

Population Ageing in Algeria and the Maghreb Challenges to the Sustainability of Pension and Healthcare Systems

الشيخوخة السكانية في الجزائر والمغرب العربي
تحديات استدامة أنظمة التقاعد والرعاية الصحية

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Abstract:

Algeria and other Maghreb countries are experiencing rapid population ageing due to falling fertility rates and rising life expectancy. This demographic shift is putting increasing pressure on pay-as-you-go pension systems and driving higher demand for health care, especially for chronic age-related diseases. Using a comparative, descriptive-analytical approach based on demographic, economic, and health indicators, the study examines how ageing affects the sustainability of pensions and health services and draws on international reform experiences. The findings indicate that ageing will worsen pension financing gaps and increase health-care costs in the medium and long term. To ensure sustainability, the study recommends multidimensional reforms, including adjusting the retirement age, strengthening retirement savings, expanding the contributor base, and improving preventive health policies to reduce chronic disease burdens and enhance the efficiency of health spending.

Keywords: Population Ageing, Pension Systems, Healthcare, Chronic Diseases, Maghreb.

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ملخص:

تشهد الجزائر ودول المغرب العربي تسارعا في الشيخوخة السكانية بسبب تراجع الخصوبة وارتفاع متوسط العمر المتوقع، ما يفرض ضغوطا متزايدة على أنظمة التقاعد القائمة على التضامن بين الأجيال ويرفع الطلب على الرعاية الصحية، خاصة للأمراض المزمنة المرتبطة بالسن. تعتمد الدراسة مقارنة مقارنة ومنهجيا وصفيا تحليليا بالاستناد إلى مؤشرات ديموغرافية واقتصادية وصحية وبيانات رسمية، مع الاستفادة من التجارب الدولية. وتخلص النتائج إلى أن الشيخوخة ستفاقم اختلالات تمويل التقاعد وتزيد كلفة الإنفاق الصحي على المدى المتوسط والطويل، مما يستدعي إصلاحات متعددة الأبعاد تشمل مراجعة سن التقاعد، تعزيز الادخار التقاعدي، توسيع قاعدة المساهمين، وتطوير سياسات وقائية وتحسين كفاءة الإنفاق الصحي ضمن تكامل السياسات الديموغرافية والاقتصادية والاجتماعية.

الكلمات المفتاحية: الشيخوخة السكانية، أنظمة التقاعد، الرعاية الصحية، الأمراض المزمنة، المغرب العربي.

Introduction

Algeria, as a prominent country in the Maghreb, is undergoing rapid demographic changes that signal a new phase of population and social challenges, most notably the rising proportion of older adults. This transformation occurs within the broader context of the region's demographic transition since the 1970s, characterized by a substantial decline in fertility rates alongside a significant increase in life expectancy at birth. These improvements have been facilitated by expanded healthcare coverage, enhanced living standards, and the development of preventive and therapeutic programmes. These demographic dynamics have gradually reshaped the age structure of the population, reflecting a shift from a predominantly youthful profile to an ageing one. Algeria has experienced particularly pronounced changes: fertility rates have dropped from levels exceeding seven children per woman in the 1970s to figures approaching replacement level in recent decades, coinciding with a continuous rise in average life expectancy. Together, these dual transitions have restructured the population pyramid, marking the consolidation of population ageing — a trend that is also observable, to varying degrees, in other Maghreb countries, notably Morocco and Tunisia, with variations in pace and intensity shaped by each country's specific demographic and economic characteristics.

While these demographic changes reflect positive progress in health and social indicators, as well as the effectiveness of public policies in

reducing mortality and enhancing well-being, they concurrently pose substantial structural challenges, particularly for social protection systems founded on intergenerational solidarity. Foremost among these are pension schemes and healthcare systems. As the contributor base contracts and the beneficiary population expands, these systems are subjected to increasing financial and institutional pressures, jeopardizing their fiscal balance and long-term sustainability.

This study addresses the key research issue that population ageing in Algeria and the Maghreb countries is no longer a deferred demographic phenomenon, but an emerging reality gradually shaping economic and social policymaking. Within pension systems primarily based on the pay-as-you-go principle, the growing number of retirees relative to the working population poses significant challenges to fiscal balance and long-term sustainability. Accordingly, this study explores two central questions: How does accelerated population ageing in Algeria and the Maghreb affect the sustainability of pension and healthcare systems? And to what extent can these systems, in their current forms, adapt to ongoing demographic transformations?

The study aims to achieve a set of interrelated scientific objectives. These include analysing the dynamics of population ageing in Algeria, highlighting similarities and differences with other Maghreb countries in terms of the pace of demographic transition and age structure, assessing the impact of demographic changes on Algeria's pay-as-you-go pension system, examining the implications of population ageing for the healthcare system (particularly in the context of rising demand for chronic disease management and long-term health services), and drawing lessons from comparative Maghreb experiences (especially regarding implemented or proposed reforms to address the challenges of population ageing).

This study is particularly relevant in the Algerian and Maghrebi context, where demographic transition intersects with various economic and structural challenges, including high unemployment rates, a large informal sector, and volatility in public financial resources—particularly in rentier economies partially dependent on hydrocarbon revenues. Collectively, these factors heighten the vulnerability of pension and healthcare systems, limiting their capacity to absorb concurrent demographic and economic shocks.

Methodologically, the study adopts a descriptive-analytical approach to examine the evolution of key demographic indicators in Algeria and selected Maghreb countries—such as the proportion of older adults, fertility rates, life expectancy at birth, and age-specific dependency ratios—while also assessing the financial and institutional aspects of pension and healthcare systems based on official statistics

and national and regional reports. A comparative Maghreb perspective highlights both national specificities and shared trends, complemented by a critical review of recent literature and selected case studies, aiming to explore realistic reform scenarios adaptable to the demographic and economic particularities of the region.

1. Theoretical Framework of Population Ageing, Pension Systems, and Healthcare Systems

1.1 Definition of population ageing and its general impacts

Population ageing refers to the gradual increase in the proportion of older adults within a population. This leads to fundamental changes in the age structure of society. It is characterised by a continuous rise in the proportion of individuals who have reached or exceeded retirement age compared to other age groups. This is primarily due to declining fertility rates and improved survival rates resulting from advances in healthcare and increased life expectancy (Calot & Sardon, 1999).

Population ageing is one of the most significant challenges facing contemporary societies due to its wide-ranging economic, social and political implications.

- Economically, it leads to a higher proportion of non-active dependants, increasing financial pressure on pension and healthcare systems while reducing the effective labour force and potentially affecting economic growth and productivity negatively (Chesnais, 2011).
- Socially, ageing necessitates re-evaluating healthcare and social systems to meet the needs of older adults, including long-term care and chronic disease management, as well as influencing family structures and living arrangements (World Health Organization, 2015).
- Politically, the growing proportion of older adults presents challenges for the formulation of public policy, requiring a balance to be struck between addressing the needs of this demographic group and investing resources in youth and broader development goals (United Nations, 2019). Population ageing therefore constitutes a profound structural transformation that requires comprehensive strategic planning to ensure the sustainability of economic and social systems amid these demographic changes (Pison, 2008).

1.2 Pension and Healthcare Systems: An Overview and International Perspectives

Pension and healthcare systems constitute key pillars of modern social protection frameworks, as they aim to ensure income security and health protection for individuals, particularly older adults who

experience income loss after retirement and rising healthcare needs associated with population ageing.

1.2.1 Pension Systems

Pension systems are institutional arrangements that regulate the transfer of income from the working life cycle to retirement through the provision of pension benefits to eligible individuals. Broadly, these systems can be classified into two main types:

- Pay-as-you-go (PAYG) systems: Retirement benefits are financed through the contributions of the current active workforce.
- Funded systems: Contributions are accumulated in individual or collective accounts and invested over time to secure future retirement income.

Sweden's pension system, for instance, is based on a mixed model that combines pay-as-you-go and funded components, which has contributed to a relatively high degree of financial sustainability despite accelerated population ageing (Palme, 2012). By contrast, demographic shifts and the growing proportion of retirees have generated significant challenges for the United States' Social Security system, leading to various reform proposals, including increasing the retirement age and strengthening financing mechanisms (Munnell et al., 2015).

1.2.2 Healthcare Systems

are designed to provide comprehensive medical services encompassing prevention, treatment, and long-term care. With advancing age, the demand for these services rises substantially, particularly due to the increasing prevalence of chronic diseases such as diabetes, cardiovascular diseases, and dementia.

Japan, for example, one of the most rapidly ageing societies globally, has developed a centralized healthcare system that includes universal health insurance and specialized support programmes for older adults, with a strong emphasis on home-based care to reduce hospital burden (Campbell & Ikegami, 2000). Similarly, Germany operates a compulsory health insurance system that ensures universal coverage, complemented by advanced programmes in preventive care and rehabilitation for older adults (Busse et al., 2017)

Despite differences between countries, pension and healthcare systems are increasingly under pressure due to a rising proportion of older adults and higher dependency ratios. Key challenges include limited financing, rising healthcare expenditure, and a shrinking pool of eligible workers (OECD, 2020). It has therefore become essential to implement financial and strategic reforms, improve resource management, and develop integrated healthcare programmes emphasizing prevention and community-based care, in order to ensure

the quality of life of older adults and the sustainability of social systems (WHO, 2015).

2. Impacts of Population Ageing on Pension Systems in Algeria: Current Situation, Challenges, and Comparative International Experiences

2.1 Changes in the Ratio of Pensioners to Active Workers in Algeria

Algeria is experiencing significant demographic shifts that are directly impacting the national pension system. According to data from the Ministry of Labour, Employment and Social Security (2023), the ratio of retirees to active contributors has increased markedly, rising from around 15% at the beginning of the millennium to approximately 30% in 2023. Projections suggest that this ratio could exceed 40% by 2050. This growing imbalance between beneficiaries and contributor's places substantial pressure on pension funds' ability to maintain fiscal balance and ensure the system's long-term sustainability.

2.1.1 Demographic Factors Driving the Change

This trend is primarily driven by several key demographic factors:

- Declining fertility rates reduce the inflow of new workers into the labour market, limiting the system's capacity to finance future pensions
- Increasing life expectancy extends the period during which retirees receive benefits, thereby raising long-term expenditures.
- Expansion of the elderly population broadens the beneficiary base of social security systems, further increasing the financial burden on pension funds

Together, these factors contribute to a continuous rise in the dependency ratio, underscoring the urgent need for reforms to ensure the financial sustainability of the pension system.

Table N° 01: Key Demographic Indicators in Algeria (2000–2025)

Year	Fertility Rate	Life Expectancy (years)	% Of Population ≥60 years	% Of Population ≥65 years
2000	2.4	72.5	8.0	5.0
2005	2.5	74.6	8.5	5.4
2010	2.87	76.3	9.0	5.9
2015	3.1	71.1	8.71	6.3
2020	2.9	75.9	9.5	5.89
2025	2.67	77.85	11.0	6.60

Sources: United Nations (2019, 2022); World Bank (2023); FRED (2024); UNFPA Algeria (2015); Demographic Ageing Studies in Algeria (2019, 2023)

The above table shows that Algeria is experiencing a gradual demographic shift towards an ageing population, as evidenced by four interconnected trends. Firstly, fertility rates have shifted, from an average of 2.4 children per woman in 2000 to 2.67 in 2025, with some short-term fluctuations. This reflects a general long-term decline in fertility. Secondly, life expectancy increased significantly by around six years during the first quarter of the twenty-first century, rising from 70.6 to 76.7 years, reflecting improvements in health and social conditions. Thirdly, the proportion of people aged 65 and over has gradually increased from around 5.0% to approximately 6.6% between 2000 and 2025. This indicates the beginning of a structural transition in the age composition of the population, although these levels remain below those seen in developed countries. Finally, the relatively faster growth of the population aged 60 and over — which exceeded 10% of the total population during the period 2023–2025 — reflects an acceleration in the pace of ageing prior to reaching advanced ageing stages. This confirms that Algeria has entered an early phase of demographic transition related to ageing.

2.2 Financial and Structural Challenges in the Algerian Pension System

The Algerian pension system is facing increasingly severe structural financial imbalances, as evidenced by a chronic pension fund deficit. According to official reports from the National Pension Fund (2022), the current financial shortfall amounts to around 10% of the social security budget. Projections suggest that this figure will increase if comprehensive reforms are not implemented.

2.2.1 Key financial pressures

Rising pension-to-revenue ratio, Due to the growing number of retirees relative to a declining workforce, pension expenditure is increasingly exceeding contributions.

Increasing ageing-related healthcare costs: older age groups require long-term care, which places additional financial strain on the system.

Limited structural efficiency, the system's heavy reliance on the pay-as-you-go model constrains its ability to withstand future pressures.

Table N° 02: Key Indicators of Ageing's Impact on Fiscal Balance (2000–2025)

Year	Contributors-to-Retirees Ratio	Healthcare Expenditure (% of GDP)	Notes on Fiscal Balance
2000	~4:1	~5.2	Strong reliance on the pay-as-you-go system
2005	~4:1	~5.4	Early signs of financial pressure
2010	~3.5:1	~5.5	Rising number of retirees
2015	~3:1	~5.4	Gradual pension fund deficit
2020	~2.8:1	~5.5	Insufficient financing relative to ageing needs
2022	~2.3:1	~5.5	Growing demographic pressures
2024	~2.2:1	~5.5	Declining contributors relative to retirees
2025	~2.1:1	~5.5	Continued deterioration of fiscal balance

Sources: (Boulahbal, 2021; Chikhi & Aït Saada, 2022; WHO, 2022; World Bank, 2023)

Table 2 clearly shows the deterioration in the financial balance of the Algerian pension system between 2000 and 2025. The ratio of contributors to retirees shows a continuous downward trend, falling from around 4:1 at the beginning of the millennium to approximately 2.1:1 by 2025. This decline is a direct reflection of the demographic transition characterised by falling fertility rates and rising life expectancy, as well as an expanding base of pension beneficiaries.

Meanwhile, although healthcare expenditure as a percentage of GDP appears stable at around 5–6%, this masks mounting pressure driven by the growing demand for healthcare services related to ageing and chronic diseases. Analysis of the financial balance indicates that the pay-as-you-go pension system is becoming increasingly fragile as the number of contributors shrinks while the number of retirees grows. This imbalance has led to a growing structural deficit, necessitating financial interventions from the general budget.

2.3 International Experiences and Lessons for Algeria

Several countries, both within and beyond the Maghreb region, provide valuable examples that Algeria can draw upon to address the challenges of population ageing.

- Tunisia implemented reforms, including raising the retirement age from 60 to 62 and increasing employee contributions. These measures temporarily improved fiscal balance, alongside diversification of funding sources and enhanced management of pension fund investments (World Bank, 2020).
- Turkey adopted measures to raise the retirement age and strengthen private pension savings programmes, reducing financial pressure on the public system and promoting individual savings (ILO, 2019).
- Germany operates a multi-pillar system combining statutory pensions, private insurance, and individual savings. Incentives for private savings enhance sustainability and reduce reliance on public pensions (Busse et al., 2017).

These examples illustrate that addressing the challenges of an ageing population requires multidimensional strategies, including raising the retirement age, promoting individual and private savings, and improving financial resource management to sustain pension systems and reduce pressure on public budgets.

3. The Impact of Population Ageing on Healthcare in Algeria: Current Situation and International Comparisons

3.1 Rising Demand for Healthcare Services for Older Adults

As the population ages, the demand for specialized healthcare services for older adults is increasing. This age group often faces multiple, complex health issues. Studies indicate that individuals aged 60 and over consume a disproportionately large share of healthcare resources compared to other age groups, due to a higher prevalence of chronic diseases and the need for services such as palliative care, long-term care, and rehabilitation (World Health Organization, 2015).

This growing demand necessitates expanding hospital capacity, establishing dedicated care units for older adults, and providing medical

personnel specializing in geriatric medicine. In Algeria, the public healthcare system faces significant challenges in delivering these services due to the increasing number of older adults. According to reports from the Algerian Ministry of Health (2022), the number of people receiving ageing-related healthcare services has increased by over 25% in the past decade, exerting mounting pressure on healthcare facilities.

3.2 Chronic Diseases and Their Impact on Healthcare Costs

Chronic diseases pose the greatest health challenges for older adults, including cardiovascular diseases, diabetes, cancer, chronic respiratory conditions, and neurological disorders. These conditions lead to substantially higher healthcare service utilization, including frequent medical visits, costly medications, and specialized treatments (Bloom et al., 2015).

Studies indicate that the treatment of chronic diseases accounts for a significant proportion of global healthcare expenditure, exceeding 70% of healthcare budgets in many developed countries (OECD, 2019). In Algeria, statistics show that over 60% of individuals aged 60 and above have at least one chronic condition (Algerian Ministry of Health, 2022). This situation increases the financial burden on the healthcare system and underscores the need for effective chronic disease management strategies to contain costs and enhance quality of life.

3.3 Financing and Organisational Challenges

Providing healthcare services to older adults poses complex challenges, especially in countries with rapidly ageing populations. Effective coverage requires sustainable financial resources to cover the costs of treatment and long-term care, as well as the provision of preventive services and rehabilitation (Kinsella & He, 2009).

In Algeria, for instance, the healthcare sector is heavily dependent on government funding and social security, while supplementary and private insurance schemes remain underdeveloped (World Bank, 2021). This represents a major obstacle to delivering integrated, sustainable services for older adults.

From an organisational perspective, the sector requires structural reforms to provide integrated, patient-centred care, with enhanced coordination between medical and social services (WHO, 2018). This also involves developing human resources, improving resource management, strengthening infrastructure, and adopting digital technologies to improve accessibility and service quality.

4. International Comparison of Ageing and Healthcare Demand

4.1 Proportion of Older Adults and Its Impact on Healthcare Demand

Table N° 03: Proportion of the Elderly Population (Aged 60 and above) and Its Impact on Healthcare Service Demand (A Comparative Analysis of Algeria, Tunisia, France, and Japan)

Country	Population Aged ≥60 (%)	Increase in Demand for Healthcare Services (%)	Average Healthcare Expenditure per Capita (USD)	Notes
Algeria	12.5 (2023)	+25% over the past decade	350	Growing pressure on hospitals and services for older adults
Tunisia	15.2 (2023)	+30% over the past decade	820	Accelerating ageing, pressure on public hospitals, and shortage of long-term care
France	26.8 (2023)	+45% over the past decade	4000	Advanced healthcare system with comprehensive coverage for older adults
Japan	36.5 (2023)	+60% over the past decade	4500	Leading in long-term care programs and telemedicine technologies

Sources: UN DESA (2023); WHO (2022); World Bank (2023)

The table clearly shows an increase in the proportion of the population aged 60 and over across the four countries under comparison, highlighting a marked disparity between developing North African countries—namely Algeria and Tunisia—and more advanced economies such as France and Japan. Tunisia exhibits a relatively higher proportion of elderly population than Algeria, reflecting its progression into a more advanced stage of demographic transition. This shift has been accompanied by rising demand for healthcare services,

although to a lesser extent than in France and Japan, owing to differences in levels of development and the absorptive capacity of healthcare systems.

Moreover, average health expenditure per capita reveals a pronounced disparity among the countries. France and Japan allocate substantially higher levels of healthcare spending, particularly for elderly care and long-term services. By contrast, the relatively low levels observed in Algeria and Tunisia reflect constrained financial resources and limited investment in specialised geriatric care. This disparity underscores the urgent need for North African countries to adopt proactive health policies and develop targeted elderly care programmes, drawing on leading international experiences in active ageing and health technologies.

4.2 Chronic Diseases and Healthcare Expenditure

Table 4. Proportion of Older Adults with Chronic Diseases and Their Impact on Healthcare Expenditure and Challenges in Algeria, Tunisia, France, and Japan

Country	% of Older Adults with Chronic Diseases	Share of Healthcare Budget Spent on Chronic Diseases	Key Challenges
Algeria	60%	55%	Weak supplementary insurance, limited awareness programs
Tunisia	62%	52%	High treatment costs, limited home care services
France	70%	75%	Expensive medications, development of integrated social care
Japan	80%	80%	Heavy financial burden on health insurance, rehabilitation programs

Sources: (WHO, 2022; World Bank, 2023; Ministries of Health in Algeria and Tunisia, 2021–2023; Ministry of Solidarity and Health, France, 2022; MHLW, 2023; Global Burden of Disease Study, 2021)

The table illustrates the growing health and financial burden of chronic diseases among older adults across different countries. Algeria and Tunisia exhibit relatively high prevalence rates of chronic

conditions among the elderly when compared to their healthcare financing capacities, placing increasing pressure on health budgets and underscoring the need to strengthen complementary coverage mechanisms and adopt more proactive prevention strategies.

In contrast, France and Japan record higher levels of both prevalence and healthcare expenditure; however, these are supported by more advanced and resilient healthcare systems. In these contexts, the main challenge lies in controlling the rising costs of long-term care and expensive medications, while ensuring the social inclusion and well-being of older adults.

Overall, this comparison demonstrates that population ageing extends beyond heightened healthcare demand to encompass deeper structural challenges related to the sustainability of financing, the efficiency of healthcare systems, and the imperative to shift from a predominantly curative approach toward prevention-oriented and integrated care models, particularly in developing countries.

Table 05. Prevalence of Chronic Diseases by Age Group ≥60

Chronic Disease	Years				Brief Notes
	Algeria (%)	Tunisia (%)	France (%)	Japan (%)	
Cardiovascular Diseases	30–35	32–36	40–45	35–40	Major causes of mortality and chronic morbidity
Diabetes	20–25	25–30	18–22	15–20	Incidence increases with age
Hypertension	25–30	30–35	35–40	30–35	Key risk factor for heart and cerebrovascular diseases
Chronic Respiratory Diseases	10–12	9–11	12–15	10–12	Includes conditions such as chronic obstructive pulmonary disease (COPD)

Cancer	5–7	6–8	8–10	6–8	Incidence rises with advancing age
Neurological Disorders (e.g., Alzheimer's)	5–8	6–9	7–10	7–12	Major cause of disability among older adults

Sources : WHO (2022); Ministère de la Santé, Tunisie (2023); Ministère des Solidarités et de la Santé, France (2022); MHLW, Japan (2023); Global Burden of Disease Study (2021)

The table illustrates the variation in the prevalence of chronic diseases among older adults in the four countries. Tunisia has higher rates of cardiovascular disease, diabetes, and hypertension compared to Algeria, reflecting the growing burden of chronic conditions in the Maghreb region. While France and Japan have higher prevalence rates for certain diseases, their advanced healthcare systems provide better support for managing these conditions, thereby mitigating their negative impact. The table highlights the need for North African countries to strengthen prevention and continuous care, particularly in view of the expected increase in the elderly population. Targeted health strategies are required to reduce complications from chronic diseases and improve quality of life for older adults.

Conclusion

Population ageing is an increasingly significant demographic, social, and economic challenge worldwide, particularly in countries undergoing rapid demographic change, including those in the Arab world such as Algeria. This study shows that changes in the age structure of populations and the growing proportion of older adults place mounting pressure on pension and healthcare systems. Addressing this requires a multidimensional response that goes beyond economic measures and encompasses comprehensive social policies and integrated strategic approaches.

Key findings indicate a rising dependency ratio between retirees and active workers in Algeria, posing a threat to the sustainability of national pension funds and generating a growing financial deficit unless effective structural reforms are implemented. The increasing share of older adults also drives higher demand for healthcare services, particularly for chronic diseases, placing a substantial financial burden on healthcare resources. International experience, notably in Tunisia and Turkey, demonstrates that reforms involving higher retirement ages, promotion of individual savings, and implementation of funded

schemes can improve fiscal balance and strengthen the resilience of pension systems amid population ageing.

In light of these findings, a set of strategic recommendations can be proposed for policymakers to develop sustainable and effective strategies to address the challenges of population ageing. These include:

- Restructuring pension systems: It is crucial to implement gradual reforms, including raising the retirement age in line with life expectancy, introducing flexible retirement mechanisms that allow extended working periods, and providing alternatives that promote individual savings and supplementary pension funding, drawing on successful international experiences.
- Strengthening preventive and integrated healthcare systems: Resources should be directed towards health prevention programmes targeting chronic diseases and age-related risks. Additionally, healthcare systems should focus on long-term care and ensure the effective management of chronic conditions. Investment in digital technologies and telemedicine would expand service coverage and reduce costs.
- Establishing social policies to support older adults: This involves enhancing social protection programmes that provide financial, social, and psychological support; promoting employment policies that integrate older adults into the labour market; and developing their skills to ensure their active participation in economic development.
- Adopting a comprehensive, multi-sectoral vision: Addressing the challenges of population ageing requires an integrated approach that fosters collaboration between the ministries of labour, health, social affairs, and finance. It is also essential to involve the private sector and civil society to ensure coordinated policies and achieve the desired objectives.
- Strengthening demographic and economic research: This involves supporting continuous studies and research that provide accurate data and analysis to anticipate future challenges, assess the effectiveness of existing policies, and allow strategies to be adjusted based on scientific evidence.

In conclusion, the demographic challenge of an ageing population is a true test of a country's ability to ensure social justice and financial sustainability. This requires strategic steps based on an accurate understanding of the national context and the requirements of sustainable development. Only through collaborative efforts and a commitment to comprehensive, balanced policies can we secure a safe and healthy future for all age groups.

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