEKY, “Case Study Report. Area Greccanica-Calabria (Italy)”, December 2017
\(^7\) Centre for Mountain Medicine and Neurology “Example of Telemedicine in the Aosta Valley Region”, 2017
SMEs (see reference below). More broadly, mountain areas are ideal places for the development of such Healthy and Active Ageing policies.

Adapted and accessible healthcare services are essential for older adults living in mountain areas. Still, this should not overshadow the importance of other services of general interest, like postal and transport services, to maintain territorial cohesion and attractiveness and encourage populations, including older ones, to stay in these regions.8

► **Action points suggested to ensure adequate care services for older adults in mountain areas:**

- Encourage Member States to take **public action against medical wildernesses** and make sure that the issue is addressed in their rural development and cohesion programmes. In its Rural Agenda, adopted in September 2019, the French government set up the ambitious objective that every citizen should be able to visit a general practitioner within 20 minutes by car, emergency care within 30 minutes and a maternity unit within 45 minutes. The EU should encourage Member States to adopt such ambitious targets and appropriate measures to implement them, such as including an internship in rural areas for medicine students.

- **Develop ICT infrastructures** and **train doctors** in small and medium regional hospitals to encourage the deployment of telemedicine, based on the good experience of the MisMi project. High-speed Internet is key to support the development of telemedicine, but regions also need to adopt regional strategies to increase digital skills, especially among older adults, to be able to use telemedicine.

- Encourage the **deployment of ‘Maisons de Santé’ / ‘Case della Salute’,** based on the French/Italian model, which cluster at the same place different health services while reducing the administrative costs (have one administrative officer for many health providers for instance).

- Support the development of proximity social care services to guarantee a support to older adults, especially those who are isolated. It is also essential to empower rural communities in supporting each other, on the model of Community Nurses, developed under the Interreg Alpine Space ConSENSO project, which provides mountain people with the skills to offer basic support and non-medical care to older adults.

- Promote the development of **mobile care services**, which can overcome the issue of viability by servicing several villages and thus reaching a critical mass of beneficiaries. Such experiences have already been developed for instance in Limousin, France, with the At-Home-Bus, a truck servicing several remote villages to improve the prevention and detection of disease among the elderly and to combat isolation.

- **Support interregional exchanges and cross-border projects** that explore solutions to improve healthcare access in mountain areas. Healthcare access must follow a territorial approach to ensure access to the closest health services, which are not necessarily in the State people live in especially in mountain cross-border areas, based on the experience of the Cerdanya hospital at the French-Spanish border or the Briançon hospital at the French-Italian one (providing mountain populations with basic healthcare independently from their nationality and based on national consultation fees). Through trainings and innovation, regional practitioners can also provide higher quality services and build a regional excellence in the health sector.

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8 Euromontana, “Towards a Long-Term Vision for Mountains’ Rural Areas”, November 2020
To better support older adults staying in rural mountainous areas and improve their quality of life, territories must be able to provide them with goods and services adapted to their needs, from local shops and groceries to ATMs and accessible administration’s offices.

The Silver Economy can play an active role in providing older people with adapted products in mountain areas (personal services such as support for domestic care, connected products, mobility offers). This sector comprises all specialised SMEs but also other businesses developing a product or a service especially for older adults. Spain and Italy have been pioneers in the development of goods and rural services arising from the Silver Economy sector, in line with objectives to combat rural depopulation. France is also among the leading countries for the development of the sector, with strategies being implemented at regional level; still actions undertaken often mainly target urban areas and leave behind the ageing population in rural areas. The Silver Economy is an emerging market with great development potential: Europeans over 65 have a spending capacity of 3,000 billion € and mountain areas, due to their geographical constraints, are the perfect testbeds to develop social enterprises that make older adults’ lives better. Considering the demographic forecast of mountain regions, developing the Silver Economy sector will be critical in our regions. Not only will these companies provide older adults with adapted services, but they will also create employments in our territories in various sectors that do not only comprise care but also leisure activities such as rural tourism adapted to seniors.

Ageing mountainous regions can enhance their attractivity among older population and increase the overall quality of life of mountain communities by implementing socio-economic policies that trigger the emergence of Silver Economy SMEs and support other businesses whose activities benefit older people. The region Occitanie, France, for instance financially supports 5 living labs and the “Occitanie Silver Awards”, which reward companies in the region that demonstrate creativity and commitment in the field of the Silver Economy.

More broadly, services must be adapted in terms of accessibility. It is widely recognised by scientists that the initiative launched by the World Health Organization for Age-Friendly environments is mostly implemented in urban areas, with little activation in rural regions. Mountain villages and their businesses should be encouraged to include the Age-Friendly dimension in their territorial strategies, for example with access ramps, public benches with armrests, wider dedicated parking lots closer to shops.

Action points suggested to better answer older adults’ needs in mountain areas:

- Encourage regions to support the Silver Economy sector including in rural areas, to help in providing adapted goods and services while also creating jobs. Support to the sector should be addressed both in Rural Development Programmes of the Common Agriculture Policy and in Operational Programmes of the Cohesion Policy.

- Stimulate ageing regions to develop an integrated strategy, including on services of general interest, to enhance its attractiveness among older adults. Such reflection at NUTS3 level can help ageing territories to better answer the needs of their population while also taking advantage of the economic development opportunities arising from such demography.

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9 European Commission, “Growing the Silver Economy in Europe”, 2017
• Develop calls for projects specifically on the Silver Economy in rural and mountainous areas under Interreg programmes, to encourage interregional exchange, and under Horizon Europe to foster innovation and support applied research and multi-stakeholder approaches.

• Promote **Age-Friendly environments**, through the good practices and exchanges developed by the World Health Organisation, including in mountainous territories to bridge the gap of accessibility between urban and rural areas.

## DEVELOP TRANSPORT PROVISION AND REVERSED MOBILITY SCHEMES

Access to goods and services raises the issue of mobility. A lower population density often leads to a reduced provision of public transport and a dependence on private vehicles, especially in depopulated mountain areas. Mobility is essential for older adults to go around to the next village for shopping for instance but also to reach the closest city and access more goods and services. Furthermore, as many mountain areas are also border regions, special attention must be paid to cross-border commuting, not only for workers but also for people depending on public transport such as an important segment of older people. Macroregional strategies and the territorial cooperation programmes are ideal tools to take up this challenge.\(^\text{10}\)

Applied to vulnerable and dependant older adults, mobility conditions in mountain areas bring issues related to the loss of autonomy and the inability to drive. Therefore, mountain areas are typical regions illustrating the need of **“reversed mobility”**\(^\text{11}\); instead of accessing goods (food supplies for instance) or services (healthcare, public administration) by themselves, a proportion of older adults need these goods and services to come to them. Within SILVER SMEs, an Interreg Europe project aiming at strengthening the regional support to the Silver Economy sector in rural and mountain areas, the Spanish SME **La Exclusiva** was for instance showcased as a typical example of reversed mobility benefiting dependent, vulnerable or isolated adults. It successfully created 5 home delivery routes in the rural Province of Burgos, to provide older adults with food products from local shops, with no added costs. Such businesses improve ageing conditions in the area, build social cohesion and create employment. These services are crucial for vulnerable and dependent older adults, in particular those living alone. Older people living alone are more at risk of having mobility issues but also of feeling lonely and having financial difficulties; it is thus important to develop “reversed mobility” offers while also making them affordable and implementing a comprehensive territorial strategy that does not resolve geographic isolation by creating social and economic exclusion.

► Action points suggested to address the issue of mobility:

• Encourage the development of **on-demand transport** in rural, mountainous and sparsely populated municipalities. The offer can compensate the lack of public transport if adapted to older adults’ needs, with different booking options that not only comprise digital ones and easily accessible vehicles in order to be fully inclusive and age friendly (see Move on Green below).

• Promote the development of **multimodal transport schemes** in mountainous regions to ensure better circulation between rural and urban areas and the access to more complete services such as specialised health services.

\(^{10}\) For more information on the situation in EUSALP and the possible solutions, see: [https://www.alpine-region.eu/projects/arpaf-crossborder](https://www.alpine-region.eu/projects/arpaf-crossborder)

Support the development of businesses from the Silver Economy sector offering at home services to address the needs of people in loss of autonomy and help older adults in staying in mountain villages. Such initiatives address the issue of vulnerability and dependency but can however put active older adults at risk of social exclusion and a more global strategy to increase territorial and social cohesion therefore remains the key success factor of an integrated ageing policy.

**STIMULATE A MINDSET CHANGE AND PROMOTE OLDER ADULTS’ ROLE FOR SOCIETY**

Older adults in Europe are at risk of socio-economic exclusion due to isolation and loneliness but also because of a lack of understanding of their contributions to community life. Older people are a strength for rural mountainous areas, retired people can be active persons and play an important role in mountain communities. In some depopulated areas, daily interactions can be lower in quantity but usually higher in quality compared to urban areas, and social interactions leave place for intergenerational local initiatives and social innovations. Older adults are strengths for our regions and should not only be considered as end-users of health services or as vulnerable and dependent persons. They for instance have knowledge and experience of mountain traditions and cultures and can share them to younger generations and even organising classes to teach languages or music to foreigners. Intergeneration exchange is essential to promote collective capacity building: the youngest can for example train their elders in the use of digital technologies. Current older generations in mountain regions seem to remain active, due to a long tradition of being involved in the life of communities, and thus have a lot to offer if space is made available for their contributions. Fostering older people’s engagement in rural communities’ initiatives and activities can also contribute to fight social exclusion and loneliness. This is even more important in mountain areas where some regions are suffering from depopulation, leaving a part of the ageing population with no close family living in the area.

Older people have more time to spend in volunteering and community-based activities. They can be key actors of social innovation in mountain areas, as demonstrated by ZEITBANK 55+, a time bank created in Upper Austria, a good practice collected in the course of the Horizon2020 SIMRA project (Social Innovation in Marginalised Rural Areas). ZEITBANL 55+ aims at facilitating the intergenerational exchange of services and was created by a local association of older adults. Older people can for example help local families by picking up children at school and parents can in exchange provide driving services or giving a hand to with repair and maintenance in their house.

Older adults are also key actors in territorial marketing. Who better to promote the region than its long-time inhabitants? Regions Dalarna (Sweden) and Hedmark (Norway) have experienced the support of older generations in promoting their area through the respective “Contact” and “Move Here” campaigns. Volunteers were involved as regional ambassadors to get in touch with the diaspora and encourage people to move back (see PADIMA below).

► **Action points suggested to address the issue of older adults’ role for society:**

- Include older adults’ contributions to society in EU communications, including the Green Paper on Ageing, and reflect not only how can society better support older generations but also how can they contribute to rural communities.

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12 LabexITEM “Vieillir en montagne, le regard du médecin généraliste”, April 2020
• Adopt a **comprehensive approach of policies** to ensure that rural development or cohesion measures can better include older adults in our daily activities, implement as much as possible an “ageing proofing” while also avoiding ageism.

• Support municipalities who develop a **comprehensive strategy for their elderly inhabitants**, integrate them actively in their political and social life and search for an improved intergenerational dialogue and build up an exchange of experiences among those municipalities. Foundations and agencies (such as Pro Senectute Valais-Wallis in Switzerland) are carrying out activities to advise municipalities in the development of integrated strategies at local level and can play an active role in implementing efficient and inclusive Healthy and Active policies.

• Encourage **intergenerational community-based initiatives and social innovations**. Older adults can for instance bring their experience and knowledge of the territory to CLLD and Smart Villages initiatives in mountain areas. (more information on how to encourage social innovation can be found in SIMRA, see reference below).

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**TO GO FURTHER: EXAMPLES OF EU PROJECTS, GOOD PRACTICES**

**SILVER SMEs**: Euromontana is currently involved in this Interreg Europe project (2018-2023) with 8 other partners in rural and mountainous areas. SILVER SMEs aims at improving the implementation of Regional Policies for **SMEs competitiveness** by taking better advantage of opportunities derived from the Silver Economy. An intrinsic objective is to generate services and goods that will contribute to improve the quality of life within an ageing society. **70 good practices** were collected across Europe and **3 brochures of best practices** are available, showcasing 23 inspiring initiatives for senior housing, older adults’ well-being and for the acceleration of silver SMEs in rural and mountainous areas.

**PADIMA**: Policies Against Depopulation In Mountain Areas. Euromontana participated in this Interreg IV C (2011-2013) project to address depopulation not only as a problem but as a challenge to overcome. The **policy guidelines** analyse the demographic trends in the 8 partner regions and the reasons for their outmigration. It encouraged the implementation of integrated strategies targeting **older people** and proposed strategies on “** Increasing the attractiveness of mountain areas for retired people**”. In addition, the **99 good practices**, collected during the project, remain available.

**CUORE SOLIDALE**: is an Interreg ALCOTRA project aiming at improving the quality and availability of social and health care services offered to rural communities in the Alte Valli. The project builds on social innovation to improve the delivery of elderly care, mobility services and health prevention campaigns. The project in particular looks at how mountain communities can support isolated older adults with the creation of **community social workers**.

**Move on Green** was an Interreg IV C project (2012-2014) that improved the design and effectiveness of regional policies on **sustainable transport in rural and mountain areas**. **51 Good practices** collected, including on on-demand transport, governance, carsharing, multimodality have been gathered to address the specific needs of rural and mountainous areas. **Policy Guidelines** help to accompany policymakers in the implementation of a more sustainable mobility.

**SIMRA**, Social Innovation in Marginalised Rural Areas. Euromontana participated in this H2020 project (2016-2020). It aims to advance understanding of **social innovation and innovative governance** in agriculture, forestry, and rural development. To better understand social innovation and how to implement it in rural areas, a **database of examples, 7 collections of good practices** (on mountain areas, provision of services in rural areas...) showcase inspiring experiences. A **7-step guide for practitioners**
to help them to implement actions, a policy guide is designed for policymakers to adapt policies and an evaluation method has been defined too.

**ESPON PROFECY** carried out an in-depth study of accessibility of basic services of general interests in European inner peripheries. Cases studies also provide more precise data on healthcare access in various mountainous areas such as Wolfsberg (Austria), Grecanica-Calabria (Italy), Montsià (Spain).