



GLOBAL AGEING RESEARCH PROJECT

# AGEING IN FRANCE

A NAWA FUNDED REPORT

NOV. 2020

*"The project is financed by the Polish  
National Agency for Academic Exchange"*



**NAWA** POLISH NATIONAL AGENCY  
FOR ACADEMIC EXCHANGE



# TABLE OF CONTENTS

Abbreviations | 4

Introduction | 5

## I Demographic situation | 7

Global demographic transition: mortality and birth rates falling significantly 7

In France, people live longer but in poorer health 8

- Life Expectancy 8
- Life expectancy in «good» health 8
- Standard of living and wealth of senior citizens 9
- Who are those working beyond the age 65? 9

## I Research on ageing | 10

Various search fields 10

- Biomedical research 10
- Epidemiological research 10
- The expanding of human and social sciences 11
- The end of life: a broad research network 12

Specific calls for projects to fund research on ageing 12

(ILVV - Institute for Longevity of Ageing, 2020) 12

Research institutions 13

- Teams, research laboratories and universities 13
- Research networks 13
- Research-related associations and foundations 13
- Information relays on research results 14
- The gerontopoles 14

## I Issues in research on ageing | 15

Main issues and examples of applied research 15

Challenges for the future 16

REFERENCES | 18

## ABBREVIATIONS

**ANR**

National Research Agency

**CHU**

University Hospital Centre

**CNRS**

National Centre for Scientific Research

**Cnav**

National Old-Age Insurance Fund

**Cnamts**

National Health Insurance Fund for Salaried Employees

**CNSA**

National Solidarity Fund for Autonomy

**DARES**

Department of Research, Studies and Statistics

**DRESS**

Directorate of Research, Studies, Evaluation and Statistics

**EHPAD**

Accommodation establishment for dependent elderly people

**EMOS**

Economics and Management of Health Organisations

**Fehap**

The Federation of Private Non-Profit Hospitals & Personal Assistance Establishments

**ILV**

Institute for Longevity of Ageing

**INCa**

National Cancer Institute

**Ined**

National Institute of Demographic Studies

**Insee**

National Institute of Statistics and Economic Studies

**Inserm**

National Institute of Health and Medical Research

**IReSP**

Institute of Public Health Research

**Itev**

Transdisciplinary Institute for the Study of Ageing

**IODE**

Western Institute: Law and Europe

**LEGOS**

Laboratory of Economics and Management of Health Organizations

**MiRe**

Research mission

**ONFV**

National Observatory of the End of Life

**SFAP**

French Society for Accompaniment and Palliative Care

**SFGG**

French Society of Geriatrics and Gerontology

**UN**

United Nations

**URV**

Research Unit on Ageing

**WHO**

World Health Organization

## INTRODUCTION

The Global Ageing Research Project (GARP) aims to animate an international network of specialists in research on ageing. The diversity of research perspectives and experiences offers the opportunity to analyse methodological standards, procedures and processes in research in this field. The project is funded by the Polish National Agency of Academic Exchange (NAWA). Its implementation programme includes the organisation of one workshop per country, a joint publication, a report from each partner country on research on ageing and an international conference to be held in Krakow (Poland) in August 2020.

The Jean Monnet University (Institut PRESAGE - Regional University Institute for Prevention and Global Health) carries the French part of the project in which :

- Pontifical University of John Paul II in Krakow, Poland – (Leader) ;
- University of Applied Sciences Upper Austria, Austria ;
- University of Ottawa LIFE Research Institute, Canada ;
- Sau Po Center on Ageing, Hong Kong University, Hong Kong.

In this report, each country is required to report on the state of the art of research on ageing. The state of the art includes the demographic situation in the country, how research on this topic is developing and the results it produces.

**Mélissa EL DABI** | HESPER-PRESAGE | UJM

**Véronique REGNIER** | HESPER-PRESAGE | UJM

**Alain COLVEZ** - SNA | UJM

**Solène DORIER** | GÉrontopôle AURA

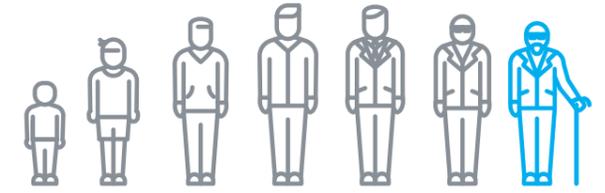
**Estelle JEANNEAU** | GÉrontopôle AURA

**Nathalie BARTH** | GÉrontopôle AURA

**Bienvenu BONGUE** | SNA-PRESAGE | UJM

*Participated in the writing of this report*

# DEMOGRAPHIC SITUATION



## GLOBAL DEMOGRAPHIC TRANSITION : MORTALITY AND BIRTH RATES FALLING SIGNIFICANTLY



Demographic transition represents « the transition from a traditional regime where fertility and mortality are high and roughly balanced, to a regime where births and deaths are low and also balanced

(Ined - National Institute of Demographic Studies, 2020).



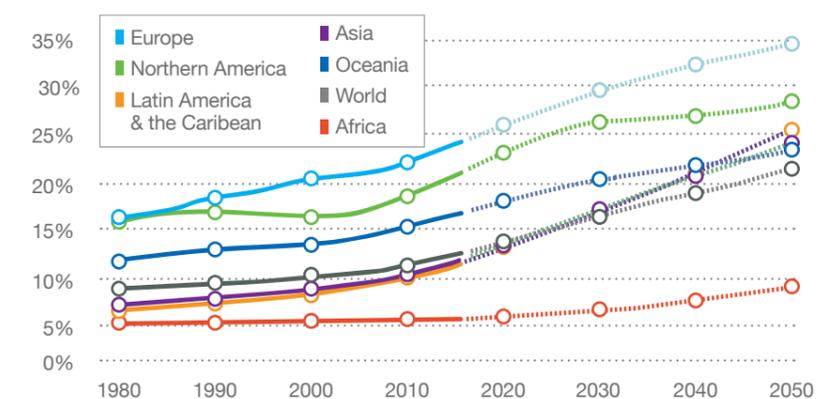
While some countries are currently going through this transition, Western countries have returned to a more or less stable situation. Indeed, since the 2000s, Western countries have been experiencing low population growth and an ageing population. According to Ined, Japan has the highest rate of ageing, with a proportion of people over 65 years of age or more than 28 %, followed by Germany (22 %), metropolitan France (20 %) and Canada (18 %). The European Union average is 20 % while the world average is 9 %. At the same time, the birth rate in emerging countries is beginning to decline. There is also significant immigration to Northern countries, particularly to the United States, a phenomenon that will increase the population in the coming years (see projections below).

As of 2018, there are 13.1 million people aged 65 or over living in France, or one in five inhabitants. The country will have aged by 2070, with senior citizens expected to account for 29% of the population. However, the proportion of young senior citizens (aged 65-74) should

remain largely stable, whereas that of older senior citizens (aged 75 or over) is due to increase. Population ageing is not a new phenomenon: the number of senior citizens has doubled almost every 50 years since 1920, and the corresponding share of the population has risen from 9% in 1920 to 20% in 2018. This can be explained by the increase in life expectancy since the end of the nineteenth century. The mean rate of ageing over the next 50 years should be of the same order as that seen over the last 50 years. Furthermore, ageing across France is not an isolated phenomenon: it is comparable to what has been observed throughout Europe over the last three decades.

Nearly all senior citizens are living at home at the age of 80. Only from 100 years of age does institutional living overtake living at home. Among those living at home, the number of people living alone or as a couple has risen over the last 50 years, but the proportion of senior citizens living with a relative (most often a child) has fallen considerably.

PERCENTAGE OF POPULATION AGED ≥ 60 YEARS BY REGION (1980 -2050)



Date source : United Nations (2017). World Population Prospects: the 2017 Revision

IN FRANCE,  
PEOPLE LIVE LONGER  
BUT IN POORER HEALTH

**LIFE EXPECTANCY**

In 2017, life expectancy at birth is 85.3 years for females and 79.5 years for males. It has risen sharply since 1947, but the increase has slowed in recent years. On the other hand, life expectancy at older ages, not very dynamic before 1980, has been strongly increasing since then.

The decline in infant mortality has played an important role in increasing life expectancy: between 1947 and 1997, one-third of the gains in life expectancy at birth is due to this decline. Infant mortality is now very low and no longer has any impact on life expectancy gains. Between 1997 and 2017, the decline in mortality after 70 years of age drives life expectancy gains, especially for females: two-thirds of the increase in their life expectancy is due to it.

In a quarter of a century, 35-year-old men have gained five years of life expectancy and women four and a half years. All social categories have benefited from this progress, even if the gaps between managers and workers have remained. Male managers live on average 6.3 years longer than male workers, under the 2000-2008 mortality conditions. Among women, social inequalities are less marked, with only 3.0 years separating male and female managers and workers.

Regardless of their social category, women live longer than men. Even the life expectancy of female workers is a year and a half longer than that of male managers.

The part of people aged 75 or over went up from 6.6 per cent in 1990 to 9.1 per cent in 2015, an increase of 2.5 points in 25 years.

Over the last twenty years, in France, two events have led to sharp increases in deaths: the heat wave in the summer of 2003 and the Covid-19 in the spring of 2020. In both cases, the increase in deaths, from all causes, has mainly concerned the oldest people. During the Covid-19 episode, the increase in deaths was 12,000 more than observed during the heat wave (about 27,000 deaths between 10 March and 8 May 2020 compared with 15,000 between 1 and 24 August 2003). This difference can be explained by the increase and ageing of the population between 2003 and 2020, as well as by the duration of the epidemic (60 days compared to 24 days for the heat wave). However, the number of deaths per day was much higher in 2003.

According to the Libaut report (2019), in 2040, French people aged 75 or over will account for 14.6 % of the world population, an increase of 5.5 points in 25 years.



**LIFE EXPECTANCY  
IN «GOOD» HEALTH**

Although the life expectancy of French people is among the highest in Europe, this is not the case for life expectancy in «good» health, i.e. «without irreversible limitation of activity in daily life or disabilities» (Insee, 2019). In France, a woman can expect to live another 23.7 years at the age of 65, but 10.6 years in good health, compared with 16.6 years in Sweden and 12.4 years in Germany or 11.9 years in Denmark (Libaut, 2019).

These figures raise the question of loss of autonomy in the elderly due to age but also to illness. Out of 10 people who die in France, 4 have experienced a loss of autonomy, 2 of which were severe and 3 spent their last days in an institution. With the country's demographic situation in mind, the number of elderly people with loss of autonomy will increase despite medical progress, prevention efforts and improved living conditions that may contribute to reducing the prevalence rate.

By 2030, an additional 20,000 French people will be affected by loss of autonomy every year

By 2030, an additional 20,000 French people will be affected by loss of autonomy every year. Between 2030 and 2040, 40,000 more people would be affected annually. According to INSEE (National Institute of Statistics and Economic Studies), people aged 60 or over will account for a third of the French population in 2050 (Brutel, 2002 cited by Libaut, 2019).

Reinforcing the measures aimed at preventing the risk of loss of autonomy in the elderly and improving their care, according to our model of solidarity-based health care, is therefore a major public health issue in France.

**STANDARD OF LIVING AND  
WEALTH OF SENIOR CITIZENS**

Over the generations, the standard of living of senior citizens at a given age has progressed significantly. Such progression is linked to people having higher mean retirement pensions than previous generations reaching the age of 65, owing to more continuous careers (in line with the greater proportion of women in work) and higher wages, as well as an increase in family rights, pension minimums and mandatory supplementary schemes. However, this trend appears to have stalled with regard to the latest generations: the standard of living of the youngest senior citizens in 2015 – born between 1946 and 1950 – is comparable at a given age to that of the generation of 1941-1945.

The majority of people aged 65 or over live in their home to an advanced age. In 2015, fewer than 2% of people aged 65-74 live in an institutional setting, with this proportion increasing with age to 21% among those aged 85 or over. Consequently, nearly two-thirds of those living in an institution are aged 85 or over.

The reason for institutional living is for the most part a loss of autonomy and deterioration in health, rendering home care no longer suitable. As such, in 2015, some 14% of people aged 65 or over living at home feel in poor or very poor health. Such is the case for 35% of people living in an institution. At home, health status deteriorates markedly with age.

In particular, reports of severely restricted activity concern 9% of people aged 65-74 and 39% of those aged 85 or over. In institutions, irrespective of age group, the share of the population reporting severely restricted activity is higher at 63% on average.

Women are more likely to report being affected by diseases or problems relating to the bones and joints or by depression, but men are more likely to report cardiovascular diseases and diabetes. Physical limitations are also reported more frequently by women than by men. Psychological well-being is lower among women, but also among people having less frequent social relations and those reporting severe limitations.



Over the last 10 years, the proportion of people in employment aged between 65 and 74 has been growing sharply

**WHO ARE THOSE WORKING  
BEYOND THE AGE 65?**

Over the last 10 years, the proportion of people in employment aged between 65 and 74 has been growing sharply, although it still represents only 5% of this age group. Compared with inactive persons of the same age, those in employment aged between 65 and 74 are more likely to be male, in good health, more qualified and living in the urban area of Paris. Wage-earning managers, alongside the self-employed and farmers, are over-represented within this group.

## VARIOUS SEARCH FIELDS

### BIOMEDICAL RESEARCH

Biomedical research focuses on the fundamental mechanisms of ageing. It is intended to approach a new preventive or therapeutic medicine («injection of youth factor, treatment with oxidative stress inhibitors, action on DNA repair, elimination of senescent cells, reintroduction of stem cells, manipulation of the microbiota») (*Institut Pasteur, 2019*).

The Pasteur Institute, a French non-profit foundation, through its «Ageing and Longevity» project, is involved in this biomedical research.

Another key player is Inserm (Institute of Health and Medical Research).

Through complementary approaches of biochemistry, genomics, molecular biology and cell, in vitro, in vivo model studies and human samples coupled with the mathematical modeling and high throughput screening, the Aging cross-program 2016 of Inserm aims to bring together the teams in the field and those who can contribute to it, in order to highlight molecular and cellular foundations of the disorders. These disorders can be linked to normal aging or pathological and the goal is to identify targets to reduce or block their effects. Teams involved in the program will work together and collaborate with private partners and with all of which contribute to the production of fundamental and translational value-added results, with, for example, research on the biological mechanisms of ageing and also the various pathologies linked to ageing such as Alzheimer's disease.

### EPIDEMIOLOGICAL RESEARCH

In epidemiology, cohort studies are often conducted because of their intermediate level of scientific evidence. Participants are follow-up over several years and it have been increasingly developed in France.

These sources of data feed into the population aspects of ageing. Here are a few examples :

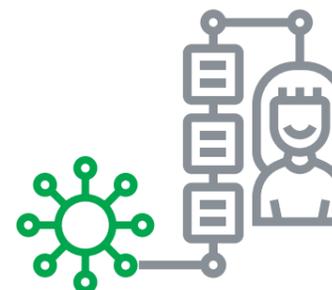
- The «INSPIRE» study was launched in autumn 2019 by the CHU (University Hospital Centre) of Toulouse and its partners (University Toulouse III - Paul Sabatier, Inserm and CNRS - National Centre for Scientific Research) on the Occitania and Pyrenees-Mediterranean region (CHU of Toulouse, 2019). The objectives are «to identify biological markers of ageing from human and animal cohorts for translational research (clinical applications based on a discovery in fundamental research)», «to measure and monitor functional capacities on a regular basis using digital tools developed with the WHO» and «to identify future therapeutic approaches targeting the mechanisms of ageing (gerosciences) to prevent age-related pathologies.»
- In partnership with the National Health Insurance Fund for Salaried Employees (Cnamts) and the National Old-Age Insurance Fund (Cnav), the cohort on ageing of the Cohorte Constances system aims

The Pasteur Institute, a French non-profit foundation, through its «Ageing and Longevity» project, is involved in this biomedical research.

to collect information over time on a certain number of parameters linked to the ageing of different organs (Cohorte Constances, 2020) ;

- The CARE «household» and «institutional» surveys carried out since 1998 are designed to monitor changes in dependency, estimate the excess to be paid related to dependency and measure the involvement of family and friends in the care of the elderly person (INSEE, 2020) ;
- The study of the Three Cities (3C) launched in 1999 by Inserm aims to study the existence of a possible link between vascular diseases and Alzheimer's disease. This link could have implications for the prevention of this disease (Inserm, 2020) ;

At the European level, France participates in the SHARE survey (Survey on Health, Ageing and Retirement in Europe), which takes place in 27 European countries (Université Paris Dauphine, 2012). It is a longitudinal, multidisciplinary and international survey involving more than 80,000 individuals aged 50 and over. The survey has been conducted every two years since 2004. The data collected cover the health status of respondents and their relatives as well as their social (family, mutual aid, social networks) and economic (employment, retirement, assets) situation.



### THE EXPANDING OF HUMAN AND SOCIAL SCIENCES

SHS research on aging is numerous in France, and is conducted in the following areas in multifaceted institutional environments, at the initiative of universities, public scientific and technical institutions (EPST), universities and social welfare organizations, associations and foundations. This work focuses on different themes, varied scales and disciplinary approaches. Interdisciplinarity in particular is increasingly emphasized and the human and social sciences contribute to it.

96 entities (...) were listed in 2015 as having (or having recently had) at least one research program significant in the field of aging.

### A CRUMBLING WORKFORCE

96 entities - centers or laboratories - bringing together more than 5,000 researchers, were listed in 2015 as having (or having recently had) at least one research program significant in the field of aging.

Of the 5,000 or so researchers working there, only 9%, or 468, are involved, work (or have recently worked) in the field of aging. Not all of them are SHS researchers, as they also include physicians or epidemiologists (80) and neuropsychologists (25). Among the 25 epidemiologists, 11 public health physicians, 12 hospital practitioners and 11 geriatricians have been identified. All of them work on interdisciplinary projects and within the teams combining the biomedical and SHS dimensions.

While sociology is the dominant discipline (47 centers), economics and/or management is the second discipline (31 centers). Three disciplinary fields come next: psychology (23), epidemiology, public health (17), anthropology/ethnology (13 centers) then law (12). Next come political science (9), history and philosophy (8).

### TOPICS AND AREAS OF RESEARCH

Based on the data collected, five areas of research were differentiated:

- 1 / The living conditions of aging people, which takes into account income, the housing, living environment, participation
- 2 / Macro and microeconomic aspects of ageing: pensions, savings, equilibrium accounts, etc.
- 3 / Health issues related to aging and «Aging well» without disability
- 4 / Modes and systems of care and accommodation for the elderly dependents, caregivers, etc.
- 5 / Career endings and their interactions with aging

Other areas include mainly:

- Alzheimer's Disease and Cognitive Aging
- Public policies, social protection and pensions
- Intergenerationality
- Dependency
- Information and Communication Technology ICTs

○ THE END OF LIFE:  
A BROAD RESEARCH NETWORK

Research on ageing includes end-of-life research. According to a national survey, 280 researchers (60 % women and 40 % men) report currently working in the field of end-of-life (National Platform for End-of-Life Research, 2019). 69 % of them are affiliated to a research unit (109 researchers for 117 research units). They are mainly concentrated in the Île de France region (70 researchers), followed by the Bourgogne Franche-Comté region (36 researchers) and the Auvergne Rhône-Alpes region (30 researchers).

End-of-life research is represented by a total of 37 disciplines, ranging from epidemiology to palliative care to anthropology, of which 53 % are medical, paramedical, earth sciences and life sciences disciplines and 47 % are humanities and social sciences. Research is focused on 14 populations and pathologies, mainly cancer patients, palliative care patients and the elderly.

The French National Platform for End-of-Life Research was created in 2018 to improve french research quality and to promote exchanges between researchers. By bridging together researchers and clinicians, the Platform encourages interdisciplinary interfaces, collaborative approaches and methodological innovations that take into account the complex realities of the end of life situations

SPECIFIC CALLS FOR PROJECTS  
TO FUND RESEARCH ON AGEING

A lot of calls for projects have the theme of ageing. More specifically, the field of human and social sciences is investigated by several funders, which will be explained in this section.

The National Solidarity Fund for Autonomy (CNSA) participates in the drafting of calls for projects and their selection. The calls of projects are then managed by research partners such as the National Research Agency (ANR), the Institute for Public Health Research (IReSP), the Rare Disease Foundation or other scientific partners. In 2020, the calls for projects launched are entitled: «Support for the structuring of mixed research communities», «Autonomy : the elderly and people with disabilities», «Establishments, services and transformation of the medico-social offer». They aim to diversify the modalities of research support and to develop and support participatory researches (CNSA, 2020).

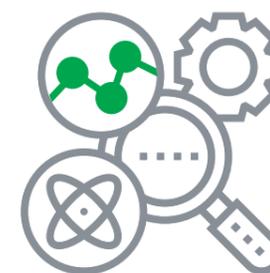
More specifically, the ANR has launched a call for projects «Development of targeted nutrition for the prevention of undernutrition in the elderly» with the aim of preventing undernutrition in this population (ANR, 2020).

The French National Cancer Institute (INca), via the «Public Health and Care» cluster, offers calls for projects focusing on screening and prevention. It aimed at promoting the coordination of care and improving the quality of care, particularly for rare cancers, cancers in children, adolescents, the elderly and people with

genetic predispositions to cancer (INca, 2020). 5 calls for projects are currently in progress, half of which may concern an elderly public.

The Fondation of France - Programme Grand Âge launches a call for projects «Living your choices, taking risks until the end of your life» (La Fondation de France, 2020). The objectives are to develop practices to better take into account the wishes and desires of the elderly, to develop consultation with the elderly, families and care personnel, to promote a culture of risk law and to advance reflection on death and mourning.

The Fondation Médéric Alzheimer, a partner of the Association France Alzheimer and related disorders, supports projects on the theme «The role and place of families in EHPAD (Accommodation establishment for dependent elderly people)». Its aim is to help sick people and their family to live better with the disease and to delay the loss of autonomy as long as possible. By combining research in the human and social sciences and innovation, it contributes to a better understanding of the disease and encourages new support solutions adapted to needs (Fondation Médéric Alzheimer, 2020).



RESEARCH  
INSTITUTIONS

TEAMS, RESEARCH  
○ LABORATORIES  
AND UNIVERSITIES

**Demographic Transitions Chair, Economic Transitions:** Its role is to examine the opportunities that population ageing presents for our modern societies. Recommendations and innovative solutions are then proposed to structure and direct public debate towards an awareness of the potential of this phenomenon (Institut Louis Bachelier, 2019).

**Directorate Prospective Statistics Research from Cnav (Caisse Nationale d'Assurance Vieillesse):** The main missions of the research unit on ageing (URV) are to develop scientific knowledge of the social aspects of ageing through its research programme, its activities of animation and coordination of research and publication (Cnav, 2013).

**Ined's Ageing cluster:** The activities of the Ageing cluster are articulated with those of the Scientific Interest Group « Institute for the Longevity of Ageing» (supported by 9 organisations and managed by Ined), which aims to promote research in the human and social sciences (Ined, 2020).

**National Transfer Accounts:** They are based on an international methodology developed by a group of 200 researchers from 46 countries. The aim of the project is to create a common generational accounting method to measure public transfers, private transfers and asset allocations between ages and between generations. In France, a team of 13 economists is directed by the Paris School of Economics (PSE) and the National Institute of Demographic Studies (Ined).

**Research, Studies, Evaluation and Statistics Directorate (Drees):** The Solidarity Observation Sub-Directorate produces a statistical information system on pensions and studies in the field of old-age insurance (Drees, 2010).

○ RESEARCH NETWORKS

**International Economics of Longevity (EIDLL):** The EIDLL Network brings together 26 research centres and 4 affiliated institutions in the economics of ageing to contribute to the development of research and exchanges on the subject (EIDLL, 2020).

**Institute for the Longevity of Ageing (ILVV):** The Institute aims to implement structuring activities for the benefit of actors in the field, through four missions (to know, to make known, to animate, to share) (ILVV, 2020). These activities seek an interdisciplinary approach by linking the activities of other structures and scientific groups, by opening up to international research and by supporting young researchers.

**Pensions Observatory:** Its mission is to contribute to a better knowledge of pension systems in France and abroad, and to encourage research and among researchers, academics, teachers, students and experts in the field of pensions (Observatoire des retraites, 2017).

**National Platform for End-of-Life Research:** mentioned previously.

**Thematic Network 7 – Ageing and Life Course (RT7, French Sociological Association):** The aim of this network is to inform students, researchers and the public interested in the sociological analysis of old age and ageing.

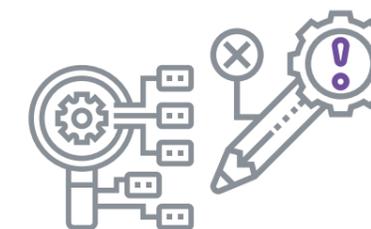
○ RESEARCH-RELATED ASSOCIATIONS  
AND FOUNDATIONS

**French Society for Accompaniment and Palliative Care (SFAP) :** The SFAP is a «learned society» that develops practices and knowledge in the fields of palliative medicine, end-of-life care and support (SFAP, 2014). It develops research and strengthens the quality of practices by setting up mechanisms for sharing, formalizing and transmitting experience.

**French Society of Geriatrics and Gerontology (SFGG):** Its aim is to study all problems relating to gerontology and geriatric medicine, i.e. human ageing and senescence, advanced age and longevity (SFGG, 2020). It also promotes research and work, regularly takes stock of the knowledge acquired in all the disciplines concerned and contributes to its valorisation.

**The Association France Alzheimer and the Fondation Médéric Alzheimer** as mentioned previously.

**The Federation of Private Non-Profit Hospitals & Personal Assistance Establishments (Fehap):** It advises its members in the areas of labour relations, human resources, health and social services and communication (Fehap, 2019). It informs its members on the evolution of legislation and regulations.



## MAIN ISSUES AND EXAMPLES OF APPLIED RESEARCH

According to the report Grand Âge Autonomie (Libaut, 2019), France does not invest enough in the prevention of loss of autonomy. Validated in 2018 by the WHO, research has shown that loss of autonomy is not a fatality. However, the prevention of loss of autonomy occupies a marginal and poorly identified place, and is therefore difficult to understand in policies for the elderly. Support for family caregivers remains unsatisfactory and the daily solidarity with a living environment does not succeed in breaking the isolation. It is estimated that 3.9 million family/informal carers are asking for better recognition, access to respite care, simplified procedures and better organisation of their professional and caring activities with financial support.

Maintaining a full-fledged place as a citizen for seniors highlights the problem of isolation but also the importance of social ties and a more inclusive society. Studies carried out by the National Observatory of the End of Life (ONFV) among 24 elderly people living in EHPAD and 35 relatives of EHPAD residents in 2013 show that elderly people feel useless and excluded from «real life» (ONFV, 2013).

The person as a subject of law is central to the research of the «Fundamental, social and patrimonial protection of the person» Axis of the IODE (Institut de l'Ouest : Droit et Europe) laboratory in Rennes (ILVV, 2019). From life to death, passing through all the stages of autonomy, commitment or dependence that form the high points for a human being: these are the themes addressed in the various projects in progress and the work carried out. For example, the care of the individual under social protection is the subject of ANR MaRiSa research. This study concerns all types of care, from the most common to the most specific, subject to financing combining compulsory and supplementary insurance. Taking into account the care related to polyopathologies of the elderly and the medical costs at the end of life, this research provides a very useful insight into the particularities of such expenditure.

Moreover, the lack of attractiveness of the professions linked to this public has an impact on the quality of care. At home or in institutions, managers have difficulty recruiting and retaining their staff because of difficult working conditions (lack of staff, poor organisation of

home services and institutions, poor use of professional knowledge, few career prospects) and because of the poor image that EHPAD currently convey. Respondents in the survey told their family that they would rather die tragically than in a retirement home (ONFV, 2013).

The care system is still complex and not very clear, despite a growing public effort and many innovative initiatives. Indeed, the current system generates too often breaks in care between the home, the institution and the hospital. The lack of coordination between the variety of care providers (home help, care assistant, nurse, doctor, social worker, physiotherapist, etc.) does not facilitate the management of several pathologies of an elderly person. Moreover, the benefits of financial care for the loss of autonomy of the elderly are not very facilitating. If the excess to be paid of the dependency is controlled at home, it remains important in an institution. These heterogeneous services are also reflected at the territorial level, which is often difficult to justify.

The care system is still complex and not very clear, despite a growing public effort and many innovative initiatives.

The EMOS (Economics and Management of Health Organisations) team at the Inserm «Bordeaux Population Health» centre brings together some fifteen teams working in public health in a wide variety of fields, including the epidemiology of ageing and dementia (ILVV, 2019). The team's work is applied to care and health pathways by favouring multidisciplinary approaches. In particular, they seek to assess the effects of digital and organizational innovations on these pathways, and more broadly the effects of public policies on health. The issue of care pathway coordination for dependent elderly people is addressed from different angles in several of the team's works. For example, EMOS is taking part in a research project on a controlled experiment

### INFORMATION RELAYS ON RESEARCH RESULTS

**Ageing and society (V&S, Network of young researchers in the humanities and social sciences group):** It aims to provide a platform for scientific exchange for doctoral and post-doctoral students in the humanities and social sciences whose research focuses on the theme of ageing (V&S, 2020).

**Ageing well - Professional spaces:** This website brings together pension funds and SPF (Public Health France) by offering analyses linked to studies and reports, tools for designing and deploying actions and resources through professional training (Pour bien vieillir, 2020).

**The CARE (Capacities, Assistance and Resources for Seniors) surveys,** carried out by the Research, Studies, Evaluation and Statistics Department (DREES) with the support of the National Solidarity Fund for Autonomy (CNSA), aim to gain a better understanding of the living conditions of seniors, their relationships with their families and friends, their difficulties in carrying out certain activities of daily life and the financial and human assistance they receive to overcome these difficulties. These surveys - which are mandatory - concern people aged 60 or over, regardless of their state of health and where they live, as well as the relatives who provide them with support.

The «households CARE» and « institution CARE » surveys have three main objectives: to monitor the evolution of dependency, to estimate the remainder related to dependency and to measure the involvement of the entourage with the elderly.

**Cochrane France:** Its mission is to support evidence-informed health care decision-making through systematic, accessible reviews and other syntheses of research evidence (Cochrane, 2020). Cochrane is for anyone interested in the application of reliable information to health decisions (doctor or nurse, patient, caregiver or helper, researcher or funder).

**ReperÂge – Digital Platform for Sharing Knowledge and Practices in Ageing:** It develops two axes, the first is volunteer involvement and the second one is citizen participation by seniors (ReperÂge, 2015). It is intended for professionals in the field of ageing, seniors' representatives, political and union representatives, as well as researchers and students interested in the topics developed.

Gérontopôle Auvergne-Rhône Alpes aims to support projects and studies concerning aging, specifically based on the methodology of the «Living Lab», living laboratory combining collaborative form and collective innovation.

**Transdisciplinary Institute for the Study of Ageing (Itev):** Itev represents a place for exchanges, project construction and partnerships that offers its expertise on ageing issues (Itev, 2020). It also promotes the creation of training courses on ageing and associated pathologies.

### THE GERONTOPÔLES

Several gerontopôles in France have been created at the instigation of the government in order to meet the challenges of the demographic transition. There are now 9 of them spread throughout France. The aim is to bring together all the partners concerned with the gerontology to encourage innovation, to experiment with solutions and to develop new medico-socio-economic activities. Their involvement in teaching, in interventional research, in project evaluation and in the organisation of conferences (scientific or general) contributes to the sharing of knowledge among all gerontology professionals (care professionals, help and support professionals at home, companies, associations, aging people themselves ...).

The gerontopoles are intended to be a support for the emergence and management of projects. Their objective is not to replace the operators in the field but to organize territorial synergies, to promote all the initiatives taken to support aging, to add strengths and to encourage the emergence of federative and cross-functional projects, at the interface of economic, political, scientific and social spheres, in line with public policies and needs of the field.

In terms of research, the gerontopôles establish relationships with university laboratories, research or technical centers and private companies. They support regional partners and members in the design of research projects related to the aging of people.

## ISSUES IN RESEARCH ON AGEING

to evaluate the use of telemedicine in EHPAD. The researchers are in charge of evaluating the influence in terms of organisation of the deployment of telemedicine in EHPADs. They participate in this experimentation in order to better understand the brakes and levers for the use of telemedicine in institutions. Another line of research concerns the impact of the interdepartmental disparity of medico-social supply policies on the use of professional assistance by dependent elderly people living at home.

Finally, the issue of pensions is also at the heart of French political debates. The pension system was introduced at the same time as social security, after the Second World War, in order to guarantee an income for older workers (Lossier, 2013). After the «baby-boom», more working people were contributing than receiving pensions.

Finally, the issue of pensions is also at the heart of French political debates.

However, life expectancy has increased and baby-boomers have become «granddaddy boomers». The number of working people will therefore decrease and the share of inactive people will increase. Benefits to support pensions are longer and more expensive. According to the Pensions Policy Council, the financing requirement of the pension system (including the old-age solidarity fund) will increase steadily by 0.7 to 1 point of GDP between 2011 and 2017, rising from 14 to 21.3 billion euros. In the coming years, according to different scenarios, the deficit will continue to increase by 0.9 to 1.1 points of GDP, i.e. from EUR 20.8 billion to EUR 24.9 billion.

In relation to retirement, the Laboratory of Economics and Management of Health Organizations (LEGOS) in Paris, which occupies a recognized place in the field of health economics, is conducting several important studies on the health-work interactions related to the transition to retirement (ILVV, 2018). It has been shown that, for low-skilled individuals, the 1993 pension reform had a negative effect on their health. A possible causal effect of the shift in retirement age on the probability of death, as well as the impact of the transition to retirement on care consumption and the impact of the pension reform on the health of those forced to remain in work is also studied.

## CHALLENGES FOR THE FUTURE

According to these different issues and building on the results of the research, France has many challenges to overcome (Libaut, 2019) :

### ***To take a new look at old age :***

- Give meaning to the elderly by reaffirming citizenship, dignity and the right to free choice of the elderly ;
- Helping family caregivers and fighting against the isolation of the elderly : for a model of integrated care and support that combines citizen and professional approaches for and with people.

### ***Put the person's autonomy at the heart of the policies :***

- Guarantee the free choice of the elderly person by building a new offer of support and care refocused on home ;
- Preventing the loss of autonomy in order to increase life expectancy without incapacity.
- Improve the living conditions of the elderly by upgrading the value of trades and professions, through a national plan for older people's jobs.

### ***Better support for the elderly :***

- Renovate services to simplify the life of the elderly and act on financial accessibility, guaranteeing free choice ;
- Ensure continuity of care for everyone and put an end to siloed responses (structuring the thematic content).
- Consider the national risk in its own right with a renewed territorial partnership :

### ***Recognize the loss of autonomy as a social protection risk in its own right ;***

- Increase the financial effort by ensuring fair financing of age-related loss of autonomy through national solidarity ;
- Steering the offer on the territories, as close as possible to the people, while better guaranteeing homogeneous and equitable responses.

***The issue of caregivers, whether they are family and friends or professionals, has become increasingly important in recent years.***



## REFERENCES

- > **Brutel, C. (2002).** La population de la France métropolitaine en 2050 : un vieillissement inéluctable. *Économie et statistique*, 355(1),57-71. Consulted on 15/01/2020 and available at the following address : <https://www.insee.fr/fr/statistiques/1375921?sommaire=1375935>
- > **Cnav (2013).** Recherche sur le vieillissement. Consulted on 19/01/2020, and available at the following address : <https://www.statistiques-recherches.cnav.fr/recherches-sur-le-vieillessement.html>
- > **CNSA (2020).** Projets de recherche. Consulted on 31/03/2020, and available at the following address : <https://www.cnsa.fr/recherche-et-innovation/deposer-un-projet/projets-de-recherche>
- > **Cochrane (2020).** Qui sommes-nous ? Consulted on 29/01/2020, and available at the following address : <https://france.cochrane.org/propos-0>
- > **Cohorte Constances (2020).** Vieillessement. Consulted on 24/01/2020, and available at the following address : <https://www.constances.fr/cohorte/vieillessement.php>
- > **CHU de Toulouse (2019).** INSPIRE : une étude inédite lancée par le CHU de Toulouse et ses partenaires. Consulted on 24/01/2020, and available at the following address : [https://www.chu-toulouse.fr/IMG/pdf/20190722\\_cp\\_chu\\_toulouse\\_inspire.pdf](https://www.chu-toulouse.fr/IMG/pdf/20190722_cp_chu_toulouse_inspire.pdf)
- > **Drees (2010).** Direction de la Recherche, des études, de l'évaluation et des statistiques. L'observation de la solidarité. P7. Consulted on 29/01/2020, and available at the following address : [https://drees.solidarites-sante.gouv.fr/IMG/pdf/Plaqueette\\_DREES\\_oct2010.pdf](https://drees.solidarites-sante.gouv.fr/IMG/pdf/Plaqueette_DREES_oct2010.pdf)
- > **Dufeu Schubert A. (2019).** Réussir la transition démographique et lutter contre l'âgisme. Consulted on 15/01/2020, and available at the following address : <https://www.vie-publique.fr/rapport/272421-reussir-la-transition-demographique-et-lutter-contre-lagisme>
- > **EIDLL (2020).** Economie Internationale de la Longévité. Consulted on 29/01/2020, and available at the following address : [https://drees.solidarites-sante.gouv.fr/IMG/pdf/Plaqueette\\_DREES\\_oct2010.pdf](https://drees.solidarites-sante.gouv.fr/IMG/pdf/Plaqueette_DREES_oct2010.pdf)
- > **Fehap (2019).** Nos missions et valeurs. Consulted on 28/02/2020, and available at the following address : [https://www.fehap.fr/jcms/la-federation/la-fehap/nos-5-missions-argo\\_51105](https://www.fehap.fr/jcms/la-federation/la-fehap/nos-5-missions-argo_51105)
- > **Fondation Médéric Alzheimer (2020).** 12 projets soutenus sur le rôle et la place des familles en EHPAD. Consulted on 31/03/2020, and available at the following address : <https://www.fondation-mederic-alzheimer.org/12-projets-soutenus-role-et-place-des-familles-ehpad>
- > **France Alzheimer (2020).** La recherche scientifique. Consulted on 24/01/2020, and available at the following address : <https://www.francealzheimer.org/la-recherche-scientifique/>
- > **Gerontopole of Pays de la Loire (2020).** Consulted on 24/04/2020, and available at the following address : <https://www.gerontopole-paysdelaloire.fr/nos-services/recherche>
- > **ILVV (2018).** Le financement de l'aide à l'autonomie : comment adapter notre système de protection sociale au défi du vieillissement ? Lettre d'information de l'institut de la longévité, des vieillesse et du vieillissement. Consulted on 24/04/2020, and available at the following address: [https://www.ined.fr/fichier/rte/65/Lettre\\_dinformation\\_13\\_ILVV\\_juin\\_2018.pdf](https://www.ined.fr/fichier/rte/65/Lettre_dinformation_13_ILVV_juin_2018.pdf)
- > **ILVV (2019).** Fin de vie, loi française et philosophie. Lettre d'information de l'institut de la longévité, des vieillesse et du vieillissement. Consulted on 24/04/2020, and available at the following address: [https://www.ined.fr/fichier/rte/65/Lettre\\_dinformation\\_15\\_ILVV\\_janvier\\_2019.pdf](https://www.ined.fr/fichier/rte/65/Lettre_dinformation_15_ILVV_janvier_2019.pdf)
- > **ILVV (2019).** Vieillir en institution au XIXème siècle : une spécificité française. Lettre d'information de l'institut de la longévité, des vieillesse et du vieillissement. Consulted on 24/04/2020, and available at the following address: [https://www.ined.fr/fichier/rte/39/Lettre\\_dinformation\\_17\\_ILVV\\_novembre\\_2019.pdf](https://www.ined.fr/fichier/rte/39/Lettre_dinformation_17_ILVV_novembre_2019.pdf)
- > **ILLV (2020).** Les missions. Consulted on 20/20/2020 and available at the following address : <https://ilvv.site.ined.fr/fr/accueil/missions/#r27422>
- > **INca (2020).** Appels à projets en cours. Consulted on 31/03/2020 and available at the following address : [https://www.e-cancer.fr/Institut-national-du-cancer/Appels-a-projets/Appels-a-projets-en-cours/\(thematique\)/P%C3%B4le%20sant%C3%A9%20publique%20et%20soins](https://www.e-cancer.fr/Institut-national-du-cancer/Appels-a-projets/Appels-a-projets-en-cours/(thematique)/P%C3%B4le%20sant%C3%A9%20publique%20et%20soins)
- > **Ined (2020).** Comptes de Transferts Nationaux. Le projet. Consulted on 29/01/2020, and available at the following address : <https://ctn.site.ined.fr/fr/>
- > **Ined (2020).** Pôle Vieillesse et Vieillessements. Consulted on 28/01/2020, and available at the following address : <https://pole-vieillesse-et-vieillessements.site.ined.fr/>
- > **Insee (2019).** Espérance de vie en bonne santé AVBS / Espérance de vie sans incapacité / EVSI / EVSI / EVBS. Consulted on 04/02/2020, and available at the following address : <https://www.insee.fr/fr/metadonnees/definition/c2017>
- > **Institut Louis Bachelier (2019).** Transitions démographiques, Transitions Economiques. Projet scientifique. Consulted on 29/01/2020, and available at the following address : <https://www.institutlouisbachelier.org/programme/transitions-demographiques-transitions-economiques/>
- > **Institut Pasteur (2019).** Vieillessement et longévité. Consulted on 28/01/2020, and available at the following address : [https://research.pasteur.fr/fr/program\\_project/ageing-longevity/](https://research.pasteur.fr/fr/program_project/ageing-longevity/)
- > **Itev (2020).** Qui sommes-nous ? Consulted on 29/01/2020, and available at the following address : <https://itev.ephe.fr/qui-sommes-nous/>
- > **La Fondation de France (2020).** Vivre ses choix, prendre des risques jusqu'à la fin de sa vie. Consulted on 31/03/2020, and available at the following address : <https://www.fondationdefrance.org/fr/vivre-ses-choix-prendre-des-risques-jusqua-la-fin-de-sa-vie>
- > **Libaut, C. (2019).** Concertation : Grand âge et autonomie. Consulted on 15/01/2020, and available at the following address : [https://solidarites-sante.gouv.fr/IMG/pdf/rapport\\_grand\\_age\\_autonomie.pdf](https://solidarites-sante.gouv.fr/IMG/pdf/rapport_grand_age_autonomie.pdf)
- > **Losser, M. (2013).** Retraites : problématiques et solutions envisagées pour notre système par répartition. Consulted on 24/01/2020, and available at the following address : [http://archives.lesechos.fr/archives/cercle/2013/06/04/cercle\\_73762.htm](http://archives.lesechos.fr/archives/cercle/2013/06/04/cercle_73762.htm)
- > **WHO (2015).** Le nombre de personnes de plus de 60 ans devrait doubler d'ici 2050. Consulted on 24/01/2020, and available at the following address : <https://www.who.int/mediacentre/news/releases/2015/older-persons-day/fr/>
- > **ONFV (2013).** Fin de vie des personnes âgées. Sept parcours ordinaires pour mieux comprendre les enjeux de la fin de vie en France. Consulted on 29/01/2020, and available at the following address : <http://affairesjuridiques.aphp.fr/textes/rapport-annuel-2013-de-lobservatoire-national-de-la-fin-de-vie-onfv-janvier-2014/>
- > **Pensions Observatory (2017).** Qu'est-ce que l'Observatoire des Retraites ? Consulted on 29/01/2020, and available at the following address : <https://www.observatoire-retraites.org/observatoire/quest-ce-que-lobservatoire-des-retraites/>
- > **Plateforme nationale pour la recherche sur la fin de vie (2019).** Premier panorama de la recherche dans le domaine de la fin de vie en France. Consulted on 15/01/2020, and available at the following address : <https://www.plateforme-recherche-findevie.fr/panorama-de-la-recherche>
- > **Plateforme nationale pour la recherche sur la fin de vie (2020).** Présentation. Consulted on 29/01/2020, and available at the following address : <https://www.plateforme-recherche-findevie.fr/presentation>
- > **Pour bien vieillir (2020).** Les caisses de retraite et Santé Publique France vous aident à bien vivre votre âge. Consulted on 28/01/2020, and available at the following address : <http://www.pourbienvieillir.fr/espace-professionnels>
- > **ReperÂge (2015).** Un outil repère pour penser et agir avec le vieillissement. Consulted on 20/01/2020, and available at the following address : <https://reperages.reiactis.com/>
- > **RT7 (2020).** Le blog du réseau « vieillesse, vieillissement, parcours de vie ». Consulted on 20/01/2020, and available at the following address : <https://rt7.hypotheses.org/>
- > **SFAP (2014).** Présentation de la SFAP. Consulted on 20/01/2020 and available at the following address : <http://www.sfap.org/rubrique/presentation-de-la-sfap>
- > **SFGG (2020).** Présentation. Consulted on 29/01/2020, and available at the following address : <https://sfgg.org/la-sfgg/qui-sommes-nous/presentation/>
- > **Tuchman, M., Ogg, J., Trouvé, H., & Séguy, M. (2016).** Cartographie de la recherche en Sciences Humaines et Sociale dans le champ du vieillissement. Les Cahiers de la Cnav. Consulted on 20/01/2020, and available at the following address : <https://www.statistiques-recherches.cnav.fr/images/publications/cahier-cnav/Cahiers-Cnav-09.pdf>
- > **Université Paris Dauphine (2012).** SHARE – Enquête sur la santé, le vieillissement et la retraite en Europe. Consulted on 20/01/2020, and available at the following address : <https://share.dauphine.fr/>
- > **V&S (2020).** A propos. Consulted on 28/01/2020, and available at the following address : <https://vieillessementsetsociete.wordpress.com/>



*Véronique RÉGNIER*  
*Coordinatrice PRESAGE*  
veronique.regnier@univ-st-etienne.fr  
(+33) 06 78 12 80 11  
[www.univ-st-etienne.fr](http://www.univ-st-etienne.fr)